PHSYCOSOCIAL SUPPORT AND QUALITY OF LIFE FOR ELDERLY PEOPLE IN NAMIBIA

INFORMAL SETTLEMENTS IN THE CITY OF WINDHOEK

Aina Iitoolwa
Thesis, spring 2016
Diaconia University of Applied Sciences,
Diak South

Degree Programme in Social Services
Bachelor of Social Services

ABSTRACT

Aina Iitoolwa. Psychosocial Elderly people in Namibia, City of Windhoek. Focus on elderly living in the informal settlement of Windhoek social support and quality of life. Helsinki, spring 2016, 38p.

Diaconia University of Applied Sciences, Degree programme in social services, Community Development.

Aim of the study is to gather information about, how the psychosocial support and financial situation of elderly living in the slam areas of Katutura, Windhoek is arranged for persons of pension age and how it is answering to their needs in helping them adapt to the new situation.

I used Materials of previous research done on this topic in Namibia and neighboring countries and some additional literature. The data is done by collecting interviews and analyzing them. The methodology of the research is qualitative and empirical. I interviewed the elderly of the slams around Katutura area in 4 different neighborhoods and have interviewed people going from door to door where there are people of pension age, making it an external validity form which makes it open to all genders and races. I did not do all the interviews by myself, I constructed the interview questions but we went to do the interview in a group of 8 people (4 students from Diaconia University and 3 employees of the Evangelic Lutheran Church in Namibia (Elcin) in Windhoek)

Main results are that many elderly people are living in poverty and not all of the pension age people are receiving pension even though they are entitled to. Elderly people from different parts of the country moved to the city when they were young to work and they still live even though they do not work anymore. Elderly who receive pension share it with their households and the money is not enough to cater for all the basic needs.

Key words: Inclusion, psychosocial support, Elderly, slam areas, Katutura, Windhoek, Pension grant.

CONTENTS

1 INTRODUCTION

> Often, marginalized elderly people suffer from simultaneous problems, such as poverty, loneliness, neglect, hunger, deteriorating health conditions, and substance abuse problems. Many of them don't have family members or kinship caregivers to look after them. Many grandparents are the primary caregivers and supporters of their grandchildren, who in many cases are AIDS orphans Helsingin Diakonissalaitos.

Katutura is a township that was formed during the apartheid regime in the Capital city of Namibia during the year 1966-1990. All the black people that lived and worked in the city were moved from the old location where they had their own houses to a different location 8km to the northern part of the city. Their economic conditions were badly affected as they were forced to pay municipal rent and use municipal buses to go work in the city. The ervens that they were given were much smaller to have a garden and normal size house.

Today every Namibian has the right to live where they want to live in Windhoek but the fact still remain that many black people still live in Katutura and have created an informal settlement build from different cheap materials such as tins, cardboard, wood and even plastic.

I chose this topic, because it is unfortunately the sad truth that many elder people that have moved to the city during their youthful years for work and better opportunities are now battling with life alone in the slums and their duties as grandparents are no more of value due to the change of the structure of family. Many of them do not want to go back to their villages and they also do not want to live in elderly homes. As a result, many of the elderly are left lonely in harsh and life threatening conditions in the slams of Katutura. Some of them maybe feel ineffective and started consuming alcohol. I have as well noticed that there

is a lack of participation in the family life; their role as grandparents is not very much valued anymore. Often the children are taken to daycare Centers while the parents are at work leaving the elderly people at home by themselves. Until now I do not have any idea, how many of the elderly people are asking support or help from the government for supportive activities arranged in their communities when they are passing difficult times of rejection and loneliness.

My focus is on two perspectives: 1. what kind of support the elderly people are getting from their families, government or NGOs and 2. How is the support they are receiving answering to their needs to help their adoption to the new situation? Here I want to examine the social support and the quality of life for elderly people living in the slams of Katutura in comparison to the national and universal perspective. I want to focus on the wellbeing and economic state of elderly people. This research seeks to make policy makers aware of the needs of the elderly not only in the city slams but also in the village and all over the country.

Traditionally, the role of older people in Namibia has been to advise their families and communities, and to receive care and respect by their children. Today, their role is often overlooked due to the growing of many young people choosing to have a nuclear family. Most research in developing countries is focused on infants, the youth, and maternal well-being, whereas few national studies have been conducted on the needs and satisfaction of the elderly.

Often, marginalized elderly people suffer from simultaneous problems, such as poverty, loneliness, neglect, hunger, deteriorating health conditions, and substance abuse problems. Many of them do not have family members or kinship caregivers to look after them. Many grandparents are the primary caregivers and supporters of their grandchildren, who in many cases are AIDS orphans or neglected by their parents.

Given the high unemployment rate, many mothers and fathers are forced to seek jobs far away from home, leaving their elderly parents to care for their

children.

2 BACKGROUND

Namibia

The Republic of Namibia is enormous and sparsely populated country situated along the south Atlantic coast of Africa. It is the first country in the world that has incorporated the protection of the environment into its constitution.

Germany took control of the area which it called South West Africa in the late 1800s. The discovery of diamonds in 1908 prompted an influx of Europeans. South Africa seized it during World War I and administered it under a League of Nations mandate. South Africa occupied the German colony of Suid-west Afrika during the world warI and administered it as a mandate until after World warII when it annexed the territory. In 1966 the Marxist South-West Africa People Organisation (SWAPO) guerrilla group launched a war of independence for the area that was soon named Namibia, but it was not until 1988 that South Africa agreed to end its administration in accordance with a UN peace plan for the entire region. Independence only came in 1990. Germany has apologised to Namibia for the colonial-era killings of thousands of members of the Herero ethnic group; their descendants have asked Berlin for financial compensation.

Ever since Namibia has gained independence in 1990 after the long battle against the colonial rule by South Africa, it has been enjoying stability to this day. (http://www.nationsonline.org/oneworld/Namibia.htm) Namibians achieved independence in 1990 after a bush war of almost 25 years. Inter-racial reconciliation encouraged the country's white people to remain and they still play a major role in farming and other economic sectors.

In recent years supporters of land reform have become more vocal. The expropriation of white-owned farms began in 2005 and the government says it aims to resettle many thousands of landless citizens. Like its neighbouring countries

Like its neighbours, Namibia's wellbeing is being threatened by the HIV/Aids epidemic, which is estimated to affect 25% of Namibians. Dr Sam Nujoma made

the fight against the disease a national priority during his time as president of the country. The second President of the republic of Namibia was Hifikepunye Lucas Pohamba who is followed by the recent President Hage Geigob who took the seat in 2015.

In the late 1990s secessionist troubles in the Caprivi Strip, in eastern Namibia, prompted thousands to flee to Botswana. In 2002 the government declared that the area was safe for tourists.

Deserts occupy much of the country; their dunes take on shapes and colours according to the elements. The country also boasts game-rich grasslands and a semi-arid Central Plateau, large tracts of which are given over to livestock farming.

2.2 Social welfare services and National health

Namibia has one of the best welfare services in Africa, it derived from the constitution article 95 where the state is required to maintain the welfare of its people by putting legislation that seek to provide healthcare and ensure social welfare for the people including the weak and vulnerable members of the state have under the ministry of health and social welfare.

Despite the number of available health and social welfare centers, access to health care is still a big issue to thousands of Namibians due to remoteness, long distances and economic situation. Over all, there are three health workers per 1000 inhabitants which are slightly above the World Health Organization (WHO) recommendation. Although this buries the critical skills shortage in the public sector which barely two health workers per 1000 inhabitants. Two important aspects of any health services are it is accessible and efficient in the

way that people who need treatment have access to them and the health services are utilized to the extent that is expected of them. Forasmuch as independence, the area of coverage within 10 kilometers of health facilities has more than tripled as a result of number of health facilities has raced from 98 in 1981 to 317 facilities in the year 2001.

3. MOTIVATION OF THE RESEARCH OF ELDERLY IN THE INFORMAL SETTLERMENTS OF WINDHOEK

3.1 Informal settlements and poverty

Informal settlement is an area where groups of housing units have been constructed on land that the occupants have no legal claim to or they occupy it illegally. It can also be defined as unplanned settlements and areas where housing is not in compliance with current planning and building regulations (unauthorized housing). (Glossary of environment Statistics, studies in methods, Series F, No.67,United Nations, New York, 1997).

Poverty is a condition where people's basic needs for food, clothing and shelter are not being met. Poverty is generally of two types: (1) Absolute poverty is synonymous with destitution and occurs when people cannot obtain adequate recourses to support a minimum level of physical health. (2) Relative poverty happens when people do not enjoy a certain minimum level of living standards as determined by their government and enjoyed by the bulk of the population that vary from country to country, sometimes within the same country. Relative poverty occurs everywhere, it is said to be increasing and may never be eradicated.

businessdictionary.com (17.09 .2015)

The informal settlements in Katutura where created because people came to the city to work and return to their homes in the villages in different parts of the country during the holidays and after retirement. The informal settlements have been increasing over the years and it has become a big concern that it is not only young people that live there anymore and the population of old people is increasing. It was believed that when people retire from their work in the city, they return to their home village where the rest of the family members are and that the family will take care of them but today this is no longer the case, when

people retire and they still remain in the city in hope for a better living and for some of them, there is no other home but the shack that they live in. Some have been neglected by their family and children and only have themselves and good Samaritans to relay on. A number of elderly people in the slum live with their families (mostly neglected grandchildren) and they share their pension with them because they do not get any support from their children (the grandchildren/s parents). Some of them live lonely and many times they do not have food, water and someone to help them fetch water from the communal tap which is a walking distance from where they live and many times they are forced to use a bucket or plastic bag when nature calls.

The slums are not safe to live in but people have no money to buy proper houses and some old people do not want to live in the old age homes. There is too much killing, robberies, rape and fire accidents in the informal settlement, because the shacks are built with very cheap materials that can catch fire and burn easily. There is also a high number of unemployed youth that have dropped out of school and have nothing to do but commit crimes.

3.2 Reasons for the research

Only a few numbers of developing countries have tried to handle the vulnerability and poverty situation of their senior citizens by providing different types of social assistance to them and their household. Since traditional care of the seniors is weakening due to unstable economic condition, huge gap between the rich and the poor, migration, HIV and changes in the structure of family, government policies are not sufficient to address the elderly people's deteriorating life situation. As a result, a number of old people under the poverty line is increasing in developing countries. Pension grants are delivered to old people in

few developing countries although those grants are meant to reduce poverty and vulnerability and contribute to economic development. (Moller 2011.)

Collecting my data, the Evangelical Lutheran Church in Namibia (ELCIN) was my partner; their social services office will implement a project that would assist the elderly. As Namibia's largest church, ELCIN is able to influence social issues thanks to its extensive grass-roots networks in society. The project will strengthen ELCIN's community work approach to vulnerable elderly people.

The ultimate beneficiaries of the project are the most vulnerable elderly people over the age of 60 with no family members, and vulnerable kinship caregivers who unexpectedly find themselves in the position of having to raise a second family. (Helsinki Diakonissalaitos, international-diaconia/1714-community-based-outreach-project-assists-elderly-and-their-communities)

4. THEORETICAL CONCEPTS

4.1 Human rights in general

Human rights can be seen as the legal codification of the concept of human dignity (Tutu 2009.)

The article 2 of the declaration of Human rights states that,

> Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, color, sex, language, religion, political or other opinion, national or social origin, property, birth or other status. Furthermore, no distinction shall be made on the basis of the political, jurisdictional or international status of the country or territory to which a person belongs, whether it is independent, trust, non-self-governing or under any other limitation of sovereignty.

Even though the human rights are beautifully written and states that there is no discrimination, still a lot of people especially the elderly and children are victimized. Their needs are not catered for and many live in poverty. The government is doing its best to assist the elderly but it is not enough. Everyone have the right to clean water and a roof over their heads but this is not always the case, poor people live in terrible conditions and do not have proper houses.

4.1.2 Human rights in Namibia

Namibia has ratified the Universal Declaration of human rights during the year 1990. That have adopted into their constitution. The ministry of Labour and social welfare is therefore mandated under the national pen act (act 10 of 1992) to pay out pension grants. The same ministry is also mandated to remit old age grant to all those that have reached the age of 60 years, the grant is a some of N$1200.00 equivalent to about 65.72 Euros it has been increased over the years.

For a senior to acquire a pension grant in Namibia, one needs the following documents, an identification card, a birth certificate and for those that are not Namibians by birth they need a permanent residence certificate and a citizenship certificate.

4.2 Quality of life: How good is my life?

Collins dictionary have defined the quality of life as the "general wellbeing of a person or society, defined in terms of health and happiness rather than wealth (Conllinsdictionary.com 2015) The World Health Organization (WHO) defines quality of life as "individuals perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns" (WHO 1996)

According to Vaarama et al. (2008. 20-27) measures of quality of life in old age includes questions of life satisfaction, (how satisfied one is with his or own life), questions about personal resources (what kind of physical, physiological, social, financial and environmental resources one has), questions about physical health and functional ability, questions about social relationships, questions about home and environment and questions about help and services that one uses or needs. Therefore, the quality of life in old age is:

1. multidimensional

2. has objective and subjective dimensions

3. Includes four key areas: (1) physical health and functional abilities,(2) psychological health, subjective wellbeing and life satisfaction, (3) social networks, activities(leisure and productive) and participation, (4) socio-economic conditions and living environment. (Vaarama,Pieper&Sixsmith 2008,7.)

4.2.1 Measuring the quality of life

The concept of quality of is used to study the daily living enhanced by everything including food, shelter, clean air, water and all the essential basic needs of a human being. It can also be used as a measure of energy and power that the person might have to enable them to enjoy life and overcome life's challenges irrespective of the handicaps that they might have.

There are various tools to study the quality of life for example the human development index used in the United Nations Development Programme (UNDP) is

one of the mostly used inclusive tool. The Human Development Index (HDI) surveys health

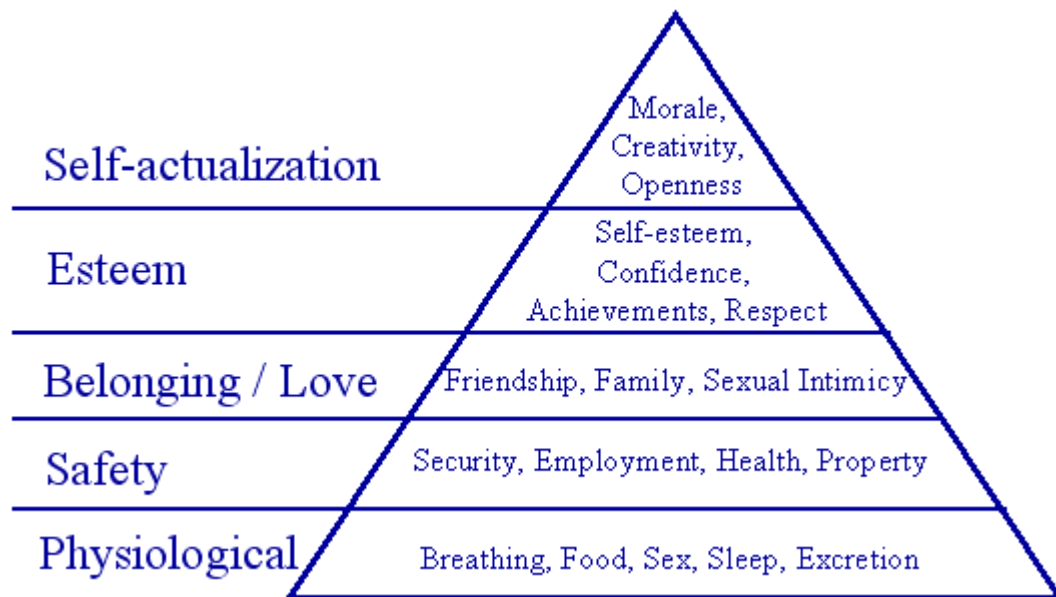## 4.2.2 Subjective and Objective needs of human beings

FIGURE 1. Maslow's hierarchy of needs

Hierarchy-Of-Needs.

From the figure above, according to Maslow's hierarchy of needs it is important for the well-being of people to have food, excrete, have safety, feel love, and have esteem and self-actualization. The needs are classified into five categories with the most important at the bottom of the pyramid: Physiological, Safety, love \belonging, esteem and self-actualization. This hierarchy of need is based on the idea that basic needs are met first so that the person can be motivated enough to achieve additional needs in life. Hence, there is a lot criticism against Maslow's hierarchy of needs since the needs do not necessarily proceed in the same order. (Dunderfelt, Laakso, Peltola, Vidjeskog & Niemi 1996, 105-107)

4.3 Aging as a process

There are many definitions of old age and it defers worldwide. The aging process is a biological and very individualistic process that differs from person to person and also from the culture and history. Beyond physical changes aging is also associated with other life transformations such as retirement, relocation to appropriate locations, death of partners and friends and related biological changes.

The generation of aging has different status depending on the culture and in which part of the world they are living in. Although the attitudes towards elderly people may change, the aging process biologically follows the same pattern. It is important to comprehend the aging as an experience when doing research on elderly people. Generally aging has biological and psychological changes depending on the condition of living and genes. Genetic factors, health, stress, diet, environment and lifestyle choices are essential features which can have influence to the aging process. Concept of aging differs from person to person but still has some similar aspects that can be identified among individuals. (Eliopoulos 2005, 52.)

Although some of the elements in elderly people's health are genetic, plentiful is due to their physical and social environment, this include their homes, neighborhood, communities and as well as their personal characteristics such as their sex, ethnicity or their socioeconomic status. These factors start to influence the age process at an early stage of their lives. The environment has also an important impact on the development and maintenance of their healthy behaviors. Supportive environments enable people to do what is important to them regardless of the losses in capacity. Availability of open safe space to walk, public transport, accessible public buildings are some of the examples of an elderly safe environment. (WHO, ageing and health, September 2015)

5 PREVIOUS RESEARCH

During my literature review, I looked and different WebPages, different organizations, data base of the library and the United Nations WebPages on this topic. I wanted to what kind of issues related to elderly people have been studied before and I focused on these that included issues with themes that touched mine.

There was several researches about the quality of life for elderly people that touched on health and social issues e.g. research on aging(Hilma Nangombe and Leane Ackermann 2012) diagnose the need of the elderly living in the suburbs of Katutura, Windhoek , Namibia. The elderly have also been studied in rural communities of Swaziland by Henriikka Joensuu and Iita Roppanen in the year 2012. A number of articles are also to be found online and different WebPages on the aging and quality of life.

My focus was to find studies that were related to elderly people in developing countries and I found a number of educational studies are as follow.

> The relations among physical functioning, social support, depressive symptoms, and life satisfaction were examined in a national sample of 4,734 adults age 65 and older. Regression analyses were used to examine the relative importance of objective and subjective support measures in understanding the relation between physical impairment and quality of life. Impairment was associated with fewer friendship contacts, fewer family contacts, less perceived belonging support, and less perceived tangible aid, but only measures of perceived support predicted depressive symptomatology. A structural equation modeling approach was then used to explore the meditational role of perceived social support in the relation between impairment and quality of life variables. Results are consistent with the hypothesis that lower reported social support is an important reason for decreases in life satisfaction and increases in depressive symptoms found among older adult populations. Implications for understanding the role of social support in attenuating the effects of physical disability in older adults are discussed. (PsycINFO Database Record (c) 2012 APA, all rights reserved)

As the population of Africa ages, older people continue to experience isolation, poverty, violence and abuse, and have limited access to health services, education and legal protection. With no pension income, older people are often forced to work in low-paid or demeaning jobs to provide for themselves and their dependants. Supporting older people to know their rights and to hold duty-bearers to account is essential if the number of older people living in poverty is to be reduced and the quality of their lives improved. Particular attention should be given to older women, who tend to live longer than men and often face discrimination in access to services. One main barrier that prevents older people from accessing existing entitlements, such as free health services and pensions, is a lack of identification documentation to prove their age and eligibility. A 2005 survey of nearly 4,000 older people in eight communities in Mozambique found that 42 per cent had no identification cards, although they needed these to claim free health care. This situation is common throughout Africa. Lucitania, a paralegal officer in KwaZulu Natal, South Africa, says: 'There are two females who are about 72 years old in my village. They don't possess IDs and they don't get pensions. They are starving, sleeping without food in their stomach.' This situation often arises because the person was not registered at birth. Even today, about 40 million children are born each year without being registered.15 Lack of registration will affect their rights throughout their lives into old age. Governments and local authorities need to develop ways to provide methods of registering and providing identity documentation for people of all ages, to ensure they can access the services to which they are entitled.

5. RESEARCH PROCESS

5.1 Research methods and data analysis

I used qualitative method in order to have an in depth of the situation for my focus group. Qualitative research is a type of scientific research that consists of an investigation that seeks answers to questions, collects evidents and produces findings that were not determined in advance.

Qualitative studies seek to represent the complex worlds of respondents in a holistic, on the ground manner. The Qualitative studies emphasize subjective meanings and question the existence of a single objective reality. Furthermore, they assume a dynamic reality, a state of flux that can only be captured via intensive engagement. Deborah K.Padgett, 2nd edition, and p.2) the purpose of the research is to describe and summarize information, to make predictions or generalizations of results of the research phenomena. Also identifications of relationships, associations and differences between the sample data can be goal of the research. (Duffy and Jacobsen 2001, 3-4.)

The data was collected by short question interviews on the quality of life and their surroundings during my 2 months internship in Namibia. I worked together with 1 of the community members who knew the areas very well and some other people from the ELCIN church who were also piloting for their upcoming community development project on elderly people in the city. It took us 3 days on the field interviewing the elderly in 3 slums next to each other. The questionnaire was divided into 3 structures, Health, social and financial issues and it consists of 20 questions. The questions were formulated to find out what kind of personal resources the elderly people have related to health, social and financial issues. The participants were fully informed about the nature and purpose of the study and what the value of their contribution would be. The purpose and procedures were briefly explained to the elderly. The interviews were conducted in languages that the interviewees understood best which were English, Afri-

kaans and Oshiwambo. I did not need a translator as I am able to communicate fluently in both languages.

Through this research I aim to gain more knowledge about how well elderly people are taking the change in the family role, what the government is doing about their situation and what kind of projects can be implemented to activate the elderly people.   I chose carefully the persons I am interviewing in order to have a good and broad picture for this kind of research. (D'Cruz & Jones, 2006, 60.) My research is ethically and methodologically trustworthy research (D'Cruz & Jones, 2006, 78).

 I do understand the meaning of accountability and ethics and my goal is to be confidential when collecting and analyzing my interview material.

Day one we went around the slam community guided by the community member and identified the houses were my target group lived and day two and three were served for interviews.

I analyze the data using answers from the questionnaire to show different aspects of the results.

5.2 Target group and data collection

My target groups are the elderly people living in the informal settlement of Katutura who are of social pensions grant age, 60 years and above.

Social pensions are non-contributory cash transfers that are paid on to elderly people on a monthly basis, they are widely supported to be one of the most effective tools to reduce old age poverty and invest in human capital develop-

ment. Old people in Namibia receive 1200.00 Namibian dollars now after it was increased this year.

6. FINDINGS

6.1 General information of the interviewees

We have all together interviewed 50 elderly people from 3 neighboring slums in Katutura, Windhoek. Most of the interviewees were men, 37 and only 13 of the interviewees were women. During my data collection, it was notable to find out that there are more men who tent to live in the city area after retirement or when they are old. This could be because of the domestic sphere that women are expected to take care of the home, bear children and take care of all the household chaos while on the other hand men rule the public sphere, normally has to create materials and non-material values that can be exchanged because of their market value whilst domestic sphere activities are without value in market terms (Azmon, 1981:553). Men move to the city for economic reasons and provide for their families.

My interviewees were aged between 59 and 83 years old, according to the figure below it shows that most of them fall into the age of 79 years. All my interviewees live in the slums and are of pension age. 40% of my interviewees were born in Windhoek and lived all their life in the city slum area and the other 60% are from different parts of the country where their respective families still live. They visit their families at least once a year during the Christmas festival. Even though all my interviewees were of pension age, there were a few who did not get this grant because they did not have the identifications that are required to proof their identity.

6.2 Experience of social relationships

Enerst Burgess (cited in Cole, 1983:35) wrote that when people grow older, they get into a role-less role where they do not have anything to contribute an-

ymore. This was particularly true for retired males who could no longer act as the provider and protector but instead have to be protected and provided for by their descended or other relatives. This, according to Burgess, resulted in alienation for older people and a feeling of helplessness, and unworthiness which can be psychologically damaging. For example, being sent to an old people's home can be disconcerting for the older people. This is particularly true of well developed countries with well advanced social welfare systems and where people's identities are closely linked with their jobs. This however was not the case experienced by my participants in Katutura slums; they were the breadwinners of their household and were burdened with caring for their grandchildren and other relatives who live with them. Some felt the helplessness because they are not able to work anymore and the pension grand that they were receiving was not enough to supply for their basic needs.

Contrary to Burgess' assertion that when people get older they gradually enter the role-less role, the opposite is often true for developing countries ravaged by illness and high mortality and morbidity among young adults. Older people in sub-Saharan Africa have a lot of burdens to shoulder. This is a growing trend in countries ravaged by HIV/AIDS particularly in sub Saharan Africa. For instance, 61% of double orphaned children and single orphans not living with surviving parents in Namibia, South Africa and Zimbabwe and over 50% in Botswana, Malawi and Tanzania are living with their grandparents. About 30% of all households in sub-Saharan Africa are headed by an older person (Monasch & Clark, 2004). Fifty-six percent of care givers for orphans and vulnerable children in Namibia are more than 60 years old (Monasch & Clark, 2004).

6.3 Experience of health

Despite the number of available health care facilities and social welfare points, access to health care is still a big issue to many Namibians due to remoteness and long distances for the majorities of Namibians. Over all, there are three health workers per 1000 inhabitants which are slightly above the World Health Organization (WHO) recommendation. Although this number buries the critical skills shortage in the public sector which barely 2 health workers per 1000 in- habitants. Two important aspects of any health services are that it is accessible and efficient in a way that people who need treatment have access to them and the health services are utilized to the extent that is expected of them. Hence independence, the area of coverage within 10 kilometers of the health facilities has more than tripled as a result of the number of health facilities has raced from 98 in 1981 to 317 by the year 2001.

Being healthy is an important satisfier of subsistence needs that has particular relevance to the aging process. With old age health usually declines and this deterioration may negatively affect relationships if the elderly cannot take part in shared activities (Knipscheer et al. 1995).

Good health is very important to every human being and it should be a priority to all but the sad reality is that not all have that privilege to good health. When I was collecting my data and having interviews with the elderly people from the slams of Katutura, this was not the case. At least 98% of my interviewees had some kind of chronic disease and are on medication. According to Fransina a 63 year old woman living with her 75 year old husband in a small shack made of pieces of cardboard, plastics and tins says she is on medication for Diabetes and she suffers from cancer but she is unable to go for her routine checkups and to buy her medicine. They are both not registered for the pension grant be- cause they do not have national identification cards of Namibia. Fransina said

that they do not have money for taxi to go to Home Affairs to apply for the needed documents. Fransina and her husband are not the only one faced with health problems, 78 year old divorced Engelhardine also suffers from high blood pressure and complained how the municipality is not doing anything to keep their surrounding clean. There is rubbish everywhere and no sanitation, our health is at stake, people in this area go help themselves in the riverbed and if nature calls during the night we have to use a plastic bag.

6.4 Experience their environment

The surroundings where one lives also affect their wellbeing. Here I want to explore how elderly people generally feel about their environment; this will be answered through question number 9,10,11,12 and 13 of my questionnaire. I asked how the elderly feel about their surrounding and he condition that they are living in. 95% of my interviewees were discontented with the surrounding that they live in and grumbled about how cold, small and unsafe it was to live there. They said that the scrapped materials that they used to build their home can easily catch fire and is easy for the thieves to break in.

The environment has a big role in the development and maintenance of healthy attitude, maintaining healthful attitude throughout one's life, having regular physical activities and eating well are some of the facts that contribute to a healthy lifestyle. Supportive environments enable people to do what is important to them despite the losses in capacity. The availability of enough safe and reachable public buildings and transport plus an environment that is easy to walk is some of the example of supportive environment. Basically having the services accessible to the elderly.

7 CONCLUSIONS AND DISCUSSIONS

7.1 Study conclusion

I wanted to research whether elderly people in the informal settlement are satisfied with their life and the conditions they live in and also whether they get the support that they need from the GRN or the city of Windhoek or even from their families.3/4 of the elderly people are not satisfied and they live in absolute poverty, have no one to support them and are sharing their pension money with other people.

Beside the elderly being vulnerable, there is a huge cloud of sorrow and grief following the elderly in the slams. Many have lost their children due to HIV /AIDS and others are sad that they have been abandoned by their own children. The role of elderly have changed in Namibia due to modernism and education, young people prefer to have nuclear families. The role of grandparents is being overlooked as people prefer to put their children into daycare at an early age and many are educated and do not value the traditional wisdom anymore.

Many elderly people are living in poverty and not all of the pension age people are receiving pension even though they are entitled to.

7.2 Discussion

When evaluating how I reached my research goals, it is critical to remember that even though I grew up in Katutura, we lived in a very different world from the elderly in the slums of Katutura. The elderly in the third world countries carry the deep wisdom of life that may get lost if they are not regarded as full members of their own communities. They cope with life in harsh environments where I would not dare to think I can survive a few days without help. Supportive mechanisms to help the elderly in the slums are not available or they are not in practice. There are a lot of discussions and development projects going on but they do not seem to capture the reality of the life situation that our elderly people face every day.

I am hoping that in the near future, there would be NGOs that would assist the elderly to get their documents and assist them going to the health facility centers. The community centers are doing a great job but it is not reaching to all the community members, the elderly are left out in the community development projects. The either not get the information or the centers are a distance from where they live. By improving the participation of the elderly in society and confronting the marginalization of our elderly will improve the quality of life in old age in the whole country and not just the slum areas. Community members that are active can organize programmes about the wellbeing of elderly and how to improve the conditions of the elderly. The city of Windhoek could mobilize meetings were information about the social and health factors that promotes the wellbeing and inform elderly people about their rights in community and what kind of services they are obliged to have.

The city of Windhoek could also maybe start a project that would build affordable rental houses that are in an area which is elderly friendly and the elderly can have a safe place to live. toilets and water points could also be closer to the elderly as you have read before that some elderly are forced to use plastic bags when nature calls and it may take a few days before they empty their waste

buckets that they use during the night and during days that they are not having enough strength to go to the nearest toilet.

The process of my data collection was very difficult for me because I got too emotional see the conditions that old people live; some went for days without food and water. The shacks they lived in on can barely stand inside, so dark and smelly. How does one survive in such conditions? Most of the elderly complained that people always come do interviews with them but nothing is done and they do not benefit from the information they give. I spoke to my supervisor and the leader from the ELCIN organization for us to organize a small Christmas party for the old people. My supervisors argued that the city of WHK is already organizing the yearly Christmas party for old people and if I want to do it is up to me.

I then drafted a letter to different supermarket manages asking if they could donate groceries and other basic products make Christmas packets for the elderly in Katutura. I also explained in the letter the reasons and motivation of this little project and I send them emails and after a few days, I went to see them in person. There was a positive outcome and we had a really memorable time with the elderly. This experience has helped me develop in a professional way and gave me confidence that I as a social services student can do something to improve someone else' life condition, I can lead by example. it takes courage to make a difference and stand firm in what you believe is right.

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APPENDIX 1: QUESTIONNAIRE

BACKGROUND QUESTIONS

1. **Age:** ---------------------------- years

2. **Sex:** ☐ Male ☐

3. **Marital status:**

4. **Do you have any children? (how many?)** ----------   ------------

5. **Number of children and grand children at home with you** -

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6. **Do you belong to a church or any spiritual organization or belief?**

7. **Do you receive pension?**

8. How many people do you share your pension with?

Social issues

9. How do you feel about your social situation?

10.   Do you feel safe living in this environment?

11.   What do you fear the most and why?

12.   Do you feel that you are getting the respect that you deserve as an elderly in your community? Yes ----- No -----

13.   Do you feel lonely sometimes? ------------

14. **How often do you travel back home to see other family members?**

HEALTH ISSUES

15. **Are you suffering from any illness?** Yes or No

If yes, from what? How long you had it and how does it affect your everyday life?

16. **How often do you visit the health care centre?**

17. **How many times do you eat per day?**

18. **Where do you mainly get your food from?**

19. **Who helps you when you are in need?**

20. **How much do you feel the pension grant should be to be able to assist you and your family?**