

Article

# Living longer: implications of childlessness among tomorrow's older population

In the future, there will be more older people and a higher proportion of those will be childless. Because adult children are the most common providers of informal social care to their parents at older ages, this is likely to increase the demand for paid-for care.

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## Table of contents

1. [Introduction](#)
2. [Main points](#)
3. [Patterns of births in the 20th century](#)
4. [Differences in childlessness in the three large 20th century birth cohorts](#)
5. [The number of people reaching old age without children](#)
6. [Why were levels of childlessness high for women born in the 1960s?](#)
7. [Among those who had children, did childbearing patterns differ?](#)
8. [What are the informal care implications of high levels of childlessness for future older populations?](#)
9. [Social care and older people by ethnicity and socio-economic classification](#)
10. [Have there been changes in the proximity and willingness of children to provide care between cohorts?](#)
11. [Are we meeting the care needs of the current older population?](#)
12. [What are the implications of higher levels of childlessness for future formal care demand?](#)

# 1 . Introduction

Our population is ageing because of declining fertility and an increase in life expectancy. It is important to investigate the characteristics of current and future older populations to understand and plan for the implications of an older population on society. It is particularly important to be able to estimate the level of demand for social care, especially for those at the oldest ages who are more likely to require it.

In this article we compare childbearing patterns, focusing on women completing childbearing years without children for the three largest cohorts (all the people born in a particular period or year) born in the last 100 years. We then explore the potential implications of childlessness among these cohorts for future social care demand and provision.

## 2 . Main points

- Peaks in the numbers of births post-World War 1 (WW1), post-World War 2 (WW2) and in the 1960s mean there are relatively large numbers of people now aged in their late 90s, 70s and 50s respectively.
- Women born in the peak of the 1960s baby boom (currently aged in their mid-50s) are twice as likely not to have had children as women born post-WW2 (currently aged in their mid-70s).
- High levels of childlessness among the 1960s baby boomers combined with increases in life expectancy mean there will be many older people in the future who do not have adult children.
- Adult children are the most common providers of informal social care to their parents at older ages when care needs are greatest.
- While there is no overall difference in the proportions of older people with and without children receiving care, those without adult children are more likely to be in receipt of formal (paid-for) care than those with children.
- Increased levels of childlessness among older people in the future are likely to increase demand for formal care.

## 3 . Patterns of births in the 20th century

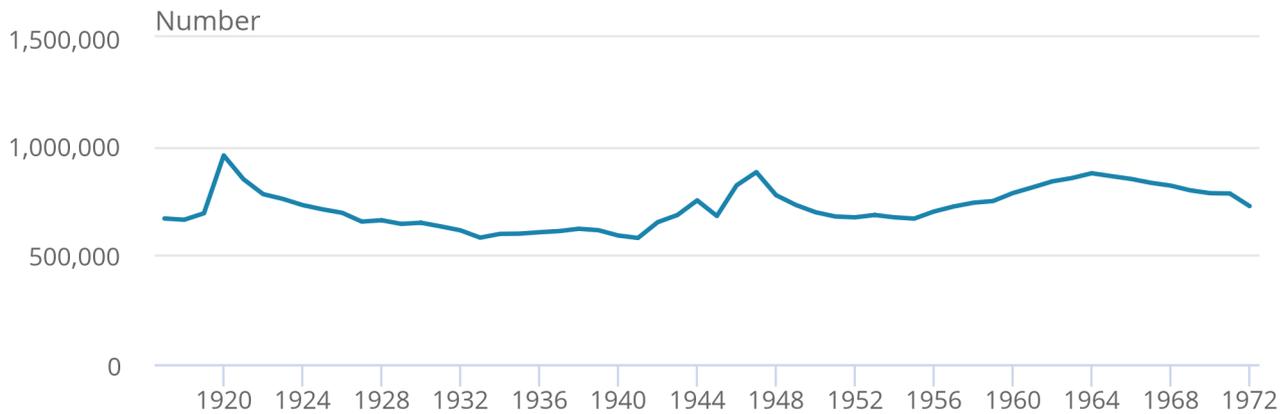
Numbers of births have fluctuated throughout the past 100 years (Figure 1). There were spikes in births after the end of World War 1 (WW1), peaking at 958,000 in 1920, and World War 2 (WW2), peaking at 881,000 in 1947. There was also a sustained increase in births occurring across the 1960s, peaking at 876,000 in 1964. Combined with decreases in mortality over the 20th century, this has resulted in relatively large numbers of people now aged in their late 90s, 70s and 50s respectively who were born at these times of high birth rates (cohorts).

**Figure 1: Numbers of births peaked post-WW1, post-WW2 and in the 1960s**

Number of live births in England and Wales, 1917 to 1972

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Number of live births in England and Wales, 1917 to 1972



Source: Office for National Statistics

## 4 . Differences in childlessness in the three large 20th century birth cohorts

Childbearing patterns were very different for these three large cohorts. One in five women born in the post-World War 1 (WW1) spike did not have children, compared with 1 in 10 women born just after World War 2 (WW2). The proportion of women who remained childless rose following WW2, reaching one in five for the large cohort born in the mid-1960s, a similar level to women born after WW1 (Figure 2).

**Figure 2: Percentage of women remaining childless by birth year, 1920 to 1972 and number of women childless at age 80 years, 2000 to 2052**

England and Wales

Notes:

1. Figures for the number of women childless at age 80 is an estimate based on the mid-year estimated populations and projected populations of women aged 80 multiplied by the proportion who remained childless.
2. Estimates for childless women may include those who have adopted children or have step-children.
3. Data on number of children is only available for women born from 1920 onwards.
4. Data on number of children is not available for men using birth registration data.

#### Download the data

[.xlsx](#)

## 5 . The number of people reaching old age without children

Changes in levels of childlessness result in an increasing number of women<sup>1</sup> from the late 2020s onwards who are projected to reach age 80 years without having had children<sup>2</sup> (Figure 2). In 2019, there were estimated to be 23,000 women aged 80 years in England and Wales who did not have children. By 2045, when the large 1960s cohort with a high proportion of childlessness reaches age 80 years, this is projected to increase to 66,000, over three times the current number.

While the 1920s cohort was large and had similar levels of childlessness to women born in the 1960s, mortality levels were higher in the past, so fewer women born in 1920 reached age 80 years, with or without having had children. [Only 46% of women born in 1920 survived to age 80 years, while 75% of women born in 1964 can expect to](#). While the post-World War 2 (WW2) cohort was also large, they had low levels of childlessness, resulting in relatively low numbers projected to reach old age without having had children, despite a projected 2027 spike in the number of childless women aged 80 years resulting from the post-WW2 baby boom.

#### Notes for: The number of people reaching old age without children

1. Survey data suggests that there are similar patterns for the number of men reaching old age without children (English Longitudinal Study of Ageing, Wave 8, 2016 to 2017).
2. Actual levels of childlessness at older ages will be higher than presented here, because not all children survive until their parents reach old age.

## 6 . Why were levels of childlessness high for women born in the 1960s?

Childbearing and fertility patterns are determined by complex factors; there are many possible reasons for not having children, including a positive choice by some to remain child-free. For women born in 1920, [World War 2 was a major factor in their high levels of childlessness](#), as it occurred when these women reached an age where they would normally be forming partnerships and having children.

The causes of high levels of childlessness among women born in the 1960s are not so clear. Previous research has suggested some possible causes:

- [more women postponing childbearing until the biological window has passed](#)
- [an increase in female employment](#)
- [increased childlessness for women with higher education with more women attending university in the 1960s \(PDF, 1.21MB\)](#)
- [a change in cultural attitudes towards childlessness](#)

## 7 . Among those who had children, did childbearing patterns differ?

Women born in 1965 (currently aged 55 years) are twice as likely to have remained childless than women born in 1945 (currently aged 75 years). However, comparing the childbearing patterns of women who did have children (excluding those who remained childless), the patterns are almost identical, with both the post-World War 2 (WW2) and 1960s cohorts having similar numbers of children, and two children being the most common (Figure 3).

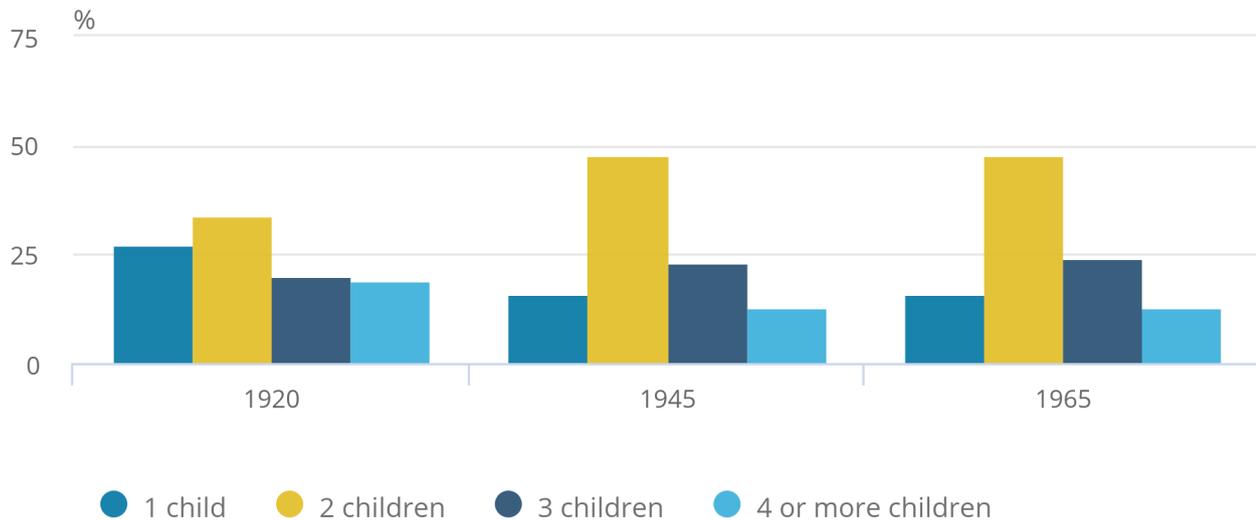
The post-World War 1 (WW1) birth cohort of women had a different pattern of childbearing among the women who had children. Although mothers born in 1920 were more likely to have large families of four or more children than those born in 1945 and 1965, they were also more likely to have only one child (Figure 3). [This may have been because their marriage and childbearing was delayed or disrupted by WW2.](#)

**Figure 3: Women born in 1945 and 1965, who had children, had similar numbers of children but those born in 1920 had different family sizes**

Percentage of women who had children, by number of children, for selected years, England and Wales

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Percentage of women who had children, by number of children, for selected years, England and Wales



Source: Office for National Statistics

Notes:

1. Data are excluding women who remained childless.
2. The birth registration system does not collect information on the number of previous children a man has had.

## 8 . What are the informal care implications of high levels of childlessness for future older populations?

In the future, there is projected to be an increased population of both older women and men who are ageing without children. Although it is not possible to estimate the proportion of men who are childless using birth registration data, survey data suggest that levels of childlessness among men in the large post-World War 2 (WW2) and 1960s cohorts, [the vast majority of whom will now have completed childbearing \(PDF, 1.17MB\)](#), are similar to those for women in these cohorts<sup>1</sup>.

What might these high levels of childlessness among tomorrow's older people mean for future informal care provision? We can shed some light on this by exploring social care provision for the current older population, comparing those with and without children.

People are increasingly likely to have care needs as they age. Most older people live in private households; [only 3.5% of those aged 65 years and over and 15% of those aged 85 years and over in England live in care homes](#).

Care most often comes in the form of informal care provided by close relatives or friends; 43% of people aged 85 years and over living in a household receive informal care from a friend or relative, compared with 20% who receive care from a formal care provider. While spouses are often providers of care and are the most common provider for those aged 65 to 74 years (Figure 4), at older ages, spouses may no longer be able to provide care, have care needs themselves, or become widowed.

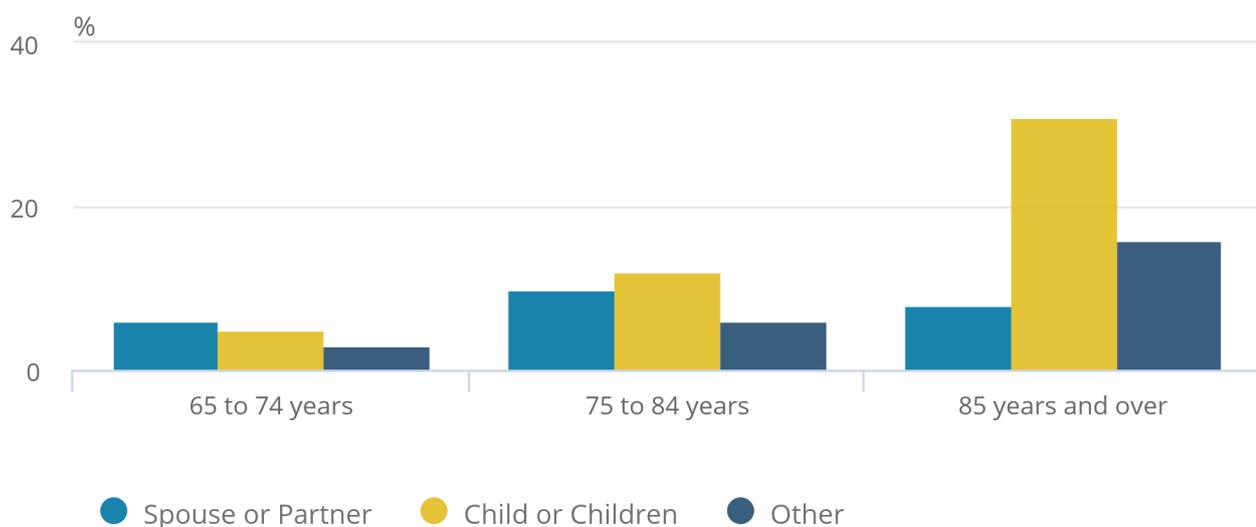
When care needs become greatest, children are the most common providers of informal care, with just over 3 in 10 people aged 85 years and over receiving informal care from their children (Figure 4). While 16% of this age group receive care from their wider network of family or friends, 20% of people aged 85 years and over rely solely on their adult children for informal care and do not receive informal care from anyone else.

**Figure 4: Adult children are the most common providers of informal care for those at the oldest ages**

Percentage of older people receiving informal care by age group and informal care provider, England, 2018

Figure 4: Adult children are the most common providers of informal care for those at the oldest ages

Percentage of older people receiving informal care by age group and informal care provider, England, 2018



Source: Health Survey for England, 2018

Notes:

1. Other informal care providers represents a wider network of family or friends.

By 2040, there will be a large number of people aged in their 70s who do not have children. These people will be in their 80s in 2050, by which time many of them will require care. Although overall there is no difference in the proportion of those aged 65 years and over receiving some form of care according to whether or not they have children, a lower proportion receive informal care when they have no children (16%) compared with those who have children (21%).

Conversely, a higher proportion of childless older people receive a form of formal care (12%) than those with children (7%). This suggests that an increase in childlessness at older ages in the future will lead to increased demand for formal care.

Table 1: Percentage of those aged 65 years and over in receipt of care, England, 2016 to 2017

	No children	Have children
<b>Informal care</b>	16	21
<b>Formal care</b>	12	7
<b>All care</b>	23	24

Source: English Longitudinal Study of Ageing, Wave 8, 2016 to 2017

Notes

1. Informal and formal care do not sum to all care because some people receive both.

**Notes for: What are the informal care implications of high levels of childlessness for future older populations?**

1. [Analysis of data from the English Longitudinal Study of Ageing, Wave 8, 2016 to 2017](#)

## 9 . Social care and older people by ethnicity and socio-economic classification

### Ethnic group

Those aged 65 years and over in the Black, Asian and minority ethnic <sup>1</sup> groups are more likely to receive informal help with tasks related to activities for daily living from their adult children (18%) compared with White groups (10%). Also, among older people receiving care from an adult child, 44% of those from a Black, Asian and minority ethnic group receive care from a child living in the same household compared with 18% of those from a White group. This reflects the [differences in household structure by ethnic group](#).

### National Statistics Socio-economic classification (NS-SEC)

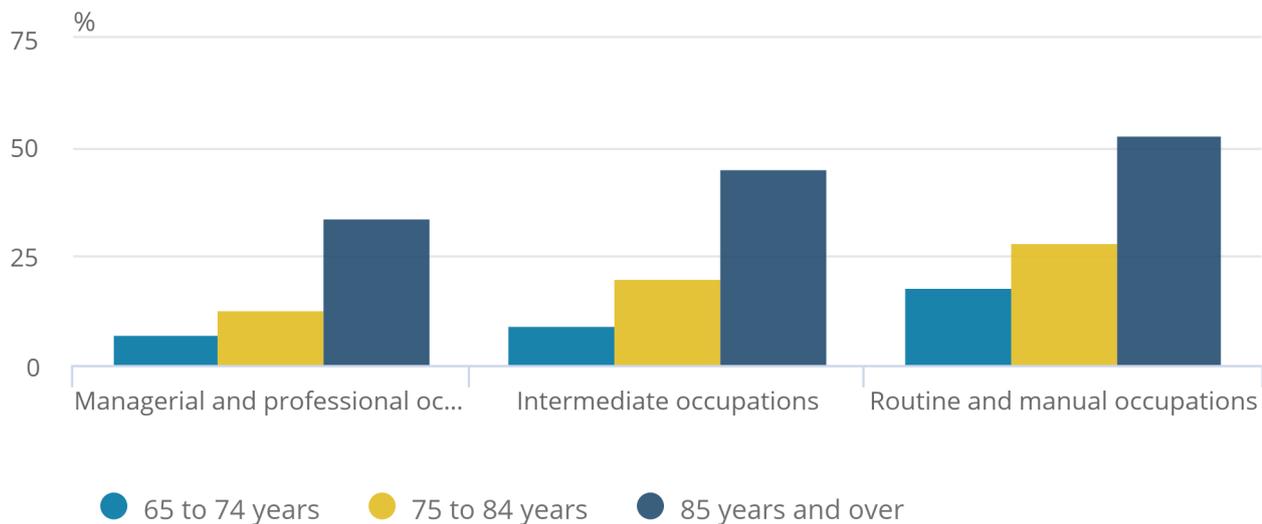
Although there are no significant differences in the likelihood of those aged 65 years and over in different socio-economic groups receiving formal care, there are differences in the likelihood of receiving informal care. Those (previously) in routine and manual occupation groups are the most likely to receive informal care (with adult children being the most common providers) followed by those in intermediate occupations, with those in managerial occupations the least likely (Figure 5).

**Figure 5: Older people who had worked in routine and manual occupations are the most likely to be receiving informal care**

Percentage receiving informal care, within older age groups and National Statistics Socio-economic Classification (NS-SEC), England, 2016 to 2018

Figure 5: Older people who had worked in routine and manual occupations are the most likely to be receiving informal care

Percentage receiving informal care, within older age groups and National Statistics Socio-economic Classification (NS-SEC), England, 2016 to 2018



**Notes:**

1. Those classified as "Other" have been excluded from the analysis because of small sample sizes.

There are multiple factors that could contribute to the differences in provision of care by adult children by ethnic group and socio-economic group, including level of care needs, proximity of adult children to their parents as well as economic and cultural factors.

Differences in childlessness rates may also play a part in the social care patterns observed. There are lower rates of childlessness amongst the current population of Black, Asian and minority ethnic people aged 65 years and over (9%) than older White people (15%)<sup>2</sup>, and lower rates for those aged 65 years and over from manual and routine occupations (9%) than for intermediate (11%) and managerial and professional (13%)<sup>3</sup>.

Childlessness rates for the large 1960s cohort who have not yet reached older age are also lower for Black, Asian and minority ethnic groups<sup>4</sup> and for routine and manual socio-economic groups. This suggests that the current differences in levels of care provided by adult children between different groups may persist in the future.

**Notes for: Social care and older people by ethnicity and socio-economic classification**

1. Survey sample sizes are too small to enable reliable breakdowns by specific ethnic minority groups.
2. Understanding Society, Wave 9, 2017 to 2019. (Biological children only).
3. English Longitudinal Study of Ageing (ELSA), Wave 8, 2016- 2017 (Step, foster and adoptive children were included if respondent asked about these).
4. Understanding Society, Wave 9, 2017 to 2019. (Biological children only).

## **10 . Have there been changes in the proximity and willingness of children to provide care between cohorts?**

Among older people who have children, the potential for their adult children to provide care is dependent on the availability of the children to provide care, their proximity to their parents, and the children's relationship with their parents.

While having a child is a requirement for receiving care from a child, they may not be able or willing to provide informal care. According to [Ageing Well Without Children](#), those ageing without children also includes “people who have had children, but those children have predeceased them or they are unable to offer help or support because they live at a great distance or have care needs of their own” and “people who have had children, but those children are unwilling to offer help and support because they are estranged or have no contact.”

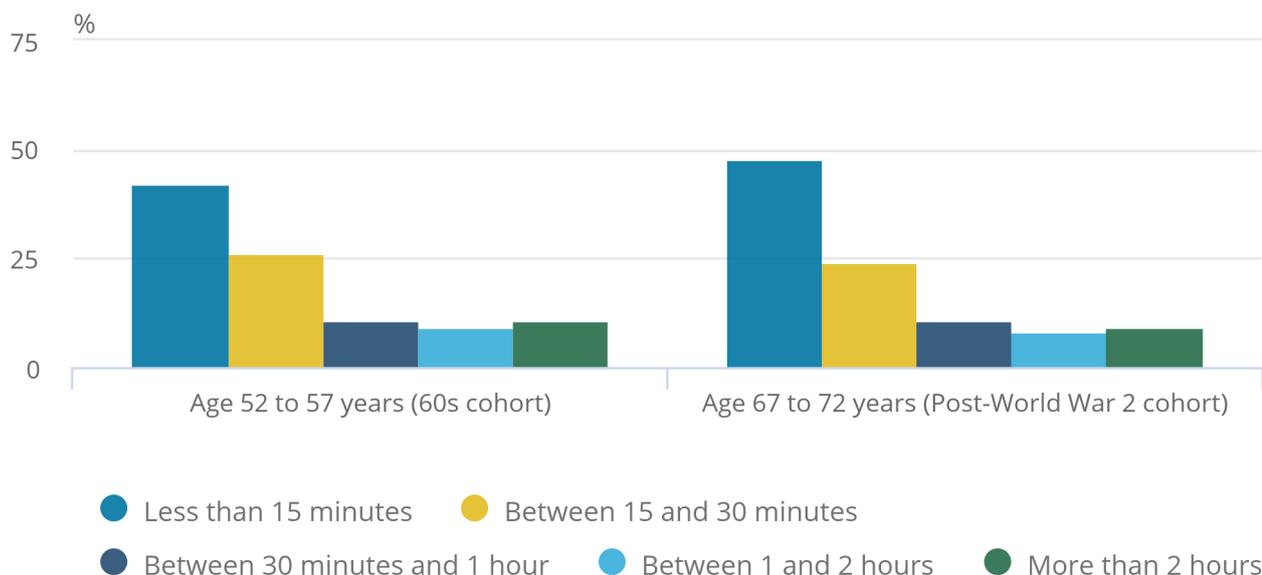
In the English Longitudinal Study of Ageing (ELSA)<sup>1</sup> we found that the large post-World War 2 (WW2) and 1960s cohorts were similar in terms of their proximity to their children (Figure 5). For those who have at least one child living outside of the household, 42% of the 1960s cohort and 48% of the post-WW2 cohort could travel to the child living closest to them in under 15 minutes (Figure 5). However, around 1 in 10 people in both cohorts reported it would take over two hours to travel to their nearest child, meaning a substantial number of people in these age groups do not have any children living nearby<sup>2</sup>.

**Figure 6: Around two in five of those born in both the post-WW2 and 1960s cohorts live within 15 minutes of their nearest child**

Time taken to travel to the nearest child by selected age groups, England, 2016 to 2017

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Time taken to travel to the nearest child by selected age groups, England, 2016 to 2017



Source: English Longitudinal Study of Ageing, Wave 8, 2016 to 2017

Notes:

1. Includes only those with an adult child living outside of the home.

A large proportion of both cohorts maintain regular contact with their children. Over half of the post-WW2 cohort (58%) and just under half of the 1960s cohort (49%) meet up with their children at least once a week. Although there is a small difference, this may be the result of factors such as the relative ages of the children and parents. Around three-quarters of both cohorts also speak to their children on the phone at least once a week.

The post-WW2 cohort felt they were more able to rely on their children if they have a problem and to open up to them to talk about worries; 72% felt they could rely on their children “a lot” compared with 52% of the 1960s cohort, although this may be influenced by the difference in age of the respondents and age of the children.

Although mothers born in the 1960s are less likely to have children, there is no evidence to suggest that the children of the 80% of this cohort who are parents are any less able (in terms of distance) or willing (in terms of frequency of contact) to provide care or support to their parents than the post-WW2 cohort.

In terms of social relationships and support, of parents aged 70 years and over in the UK, [47% regularly receive help](#) from a child not living with them, and 46% give help to their children with things such as lifts, shopping or financial help. Those without children do not have access to this giving and receiving of help and do not benefit from the regular social interaction and support structure that having children can provide.

Within the English Longitudinal Study of Ageing (ELSA), there is no evidence that those without children compensate for the lack of these social interactions with children by meeting more frequently with others. In fact, there is some evidence that they are less likely to meet with other family members than those with children (perhaps a reflection of not having grandchildren). They are, however, more likely to report feeling that they could rely on friends “a lot” if they had a serious problem, compared with those with children.

### **Notes for: Have there been changes in the proximity and willingness of children to provide care between cohorts?**

1. Comparisons of cohorts is based on selected age ranges driven by the availability of data in ELSA. For the 1960s cohort, ELSA data is only collected for those aged 52 years and over and therefore excludes those born in the second half of the 1960s.
2. Proximity patterns could change to some degree for both cohorts in the future, for example adult children may relocate for work reasons and the 1960s cohort, who have not yet reached retirement age, may move at retirement.

## **11 . Are we meeting the care needs of the current older population?**

There are currently substantial unmet care needs among today’s older population, particularly at the oldest ages. Unmet care needs are defined as people who require help with at least one activity of daily living such as dressing, eating or taking medicines, who do not receive help with this activity. [17% of 65- to 69-year-olds have an unmet care need](#) involving at least one activity of daily living; this rises to 41% for ages 80 years and over.

Unmet care needs are likely to increase as the large 1960s cohort, many of whom have no children, reach older ages.

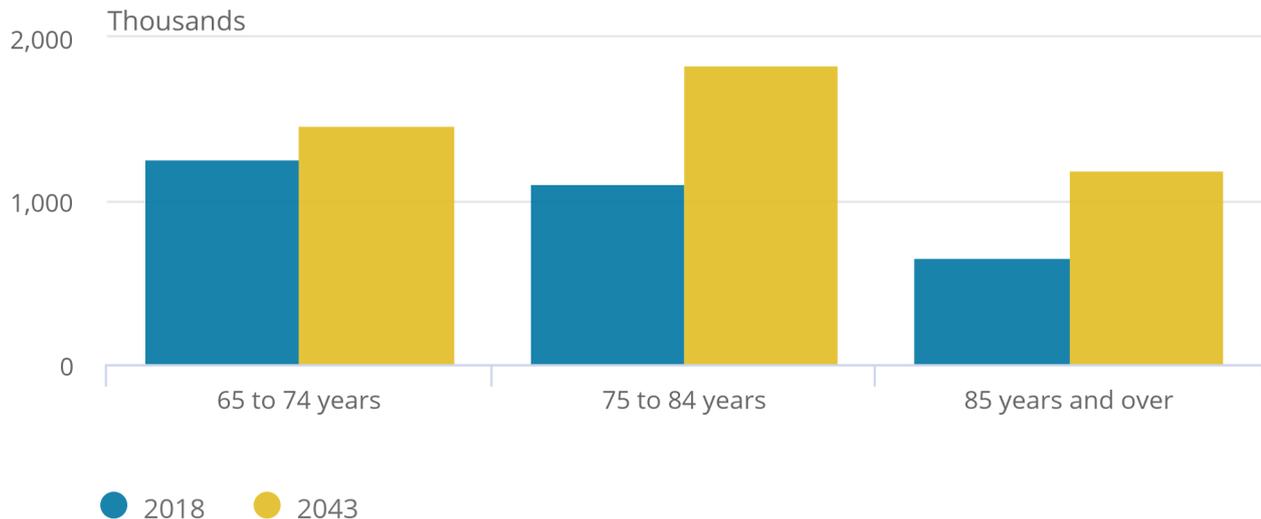
Despite an [increase in the proportion of people aged 70 years and over who are married](#) over the last decade (reflecting increasing life expectancy and a growing trend for remarriage in later life), large numbers of older people in the future are projected to live alone (Figure 7). In addition, there has been shown to be a [wider cost to those living alone](#) in terms of their well-being.

## Figure 7: The number of older people living alone will increase in the future

Current and projected number of people living alone by age group, England, 2018 and 2043

### Figure 7: The number of older people living alone will increase in the future

Current and projected number of people living alone by age group, England, 2018 and 2043



Source: Office for National Statistics

## 12 . What are the implications of higher levels of childlessness for future formal care demand?

Although there is no evidence that the children of tomorrow's older population will be any less willing or able to provide care for their parents than the children of today's, there will be much larger numbers of older people in the future who do not have children.

While older people, with and without children, are equally likely to be in receipt of care, for those without children, a higher proportion of this care is formal care. Higher levels of childlessness among the older population in the future therefore implies demand for formal care will increase, (and this is in the context of the substantial unmet care needs today).

When asked to think about their future care, a higher proportion of those aged 65 years and over without children had a high expectation of ever moving to a nursing home than those with children and 30% without children considered themselves to have a high likelihood<sup>1</sup> of needing formal care in the future, compared with 22% of those with children.

Not only do current patterns of care suggest that an increase in the level of childlessness among older people in the future will lead to increased demand for formal care, older people's expectations, in terms of their own personal circumstances, are in accordance with this.

**Notes for: What are the implications of higher levels of childlessness for future formal care demand?**

1. A 'high likelihood' is defined as respondents reporting over 50% on a scale of likelihood from 0% to 100%.