FERTILITY AND FAMILY CHANGE IN SPAIN

Towards doom or complexity? Realities and stories regarding demographic ageing

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Gilberto and his mother Ángela watch television from the kitchen of their home. They live alone in Campelo, a village in the rural mountain area of Lugo, in Galicia. The photo, taken in 2022, is part of the project 'Lumes', which portrays from within a way of life that is on the verge of extinction in today's rural Galicia. Photography by Adra Pallón

Demographic ageing is a complex process that goes far beyond simple changes in percentages; it transforms populations and makes them more sophisticated. However, in the hegemonic public narrative, we still do not recognise ourselves as the population we have already become.

The discourse regarding demographic ageing often gets lost in issues of how to reverse the irreversible or rejuvenate the population. Although demographic ageing is the result of multiple achievements, it is often seen as a threat. And despite there being no cyclical element involved, it is presented as a passing crisis, the solutions to which are always simple and external. Although it is a phenomenon that affects the world's population as a whole, it is often attributed a distinctive character, linked to certain cultural values. All these commonplaces have gradually served to build a collective imaginary that associates demographic ageing with adversity, to which may be added the parallel drawn with individual ageing. In populations, ageing is not the stage before disappearance, but a stage in which these populations become more complex. And despite the emphasis on birth rate – which is often the focus of magic recipes – this profound change in our populations follows

on from a major transformation in survival.

The steady rise in survival over the past 150 years has brought about a profound transformation in the reproductive system of societies. This change in reproduction has, in turn, changed populations in many ways. The Spanish population has been demographically modern for the last 30 years, with low mortality and low birth rates. This implies a process of transformation towards more vertical age structures which, despite demographic ageing, entails more severe transformations. The trend in demographic dynamics is creating new scenarios in coexistence between different generations. Scientific research is still exploring the implications of their combined effect.

Demographic change

For the last century and a half, human longevity has been increasing at a rate of three months a year. [1] This trend – surprisingly stable over 150 years – has led to a striking transformation in the reproductive system. Mortality and fertility are closely linked in all species, thereby ensuring the reproduction of the population. For tens of thousands of years, human life expectancy was 30-40 years. High infant mortality made high fertility rates necessary to ensure the replacement of adult populations and thus the reproduction of the species. The gradual but steady increase in life expectancy has altered this situation. After a century and a half of declining mortality rates at all ages, and with life expectancy now exceeding 80 years (Figure 1), the reproductive effort among younger generations has adapted to a scenario of high survival. In 2023, life expectancy at birth in Spain was 83.7 years (81.1 for the male population and 86.3 for the female population). The function of high birth rates in the reproductive system a century ago is now met by longer life spans and overlapping generations. This profound transformation in human reproduction is known as *demographic transition*. [2]

At the beginning of the 20th Century, the Spanish population was already immersed in full demographic transition (Figure 2). A downward trend in mortality had begun and continued into the 1970s, the only exceptions being mortality caused by the 1918 influenza epidemic and the Spanish Civil War. Thereafter, with infant mortality already very low, survival continued to increase at older ages, having little impact on crude mortality rates. The birth rate declined throughout the century until the 1990s. After more than a century of change, the crude rates for both dynamics returned to magnitudes similar to those in the mid-1990s, at which point the demographic transition could be considered to have finished for the Spanish population; it has therefore been a post-transitional population for 30 years.

The fall in mortality was followed by a decline in fertility: in longer-lived populations made up of multiple overlapping generations, there is no need for high fertility rates. All post-transitional European populations have fertility rates below the current replacement threshold. [3] This change in the reproductive system has transformed populations in many ways. The first consequence is that populations will no longer grow, at least not in any significant or sustained way, if there is no migration. Natural growth is the exception in the

history of a population; it only occurs during the transitional stage, when mortality and birth dynamics are separate. Such exceptional population growth was seen during the 20th century in Europe.

A second consequence of the demographic transition is the change in age structure. A population that generates fewer children to reproduce itself, because all those born survive for longer, is, logically, a population with fewer children and more older people. This transformation towards more vertical age structures is known as *demographic ageing*, due to the increase in the proportion of older people (Figure 3). In 1971, people aged 65 and over accounted for 9.6% of the Spanish population. At the turn of the century, this proportion was already 16.8%, and by 2024 it was 20.4%.

More generations

Post-transitional populations are not only made up of larger numbers of older people, but also of more diverse ages belonging to more generations. Pre-transitional populations have two and a half generations; post-translational ones have four. Five decades ago, half of the population was made up of people under the age of 30, while the other half was made up of all other adults (Figure 4). We now have a more age-diverse population, with children, adolescents and young people under the age of 30 making up approximately one third of the population. The adult population between 30 and 60 years of age accounts for slightly more than the other third, and the population over 60, in middle and old age, accounts for slightly less than a third. Thus we find ourselves with a more diverse society, in which the bulk of the population is not concentrated in a single age group.

For example, if we look at the trend among potentially active ages, after the passing of the baby-boom generation, the construction of adulthood is characterised by its shift towards a more stable balance in the volume of the ages within it. In 1971, there were 17,301,000 people aged 25-69. In 2024 this figure was 29,744,129 and in 2040 it will probably be 32,299,750. Five decades ago, the young population made up a very significant proportion of the adult population. In the current and future adult population, the overlap of multiple generations of similar proportions is and will be more significant than the presence of a single generation.

Delayed transitions, more youthful years

Longer lives in generation after generation have given rise to new life stages, not only at the end of life. Nonagenarians and centenarians are the fastest growing populations today. In 2000, there were 200,000 people aged 90 or over (0.5%); in 2023, the figure exceeded 600,000 (1.3%). As a population, we are reaching ages that were previously obtained by only a few exceptional individuals. We are therefore incorporating new ages into the collective life course.

But longer life spans mean many transitions have been delayed and new stages have been created at different points in life. For example, the generations born at the beginning of the 20th century had no adolescence, as they started working at an average age of 14. Prolonging the life course has allowed later generations to live an intermediate age between childhood and adulthood, with a longer period of youth and more time spent in education, delaying the transition to adulthood. For example, compared to the generation born in the 1930s, women born 30 years later delayed all their life transitions. [4] And not only did they delay them, they also changed the order of certain transitions, affecting the potential burden of care in later life.

With regard to the onset of old age, some authors already refer to *gerontolescence*, [5] meaning people aged between 60 and 80 who nowadays have a high level of autonomy and are the main pillars of support for other family generations. [6] Thus, the division of the life course into three ages – childhood, adulthood and old age – which we continue to use in numerous indicators no longer matches the reality of post-transitional populations.

Some authors even question whether the population is ageing, claiming that it is in fact getting younger. [7] These hypotheses are based on trends in longevity and longevity in health. Rather than taking the beginning of the life course as the starting point, we instead it take the end as a reference, then at any given age, each generation is relatively younger than the previous one, because their expected remaining life span from that age is longer. For example, in the Spanish population in 1975, the moment at which life expectancy was less than 15 years was at the age of 66, while it was 70 in 2000 and 74 in 2023 (Figure 5). In terms of life expectancy, the age of 66 in 1975 can thus be interpreted as equivalent to 74 in 2023. Equally, at any age, the length of time we can expect to live in good health is longer than in any previous generation of the same age; we are therefore younger than any previous generation at that age.

From natalist marketing to municipal geopolitics

Demographic dynamics in general – and demographic ageing in particular – were incorporated into the Spanish political agenda in 2017 with the creation of the Commissioner for the Demographic Challenge. The Commissioner's main responsibility is to address the "development of actions needed to achieve balance in the population pyramid" as a problem to be solved. [8] The Spanish strategy was not based on empirical evidence and ignored the academic debate in demographics. It adopted a nostalgic, incrementalist perspective, which aimed to reverse the demographic transition and return to youthful populations. Adopting approaches that were more ideological than knowledge-based, a discourse was constructed – supported by extensive marketing campaigns in some regional plans – that shifted the responsibility for problems in the welfare system onto the population, due to the supposed selfishness expressed in low birth rates. Unfortunately, in pretending to be young populations again, we wasted precious time which could have been used to adapt our welfare models to the new forms of ageing populations.

We will never again be populations of children, adults and the elderly; we will never again be young populations with serious health problems; we will never again be populations with large multi-generational households and generations of non-working adult women who sacrifice their lives to care for other family members. While all these changes were taking place, we in science gave warnings and expressed the need to adapt to a new scenario, but we were branded pessimists and the public debate was distracted by questions about how to reverse the irreversible.

The Spanish strategy to address the demographic challenge changed its focus when responsibility switched to the Ministry for Ecological Transition and the Demographic Challenge (2020), which presented the “Recovery Plan: 130 measures to meet the demographic challenge”. [9] This plan allows any policy to be considered as demographic-related as long as it affects people. The new demographic policy is flawed by an all-encompassing approach, includes policies that affecting rural municipalities, driven by a municipalist vision that treats municipal scale and size as defining factors. Thus, we have switched from natalist marketing to municipal geopolitics, from blaming the population to ignoring it.

In our country’s population policy, there is little reference to care ecosystems, active ageing, care environments and integration strategies. It has forgotten that the ultimate goal of population policy is not people, but people’s well-being at different stages of their life course. Adjusting health and care systems to the needs of a complex and ageing population should be a priority throughout the territory, but more so in areas with a large ageing population and an unbalanced generational structure. In both central metropolitan areas and scattered rural areas, we can find households with elderly people caring for other elderly people and elderly women living alone. In such circumstances, efforts have to be made to adapt the environment, starting with housing and continuing with the neighbourhood or neighbours. Promoting small home automation infrastructures and advanced monitoring devices would make it easier for frail elderly people to continue to care for each other and themselves safely and with a good quality of life.

In scattered rural areas, intense generational imbalance is compounded by difficulties in accessing services that are situated in and/or designed for urban areas, leading to emigration flows among people over 80 years of age, forced to leave their lifelong place of residence in search of care. It is not a matter of maintaining a given demographic volume, but about caring for the population already living in these areas and turning the care of this generation into an opportunity. Trying to export services designed for high-density areas is inefficient and results in poorer quality of life.

Herminia serves dinner to 93-year-old Victorina, while Pepe checks her medication. Photography by Adra Pallón

Conclusion

The same process that causes population ageing, the demographic transition, is changing the structures of coexistence in which different generations interact. The demographic transition opens a window of opportunity for far-reaching social change, as it puts demographic change at the heart of modernisation. Demographic change has profoundly transformed our societies, requiring adjustments to a new reality that will never be the same as before.

Ageing populations are more complex than pre-transitional populations. They are made up of individuals who are not only older, but of more varied ages. We need to start thinking of our populations in terms of multiple generations, which do not depend on the size of any one of them, but on how they overlap. In the population of the future, overlapping multiple generations of similar proportions will play a significant role. Today's populations are also built on longer, more diverse life courses, with delayed life transitions and new life stages. The division of life courses into three ages – childhood, adulthood and old age – no longer matches the reality of post-transitional populations. Nor do current populations correspond to the start and end thresholds for these ages, which we continue to use in multiple indicators, ignoring the significant extension to time spent in education and the lengthening of youth, as well as the increase in healthy life expectancy. At whatever age, we are younger than any member of a previous generation of the same age.

Demographic phenomena have their own dynamics, on which “demographic challenge” policies have very limited effects. Setting targets to recover past demographic structures is not only a miscalculation and nostalgic idealisation, it also has consequences in terms of inefficient allocation of resources and a frustrated population. Population policy must be framed in terms of adapting to demographic changes, with special emphasis on equity in access to services for maintaining well-being at different life points over time and in different geographical contexts. Aligning intergenerational solidarity and health and care systems with the needs of an ageing population is a priority. We will not meet this challenge with policies that shift the blame onto the population. Nor will we get people to stay in certain areas, in a context of increasing mobility, if these places are unappealing, if people’s needs are not met or if they are unattractive to live in with decent well-being, but are instead geared to extractive production. The focus of demographic public policy must be the search for equity in well-being throughout people’s life span, wherever they live.

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