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AGEING IN RURAL AREAS A REVIEW OF THE LITERATURE

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AGEING IN RURAL AREAS
A REVIEW OF THE LITERATURE

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ABSTRACT

This literature review aims at identifying important references that can facilitate the understanding of ageing in rural areas and the implications for wellbeing of older persons. While most of the paper reviews the international literature, the much smaller body of New Zealand literature is also reviewed. Rural ageing remains a seriously neglected topic in New Zealand. Some suggestions for future research in New Zealand are included. The literature review is undertaken for the development of new research that recognises that the experience of ageing in urban areas is significantly different from the experience of ageing in rural areas.

Keywords: rural community, ageing in place, retirement migration, rural support systems, spatial diversity

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1. Introduction

This paper explores a range of literature that can assist with the understanding of ageing in rural areas and the development of appropriate policies. It is part of the *Enhancing Wellbeing in an Ageing Society* (EWAS) research programme which states that “an important aspect of the research is the study of the support systems available to the elderly, and the support and other resources the elderly provide themselves to society”. The urban experience is significantly different to the rural in this respect.

Before beginning to assess whether or not rural communities are good places in which to grow old we need research programmes in place to try and help us understand the diversity of rural life. There are two contradictory assumptions about living in rural communities. The first is that rural communities are supportive because people know one another and are caring. The second is that rural communities are unsupportive because there are few government services available. In reality, it is likely that there is as much diversity in levels of support for older people in rural areas as there is for their urban counterparts. Hence, the rural aspect of the EWAS research is critical in addressing the spatial dimension of the project.

Rural society has become marked by diversity in both rural communities and in agricultural production. The change in this interdependence of farming and rural communities has transformed the lives of elderly people in some areas. In areas with high amenity values the changes in the community are accompanied by a rise in property values and hence local authority and regional council rates. This has meant that some elderly residents on fixed incomes can no longer afford to “age in place”.

Given that much of the research on the ageing population to date has had urban bias, it is timely to begin considering data on the elderly in rural areas. As mentioned above, the needs of the older population in rural communities are expected to be different from those in urban areas. However, it must be kept in mind that not only is there a wide variation in rural areas but there is also a wide range in the experiences of people who spend their older age in rural areas. On one hand there are people who have worked and lived already for many years in a rural area and on the other hand there are the older people who have moved to the country to escape from the urban area they associate with their “working life”, and who have returned to country environs from whence they either came or spent much of their leisure time while working.

The rural elderly population is a topic that is beginning to attract more attention from researchers. Wenger (2001, 117) noted that although more than half of older people in the world live in rural areas, it was not until mid 2000 that the First Global Rural Aging Conference was held in America. Gerontologists have, until recently, tended to ignore the problems of the rural elderly and the literature that has focussed specifically on ageing in rural areas is sparse. This paper aims to discuss some of this literature to stimulate discussion and research on the realities of ageing in rural New Zealand.

2. Method and Overview of Research Covered

Most of the articles reviewed are informed by the disciplines of human geography, demography, sociology and social psychology. A few articles are drawn from the fields of

gerontology and economics. Most of the literature covers the 1990s to 2006. A few earlier articles are included either because they provided useful background work on the research of ageing in rural settings or rural life-course perspectives.

The majority of the articles are based on U.S. data and experiences. Articles from the other “lands of settlement”, Canada and Australia were also actively sought for inclusion, as it was considered that these countries would have similar experiences to New Zealand. Other research included was from the United Kingdom and the Netherlands. The articles are from a variety of sources. They include publications from printed journals, on-line journals, working papers from research centres and reports from Statistics New Zealand.

A related body of literature, not discussed in detail in this review, is migration – both migration at the time of retirement or seasonal migration in retirement. Walters (2002b) has published a bibliography summarising the most important recent literature on elderly migration and retirement migration in the U.S. and Canada, providing an interdisciplinary review of articles published between January 1990 and December 2000. Walters describes and evaluates 232 studies dealing with migration theory and methods, the determinants of later-life mobility, patterns of migration, destination choice, consequences of migration, local and regional development, seasonal migration, return migration and related topics.

Before the main issues identified in the literature are reviewed it is important to discuss what is generally taken to mean ‘rural’ in the literature. This is done in Section 3. Section 4 reviews how rural elderly have been categorised in the literature, while some of the challenges of designing and providing services for the rural elderly are outlined in Section 5. The review is then divided into three parts. First some of the international literature on the elderly population living in rural areas is discussed. This literature is divided into two sections. Section 6.1 examines some of the research reported from the countries of settlement – United States, Canada and Australia. Section 6.2 discusses some of the literature on aging in rural United Kingdom and some other European countries. Following this, the literature on ageing in rural New Zealand is considered in Section 7. Section 8 provides some suggestions for future research in New Zealand. This is followed by an appendix that contains a table with the range of issues being addressed in the EWAS research and the availability of literature that specifically addresses these issues in a rural context.

3. Main Features of Rural Environments Relating to the Elderly

In 1988 the *Journal of Rural Studies* 4(2), published a special issue “to provide needed insight into fundamental issues surrounding the meaning and measurement of ‘rurality’ as it relates to the elderly and into the more qualitative aspects of the rural aging experience” (Krout, 1988a, 101). Krout bemoaned the “lack of progress in rural gerontology” and argued that the place to begin an examination of rural aging was with a definition of ‘rural’ (Krout, 1988b, 104). His contention was that the term ‘rural’ “most commonly refers to three dimensions; occupational, ecological and socio-cultural” (Bealer *et al.*, 1965, in Krout, 1988b, 104).

The occupational dimension usually refers to the involvement of individuals in either agriculture or other extractive industries (forestry and mining) in the area’s economic base. For the elderly involved in agriculture a gradual disengagement from work was likely and work roles continued to play an important part of everyday life well into old age.

The second dimension, ecological, is the one that researchers studying rural phenomena have usually relied on for classification purposes (Krout, 1988b, 105). This classification refers to the population size and density and has almost always been used to differentiate rural from urban. A population size figure is often selected to separate rural from urban. In the United States in 1910, the Census Bureau used 2,500 for this purpose (Krout, 1988b, 105). In New Zealand, the rural population size is under 1,000. During the Review of Geostatistical Boundaries in 1989, rural centres were established with a population size between 300 and 999. The identification of these settlements enabled researchers to make a distinction between rural dwellers living in 'true' rural areas and those living in rural settlements or townships (Statistics NZ, 2005).

The third dimension, socio-cultural, refers to the commonly held behavioural norms and values permeating rural culture. As Rowles (1988, 1118) notes, rural places conjure up images of a bucolic, often agrarian, way of life. He argues that the socio-cultural aspect of rural life is characterised by three features: slow pace, rhythm and routine and small scale all "subsumed within an overarching construct, a sense of *'insideness'* that pervades the lifestyles of the ... elderly" (Rowles, 1988, 119). Rowles is particularly interested in how the elderly experience their physical and social environments.

It has been argued that changes in the economies of rural areas and the spread of modern communication technologies have replaced a distinctive rural culture with a "mass society" (Krout, 1988). However, a number of studies have found that although rural society has changed socially and economically there still exist important differences in values between rural and urban populations (Krout, 1988, 107). Indeed, as Rowles (1988, 121) stresses, "the experience of aging is ultimately a personal phenomenon ... [and] the experience of aging is determined by the unique lifeworld of the individual."

The statistical differences often quoted between rural and urban elderly may be just an indication that life is 'different' for each group, rather than that life conditions are better or worse in the town or country. As Kivett, (1988, 131), found "there appear to be a number of elusive qualities about a rural place that offset what might be otherwise interpreted as a less-than ideal life condition". The existence and importance of a unique rural value structure has been the subject of considerable debate for at least the past 50 years in the North American literature (Krout, 1988; Rowles, 1988).

4. Categorising Rural Elderly

In discussions on the elderly in rural areas it must be noted that any generalisations need to be treated with caution (Wenger, 2001a). The reason is twofold. First, Wenger argues that as we age we become more different from one another and, second, there is a wide range of variation across rural areas.

Researchers of older people in rural areas have come up with dichotomisations that include:

- those ageing "in place" where they have lived for many years, as compared with those who have come to the country to grow old (either to escape urban living for the first time or to return to their roots) (Rowles and Watkins, 1993; Wenger, 2001);
- those in the 'young-old' category (aged 65-74), still active and healthy and often moving for amenity reasons (McHugh and Mings, 1991), as compared with those in

the ‘medium-old’ (aged 75 to 84) or ‘old-old’ (aged 85 years and over) categories who may be frail or in poor health and who may then move for assistance (Conway and Houtenville, 2003);

- those dependent on government superannuation as the only or main source of income, as compared with those who have private superannuation, substantial capital, savings or other income (Wenger, 2001).

Researchers have also pointed out that individuals do not remain within a specific category. During a person’s older years they may pass through several categories (Rowles and Watkins, 1993). In addition, “older people in rural areas are as different from one another as they are from their counterparts in suburban and urban areas” (Wenger, 2001a, 118).

In order to avoid conceptual problems with ‘typology overlap’, several authors have developed dynamic life-course perspectives on the elderly – particularly those who migrate in later life. Life-course models are based on the idea that the preferences of migrants vary according to their personal attributes and their stage in the life course (Walters, 2002a). Litwak and Longino (1987), for example, offer a ‘developmental context’ model that outlines the sequencing and pressures leading to three basic types of movers among the elderly – retirement or amenity movers who are wealthier, married, and in better health; moderate disability movers who are poorer, widowed, and who need informal care-giving; and, major disability movers with chronic disability who are moving to an institution. The distinctive life-course attributes of each of these three groups allows for the examination of ways in which socio-spatial factors influence migration at different stages in the life course. Research has shown that “the seeds to ... place attachment in aging are sown in earlier stages of life” (McHugh and Mings, 1996, 538).

Personal attributes such as widowhood, disability, income and homeownership are also characteristics that must be taken into account in research on rural ageing. The literature on the effect of these characteristics on later life mobility has been summarised by Walters (2002b, Section 4.1). In addition, housing tenure and years of residence in an area have been shown to be successful predictors of mobility (Walters, 2002b, 44). Place attachment for older people appears to be “strongly associated with the establishment and maintenance of a permanent dwelling – with home ownership, the presence of personal possessions in the home, and the modification of the home to reflect individual tastes and preferences” (Walters, 2002b, 40-41).

Official reports on the elderly in New Zealand, published by Statistics New Zealand, define elderly people as anyone aged 65 years and over:

This has been chosen as it is currently the age of eligibility for National Superannuation in New Zealand and an internationally accepted point of transition. In order to capture their diversity and life stages, elderly people will be divided into three age groups: young-old (65-74 years), medium-old (75-84 years) and old-old (85 years and over) (SNZ, 1998, 9)

5. The Rural Challenge

To understand the subjective and objective wellbeing of the rural elderly, the myths surrounding rural ageing must first be identified and understood (Krout, 2003; Wenger, 2001a). Indeed, studies using statistical methods have found that the 'morale' among four differing groups of respondents could not be explained by any one correlate (Kivett, 1988, 130). In addition, the ability to account for subjective wellbeing varied as much as the factors influencing morale.

Planners must be careful to enhance and build upon existing systems rather than interrupt them. As Kivett (1988, 131) noted:

The challenge is to neither over-represent nor under-represent the needs of the older rural population but rather to investigate in as unobtrusive a manner as possible their 'real' world as perceived by them. This process involves thoughtful observation and cooperative planning with the target group itself.

Researchers appear to agree that although rural and urban environments have many common characteristics there are differences. It is these differences –together with differences in needs and resources – that must be taken into account when service provision is being planned. The background, degree and nature of these value differences need to be included and investigated more thoroughly in future research. As Kivett (1988, 126) cautioned "Policies and programmes developed from classical needs surveys and objective measures alone will continue to address unfounded issues and to fall short of meeting important needs".

Programmes designed for urban areas typically do not translate well into rural areas as they cannot be sustained for a variety of reasons (Goins, 2004). Elderly people living in rural areas need accessible community-based services that overcome the barriers of transportation, lack of resources and limited funding.

The basic questions in need of more precise research identified by Krout (1988, 109) were:

- To what degree and for what reasons do the rural elderly evidence significantly different health status and behaviours than the elderly residing in other community settings?
- What commonalities and variations exist among rural elderly populations in health related experiences, attitudes and behaviours?
- How do the salient aspects of rural environments affect all of these?

The issue that needs to be addressed in research on older people is that life is different between various sub-groups of the elderly rather than better or worse. The central problem in research on elderly people living in a rural environment is to explain how residing in a rural area affects the elderly, both directly and indirectly.

6. International Literature

Almost all countries face questions about how rurality influences the lives of older people and how best to respond to their social and health needs. Researchers seem to agree that 'rural elders' are very diverse in their characteristics and needs. They live in a large variety of communities with unique resources and problems. Although individuals living in rural areas

can be very different, there are certain aspects of life in rural areas that they share as a result of where they live (Wenger, 2001).

6.1. Research from the United States, Canada and Australia

Research available at the end of the 1980s on the rural elderly in America was critically examined by Krout (1988b). The same author also edited a special issue of the *Journal of Rural Studies* on rural ageing (Krout, 1988a). Since then Krout has continued to publish journal articles and books on ageing in rural America and in his capacity as the Director of the Ithaca College of Gerontology Institute he has recently completed and submitted for approval a proposal for B.A. and B.S. degrees in gerontology at New York State University. Many of the major themes in his literature have already been mentioned in preceding sections.

An important centre for research on the rural elderly in the U.S. is the West Virginia University (WVU) Center on Aging. This Centre is a United Nations Programme on Ageing Advisory Site on Rural Ageing and has developed a Plan of Action on Rural Aging (PARA). The primary objective of the programme has been “to develop and evaluate rurally-based demonstration projects working in cooperation with local senior centres” (Goins, 2004, 3). The outcomes from six ‘Demonstration Projects’ include the building of service models to demonstrate the changes in rural service delivery that would be most effective and that would ultimately lead to an improvement in the overall health and wellbeing of older residents. This is of particular concern as in the U.S. “the elderly make up a larger proportion of the total population in rural areas (20 percent) than elderly in urban areas (15 percent)” (Goins, 2004, 3).

The ways in which the proportion of a region’s population that is elderly may change over time is discussed in a paper by geographer Peter Rogerson (1996). He details a number of ways in which regional concentrations of elderly populations emerge and evolve and shows how regions with populations that become more elderly through the in-migration of older people differ in important ways from regional populations that become older through the out-migration of the non-elderly. Rogerson (1996, 1) concludes that the “spatial pattern of the rate of new entry into the elderly cohort among non-movers is found to be particularly influential in determining changes in the proportion of a state’s population that is elderly”.

The higher proportion of the elderly in many rural areas has been a direct consequence of the industrialisation of agriculture which has resulted in extensive and continuing rural depopulation particularly of the younger working age population. This has meant that many rural communities have been transformed by this industrialisation process and have a higher proportion of older people in the community. However, this loss of population does not always translate into a loss of community spirit. This was confirmed by a study of socioeconomic conditions in 281 Great Plains counties in the U.S. (Albrecht, 1998). While communities in agricultural counties had suffered extensive declines in population they appeared to have adjusted very well to the population declines. This was attributed mainly to the fact that rural farm areas have strong family units that are more resistant to dissolution (Albrecht, 1998, 60).

The effects of social activity and ageing on variables related to individual motivations, community membership and consumer behaviour were tested on elderly respondents living in

three rural communities in Iowa, U.S. (Miller *et al.*, 1998). These authors found that elderly respondents showed more satisfaction with their community and had stronger intentions to shop with local retailers than the late middle-aged respondents. These findings suggest that rural businesses that are alert to the concerns and purchasing power of their older consumers will have more opportunities to do well as the research showed that market place activity appears embedded in the social networks of rural communities.

A qualitative study in the U.S., that attempted to assess the source of wellbeing for elderly rural residents across four sub-groups found large 'with-in group' differences (Kivett, 1988). This author identified three major themes through conversation with the varying groups of older rural adults. These themes were the value of the friend and neighbour network; the importance of long-standing associations; and the sense of private space and freedom afforded through living in a rural place (Kivett, 1988, 130). One implication for practitioners identified from the research by the author was the danger in planning services and programmes in rural areas based only upon the objective characteristics of the population. As Kivett (1988, 131) noted "there appear to be a number of elusive qualities of a rural place that offset what might be otherwise interpreted as a less than ideal life condition".

We know that as people age they become more reliant on health care and the support of social services. The effective coordination of these services is especially critical in rural areas as these services struggle to survive in areas that often have weak service delivery infrastructures (Brown, 2004). Kivett (1988, 131) concluded from her study that planners must be careful not to interrupt the systems that are in place, such as transportation, but rather enhance and build upon them. The planning and delivery of human services to rural and remote communities are influenced by a range of factors. Some of these factors originate from the 'centre' (funding bodies) and others from the 'periphery' (values in rural areas). Dunn and Williams (1993) noted that the National Resource Centre for Rural Elderly (NRCRE) in the United States identified 34 barriers or challenges to the delivery of services. These authors argue that the greatest barriers to both efficiency and social justice appear to lie at the 'centre' where control over resources to rural areas is often unimaginative and inflexible.

As has been noted by many authors in the late twentieth century, restructuring of the nation-state has resulted in significant political, economic and social change in rural communities. Research in Canada reported by Skinner and Rosenberg (2002) suggests that the current state of health care provision in rural communities of Ontario is affected very much by the changing nature of local governance associated with restructuring. The results of their study indicate that informal and voluntary sectors play a major role in the local organisation and delivery of health care services in rural communities.

The majority of rural elders rely on their informal network of family members, friends and neighbours when the need for assistance arises. A project using a representative sample of community dwelling Appalachian Virginians was conducted by Blieszner *et al.* (2001). Results indicated that variables indexing more education, less family contact, and a preference for formal services over informal assistance predicted the use of formal services. In conclusion Blieszner *et al.* stress the need to plan and market services differentially for subgroups of rural elders (Blieszner *et al.*, 2001, 89).

The lives of rural older people are all potentially affected by such variables as patterns of work, family structure, settlement, migration and religious values (Keating, 1991). Regional

differences in the proportion of the elderly in the population will affect the likelihood that women will have elderly parents living nearby (Keefe, 1997). This proximity can be significant as research on the filial responsibility expectations among older persons conducted in the U.S. by Lee *et al.* (1994, 100) found that “older persons who were raised in rural areas, particularly on farms, have significantly higher expectations for filial assistance than do older persons from urban backgrounds”.

The likelihood of women combining paid employment and helping elderly kin has been explored on a regional basis in Canada by Janice Keefe (1997). She was keen to expose the difference that a region’s unique social and economic structure would have on the probability that women within these regions would combine paid labour with the unpaid labour of caring for elderly kin. Within regions, the proportion of elderly persons in the population varied inversely to the size of the community. In other words, towns and villages in rural areas of Canada tend to have a higher proportion of elderly than large cities.

Findings from Keefe’s research suggest that “relationships identified by analysing national data are not necessarily consistent with relationships at the regional level of analysis” (Keefe, 1997, 11). She points out that the process of ageing does not occur uniformly across a country. Differing social and economic structures between regions influence patterns of migration which, in turn, affect the age structure of the population within these regions. Therefore national policies based on the ‘average citizen’ will fail to recognise the distinctive regional characteristics.

The housing preferences of the elderly living in rural villages and small towns were investigated in Canada by Joseph and Hollett (1992). They make the important point that the attributes of housing may be more important than the location and hence the presence of significant elder migration to rural areas may mean that the move to a rural location can be secondary to the choice of a house type. “The fact that older adults have purchased retirement homes in planned communities located primarily in rural areas does not necessarily mean that such locations are preferred, it may just be that the desired housing products are unavailable elsewhere” (Joseph and Hollett, 1992, 4). In addition, they found that older rural residents have a negative view of retirement communities – viewing them as a ‘dependent’ housing option that is only an attractive option under restrictive circumstances.

Internal migration has been shown to not only redistribute the population but also income. The relocation of older people involves the transfer of savings, retirement investments and pensions from region to region. Newbold (2006) uses data drawn from the 2001 Census of Population and Dwellings in Canada to evaluate the magnitude of income redistribution across regions following internal migration of the older population. In addition to evaluating the magnitude of income redistribution, he showed the impact of primary, return and onward migration on regional income distributions. His results illustrate the importance of return migration in the transfer of income over space.

As mentioned earlier, the National Resource Centre for Rural Elderly (NRCRE) in the United States identified 34 barriers or challenges to the delivery of services to older persons in rural areas. Dunn and Williams (1993) explain why they believe that in Australia two major barriers are particularly significant. The barriers Dunn and Williams identify are “lack of government funding” and “failure to target funds appropriately”.

The experiences of rural ageing do differ across countries. Pong (2001) focussed on rural public health in Canada. Pong pointed out that the population of rural Canada was ageing much faster than urban areas, with an old age dependency ratio in predominantly rural areas of 20.8 percent compared to 16.3 percent in predominantly urban areas (Pong, 2001, 5). In his address at the 6th National Rural Health Conference held in Canberra, Pong noted that there is an increasing awareness of rural health problems in Canada. There are many vacant positions within the health service providers across the country. One clear message of his address is that rural problems are in his opinion better dealt with by rural research units because “if research is done in urban universities by urban researchers, [rural] problems will not be addressed” (Pong, 2001, 7).

Ageing in rural Australia has been further addressed, from various perspectives by Foskey (1998), Haberkorn (2002) and Jackson and Felmingham (2002). Foskey explored a number of issues for the older populations of four small rural communities and concluded that “greater attention needed to be given to how services are delivered to those older people who live outside regional and metropolitan centres”. She makes the important point that “if all people in rural areas are treated equally the results can be inequitable as not all people have the same capacity to engage the systems”.

In a more general overview of changes in rural Australia, Haberkorn (2002, 38) makes the point that “rural ageing is critical when it comes to intergenerational transfers of land and agricultural production”. In addition, older graziers on marginal farming land may be forced to continue living on their land as they are unable to sell or transfer their properties to their heirs who have already left the area.

While not directly focussing on the elderly population in rural areas, Jackson and Felmingham (2002) provide a useful overview of the demographic characteristics of Australian regions. They use three key socio-economic indicators, one of which is the demand for the ‘Age Pension’. These authors argue that the changing demography of Australia will deliver both positive and negative outcomes. They also point out that the differing needs of regions must be well thought through. They also argue that the forthcoming growth in the number of elderly is likely to fuel a huge growth in consumer spending which will be spread unevenly across the regions. Jackson and Felmingham (2002, 20) also note that the ‘cashing-up’ of private superannuation funds that have previously been invested in urban-based schemes will see a return of funds to some regional areas. Certainly there will be some positive impacts on rural areas, but it is clear that the complex issue of population ageing and its regional impact requires much further analysis.

6.2. Research from the United Kingdom and Continental Europe

Unlike the United States, the United Kingdom does not have a separate governmental agency for co-ordinating research on ageing issues. Neither does the country have national ageing programmes like several of the neighbouring European countries. There is still no Research Council-funded Centre for the study of ageing in the social sciences or humanities (Harper, 2000, 119).

In addition to emphasising the uncertain disciplinary status of ageing research within academia in Britain, Sarah Harper (2000) reflects on past achievements of British gerontology and highlights some future questions. Although her paper focuses on social

gerontology and details the development of academic gerontology in the U.K. from the late 1960s to 2000, there is no mention of ageing in rural areas. It is also disappointing to note that in the second half of the paper, when Harper discusses areas for future research development in Britain, the special needs of rural environments are once again absent.

The time it has taken for gerontology to focus on problems of rurality in the United Kingdom is highlighted by Clare Wenger (2001). This author begins by examining existing literature and makes the important point that “ageing in rural areas has received less attention in the literature than the proportions of older people living in rural areas might suggest” (Wenger, 2001, 117). In this paper the author investigates some of the common myths about ageing in rural communities in the United Kingdom. The realities of rural lifestyles, family and community networks, life satisfaction, health and access to services are all briefly discussed. In conclusion, Wenger argues that “growing old in rural areas is probably neither worse nor better than ageing in urban areas. However, it can be a qualitatively different experience” (Wenger, 2001, 126). She also shows that many authors have noted that the specific needs of rural areas have not been met by service provision derived from criteria from urban contexts. Finally, Wenger suggests that rural service provision demands a different approach from that which is appropriate in urban areas (Wenger, 2001, 3).

Research focusing on older people living on the margins, both geographically and socially, was conducted in an area of material deprivation and low access to “social capital” in Middleborough, north-east England. Abbott and Sapsford (2005) argue that in both policy and economic debates the local experiences of older people living in deprived neighbourhoods have been ignored. Their research highlights the specific problems experienced as a product of social and geographic place.

New patterns of return migration are discussed in a paper by Anthony Warnes (2001). His research examines the distribution of the older beneficiaries of state social security systems, with particular attention to the U.K., U.S. and Australia. Warnes’ data show that ‘return’ and ‘family-joining’ migrations are the predominant form and that their structure and destinations are changing (Warnes, 2001, 378). As illustrated by Newbold’s research in the U.S., these migration flows have significant implications for the redistribution of income (Newbold, 2006). In the British study, the dispersal of income is shown to be occurring at the international level. In addition, it is likely to make sizeable impact at the local level in not only some regions but also in some countries.

At present there are several research centres in Europe that specialise in ageing research. The Centre for Research on Ageing (CRA) at the School of Social Sciences, University of Southampton, is an international and multi-disciplinary research centre that examines key issues in ageing and the lifecourse to inform policy at the national and local level. (<http://www.ageing.soton.ac.uk/>). In addition, research on Europe’s elderly care for minority groups is being undertaken by the Policy Research Institute on Ageing and Ethnicity (PRIAE) in London and has country partners in Spain, The Netherlands, Germany, France, Switzerland and the U.K. (<http://www.priae.org/>). There is also for example the Italian National Research Center on Ageing (INRCA) which is a governmental institution of excellence in the field of Gerontological Research and Geriatrics (<http://www.geha.unibo.it/>).

In Germany there is the German Centre of Gerontology (DZA) (<http://www.dza.de/english/>). Research undertaken at the DZA examines and evaluates ongoing and new social policy issues of old age, ageing and social policy measures of national importance. The following

research areas are addressed: the premises of policy on the aged, employment and social security, life situations and life styles, social relationships and social participation, health and social care for the aged, and professions dealing with older people.

The Stockholm Gerontology Center is a foundation devoted to multidisciplinary research related to the adult aging process. The aim of the centre is: "...to ascertain and make available for practical use the experiences and results from research of special importance to elderly, and to initiate and conduct basic and applied research regarding the situation of the aged." (<http://www.aldrecentrum.se/eng.html>).

In The Netherlands there has been a programme for research on aging that is referred to as NESTOR (Nederlands Stimuleringsprogramma Ouderenonderzoek). The aim of this government-sponsored programme was to develop a national plan for research on aging, and to supervise and guide the execution of this plan. The aim of NESTOR was to strengthen the position of aging research in the Netherlands by stressing the improvement of the scientific infrastructure and the stimulation of international collaboration (<http://sbg.scw.vu.nl/lasa/lbn.html>).

Some evidence of the existence of a rural idyll in the Netherlands has been identified by Frank van Dam *et al.* (2002). These authors argue that Dutch rural areas have changed into a post-modern countryside and have become marketable commodities. They make the point that "urban-rural migration flows in the Netherlands involve for the larger part middle-aged and elderly migrants ... which is again quite comparable with the situation in other European countries" (van Dam *et al.*, 2002, 464). The authors go on to note that from studies conducted in the 1990s it has become apparent that migration behaviour is more likely to be driven by life-style rather than work (labour) considerations. The perceived worsening of living conditions in the urban areas may also be playing a part in people's preferences. Rural areas are associated with peace and quiet, space and nature. They are therefore in terms of living conditions the opposite of urban areas (van Dam *et al.*, 2002, 465). The prominence given to the images and representations of the rural residential environment in research on urban-rural moves supports the presence of a rural idyll in the Netherlands (van Dam *et al.*, 2002, 468).

In further research in the Netherlands it has been shown that while visual-figurative images of the countryside predominate across all age groups, "elderly people tend to add a socio-cultural flavour to such images" (Haartsen *et al.* 2003, 245). This research note contains a very useful section on the ways in which representations of the rural areas have been examined in the literature. The authors point out that variables such as age, gender and ethnicity are less well researched than class differences. They go on to note that an academic, when asked to write a chapter on 'elderly people' in Cloke and Little's (1997) standard text *Contested Countryside Cultures*, emphasised the irrelevance of placing all the over 65 year olds together in the first place (Haartsen *et al.* 2003, 246).

Age is clearly an important factor in the public debate on the future of the countryside and in the Netherlands the older age groups dominate and have a tight grip on the main policy making institutions. Age is also an important characteristic in terms of life course history. Young people growing up and gradually replacing earlier generations make "rurality itself a process of changing rural representations" (Haartsen *et al.*, 2003, 246).

7. New Zealand Literature

To date the literature on rural ageing in New Zealand is very small. In the *Bibliography of New Zealand Research on Ageing, 2001-2005* (Davey and Wilton, 2005) there are no entries with a rural focus. Surprisingly, Sally Keeling's 2001 article published in *Ageing and Society* entitled "Relative distance: ageing in rural New Zealand" is not included. This article is based on a long-term (six to eight year period) epidemiological study of ageing in the community of Mosgiel in the South Island (Mosgiel Longitudinal Study of Ageing – MLSA). It was the later addition of a qualitative anthropological study that allowed Keeling to explore some of the multiple meanings of 'distance' (Keeling, 2001, 608). She has been able to consider some of the mechanisms used by older people in small rural communities to manage their social networks while trying to compensate for the loss of family members and friends resulting from rural depopulation and the natural attrition of their cohort.

Prior to this article, patterns of ageing in rural areas have received some attention but this research is based in the North Island, more specifically in the Waikato. Joseph and Chalmers (1992, 1995, 1996, 1998, 1999) and Chalmers and Joseph (1998, 2006) have addressed issues relating to the restructuring of the health services which began in the 1980s, together with rural depopulation and the privatisation of long term care services. Joseph and Chalmers (1995) include qualitative material from interviews with older people about their decision to stay in rural towns in the Waikato region despite the trend toward the centralisation of services. At the same time out-migration of younger family members seeking employment in larger centres has weakened the local kin network.

In later papers these geographers extend their representation to the voices of older people living in a small town (population 700) in rural Waikato (Chalmers and Joseph, 1998, 155). They argue that rural people over the age of 60 in New Zealand have a contact with place that is determined by their lived experience and therefore the rural elderly may well 'inhabit different places' from other community residents. The authors contend that the elderly of this community constitute a reference group who are a cohort with shared experiences of specific changes in social and health services and a shared distinct history of place (Chalmers and Joseph, 1998, 160).

In their latest work published in 2006 Chalmers and Joseph reflect on views of the elderly in contemporary rural studies. This chapter, in the *Handbook of Rural Studies*, reviews some of the significant trends in rural research and commentary over the past decade. In addition, the authors highlight the changes in the awareness of constructions of "elderly people" as apposed to "the elderly" in rural places. They make the important point that while the collective term "the elderly" refers to changes and events affecting all elderly people the rural setting produces particular forms of construction and "changes in the rural sector take these effects to the local and specific" (Chalmers and Joseph, 2006, 392).

Statistics New Zealand, using results from the 1996 Census of Population and Dwellings, built in a 1998 report a picture of the older age group in New Zealand in the mid 1990s (SNZ, 1998). The fourth chapter of the report focuses on where elderly New Zealanders live and their mobility patterns over the 1991-1996 intercensal period. This publication gives excellent demographic information for researchers studying a range of aspects affecting the older population. The report examines the movement of the elderly at a regional level (almost 1 in 13 movers between 1991 and 1996 were elderly people). In addition, it identifies the relative significance of the elderly within a region.

For those with an interest in rural populations the report details urban and rural population distribution (p. 33). It distinguishes between the population of rural centres (areas with populations between 300 and 999 people) and rural areas (populations less than 300). Between 1986 and 1996 the number of elderly people in rural centres and rural areas grew at faster rates than the number of elderly people in urban areas. Rural centres were home to 2.4 percent of the elderly population (10,008 persons) in 1996 while 7.9 percent of the elderly population (33,234 persons) lived in rural areas. The rate of increase of the elderly population was 34.4 percent for the decade 1986-96 for rural centres (compared with a total population increase in rural centres of 7.3 percent) and 36.0 percent for rural areas (compared with a total population increase in rural areas of 9.4 percent) (SNZ, 1998, 33-34). This compares with a national increase of the elderly population of 23.5 percent.

When the report explores the age distribution of elderly people in urban and rural areas it finds that the popularity of areas differs by age group. Rural areas were more popular with the young-elderly (9.4 percent in 1996) than with the old-elderly (4.3 percent in 1996). This indicates, as already noted earlier in this paper, that locations that are attractive during early retirement may cease to be suitable when a person reaches their eighties or nineties and are more likely to need to live in urban areas where access to basic services and amenities is easier (SNZ, 1998, 34).

Statistics New Zealand's report on the older population, based on the 2001 Census of Population and Dwellings results, is not as detailed in its discussion on the location of the elderly. The two reports are complementary and the earlier report (1998) is of more value for an introduction to the study of rural centres and areas. The 2004 report showed that New Zealand's older population is still concentrated in particular areas and, like younger New Zealanders, older people are highly urbanised (SNZ, 2004, 5). Although over two-thirds of older people live in Main Urban Areas (30,000 or more residents), when the secondary and minor urban areas are also studied it is found that significantly more older people live in these centres than the general population (22 percent compared to 16 percent). When the over 65 year olds are studied as three sub-groups there are differences across these sub-groups. While a third of those in the young-old (65-74 years) age group lived outside a main urban area in 2001, this was also the case for only a quarter of those aged 85 years and over. It appears that residential mobility increases with advancing age among the older population. This reflects a need for smaller accommodation and a residence closer to urban facilities or institutional care (SNZ, 2004, 8).

In the mid 1980s Heenan and Moffat (1986) published a useful study of interregional demographic ageing and migration in New Zealand. Using census data they analysed the migration of the elderly population from 1976 and/or 1981. They concluded that the principal processes affecting the broad geographical distribution of elderly New Zealanders were the high proportions of non-migrants among the elderly living in every region. This indicated that most were ageing in place (Heenan and Moffat, 1986, 71). The authors point out that research on the geographic location and migration of the elderly is relevant in terms of the design and provision of services to meet the needs of older people. They also suggest that "a fundamental deficiency is that the lack of locational specificity in the data set severely limits the utility of observations recorded because they apply to a coarse regional network in which boundaries bear little relationship to coherent local communities" (Heenan and Moffat, 1986, 73).

The New Zealand Institute of Rural Health is a Charitable Trust established in 2001 jointly sponsored by the Waikato District Health Board and the University of Auckland. The Vision of the Strategic Statement of the Institute for the period 2003-2010 is “To promote a healthy future for rural people living in New Zealand and partnering with rural communities to seek to establish a sustainable and effective health system” (<http://www.nzirh.org.nz/>).

The goals of the Institute are as follows:

- To advocate for, and work with rural communities to promote and develop flexible and innovative models of health care that reflect local community need and circumstances;
- To partner with health professionals, employers, agencies and communities to support and promote rural health as an attractive career;
- To promote the development of research and teaching which advances knowledge and informs change in rural health;
- To be a resource for advice on rural health issues;
- To partner with Maori to promote an environment in which the health of Maori living in rural communities will be improved;
- To seek ways of ensuring the efficient and effective use of the rural health workforce; and
- To collaborate with other sectors, by investigating and advising on the most appropriate use of available rural health resources to create a stable rural infrastructure.

Current research includes the analysis of a rural workforce survey 2005 which, in addition to surveying rural health professionals, will also seek to identify services available locally to rural communities (<http://www.nzirh.org.nz/>).

8. Suggestions for Future Research in New Zealand

The research reported in this review, in addition to providing a valuable catalogue of work already undertaken, also suggests some directions that would be most helpful for future investigations on ageing in rural areas. In addition to work on health care, there is a need for research that

- focuses on individuals, their families and support networks at the centre of the research;
- deals with social issues such as, for example, the morale and wellbeing of rural older persons;
- examines ways in which rural research, policy and practice are linked;
- separates out how contextual factors, such as the region and community contexts, influence the use of community services;
- designs more informative data sources (such as a longitudinal investigation of attitudes and preferences);
- compiles multiple sources of data (there is a need to examine unique influences on attitudes and the use of community services in other locations);
- integrates the locational and residential dimensions of retirement housing choice (differentiating between housing form and housing setting);
- investigates the changing patterns of employment in rural areas; and

- concentrates on the needs of older people of differing ethnic backgrounds.

Finally, as Krout (1988, 112) suggested for the U.S., it is clear that future research work on elderly people in rural environments must involve more qualitative data collection and analysis techniques. This should aid our understanding of the life circumstances and experiences of the rural elderly and help to explain if, why, how and under what conditions the major characteristics of rural environments are important. These issues cannot be addressed satisfactorily by simple rural versus urban statistical comparisons. Research on rural elderly people needs to be approached from a more holistic perspective that considers the many interlinked features of rural environments.

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Appendix

The Table below lists the issues that have been identified as relevant for the ageing research undertaken in the EWAS research programme. These issues are covered in the national sample survey, focus groups and in-depth interviews. The table contains the publications referenced in the present paper. The table therefore highlights which issues, with respect to rural ageing, have already been covered quite well in the literature and which topics have been studied far less extensively thus far.

Issues	New Zealand	U.S., Canada and Australia	U.K. and Europe
Income / employment	Lewis (2003)	Keefe (1997); Miller et al. (1998); Newbold (2006)	Warnes (2001)
Migration	Heenan & Moffat (1986)	Conway & Houtenville (2003); Gale (2002); Joseph & Cloutier (1991); Litwak & Longino (1987); McHugh & Mings (1991, 1996); Newbold (2006); Rowland (1996); Rowles & Watkins (1993); Walters (2002)	Philip (1999); Warnes (2001)
Housing		Joseph & Hollet (1992)	
Health & wellbeing	Bryant et al. (2005); Chalmers & Joseph (1998); Joseph & Chalmers (1996, 1995)	Kivett (1988); Krout (1988); Henderson & Taylor (2003); Pong (2001); Skinner & Rosenberg (2002)	
Facilities & services	Joseph & Chalmers (1999, 1992)	Blieszner et al. (2001); Brown (2004); Dunn & Williams (1993); Foskey (1998); Goins (2004); Joseph & Cloutier (1991); Krout (2003); Longino (2003); Rogers (2002)	
Relationships	Keeling (2001)	Albrecht (1998); Haberkorn (2002); Keefe (1997); Lee et al. (1994); Powers & Kivett (1992)	Wenger (2001b)
Leisure		Tarmann (2003)	
Information technology		AoA (2006)	
Lifestyle (social recomposition)	Joseph & Chalmers (1995); Joseph & Chalmers (1998)	Joseph (1992); Paquette & Domon (2003)	van Dam et al. (2002)
Safety			
Theoretical	Chalmers & Joseph (2006)	Keating (1991); Harper (2000); McHugh (2003, 2000); Rogerson (1996); Rowles (1988)	Haartsen et al. (2003); Wenger (2001a)
Statistical reviews	Davey & Gee (2002); Statistics NZ (2005, 2004, 1998)	Jackson & Felmingham (2002)	
Bibliographies	Davey & Wilton (2005); Gilling & Gilling (1997); Withers & Hodges (1987)		