Elderly Dependence and Intergenerational Support in Vietnam: A Descriptive Perspective

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Abstract

Vietnam is experiencing rapid population aging, placing increasing pressure on families in a context of limited formal social protection. Adult children remain the primary source of financial and non-financial support for elderly parents, including co-residence, caregiving, and monetary transfers. This study examines how intergenerational support is influenced by parental needs, children's gender, and residential arrangements. Building on altruism and filial obligation frameworks, we hypothesize that children adjust their support when parents' needs are partially met, and that the amount and type of support vary by gender and co-residence status. Empirical findings suggest that shifts in gender roles have increasingly placed physical caregiving responsibilities on daughters, while sons continue to provide financial support. Rural households with limited pension coverage maintain strong cultural expectations for support, while urban households with pensions exhibit partial crowding-out of private transfers. Broader demographic and economic factors including declining fertility, high household savings, and a shrinking labor force further shape the sustainability and structure of intergenerational support. These results highlight the centrality of family-based care in Vietnam and provide a foundation for future research on elderly vulnerability, children's economic constraints, and the macroeconomic implications of population aging.

Keywords: Aging population, Children, Pension, Gender, Resident status, Crowding Out, Intergenerational transfer, Vietnam.

1. Introduction

The world's population is aging at an unprecedented pace, with the share of people aged 65 and older rising steadily over recent decades. In 2024, older adults accounted for about 10.3% of the global population, nearly double the 5.5% recorded in 1974, and this figure is projected to reach around 16% by 2050 and over 20% by 2074 (UNFPA, 2024; WHO, 2022). Today, there are roughly 830 million people aged 65 and above worldwide, a number expected to climb to 1.7 billion by mid-century (Our World in Data, 2024). Population aging is most advanced in developed countries. Japan, for instance, has nearly 28% of its population over age 65 (PRB, 2023). However, developed countries such as Japan do have the financial power, pension system, and elder care to finance their way out of this problem —in the case of Japan, they import immigrant workers to care for its increasing elderly population. As of December 2024, Japan has granted about 284 thousand international workers specific skilled worker visa (OECD, 2024). The most dramatic future impacts will be established in low- and middle-income countries, which by 2050 will host more than 80% of the world's elderly (WHO, 2022). In the United States alone, the 65+ population grew by 38.6% between 2010 and 2020, reaching 55.8 million, marking the fastest growth in more than a century (U.S. Census Bureau, 2023).

These shifts carry profound implications. Kallestrup-Lamb et al. (2024) summarize that aging societies will face mounting pressure on health care systems, pension schemes, and long-term care services, while shrinking working-age populations will be tasked with supporting a growing number of retirees (OECD, 2024). In many developing contexts, where formal social protection systems remain incomplete, families—particularly adult children—continue to serve as the primary safety net for older parents (Schröder-Butterfill, 2004).

"Adult children" usually refers to the sons and daughters of older parents who are themselves grown and independent—typically age 18 or older. In the context of aging and caregiving research, "adult children" means the offspring of elderly parents who have become independent and no longer rely full time on the support from parents. When parents' pensions cannot sustain them through old age, adult children are the ones on whom parents rely for pecuniary and non-pecuniary support, including but not limited to providing informal care (physical help, financial transfers, emotional companionship), acting as decision-makers for their parents' health or living arrangements, and offering intergenerational transfers such as remittances or co-residence (Nguyen, Liu, and Booth, 2012; Trinh and Yiengprugsawan, 2021).

Historically, the type and structure of familial support have been shaped by the family system. In heavily family-oriented countries such as Vietnam, China, and Thailand, familial support is considered mandatory, often taught from childhood as the duty to “repay parents’ effort” for raising them (Fu et al. 2023; Ha et al. 2020; Sringernyuang et al. 2020). Adult children are expected to make regular transfers—often monthly—to cover their parents’ daily expenses once they are no longer able to work (Dang, 2019; Nguyen, 2020). By contrast, in more developed nations such as the United States, individuals are generally expected to take care of themselves. Intergenerational transfers occur less frequently and more sporadically. Parents often rely on their own savings and fixed income from pensions to meet daily needs, turning to their children for financial support mainly in cases of emergency (Chou, 2011). Adult children remain central to the provision of support for elderly parents, yet their roles are increasingly shaped by external social and economic factors. In developing countries such as Vietnam, where intergenerational transfer is the main income for many retired elderly parents, the structure and amount of support are determined by factors such as parental health, number of children, marital status, and living arrangements (Nguyen, 2017; Trinh, 2011). This study seeks to examine how adult children adjust their support in response to parental needs, gender, residential arrangements and how these variables showcase in the context of Vietnam.

2. Conceptual framework and hypothesis development

2.1. Pension-transfer substitution

According to the altruism model developed by Becker (1974), intergenerational transfers from adult children to elderly parents are primarily motivated by altruistic behavior. In this framework, individuals derive utility not only from their own consumption but also from the well-being of their family members. Because adult children care about their parents’ welfare, they provide financial transfers when their parents’ consumption levels are low. Consequently, the model predicts that the introduction of pensions and social security programs, which raise parents’ income, will crowd out transfers from adult children.

Empirical evidence supports this result. Numerous studies show that public subsidies or pension programs reduce the reliance of the elderly on private transfer income from children, other relatives, or friends (Cox and Jimenez, 1992; Biddlecom et al., 2001; Jensen, 2003; Maitra and Ray, 2003; Fan, 2010). Evidence from Asia similarly suggests that public pensions weaken traditional forms of intergenerational support. In China, formal pensions significantly reduce pecuniary transfers and intergenerational co-residence around the pension eligibility cut-off, particularly between elderly parents and their adult sons (Chen et al., 2018). In South Korea, Jung (2016) estimates that public pensions crowd out private transfers by about 40 percentage points. In Japan, Horioka, Suzuki, and Hatta (2007) document that declining household saving rates can be explained in part by reliance on the country's increasingly comprehensive pension system, highlighting a substitution between private savings and public provision.

At the same time, the effects of pensions on family transfers are not uniform. Fan (2010) finds that higher pension benefits in China improve expenditures not only for pensioners but also for their children, as adult children can redirect resources previously earmarked for parental support toward their own consumption. Chen et al. (2018) further shows that the introduction of social pensions weakens—but does not eliminate—the complex web of pecuniary and non-pecuniary transfers across three generations in rural China. Similarly, Jung (2016) observes that while financial support from children declined following the expansion of the South Korean National Pension Scheme (NPS), non-financial help increased. Importantly, the most vulnerable elderly—those with the least education—did not experience declines in consumption or financial assistance and actually benefited from greater non-financial support, suggesting that the NPS expansion improved their welfare despite partial crowding-out. Jung's (2016) findings also highlight the persistence of filial obligation in conservative Asian societies such as Korea. In these contexts, children are bound by strong social and moral expectations to provide support to their elderly parents. The expansion of public pensions enables children to reduce financial transfers without violating these cultural norms, since the state now provides for part of parents' material needs. However, filial duty has not disappeared; instead, children often compensate by increasing non-pecuniary support such as care and time assistance. This substitution underscores that while pensions partially crowd out financial transfers, cultural obligations prevent the complete crowd out of intergenerational support. This body of evidence points to the global trend of crowding out effect: formal pension can replace intergeneration transfer. The existing literature consistently points to

Hypothesis 1: children adjust the level of support they provide when their parents' needs are already partly met.

2.2. Gender and co-residence in intergenerational support

Family caregiving is commonly defined as the provision of unpaid care by family members or close friends to individuals who are chronically ill or functionally impaired (Morris, 2001). This form of support is a crucial yet often invisible part of elder care systems, substituting for or supplementing formal health and social services.

Across most societies, women continue to constitute the majority of caregivers. Estimates across different countries suggest that between 57% and 81% of elder caregivers are women (Akpınar, 2011). This predominance holds true not only in elder care but also in the care of individuals with psychiatric or chronic conditions. While the proportion of men assuming caregiving roles has been rising in recent decades, the global family caregiving landscape remains heavily dependent on women (Sharma, Chakrabarti, and Grover, 2016). From an early age, women are taught or exposed to a social framework that promotes nurturing roles, framing caregiving as both a natural and expected responsibility (Morris, 2001).

Theories of labor segregation further explain the cause of this dynamic, a report by UNESCO (2017) shows that in low-income families, women generally receive lower education compared to men due to limited resources, which causes families to often prioritize men to receive the education with the expectation of future financial support. Uneducated women often work and live closer to their parents' home as they grow up, directly positioning them as the default providers of unpaid care. Consequently, women's caregiving is not only more frequent but also tends to encompass non-financial and emotionally intensive forms of support, such as daily monitoring, companionship, and personal assistance (Michielin, Mulder, and Zorlu 2008).

In contrast, men's caregiving tends to be more conditional and shaped by both socioeconomic resources and the culturally gendered nature of the tasks. Campbell and Martin-Matthews (2003) demonstrates that men with higher education are more likely to provide traditionally male-typed caregiving, such as financial management or transportation, whereas men with higher income are less likely to participate in traditionally female-typed caregiving, such as intimate or hands-on personal care. These findings suggest that men's involvement in elder care is mediated by their ability to align their support with culturally sanctioned masculine roles, and in some cases, to outsource tasks that are coded as feminine.

The differences in gender roles have been shown to have effect on the amount or structure of the filial care, which point to

Hypothesis 2.1: Children's genders affect the amount and type of support to elder parents.

The residency status of adult children plays a significant role in shaping both the obligation and structure of informal support provided to elderly parents. A substantial body of literature highlights how co-residence versus extra-residence influences caregiving patterns. Generally, care provided by a co resident is often more intensive than one who lives any distance away (Arber and Ginn, 1995; Campbell and Martin-Matthews, 2000), since caring for a co-resident is an around the clock responsibility. Gender further intersects with residency status, often driving decisions about who assumes caregiving responsibilities. In many cultural contexts, women—particularly those without children—are more likely to co-reside with parents and take on caregiving duties. This expectation stems from prevailing norms that devalue women's employment and assign caregiving as their primary responsibility, especially when they are not engaged in child-rearing or formal work (De Koker, 2008).

The concept of "legitimate excuses," introduced by Finch and Mason (1993), helps explain why non-co-resident children may avoid or limit their caregiving responsibilities. Adult children living outside the parental household often cite employment, distance, or other commitments as valid reasons for not providing care. In contrast, co-resident children are subject to greater obligatory pressure, since the expectation of daily caregiving typically falls on those who live with the elderly parent (Lin and Wolf 2020). The framework of "obligation versus choice" introduced by Galeen and Dykstra (2006) is particularly useful for understanding these socio-dynamics. Excuses vary in type and strength depending on how far away children live, with distance serving as the most common justification. However, co-residence removes distance as an excuse and simultaneously weakens the legitimacy of other claims, such as competing family or work obligations (Campbell and Martin-Matthews, 2000). Moreover, caregiving to a household member is generally perceived as more obligatory and less influenced by employment (Arber and Ginn, 1995). In practice, this means that children living further away retain the choice of whether or not to provide support, while co-resident children are socially and emotionally compelled to do so (Finch and Mason, 1993). Moreover, when unfortunate events occur, responsibility and potential blame are more often directed toward the co-resident child.

Research shows that the nature of transfers and support differs significantly between co-resident and non-resident family members (Aquilino, 1994; Börsch-Supan et al., 1992). Co-residence has greater support intensity by also undertaking a daily care routine and reducing loneliness to elders. One notable outcome is that elderly parents who live with adult children are less likely to transition into institutional care, such as nursing homes, compared to their non-co-residing counterparts (Dostie and Leger, 2005). Beyond reducing institutionalization, co-residence also has an economic dimension. The sharing of household production allows for more efficient distribution of costs and resources. As the benefits of daily living arrangements—such as food preparation, utilities, and housing—are spread across multiple household members, the spending on each member is more efficient than living in a separate household. This efficiency makes co-residence a distinct and, in many cases, more cost-effective form of support than caregiving provided outside the household (Pezzin, Pollak, and Schone, 2007).

Several factors shape the extent and nature of caregiving provided to elderly parents. For example, individuals in poorer health are more likely to engage in caregiving for household members than those in good health, suggesting that the burden of co-residence may fall disproportionately on those with limited well-being themselves (De Koker, 2008). Caregiving dynamics are also influenced by sibling networks, the collective contributions of siblings can crowd out the need for which one child is responsible for full time care for parents (Wolf, Freedman, and Soldo, 1997). Family structure plays a critical role in determining caregiving arrangements. Married or partnered elderly individuals most often receive primary support from their spouse rather than from their children (Dwyer and Coward, 1991; Pezzin, Pollak, and Schone, 2009). Co-residence with adult children typically occurs only after the death of one parent, when the surviving parent becomes more vulnerable and in need of direct care (Boaz, Hu, and Ye, 1999). These findings underscore how caregiving involvement is not only shaped by individual health and sibling dynamics but also by broader family structures and marital status, which mediate when and how children assume caregiving roles.

Residential status shapes how children decide whether, and in what form, to support their parents. Accordingly, we propose

Hypothesis 2.2: children's residential status with parents influences the frequency, nature, and type of support provided to elderly parents.

3. Vietnam context

Vietnam offers a distinctive context for testing these hypotheses. In the past few decades, Vietnam's population is experiencing an increase in proportion of elderly people with a sharp increase since 2010 (see Figure 1). Similarly, the decreasing trend of labor force in related to population has established since the late 1900s (see Figure 2). To put in perspective, an aging population like Vietnam casts a massive financial strain on the working population.

Figure 1. Percentage of the population above the age of 65 in Vietnam (World Bank, 2025)

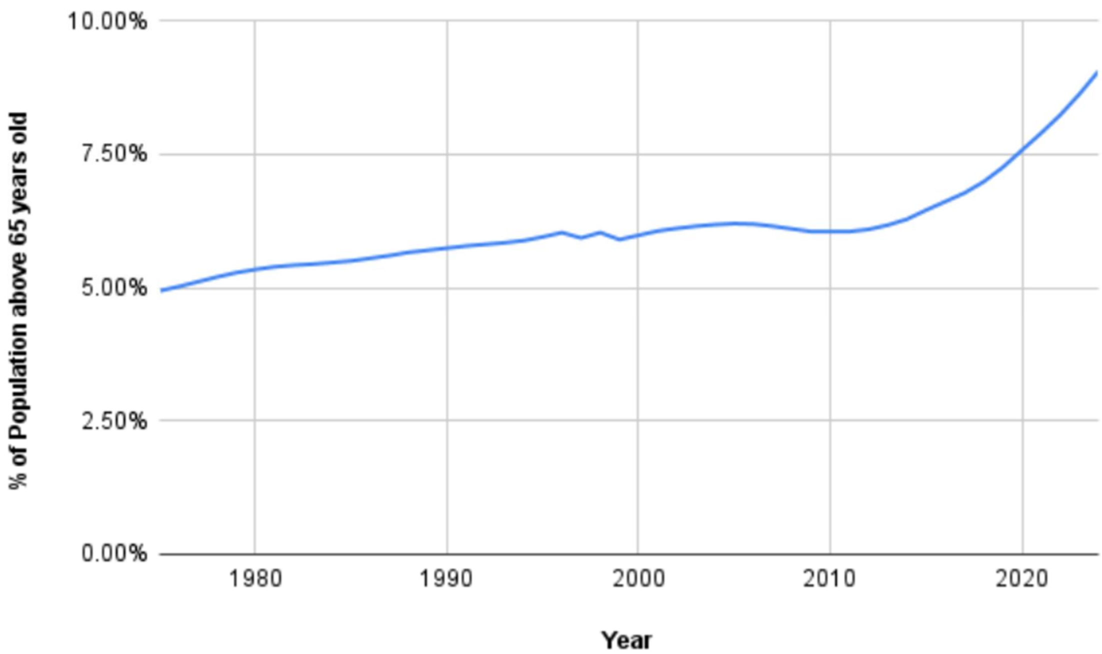
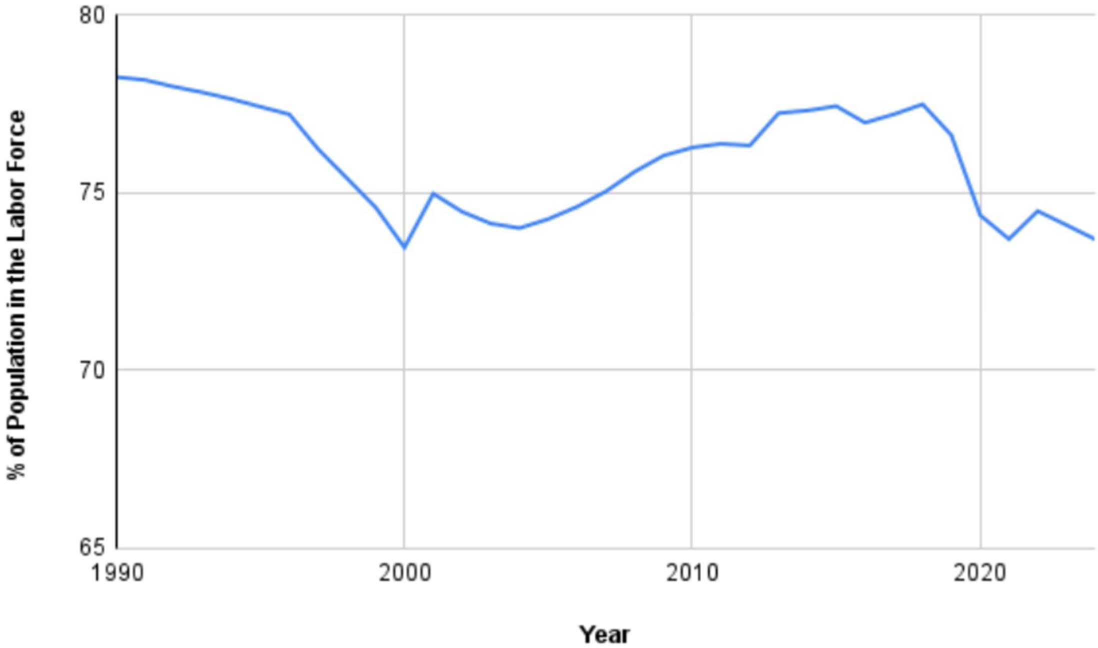


Figure 2. Percentage of population in the labor force in Vietnam (World Bank, 2025).



Vietnam's decreasing labor force is predicted to fall even further: 68.3% in 2030 and 63% in 2050 (World Bank, 2024). Eventually, the government may require higher contributions or broader financing to remain solvent. This, in turn, increases financial pressure on workers, who must fund both their own retirement and the care of elderly parents. As a result, the sensitivity of financial transfers to changes in parental pensions is expected to rise, because children will have lower net income available for such support.

While all countries are or eventually will face aging, each nations' people respond to the issue differently. Vietnam offers a different nuance in how the issue is established locally compared to more developing nations such as China, Japan, or Korea. These developed nations have their social expectations or laws in place that regulate for adult children should act in the dilemma.

China's Filial Piety Law requires adult children to provide care and financial support to parents aged 60 and above (Chou, 2011). Although the law is rarely enforced due to the lack of significant penalties, being sued by one's parents for neglecting filial duties can bring severe public shame. In most cases, children are likely to comply with their parents' demands before the court reaches a verdict. Korea, on the other hand, culturally encourages parents to maintain self-reliance.

Its nuclear family model emphasizes individual independence: parents are likely discouraged from depending on their children for elder care (Kim et al., 2023). Japan takes yet another approach. With its advanced elder care facilities, Japan has developed a system that addresses the needs of its aging population in which children can pass on the burden of providing intimate care of parents to professional caregivers (Elliot and Campbell, 1993; Hayashi, 2011).

In the context of Vietnam, behavior is strongly conditioned by communal village norms. The magnitude of crowding out in rural Vietnam is likely to be less significant because both the decision to transfer money and the amount transferred depend heavily on the parents' capacity for self-sufficiency and the children's financial ability to contribute (Nguyen, Liu, and Booth, 2012). In urban areas, where pensions are more widely accessible, public subsidies and pension income can partially meet parents' needs, leading adult children to naturally reduce private transfers. In contrast, in rural settings, financial transfers are not determined solely by parental need but also by cultural expectations. The community imposed upon the individual the duty to provide for parents regardless of situations. Failing to provide support is often seen as a disgrace or even a social taboo. Consequently, children feel a filial obligation to send money to their parents, even when it may not be necessary.

Trust in the public system also contributes to the low participation rate. For many households, private transfers from children remain the primary safety net for elderly parents, as confidence in the reliability of the pension system is still limited (Nikolov and Bonci, 2020). Because pensions are relatively new and their long-term stability is uncertain, the classic crowding-out effect is unlikely to occur. Instead, family-based support networks continue to play a central role in sustaining older parents, particularly in contexts where intergenerational co-residence is common and socially expected. As a result, any crowding-out effect is likely to be relatively moderate (Que, 2024).

By contrast, in urban and formal-sector households, pension coverage is much more common, and these families are the most likely to experience crowding-out effects. As pensions partially meet the consumption needs of elderly parents, adult children can reduce their direct financial transfers without compromising parental well-being (Nikolov and Bonci, 2020). Rural adult children, constrained by low average incomes and the necessity of working multiple jobs, rarely have surplus cash available. As a result, they aim to allocate their earnings as efficiently as possible. When their parents' needs are perceived as sufficiently met, financial transfers are often suspended almost immediately. This heterogeneity highlights that the crowding-out effect is not universal in developing nations. Rather, it is conditional on pension access: where pensions exist, they largely substitute for intergenerational transfers; where they do not, private transfers remain indispensable (Nikolov and Bonci, 2020).

Traditionally, sons were expected to provide for and fulfill all of their parents' needs in old age, while daughters, once married, were expected to devote their care to their husband's family. However, over the past decade, this pattern has shifted. Sons are no longer expected to provide direct physical care for their parents, though they continue to serve as the primary financial supporters. The responsibility for physical care has increasingly shifted to daughters, who often marry and settle near their natal families (Jiguang, 2023; Fingerman, 2020). As a result, many daughters now bear a dual obligation, providing support not only to their husband's family but also to their own parents. This demonstrates how filial duty has become differentiated along gender lines, showing how certain caretaking roles are being classified by society as gender exclusive (Fingerman, 2020; Jiguang, 2023).

4. Future research directions

The analysis of elderly dependence and intergenerational support in Vietnam points to several avenues for future research. First, the magnitude of parental need (H1) and the influence of gender and residency status (H2) on transfer behavior remain largely descriptive. Future studies could employ longitudinal data to quantify how strongly these factors shape the vulnerability of older parents to changes in children's support.

Second, while this study has focused on parental circumstances, the economic conditions of adult children themselves also need a closer examination. Income shocks, job instability, and migration patterns are likely to influence the ability and willingness of children to provide support, especially in rural areas where informal labor predominates. Examining these dynamics would shed light on the resilience of family-based safety nets under economic stress.

Third, intergenerational transfers carry broader macroeconomic implications. Obligations to support parents may affect fertility decisions, household savings behavior, and long-term wealth accumulation, which in turn shape patterns of social mobility across generations. Investigating these trade-offs would deepen understanding of how micro-level support practices influence Vietnam's demographic and economic future.

Finally, cross-country comparisons between Vietnam and other nations offer valuable insights. Vietnam's response to the challenges of population aging is likely to differ even from other developing countries, due to its unique economic, cultural, and institutional characteristics. One key reason is Vietnam's very low fertility rate, marking a clear demographic transition. According to 2024 data from the General Statistics Office (GSO), Vietnam's total fertility rate (TFR) is 1.91 children per woman, the lowest in the country's history. In urban areas, the rate is even lower: Ho Chi Minh City reports 1.39, and Hanoi is around 1.6. With fertility below the replacement level (2.1), the young workforce is shrinking while the elderly population grows, putting increasing pressure on social protection, healthcare, pensions, and long-term care systems. Comparing Vietnam with aged countries like Japan, South Korea, and China helps anticipate potential trajectories and consequences of population aging.

Furthermore, Vietnamese households exhibit high savings and low consumption, which shapes how families respond to elderly care needs. In 2023, gross domestic savings accounted for approximately 34.7% of GDP (The Global Economy, 2023). This high propensity to save reflects precautionary behavior, including preparing for old age, especially when formal social protection systems and pension coverage are limited. By contrast, developed countries such as Japan and South Korea also save at high rates but combine this with significant public spending on pensions and elderly care, reducing dependence on adult children (OECD, 2022).

In conclusion, Vietnam represents a distinctive case of population aging—exhibiting characteristics of both developed and developing countries while remaining deeply shaped by its cultural traditions. Further research on Vietnam is needed to examine how these interacting economic, demographic, and cultural factors influence the quality of life and well-being of the elderly.

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