

Urbanization and Aging: The Survival of the Aged in an Urbanizing City, Maseru, Lesotho

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Abstract

The paper analyzes the elderly survival strategies in an increasingly urbanizing city of Maseru in the period 2009-2012 using the household survey conducted on poor elderly in the three urban communities of Thibella, Sekamaneng and Motimposo. It seeks to understand the impact of rapid urban growth of Maseru on the elderly and the possible range of responses to this change and poverty. The analysis shows that the elderly people living in poverty have devised means of survival while a few increasingly depend on social welfare grant provided by the government to cope with poverty. Despite this good effort, more than 50 percent of the population still lives in poverty. The burden of caring for orphans particularly in female elderly headed households exposes them to more poverty. Lifting the elderly group out of poverty will require a continued growth based policy and further expansion of social services. This paper serves as a basis for policy review so that the needs of the elderly are fully addressed. Furthermore, the paper seeks to fill the existing gap in the literature on the elderly survival in Lesotho as no studies have yet been done. The paper is composed of four sections. First, it introduces urban growth and features of poverty in the context of the developing world including Lesotho. Second, it deals with the general perspectives on urbanization and its impact on the elderly in Africa. Third, it discusses the observed repercussions of urbanization on the elderly living in Maseru and their coping strategies. The fourth section presents the conclusion and suggested ways of improving the lives of the elderly living in Maseru. The paper considers the elderly as people who are aged 60 and above.

Keywords: urbanization, aging, elderly, survival strategies, poverty

INTRODUCTION

This paper examines the impact of urbanization on the elderly and their survival strategies in an increasingly urbanizing city of Maseru in the period 2009-2012. In the six decades since the mid 20th century, the world has experienced phenomenal urban growth, especially in the developing world. This growth has been closely associated with increasing levels of poverty and deprivation characterized by lack of access to safe water supplies, proper sanitation and access to assets. Other features include slums, informal settlements, low employment and increasing dependence of the vulnerable groups on public assistance. In Africa, there has been subjection of cities to a profound disjuncture between demographic, economic and political structures. The urban population in the region has been doubling every seven years. This demographic shift is taking place within a context of low rates of economic growth and political engagement between the state and civil society. Lesotho, while sharing these experiences, is also one of the poorest countries in the world, ranking 149 out of 179 according to the UN Human Development Index. This has largely determined the nature of urbanization, with deepening economic problems in most of the country, rural and urban, resulting in poverty. Nevertheless, there has been a profound shift in location of that poverty. Whereas before it was overwhelmingly a

rural phenomenon, now poverty is urbanized. In addition, due to the nature of urban development in the country, poverty is primarily concentrated in Maseru – the primary city of this small, land-locked country. This paper specifically focus on the elderly group living in Maseru, examining first, the impact of urbanization on the elderly, second, their survival within the rapid growth of Maseru and last, suggestive improvement measures are discussed regarding the elderly living in the city.

METHODOLOGY

The survey was conducted in three areas of Motimposo, Sekamaneng and Thibella in Maseru. The study was based on a selected number of poor households where the elderly were the units of analysis within such households. About 120 households were selected for this study. However, the sample selected is not representative of all the elderly living in Lesotho, but seeks to recognize and understand the impact of rapid urban growth of Maseru on the elderly and the possible range of responses to this change and poverty. Focusing on the elderly population in the areas chosen as the unit of analysis was based on the following criteria: first, the elderly are people who are often unemployed and are without income to fulfill their basic needs. Second, with the increasing HIV/AIDS pandemic in the country, they are the caregivers of orphans left

behind by their sons and daughters. Third, focusing on the areas of Motimposo, Thibella and Sekamaneng was to allow an in-depth exploration and explanation of the different comparative trends in the poverty profiles found in these urban areas which are experiencing rapid urbanization.

LIMITATION OF THE STUDY

The sample population of 120 was not representative when considering the population density of Lesotho of 2.2 million and Maseru in particular of 20 percent (197, 907 from 2006 Population Census). However, based on known, identified and observed indicated characteristics of the elderly, their poverty in the urban areas and how they engage in survival strategies to avert poverty, the sample can allow generalizations. The fact that Maseru, the capital, has only a few middle-income areas the picture depicted by this sample is a reasonably accurate reflection of many poor elderly households in poor communities of Maseru today, and indeed the country on general.

Growth and Challenges of Aging

The issue of old age became a concern worldwide since 1990 when the 1st October was designated by the United Nations as the international day for older persons. This day is still celebrated by countries. The main areas of concern include poverty among this group of people, their participation, care and dignity. Older persons mainly in developing countries live in precarious conditions of abject poverty. The Second World Assembly of Ageing, held in Madrid, Spain in 2002, marked a turning point in international policy debate and action on ageing. For the first time in history, ageing was acknowledged not simply as an issue of social security and welfare, but of overall development and economic policy.

Responding to growing concern over the speed and scale of global ageing, the General Assembly of the United Nations adopted by consensus the *Madrid International Plan of Action on Ageing* to guide Governments, the United Nations and civil society to face the challenges and fulfill the enormous demands of ageing population. Critical to its success was the promotion of a positive approach to ageing. It stressed the opportunity for older persons to contribute to development, with older persons embraced as a resource, rather than in need of care and support. Its overall objective was to create a 'society for all' in which 'persons everywhere are able to age with security and dignity and to continue to participate in their societies as citizens with full rights' (<http://www.unfpa.org/pds/aging.html>).

Ten years on, *Ageing in the Twenty-First Century: A Celebration and Challenge 2012* asks: what has changed? The culmination of a three-year collaboration between the United Nations Population Fund (UNFPA) and HelpAge International, this landmark report offers, for the first time, an insight

into the changing situation of older persons across the world. With contributions from over 20 United Nations entities including the United Nations Regional Commissions, international non-governmental organizations and 1,300 older people from 36 countries, this report uses fresh and in-depth evidence to provide detailed policy guidance that builds on the recommendations of the *Madrid Plan*. With the voices of older people around the world at its heart, it supports the shift to more age-inclusive development and makes an urgent case for an increase in the prominence of ageing in policy-making. This is also the message this study intends to put across to the policy-making authorities in Lesotho.

Population ageing is a demographic revolution affecting the entire world. Population ageing is happening in all regions and in countries at various levels of development. It is progressing fastest in developing countries, including in countries with large populations of young people. Seven of the 15 countries with more than 10 million older people are in the developing world. By 2050, another 15 countries currently classified as 'developing' are expected to have 10 million or more older people (Figure 1). This generation is growing at a faster rate than the total population in almost all regions of the world. People are living longer because of better nutrition, sanitation, medical advances, health care, education and economic well-being. Although ageing is a triumph of development, population ageing poses social and economic challenges to individuals, families and societies. With the right policies in place, societies can prepare for an ageing world, address the challenges and take advantage of the opportunities. Older persons need not be a burden with the untapped growth of the 21st century (<http://www.unfpa.org/pds/aging.html>).

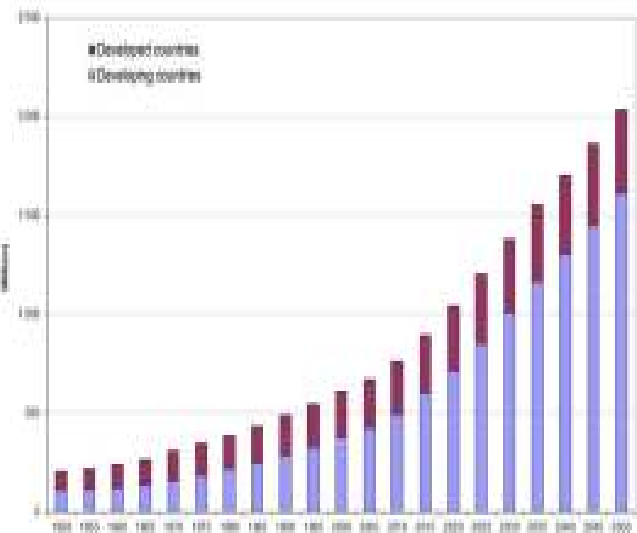


Figure 1: Growth of the World Aging Population, 1950-2050 (UNFPA database 2013).

URBANIZATION AND AGEING IN AFRICA

It is generally accepted that all countries of the world are passing through two fundamental demographic changes, namely, the urbanization of most cities and towns and the rapid ageing of the population. Studies show that the effects of urbanization on the elderly have not been reflected in the past mainly because urbanization and ageing population have received separate attention in research. They have been severally addressed at the national level as two separate problems but not as a combined area for investigation. The lack of research in these two related areas: urbanization and ageing, has been acknowledged by the Department of Economic and Social Affairs of the United Nations Secretariat (United Nations, 1991).

In sub-Saharan African countries aging was not a serious problem in the past. However, with the increasing urbanization, it requires serious policy decisions. Between 1970 and 1982, African urban populations, on average, grew by almost 6 per cent a year, more than twice the overall rate of population growth (Goliber, 1985). In 1960, about 11 per cent of the African population lived in urban areas; 22 years later, in 1982, that population had nearly doubled, to about 21 per cent. In 1960, only seven cities in the African region had more than half a million residents; by 1980, the number was 35, of which nine were in Nigeria alone. Along with the rapid growth of towns and cities, the development of single, dominant metropolitan areas is another characteristic feature of the region's urbanization. Thus, as far back as 1980, in Western Africa, 50 per cent of Togo's urban population was concentrated in the capital, Lomé. In Eastern Africa, 57 per cent of Kenya's urban population could be found in Nairobi, and in Southern Africa, 50 per cent of Zimbabwe's urban population was in Harare the capital (Apt, 2000). Maseru's population grew at an annual rate of 6.9 percent from 1976 (Ambrose, 1993 and Sechaba Consultants, 1994). Seven years later the town's population reached 200 000 (Ambrose, 1993 and Sechaba Consultants, 1994), a growth of about 64.5 percent, meaning that the city's population was growing faster from the late 1980s. In 1996 the population had grown to 393 154 and in 2006 had reached 436 399, a growth of 11 percent (Bureau of Statistics Population Report, 2006). It is against this background of rapid change of population growth that the elderly generation's existence and survival in the urban areas is threatened.

The world's ageing population presents a major policy issue in the developing world (United Nations, 1991). In Asia, the crisis is an immediate one; China stands out as the most rapidly ageing society and its population structure will be closer to that of the developed regions by 2025 (United Nations, 1999a, 1999b). In Africa, ageing is a crisis that is just

beginning to reveal its shape; at present, it is a family crisis (Apt, 1995; Apt and Greico, 1994). In demographic terms, the proportion of Africa's population aged 65 and over stands at 3.1 per cent (United Nations, 1999a, 1999b). Although sub-Saharan Africa's older population is not as large in size as in other regions of the world, it must still be considered as a potential cause for concern since Africa is ageing at a time when its resources are being depleted (Apt, 1995).

Besides the demographic factors, the family is disintegrating bringing new social problems which social welfare benefits available are not adequate to meet (Apt, 1995 and Mots'oene, 2013). Many sub-Saharan African countries have other problems such as excessive rural-urban migration paired with high levels of HIV/AIDS infection. The paper further examines consequential impact of rapid urbanization in Maseru on the elderly, the burden of HIV/AIDS orphans; and how they cope forms the apex.

FINDINGS AND DISCUSSIONS

The study concentrated on households with the elderly in the areas of Thibella, Sekamaneng and Motimposo in Maseru. The discussion focuses on the elderly aged 60+ living in Maseru, how urbanization impacted their households and how they cope with everyday life in the city. Secondly, those households with the elderly caring for orphans are examined focusing more on the extra load they have and how they survive within the growing Maseru. Finally, the paper analyses other coping strategies existing within the economy of Lesotho, particularly the social grant given to the elderly, whether they are able to survive with this state grant.

Urbanization and the Elderly Households in Maseru

With increasing urbanization in Maseru, household restructuring is a continuous process exposing poor elderly households to more vulnerability. Different households restructure differently resulting in new forms of households with different composition. The study evidence indicated that some households restructured when households' members separated and this led to the formation of new urban nuclear households living far apart from previous extended households (Field Survey, 2009).

Tapole had previously been living in Sekamaneng in a traditional extended household where he lived with his wife, his children and the grandparents. The household first experienced restructuring when the grandparents died. It became a nuclear household. Later it restructured again when his son felt no need to be living with them after getting married. That means the initial household composition of five members, went down to three and eventually to two. Because Tapole lost his employment in the mines, he

became more vulnerable when his son who is economically active with employment, separated to form his own household. This has affected the resource base of Tapole's household on which it could draw during times of economic crisis, thus increasing its vulnerability. This example serve to illustrate that nuclear households have restructured due to urbanization leading to modified composition of such households turning them into new forms of elderly households, which are more vulnerable.

Besides the historical, socio-economic and political developments in the country, particularly urbanization, internal factors also had a significant impact in reshaping these households. According to evidence from the three communities in Maseru, many households restructured due to death of spouses. Widows who were mostly 60 years old and above were heads in about 20 percent of the sample households in Sekamaneng, 35 percent in Motimposo and 42.5 percent in Thibella, with limited resources for survival (Field Survey, 2009). This incidence coincides with regions of the developing world particularly Africa, Latin America, Asia and Oceania where widows are more numerous than widowers (United Nations, 1999b). The household resources diminish because a member who may have been contributing significantly to the household income and resources would not be doing so anymore, resulting in declining welfare of such a household and exposing it to increased vulnerability (Moser, 1996 and Sharma, 1986).

Widowhood had a profound impact on household vulnerability in Maseru. It is common mostly in the patriarchal societies such as Maseru that women upon the death of their husbands assume the household headship. Evidence from Thibella, Motimposo and Sekamaneng indicated that these households were under-resourced and daily needs not all met. These widows claimed that they were worse off with the death of their husbands who were the breadwinners in the households (Field Survey, 2009).

Dependency burden from HIV/AIDS

One major problem that has led to vulnerability of elderly households was HIV/AIDS pandemic that has afflicted the country. Another feature of poor households was high dependency, created mainly by caring for orphans. This was due to death of some members of the household. Out of the total sample of 40 households in Sekamaneng, 20 percent were widow-headed and 10 percent of them included orphans. Out of 40 households in Motimposo, 35 percent of households were widow-headed and 10 percent of them were caring for orphans. Thibella remains an exception with no orphans in any household visited (Field Survey, 2009). This is because households visited were mostly tenants who had come to find means of survival in the city and

were not taking care of any orphan children of relatives. This points to change in the household structure of widows. Caring for orphans had profound impact on already poor households in these areas as the burden worsened their poverty status. A number of widows were aged 60 years and above and depended on the old age pension from the government, yet they had the extra burden of raising orphans left behind by their sons and daughters infected and killed by HIV/AIDS. 'Mamatong, a widow who was 85 years old, renting in Motimposo for the last 30 years, further explained her situation indicating the severity of poverty in elderly widow-headed households with orphans:

I stay with 1 grandchild and 2 grand- grandchildren who are orphans, their mothers and fathers who were my children died, I have not attended school myself. I was married but my husband died long ago. I have been living here for more than 30 years renting. My life today is a struggle because I am old I do not work anymore, I depend entirely on the old-age pension to pay the rent and what is left, I buy maize meal, nothing more. We sometimes sleep without food, sometimes people of goodwill help us when we run short of food (Interview, 'Mamatong Matong, January 2009).

'Mamatong was already poor but the loss of her children who left orphans behind has worsened her situation. Keeping children in the city where the economy has an unpredictable cost of living- due to increasing food prices, inflation, and national and international competition - is burdensome. This is why 'Mamatong is unable to sustain her household and has to live on handouts. Another case was of Lira Lelaka's household in Sekamaneng that raised orphans and was unable to cope. Orphanage has further inflated the level of poverty in Maseru as well as in Lesotho as a whole, with other factors facing households such as agricultural decline, loss of income from the mines, poor health and increased deaths due to HIV/AIDS pandemic (Field Survey, 2009; UNAIDS, 2012 and UNICEF, 2009). The argument here is that household restructuring increased the urban poor elderly households' vulnerability and deepened poverty.

Dependence on Public Assistance

Public transfers where available act as a safety net for the poor (Sharma, 1986). However, in Lesotho, public welfare provision is very limited in terms of enabling households to survive. The old-age pension is the most prominent provision, but is focused on a small population of people who are 70 years of age and above which constitutes 3.9 per cent of the country's population (Table 1). Some proportion, about 0.2 percent of the population, gets other state

grants e.g. disability grant for those disabled and Child Cash Grant for orphans and vulnerable children. It must be noted here that the Child Cash Grant is just a pilot project funded mostly by the European Union covering only 3 constituencies out of 80 constituencies of the entire country (Ministry of Finance and Development Planning, 2009). This area does not constitute even a quarter of Lesotho. This implies only a few have safety nets, meaning that the majority are exposed to vulnerability. This affirms Sharma's (1986) attestation that there are few safety nets in developing countries and this has worsened poverty levels among the poor.

Because of inability to mobilize resources and absence of access to assets, lack of employment and income, lack of capabilities and lack of support networks, poor households particularly the elderly, depend on public welfare benefits from the government of Lesotho. Public welfare benefits lessen the severity of poverty among this group (Sharma, 1986). One feature of the poor urban households, particularly those headed by senior widowed female citizens, was their dependence on the state old age pension as a survival means (Field Survey, 2009). It means that without livelihood, only a few have safety nets as survival means while the majority of the needy population does not, meaning that they are trapped in a vicious cycle of poverty.

Table 1: Old Age Pension Recipients in Maseru

District	Total population per district	GOLFIS: Old age recipients	Percentage of total district population
Maseru	436,399	13,845	3.2
Lesotho	1,872,721	72,863	3.9

Source: Ministry of Finance and Development Planning (Government of Lesotho Financial Information System- GOLFIS, June 2009).

This, however, does not mean that, for those who get public welfare assistance, such assistance is adequate as a means of survival. They are also unable to survive on their own and have to rely mostly on their kin and neighbours. 'Mats'epo, a 74 years old widow, explained that:

The income we have is just from the old age pension of M450.00 (1 Loti is equivalent to 1 Rand) which I get every month. Beside, my sons give us money but not that much, at most they give M100.00. We solely rely on them for survival because as you see there are no animals or anything else to rely on. I am not working, I am old. If only I can raise my grandson that is enough (Interview, Mats'epo Makhema, January 2009).

The cost of living is high in Maseru where the required minimum spending for a household is M/R4800.00 per month (GOL Economic Review,

2009). The cost of food is M/R1, 500.00 per month, of transport is M/R600.00, and of rent is M/R2000.00. But poor elderly households with lack of capabilities, lack of formal employment for sustainable income and lack of any productive assets to generate income are unable to meet this minimum requirement, except to live on the meager state welfare grant where it is available to them. The social grant provided by the government in the form of old-age pension was not just a coping mechanism. Out of the total sample population, 30 percent of households in Motimposo, 5 percent in Thibella and 5 percent in Sekamaneng depended on old-age pension. The majority of these were female-headed households of widows and single mothers. Particularly in Motimposo community there was a larger number of old-age pensioners and a larger number of widows (35 percent of all households headed by widows). These households found it difficult to survive, as 'Matlakeli, a widow aged 80 from Motimposo, described:

I stay with two grandchildren whose parents have died. I did only STD 4 at school. I have lived here in Motimposo for a long time now. Today my life is so difficult. I have to support the two orphans from the old-age pension I get from the government. This money is not enough, food prices are high.

We sometimes go without food. There is no one to assist me, except people around here sometimes when they afford. These children also have to go out and find means of survival, they do not attend school

(Interview, 'Matlakeli Pali, January 2009).

'Mamatong aged 85 also from Motimposo had a similar experience:

I moved to Motimposo from Thaba-Bosiu because I came to seek for a job in those olden days. My life today has become a struggle because I am old, I do not work anymore, I depend entirely on the old-age pension to pay the rent and what is left, I buy maize meal and nothing more. We sometimes sleep without food or some people of goodwill help us at times if we run short of food. I now live on handouts from people (Interview, 'Mamatong Matong, January 2009).

Moreover, people are unable to cope with inflation of 4.7 percent per annum (African Economic Outlook, 2011) and they sometimes go without food or have to depend on the goodwill of the people around them. Sharma (1986) indicates that because the public welfare benefits provided by governments in the developing countries, like pensions, are so low, they are severely overburdened and if households do not have kinship support networks, poverty can easily escalate. Nonetheless, social security, like old age pension, only serves as a "protection against

economic and social distress” allowing beneficiaries to meet their basic needs and thus avoid destitution (Kaseke, 1993). But in developing countries, social transfers have rarely been adequate to meet the basic needs of the poor, mostly the aged (Sharma, 1986), as the cases above show. At the time of the study, the aged were getting R450.00 and yet they had to support others within their household including HIV/AIDS orphans.

Governments in both the developed and the developing world provide public welfare benefits on the premise that individuals’ exposure to a variety of contingencies permanently or temporarily impairs their capacity to earn income. The belief is that individuals exposed to such contingencies are unable to mobilize the resources required to contain the contingencies on their own (Kaseke, 1993). However, in the context of the developing countries, it makes little sense to regard social security as offering protection against contingencies, when the poor are struggling to meet their daily needs. The poor are not only worried about what happens tomorrow, they are more worried about what happens today as well. Sen (1987) has observed that all around the world, people’s living standards are constantly under attack from uncertainty and changes in their environment. The common impact of these threats ranges from loss of resources to consequent reduction in living standard. As such, social transfers need to be a means to restore the standard of living to at least an acceptable level. However, from the cases cited above it can be seen that destitution had set in even with the existence of the social grant. But it could be argued that if these poor households were not given government assistance, their poverty would have been even worse than it is today. In this case, the social grant acted as a mitigating agent. What these cases however confirm is that social welfare benefits in Lesotho provide inadequate means of survival for poor urban elderly households without any form of capability (education or skills), with widows as heads, with high dependency of members, with lack of sustainable income making them more vulnerable to poverty.

CONCLUSION AND RECOMMENDATIONS

Urbanization and aging around the world are two inseparable phenomena. The elderly generation is growing at a faster rate than the total population in almost all regions of the world because people have better nutrition, sanitation, medical advances, health care, education and economic well-being (<http://www.unfpa.org/pds/aging.html>). These factors to the well-being of the aged are rarely existent in Lesotho. The aging population is increasingly becoming vulnerable due to a number of reasons. There is household restructuring which exposes poor elderly population to more vulnerability. They are left to live on their own without any support from

household members. With the lack of capabilities (including skills and education) and their age, they become severely impaired to generate survival strategies to sustain them. In the prevailing economic conditions where they are also part of the existing market operations, they are not exempted from economic setbacks such as inflation which erodes their purchasing power with any given income. The little income from social welfare grant only serve to mitigate the severity of poverty but in really terms, the elderly live in extreme poverty in Maseru. The situation is worsened by the dependency burden on these households from in particular, the HIV/AIDS pandemic that has afflicted the country. Lack of income has impacted on the elderly from accessing social basic services, thus they live in precarious conditions exposing them to more vulnerability. The ageing population increasingly poses social and economic challenges to individuals, families and societies, demanding right policies in place (Apt, 2000).

Encourage Self-Initiated Projects

Encouraging self-initiated projects gives the elderly a sense of ownership and encourages them to participate with enthusiasm in such initiatives to change their life situation to better. Though these projects may need little income from the state as capital, it may be a liability on the part of state in the short-run, but in the long-run it is an investment in changing the lives of the elderly. This would minimize their dependence on the government and passerby.

Provision of Relevant Training

Education and training in self- help development initiatives provides the elderly with skills in enhancing their well-being. They will be able to make some income and provide basic necessities for their households than to depend on assistance. Evidence from the study indicates that elderly women were worse off in terms of vulnerability. Providing knowledge and skills to this group will translate the well-being not only to household members but the society as a whole because often elderly women care for others. Apt (1995) supports this affirming that the well-being of older people, particularly women, is directly related to social and environmental circumstances and their ability to cope with those circumstances. Older women in general in sub-Saharan Africa face hardships that are directly linked to their economic condition. The main reasons for economic hardship are partly cultural and partly owing to the fact that existing pensions and social security schemes cover a small proportion of the female population. With inadequate and decreasing family support attributable to migration patterns in the region, the vulnerability of older women should become an important matter for technical assistance programmes in the future.

Provision of Inclusive Development for the Elderly
Improving the lives of the poor elderly population requires a substantive change in their living conditions. Many of these live in perilous conditions with lack of access to basic services infrastructure. Providing these social services does not only reduce vulnerability among this group but also provides a better image of the country in terms of clean environment and promotion of health standards.

Revision of Social Welfare Grant

Elderly people are currently faced with problems including inflation and dependency burden from orphans due to HIV/AIDS pandemic in the country. The old-age pension is so low and overburdened the same way Sharma (1986) attests is happening in developing countries. Social security, like old age pension, only saves beneficiaries from destitution (Kaseke, 1993). At the time of the study, the aged were getting R450.00 and yet they had to support others within their household including HIV/AIDS orphans. This means an adequate amount of old-age pension will effectively change their situation to better. This requires government to revisit the allocation of social welfare grant in relation to economic growth of the country to empower this group so that effective change in their living conditions can be achieved, thus, vulnerability will be reduced.

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