

A Report on Access to Housing Opportunities of Older Persons in the Western Cape, with Special Reference to State Pensioners

July 2011

**Compiled for the Sector Task Team for Older
Persons (STTOP)**

**By Soreaso Consulting and the Medical Research
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Executive Summary

This report was commissioned by the STOPP partnership in an effort to develop an understanding of specifically the housing needs of social pensioners living in the Western Cape. The findings of this report is intended to allow the sector organisations in partnership with national, provincial and local government departments, to speak to the needs of the older population by means of Policy formulation and service delivery informed by the real needs of social pensioners within the province. The content of this report is based on extensive research done on the living situation of the elderly by means of both secondary and primary data sources. The secondary data sources consist of both datasets that was analysed for the purpose of this report and reports applicable to the aim of this report. The primary data collected for this report is qualitative in nature and consists of six focus group discussions conducted with elderly beneficiaries of the services provided by members of the STOPP partnership. The report was compiled with the following focus areas:

- a) A socio-economic profile of state pensioners in the Western Cape including their access to basic services.
- b) Situational analysis of the housing need and context of the elderly in the Western Cape

The first section of the report consists of a detailed profile of the elderly in the Western Cape Province, with a focus on elderly persons that receive a state pension. Aspects included in the profile are general demographic information, statistics on the living conditions and access to amenities, data describing the living arrangements of the elderly, the economic situation of the elderly and the important role of the elderly as caregivers within their broader family setup. The data portrays the living conditions of the elderly as generally good with the majority shown as having access to formal housing and basic services including, water and sanitation services. In describing the living conditions of the elderly it is shown that the majority live with their biological children, with multi-generational households mostly common amongst African families. Regarding the sources of income for the elderly the importance of the state provided Old Age Grant as primary and mostly only source of income is highlighted. The importance of this grant as often the primary household income for elderly households is also shown and linked to the great caring role placed on specifically female elderly that find themselves as the primary care givers of their households.

The second part of this report gives an account of the housing need of the elderly in the Western Cape based on six focus group discussions conducted within the Cape Metropolitan area. From these discussions a number of primary themes can be defined:

- The importance placed on independent living by elderly persons.
- The need of housing alternatives, specifically for Coloured and White elderly that were previously part of the lower to middle working class due to the exorbitant costs of living conditions in a season of life marked by a drastic decrease in monthly income.
- The very specific household and living organisation of African elderly, specifically a result of their economic status as grant beneficiaries and thus primary bread winners within their households.
- Perceptions held by specifically African elderly regarding “institutionalised” care.
- The uncertainty brought about by future need of frail care services.

In the final discussion the report concludes with six recommendations;

1. Specifically relating to the African Elderly a concerted effort is needed by the STOPP partners to eradicate set pre-conceived ideas and stigmatisation, often informed by misperceptions, to different forms of institutional living.
2. Given the living arrangements of poor African households, with a great dependence on the OAG in cases where an elderly person is part of the household, it might be necessary for alternative models for community housing, with a focus rather on elderly finding themselves in emergency and abusive situations.
3. To incorporate a strategy or programme for elderly living in community housing to either provide frail care facilities or linking these elderly residents to frail care facilities to facilitate or ease access to such facilities should the time come that they are not able to live independently anymore.
4. To facilitate or lobby for a co-ordinated approach including both the government and elderly service sector towards a strategic and integrated service delivery approach to the elderly.

5. To conduct a descriptive research study that would allow for quantifiable data that can be generalised to 1) the different racial groups within the province, 2) different socio-economic groups within the elderly in the province and, 3) speak to the rural-urban divide within the province.

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Acronyms

ACVV	Afrikaanse Christelike Vroue Vereniging
CPOA	Cape Peninsula Organisation for the Aged
DSD	Department of Social Development
NGO	Non Governmental Organisation
NIDS	National Income Dynamics Study
NOAH	Neighbourhood Old Age Homes
OAG	Old Age Grant
STTOP	Sector Task Team for Older Persons
WCP	Western Cape Province
CASE	Community Agency for Social Inquiry

Datasets and reports

<p>Social Value Impact Assessment (ROADS, 2010)</p>	<p>This study was conducted for the Western Cape Department of Social Development. The purpose of this social value impact assessment was to determine the impact of service delivery by non-profit organizations rendering services to youth and older persons and by non-profit organizations that received funding of one million or more rands. The relevant funding periods are 2007/8, 2008/9, and 2009/10. In the case of older persons the funding supports service centres and clubs.. The study was restricted to the Western Cape but includes all areas of the province. One can see from Table 2.1 that all district municipal as well as DSD district office service areas are covered in the study.</p>
<p>CASE Report (2010)</p>	<p>The latest study (2010) on the status of older persons in South Africa emphasizing needs and access to services as done by the Community Agency for Social Enquiry. It was a national household survey of older persons, in-depth interviews with chosen NGOs, and a survey of persons at luncheon clubs and service centres. The sample was stratified by province and was proportional to the number of older persons in each Province.</p>
<p>NIDS (University of Cape Town, 2009)</p>	<p>The data collection started in 2008, spread out in all nine provinces of the country with 28 000 people that formed part of the 7305 selected households finally interviewed . It revealed information on issues such as internal migration, birth and death, savings, health, education and household spending patterns. The Wave 1 NIDS data was then made public at the end of July in 2009.</p>
<p>Community Survey (Statistics South Africa, 2007)</p>	<p>In a large-scale Community Survey was conducted in all provinces. The main objective of the survey was to provide demographic and socio-economic data at municipal level. 949 105 persons were enumerated. 246 618 households were covered during enumeration. The data were weighted, given the fact that this was a sample survey.</p>
<p>Audit of Residential Facilities (Umhlaba Development Services, 2010)</p>	<p>This report was commissioned by the Department of Social Services with the aim to review the systems adopted to run residential facilities and explore the quality of these services. 426 homes across the country were analysed in term of medical services, social/recreational and outreach services, policies and procedures, management and governance, staff and volunteers, and overview of building and facilities.</p>
<p>A profile of social security beneficiaries in selected districts in the Western Cape (Datadesk, 2004)</p>	<p>This study was commissioned by the Department of Social Services and Poverty Alleviation of the Western Cape Provincial Administration. The project commenced on the 1st July 2003 and was completed by April 2004. The main aim of the study was to develop a socio-economic and demographic profile of social security beneficiaries in twelve selected magisterial districts in the province.</p>

1. INTRODUCTION

The passing of the Older Persons Act, No 13 of 2006, was a historic achievement for the elderly in South Africa, particularly the poor and disadvantaged older person. The Older Persons Act of 2006 marks a change in how support to the elderly is viewed, moving away from an approach focusing on the elderly as merely recipients of grants and thus objects of welfare, to an emphasis on the rights of older people. Furthermore the socio-economic rights of older South Africans are now grounded in law which means that all government departments and organisations serving the elderly have a duty to observe, respect and act upon these rights as stipulated in the Act. The most prominent issues set out in the Act are access to community-based care and support services within a supportive environment, the regulation of residential facilities for older people, and protection against abuse, ill treatment and neglect. The emphasis is on creating the environment and conditions under which older people can remain independent, active and contributing citizens in their communities for as long as possible.

Although the Department of Social Development (DSD) derives part of its core mandate from the Constitution of South Africa, which provides for the right of access to appropriate social assistance to those unable to support themselves and their dependents, it is further obligated by the Older Persons Act to fulfil their mandate of service delivery by ensuring the achievement of the following:

- Enabling older people to enjoy active, healthy and independent lives
- Creating an enabling and supporting environment, and
- Provide continuous care to older people in need

To this end, since 1994, South Africa has ratified International Conventions and promulgated national legislation in an effort to promote the wellbeing of older persons in this country. In 2002 South Africa became a signatory to the International Plan of Action on Ageing (the Madrid International Plan of Action on Ageing) together with the African Union's Policy Framework and Plan of Action on Ageing (2003) amongst others, to provide a framework for advancing the rights of older persons in South Africa.

Beyond the Constitution, the socio-economic rights of older persons are also promoted and protected by other national legislation, amongst others:

- a) The National Health Act 61 of 2003, sections 4(1) allow the Minister of Health to determine circumstances under which vulnerable groups, including older persons, may qualify for free health services at public health facilities.

- b) Social Housing Act 16 of 2008 gives priority to social housing for vulnerable groups of which the elderly is one.

(Adkins, 2011)

Other legislation protects against eviction of vulnerable persons, prohibit unfair age discrimination, and protect groups of disadvantaged consumers.

Population ageing is not just a phenomenon experienced by more developed countries, but is now an experience of virtually all countries in the world. South Africa, as one of the most rapidly ageing populations in Africa, is expected to continue ageing over the next two decades. Joubert & Bradshaw (2006) show a projected increase of 48%, that is a projected increase from 2.5 to 5.2 million, for the time period 1985-2025. In the 2009/2010 South African Survey, the Institute for Futures Research show in their projected population numbers for 2010-2040 a general decline in population figures for the age groups 0-15 years (-21.6%) and 15-64 years (-0.6%). However the population size for the age group 65 years or older is projected to increase by 117.5% for the same period.

These growing numbers of the older population within the South African context of slow economic development, place a strong onus on the South African government to ensure the actualisation of the stipulations in the Older Persons Act. There is however some concern raised regarding the timely and full implementation of the Older Persons Act (Adkins, 2011). It is agreed that the Act has significant potential to make a positive impact on the socio-economic rights of older South-Africans, however the implementation of the Act remains in its infancy. Adkins bases her reservations on the long time that has lapsed between the year in which the Act was enacted, 2006, and the publication of its regulations, 2010. Even more troubling is the lack of an effective coordinating mechanism to ensure that all levels of government and civil society carry out their mandates.

In an effort towards a coordinated approach to service delivery to the older population in the Western Cape Province (WCP) a specific task team including sector organisations committed to coordinated action to promote best practice, sustainability and innovation in service delivery to the aged, was formed in 2009. The Sector Task Team for the Older Person (STTOP) was created with a brief to investigate the possibilities in creating a sector-wide funding body with the necessary profile to attract large scale funding from national and international sources to help address the financial challenges facing the sector.

This report was commissioned by the STOPP partnership in an effort to develop an understanding of specifically the housing needs of social pensioners living in the Western Cape. The findings of this report is intended to allow the sector organisations in partnership with national, provincial and local government departments, to speak to the needs of the older population by means of Policy formulation and service delivery informed by the real needs of social pensioners within the province. The content of this report is based on extensive research done on the living situation of the elderly by means of both secondary and primary data sources. The secondary data sources consist of both datasets that was analysed for the purpose of this report and reports applicable to the aim of this report. The primary data collected for this report is qualitative in nature and consists of six focus group discussions conducted with elderly beneficiaries of the services provided by members of the STOPP partnership. The report was compiled with the following focus areas:

- a) A socio-economic profile of state pensioners in the Western Cape including their access to basic services.
- b) Situational analysis of the housing need and context of the elderly in the Western Cape

2. DEMOGRAPHIC INFORMATION

The age pyramid portrayed in Figure 2.1 describes the age distribution of the South African population. When isolating individuals in the population aged 60 years or older the data show this group to contribute 7,9% to the total population size with female individuals the greater majority (South African Survey 2007/2008:9) [Figure 2.2]. For the Western Cape Province the older population group contributes 8,6% to the total population size of this province (2007 Community Survey, Stats SA). The trend of female dominance in the population composition of the older population group is shown to be true for all 9 provinces in the country [Figure 2.3] and show a general pattern of older females than males, a common phenomenon due to women's higher life expectancy at birth. This is an important observation to consider given the multiple and often lifelong gender disadvantages experienced by numerous older women as a result of gender biases, widowhood and old age, all having a possible impact on the social and material well-being of older women (Joubert and Bradshaw, 2006).

When focussing on the distribution of the total elderly population across the 9 provinces the Western Cape is shown as the province with the third largest older population (12%) following the Eastern Cape (17%) and KwaZulu Natal and Gauteng (both at 19%) [Figure2.4]. Regarding the racial distribution of the elderly for the Western Cape Province the 2007 Community Survey (Stats SA), shows the majority of older persons in the province to be within the White population group 47%, followed by 40% within the Coloured population group and 12% in the African population group [Figure2.5].

For the educational level of the elderly population there is a rather dramatic difference when comparing the case of the Western Cape to that of the country as a whole. Figures 2.6 and 2.7 show the older population of the Western Cape as much better off when compared to the national situation (CASE, 2009 & Statistics South Africa, 2007). For the Western Cape the greater majority of older persons (48%) are shown to have completed a secondary or some secondary educational level, compared to the national statistics of 25%. On national level the majority (35%) of older persons is shown to have either no formal educational training or have completed a primary or some primary educational training. The Western Cape also show varying levels of educational training for the two genders, with females in the Western Cape showing a higher educational level than males, except on tertiary level education. Again this trend is not mirrored on national level, with females shown as generally worse of than males in terms of highest educational level completed. Except for the group that indicated to have no formal

education, where 40% were female compared to 25% male, females are either equal to males (35% that completed primary education) or worse off.

The higher educational level of the older population in the Western Cape compared to the national case can most probably be related to the larger white older population in the province, who historically has shown a higher educational level than the elderly of other racial groups and thus influence the general trend. This point is supported by findings by Vorster et.al. (2004) who in their study focussed on the grant beneficiaries in the Western Cape, with the majority (62%) of Old Age Grant (OAG) beneficiaries belonging to the Coloured community and 17% to the White population group. When focussing on this group (OAG beneficiaries) the data show the majority to have no formal education with a rather strong urban-rural divide with the majority of those indicating to have completed 7-11 years of formal education to reside in the urban areas and the majority of those that completed 1-6 years of formal education to live in the rural areas included in the study [Table 2.1].

2.1. Living conditions and access to amenities

In a study by Vorster et.al. (2004) on the socio-economic conditions of grant beneficiaries in the Western Cape, the living conditions of OAG beneficiary households is shown in general as good. Regarding access to amenities the greatest majority of OAG beneficiary households in all magisterial districts in the Western Cape have flush toilets which are connected to a sewerage system, have electricity within the dwellings and have access to piped water either on their plots or inside their dwellings [Table 2.2 & 2.3, Figure 2.8]. From the data it would thus seem that with regards to their physical living conditions which include access to basic services and housing, the greater majority of older persons in the Western Cape are provided for.

On a national level older persons as one of the groups included in the government's definition of vulnerable groups, are also eligible for municipal rebates as part of a subsidy scheme by the National Government where poor households have the option to register at their municipalities for subsidies on basic services. Disconcerting however is the finding in a study by CASE (2009) among the general older population group when asked whether their household were registered with their local municipalities as indigent, three quarters 76% of the households said they were not registered, and therefore get no extra subsidy to cover for basic services such as electricity, water or refuse removal. In the Western

Cape Province 67% of respondent households did not know about this service. It would thus seem that a lack of knowledge regarding this subsidy is the primary reason for its inaccessibility to older persons.

2.2. Living arrangements of the elderly

With regards to the living arrangement of the elderly the NIDS data (2009) show the majority of the elderly as either married (44%) or widowed (38%) [Table 2.4]. The same trend was found in the study by Vorster et.al. (2004) with the greater majority of the OAG beneficiaries indicating to be either married/living with a partner (45%) or widowed (42%). It is however important to note the gender difference shown by the NIDS data (2009) with men the majority within the married category (71%) and females the majority within the widowed category (52%), again showing the vulnerability of females towards social security.

When investigating data on the compilation of the households of the elderly the NIDS data (2009) show the majority of the respondents (54%) as living with a biological child(ren). It is significant to note that for these respondents, that are those living with their biological children, all were female. This is an important finding as it reflects the great caring role that older women often play within households.

In an effort to develop a better understanding of the household compilation of older persons the CASE report (2009) categorised their participants according to household size. The report shows the majority (68%) of elderly households in the Western Cape to consist of 1-4 members with another 26% part of households consisting of 5-8 members [Table 2.5]. When identifying the primary care givers in the participant elderly households, the CASE report shows the majority (79%) indicating either themselves or their partner [Figure 2.9]. For the Western Cape Province 76% of the elderly respondents indicated themselves or their partners as the primary care givers [Table 2.6].

Analysing the data to show the relationship between the older person (respondent) and the household members, approximately 41% of the household members were found to be grandchildren [Table 2.7]. This finding is supported by Vorster et.al. (2004), where a large percentage of female beneficiaries indicated to be the primary care givers of their grand children.

Demographic data show multi-generational households as common amongst Black South African families, especially for households at the bottom of the income distribution. Burns et.al. (2005) directly

links this phenomenon to the economic role of the old age pension grant in that it [the grant] seems to decrease the propensity of the elderly to live alone. The old age grant is associated with increases in household size as well as changes in the household composition, with a larger number of children, especially those aged 0-6, migrating into pensioner households.

2.3. Economic situation

Currently there are 229,142 OAG beneficiaries registered in the Western Cape (SASSA, 2011). If measured over time the data shows a clear increase in the number of OAG payouts for the province [Figure 2.10]. This growth in the number of payouts is also shown on a national level with a 42% growth shown over the period of 2001-2011/2012 (South African Surveys, 2009/2010) [Figure 2.11]. The Community Survey (2007) indicates that, except for the white population, the majority of the elderly in the Western Cape receive an Old Age Grant [Table 2.8]. Figure 2.12 shows the racial distribution of the OAG beneficiaries in the Western Cape with the greater majority of beneficiaries belonging to the Coloured population group (62%), followed by the White (19%) and then African (17%) population groups [Figure 2.13].

When analysing data regarding the different sources of income for the elderly, the importance of the grant as significantly relieving the economic vulnerability of the elderly becomes very clear. The 2001 Census data allows the isolating of the elderly in measuring economic activities and clearly show the greater majority (81%) of the elderly population not taking part in economic activities [Table 2.9] and thus dependant on other external sources of income. For the small number of individuals who do engage in self-employment activities, the majority are shown as females engaging in elementary occupations as well as craft and other related trades (NIDS, 2009). With regard to receiving private maintenance, receiving remittances from people outside their household or membership to a community saving scheme, the greater majority of OAG beneficiaries included in the study by Vorster et.al. (2004) replied negatively. In testing the number of income sources for individual OAG beneficiaries the sole dependence of OAG beneficiaries on the grant as the primary and single source of income was shown, further accentuating the economic vulnerability of the elderly and thus the household of which they are part [Figure 2.14]. The importance of the grant as single and primary source of income was also shown in the CASE study (2009) [Tables 2.10 & 2.11].

The importance of the OAG as a source of income is also highlighted by May (2003) indicating the importance of this grant as a form of social security for older persons in South Africa by referring to work done by Ferreira et. al. (1995). Ferreira notes how the old age grant goes to women more than men; that it reaches into deep rural areas; that it often secures credit for the household at the local store; and contributes to the education expenses of grandchildren; that it ensures respect for the beneficiary; and secure the right of the older person to stay in the home and be cared for by the family (May, 2003).

In her report May notes the following on the impact of non-contributory pension programmes; “In the absence of non-contributory pension programmes, the poverty headcount and the poverty gap would be appreciably higher for households with older people. The impact on the poverty gap is much larger for the poorer households. The programmes significantly reduce the probability that individuals in households with a pension recipient will be in poverty” (May, 2003:5)

Regarding the decision making on how the elderly spent their pension money the majority indicated that they make these decisions themselves [Table 2.12].

2.4. Older person as care givers

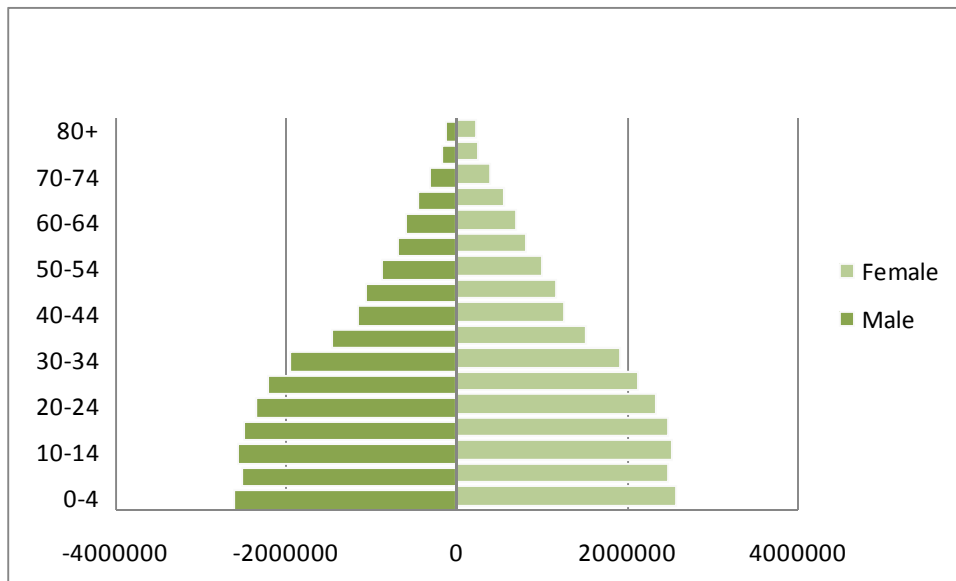
Key demographic trends, such as the large population share of school-going youth, very high unemployment rates and the devastating impact of the HIV/AIDS epidemic on younger age cohorts, have placed the social old-age pension and the elderly at the centre of the livelihood strategies of many South African households. In this context, the social pension plays a vital role as a poverty-alleviation mechanism, with the effect of pension income on the welfare of other household members being strongly conditioned on whether or not the pensioner is female (Bertrand , Mullainathan, & Douglas Miller, 2003; Duflo, 2003; Posel et.al., 2004, May, 2003). Thus, while elderly women benefit significantly from the pension system, important externalities such as changes in household composition and allocation of labour time, as well as changes in child health and educational status, are also associated with pensioner receipt, especially if the pensioner is female (Burns, 2005).

According to the CASE study (2009) the number of older persons who are the main caregivers in their households remains very high. Although many older persons assume the role of care givers, there seems to still be a lack in understanding their needs and vulnerabilities.

The role of caregiver place a very heavy burden on the elderly, considering that as shown above, an old age pension is often the primary source of income for poor households. Other than covering household expenses, the old age pension is also used to pay for school fees, health services or needs, savings as well as promoting social integration through church and burial contributions. In addition to the financial burden these elderly, most often females, also bear the burden of caring for their grandchildren who are either left behind by their parents as they seek work in the cities or other towns, or are orphaned by HIV and Aids (UWC, 2010, May, 2003).

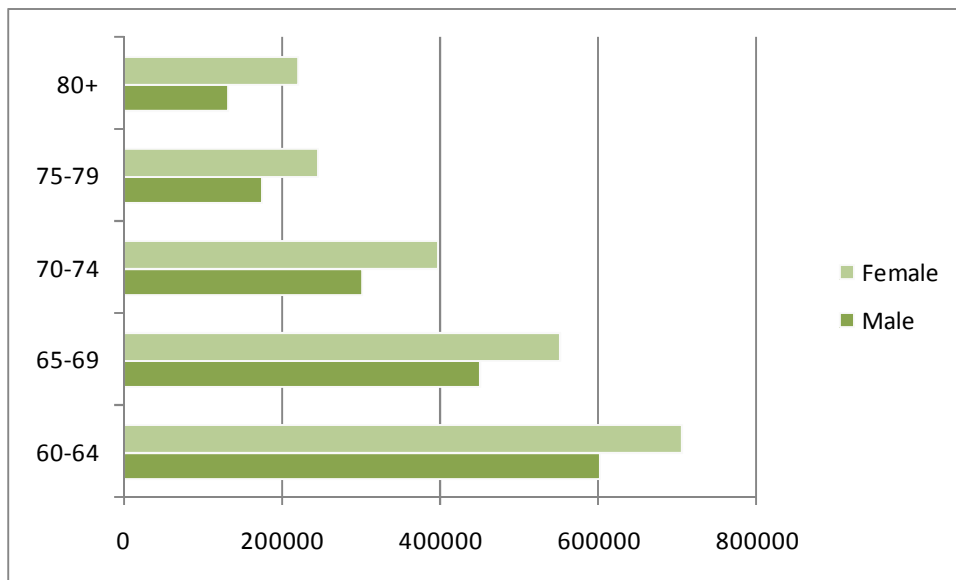
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Figure 2.1: Age pyramid for the South African population



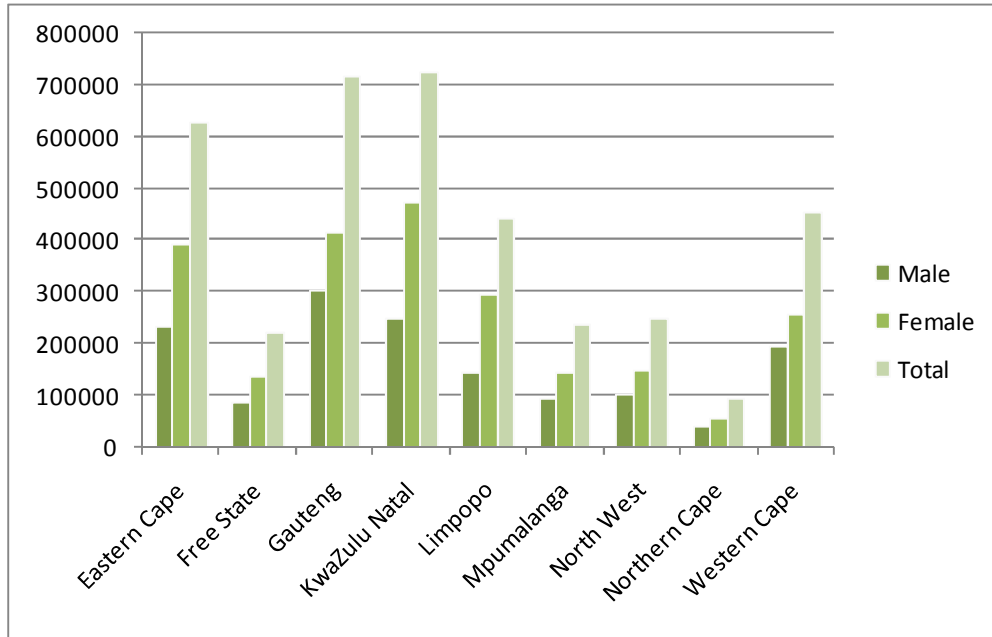
Source: Statistics SA, Community survey, 2007

Figure 2.2: Gender distribution within the elder population group



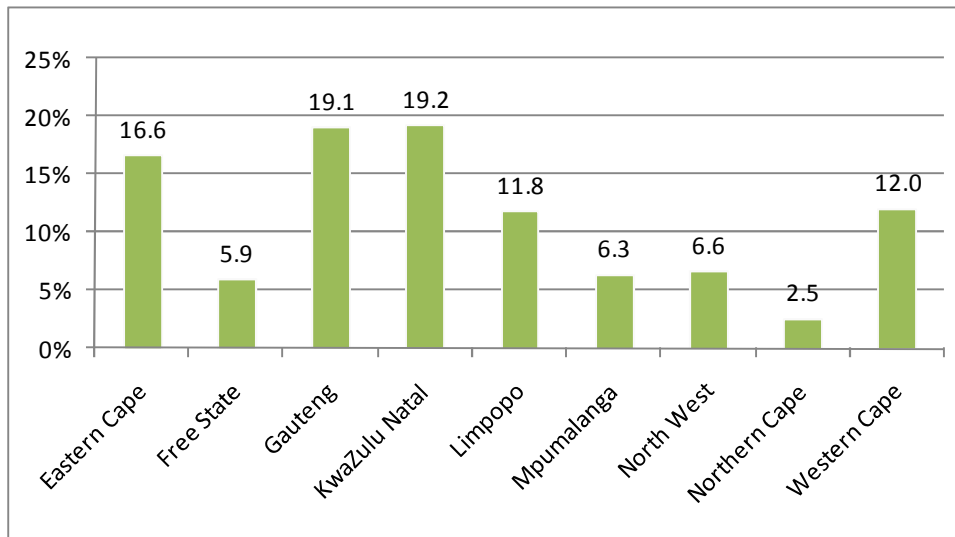
Source: Source: South African Survey, 2007/2008

Figure 2.3: Provincial distribution of older persons



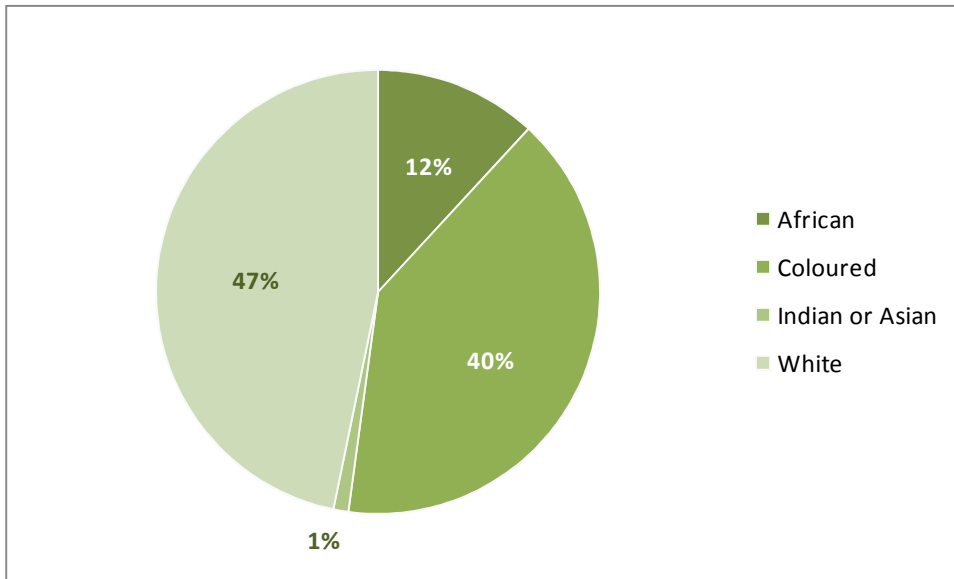
Source: Statistics SA, Community survey, 2007

Figure 2.4: Spread of older persons per province



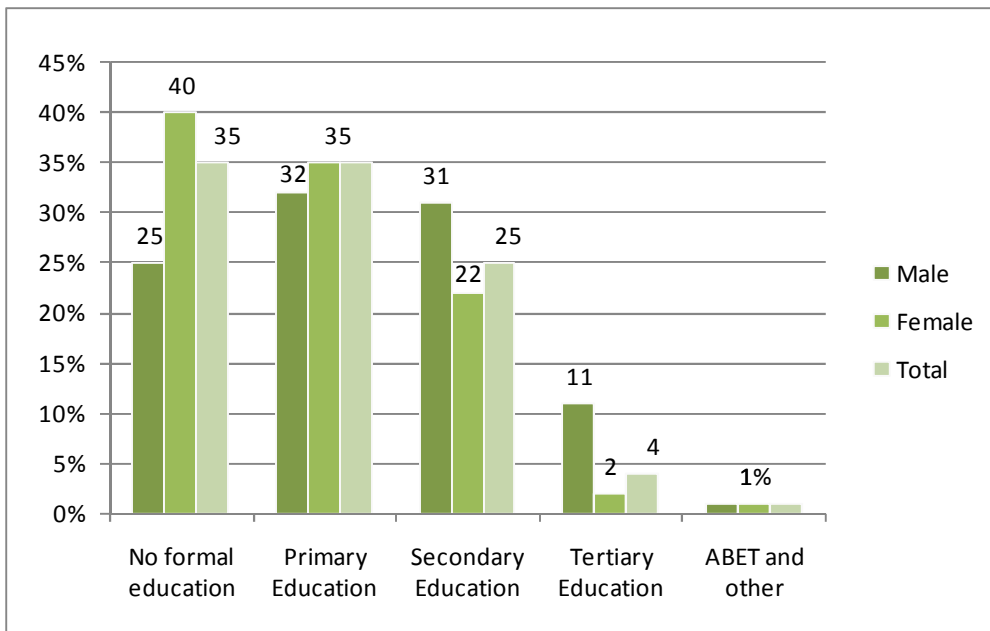
Source: Statistics SA, Community survey, 2007

Figure 2.5: Distribution of older persons in the Western Cape by Race



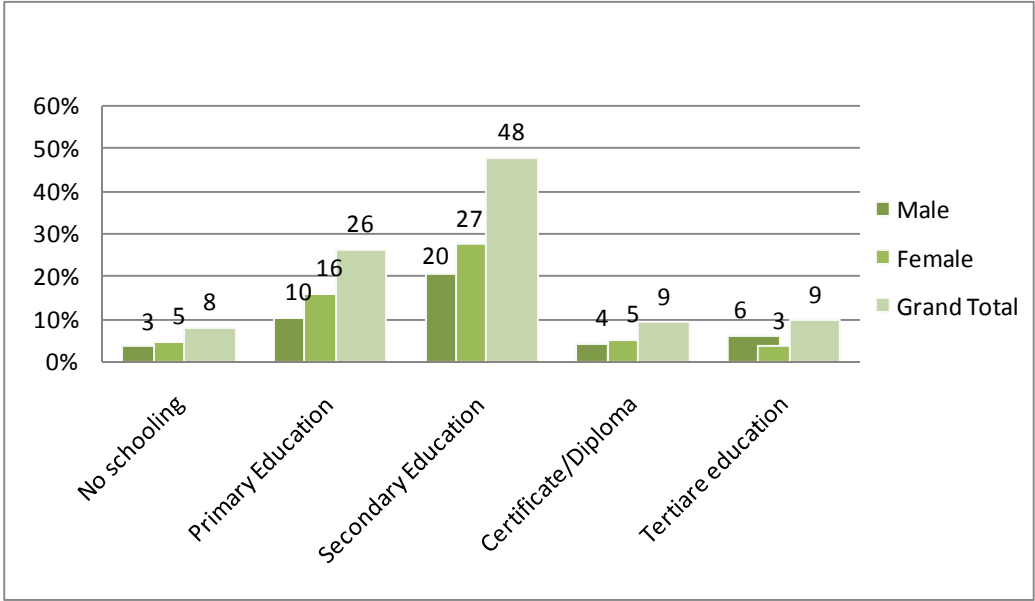
Source: Statistics SA, Community survey, 2007

Figure 2.6: Level of education for older persons (National)



Source: CASE, 2009

Figure 2.7: Level of education for older persons in the Western Cape



Source: Statistics SA, Community survey, 2007 (persons weighted)

Table 2.1: Highest level of education completed for old age grant beneficiaries in 12 selected districts in the Western Cape Province

Magisterial District	Education Level							Total
	No Formal Education	Adult Literacy	1-6yrs formal	7-11yrs formal	Matric/tertiary education	Don't Know	Refuse	
	Row %	Row %	Row %	Row %	Row %	Row %	Row %	Count
Beaufort West	34	5.7	26.4	28.3	3.8	1.9	0	53
Laingsburg	45.8	2.1	25	20.8	0	6.3	0	48
Prince Albert	61.4	4.5	27.3	6.8	0	0	0	44
Murraysburg	45.6	5.3	29.8	12.3	0	7	0	57
Goodwood	11	0	39.6	40.3	1.3	7.1	0	154
Mitchell's Plain	12.1	0	39.4	43.9	1.5	3	0	66
Vredenburg	35.6	3.4	27.1	32.2	1.7	0	0	59
Hopefield	28.6	1.2	33.3	29.8	3.6	3.6	0	84
Ceres	42.7	1.3	32	17.3	1.3	5.3	0	75
Malmesbury	41.3	3.2	36.5	17.5	0	1.6	0	63
Caledon	18.6	1.4	50	27.1	1.4	1.4	0	70
Mossel Bay	15.7	0	51	29.4	0	3.9	0	51

Source: Vorster et.al., 2004

Table 2.2: Access to toilet facility (OAG beneficiary), Western Cape Province

Magisterial District	Toilet facility						Total	
	Flush toilet (connected to sewerage system)	Flush toilet with septic tank	Pit latrine with ventilation	Pit latrine without ventilation	Bucket latrine	None		
	Row %	Row %	Row %	Row %	Row %	Row %	Row %	Count
Beaufort West	92.5	7.5	0	0	0	0	100	53
Laingsburg	77.1	16.7	6.2	0	0	0	100	48
Prince Albert	79.5	18.2	0	0	2.3	0	100	44
Murrayburg	66.7	31.6	0	1.7	0	0	100	57
Goodwood	96.8	2.6	0	0.6	0	0	100	154
Mitchell's Plain	92.4	6.1	0	0	0	1.5	100	66
Vredenburg	89.8	10.2	0	0	0	0	100	59
Hopefield	84.5	13.1	0	0	2.4	0	100	84
Ceres	80	16	2.7	1.3	0	0	100	75
Malmesbury	84.1	14.3	0	0	0	1.6	100	63
Caledon	77.1	17.2	0	0	5.7	0	100	70
Mossel Bay	88.2	11.8	0	0	0	0	100	51

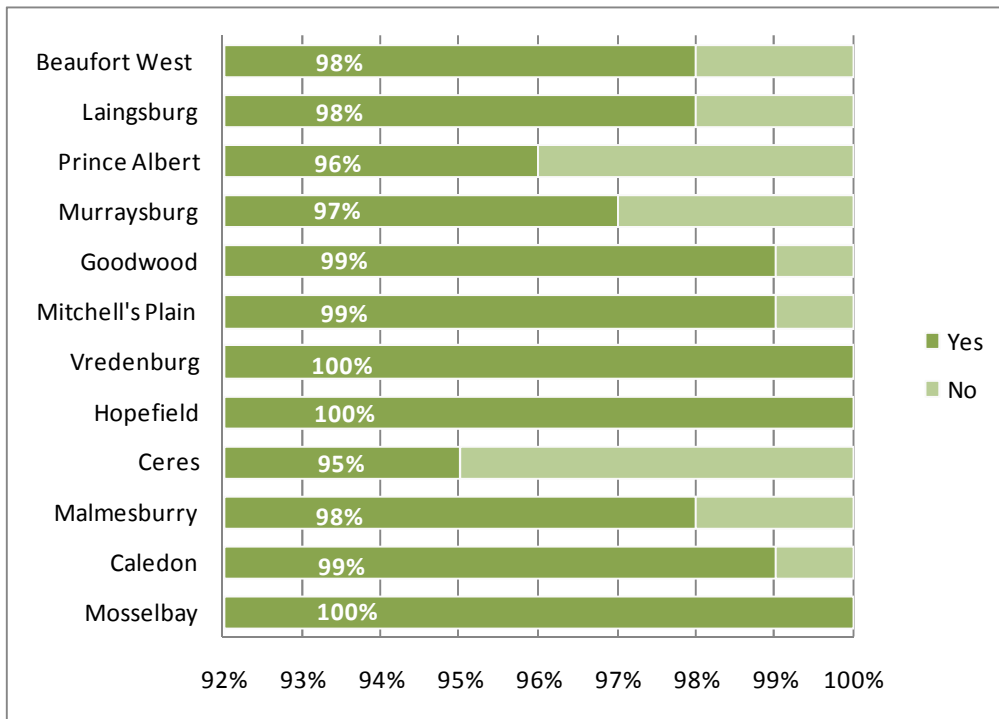
Source: Vorster et.al., 2004

Table 2.3: Access to piped water (OAG beneficiary), Western Cape Province

Magisterial District	Toilet facility					Total	
	No access to piped (tap) water	Piped (tap) water on community stand: 200m or further	Piped (tap) water on community stand: less than 200m	Piped (tap) water inside Yard	Piped (tap) water inside dwelling		
	Row %	Row %	Row %	Row %	Row %	Row %	Count
Beaufort West	0	0	0	20.8	79.2	100	53
Laingsburg	0	0	0	37.5	62.5	100	48
Prince Albert	0	0	0	77.3	22.7	100	44
Murraysburg	0	0	0	70.2	29.8	100	57
Goodwood	3.2	0	0	3.9	92.9	100	154
Mitchell's Plain	0	3	1.5	33.3	62.2	100	66
Vredenburg	0	0	0	11.9	88.1	100	59
Hopefield	0	0	0	13.1	86.9	100	84
Ceres	0	0	0	9.3	90.7	100	75
Malmesbury	0	0	0	25.4	74.6	100	63
Caledon	0	0	1.4	12.9	85.7	100	70
Mossel Bay	0	0	0	35.3	64.7	100	51

Source: Vorster et.al., 2004

Figure 2.8: Access to electricity (OAG beneficiary), Western Cape Province



Source: Vorster et.al., 2004

Table 2.4: Marital status of older persons (National)

Marital status		Gender		Total
		Male	Female	
Married	Count	540	418	958
	% within Gender	71.1%	29.7%	44.2%
Living with partner	Count	47	27	74
	% within Gender	6.2%	1.9%	3.4%
Widow/Widower	Count	96	734	830
	% within Gender	12.6%	52.1%	38.3%
Divorced/Separated	Count	23	64	87
	% within Gender	3.0%	4.5%	4.0%
Never Married	Count	53	165	218
	% within Gender	7.0%	11.7%	10.1%
Total	Count	759	1408	2167
	% within Gender	100.0%	100.0%	100.0%

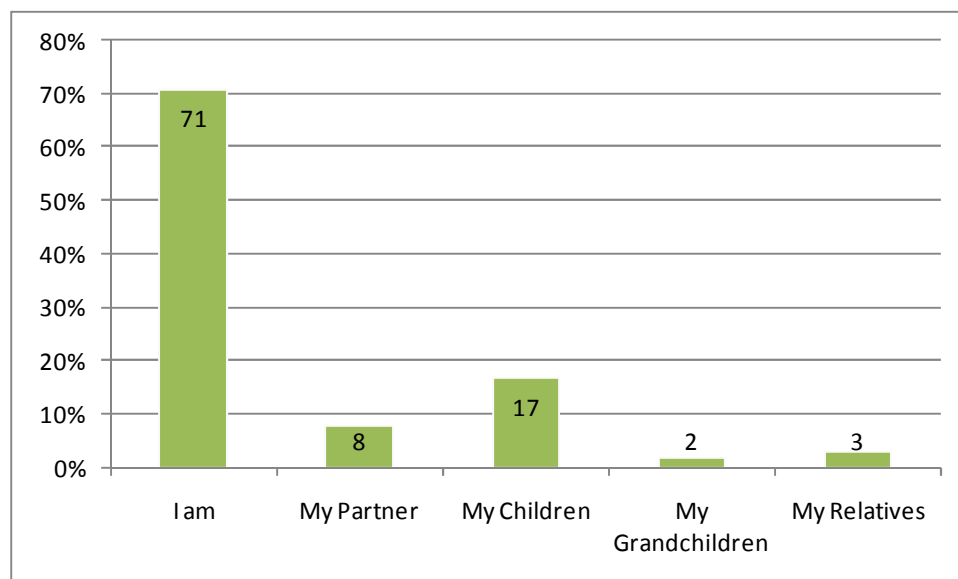
Source: NIDS, 2009

Table 2.5: Respondents by household size and province

	1 to 4		5 to 8		9 to 12		13 to 16		16+		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Eastern Cape	130	62	60	28	20	9	1	0	0	0	211	100
Free State	45	61	24	32	4	5	1	1	0	0	74	100
Gauteng	151	74	44	21	10	5	0	0	0	0	205	100
KwaZulu-Natal	111	45	96	39	33	13	7	3	2	1	249	100
Limpopo	78	54	61	42	6	4	0	0	0	0	145	100
Mpumalanga	42	47	39	43	6	7	3	3	0	0	90	100
Northern Cape	56	68	22	27	4	5	0	0	0	0	82	100
North West	58	51	41	36	11	10	3	3	0	0	113	100
<i>Western Cape</i>	<i>119</i>	<i>68</i>	<i>45</i>	<i>26</i>	<i>8</i>	<i>5</i>	<i>2</i>	<i>1</i>	<i>0</i>	<i>0</i>	<i>174</i>	<i>100</i>
Total	790	59	432	32	102	8	17	1	2	0	1343	100

Source: CASE, 2009

Figure 2.9: Respondents as primary care givers in the household



Source: CASE, 2009

Table 2.6: The primary care giver in the household

Province	I am		My partner		My children		My grand-children		My relatives		People taking care of me but not related to me		Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Eastern Cape	140	67	16	8	36	17	7	3	7	3	4	2	210	100
Free State	55	74	11	15	8	11	0	0	0	0	0	0	74	100
Gauteng	165	80	11	5	21	10	5	2	3	1	0	0	205	100
KwaZulu-Natal	143	58	19	8	70	28	9	4	6	2	0	0	247	100
Limpopo	114	79	5	3	22	15	1	1	3	2	0	0	145	100
Mpumalanga	64	72	6	7	12	13	7	8	0	0	0	0	89	100
Northern Cape	70	85	4	5	7	9	0	0	1	1	0	0	82	100
North West	80	69	8	7	21	18	2	2	4	3	1	1	116	100
<i>Western Cape</i>	<i>113</i>	<i>64</i>	<i>21</i>	<i>12</i>	<i>27</i>	<i>15</i>	<i>1</i>	<i>1</i>	<i>13</i>	<i>7</i>	<i>1</i>	<i>1</i>	<i>176</i>	<i>100</i>
Total	994	70	101	8	224	17	32	2	37	3	6	0	1344	100

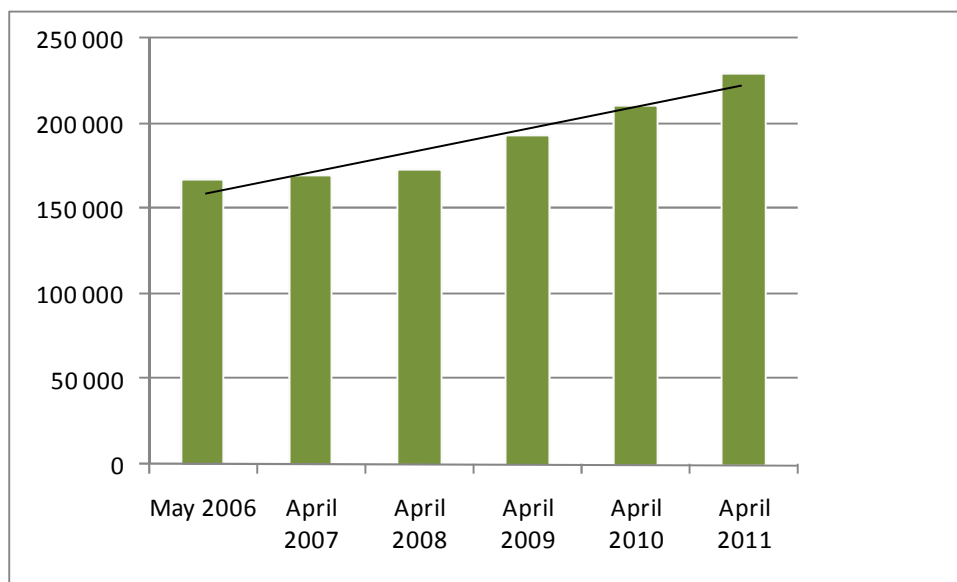
Source: CASE, 2009

Table 2.7: Relationship to respondent

Relationship	N	%
Respondent	1336	23
Partner	363	6
Biological child	1202	21
Other child	50	1
Relative child	57	1
Brother/sister	87	1
Parent	29	0
Grandchild	2381	41
Other relative	216	4
Friend	3	0
Other non-relative	41	1
Other	66	1
Total	5 831	100

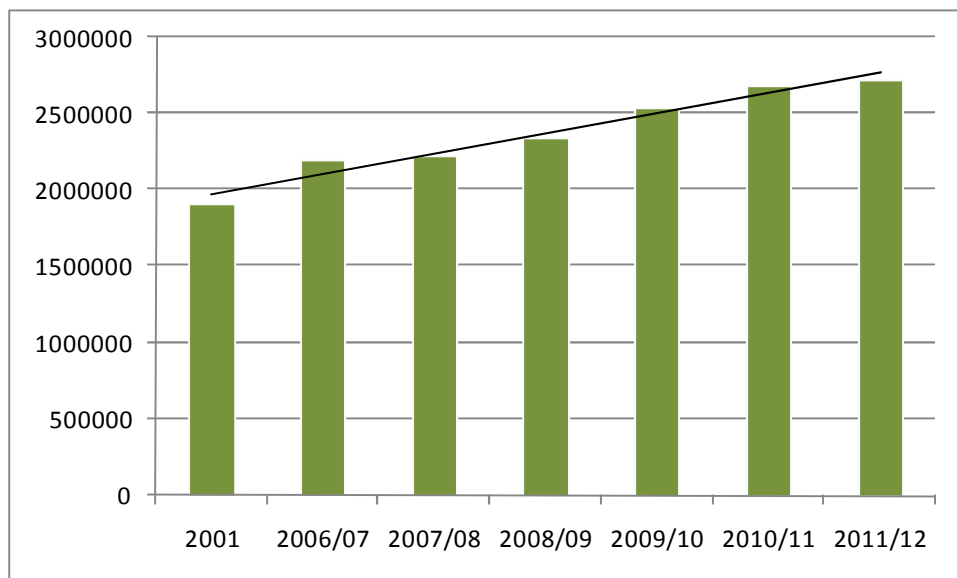
Source: CASE, 2009

Figure 2.10: OAG beneficiaries in the Western Cape May 2006 – April 2011



Source: SASSA, 2011

Figure 2.11: OAG beneficiaries in South Africa



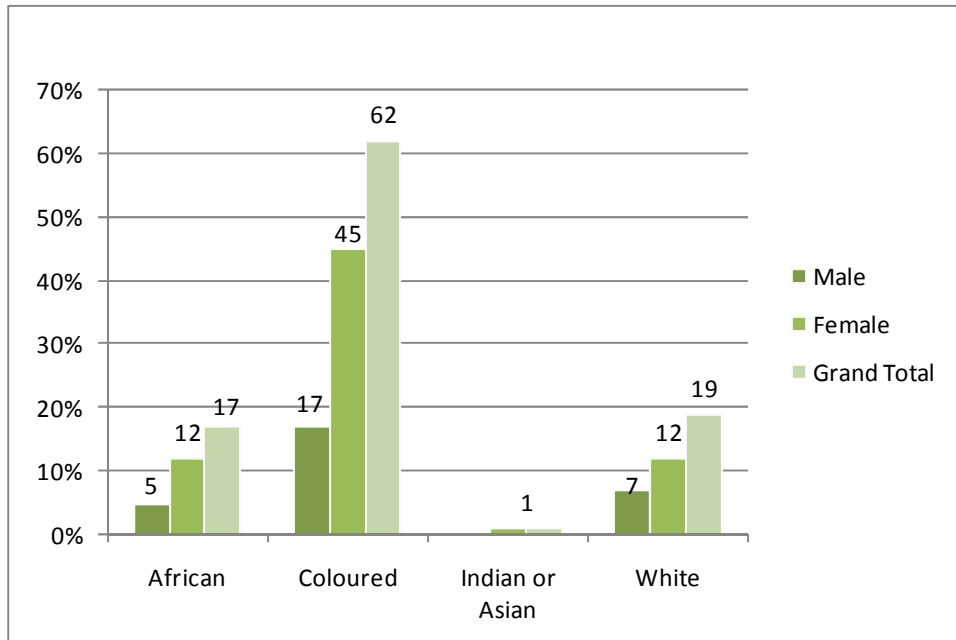
Source: Southern Africa Survey 2009/2010

Table 2.8: Old Age Grant Beneficiaries by population group (National)

Race	Actual recipients		Age-Eligible		Ratio of eligible individuals receiving pensions
	Count	%	Count	%	%
African	1,641,081	77.23	1,907,388	63.16	86
Coloured	211,945	9.97	257,171	8.52	82
Asian/Indian	85,006	4.0	104,471	3.46	81
White	186,764	8.79	751,053	24.87	25
Total	2,124,796	100	3,020,083	100	70

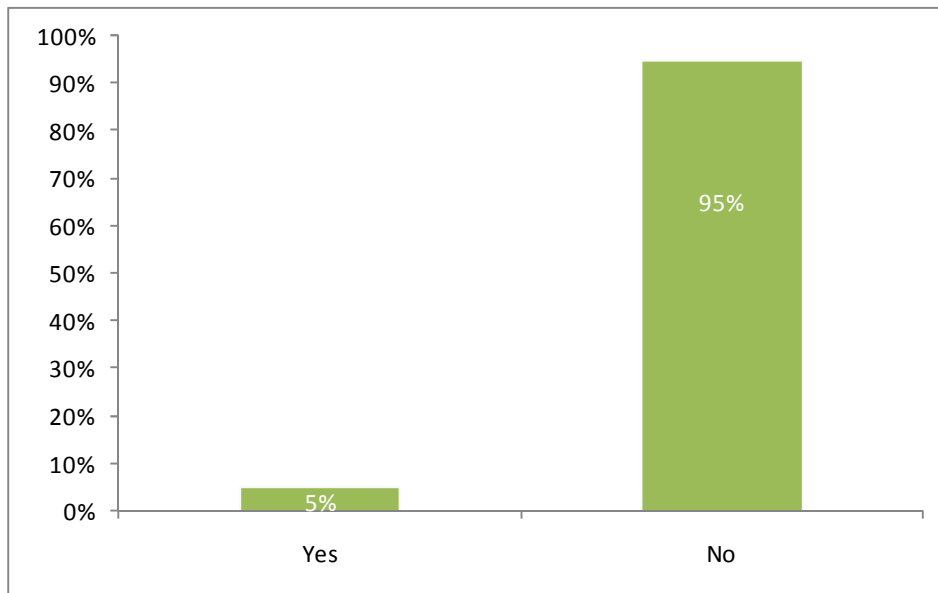
Source: NIDS, 2009

Figure 2.12: Racial and gender distribution of OAG beneficiaries in Western Cape



Source: Community Survey, 2007

Figure 2.13: Employment status of older people (National)



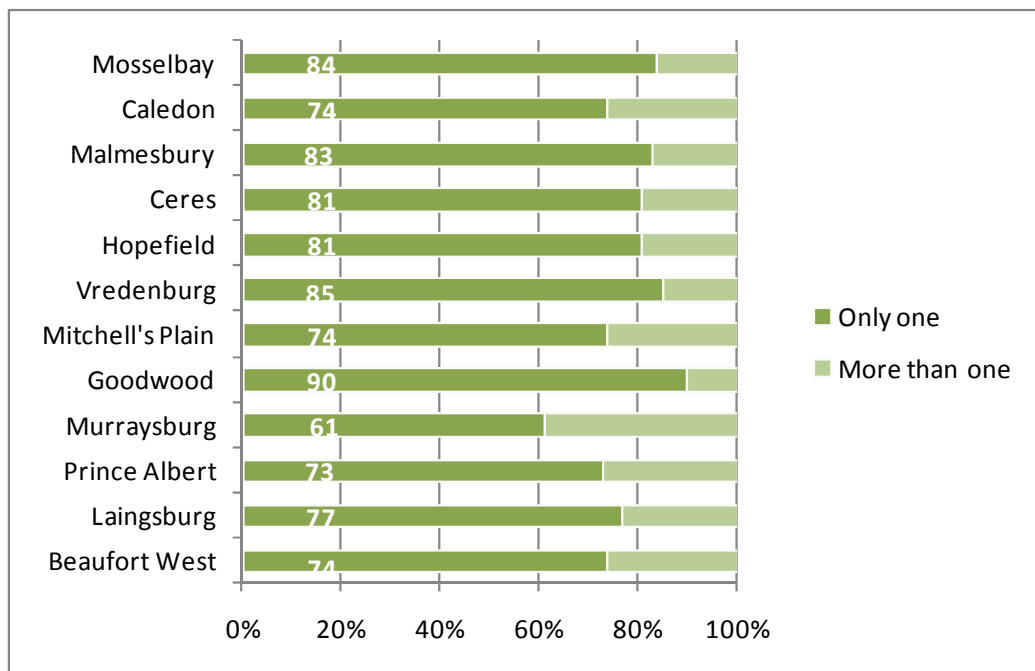
Source: Stats SA, Census 2001 (persons weighted)

Table 2.9: Employment status of older persons (Western Cape)

Employment status	Male				Female			
	African	Coloured	Indian or Asian	White	African	Coloured	Indian or Asian	White
Employed	26	27	34	40	9	8	6	19
Unemployed	12	5	4	2	3	1	1	1
Pensioner or retired person/too old to work	39	47	46	53	71	72	67	60
Unable to work due to illness or disability	8	14	9	2	3	3	3	1
Home-maker or housewife	1	1	1	1	7	11	20	16
Seasonal worker not working presently	1	1	1	0	1	1	0	0
Does not choose to work	7	4	3	1	4	2	3	2
Could not find work	7	2	2	1	2	1	1	1
Total	100	100	100	100	100	100	100	100

Source: Stats SA, Census 2001 (persons weighted)

Figure 2.14: Number of income sources per OAG beneficiary, Western Cape Province



Source: Vorster et.al., 2004

Table 2.10: Means of support for respondents

Means of support	N	%
Income generating activities	79	6
Private pension	92	7
Supported by family members	130	10
Supported by charity, church, welfare etc	1	0
Savings or money previously earned	16	1
Government old age grant	843	62
Other government grant	118	9
Other sources	8	1
N = 1 355		

Source: CASE, 2009

Table 2.11: Households receiving grant or other kinds of income from government

Income Category	N	%
Unemployment Insurance Fund	2	0
Workers compensation	16	1
Old Age Grant	1108	82
Disability Grant	140	10
Child Support Grant	425	31
Foster Care Grant	54	4
Care Dependency	8	1
War Veterans	1	0
Grant in Aid	7	1
N = 1 354		

Source: Case, 2010

Table 2.12: Decision maker on the use of the old age grant/private pension

Person making decisions	Household respondents						Beneficiaries					
	F	%	M	%	T	%	F	%	M	%	T	%
I	827	87	231	75	1058	84	157	89	20	54	177	83
My partner or spouse	15	2	28	9	43	3	2	1	3	8	5	2
My children	40	4	8	3	48	4	3	2	2	5	5	2
My children and I	35	4	5	2	40	3	3	2	1	3	4	2
My partner and I jointly	17	2	31	10	48	4	5	3	7	19	12	6
My relatives	11	1	2	1	13	1	1	1	0	0	1	0
Other	2	0	2	1	4	0	5	3	4	11	9	4
Total	947	100	307	100	1254	100	176	100	37	100	213	100

Source: CASE, 2009

3. Situational analysis of the housing need and context of the elderly in the Western Cape

When discussing the housing situation of the elderly it is necessary to distinguish between able bodied elderly persons, these are elderly that are still able to live independently, and those that are not fully able to care for themselves. The Older Persons Act clearly states the responsibility of government in ensuring that its senior citizens are in environments that maintain/improve their physical, social and psychological wellbeing however, the focus of government support is primarily for the latter group of elderly– those that are dependent on or in need of assisted living.

When analysing data on the housing conditions of OAG beneficiaries within the Western Cape Province not living in residential care facilities, the statistics if taken on face value, describes generally good housing conditions for both urban and rural areas. The study by Vorster et.al. (2004) shows the majority of these OAG beneficiaries to live in formal neighbourhoods in brick houses on separate stands. For those that do live in informal areas the majority was living in Mitchell’s Plain/Khayelitsha (20%) at the time of the study [Table 2.13]. This finding is confirmed in a CASE study on the status of older persons in South Africa (CASE, 2009) where the Western Cape elderly is shown as well off with regards to access to housing with 84% of older persons living in a house or formal structure on a separate land, 11% in an apartment/flat, 1% in a house or room in a backyard and 3% in an informal dwelling/shack [Figure 2.15]. These statistics are however misleading if viewed in isolation to the socio-economic context of the living arrangements of the elderly described above. In the remainder of this section aspects pertaining to this socio-economic context will be discussed, based on the findings of focus group discussions held with both elderly that live in their own/private dwelling units and those living in community based housing within the Western Cape Province in June 2011.

3.1. Focus Group discussion with 30 elderly living in the Cape Metropolitan Area, Western Cape Province

In June 2011 five focus group discussions were held with elderly persons in Khayelitsha (N=13), Bothasig (N=5), Observatory (N=6) and Stellenbosch (N=6). All the respondents were associated with the members of STTOP through either partaking in their activities (Khayelitsha social club) or living in

housing provided by Abbeyfield (Bothasig), CPOA (Observatory) and NOAH (Stellenbosch). In the discussions information on the following aspects were explored:

- General profile information for participants
- Background information and contextualisation of current living (residential) conditions
- Willingness to consider alternative living arrangements/ aspects surrounding alternative living arrangements / possibilities of alternative living arrangements. / other potential living arrangements

3.2. Profile of discussants

A total of 30 elderly persons participated in the focus group discussions including discussants from the three racial groups; 13 African elderly from Khayelitsha (Xhosa speaking), 6 Coloured elderly from Stellenbosch (Afrikaans speaking) and 1 in Cape Town (English speaking) , and 10 White elderly from Cape Town and Bothasig respectively (Afrikaans and English speaking). The mean age of the elderly participants was 71 years, with the youngest participant at 59 years and the oldest 94 years. Only 7 of the 30 participants were married, the others were either divorced (N=3), widowed (N=9) or never married (N=11). All of the Khayelitsha participants were living in privately owned housing (including formal and informal dwelling units), whilst all the other participants lived in independent community houses managed and provided by Abbeyfield, CPOA or NOAH.

When asked about income sources 25 discussants indicated that they only have one income source. Of these 23 received only the state provided OAG. For the remaining two, one male was still employed full time and another lady received only a private pension. Of the other five elderly who stated to have two sources of income all indicated that they receive the state provided OAG as the main source of income supplemented by either some form of private pension (N=3) or by working a few days a week (N=2). Of the two elderly that supplement their grant income with employment both are female with one working as a beverage lady and the other as a domestic worker.

3.3. Discussion of issues raised in the focus group discussions with elderly discussants with a focus on their housing context

In the discussions with the different groups of elderly three groups can be discerned. The first two groups consisted of African and Coloured elderly (Khayelitsha and Stellenbosch) that in their working years fell within a low income earning category, with jobs ranging from cleaning ladies, taxi or bus drivers, caretakers and a nursing assistant. The primary difference between these two groups is the socio-economic situation of their children and the role of the elderly within these households.

For the African discussion groups only one lady indicated that she lives with her daughter in her daughter and her husband's house. The rest of the respondents indicated ownership of the dwelling unit that they live in, including RDP houses (N=6), Subsidy houses (N=3) and shacks (N=2). In all the cases, but for the one elderly lady who lives with her daughter, the discussants indicated to have children and or grandchildren living with them. In nearly all the cases these children were unemployed and thus fully reliant on the elderly person. Supporting the argument of the importance of the OAG as an income source for poor households (see section on elderly as care givers on p. 8). This further illustrates the heavy burden on the elderly within these households. This burden was further underlined in their responses to the question that if they had the choice would they have liked to live on their own. The unanimous response to this question was, "Yes!", explaining that they would have liked to live on their own but cannot due to their children's economic situation. The dependence of these households on the OAG of the elderly person was further demonstrated through the story of one of the discussants, a frail 80 year old lady. Not being able to properly communicate anymore the other members told the following story. In 2010 the lady fell ill to such an extent that she needed frail care. At this stage her children had no reservations about taking her to live at the NOAH frail care house in Khayelitsha. However, after the first month, they [the children] realised that they now have no access to the lady's OAG due to NOAH's financial administration of the resident fees. They then went to fetch her from the home and she is since living with them. It must be noted that this was not done under any duress by the older lady as she herself indicated that it was bad for her to not be able to give her children any money when they asked for it, and thus prefer to live with her children.

Following this story, the discussants were asked if they would consider living in a community based house, such as provided by NOAH and Abbeyfield, on which all discussants indicated that they are happy and content with their current living arrangements and environment. In probing this issue further it

became very clear that their response was partly based on pre-conceived ideas or stigma's attached to such forms of living, informed by stories such as those above resulting in perceptions that these places take your money, but also on cultural perceptions regarding ageing. It was explained by the discussants that African elderly have a belief that when they die, they must die in their own place. In addition to this belief is also a philosophy that children that place their parents in old age homes throw their parents away and thus such actions are not deemed as acceptable. Other than sharing the idea that old age homes are dangerous places, there was an agreement that it is acceptable to place someone there should they not be able to look after themselves and need medical care. When explaining to the group how the NOAH concept work, they all indicated that they were not aware of such a housing model and agreed that, although they are not interested themselves, such a housing solution is indeed needed for elderly persons who find themselves in abusive or emergency situations.

In the Coloured discussion group the economic situation of their children were directly opposite to that of the African group with all indicating their children as employed and living in their own residential units either as owners or tenants. On the question if they would like to rather live with their children as opposed to their current living arrangement, the response was as resounding *"No!"*. With all the members indicating to have lived with their children at some stage; the two main reasons put forward for this response was that they felt *'in the way'* and that it is lonely living with their children. *"Dit werk nie uit nie. Jy voel in die pad. Die kinders het hulle dinge en dit raak eindlik baie alleen. Jy sit in jou kamertjie en hulle praat hulle dinge, jy kan nie saam praat nie. Jy is oud en hulle praat hulle dinge."* [It doesn't work out, you feel in the way. The children have their things and you get very lonely, you sit in your room and they talk about their things, you can't join in the conversation. You are old and they talk about their things.]. There was also a strong sense that they did not want to be a burden to their children and thus prefer to live on their own and do their own thing in their own time.

The third group consisted of White elderly persons that in their working years were part of the middle income working class. This group showed some strong parallels to the Coloured discussant group when describing their lives up to the point where they are now. As was the case with the Coloured discussant group, this group also unanimously voiced their preference to independent living rather than living with their children or other family. *"They [my children] have to live their own lives. I like my independence. I like my own company."*; *"It wouldn't be fair on the kids. My parents lived with me, I know what I am talking about. It just does not work out"*.

Those living in independent homes indicated that they would only move out if they could no longer look after themselves and needed some kind of living assistance. When asked where they would prefer to live should it come to a stage where they need some kind of care or assistance, all indicated that they would rather move to a frail care facility than move to live with their children as they do not want to be a burden on their children. There was however a strong sense of uncertainty at this point in the discussions, a hurried sense to this topic as if they wanted to move on to something else. Comments such as, *“We trust that the Lord will provide”*, *“Ons los dit maar in die Here se hande”* [we leave it in the hands of the Lord], clearly showed the uncertainty to the elderly regarding their own situation should the day come that they need some kind of care and assistance and will have to move from where they currently stay.

In responding to the question as to how it came about that they chose to or had to move to a community house or institutional residential unit, the response in all the cases were that it was a necessary step due to exorbitant living costs. In all the cases respondents indicated that accompanying pensioner status and retirement is the reality of much lower income and thus the inability to sustain a way of life, specifically with reference to the costs of independent private accommodation. *“I could not afford to live in my flat anymore”*, *“The rent was too high”*, *I had to look for a cheaper alternative”*. This was a point also voiced by the Coloured discussant group, with all of them indicating their reason for having to move from their own accommodation the fact that they could not afford it anymore.

Being part of the middle to lower working class groups (including both the White and Coloured discussant groups) while still of working age, these older persons do not have access to elaborate private pensions, if at all, nor had the luxury to set aside a portion of their monthly salary as a provision for their retirement. In fact, of the 17 coloured and white discussants only one respondent receive a private pension large enough to exempt her from a government pension with only two discussants receiving a minimal private pension in addition to the government OAG¹. Another two had to supplement their OAG by working between 2 and 3 days a week. The rest (N=13) indicated the state provided OAG as their only source of income.

On a question on whether they are content with their living arrangements, all discussants responded positively, indicating that their current living arrangement allows them dignified lives marked by

¹ Since the state grant is awarded on a sliding scale these persons also do not get the whole state grant and if counted in total their monthly income surmounts to the current OAG

independence and self-reliance. They are not in a position where they are reliant on anyone, nor feel like a burden on anyone especially their children. There was a strong sense that their current living arrangements provide them with an affordable solution whilst still ensuring independence and self-sufficiency. In addition their current living arrangement provides them with a sense of belonging and self-worth as the communal living provides a network of people, or rather similar community, that share life experience, interest and ethos to life.

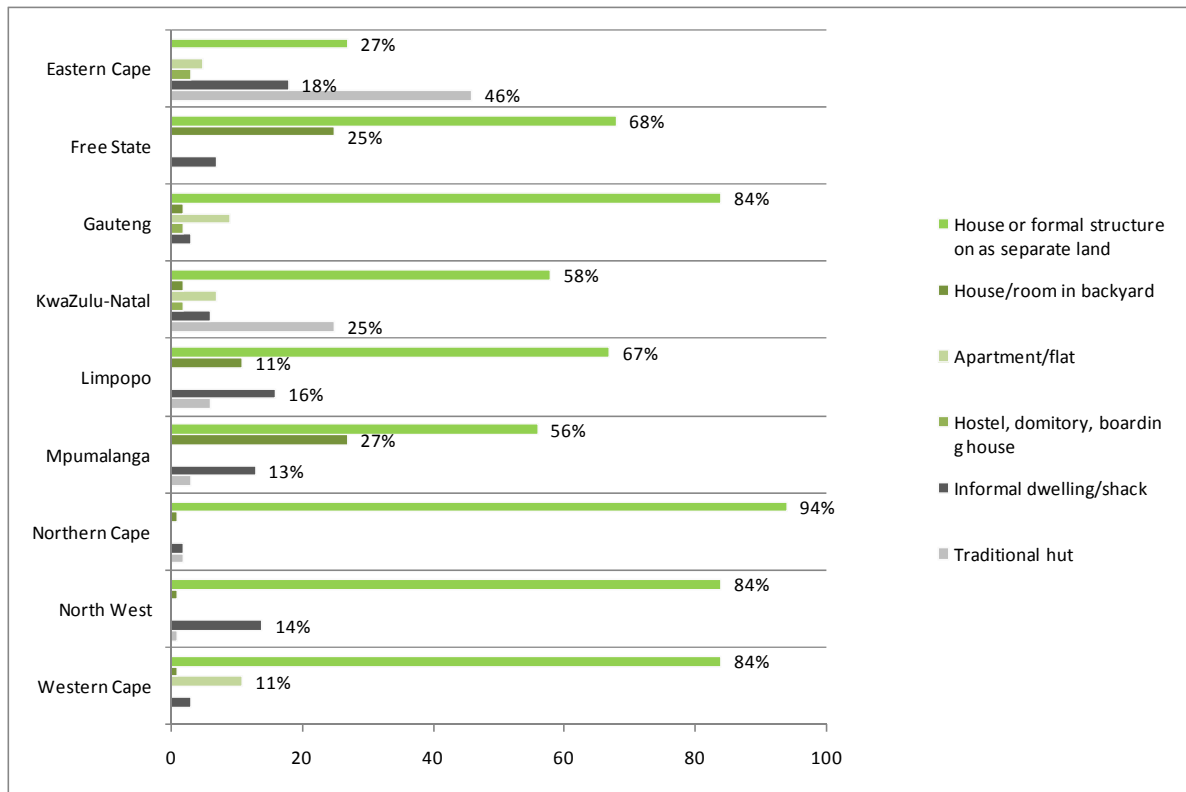
Tables and figures for the section 3

Table 2.13: Dwelling type of OAG beneficiary, Western Cape Province

Magisterial District	Type of Dwelling: Beneficiary							Total	
	House/brick struct. On separate stand/yard	Flat in Block of flats (apartment)	Town/Cluster/semi-detached house	House/flat/ room in back yard	Informal dwelling/shack in back yard (incl. wendy house)	Informal dwelling/shack in informal settlement	Unit in retirement village	Count	Row%
	Row %	Row %	Row %	Row %	Row %	Row %	Row %		
Beaufort West	81.1	0	18.9	0	0	0	0	53	100
Laingsburg	60.4	0	39.6	0	0	0	0	48	100
Prince Albert	61.4	2.3	36.4	0	0	0	0	44	100
Murraysburg	78.9	0	21.1	0	0	0	0	57	100
Goodwood	54.5	8.4	33.8	0	2.6	0	0	154	100
Mitchell's Plain	39.4	4.5	27.3	0	0	28.8	0	66	100
Vredenburg	78	0	22	0	0	0	0	59	100
Hopefield	76.2	0	23.8	0	0	0	0	84	100
Ceres	96	1.3	1.3	0	1.3	0	0	75	100
Malmesbury	66.7	4.8	23.8	3.2	1.6	0	0	63	100
Caledon	71.4	0	21.4	1.4	2.9	2.9	0	70	100
Mossel Bay	58.8	7.8	21.6	2	2	3.9	3.9	51	100

Source: Vorster et.al., 2004

Figure 2.15: Housing type for the elderly as per province



Source: CASE, 2009

4. DISCUSSION

The phenomenon of population ageing² is a reality for virtually all countries in the world and South Africa as one of the most rapidly ageing populations in Africa, is expected to continue ageing over the next two decades. The implications of these expected changes in population composition are first of all socio-economic in nature. This is translated by Joubert and Bradshaw (2006) in terms of an increase in the dependency ratio of the older population group where they state an expected increase of 45% between 2000 and 2025. Such statistics clearly show on a notable increase in demand for social assistance, retirement or workplace pensions, health care, housing and other living arrangements. It is expected that traditional family support will erode due to declining family size, rural to urban migration, declining co-residence and younger family members dying of AIDS related diseases. The result of this is that older persons, and especially women, will be faced with increased isolation, abandonment and loneliness (ROADS, 2010). It is in this context that the South African government in partnership with the older person's service sector will have to work within a coordinated strategic framework towards the plight of the elderly population.

Research on the needs of the elderly has been done rather extensively in the past with the most recent and extensive report by CASE (2009) also referred to in this report. From these reports there is general agreement on the integrated nature of the service needs of the elderly. Service needs that are generally cited as high on the priority list are transport services and health related services with the focus on access to health care facilities and the obtaining of chronic medication. Although work has been done on residential services available to the elderly the focus of such work is primarily on frail care institutions, how they function and the need that exists there to. Research on the need and model of independent residential solutions is sorely lacking. Organisations such as NOAH, CPOA and Abbeyfield, by nature of their business in providing such residential solutions, experience on a daily basis the need to this service and have a real sense of an increasing need. Given the lack of research specifically to this field as a necessary service to the elderly, such organisations are not able to quantify this need leaving them in a sense crippled in building and extending this service.

² According to Joubert & Bradshaw (2006: 204) ageing or demographic ageing is described as the process by which the older population (60yrs or older) become a proportionally larger component of the total population: "Population ageing is an outcome of a population's demographic transition from higher to lower levels of fertility and mortality".

From the focus group discussions it was possible to develop a profile of the housing beneficiaries/inhabitants of the NOAH, CPOA and Abbeyfield houses. This profile shows the beneficiaries to be elderly persons that in their working years would be categorized in the low- to middle working class income groups. Being part of a socio-economic group that is marked by nuclear families and economic independence be it to a varying degree, these elderly find themselves in economic difficulty at the day of their retirement. Not affording to plan sufficiently for their retirement day while working and sustaining a middle class existence, these elderly find their income significantly reduced not able to sustain their current standard of living, with accommodation the primary unaffordable item. Not wanting to live with either family or children they are left destitute if not offered alternative housing solutions such as provided by NOAH, CPOA and Abbeyfield.

It is important however to take note of the different living arrangements of the African elderly. Partly due to economic conditions and cultural beliefs these elderly clearly communicated other needs to that of the Coloured and White (previous low to middle working class) discussant groups included in the study. As an integral part of their children's households due to the household's dependence on the OAG, these elderly are in need of social support such as provided by functioning social clubs. Being able to escape to a space where they can visit with their peers, are taken on outings and receive basic medical assistance are all aspects that improve their quality of life. Knowing that there is a place where someone is looking out for them and can offer support when needed provides a form of social security so dearly needed by these elderly. There was however a need communicated for housing for elderly finding themselves in dire living conditions such as extreme poverty and abuse. The NOAH, Abbeyfield housing model would offer an ideal solution to these elderly, however much will have to be done to eradicate the negative stigma attached to such forms of housing.

The issue of access to frail care is an aspect that was discussed by all the groups and except for the discussants living in CPOA accommodation there was a general sense of uncertainty should the day come when these elderly are not able to live independent lives anymore. Although they all indicated that they would probably have to live with their children should they not be able to live in the community houses anymore, there was a general sense that this was not a real solution as they could not think how such a living arrangement would be possible. Given this need it is proposed that a strategy or programme is introduced either providing frail care facilities to community housing residents or linking these residents with frail care facilities. If at all possible it would be ideal if these frail care

facilities were in close vicinity to the current areas of living of these elderly ensuring them still some access to their social networks they have established while living in the community houses.

Furthermore, given the integrated nature of the needs of the older population, it is of utmost importance that interdepartmental working arrangements are formed on both National and Provincial Government levels as well as between the Government and service providers within the community to enable an integrated service delivery plan for the elderly population. This directly implies a need for the service sector providing services to the older population to work from a coordinated and unified front in order to ease and enable inter-sectoral working arrangements with both the private and government sectors. STOPP as such a unifying body, has the potential to place this service sector as a strategic alliance with the potential as a powerful force highlighting and speaking to the needs of the elderly at a strategic level.

Given the funding difficulties experienced by the service sector together with a decline in DSD funding due to budget cuts, such an arrangement will also have the potential to provide an alternative approach to funding solutions offering a unified front from which to apply for and distribute funds within a strategic and coordinated service delivery approach to the older population.

In closure the importance of a proper and in-depth understanding of the housing and social support needs of the elderly must be stated. Giving that this report as only an explorative endeavor, shows on definite needs with regards to coordinated social support to the elderly as well as housing solutions for specific subgroups within the elderly population, a quantifiable study is of the essence to allow for a proper strategic approach to such service delivery. In order to inform such a strategic approach within a collaborative context as described above, it is important that a descriptive research study is conducted that will allow generalizations on different levels for the elderly population including 1) racial - , 2) socio-economic – and, 3) rural-urban divide.

With statistics showing a definite increase in the elderly population, accompanied by an ever increasing challenging economic environment for both the elderly and their families, it is of utmost importance that viable and dignified alternatives are developed to speak specifically to the needs of the elderly. With an emphasis by Government policies regarding service delivery to the elderly with the creating of environments and conditions under which older people can remain independent, active and contributing citizens in their communities for as long as possible, solutions presented on community level is essential and necessary. “Throughout the world, even in the richest countries, the vast majority

of older people live in the community and it is at this community level that most of their problems will have to be dealt with.....” (Kalache & Kickbush, 1997:4).

References

Adkins J. Advancing the socio-economic rights of older people in South Africa. *Economic and Social Rights Review*, 12(1), 2011

Bertrand, M. , Mullainathan, S., & Miller, D. 2003. "Public Policy and Extended Families: Evidence from Pensions in South Africa," *The World Bank Economic Review*, 2003, 17(1), pp. 27-50

Burns, J., Keswell, M. & Leibbrandt, M. Social Assistance, Gender and the Aged in South Africa. *Feminist Economics*, 11(2), (July 2005), 101-114

CASE, The Status of Older Persons in South Africa: A National Study on the Needs and Access to Services of Older Persons, Research for the Department of Social Development, 2010

Department of Social Development, Audit of Residential Facilities, Umhlaba Development Services, April 2010

Duflo, E. 2003. "Grandmothers and Granddaughters: Old-Age Pensions and Intrahousehold Allocation in South Africa," *World Bank Economic Review*, *Oxford University Press*, 17(1), pp 1-25

Justine Burns & Malcolm Keswell & Murray Leibbrandt, 2005. "Social assistance, gender, and the aged in South Africa," *Feminist Economics*, Taylor and Francis Journals, vol. 11(2), pages 103-115, July.

Joubert J & Bradshaw D. Population ageing and health challenges in South Africa, Chapter 15, In Steyn K & Fourie J (Eds), *Chronic diseases of lifestyle in South Africa: 1995 – 2005*, Medical Research Council, Technical Report, May 2006.

Julian May, *Chronic Poverty and Older People in South Africa*, CPRC Working Paper 25 Commissioned by HelpAge International, February 2003, School of Development Studies, University of Natal.

Nursing Directory, 2010

National Income Dynamics Study, University of Cape Town, 2009.

Older Persons Act, NO 13, 2006

Posel, D.,J., Fairburn, A., & Lund, F., 2004. *Labour Migration and Households: A Reconsideration of the Effects of the Social Pension on Labour Supply in South Africa*, memo. Durban:University of Kwa-Zulu Natal

ROADS and Soreaso, A Social Value Impact Assessment of Social Development Services Funded by Department of Social Development Provincial Government of the Western Cape, March 2010.

Statistics South Africa, Community Survey, 2007

South African Survey, 2007/2008, South African Institute of Race Relations

South African Survey, 2009/2010, South African Institute of Race Relations

South African Social Security Agency (SASSA), 2011, SOCPEN data on Old Age Grant Beneficiaries as for May 2011.

University of the Western Cape, Promoting the Socio-Economic Rights of Older People, Workshop Report, 22 February 2011.

Vorster, J, Eigelaar-Meets, I, Poole, C, Rossouw, H. A profile of the Social Security Beneficiaries in selected districts in the Western Cape. A report for the Department of Social Development and Poverty Alleviation, April 2004, Datadesk: University of Stellenbosch