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Social Pension and Development: The Future Prospects of Universal Social Pension on Intergenerational Relations and Rural Development in Tanzania

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Abstract: Tanzania is experiencing demographic shifts with a rising population of older people, majority of whom live in rural areas, facing many social and economic challenges. In recent decades, international social policy has applauded social pensions as a powerful policy tool in fighting against impoverishment among older generations. This article uses examples of family solidarity in rural areas of Tanzania to speculate how the universal social pension will benefit family relations and foster rural development. The study is based on the analysis of 2012 data from a descriptive cross-sectional study, involving older people aged 60+ (n=968) in two rural districts in the Mwanza region of Tanzania, to determine the potential effects of universal social pension on both family solidarity and the development of rural areas. The analysis also incorporates results from SAUT Survey 2019 data (n=393) conducted in three regions of Tanzania: Arusha, Mtwara, and Mwanza. The results indicate that the family structure in which older people live has strong intergenerational family solidarity. Universal social pension income, which is associated with social and economic development, is significant in reducing poverty and inequalities, promoting health, nutrition, agriculture, and local markets that improve rural development.

Keywords: Ageing, social pension, family solidarity, rural development, Tanzania.

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1. Introduction

The ageing of the population is an evident global trend (WB, 2018). It is estimated that by 2050, the number of older people aged 65 and older globally will exceed that of young people aged between 15 and 24 years (UNDESA 2019). Ageing is also gaining ground in Tanzania, where the proportion of older people is increasing in relation to the total population. The proportion of the population aged sixty years and older accounted for 5.6% in 2012 and 5.7% in the 2022 Tanzania Population and Housing Census, respectively. In the next twenty-six years, the proportion of older people in Tanzania is expected to grow to 7 percent in 2050, and triple to 17.6% by 2100 (UNDESA, 2015; *World Population Prospects, 2015 Revision; URT, 2022*).

The population of older people in Tanzania is aging in the midst of complex social and economic problems (Spitzer et al., 2009). This is particularly true in rural areas where the majority of older people live, facing challenges of income security, generalized poverty, dwindling traditional support systems, health, and social exclusion. In spite of these challenges, many older people in Tanzania remain economically active because of family obligations such as households' breadwinners and social care provision especially with the care of orphaned grandchildren (HAI, 2002; HAI & Cordaid, 2011; Pastory, 2013).

The formal social security schemes in Tanzania are biased towards people working in the formal sector (HAI, 2016). Therefore, older people, the majority of whom belong to the informal sector, are not accommodated in formal social security schemes. Typical of all African traditions and customs, intergenerational family support plays a pivotal role in the support and protection of older people in Tanzania. In the absence of a national universal pension, families, relatives, and local communities have been a source of income and protection for the elderly in Tanzania. Older people in Tanzania are related to a multitude of people from different generations: their own children, grandchildren, siblings, in-laws, and other clan relatives. This network of unity, also called intergenerational relationships, exposes older people to the benefit of mutual family identity, behaviors, feelings of family bond, and mutual assistance offered among family members and relatives (URT, 2003, URT & HAI, 2010).

However, this kind of support is dwindling away as family and social structures in traditional African families are changing very fast. Large families, scarce resources, and competing needs have reduced the capacity of many families to meet their obligations for the elderly, and a number of aged people in Tanzania fall outside the family setting because of childlessness or other social reasons (URT, 2003; Spitzer et al., 2009; URT & HAI, 2010).

Old age is associated with increased dependency, declining income and health, and the growing need for elderly care and support. Lack of reliable sources of income, services, and support can make older people vulnerable to poverty (UNDESA, 2015). Conversely, the availability of such services can improve their wellbeing and benefit both the family and the local community. Therefore, the progress of aging population in Tanzania is an issue of concern, which calls for concerted efforts to introduce a universal social pension program at the national level to help older people and their families ease the challenges related to ageing population. In this article, we speculate on how universal social pensions can benefit family relations and foster rural development. We focus on the following questions: What effects will social pensions have on family solidarity? How will social pensions influence the social and economic development of rural areas in Tanzania? What practical measures does Tanzania need to take in order to produce these effects?

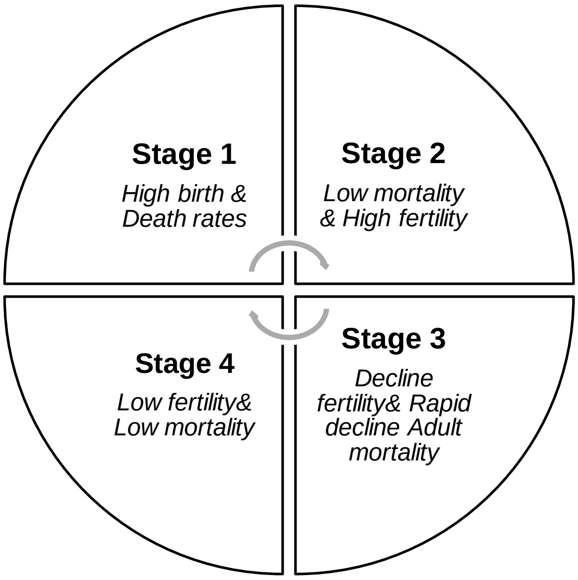
This article begins by exploring the process of demographic transition, then follows explanations of the key concepts used and the theoretical background on which these concepts are based. These sections are followed by methods, results, discussions, and the conclusion.

2. Process of demographic transition

Aging is defined from both biological and demographic perspectives. In a biological sense, aging is associated with the process of an individual human being growing old, a process manifested through the decline of physiological and mental functioning, and sometimes accompanied by the onset of impairment of bodily functions (WHO, 2015). However, physiological changes vary among older people and are not uniformly distributed to all individuals (Heslop & Gorman, 2002; WHO, 2015).

Demographic aging, which is the primary focus of this article, involves a structural change in the population. It is a process in which changes occur in the population structure, enabling the number of older persons to become proportionately larger in comparison to other segments of the population in a given country, region, or world (UNFPA, 2012; UNDESA, 2014).

Demographic aging, or aging of the population, is primarily caused by two factors namely, the decline of fertility and mortality rates (UNDESA, 2013). This process of demographic change, in which both fertility and mortality rates remain low and stabilized, is technically called *demographic transition* (He et al., 2015). The process of demographic transition follows a certain path involving four related stages as shown in fig. 1.



Source: Own illustration based on explanation from He et al. (2015)

Figure 1: Stages of demographic transition**.**

Initially, both birth and mortality rates are very high, making the marginal differences between them minimal. As a result, the age structure of the population consists of many young people with very few older people. In the second stage, infant and child mortality declines rapidly, but fertility rates remain high. The shape of the population age structure continues to look young, but the proportion of older people starts to grow because of the prevailing low mortality rates.

In stage three, there is a decline in fertility rates and an accelerated decline in adult mortality rates. This helps to improve life expectancy, enabling many people to live to old age. As a result, the population of older people grows larger in comparison to the last two stages. In the last stage, both fertility and mortality rates fall to a very low level. The decline in fertility and mortality rates, followed by sustained low fertility and mortality levels, shrinks the population of younger generations while increasing the absolute number of older people, consequently making the age structure to become old (He et al., 2015).

The key measure in gauging population aging is the decline of fertility rates (He et al., 2015). Countries whose populations exhibit low fertility rates tend to have higher proportions of older people. When the total fertility rate has fallen to at least 2.1 children per child bearing woman, the fertility rate is said to have reached its "replacement level," – that is, a level at which the couple can replace themselves (He et al., 2015). So, a low fertility rate below the replacement level is an indication of an aging population.

Tanzania still has higher fertility rates compared to global standards. The total fertility rate in Tanzania stood at 5.1 children per woman in 2015, more than double the standard global replacement level. According to UN World Population Prospects, Tanzania's fertility rate in 2024 is 4.5. A fertility rate of 4.5 implies that a normal childbearing Tanzanian woman is expected to have at least 4 children in her lifetime by the end of 2024, which is quite a large number of children compared to standard global fertility levels where the fertility rate stands at 2.4 children per woman (UNDESA, 2022). Tanzania was specifically mentioned in the United Nations population growth report (UNDESA, 2015) as one of the countries with a slow reduction in fertility rates, which has caused the share of older people in the total population to grow slowly.

3. Conceptual dimensions

The key concepts used in this study are universal social pensions and family solidarity. A universal social pension is a public cash transfer given to older people in the community based on age eligibility criteria (WB, 2018). It is non-contributory, and, therefore, does not require prior contributions from beneficiaries. The universal social pension has proven to be effective in providing at least the minimum level of income security to older people, particularly those who were unable to make contributions to formal social security schemes in their life time (UNDESA, 2015; WB, 2018).

With the exception of Zanzibar, which introduced universal social pensions for older people in 2016, older people on the Tanzanian mainland have not accessed non-contributory pensions. Social pensiosn on the Tanzanian mainland are not practiced at the national level. The most common type of pension known in Tanzania is the contributory pension, which has limited coverage for employees in the formal sector.

Family solidarity refers to inter-generational relations and support among relatives - both blood and legal relatives. It is a network of unity and support among kin (Martin, 2004; Ostner, 2004). This bond of unity involves members from different generations. It is thus a network of intergenerational relations among both nuclear and extended family members (Knijn, 2004). It is the interpersonal exchange of care and support that determines intergenerational solidarity. The family has traditionally been the core institution in which these norms and values of solidarity are best shared (Komter & Vollebergh, 2002).

Family solidarity in this study was measured by using three of the six dimensions of Vern Bengtson's measure of intergenerational family solidarity, namely, structural, associational, consensual, affectional, functional, and normative solidarity (Silverstein & Bengtson, 1997; Parrot & Bengtson, 1999; Komter & Vollebergh, 2002; Daatland & Lowenstein, 2005; Martin & Long, 2000; Katz & Lowenstein, 2010). This study has adopted three of Bengtson's dimensions of intergenerational family solidarity: Social association, reciprocity and exchange, and familial norms of obligation

Social association, or associative solidarity, refers to the extent to which family members express how they share activities within the family network (Cooney & smith, 1996; Martin & Long, 2000). The association between participants and their children was measured in two ways: first, by indicating how far older people lived with each of their children. And secondly, asking participants to recall in a period of twelve months contacts with their children on the basis of direct personal contacts, such as phones or mail.

Exchange and reciprocity were measured by examining the extent of social support. According to Tagaki and Saito (2012) family social support is a two-dimensional concept. It implies both structural and functional family support. The structural aspect includes family social networks and geographical proximity between parents, children, and other family members. This is a prerequisite for functional support, which can be financial, instrumental, or emotional. Financial support refers to direct monetary assistance to aged family members, and instrumental support consists of all types of practical help delivered to an elderly person such as help with household chores, shopping, fetching water or firewood, walking, transportation, etc.

Functional social support was examined by looking at the help and assistance older people gave and received from their children and other family members or from other sources outside the family, such as neighbours, communities, or NGOs, in the period of previous twelve months. The following items of assistance were measured: direct material support, medical assistance, transportation, help with housework, and help in the field or business.

Normative Solidarity or Familial Norms of Obligations refers to actual, practiced, or perceived filial responsibilities (Martin & Long, 2000). Participants were asked to indicate if they adhered to structural norms of obligations, particularly with the role of grandparenting. And when participants lived with grandchildren, they had to indicate the compelling factors. Norms of obligation were also measured by examining the perceptions of participants with regard to support from both the family and the state.

4. Theoretical underpinnings.

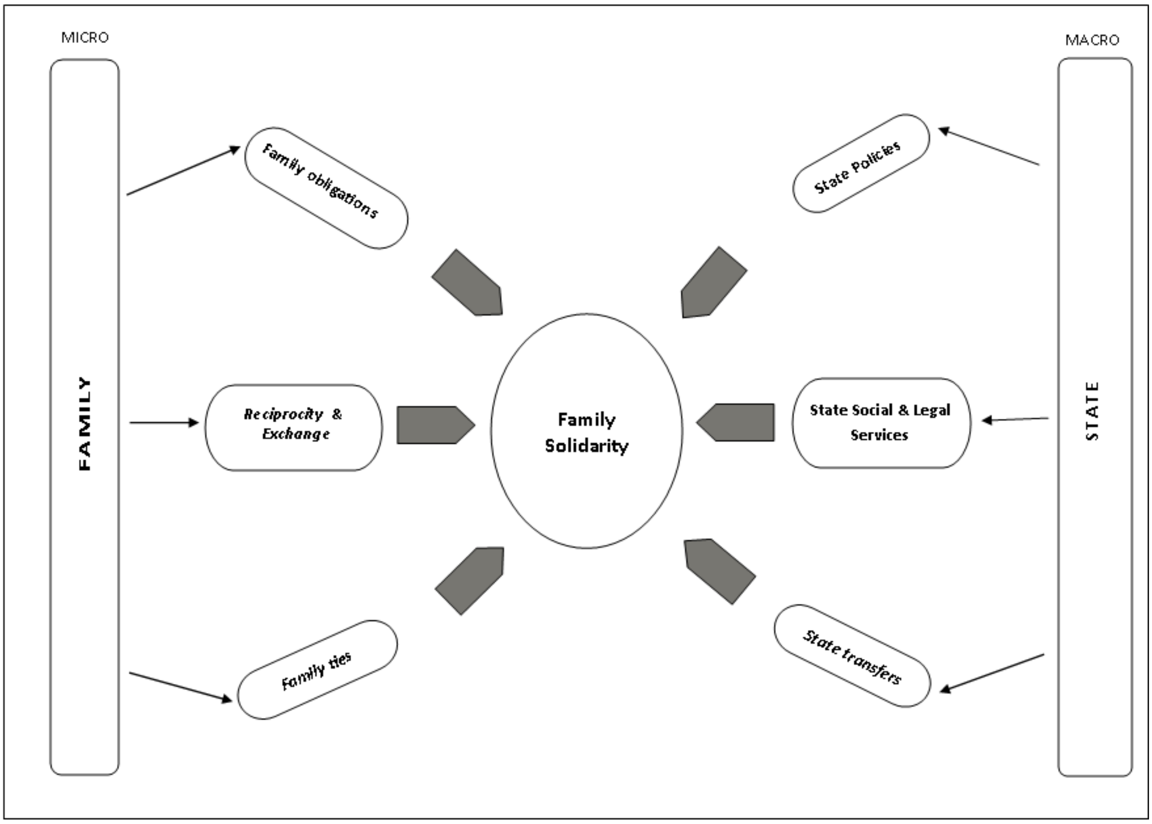
Both social pensions and family solidarity are founded on solid sociological and theoretical backgrounds. Theoretically, the concept of family solidarity can be traced in the ideas of classical sociological fathers, particularly in the writings of a classical French sociologist, Emil Durkheim. Emile Durkheim (1858–1917) distinguished between mechanical and organic solidarity. Mechanical solidarity is associated with culture in traditional societies, in which people are united together by strong social bonds and share the same worldviews. Their beliefs, sentiments, and worldviews are the same because they have common membership in the same society. Individuals have internalized norms of obligation towards the members of their group.

Organic solidarity is the consequence of a modern, advanced industrial society in which people are bound together, not by feelings of belonging but by labor differentiation. Their different specializations make them rely on each other; hence, their dependence is the basis of their consensus—they manifest functional interdependence. Members of society differ from each other but, at the same time, depend on one another because of the specific specializations they have. The specific activities of one individual have great contributions to the lives of other members of society, and the latter depends on the former for their wellbeing as much as they depend on their activities for survival. Dukheim upheld the conviction that reciprocity was strong in mechanical societies and weak in organic societies (Barnes, 1966; Komter & Volleberg, 2002).

Durkheim's mechanical and organic conceptualizations of solidarity are interpreted as two related ways of explaining relations in intergenerational family solidarity: structural family solidarity and functional family solidarity (Komter & Vollebergh, 2002). The former presupposes a family structure that is prescribed by intergenerational relations. Whyte et al. (2008) elaborate on this point by saying that generational relations are prior to persons; they exist before everyone, and when people are born into the family, they inherit the necessary drivers such as language, habits, norms, and beliefs that help them to relate to others.

By extension, these relations are not static conventions, but they permit agency and creativity. While people can consume these generational positions and relationships, they can also use them to create new ideas and practices (Whyte et al., 2008). Hence, relations also emerge from the actions or functions of people—functional solidarity. That is, the mutual consecutiveness of the actions of group members—their consensus about some rules (Komter & Vollebergh, 2002).

In a much broader sense, the theoretical dimension of family solidarity focuses on the relationship between the family and the state. It explores the mechanisms and effects of state-family interactions, notably public policies, services, and transfers aimed at the care and protection of family members, including the elderly. Therefore, this dimension of family solidarity oversees the distribution of responsibilities for services, such as elderly care, between family, the state, and other stakeholders (Daatland & Lowestein, 2005). Fig. 2 illustrates how the family and state converge in family solidarity.



Source: own illustration.

Figure 2: Convergence of State and family in intergenerational family solidarity.

The term family solidarity is used in both micro and macro senses, as demonstrated in Fig. 2. In its micro meaning, it refers to normative obligations, duties, and responsibilities in intra-familial and kinship cycles, reciprocity and exchange expressed by social support in family relationships, and the network of contacts among family members. Its macro meaning is related to actions of the state towards the maintenance of family solidarity, such as national social policies, social and legal services, and state transfers, particularly universal cash transfers for older people.

This perspective of viewing family solidarity as the confluence of family and state services for elderly people brings forward the issue of social pension. Social pensions are understood here as cash transfers provided by the government as a form of social assistance to support older people. The family and the state are the most significant social institutions for the protection of older people. However, the interplay between the family and the state on old-age care has not always been smooth. According to Daatland & Lowestein (2005) apprehensions for family solidarity being drifted away by influences of modernity or state actions have existed in history. Empirical literature reveals two patterns of outcomes on family solidarity resulting from the relationship between family and state, namely, Crowding-out and Crowding-in effects (Künemund & Rein, 1999; Daatland & Lowenstein, 2005; Künemund, 2008).

Crowding out refers to the situation in which the interventions of state services in the family through programs such as social pensions reduce the zeal, willingness, and morale of family members to support their needy and dependent family relatives (Künemund & Rein, 1999; Künemund, 2008). In this case, the state assumes obligations by offering high levels of social services over and above family capacity, and by so doing, it demoralizes family help. In this sense, according to Walker (1991) the state is viewed as a threat to intergenerational family solidarity.

Crowding-in theory is related to a situation in which the public support of the state helps stimulate private support systems in intergenerational family relationships. The support given enhances family members intergenerational family solidarity to continue supporting each other while at the same time improving their social capital (Künemund and Rein, 1999; Attias-Donfut & Wolff, 2000; Daatland & Lowenstein, 2005; Motel-Klingebiel et al., 2005; Reil-Held, 2006; Künemund, 2008; Sarasa & Billingsley, 2008; Kohli & Künemund, 2003; Aboderin, 2006; Katz & Lowenstein, 2010; Izuhara, 2010).

The crowding-in theory is associated with two principles: complementarity and stimulation. The complementarity principle holds that the state does not crowd out family services but complements them by injecting competence and expert support lacking in the family to offer the best services to the elderly (Sundström et al., 2002; Attias-Donfut, 2003).

The state also stimulates family efforts by sharing in the latter's burden of elderly care. When the workload of care is shared between the state and family, the latter is very much relieved from the pressure of caregiving services (Linsom, 1997; Knijn, 2004; Daatland & Lowenstein, 2005). Besides, the state's benefit packages, such as old age pensions, stimulate family intergenerational solidarity through reciprocation. That is, giving and receiving activities from the elderly within the intergenerational contract depends, above all things, on the resources they can solicit from the state. The more resources they can access, the better the chances they have to participate in reciprocal activities of giving and taking (Küenemund & Rein, 1999).

5. Data and Methods

This study is descriptive in nature, conducted to describe the phenomenon of intergenerational family relationships in Tanzania. To fulfill this objective, a quantitative cross-sectional survey method was used to obtain information from older people aged 60+ (n=968).

A standardized questionnaire with detailed information on participants' addresses, places of residence or neighborhoods (hamlet), demographics, social life, and family intergenerational relations was used for the interview. Each participant was interviewed separately. Descriptive statistics were used as the main statistical tools for analysis, differentiating males and females.

6. Results

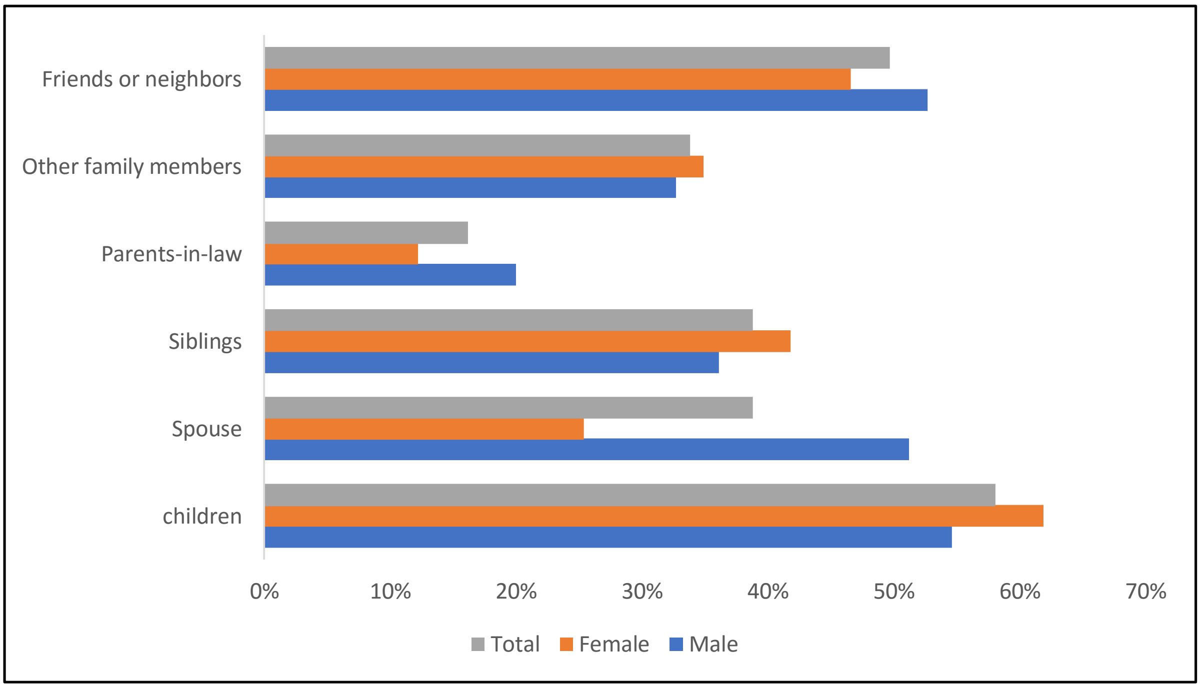
This study focused on three elements of Vern Bengtson's measures of family solidarity, namely, social association, reciprocity and exchange, and familial norms of obligation.

The findings revealed that there were gender differences in literacy levels. More than half, or 60%, of the respondents did not obtain formal education. Many old women were most disadvantaged in education. The majority of old women—about 81%—had no formal education, whereas only 37% of older men did not have access to formal education. These gender differences in education were statistically significant ($x2$ = 196,209, df= 6, p =.000, Cramer's V =.45).

Marital status had a strong gender dimension. More than three-quarters, or 86%, of older men were married, compared to 31% of older women. Similarly, the majority of older women (54%) were widowed, compared to 10% of widowed older men. The statistical significance test of these gender differences in marital status ($x2$ =300,277 df = 4, P =.000, Cramer's V =.56) confirmed the existence of gender differences in old age marital relationships. Findings from the data in the corresponding study, SAUT Survey 2019, also revealed similar results, where 82.9% of older men were married compared to 39.7% of older women. Comparatively, 39.2% of older women were widowed, compared to 4.9% of older women. These differences were statistically significant ($x2$ = 91.926, df = 4, p =.000, Cramer's V = .48).

Ninety-four percent of the participants had children of their own, and 6% were childless. The mean average for the number of children was 5.8. Ninety percent of the participants had more than one child, and 25% had more than eight children. Many older men had a comparatively high number of children above the average of 7.4 compared to women's 4.3. These differences were statistically significant (X^2 = 72.898 df 3 p<.000 Cramer's V =.30).

The average household size was 6.4 per household. Generally, the majority of old men lived in larger households than older women. The distribution of the number of household members indicated negative skewness, which implied that only a few participants had a higher concentration of household members. This negative skewness was shown by the size of the mean, which was greater than both the median and the mode (M=6.37, Md=5, Mo=2) and both Skewness and Kurtosis indicated high scores (Skewness=1.536, Kurtosis=3.883).
Sixty percent of the participants had their nearest children living with them in the same homestead, and 75% of all participants maintained daily contacts with their children. In addition, more than half, or 58%, were satisfied with the relationship they had with their immediate family members.
Social support was operationalized as both support received from children, and support provided by older people to their children or other people in the family network. Seven types of instrumental support were used to measure support: financial support, support for food and clothing, support for housework, support for healthcare and transportation, and support for work in the fields or place of business. The findings indicated that slightly more than half, or 52%, of all the participants received support from their own children. Both older men and women received most support from their male children. Approximately 57% of all the participants received most help from their male children. More than two-thirds of the support came from married children sharing the domicile with their old parents.
The results from the SAUT Survey 2019 data also showed impressive findings on social support received by older people from various people in their network. The receipt of support was measured over a period of twelve months, and assistance included seven items: money, food, clothing, housework, health care, transportation, and work in the field. Fig. 3 indicates how older people received social support.



Source: SAUT Survey 2019

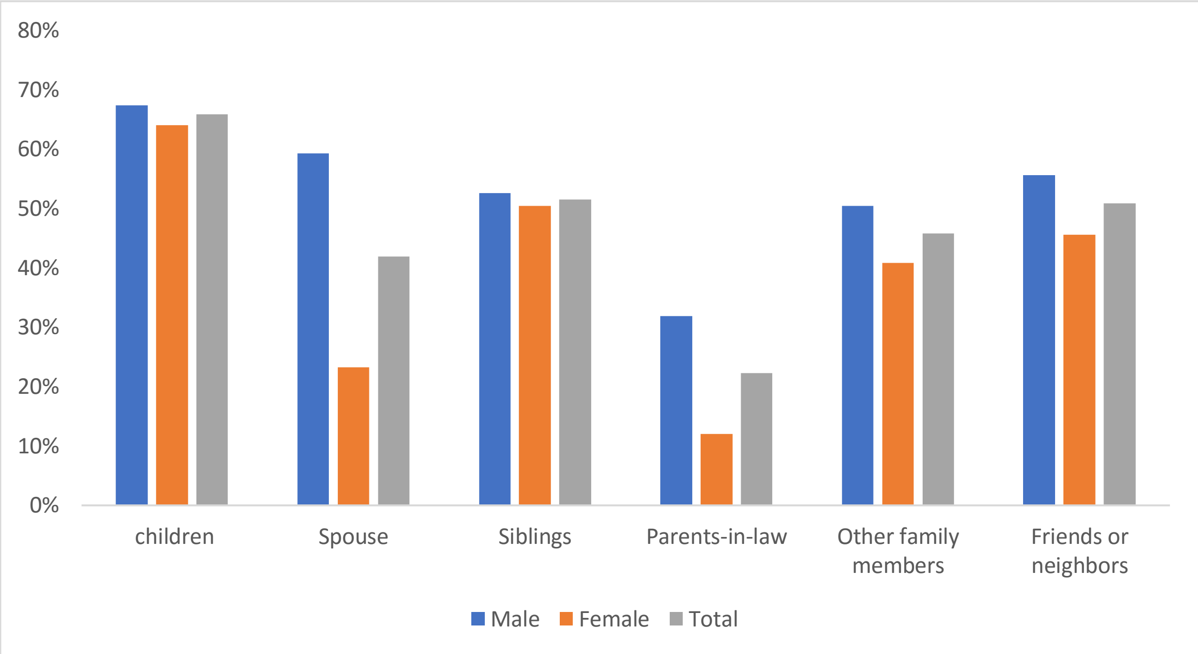
Figure 3: Social support received by older people from their networks

Note: The figure is from SAUT Survey 2019 data. Significant support came from four sources, children (58.1%), neighbors (49.7%), spouses (38.8%), and siblings (38.8%). Older women received abundant support from their children (61.9%), siblings (41.8%), and other family members (34.9%). Older men, on the other hand, were significant beneficiaries of neighbors, friends (52.7%), and spouses (51.2%).

Older people also reciprocated by providing support to their children and other people in the family network. Approximately half of the participants (41%) offered functional support to their own children. Older men offered more support than older women. 64% of all older people who were able to support their own children were

older men, compared to 36% of older women. Old males (57%) gave more support to married children compared to 43% given to non-married children. Similarly, old females gave 74% of their support to married children and only 26% to non-married children. These preferences for offering support on the basis of the marital status of children was found to be significant (x2 =5.635 df1 p<.018 but with weak phi = -.162). This weak association is probably an indication of other factors related to information about the variations of support provided or received by older people on the basis of their marital status.
The majority of children receiving the most support from older people lived very close to the older people who assisted them. Sixty seven percent of the most receiving children lived in the same homestead with the supporting older person, and 25% of the most receiving children lived in the same village with their supporting older persons.

Fig. 4 shows similar results from the SAUT Survey 2019 related to how older people reciprocated social support for people within their networks.



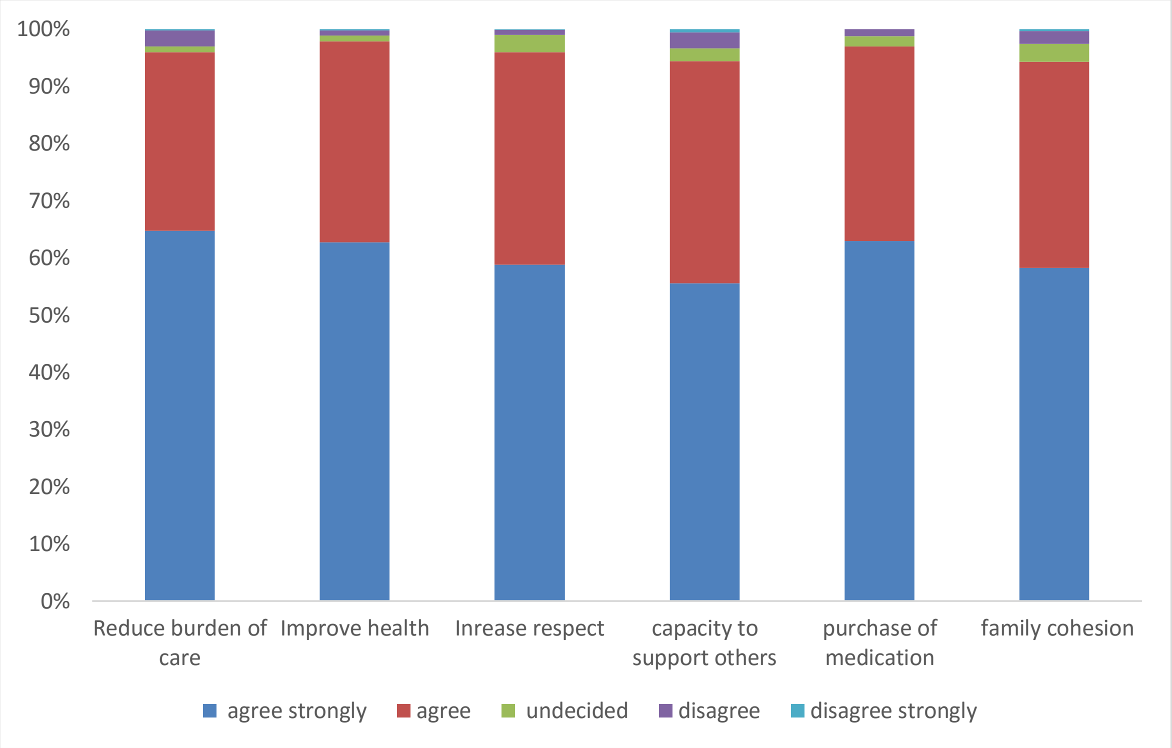
Source: SAUT Survey 2019.

Figure 4: Social support provided by older people in their networks

Note: Fig. 4 is generated from SAUT Survey 2019 data. Most support (68.8%) went to children. Older men were the main providers for children (67.4%) compared to their female counterparts (64.0%). Older men also provided major support to spouses (59.3%), friends (55.6%), and siblings (52.6%). Surprisingly, older women did not provide much to their spouses (23.2%).

Norms of obligations were measured by looking at older people's adherence to filial duties and norms of reciprocity. Grandparenting is one of the duties widely practiced by older people in Tanzania. The majority of older people, 75%, lived with grandchildren. There were clear differences in marital status and grandparenting between old males and old females. The majority of older males (89%) living with grandchildren were married, whereas the majority of older females (54%) who were grandparents were widowed. These differences were statistically significant with the Chi-square test (X2 = 247,781 df=4 p=. 000 Cramer's V=.585).
Similar results were observed in the SAUT Survey 2019. Approximately one-third, or 72.1%, of older people lived with children in their households, and 56.7% of these children were under the age of 5 years.

With reference to the obligation of the state towards older people, the majority (98%) agreed that the state should take more responsibility for supporting older people, and the support of the government through universal social pension will have positive impacts on their lives, as shown in Fig. 5.



Source: 2012 survey data

Figure 5: Advantages of Universal social Pension to Older people

7. Discussion

This study sought to emphasize the positive effects and influences of universal social pension on both family solidarity and socio-economic development in rural areas of Tanzania, where the majority of older people live. The findings have indicated that intergenerational family solidarity in the research communities is still strong. This is particularly true with regard to the composition of the family structure where older people reside. The majority are married, live in large households, have frequent contacts with their children, maintain a balance of support exchange with their children, practice traditional roles related to family bonding, and have trust in their relationships with their closest family members. These valuable evidences help to reflect on how social pensions will benefit family solidarity, exert influences on social and economic development in rural areas, and help to speculate on different kinds of practical interventions needed to bolster these effects.

This study found that many older people were living in large households composed of an average of six people per household. This is a prevalent family structure in Tanzania, as observed by other studies as well. Mboghoina and Osberg (2010) found that three-fifths of the elderly in their sample in Tanzania lived with the extended family. The extended families were quite large, with an average of 6.8 members per household.

Expanded social networks and quality relationships have positive impacts on the lives of older people. The structure of expanded networks exposes older people to multiple interactions with family members from different generations, and it can lead to improved care and health outcomes for older people (Bongaarts & Zimmer 2002; Brown et al., 2005). In addition, it also fosters the traditional African roles of older people such as care for young generations, transmission of culture and traditions, and mediation (Nhongo, 2004). These older people's responsibilities are practically fulfilled only when family members live close to each other. Consequently, the majority of older people prefer to reside with spouses, adult children, grandchildren, or all of them together, in the extended family network in order to embrace these benefits (Kakwani & Subbarao, 2005). However, there are observable threats to the continuity of this family structure. Rapid social and economic transformations have led many family members in the extended family structure, particularly the elderly, to lack assured protection for their vulnerabilities (Kaseke, 1997; Nhongo, 2004). These threats are mainly associated with factors such as declining birth rates, increasing urbanization, and migration. The decline in birth rates results in the birth of few children, thus lowering the chances of older people living with their own children in the future. Increased urbanization and rural-urban migration also add pressure on the sustenance of the extended family because children living in distant places find it difficult to provide adequate daily care for their older parents (Mboghoina and Osberg, 2010).

Therefore, the modern understanding of family solidarity is based not only in the strict Dukheimian mechanical sense but also in the sense in which the family accommodates the functions of other social institutions, particularly the state. Consequentially, family solidarity today is the result of the interactions between the functions of both the family and the state. One of the appreciable services offered by the state to the family is cash transfers, including universal social pensions. This feature has innumerable benefits for family solidarity.

Public pensions help to strengthen the extended family system and therefore improve the welfare of older people. Evidence from the literature indicates that the universal social pension has helped to re-construct family networks in many contexts in Sub-Saharan Africa. Sagner and Mtati (1999), analyzing the practice of pension sharing in South Africa, found out that, given the devaluation of the social roles of older people in African societies, social pensions have become the easiest means to help older people re-construct their identity and earn self-respect. Tai & Treas (2009) also argue that injecting pension income into households contributes to the configuration of living arrangements in such households.

The results in Fig. 5 show that the majority of the participants were expecting social pensions to increase their capacity to help others. This is particularly true with household relations. Older people feel useful and respected when they have something to share within their households. Evidence from means-tested transfers in Tanzania highlights how social relationships in households are improved by pension income. For example, Hofmann et al. (2008) found, in the Kwa Wazee Project, that pension income improved household relationships between pensioners and their grandchildren. With the little pension income, pensioners were able to provide for the basic needs of grandchildren, and as a result, wellbeing and harmony in households were improved. Grandparents were satisfied with their care-giving activities and earned more respect from their grandchildren. At the same time, grandchildren were motivated to assist their grandparents with house chores.

Social pensions also impact family solidarity by enabling pensioners to engage in reciprocal relationships with neighbors and friends. Older people feel obliged to participate in many family and social events by sharing whatever resources they have. For example, older male parents in many African contexts are consulted, and often customarily expected, to give bride prices for the marriage of their children. They also give altruistic support to other needy family members, neighbors, and community members. Moreover, they often contribute to social events such as funerals, religious festivals, local ceremonies, and other similar social events. These contributions demand some level of economic stability. Social pension income can help older people offset these demands. In this way, social pension creates a balanced reciprocal process in which pensioners are no longer perceived as beggars for support in the neighborhood but as partners who can also give support to others. This equal exchange process tends to improve relationships and communication between pensioners and their neighbors and friends. Therefore, social pensions help older people to live with dignity (WB, 2018).

Another way social pension income contributes to family solidarity is by reducing the economic dependency of older people. Bukuluki and Watson (2013), observed in their evaluation of the unconditional cash transfer program in Uganda that relations between elderly parents, their married children, and other relatives improved significantly as a result of reduced economic dependency. In old age, economic needs are difficult to meet, especially when an individual is working in the informal sector. Many older people find it difficult to perform their routine activities as their age increases (Mwanyangala et al., 2010). Unfortunately, health also diminishes with age. The decline of physical health, the rise of chronic incurable diseases, and mental health problems (Hofmann et al., 2008) often accompany people in old age. The healthcare needs of older people place huge demands on family resources and are often difficult to meet. Spitzer and Mabeyo (2011) observed in their study that the cost of treatment was a serious problem for older people. Many of them could not afford the transport costs from their homes to the hospitals, let alone the cost of purchasing medications. These difficulties caused some older people to postpone formal medical treatments.

Also shown in Fig. 5 is the acknowledgement of older people that support from the government will reduce the burden of healthcare for their families, facilitate the purchase of medications, and thereby improve their health status. Pension income helps sick older people cover most healthcare costs, such as the purchase of medications, diet food, or transport costs to health facilities. Therefore, an additional income in the form of a social pension brings high expectations for older people in terms of relief for their healthcare. When health costs are mitigated by social pension income, families are relieved of the burden of healthcare. This improves relationships with family members.

The aforementioned examples help us to reflect on the relationship between the discussed theories and family solidarity. It is clear from these examples that social pension has the tendency to crowd-in social relationships. Therefore, the availability of social pensions will support older people in improving family solidarity. Empirical literature from sub-Saharan Africa provides evidence on how public pension packages strongly crowd in family relationships rather than crowding them out. A study by Lund (2002) provides evidence from non-contributory schemes in South Africa that such programs crowded-in by promoting not only individual and household income but also care, the status of the elderly, the health status of children, and the creation of local markets. Similarly, Bukuluki & Watson (2013) provide empirical evidence from the evaluation of the Ugandan Senior Citizens Grant program that cash transfers helped to improve social relations and social networks among the elderly. Because of the improved income brought by cash transfers, older people became less dependent on their children, and this strengthened the relationships between these two generations.

While recognizing social pensions as having the potential to transform social relationships in households, it should also be acknowledged that they could have indirect implications for crowding out relationships and escalating elder abuse. Hofmann et al. (2008) noted in the Kwa Wazee Project that there were cases—a few though—where children threatened to evict older people if they did not hand over or, at least share, their pension income. Pensioners were also hesitant to disclose their pension income for fear of causing jealousy in the community. Such negative consequences of social pensions are not pleasant for the wellbeing of older people.

The universal social pension is closely associated with social and economic development. The purpose of introducing social pensions is to alleviate poverty (WB, 2018). Social pensions are an effective means of enhancing the well-being of older people by reducing poverty and inequality, promoting health and nutrition, empowering the most marginalized groups among the elderly, stimulating capital investments and local markets, improving human capital development, and promoting good governance (DFID, 2006). We discuss these effects of universal social pensions in line with national developmental objectives in Tanzania envisaged in the second National Strategy for Growth and Reduction of Poverty (NSGRP II) policy framework.

The NSGRP II policy framework focuses, first and foremost, on the fight against poverty and inequalities in national income distribution. Data from this study indicated that older people had higher levels of informality and also lived in large households. Old people with no formal education and, who have been working in informal sector, are not covered by formal social security services in Tanzania. They are likely to age without income security. Living in large households can also accelerate the decline of older people to a life of impoverishment, especially when these households are less resourceful or cannot appropriately rebound after great shocks such as the death of dominant breadwinners.

The poverty of older people is a critical problem in many African countries, particularly in Tanzania. According to the United Nations report, older people in African countries are poorer than the general population, and older people from sub-Saharan African countries are poorer than all other age groups (UNDESA, 2015; WB, 2018). Studies in Tanzania show that older people in Tanzania have a higher probability of being affected by poverty than any other age-group (URT & HAI 2010); and those in rural areas are among the poorest (URT, 2003; HAI, 2008; Mboghoina & Osberg, 2010; HAI, 2011; Spitzer & Mabeyo, 2011; Pastory, 2013). Poverty among older people in Tanzania is further exacerbated by gender dimensions, as older females are more vulnerable to poverty than older males (URT & HAI 2010).

Public cash transfers in the form of old age social pensions are a relevant and effective intervention to tackle extreme poverty and fight against impoverishing factors among older generations in Tanzania. This kind of program has already been in practice in Tanzania through the Tanzania Social Action Fund (TASAF) through which conditional cash transfers have been provided to elderly people to fight against income insecurity (Spitzer et al., 2009). However, the universal option would be more appropriate to apply because of its pervasive nature and high coverage.

The institution of universal social pensions at the national level will bring equity to the distribution of national resources. The distribution of social pensions in Tanzania will transfer a sizable amount of the national income to poor households. As already noted by the Feasibility Study in 2010, universal social pensions will reach around 30 percent of the poorest households and reduce their food poverty rates (URT & HAI, 2010). The old age social pension will therefore bring both income smoothing and social cohesion. The term income smoothing is used to refer to the redistribution of the national income to different groups of people in society in order to narrow the gap of inequalities existing between them. Cash transfers through an old age social pension precisely correspond to this objective. This mechanism of trying to balance the income of people in the country helps to defuse social tensions and creates a tranquil environment, which is a prerequisite for social and economic development in any country.

Indeed, social pensions are likely to have positive impacts on poverty reduction in Tanzania. Considerable evidence emerging from old age studies in Tanzania helps to confirm this argument. The feasibility study conducted jointly by the government of Tanzania and HelpAge Tanzania (URT & HAI, 2010) established how the availability of social pensions would have impacted old age poverty at the individual, household, and national levels. It was estimated that monthly transfers of the universal pension of Tsh. 16,586 in 2010 would have reduced the poverty rate of individuals aged over 60 years by 58 percent. Likewise, the same social pension would have reduced national-level poverty by 11.9 percent and promoted over 1.5 million people above the poverty line. The pensions would have largely benefited people in rural areas, thus balancing the inequalities in income between rural and urban divides (URT & HAI, 2010). Similar evidence has also been documented by Heslop and Hofmann (2014) in the Kwa Wazee project, in which they reported that social pensions constituted almost half of the income and expenditure of households containing old-age pensioners.

Significant appreciations for the impact of old age social pension were shown during the assessment of the impact of the Zanzibar Universal Pension Scheme (ZUPS). Zanzibar introduced an old-age social pension for people aged 70 years and older in 2016, becoming the first East African nation to undertake this venture (ILO, 2017; HAI, 2019). In 2019, an impact assessment was conducted on this project. The results of the evaluation showed that social pensions had significant effects on older people's well-being, including food security, health expenditure, and empowerment (HAI, 2019).

The NSGRP II policy framework also emphasizes the improvement of livelihoods through sustainable agriculture in activities such as crop production, livestock husbandry, forestry, hunting, and fishing. The agricultural sector not only supports the majority of people living in rural areas but also has the potential to lift them out of poverty (URT, 2010). However, evidence from the literature indicates that reduced or absence of income security can limit poor households from engaging themselves in these livelihood promotion activities and therefore have negative impacts on economic growth (URT & HAI, 2010). The universal social pension ensures sustained minimum income security, which can support poor households in Tanzania to increase their agricultural productivity.

Evidence from research in Tanzania demonstrates that a universal social pension promotes agricultural productivity and microenterprise activities. Heslop and Hofmann (2014) reported that over 30 percent of female pensioners in the Kwa Wazee cash transfer project in Kagera, Tanzania, used their pension to purchase day labor. Daytime physical labor can become extremely difficult for older people because of diminishing physical energy and the prevalence of health problems. Alternatively, older people use pension income to hire labor to work for them on their plantations and business spots. This economic behavior has the added advantage that the value of the cash transfer originally received gets multiplied. Profits obtained can be used for asset accumulation, protection of assets used by older people to earn income, such as land, promotion of engagement in entrepreneurial activities, and access to agricultural inputs (URT & HAI, 2010).

Pension income motivates poor old people to start economic activities such as small-scale investments in their own localities. Such economic initiatives are likely to enhance the economic development of local communities in rural areas of Tanzania. When older people receive pensions, they practically have cash on hand, which they can use to increase their purchasing power or invest. Older people's investments and businesses are mainly based on home-made or locally grown agricultural products. Such economic investments are important in creating demand for local goods such as consumption goods, agricultural inputs, or household assets, encouraging business and investments, increasing savings, and thereby stimulating the local market and supporting economic growth. This economic behavior is commonly practiced in rural areas in Tanzania. A study conducted by Spitzer and Mabeyo (2011) found that older people who identified themselves as doing business (not pension recipients) were involved in small business activities in and around their localities. They were mainly involved in activities such as gardening, selling charcoal, poultry, handcrafts, food stuffs, and livestock keeping. Such initiatives can be motivated and scaled up with the availability of pension income.

Involvement of older people in local markets is a healthy sign of the stability of such markets because older people have the tendency to stay at one place for a long time or for their entire lives. The flourishing of business activities in local areas is good for older people themselves because they can easily access goods; it is also beneficial for local traders who are assured of customers; and it is even more beneficial for the government, which extends its tax coverage. Part of the tax will probably be used to finance old-age social pensions.

Evidence from universal pension old age programs in Namibia and Uganda (Devereux, 2002; Bukuluki & Watson, 2013) shows that old age pensions increased economic activities in the communities involved, and local traders in these areas increased their sales as well as their assets as a result of the profits obtained through old age pensions. Devereux (2002) found that social pensioners accounted for between one-third and two-thirds of the total turnover of sales in retail stores in rural Namibia. And more than half of the pensioners were able to secure credit facilities from these retail stores because of their guaranteed stable income. Knox-Vydmanov (2010), evaluating a cash transfer program in Katete, Zambia, found that just a small amount of cash transfer ($11) to old people was used multi-purposely to help them pay for educational materials for school children, make investments in agricultural farms, create small savings, and contribute to raising the sales of local business enterprises. A similar study by Bukuluki & Watson (2013) in Uganda also indicates that an amount of $ 8.70 in public cash transfers supported older persons to fulfill several economic needs, including purchasing necessities, medical care, and paying for farm labor. Lund (2002), quoting Barrientos, demonstrates that social pensions were a key instrument in supporting structural changes, rural development, and the liberalization of agricultural policy in Brazil.

8. Conclusion

It is noted in the discussion that the protection of older people depends on both the family and the state. The state manifests its functions through services such as policy formulation and implementation, legal protection, and public transfers. Public transfers in particular have many ramifications at the household, local community, and national levels. Universal social pension is significant for reduction of poverty income and inequalities, promotion of health and nutrition, empowerment of marginalized groups, motivation for investments and markets, human capital development, and good governance. It is therefore evident that state activities help to crowd in family relationships and exert positive outcomes for rural development. However, there has been little evidence to indicate that universal social pensions can also erode family relationships and breed misunderstanding, conflict, and fear.

Although social pension transfers seem to be a strong intervention measure in dealing with existing old age problems, social pension alone is not a comprehensive measure to tackle all challenges in old age. It needs to be integrated with other practical intervention programs to make it more effective. In addition to the introduction of social pensions, it is necessary to envision broad policy measures to ensure the security of older generations in the future. Kaseke (2005) suggests that such measures can include the adoption of versatile macro-economic policies, extending the coverage of social insurance schemes to include people in the informal sector, and the introduction of universal health services.

Appropriate macro-economic policies are likely to create job opportunities and increase the earning power of young people. Consequently, the ability of young people to contribute to insurance schemes will be maximized, enabling them to create income security to meet contingencies in their old age. Policy should aim to get many young people today employed so that they can save enough for their future needs rather than depending on the government. And those who, for some reason, cannot be readily absorbed into employment should be paid unemployment benefits (Rwegoshora, 2016).

Since the majority of people in Tanzania are still working in the informal sector, extending coverage of security schemes to people in this sector will bring great relief. One way of implementing this idea is to solicit people to join security schemes on a voluntary basis, irrespective of their income. The government can also liberalize its health system, making it universal in coverage. This is extremely important, especially for older people, who are likely to be affected by multiple health problems. We note with interest the recent efforts of the National Health Insurance Fund (NHIF) to accommodate people from all walks of life in the country. Such initiatives are highly appreciated and can be adopted in other insurance schemes.

Another way of extending income security in old age is through rehabilitation and remedying damage. In addition to the measures described above, initiatives to re-train or re-skill people so that they can fit in the labor market, are helpful in creating a suitable aging environment for older people. Rehabilitative measures can help vulnerable groups, such as people without any skill or disabled who need special skills to play different roles in economic life (Rwegoshora, 2016), earn income, and save for old age.

The promulgation of an aging policy on its own will not bring about desired changes in the lives of older people. It must be coupled with legal protection and community awareness of the problems of older people. In Tanzania, social protection in the informal sector is embodied in traditional mutual assistance practices found in the extended family, kinship, and village (Spitzer & Mabeyo, 2011). The problem with these systems is that they are only morally binding but not enforced by law. Therefore, if there are issues of moral degradation, a change in family structure, or vulnerability in the community, the protection of older people cannot be ascertained. To strengthen such practices, care for older people should be binding by law, just as it is done for other vulnerable groups in Tanzania, such as children.

The role of the local community is extremely important in this regard. Social policy should be designed in such a way as to enable the local community to handle issues of livelihood for older people. This is essential because the state can only facilitate the solution of problems of older people through pensions, but many problems of older people need a human touch, which the local community is better positioned to fulfill than the state. Old age can be accompanied by many disabilities, such as bad vision, hearing difficulties, and mobility problems. Moreover, social service facilities in rural areas such as shops, wells, markets, hospitals, etc. are highly dispersed and can hardly be accessed by older people without the support of other people. The situation becomes extremely difficult when older people are living alone or are physically challenged. In this case, hard cash from the government can hardly be helpful to them unless it is coupled with support from the neighborhood and local community at large.

7. References

[1] UNDESA (2015). *World Population Prospects: The 2015 Revision*, Key Findings and Advance Tables. Working Paper No. ESA/P/WP.241.

[2] Spitzer, H., Rwegoshora, H., & Mabeyo, Z. N. (2009). *The (Missing) Social Protection for Older People in Tanzania: A Comparative Study in Rural and Urban Areas.* Dar es salaam: Institute of Social Work, Tanzania.

[3] HAI. (2002*). State of the World's Older people 2002*. HelpAge International

[4] Pastory, William (2013). Ageism in Tanzania's Health Sector: A reflective inquiry and investigation. *Academic*

Research International. 4 (1) 402 – 408.

[5] HAI, & Cordaid. (2011). *A study of older people's livelihoods in Tanzania*. London: HelpAge International.

[6] HAI. (2016b). Sauti ya Wazee. HelpAge International.

[7] URT, & HAI. (2010). Achieving Income Security in Old Age for All Tanzanians; a study into the Feasibility of a Universal Social Pension. Ministry of Labour, Employment and Youth Development & HelpAge International.

[8] URT. (2003). *National Ageing Policy.* Ministry of Labour, Youth development and Sports. http://www.tanzania.go.tz/ministriesf.html

[9] WHO. (2015). *World Report on Ageing and Health*. World Health Organization.

[10] Heslop, A., & Gorman, M. (2002). *Chronic Poverty and Older people in Developing World*. HelpAge International.

[11] UNDESA. (2014). Concise report on the world population situation in 2014.

[12] UNFPA. (2012). *Ageing in the Twenty-First Century: A Celebration and A Challenge*. New York: United Nations Population Fund

[13] UNDESA. (2013a). *World Population Ageing 2013*. ST/ESA/SER.A/348. (No. ST/ESA/SER.A/348.). New York: United Nations. www.un.org/...df/ageing/WorldPopulationAgeing2013.pdf

[14] He, W., Goodkind, D., & Kowal, P. (2016). *U.S.Census Bureau, International Population Reports, P95/16-1, An Ageing World: 2015.* (No. P95/16-1). Washington, DC: U.S. Government Publishing Office.

[15] UNDESA (2022). *World Population Prospects 2022: Summary of Results*. UN DESA/POP/2021/TR/NO. 3

[16] World Bank (WB). (2018). *The State of Social Safety Nets 2018*. World Bank.doi:10.1596/978-1-4648-1254-5.

[17] Ostner, I. (2004). What Are Children For?: Reciprocity And Solidarity Between Parents And Children, in T. Knijn & A. Komter (eds.). *Solidarity Between The Sexes And The Generations; Transformations In Europe* (pp. 167–184). Massachusetts: Edward Elgar Publishing, Inc.

[18] Martin, C. (2004). The Rediscovery Of Family Solidarity, in T. Knijn & A. Komter (eds.). *Solidarity Between The Sexes And The Generations; Transformations In Europe.* (pp. 3–17). Massachussetts: Edward Elgar Publishing, Inc.

[19] Knijn, T. (2004). Family Solidarity And Social Solidarity: Substitutes or Complements? In *Solidarity Between The Sexes And The Generations; Transformations In Europe* (p. 18 – 33.). Massachussetts: Edward Elgar Publishing.

[20] Komter, A. E., & Vollebergh, W. A. M. (2002). Solidarity in Dutch Families : Family Ties Under Strain? *Journal of Family Issues, 23*, 171–188.

[21] Silverstein, M., & Bengtson, V. L. (1997). Intergenerational Solidarity And the Structure Of Adult Child-Parent Relationships in American Families. *American Journal Of Sociology.103(2),* 429–460.

[22] Parrott, T. M., & Bengtson, V. L. (1999). The Effects of Earlier Intergenerational Affection, Normative Expectations, and Family Conflict on Contemporary Exchanges of Help and Support. *Research on Aging, 21(1),* 73–105.

[23] Daatland, S. O., & Lowenstein, A. (2005). Intergenerational solidarity and the family–welfare state balance. *European Journal of Ageing, 2(3),* 174–182. https://doi.org/10.1007/s10433-005-0001-1

[24] Martin, P., & Long, M. V. (2000). Personality, Relationship Closeness and Loneliness of Oldest Old Adults and Their Children. Journal of Gerontology: *Psychological sciences, 55B(5),* P311–P319.

[25] Katz, R., & Lowenstein, A. (2010). "Theoretical Perspectives On Intergenerational Solidarity, Conflict And Ambivalence", in M. Izuhara (ed.). *Ageing And Intergenerational Relations; Family Reciprocity From A Global Perspective* (pp. 29–56). Great Britain: The Policy Press.

[26] Cooney, T. M., & Smith, L. A. (1996). Young Adults' Relations with Grandparents Following Recent Parental Divorce. *Journal of Gerontology: Social Sciences, 51B(2),* S91–S95.

[27] Takagi, E., & Saito, Y. (2013). A longitudinal analysis of the impact of family support on the morale of older parents in Japan: does the parent's normative belief in filial responsibilities make a difference? *Ageing and Society, 33(06),* 1053–1076. http://doi.org/10.1017/S0144686X1200044X

[28] Barnes, J. . (1966). Durkheim's Division of Labour in Society. *Man, New Series, 1(2),* 158–175.

[29] Komter, A. E., & Volleberg, W. A. M. (2002). Solidarity in Dutch Families : Family Ties Under Strain? *Journal of Family Issues, 23,* 171–188. http://doi.org/10.1177/0192513X02023002001

[30] Künemund, H., & Rein, M. (1999). There is More to Receiving than Needing: Theoretical Arguments And Empirical Explorations Of Crowding In and Crowding Out. *Ageing and Society*, 19, 93 – 121.

[31] Künemund, H. (2008). Intergenerational Relations Within The Family And The State', in S. Chiara (ed.). Families, Ageing and Social Policy: Intergenerational Solidarity in European Welfare State. In *Families, Ageing and Social Policy: Intergenerational Solidarity in European Welfare States* (pp. 105 – 122.). Cheltenham: Edward Elgar.

[32] Walker, A. (1991). "The Relationship Between The Family And The State In The Care Of Older People." *Canadian Journal On Aging, 10(2),* 94 – 112.

[33] Motel-Klingebiel, A., Tesch-Roemer, C., & Kondratowitz, H.-J. Von. (2005). Welfare states do not crowd out the family: evidence for mixed responsibility from comparative analyses. *Ageing and Society, 25(06),* 863. http://doi.org/10.1017/S0144686X05003971

[34] Izuhara, M. (2010). Introduction', In M. Izuhara (ed.). *Ageing And Intergenerational Relations; Family Reciprocity From A Global Perspective* (pp. 1–12). Great Britain: The Policy Press.

[35] Attias-Donfut, C., & Wolff, F. (2000). 'Complementarity Between Private and Public Transfers', In S. Aber & C. Attias-Donfut (eds.). *The Myth Of Generational Conflict; the family and State in ageing societies* (pp. 47 – 68). London: Routledge.

[36] Lingsom, S. (1997). *The Substitution Issue: Care Policies and their Consequences for Family Care.* Oslo: Nova-Rapport.

[37] Motel-Klingebeil, A., Tesch-Roemer, C., & Von Kondratowtz, H. (2005). Welfare states do not crowd out the family: evidence for mixed responsibility from comparative analyses. *Ageing and Society*, 25, 863–882.

[38] Knijn, T. (2004). "Family Solidarity and Social Solidarity: Substitutes or Complements?", in T. Knijn & A. Komter (eds*.). Solidarity Between the Sexes and The Generations; Transformations in Europe*. (pp. 18 – 33.). Massachussetts: Edward Elgar Publishing.

[39] Mboghoina, T., & Osberg, L. (2010). Social Protection of the Elderly in Tanzania; current status and future possibilities. *Research on Poverty Alleviation.*

[40] Bongaarts, J., & Zimmer, Z. (2002). Living Arrangements of Older Adults in the Developing World: An Analysis of Demographic and Health Survey Household Surveys. *Journal of Gerontology: SOCIAL SCIENCES*, *15B*(3), S145–S157.

[41] Brown, W. M., Consedine, N. S., & Magai, C. (2005). Altruism Relates to Health in an Ethnically Diverse Sample of Older Adults. *Journal of Gerontology*, *60B*(3), P143–P152.

[42] Nhongo T.(2004). The Changing Role of Older People in African Households and the impact of Ageing on African Family Structure. The Ageing in Africa Conference, Johannesburg. 18th to 20th August, 2004

[43] Kakwani, N. and Subbarao, K. (2005) *Ageing and Poverty in Africa and the Role of Social Pensions.* United Nations Development Programme, International Poverty Centre, Washington DC.

[44] Sagner, A. and Mtati, R. (1999) Politics of Pension Sharing in Urban South Africa. *Ageing and Society*, 19, 393-416. http://dx.doi.org/10.1017/S0144686X99007424

[45] Tai, T., & Treas, J. (2009). Does Household Composition Explain Welfare Regime Poverty Risks for Older Adults and Other Household Members? *Journal of Gerontology: Social Sciences*, *648*(6), 777–787.

[46] Hofmann, S., Heslop, M., Glachert, G., & Kessy, F. (2008). Salt, Soap and Shoes for School; The impact of Pensions on the Lives of Older People and Grandchildren in the Kwa Wazee Project in Tanzania's Kagera Region. HelpAge International.

[47] Bukuluki, P., & Watson, C. (2013). Transforming Cash Transfers; beneficiary and community perspectives on Senior Citizens Grant in Uganda. Overseas Development Institute (ODI).

[48] Mwanyangala et al. (2010). Health status and quality of life among older adults in rural Tanzania. *Global Health Action supplement*. Pp.36-44

[49] Spitzer, H., & Mabeyo, Z. M. (2011). *In Search of Protection; Older People and their Fight for Survival in Tanzania*. Klagenfurt/Celovec: Drava.

[50] Lund, F. (2002). "crowding in" Care, Security and Micro-Enterprise Formation: Revisiting the Role of the State in Poverty Reduction and in Development. *Journal of International Development*, *14*(6), 681–694.

[51] HAI. (2008). *NGO Thematic Shadow Report on Older Women's Rights in Tanzania* (No. CEDAW/C/TZA/6). HelpAge International.

[52] HAI (2019). *Impact Evaluation of the Zanzibar Universal Pension Scheme*. HelpAge International Tanzania Country Office. https://www.helpage.org/silo/files/impact-evaluation-of-the-zanzibar-universal-pension-scheme.pdf

[53] ILO(2017). *World Social Protection Report 2017–19; Universal social protection to achieve the sustainable Development Goals.* International Labour Organization. ISBN 978-92-2-130016-8 (web pdf)

[54] Devereux, S. (2002). Can Social Safety Nets Reduce Chronic Poverty? *Development Policy Review*, 20(5), 657–675.

[55] Knox-Vydmanov. C. (2010). *'Are Universal Pensions Affordable in Africa?'.* HelpAge International , Issue 36: 5-9

[56] Kaseke, E. (2005). Social security and older people: An African perspective. *International Social Work. 48(1),* 89–98.

[57] Rwegoshora, H. (2016). *Social Security Challenges in Tanzania; Transforming the Present Protecting the Future*. Dar es salaam: Mkuki na Nyota Publishers.

[58] URT. (2022). *The 2022 Population and Housing Census: Age and Sex Distribution Report, Key Findings*, Tanzania, December 2022.

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