



Elderly Care in Ghana

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<p>The main objective of this study is to map out how elderly people in Ghana are being cared for in their everyday lives. Furthermore, the study will bring to understanding what aging means to the inhabitants of Ghana. This study is based on five interviews, which is a small study to enable draw any conclusions about life situation in general. However, it gives an overview about how the elderly in Ghana and view their role in their family and society. The materials used were books, internets sources, articles and research materials. The main theories in this study are old age and care for the elderly in Ghana and sense of belonging and safety. Qualitative research method was chosen perform the empirical part of the study. Semi-structured interviews were used together with an open-ended question for guidance. The data gathered were then analysed by using content analysis.</p> <p>The results showed that most elderly people in Ghana are being cared by the family, and one gets exempted by physical changes when ageing, psychological and biological changes. Also, the elders play the role of advisors within the family and society as a whole. By improving elderly care in Ghana, the government are been entrusted to provide community centres that will serve both purposes as a socialization place and a free health check-up centre once a week. Furthermore, the elderly agreed on the family being the most important thing in their lives being that spending time and enjoying the company brings some sort of joy and safety since there always someone around. Furthermore, they feel more belonging within the church and experience spirituality which draws them closer to God. But however, the society now doesn't respect and support the elderly.</p>	
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1 INTRODUCTION

The main aim of this particular study is to map out how elderly people in Ghana are being cared for in their everyday lives. Furthermore, the study will bring to understanding what aging means to the inhabitants of Ghana.

However, the care for the elderly in Finland differs slightly from that of Ghana. In Finland, the care for elderly is in such a way that the elderly is not left without help or contact with other people but the family does not play an important role in this. There are vanhainkoti (old people's homes) as well as services to help the elderly living in their own homes through kotihoito (home services). My personal experience whiles working in the home service, I realized the elderly are lonely and have little or no contact with their families and the society due to the fact they live alone and some are incapacitated. The family has been very important and instrumental in the care for the elderly in Ghana since time immemorial. The elderly are noted for their much wisdom in decision making and problem solving in the Ghanaian setting. However, the Ghanaian culture has gone through some transformations due to factors like urbanization etc. and this has brought a change in attitudes towards the elderly. This has made this subject an interest of study.

Approximately, 60% of the population in Ghana are Christians. The church however plays a big role and has big influence on many people as well as the family and the society respectively. Together, it will bring to understanding how the elderly are being cared for nowadays since the Ghanaian society is undergoing a traditional change.

1.1 Research questions

The research questions are as follows:

1. How is old age understood in Ghana?
2. What factors enhance the sense of belonging among elderly in Ghana?
3. What kind of factors improves safety among elderly in Ghana?

1.2 Type of research and plan of study

This study is a descriptive research and is done on the basis of semi-structured interviews of five elderly people, these elderly people lives in Accra region, the capital of Ghana. However some of the interviews are done with the help of a neither interpreter which might affect the answers they might give because some of the elderly can't speak nor write English. The method utilized in these interviews will be a qualitative one. A semi-structured interview is a qualitative method of inquiry that combines a pre-determined set of open questions with the opportunity for the interviewer to explore particular themes or responses further. It does not limit respondents to a set of pre-determined answers.

The commissioned party is a non-governmental organization (NGO) based in Accra, Ghana called Ripples health care. Being one of the best home care service providers in Ghana now, the organisation is very much interested in this study because this study will help create awareness of how the elderly feel their being cared and give knowledge to improving and caring for the elderly in Ghana.

The theoretical background is partly based on sense of belonging and safety articles and journals and the literature by Nana Araba Apt, "Coping with Old Age in a Changing Africa". The literature lays emphasis on elderly people in Ghana and the way and manner they go about their everyday lives and the mind-set of a societal change where modernization is having an impact on the traditional care system. Also, other literatures and internet sources related to the topic are used.

1.3 Limitations

Since the study is centred on a five interview interpretations, it gives a clear indication that conclusions drawn cannot be generalised due to the small nature of the study. However, it gives an idea and brings to understanding about how the elderly people in Ghana are being cared for in their everyday lives with respect to the church, family and the society.

2 GENERAL BACKGROUND OF GHANA

To understand the ageing and elderly care in Ghana, it is important to have an idea of the people, their ageing population, traditions, religion, and living standards.

Ghana is an autonomous state and unitary presidential constitutional republic located on the Gulf of Guinea and Atlantic Ocean in the Africa frontier of Sub-Saharan Africa. Ghana consists of ten administrative regions with several islands and it is bordered by the Ivory Coast to the west, Burkina Faso to the north, Togo to the east and the Gulf of Guinea and Atlantic Ocean to the south. Although English is the official language, there are numerous other languages such as Twi, Fante, Ga, Ewe and Mole-Dagomba. The city Accra is the capital which lies to the coast where one of the country's two major harbours can be found. Ghana's environment is very diverse; the south-west is a tropical rainforest, north of Accra outstretches a mountain area. Around the northern part, the rivers are surrounded by savannah, and there is less rains than in the south. The Volta Lake in the east is the largest manmade lake in the world. (The Country Ghana 2013)

2.1 Socio-economic aspects

In sub-Saharan Africa, Ghana is seen among other nations as developed such that the rate of poverty is not highly noticed as before. The fraction of Ghanaians described as poor in 2005/06 was 28.5%, declining from 39.5% in 1998-99. The proportion of the people described with extreme poverty declined from 26.8% to 18.2%. Ghana is on track to meeting the Millennium Development Goals for income poverty, hunger, primary school completion, gender parity at school and access to water. Despite the decline in the percentage of poverty challenges remain evident. The poorest among the socio-economic groups includes the farmers. The farmers living in the southern part are more urban and have access to services and infrastructure that most of the farmers living in the northern and rural areas of Ghana. Currently agriculture is seen as the dominant boost of the country's economy, although the oil in the industry shows high prospects in the near future. The HDI (human development index) is used to measure health, education, and income which facilitates and establish with results the inhabitant's standard of living. 0.475 was the average HDI in sub Saharan Africa as at 2012. Ghana could be

seen with the best HDI, but on the global scale, most countries are far ahead. Ghana placed 135th amongst 186 countries in 2012 (Caluag 2013)

It is evident that in the savannah region the presence of rural poverty and it covers about two thirds of Ghana's northern territory. Considering the national poverty rates, the northern part are two to three times of that and persistent insecurity of food is still a critical problem. In Ghana's poverty stricken rural areas, the people dealing with small scale farming have very less access to the resources that would help bring about a move from subsistence farming to modern, commercial agriculture. Some of the things they encounter in their everyday lives include a lack of infrastructure and things to help them store and process their products and inadequate assistance technical, financial, skill development assistance and less functioning market. However, soil erosion, land fertility and degradation is evident due to population pressure and short fallow period which goes a long way to pose danger for the farmers as far as their incomes and livelihoods are concerned. With respect to the less nature of jobs in the villages, people move to the urban centres to be gainfully employed and this gives rise to the aging such that the elderly are left behind in the villages and they tend to suffer from loneliness and helplessness. (Rural poverty in Ghana 2012)

2.2 Demographic aspect of ageing

Fertility and mortality is known to have a great impact on the age structure more than migration does, but migration may be more significant within the town, city, or regional level. Fertility and mortality is highly used as a determinant for the age structure of a country. High fertility and high mortality tends to yield results of a young population whereas low fertility and low mortality in the long run yields an older population as result. (Mba 2010)

However, the population in Ghana can be described as a youthful population. There has been an increase in both the proportion and absolute number of elderly population (persons aged 60 years and over) as seen by the results from census and estimates from other sources due to a decline in fertility and mortality.

The fraction of the elderly population now stands at 7.2percent; Ghana has most of its inhabitants aged 60+ years as one of the highest proportion in sub-Saharan Africa. The proportion is expected to rise in the coming decades due to persistent campaigns to reduce fertility and mortality (Mba 2010)

2.3 Religion

In Ghana, out of the total population, Christians are estimated to be 68.8percent, 15.9percent Muslims, while 8.5percent practices traditional religion respectively. The Christian religion has had a great impact on some of the Ghanaian traditions which includes the abandonment of polygamy in favour of monogamy among the Christian population. Traditional beliefs on the other hand differ from group to group. The ancestors, along with a number of gods, goddesses and other spirits are things which the religion lays much emphasis on (Lewis 2014)

The main religions during 1960 were Muslim 42percent and Christianity 13percent. The reasoning behind this intense change was the missionaries. The Basel/Presbyterian and Wesleyan/Methodist missionaries, who were Portuguese and other European descents started to spread the word of God. As time went by, it became more accepted and legal to talk about the word of God in churches and schools. These paved the way for the younger generation to have a jump start to the future. As the year's passes, Christianity slowly starts to take over the country. Also, Christians in Ghana believe in witches and demons. "For the ordinary Ghanaian, witches and demons are the primary cause of illness, diseases, poverty, death, and other misfortunes in life (Fredua-Karteng). Many people spend hours upon hours in churches praying and fasting daily but they don't feel that the excessive church going is causing poverty and lack of work. (Religion in Ghana 2013)

2.4 Traditions, society and family

The Ghanaian society can be categorized into three castes; royals, commoners and slaves. The royal status is still significant traditionally practiced although slavery is no longer evident in Ghanaian society. Only wealthy and powerful men are noted to prac-

tice polygamy although it is legal. When a woman's husband dies the husband's brother is expected to assume responsibilities of the children and marry the woman as well. The woman being able to endure such practice shows how hospitable and formal she is and is seen to have good manners. The status of young people in the society changes as a result of their education and the wage jobs they do and due to this changes the elderly feel they are being disrespected by the young ones. (Lewis 2014)

There are two systems of ancestry inheritance within the clan system: the matrilineal and the patrilineal system. The patrilineal system differs from one society to another; but inheritance is being transferred through the male line of the clan. The most common form is from father to son and the less common form is from brother to brother. The Ewe and the Ga tribes are patrilineal. Accordingly, in a matrilineal system the inheritance is transferred through the female line instead. The biggest matrilineal tribal group in the country is the Akan's, thus the matrilineal system is dominating. In the Akan system, the inheritance passes from uncle to nephew. This leaves the children of a father without inheritance at all. Nowadays there are laws that guarantee that the children receive part of the parent's inheritance. (Nukunya 2003 p. 29 f.)

According to Nukunya (2003), the three functions of the family in Ghana are procreation, socialization and economic co-operation. Marriage is considered the legal foundation of the family; however the family is not bound to the system of marriage. The extended family is defined in two ways. First, it is defined as a group consisting of close relatives either male or female line. The structure is usually defined by the ancestry system. Secondly, the extended family is defined as "a social arrangement in which an individual has extensive reciprocal duties, obligations and responsibilities to relations outside his immediate (nuclear) family". Households used to consist of members of the extended family and not just the nuclear family. However, the nuclear family system for habitation is increasing in the urban areas while the extended family system is still mainly in the rural areas. (Nukunya 2003 pp. 49-52)

3 OLD AGE AND THE CARE FOR THE ELDERLY

3.1 What is Old Age?

Ageing is a broad concept that includes physical changes in our bodies over adult life, psychological changes in human minds and mental capacities, social psychological changes in what humans think and believe, and social changes in how humans are viewed, what we can expect, and what is expected of us. (Atchley & Barusch 2004 p. 4)

3.2 Different Aspect of Ageing

3.2.1 Biological ageing

Biological ageing is the result of numerous processes, most of which do not progress at the same rate. For example, kidneys typically show diminished functioning much earlier than does skin. In addition, different physical functions reach maturity at different ages. For instance, we usually reach physical sexual maturity several years before humans attain full height. To complicate matters, most physical functions vary quite a bit from person to person at all stages of life. (Atchley & Barusch 2004 p. 4)

When humans examine psychological ageing in adulthood, humans find that certain functions diminish with age while others increase or remain relatively constant. For example, mathematical problem solving ability generally declines with age, vocabulary usually increases, and habits such as hand gestures tend to remain relatively constant. Variability is as great for psychological ageing as it is for physical ageing. (Atchley & Barusch 2004 p. 4)

3.2.2 Social psychological ageing

This result from the long-term interactions people have with social world around them. For example, each person's concept of self is greatly influenced initially by feedback from others, but over time adults often become less dependants on others for evaluations of the self. Adults also tend to experience shifts in values as they age. Early on,

they are heavily influenced by achievement values, but later they may become less interested in personal achievement and material concerns and more interested in the quality of relationships with family and friends. (Atchley & Barusch 2004 p. 4)

3.2.3 Social ageing

This on the other hand, is largely an arbitrary process of establishing what is appropriate to or expected of people of various ages. Age definitions are often contained in legislation or administrative guidelines for programs but usually are not based on research information about people's capabilities at various ages. Concepts of life stages and the life course represent socially defined ideals about how people are expected to progress through life. There are many versions of these ideals, however, and people may not conform to these ideals for a variety of reasons. As a result social ageing adds yet another level of variability to an already complex set of dimensions. (Atchley & Barusch 2004 p. 4)

3.3 Perception of old age in Ghana

Old age is considered in the Ghanaian society as wisdom. Due to this wisdom Old men and women were being asked for advice because so as to help to solve problems but as it stands now, things have changed. The society has lost the respect for the aged. (Collins 2005)

In Ghana, older people are not excluded from the development of useful and collective participation. In a typical Ghanaian household, everybody has a role to play whether young or old. The elder plays the role of societal upbringing of the young and thereby becomes the educator and the guiding spirit behind many initiatives of the young, psychologically a very important role. The elder is also being entrusted with family lands, property and family wealth, consulted in administrative matters and important decisions. The role of being referred to as "ancestral spirit" gives them the recognition to officiate in ceremonies such as marriages, births, deaths and adjustors and to ensure that peace and harmony prevails within the greater family. (Ageing in Africa 2000)

In general, older people play a vital role in the whole African society today. From caring for the grandchildren or the orphaned grandchildren to providing much needed household income and advice; millions of families wouldn't have survived without the contribution of the elderly. Yet older people are often excluded from development programmes and discriminated against services such as healthcare and so on. (Older people in Africa: a forgotten generation 2008)

4 THEORITICAL FRAMEWORK

4.1 "Sense of belonging and safety among the elderly"

The idea of belonging is vital to our understanding to how people give importance to their lives. Our sense of identity is founded on social relations that show our belonging to particular community through shared beliefs, values or practices. The choices that we make from our religious views, to the friends that we acquire, to the cars that we drive, even to the insurance that we buy serve to position us as part of the groups, networks and communities that make up human society. In modern society, it makes sense to think of humans as individuals. After all, we have individual bodies, individual minds, individual goals and ambitions. But in very important ways, being human is not about being an individual at all; it is about belonging to a particular group of individuals. (Marsh *et al.* 2007)

At a very basic level, who we are is defined by the social networks and communities to which we belong. When asked to describe ourselves, we reply by talking about our relationships to people and places- as sons, mothers, husbands, or friends; as members of nations, ethnic groups, or neighbourhoods; as employees; as consumers as certain brands and the lifestyles that go with them. Through membership within these groups we make statement about the kinds of people, beliefs and values that we want to be associated with, and ultimately the kinds of people we are. These beliefs and values can be made explicit as in the case of religious groups, or political parties, or they can be embedded in the activities and practices that characterise the group. (Marsh *et al.* 2007)

Developing a sense of belonging is an ongoing process that involves membership in or exclusion from, a wide variety of different groups during the course of our lives. The relative importance is to place on our membership within particular groups. In addition, the importance of belonging changes over time. As we join and leave different social networks and groups, we reposition ourselves in relation to others, developing new connections and discarding others in a continuous process of social interaction and integration. (Marsh *et al.* 2007)

Generally, people who find themselves within the confines of the church and have a strong sense of belonging picture their health in a more unique way. They see their strong sense of belongingness affecting their health in a more positive way. It is also evident that people within the church that are involved in activities and given the necessary social support tend to have a strong sense of belonging. (Krause & Hayward 2013)

An elderly person needs to feel safe, remain close to other people and believe that his life continues to be meaningful. Meeting his emotional needs can help him avoid depression. Signs that he lacks sufficient support may include difficulty in sleeping, a poor appetite or an inability to concentrate. Emotional care for a senior should include steps designed to deal with vulnerability, loneliness, boredom and isolation.

People need to feel like they belong and accepted to a place. Wherever they find themselves, they are important and people care about us. They are not meant to be alone and meant to be totally self-sufficient. Abraham Maslow created the theory of hierarchy of basic human needs which acknowledges all of us have to achieve in order to flourish and grow. It begins with getting our most basic physiological needs met, such as thirst, hunger, and shelter. After, there comes the need of safety and security. Following that, is the need to feel belong and loved, to be affiliated with others and to be accepted. (Elkin 2007)

When one has good support systems in their lives, one feels they have a place they belong and feels safe telling your troubles and woes. It's a place where you can get help working through a problem. It's a place where your joys and successes get celebrated. One already knows the people in the network will really support and show caring about what one has to say. One feels safe to be honest and exposed with them and one knows he or she will be honored when sharing yourself. (Elkin 2007)

All humans feel happy and unhappy at different points in time and this may make people feel angry, silly, and excited all in just a day. Safety is one emotion we might feel without realizing it. To be safe means being free from harm or hurt. So, the understanding of feeling safe is that you cannot predict either harm or hurt, emotionally or physically. In every circumstance there are things that ensure our safety. As one is ageing, we

tend to find that safety feeling in our everyday lives such as the telephone friendly voice, a comfy pillow, a special meal, friends, clubs, a special location, spiritual beliefs, or books. People also tend to find that feeling of safety through some unhealthy ways like an over eating, alcohol and drugs. (Preisler 2013)

4.2 Factors enhancing and improving sense of belonging and safety

4.2.1 Changes in the family

The traditional family system in Ghana is being swayed by migration. Within the extended family, one is obligated to help in terms of moneywise as well as moral support, court cases and so on. The upbringing of the children is the responsibility and involves all adult around. However, the elderly plays a major part with the upbringing of the grandchildren. Hence, the children will always have an adult supervision and the elderly has someone to help or run errands. The core obligation a child has to his or her parents is to take care of them when they are old, just as they have taken care of him or her growing up. The main role for the elderly is to function as an advisor concerning family matters for the whole family.

Furthermore, within the extended family, there is a societal pressure to act in a manner and work hard for a good reputation for the family. However, due to individuality and migration the role of the extended family has shrank to favour the nuclear family. With this at hand, pressure is being placed on the traditional system and family members living in the village expects behaviour according to the traditional system. Relatives might come and ask for money to start a business, expecting to receive help from the migrated family members. The migrated family member might not conform to this traditions hence bring a problem within the family. Another disadvantage of this system is that it might push one to work hard for the family, kill creativity and motivation since inheritance and status will be passed down accordingly. Also, it puts more emphasis on the kinship system than marital bonds, which in an urban society will create a conflict for the people involved. Elderly people are more obliged to rely on the extended family sys-

tem, while young people in Ghana today lean to emphasize the nuclear family. (Nukunya 2003 pp. 162-165)

The very first provider of social welfare is the family. Long before the missionaries arrived to Ghana, the country was divided into tribal communities. Hence one feels a sense of belonging and thus, everyone is being responsible for each other which was very strong within the community. Also, the family provides social support, both physically and mentally. Today, urbanization has declined the family ties which have put more pressure on the additional providers of social welfare. In the case of the churches, the decline in the family ties has changed their role in society but substitute the family role when it comes to both mental and financial support. (Lidzén 2008)

4.2.2 Changes in the society- Urbanization

Urbanization is constantly on a rise in Ghana today. The capital has being on an increase with one million people, from about 624,000 people in 1970 to 1,650,000 in the year 2000. The result of many shifts in the society and many social problems are encountered because of urbanisation. Poverty, slums, over-crowded areas, organised crime and juvenile felony has increased in the cities since the 1990's. Furthermore, it brings a drastic change in the family way of life. The traditional way of living where family and kins are the basis for society is increasingly losing importance for the benefit of new ways of living in the cities. Hence, the focus on the nuclear family has increased. (Nukunya 2003 p. 141 f.)

The main reason people migrate to the city is to look for better jobs and future than in the towns or villages can afford to give them. However, many people are faced with long-term unemployment and have to find other ways of supporting their family. Women usually sell food or similar on the market to be able to earn some money. Hence, urbanization is a problem that affects urban as well as rural areas in one way or another and the family loses its ties of binding them together. The rural areas are being dominated by the elderly and hence labour is being reduced in the villages since there is no young person to work or to be employed. Around the cities, the statuses for the aged are not the same, the elderly has become an economic burden for their children and their role as

advisor is limited due to education level of their children and grandchildren. (Apt 1996 pp. 37-41)

4.2.3 Christianity and Church

The European slave-traders were the ones who introduced Christianity into Ghana. The first missionaries arrived in the country about 1471. However, the first churches were not officially established until the 19th century. (Nukunya 2003 p. 120 f.)

The education system was not the only thing that drew people away from a traditional life-style; the church also isolated the Christians from traditions. Religion is very closely related to the kinship system, authority and political systems. Christianity influence did not favour many of the traditional customs. The tradition of respecting the elders originates from the belief that the elderly people represent what the ancestors stood for; to disrespect them meant disrespecting the ancestors and could result to reactions from the dead. Because Ghanaian society is embedded in chieftaincy, the court was the place to express culture and traditions and still is to some extent. However, Christians were encouraged not to participate in festivals and other arrangements in society, since those were considered pagan traditions. Hence, Christians were isolated from social activities in the local town or village. (Nukunya 2003 p. 123)

About 64 percent of the population are Christians today whereas Islam 15percent and the rest are traditional religions in Ghana. Today, there are a vast number of growing Charismatic churches which are often influenced by churches in the USA. The services are usually in English, both the preaching and the songs. These churches attract many young people and the number of elderly people in Charismatic churches is usually low. Also, there are other independent churches that focus on keeping the traditional African culture. The services are usually held in the local language and the structure remains traditional to go hand in hand to the Ghanaian society. (Nukunya 2003 p. 126)

Furthermore, the church as religion provides psychological benefits such as a positive hopeful attitude about life and illness, which improves health outcomes and lower mortality rates, the sense of meaning and purpose in life, which affects health behaviours

and social and family relationships and a greater ability to cope with illness and disability. Many elderly people report that religion is the most important factor enabling them to cope with physical health problems and life. (Kaplan & Berkman 2013)

4.2.4 Childlessness

There are many Akan proverbs that acknowledge the importance and benefits for having children. To quote a few; “nothing is as painful as when one dies without leaving a child behind”, “there’s no wealth where there’s no children”, “the old woman is dependent on her children” and so on. The main reason for receiving such status and respect in the society is that, the more one has a child the better. Children are a social classification for the elderly person; one is defined after one’s children. A mother is usually called: “the mother of...” hence without a child, one has not the same social identification and high status, and will be reminded of it every day. This creates a problem to some extent for most women today but a man without a child can simply divorce his wife or marry a second one. Men, traditionally, have a higher status in the family than women, (Gyekye 2003 p. 188)

In the Ghanaian society, the tradition of caring for a child meant one takes care of a child to make sure he or she will feel responsible to take care of oneself when one grows old. There is also an Akan proverb to support this theory: “if someone looks after you to grow your teeth, you must also look after him to lose his”. This system has been a security for people without children; however, in a modernized society this system is difficult to maintain. If one does not have children one is wasted which is becoming a big phenomenon today. (Gyekye 2003 p. 187)

4.2.5 Status and role- a change in the social position

Due to modernization in Africa, the status and role for the elderly are changing. In a traditional society, it is believed that the aged has knowledge and skills that the young person has not yet acquired. The aged also own the land and thus inhabit an important role in the family, has control over the decisions of the young. In addition, there are also religious ties and traditional customs that bind the young and the old together. In a mod-

ern society, young people have their own income and therefore, command over their lifestyles and thus do not have to consult the aged for anything. Moreover, young people of today are educated to have the knowledge that the aged do not have. Traditional religious practices and beliefs have become less important and practiced which has a result have loosened the family ties in Ghana. The aged are less preferred to the likes of teachers and government officials. Most of the elderly in Ghana are illiterate which therefore creates a gap between the young and the aged that affects the traditional status system. (Apt 1996 pp. 6-35)

In addition, demography has also changed. People live longer and the population is older now than it used to be. Apt points out that there are also more women than men that grow old. As a result, there will be a greater need for social and economic support for the aged, and specifically for the women. According to Apt, there is a lack of awareness about the impact over this situation in Ghana today. (Apt 1996 p. 9 f.)

4.2.6 Young and Old

According to Apt's research, the most common living arrangements in Ghana for the elderly is to live together with one or some of her extended family, usually children or grandchildren. However, the number of elderly people living with a maid is increasing both in the urban and rural areas. Children tend to consult the elderly in their family more often in the urban areas than in the rural areas; this too is a result from migration. Migration then creates a distance in the relationship between young and old. (Apt 1996 p. 74 ff.)

Elderly people in the urban areas are literate to a high degree and they also have opportunity to be active in organized public and church activities. In the rural areas, people work longer and thus do not have any free time as in the urban areas. Elderly in rural areas are also more involved in family business and function to a higher degree as advisor for the family (including the extended family). Therefore, in Apt's research 60% of the aged are never lonely and 35.1% are lonely sometimes and 5.8% are extremely lonely. The aged who are extremely lonely do not have any children. (Apt 1996 p. 81)

4.2.7 Other trends

Some of the older people are at times being abandoned and neglected by their families, and may face physical abuse. To add a few, widows among the older persons undergo more abuses than older men, and in some cases are accused of witchcraft. However, they rarely report these abuses because of fear and ignorance of their rights. (Older people in Africa: a forgotten generation 2008)

The manner and ways some nurses and doctors deal with the elderly when seeking medical care is very irritating. Also, the way some doctors go to the extent of asking relatives whether they are to treat the elderly to get better or to die is not a good practicing ethics. The current perception circulating among the youth that every old person possesses some witchcraft is another form of harassment being faced by the aged especially old women in the north. With that at hand, they blame their misfortunes on the elderly in the family and abuse their human rights by calling them all sorts of names. Unfortunately, some go to the extent of killing them. (Collins 2005)

5 METHODOLOGY

The method chosen is a qualitative research method. It's relevant to this type of study because it involves a lot of in-depth understanding of human behavior and the reasons that govern human behavior. It also helps to ascertain deeper information and opinions from a small group of people involved directly.

Qualitative is an approach that allows you to examine people's experiences in detail, by using a specific set of research methods such as in-depth interviews, focus group discussions, observations, content analysis, visual methods and life histories or biographies. It also allows you to identify issues from the perspective of the participants, and understand the meanings and interpretations that they give to behavior, events or objects. (Hennink *et al.* 2011 p. 8 f.)

5.1 Informants

In sampling the informants, the target group for the interview must reach the research requirements. The interviewees are not chosen by random sample but they are specialized informants. Thus in this study, the informants must reach the criteria. The criteria were retired old people which all informants had retired from the professional field. Five informants were then chosen to participate in the interview and the target group ages were between 68-80years.

Fortunately, the settings of the informants were all in the Accra region, the capital of Ghana but located in different suburbs. With the help of resources from a confidant, a telephone conversation was arranged, where a suitable day and time were also arranged. They all agreed for the interview to be held at their houses. All the participants had a positive attitude and were looking forward towards the interview because they were already informed. Also, even though they were informed about protecting their anonymity and tape recording the interview session, they felt very comfortable and didn't hesitate when asked about their personal details. With reference to the other questions, they expressed themselves at length although some of them deviated from the questions and had to be reminded to put back on track. Furthermore, the entire respondent's spoke

English thus an interpreter wasn't needed anymore, which also made the interview easier.

5.2 Data collection

A semi-structured interview has been adopted for this study. As a method of research, semi-structured interview is allocated to certain themes, is flexible and allows new questions to be raised during the interview as a result of what the interviewee expresses. The method lacks a strict form and order of the questions. The themes used are the same for each interviewee, but the interviewer is allowed to change the form and order of the questions.

All experiences, thoughts, beliefs and feelings can be researched by the method in question. The interviewees' emotional responses and their expressions on matters are emphasized. What are fundamental to the method are people's interpretations on matters and the meanings they give to matters. The method also assumes that meanings arise from interaction.

The interview questions (Appendix 1) began by verifying the main themes of the questions based on the research questions and aims of this thesis. Three themes were formulated; general information of the elderly, old age in Ghana, sense of belonging and safety. The purpose of gathering data by using open-ended questions is to understand and capture the perspective of the informants without predetermining their perspective through prior selection of questionnaire categories. Data were obtained by means of tape-recording. The informants were already informed about the tape recording and the anonymity of their names. Speaker 1,2,3,4 and 5 were however used to substitute their identity.

The interviews were designed according to the guidelines for constructing a simple and concise language, the questions were rather conservative, easy to understand, each question dealt with only one dimension, there were no escape route, specific, not suggestive questions in nature, all the questions were formulated in a polite way and generally the language used was straight forward. The informants were put to track by asking other

questions when it was evident that they were deviating. Altogether, there were 14 sub questions; four questions based on the background of the informants. The next four sub questions were based on old age while the other six were based on sense of belonging and safety. The session of each interview lasted between 30 to an hour. The tape recorded material were later transcript onto a twelve pages sheet, saved as a file documents and later printed out for analyzing.

5.3 Ethical considerations

Anonymity requires that the identity of individuals be separated from the information they give. There are two methods known to protect a participant's anonymity and confidentiality. It is an obligation to protect research participant anonymity and to keep the research data confidential. The obligation should be fulfilled at all cost unless on the contrary, arrangements are made with the participants in advance.

The participants are often informed that the information they provide will be treated as confidential. Even though the researcher is able to identify a particular participant's information, it would not be revealed publicly. For ethical purposes, the interviews were conducted under anonymity (no revealing of addresses, phone numbers and other personal details). The participants mentioned their names during the interviews which would be known to only the researcher and the supervisor but were informed beforehand about not revealing it publicly. A letter (Appendix 2) were given beforehand asking for a free, willingly participation and the use of tape recorder and the responses given were positive. All the taped recorded material will be destroyed after the research.

5.4 Data analysis

The data gathering in the interview totals twelve pages and content analysis has been used to analyse data from the interview. Content analysis involves identifying coherent and important examples, themes and pattern in the data. It's also involves quotations or observations that go together, that are examples of the same underlying idea, issue or concept. (Graneheim & Lundman 2004 p. 108 f.)

The transcribed and recorded interviews were read through several times to obtain the sense of the whole data. The level of analysis chosen to organize the theory is by using words, thus specific words were used to code for a specific topics. These involve how many data to be coded, in these process theories that determined the significance to elderly care in Ghana have been coded. However, appropriate categories that were not included in the set were also added. The coding processes were done by the number of times a certain word appears in the text and might be more indicative of importance. The data were coded as they appear in the text and also using different words to summarize the data. Irrelevant information in the text was used to examine coding pattern.

The next step was to code the text; the various codes were done by hand and reading through the text and manually writing down the data similarities and occurrences. Once the coding was done, researcher decided to view all coded and irrelevant information as important and using it to re-examine and reassess the coding procedure.

5.5 Validity and reliability of this study

Reliability of a research means when a person is interviewed at two or more different times, the results are the same or when two different researchers get the same results. Also, if two parallel research methods give out the same results the researches are considered reliable. Often, unclearly phrased questions, carelessness in sampling or incoherence in processing and interpreting the material/data leads to poor reliability. Also outward circumstances that the researcher cannot effect on may diminish reliability. The reliability of interview material depends on its quality. Consequently, many things before, during and after the interview can affect the reliability.

The validity of a research depends on whether the research refers to what it is supposed to refer to. In other words, do the terms used reflect the phenomenon that is meant to be researched? Sometimes people can understand the survey's questions in a different way as they are meant to be understood. The measurement causes mistakes to the research, therefore the findings are invalid. Invalid research brings out consequential flaws to the findings and their interpretation. In the end, it is a problem of interpretation. Qualitative research usually focuses on people, behavior and attitudes. If there are differences be-

tween two researches, it does not automatically mean that the method is weak. It can just be the result of changed conditions.

At the beginning of each interview, the respondents' permission and consent towards the interview were asked. Each respondent were asked the same questions during the interview. Most of the respondent had a positive attitude towards the interviews. Fortunately, there were no cases where the respondents' had to use an interpreter. Summarising and analysis of the data were performed under a self-conscious atmosphere without any external assistance.

6 RESULTS

In this part, the findings have been divided into two themes; old age and sense of belonging and safety where each answers the research questions. (Appendix 1)

6.1 Old age in Ghana

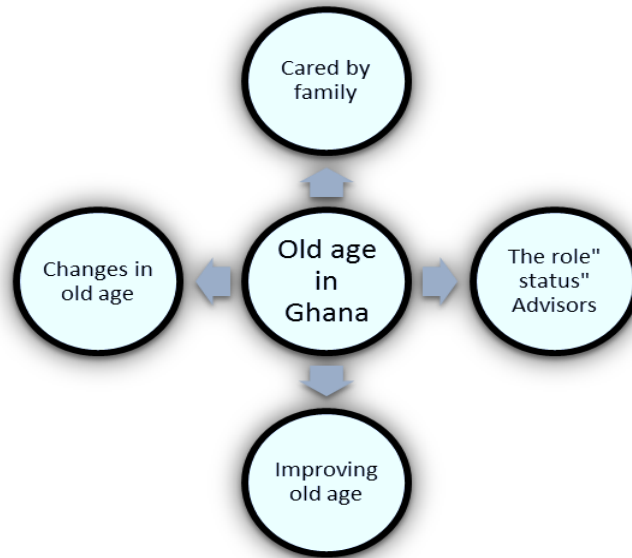


Figure 1. A categorized overview of Old age in Ghana.

The figure 1 above illustrates the categorised overview of how Old age is in Ghana. The categorisations were substituted based on the interview questions 1 themed old age which were divided into four categories. The four categories namely, cared by family, plus changes in old age plus the role “status” plus improving old age would help answering the theme (old age in Ghana).

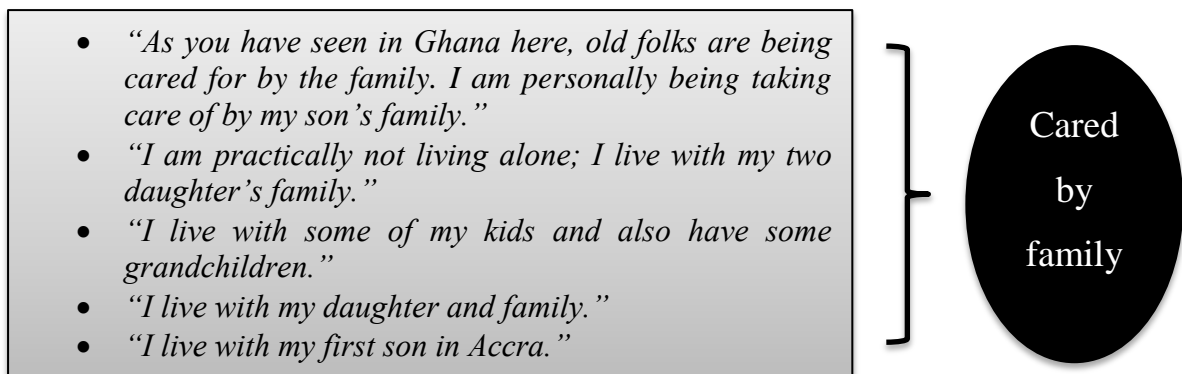


Figure 2. Interview quotations for categorised group cared by family.

The informants are all elderly people who have professionally retired from work. The term “cared by family” has been identified in all the informants’ responses when asked about their living conditions at the moment. Each informant is living with the children’s family. There is wise saying in our dialect that goes “If you look after a child’s teeth to grow, then he/she has to look after the other person for the tooth to come out. Therefore, traditionally in Ghana, it is very common to see the elderly being cared for by the family especially their own children. This brings about the issue of childlessness which is becoming an issue in the society; who takes care of the elderly in this situation? Family: cared by family. Even though they’re not leaving in their own homes, they live comfortably in their children’s home and feel at home.

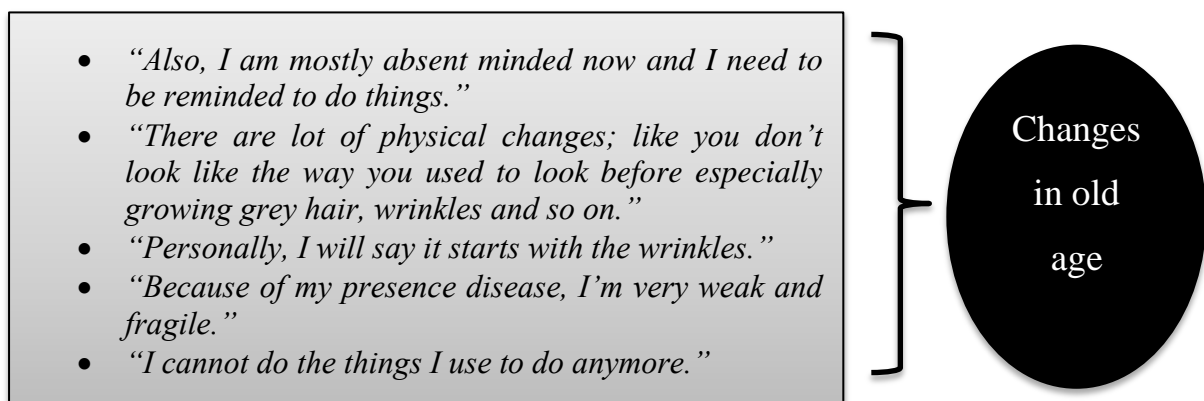


Figure 3. Interview quotations for categorised group changes in old age.

The informants expressed different “changes in old age.” Most of them felt that, they realise a lot changes physically especially their bodies as to when they were ageing. A

physical change occurs in the growing old stages with evidence of growing grey hair, having wrinkles, and so on. Another informant gave relevant evidence of being absent minded, forgetfulness and so on which is related to biological changes. However, one of the informants complained of having a presence disease which is related to biological changes.

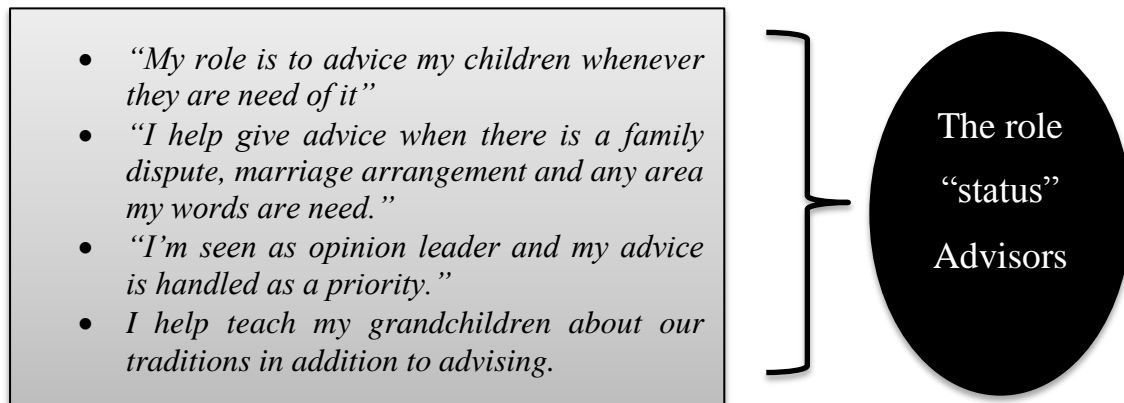


Figure 4. Interview quotations for categorised group the role “status”.

Also, most of the informants used the term “advisors” when expressing their role as an elderly. Each informant showed why it is so relevant the elderly play the role as advisors. The elders serve as advisors in terms of family disputes, marriages, problems solving, financial problems and etc. People tend to believe in the words of the elderly because they believe age comes with experiences and experiences come with wisdom. Despite being advisors, another informant expressed the role of the elderly as opinion leaders as in most of their opinion are well taken.

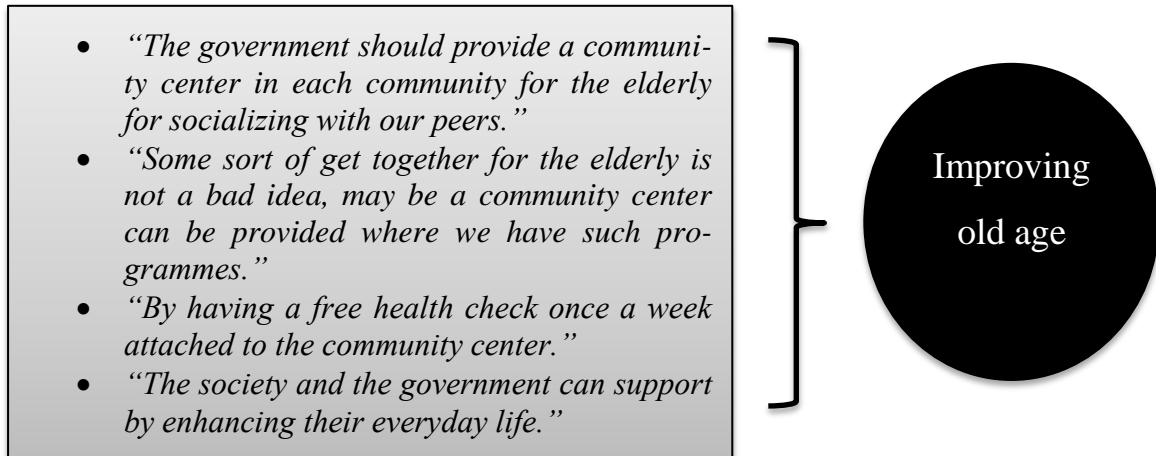


Figure 5. Interview quotations for categorised group improving old age.

Again, informants expressed the need to “improving old age” in Ghana. They insisted it would be very appropriate to have a community centre in each community that will help in meeting new people, play together, and have a talk with their peers and so on. Since, it’s not all that have the access to people who is old and understands what you’re going through. Another informant insisted on the healthcare centre being attached to the community centre, where a free health check-up can be provided once a week for the elderly. Not to forget, the need for societal and government empowerment to assist in caring for the elderly in the absence of family care was also stressed upon.

6.2 Sense of belonging and safety

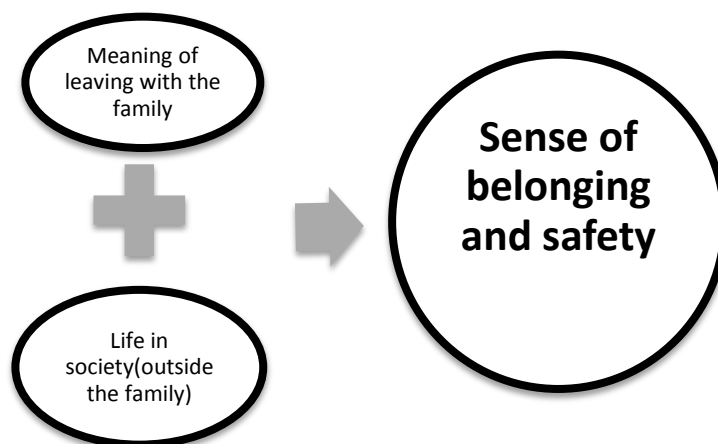


Figure 6. A categorized overview of how the elderly felt some sense of belonging and safety in Ghana.

The figure 6 above illustrates the categorised overview of how they felt some sort of sense belonging and safety among the elderly in Ghana. The categorisations were substituted based on the interview question 2 themed senses of belonging and safety which were divided into two categories. The two categories namely, meaning of living with the family plus life in society (outside the family) would help answering the theme (sense of belonging and safety).

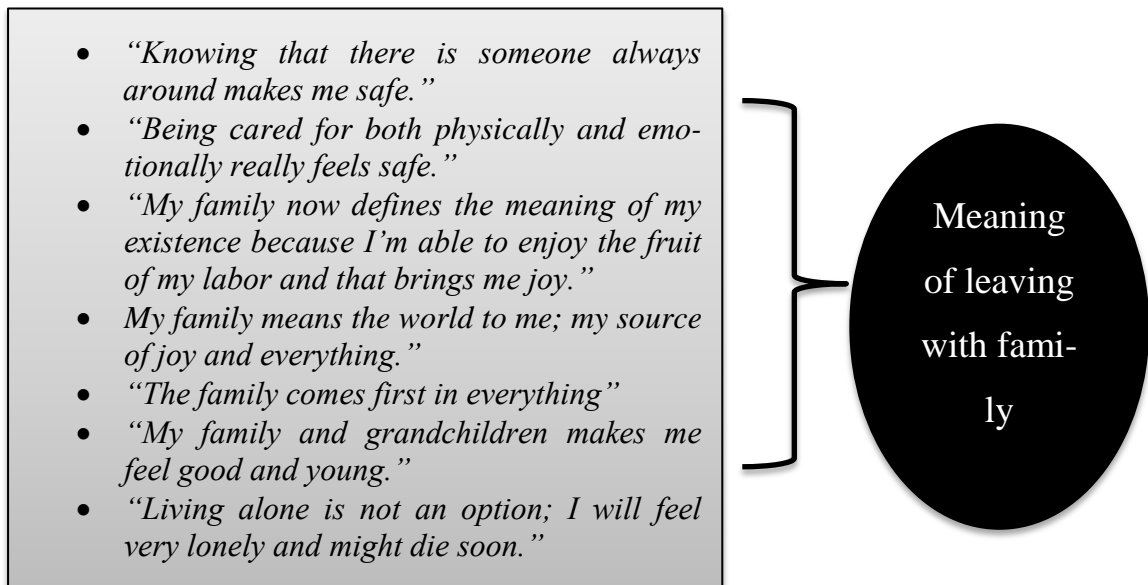


Figure 7. Interview quotations for categorised group meaning of living with family.

Firstly, when the informants were asked about how they felt about the “meaning of living with family” or what does the meaning of living with family means to them, they expressed the words safety and company. The family provides safety and company in a sense that the elderly are being monitored all the time and knowing that there’s someone always around makes them feel safe and not left alone.

Also, the informant expressed the word joy. Each informant gave relevant statement about how they feel about it. They felt the family means their source of joy, existence of their living, and so on. The mere fact of having them around and especially spending time with the grand children brings them joy and happiness all the time.

Apart from joy, another word mentioned was the most important thing in life now to them is the family. They gave relevant explanations as to what is the most important in their lives now. The family becomes the most important in their everyday life's because it is the immediate source of connection and feeling belong.

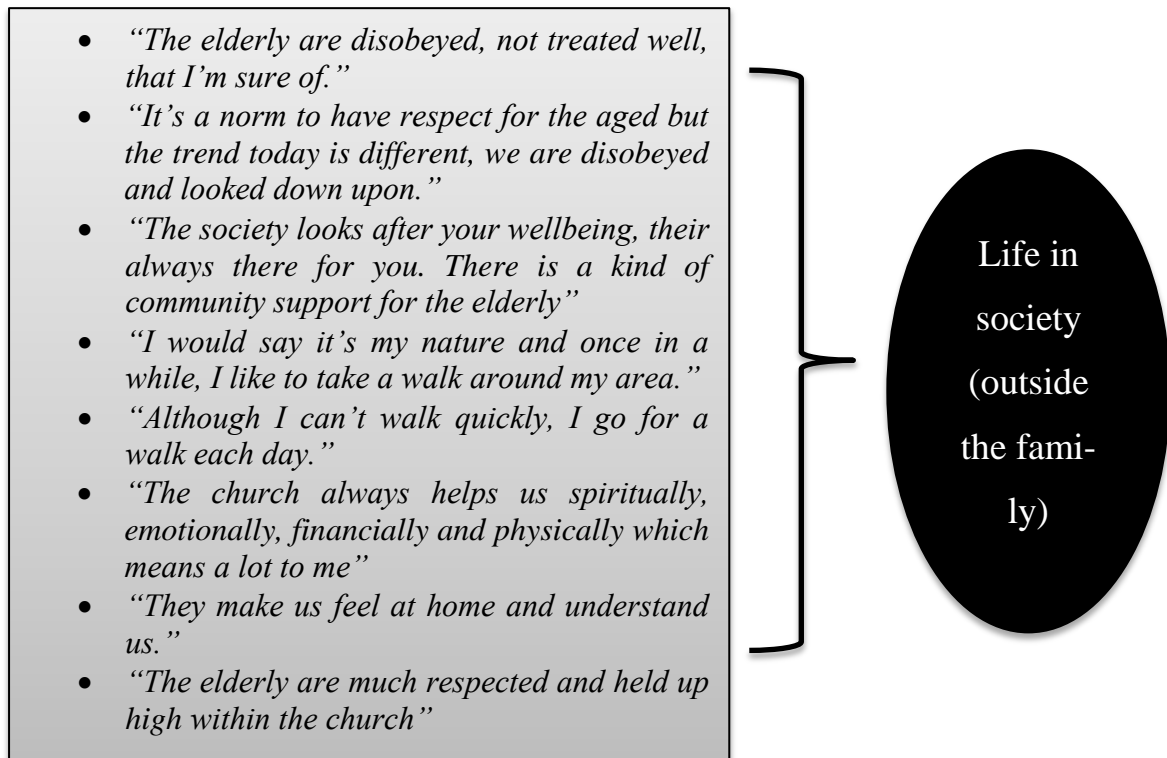


Figure 8. Interview quotations for categorised group life in society.

Secondly, the informants expressed “life in society” as being able to meet and make friends within the society and church. Though, only one of the informants suggested that the society really give assistance, respect and whenever his outside the house, he feels much appreciated within the society. But however, the rest of the informants agreed of being disobeyed and not supported in the society. They feel the elderly nowadays are not respected and not treated well with the society. People only tend to respect them when they an advice or something.

Also, the informants expressed the word sporting as in walking as one of the most things they try and do outside the home. The need to keep healthy lifestyle is important. Two of the informant expressed the need to be very cautious of what one eats and even though they’re not able to walk fast, they prefer to walk slowly. Also, two of the in-

formants use the opportunity of walking their grand kids to school as a means of exercising. While the other, only walks whenever time permits but spend more time at the fitness club.

Furthermore, all informants agreed that, they feel some sense of belonging within the church and because their believers, they experience a spiritual connection with God. The sermon encourages and motivates them whenever their spirit is down. They even expressed the church as their second home and that is the place they meet and most of their friends are located. The church respect and appreciate the elderly viewpoints and advice. Programmes are being organised for the elderly at church which makes up feel that they belong. The church understands our needs, helps us a lot in everything.

7 DISCUSSION

During the study of this research, the author was able to recognize the importance of some factors involved in the care for elderly in Ghana and also bring to understanding the concept of old age how things could be put in place better to enhance their everyday lives. However the discussion will be further divided in accordance to the main research questions where results will be justified by theoretical evaluations that will be in line with this particular study.

1. How is old age understood in Ghana?

With reference to the results, old age in the region of Ghana is understood depending on the individual involved. It however differs from person to person. While some will describe old age and associate it to chronological age psychological changes, more people will describe it with respect to physical appearances as one age. This makes it impossible to get a definite answer for old age. The description and understanding of old age also differs among the age groups. While the age group between 20-30years will consider the age group from 40-50 as old, the age groups between 40-50years consider that of 60-70years as old age. Old age could also be linked to the role of the elderly. The elderly is considered to play an advisory role such as settling disputes and other happenings such as marriage.

According to Ageing in Africa (2000), In Ghana, older people are not excluded from the development of useful and collective participation. In a typical Ghanaian household, everybody has a role to play whether young or old. The elder plays the role of societal upbringing of the young and thereby becomes the educator and the guiding spirit behind many initiatives of the young, psychologically a very important role. The elder is also being entrusted with family lands, property and family wealth, consulted in administrative matters and important decisions. The role of being referred to as "ancestral spirit" gives them the recognition to officiate in ceremonies such as marriages, births, deaths and adjustors and to ensure that peace and harmony prevails within the greater family.

Also, Atchley & Barusch (2004) argued that, ageing is a broad concept that includes physical changes in our bodies over adult life, psychological changes in human minds and mental capacities, social psychological changes in what humans think and believe, and social changes in how humans are viewed, what we can expect, and what is expected of us.

2. What factors enhance the sense of belonging among elderly in Ghana?

According to the study, the results got indicated that the Family, church and the society were factors that really enhanced the sense of belonging among the elderly respectively. However, much reliance is on the family for the care of the elderly than the church and then followed by the society in that sequence according to order of importance. The family have supports for each other mutually and is also seen as a strong bond such that it stands out as the primary source for identity. While some seniors saw it as their source of joy and the only thing that kept them going as they age, others saw it as a great help to their existence.

The church on the other hand also goes a long way to enhance sense of belonging such that it makes the elderly feel belong to a group. The seniors are able to socialize and make new friends as well as share ideas and also exercise their body through activities of singing and dancing. Even though, the society plays its part, much reliance was not emphasized on it. The society has lost its touch of traditions; value and respect for the elderly. People only seek their advice only when needed and thus when respect is shown.

Marsh *et al.* (2007) argued that our sense of identity is founded on social interactions that show our belonging to particular communities through shared beliefs, values or practices. The choices that we make from our religious views, to the friends that we acquire, to the cars that we drive, even to the insurance that we buy serve to position us as part of the groups, networks and communities that make up human society. In modern society, it makes sense to think of humans as individuals. After all, we have individual bodies, individual minds, individual goals and ambitions. But in very important ways,

being human is not about being an individual at all; it is about belonging to a particular group of individuals.

Also, Krause & Hayward (2013), argued that people who find themselves within the confines of the church and have a strong sense of belonging picture their health in a more unique way. They see their strong sense of belongingness affecting their health in a more positive way. It is also evident that people within the church that are involved in activities and given the necessary social support tend to have a strong sense of belonging.

However, who takes care of those who are childlessness? And how the elderly can feel more belonged in the society? Childlessness with the elderly is an uprising phenomenon in Ghana now. Traditionally, it is a common norm to be cared only by ones family which isn't helping much. The concept of adapting the society and the government to support in caring for the elderly isn't a bad idea. The government can support by providing an old people homes and the society has to change their mind set and attitude towards the elderly.

3. What kind of factors improves safety among elderly in Ghana?

It can be deduced that sense of belonging and safety move together such that we have the same factors enhancing sense of belonging as the same factors improving the safety of the elderly. The family in this respect improves the safety of its seniors by first making sure they feel belong and this will in turn make them feel safe. The family makes sure its seniors feel safe by ensuring they have everything they need and also giving them the hope of consistent love. Without this consistent love the seniors feels unsafe and this weigh them down emotionally.

The church also goes a long way to improve the safety of the elderly such that they visit the elderly in their homes. They still check on them and assure them of their significance to the church and this makes them feel safe such that they have it at their mind that the church they are not left out. The society also does its own part of the bargain to improve the safety among the elderly such that its members show the elderly too much

love and respect. They extend this love and respect thereby checking up on them to greet them and see how they are doing. This nice gesture however goes a long way to make the elderly feel happy and safe.

Also, Preisler (2013) mentioned that all humans feel happy and unhappy at different point in times and this may make people feel angry, silly, and excited all in just a day. Safety is one emotion we might feel without realizing it. To be safe means being free from harm or hurt. So, the understanding of feeling safe is that you cannot predict either harm or hurt, emotionally or physically. In every circumstance there are things that ensure our safety. As one is ageing, we tend to find that safety feeling in our everyday lives such as the telephone friendly voice, a comfy pillow, a special meal, friends, clubs, a special location, spiritual beliefs, or books. People also tend to find that feeling of safety through some unhealthy ways like an over eating, alcohol and drugs.

People need to feel like they belong and accepted to a place. Wherever they find themselves, they are important and people care about us. They are not meant to be alone and meant to be totally self-sufficient. Abraham Maslow created the theory of hierarchy of basic human needs which acknowledges all of us have to achieve in order to flourish and grow. It begins with getting our most basic physiological needs met, such as thirst, hunger, and shelter. After, there comes the need of safety and security. Following that, is the need to feel belong and loved, to be affiliated with others and to be accepted. (Elkin 2007)

Moreover, when one has good support system in their lives, one feels they have a place they belong and feels safe telling your troubles and woes. It's a place where you can get help working through a problem. It's a place where your joys and successes get celebrated. One already knows the people in the network will really support and show caring about what one have to say. One feels safe to be honest and exposed with them and one knows he or she will honored when sharing yourself. (Elkin 2007)

Although the authors investigations and the theory both explains the need to feel safe, the theory made emphasis on the fact that feeling safe helps alleys depression. This

gives a suggestion for further research into how ones feeling of safety reduce depression.

References

Ageing in Africa 2000, Medicine Meets Millennium, World Congress on Health and Medicine. Accessed 7.2.2014. Published 2000.

http://www99.mhhannover.de/aktuelles/projekte/mmm/germanversion/d_fs_programme/speech/Apt_V.html

Apt, N. A. 1996. *Coping with Old Age in a Changing Africa*. Gateshead: Atheneum Press Ltd.

Atchley, C. R. & Barusch, S.A. 2004. *Social Forces & Aging. An Introduction to Social Gerontology*. Tenth edition. Thomson Wadsworth.

Caluag, M. Poverty in Ghana 2013, The Borgen Project. Accessed 19.1.2014. Published 2013.

<http://borgenproject.org/poverty-in-ghana/>

Collins, B. The Dilemma of Ageing in Ghana 2005, Lifestyle, Modern Ghana. Accessed 19.1.2014. Published 2005.

<http://www.modernghana.com/news2/91059/1/the-dilemma-of-ageing-in-ghana.html>

Elkin, D. The Need to Belong, LPC. Accessed 11.5.2014. Published 2007

http://www.google.fi/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=12&ved=0CHQQFjAL&url=http%3A%2F%2Fwww.debelkin.com%2FNEED_BELONG.pdf&ei=Q9BvU6nTI-mcyQOY2IDIBQ&usg=AFQjCNEaZ4oGi-VAWarD10VfagTgwqSPsQ

Graneheim, H. U. & Lundman. B. 2004. Qualitative content analysis in nursing research: concepts. Procedures and measures to achieve trustworthiness. *Nurse Education Today*.

Gyekye, K. 2003. *African Cultural Values, an Introduction*. Accra: Sankofa. Publishing Company.

Hennink, M. Hutter, I. & Bailey, A. 2011. *Qualitative Research Methods*. SAGE Publications Ltd. London.

Kaplan, B. D. & Berkman, J. B. *Religion and Spirituality in the Elderly*, The Merck Manuals. Accessed 17.2.2014. Published 2013.
http://www.merckmanuals.com/professional/geriatrics/social_issues_in_the_elderly/religion_and_spirituality_in_the_elderly.html

Karlberg, T. *Elderly People in Ghana 2003, About Roles and Life Situations from their own Perspective*. Örebro Theological Seminary. Accessed 23.10.2013. Published 2003.
http://www.orebromissionsskola.se/bilder/nya_uppsatser/FSP%200708%20Therese%20Karlberg%20Elderly%20People%20in%20Ghana.pdf.

Krause, N. & Hayward, R. 2013, Church-based social support and a sense of belonging in a congregation among older Mexican-Americans. *Belonging*, in: *Journal of Review of Religious Research*, Vol. 55, No 2, pp. 251-273. ISSN 0034-673X.

Lewis, C, J. *Culture in Ghana, Africa 2014*, Travel Tips, USA Today. Accessed 22.1.2014. Published 2014.
<http://traveltips.usatoday.com/culture-ghana-africa-13608.html>

Lidzén, L . *A Comparative Study of the Social Welfare Provided by Three Christian Churches in Accra 2008*, Institutionen för humaniora och samhällsvetenskap, University College of Gävle. Accessed 17.2.2014. Published 2008.
<http://www.diva-portal.org/smash/get/diva2:120028/FULLTEXT01.pdf>

Marsh, P. Bradley, S. Carol, L. Alexander, P. & Norham, R. 2007. *Belonging*, SIRC. Accessed 10.5.2014. Published 2007.
<http://www.docstoc.com/docs/34348362/Belonging>

Mba, J, C. *Population Ageing in Ghana: Research Gaps and the way forward 2010*, *Journal of Ageing Research*, Hindawi Publishing Corporation. Accessed 28.11.2013. Published 2010.

<http://www.hindawi.com/journals/jar/2010/672157/>

Nukunya, G.K. 2003. *Tradition and Change in Ghana. An introduction to Sociology*. Second edition. Accra: Ghana University Press.

Older people in Africa: a forgotten generation 2008, HelpAge International. Accessed 22.1.2014. Published 2008.

<http://eng.zivot90.cz/uploads/document/205.pdf>.

Preisler, J. Being Safe vs. Feeling Safe, Fostering Perspectives. Accessed 11.5.2014. Published 2013.

<http://www.fosteringperspectives.org/fpv17n2/psychological-safety.html>

Religion in Ghana, African Development Protrayed in Film, Vanderbilt University. Accessed 12.2.2014. Published 2013.

<https://my.vanderbilt.edu/f13afdevfilm/2013/09/religion-in-ghana/>

Ripples Health Care 2005, The Ripples Story. Accessed 6.5.2014. Published 2005.

<http://www.rippleshealthcare.org/>

Rural poverty in Ghana 2012, Rural Poverty Portal. Accessed 19.1.2014. Published 2012.

<http://www.ruralpovertyportal.org/country/home/tags/ghana>

The Country Ghana, Background Information, Ghanaweb. Accessed 22.12.2013. Published 1994-2014.

http://www.ghanaweb.com/GhanaHomePage/country_information/

Appendices

Appendix 1/1(1)

General information

Age

Gender

Living conditions

Retirement age

Old age

1. What kind of changes occurs when a person is old?
2. What is the role of the elderly in your family?
3. How does the everyday life change when you are old?
4. How would you like the elderly care in Ghana to be developed?

Sense of belonging and safety

1. What does your family mean to you?
2. What do you do to live a healthy life?
3. What is important in your everyday life?
4. What is improving your safety in everyday life?
5. How does the society support the elderly?
6. How important is the church to you?

Information about Thesis Project

I am George Selorm Dosu, a Bachelor of Social Services student at Arcada University of Applied Sciences in Helsinki, Finland. I'm doing my final thesis on the topic: Elderly care in Ghana, my supervisor is Senior Lecturer Birgitta Dahl. The main aim of my thesis is to map out how elderly people in Ghana are being cared for in their everyday lives. Furthermore, the study will bring to understanding what aging means to the inhabitants of Ghana.

In this letter, I kindly ask for your participation. I would like to interview some older clients about the topic of my thesis. I have required the permission to conduct the interviews from Arcada University of Applied Sciences. The language of instruction at Arcada is English. It is especially important for me to hear your opinion on this topic. Participation on interviews is always voluntary. The identity of the participants will be kept confidential. The answers will be dealt with such a way that, they will not be kept connected with any particular person. Participants may elect to withdraw at any time and all data connected will be destroyed. The interview will be done as a conversation, based on a questionnaire, with the participants' possible permission to record on a tape. The duration of the interview is approximately one hour. Arrangements with time and place for the interviews will be agreed upon with the participants. Thank you for your interest and cooperation.

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Final Thesis: Elderly Care in Ghana

Informed Consent for Interview participation

I am willing to participate in the interview conducted by George Selorm Dosu on the topic of Elderly care in Ghana. I am of my rights as an informat.

Name in block letters

Date

Signature

The following coding procedure has been divided into two themes according to the re-search questions respectively.

THEMES	CATEGORIES
Old age	<p>Family: cared by family</p> <p><i>The elderly are being cared for by the family. Even though they're not leaving in their own homes, they live comfortably in their children's home and feel at home.</i></p>
	<p>Changes in old age</p> <p><i>A physical change occurs in the growing old stages with evidence of growing grey hair, having wrinkles, and so on.</i></p> <p><i>Psychological changes with evidence of being absent minded forgetfulness and so on.</i></p> <p><i>Biological changes with evidence of presence of disease condition, etc.</i></p>
	<p>Role status: Advisors</p> <p><i>The elderly play an advisory role such that they help in solving family disputes, interceding in marriage arrangement, advising in any area and so on.</i></p>
	<p>Improving old age</p> <p><i>By providing community centres in each community for the elderly.</i></p> <p><i>Societal and government empowerment in order to assist in caring for the elderly in the absence of family care.</i></p>
Sense of belong and safety	<p>Meaning of living with the family:</p> <p><i>Safety</i></p> <p><i>The family provides safety because the elderly are being monitored all the time and knowing that there is someone always around.</i></p> <p><i>Company</i></p> <p><i>The family around all the time provides company for elderly and not felt alone.</i></p> <p><i>Joy</i></p>

The mere fact of having the family around brings me joy especially when spending time with the grandchildren.

The family

The family becomes the most important in their everyday life's because it is the immediate source of connection and feeling belong.

Life in society (Outside the family)

Friends and disobeyed

Eventhough they meet and make friends within the society however, their disobeyed and looked down upon for the sake of being aged.

Sports

They prefer to go for a walk once in a while as a means of exercising.

Church

The church is a place they feel more belonged, accepted and seen as thier second home.

Spirituality

The feel some sort of closeness to God and makes thier faith in God even stronger.