The role of Social Protection for the Elderly caring for HIV/AIDS Orphans in Malawi

by

Marumbo Prisca Ngwira

A thesis submitted to the Faculty of Commerce, Law and Management, University of the Witwatersrand, in fulfillment of the requirements for the degree of Doctor of Philosophy

Final Submission June, 2015.
SHORT ABSTRACT

The HIV and AIDS pandemic has increased the numbers of orphans globally. The severity of the problem is greater in developing countries, especially in Sub Saharan Africa. In Malawi, as in many other developing countries, grandparents have stepped in and have embraced the role left by the deceased parents, seeing the orphans through school, providing food, clothing and shelter for them, even where the grandparents themselves have no steady source of income. Despite the heavy burden placed on grandparents as a result of HIV and AIDS, limited attention has been given by governments, scholars and researchers to documenting in detail the challenges faced by the elderly who look after orphaned children.

This study examined the challenges faced by elderly people looking after children orphaned by HIV and AIDS in Malawi using the Sustainable Livelihoods Framework (SLF). This framework looks at household needs and holistically categorises them in terms of social, financial, physical, natural health, and government policies. Following a qualitative approach, this study used a phenomenology approach in documenting the challenges facing the elderly in Malawi, with a special focus on the Rumphi and Zomba districts. The livelihood approach is part of rural development theories that has moved away from the conventional approaches towards development to holistic understanding of the relationship between poverty and economic development.

The study also provided a case study on the role of social pensions in Lesotho. Social protection, which is part of social development, focuses on local community development with the emphasis not only on economic development, but also on improvement of health, education, environment and standard of living as critical contributors to sustainable development.
This is seen as a medium that discourages dependency and promotes the participation of people in their own development. The aim was to profile social protection benefits for the elderly in Lesotho as an example so that insights could be drawn from the experience. The study used structured and semi-structured interviews and focus group discussions as tools to elicit information from grandparents, orphans, community leaders, teachers, local leaders and policy makers.

The findings of the study indicate that the level of rural poverty in elderly headed households has increased due to the challenges resulting from the HIV and AIDS pandemic. The Sustainable Livelihoods Approach presented in this paper advocates that sustained development is only successful if it is based on evidence and understanding of household or community needs holistically and systematically.

This study has highlighted five key elements required to understand the elderly households through the Sustainable Livelihoods Framework. Firstly, the evidence from this research challenges the SLF in that it does not take into account all key factors necessary to understanding the elderly households’ needs. As a result, this study proposes other necessary enhancements to the SLF, such as the role of cultural practices as part of social capital in supporting elderly livelihoods, especially where patrilineal and matrilineal family systems exist.

Secondly, evidence from this study indicates that the notion of social capital that includes dependency on community networks as key in improving the general livelihood of societies has completely diminished due to community fatigue in relation to offering care and support. The study further reveals enhancements in the forms of social capital like belonging to “secret friendships” or being a member of the village banking scheme. However these social networks have limited elderly membership because of community perceptions that elderly members may not
contribute much, be it financially or otherwise, hence the elderly are excluded from social networks.

Thirdly, as a result of the many challenges faced by the elderly, this research has highlighted an increase in negative coping strategies in elderly households due to limited support from government and other stakeholders. Negative coping strategies in this regard include engaging in activities like casual labour (ganyu), selling alcohol, school dropouts, selling green maize and begging. The more the elderly adopt negative coping strategies, the more vulnerable they become over time.

Fourthly, the livelihoods framework has been used in this study to provide a full understanding of situation of the elderly headed households. This approach provides a new dimension to this body of knowledge as it is used for the first time on elderly households. The research presents a foundation that will require future researchers to look at elderly households holistically and systematically within their context using this research as a guideline or as a point of reference.

Finally, this research suggests a possible framework that would address the needs of the elderly, with a combination of the livelihoods framework as the analysis tool and the social pensions as the response mechanism for alleviating the burden on elderly headed households. Social pensions will act as a poverty cushion to the elderly members of the society to meet their needs in raising orphaned children.

This research conclusively reinforces the role of social protection for supporting the elderly livelihoods. The researcher’s contribution to theory is embedded in the premises of integration of livelihoods frameworks as an analysis tool that provides an holistic picture of understanding elderly household challenges and needs. Social protection through social pensions can be an intervention for supporting the household challenges
of the elderly. The combination of these two frameworks results in an holistic and systematic analysis of elderly livelihoods and subsequent support necessary to respond to their challenges.
LONG ABSTRACT

The HIV and AIDS pandemic has increased the numbers of orphans around the world. The severity of the problem is greater in developing countries, most particularly in Sub-Saharan Africa. In Malawi, for example, as in many other developing countries, grandparents have stepped in and have embraced the role left by the deceased parents, seeing the orphans through school and providing food, clothing and shelter. This is in a context of the grandparents having no steady source of income. Statistics indicate that over 50 per cent of children orphaned by the HIV and AIDS pandemic in Malawi live with their grandparents. Furthermore several studies have documented the declining income base of households as a result of the HIV/AIDS pandemic. It is noted that where poverty and HIV and AIDS co-exist, children and the household are at risk of great deprivation. Despite the heavy burden placed on grandparents as a result of HIV and AIDS, limited attention has been given by scholars, researchers and governments to thoroughly documenting the challenges faced by the elderly who look after orphaned children.

This study explored the challenges faced by elderly people looking after children orphaned by HIV and AIDS in Malawi using the Sustainable Livelihoods Framework (SLF) which is part of sustainable livelihoods discourse. The livelihoods approach is part of rural development theories that have moved away from the conventional approaches towards development as an holistic understanding of the relationship between poverty and economic development. This framework looks at household needs and holistically categorises them in terms of social, financial, physical, natural and health requirements. Following a qualitative approach, this study used the phenomenology approach in documenting the challenges facing the elderly in Malawi, with specific focus on Rumphi and Zomba districts.
Additionally, a case study on the role of social pensions, which is part of social protection was undertaken in Lesotho. Social protection which is part of social development focuses on local community development with emphasis not only on economic development, but on improvement of health, education, environment and standard of living as critical contributors to sustainable development. This is seen as a medium that discourages dependency and promotes the participation of people in their own development.

The aim of the case study was to profile social pension benefits for the elderly in Lesotho as an example so that insights could be drawn from the experience. The case study outcomes provided lessons which could help improve social protection programmes for the elderly in the Rumphi and Zomba districts and could minimize the impact of their challenges. In both Malawi and Lesotho, the study used structured, semi-structured interviews and focus group discussions as tools to solicit information from grandparents, orphans, community leaders, teachers, local leaders and policy makers. The objective was to obtain an holistic picture of the challenges faced by the elderly and the contributions of social protection to elderly livelihoods.

This research provides a thorough analysis of the challenges faced by the elderly by reviewing these holistically. The research further focuses on the elderly’s overall livelihood needs thereby bringing a new perspective to the generally documented challenges. By providing this analysis, the research demonstrates the interlinkages of some of the challenges, taking into account the inter-generational shifts that have occurred vis-à-vis the elderly raising grandchildren. This is unlike other studies which merely highlight the basic challenges without examining all household capitals: human, social, physical, health, natural and financial needs of elderly households. The evidence shows that the level of rural poverty in elderly headed households has increased due to the challenges brought by the
HIV and AIDS pandemic in all these areas. Due to their changed role, acting both as parents as well as grandparents, they face increased challenges like the increase in casual labour, the failure to cultivate land and increased school drop-out rates. All these show how disturbing and challenging their situation is.

The Sustainable Livelihoods Framework presented in this thesis advocates that sustained development is only successful if it is based on evidence and understanding of household or community needs. In this regard, before any organisation or government decides to pursue any social agenda, they must have a clear understanding of what needs to be done, how it should be done, and why. It is understood from many development theories and practices that this is already a standard approach for development programmes; however, this research supports the evidence that suggests that most development work still continues to use the top-down approach towards projects planned to deliver social change to a population without a thorough needs analysis. The process of developing elderly policy within the Malawi government lacks research evidence to understand their needs so as to act as a basis for drafting a policy that is aligned to the proposed documented needs.

This study also highlights the role of social pensions in responding to challenges facing the elderly. Considering that some interventions only respond to limited needs of households, this study like other previous studies, documents and provides evidence that social pensions for the elderly contribute to their overall well-being. The research therefore recommends the introduction of social pensions as a transformative change that would support elderly livelihoods in Malawi.

There are five key elements which this study has highlighted in understanding the elderly households. These include the role of culture, the decline in community networks as one of the social capitals, growth in
negative coping strategies in elderly households, guidelines and references for documenting elderly challenges, and a tool for analysing challenges and supporting elderly needs.

Firstly, the evidence from this research further challenges the Sustainable Livelihoods Approach in that it does not consider all key factors necessary to understanding the elderly households’ needs, and as a result, this study proposes other necessary enhancements such as the role of cultural practices in supporting elderly livelihoods. These contributions have not been included as a key asset in the Sustainable Livelihoods Approach. Within this research, culture is classified both as an asset as well as a transformation process that is both internal and external conditions that influence the flow of activities for every household. This is due to the fact that the changes in cultural practices do affect the overall well-being of the household. In the matrilineal system, the elderly are more vulnerable because the death of a grandmother results in a new child-headed household being formed as the grandfather is sent back to his original home village. This is in contrast to the patrilineal system where in most cases the grandmothers remain in their homes even after the death of their partners. Furthermore, this study shows that grandmother-headed households are greatly affected as the support expected from uncles diminishes, hence the burden of care falls on the grandmother.

Additionally, evidence from this study indicates that the notion of social capital that suggests dependency on community networks as being integral to improving general livelihoods of societies has completely changed. It was believed that communities always helped each other and that there was always support to be expected from relatives and community members. This phenomenon has changed and evidence suggests that this is attributed to community fatigue in offering care and support. The problem is compounded by the extent of challenges faced by households as a result of HIV and AIDS. As a result of this, trust and
ability to leverage on resources that come within the social networks is constrained. This has had serious implications for the resilience of elderly households as their strongest social capital of being dependent on the social networks is no longer there.

The study further reveals other enhancement in the forms of social capital like belonging to secret friendship groups and being members of village banking schemes. However, these growing forms of social networks have limited elderly membership because the prerequisite for participation is one's ability to contribute money, which most of the elderly do not readily have. With this, the notion of inclusivity for social networks is not true as the evidence in this study indicates social exclusion for elderly households due to their age, gender and lack of physical engagement in the processes. Furthermore, although previously there was less gender embedded in all community networks, this study reveals that this has deepened and it is further elevated as most of the new groups are favouring one gender.

Furthermore, this research has presented the growth in negative coping strategies in elderly households due to limited support by government and other stakeholders. The original livelihoods framework does not accommodate the fact that if the transformation structures, that is policies and government support, fail to respond to the needs of the household, the families resort to adopting negative coping strategies and these further affect their vulnerability extensively. Such negative livelihood strategies seen during this study include engaging in activities like casual labour (ganyu), selling alcohol, school drop-outs, selling green maize, and begging. The more the elderly adopt negative coping strategies, the more vulnerable they become.

Most previous studies that attempted to review elderly needs have been conducted without any clear systematic framework. These studies in most
cases tended to be biased towards ensuring that the research responded to specified terms of reference influenced by the authors or funders of the research. In this research, the livelihoods framework was used to understand the overall elderly household needs and this study has drawn on this framework to clearly understand the elderly headed households. This is a new dimension to this body of knowledge and by using the livelihoods framework, the research presents a foundation that will demand that any evaluator looks at elderly households holistically and systematically within their context using this research as a guideline or as a point of reference for assessing challenges and impact of any support on elderly households.

Having reflected on the enhancements and on areas that need improvement, this research suggests a possible framework that would address the needs of the elderly. It combines the livelihoods framework as the analysis tool to be used to understand the needs of the elderly and the social pensions within the social protection umbrella as the response mechanism for elderly households. This advocates that for the elderly household, a social pension is indeed an ideal intervention. The Lesotho case study presented in this research profiles social pensions as an important instrument and policy tool for addressing the needs of older persons to support their overall well-being. In a developing country like Malawi where most of the elderly population are among the poorest, introduction of a social pension may have a positive impact in reaching out to the majority of poor people. Social pensions would act as a poverty cushion for the elderly members of the society to meet their needs in raising orphaned children. However, the country needs to examine its context so as to best understand the possible social pension implementation modalities.

This research conclusively reinforces the role of social protection for supporting the elderly livelihoods. The researcher’s contribution to theory
is embedded in the premise of an enhanced livelihoods framework as an analysis tool that provides an holistic picture in understanding elderly household challenges and needs. Furthermore, in responding to these challenges, social protection through social pensions can be an appropriate intervention for supporting the elderly household challenges. The combination of these two frameworks result in an holistic and systematic analysis of elderly livelihoods and subsequent support necessary to respond to their challenges.
DECLARATION

I declare that this thesis is my own, unaided work. It is submitted in partial fulfillment of the requirements of the degree of Doctor of Philosophy in the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination in any other University.

___________________________
Marumbo Prisca Ngwira

___________________________
31 March 2014
DEDICATION

This dissertation is dedicated to the memory of my father, Gerald Gomezgani Ngwira. He was someone who truly believed in my capabilities beyond myself. He encouraged me in this study and, over a number of years, continued to review the progress I made with my research mission. In February 2013 he died suddenly, but what he does not know is that I committed to finish this work to honour his name and his overwhelming belief in me before the first anniversary of his death.

My father lived his life always promoting education for everyone. He would not accept that anyone should fail to finish their school or achieve less than their potential. He always believed in the motto that education is a key to success. His belief in me kept me working every day even when I wanted to give up. His words always come back to encourage me: “One has to achieve the highest level of each and every standard and for education it is not to master the work but to even go further and become the doctor within a discipline”. Dad, I owe this to you.

For my Mum, Joyce Ngwira, I know you feel the loss. However, you have taken over Dad’s work of ensuring that each and every child is educated for life. Maintain this legacy. I am grateful for your support, Mum.
ACKNOWLEDGEMENTS

My thanks and appreciation to Dr Horácio Zandamela for persevering with me as my supervisor throughout the time it took me to complete this research and write the dissertation. I am also grateful to many persons who shared their memories and experiences during our years of study. My fellow students who reviewed my work and shared their own work to enhance mine, I remain grateful.

To Innocentia, for being my partner during this journey.

As I moved towards the finalisation of this work, I encountered Laureen Bertin, who thoroughly edited and reviewed this work. I am grateful to have someone detailed and patient as well as motivating to allow me to provide a quality product.

Most importantly, I am grateful for my family who stood with me throughout this journey. For my husband, Thomas Munthali, the moral, social, intellectual support given to me throughout this journey has allowed me to finish my work. For my children, Michael, Zoe and TJ, for being understanding and allowing Mum to have the quiet time to do her school. This has allowed me to complete my work and I believe it will push you all to do more than Mum.

I thank God for making this happen: it has been a dream, a journey and finally a reality.
# TABLE OF CONTENTS

LONG ABSTRACT .............................................................................................. v  
DECLARATION .................................................................................................... xii  
DEDICATION ...................................................................................................... xiii  
ACKNOWLEDGEMENTS .................................................................................. xiv  
TABLE OF CONTENTS .................................................................................... xv  
LIST OF FIGURES ........................................................................................... xxv  
LIST OF TABLES .............................................................................................. xxvii  
LIST OF ABBREVIATIONS AND ACRONYMS ........................................... xxviii  

CHAPTER ONE ..................................................................................................... 1  
THE SITUATION OF THE ELDERLY ................................................................. 1  
  1.1 INTRODUCTION ............................................................................................. 1  
  1.2 BACKGROUND ............................................................................................. 3  
    1.2.1 Country profile ......................................................................................... 3  
    1.2.2 The Economic Context of Malawi ............................................................. 6  
    1.2.3 The impact of HIV and AIDS on the Malawi economy ......................... 8  
    1.2.4 The social and cultural context ................................................................ 9  
    1.2.5 The policy and legislative context ........................................................... 11  
    1.2.6 The Malawi government’s response to HIV and AIDS ..................... 13  
    1.2.7 The situation of HIV and AIDS orphans ............................................... 14  
  1.3 PROBLEM STATEMENT .............................................................................. 17  
  1.4 PURPOSE OF THE STUDY .......................................................................... 19  
  1.5 OBJECTIVES OF THE STUDY AND RESEARCH QUESTIONS .................. 20  
    1.5.1 Objectives of the study ........................................................................... 20  
    1.5.2 Research questions .................................................................................. 21  
  1.6 STRUCTURE OF THE THESIS ................................................................... 26  

CHAPTER TWO ..................................................................................................... 29  
THE ELDERLY, POVERTY AND HOUSEHOLD STRUCTURE ....................... 29
CHAPTER SIX ....................................................................................... 202

SITUATION AND CHALLENGES OF THE ELDERLY IN MALAWI ..... 202

6.1. INTRODUCTION ................................................................................. 202
6.2. BACKGROUND TO THE RESEARCH SITE ..................................... 204
6.3. DEMOGRAPHIC STUDY POPULATION ......................................... 207
   6.3.1. Age in years ............................................................................ 208
   6.3.2. Definition of Elderly by the community .................................... 211
   6.3.3 Number of orphans in the household ......................................... 213
6.4. PATRILINEAL VERSUS MATRILINEAL MARRIAGE SYSTEMS AND THEIR IMPACT ON THE CHALLENGES OF THE ELDERLY .................................................................

6.4.1. Household arrangements and type of care .................................................................

6.4.2. Type of care ..............................................................................................................

6.4.3. Rationale for taking care of the children: circumstance or choice ..........................

6.4.4. Benefits of taking care of the children .................................................................

6.5. CHALLENGES FACING THE ELDERLY ........................................................................

6.5.1. General challenges facing the Elderly households ....................................................

6.6. DETAILED ANALYSIS OF THE ELDERLY ................................................................

6.6.1. Human capital ...........................................................................................................

6.6.1.1 Limited household labour ....................................................................................

6.6.1.2 Decrease in area cultivated ..................................................................................

6.6.1.3 Decrease in farm production ................................................................................

6.6.1.4 Re-allocation of labour .......................................................................................

6.6.1.5 Limited investment in human capital due to school drop-outs ............................

6.6.1.6 School absenteeism ..............................................................................................

6.6.1.7 Early marriages affecting human capital in elderly households ..........................

6.6.1.8 School time versus household priorities .............................................................

6.6.1.9 Failure to afford basic school needs .....................................................................

6.6.1.10 Support at the school ...........................................................................................

6.6.2. Financial Capital ......................................................................................................

6.6.2.1 Main source of income .........................................................................................

6.6.2.2 Small income generating activities ......................................................................

6.6.2.3 Borrowing as a means to access funds .................................................................

6.6.2.4 Financial Capital and Elderly households ............................................................

6.6.3. Health Needs ...........................................................................................................

6.6.3.1 Limited access to health services ........................................................................

6.6.3.2 Lack of transport to access needed medical facilities ..........................................

6.6.3.3 Fear of hospitals ...................................................................................................

6.6.3.4 Community support on health needs .................................................................

6.6.4. Social Capital ..........................................................................................................倩

6.6.4.1 Strained relationships with extended family members .......................................

6.6.4.2 Community fatigue ..............................................................................................

6.6.4.3 Informal groups .....................................................................................................

6.6.4.4 Linkages to formal and informal community social support groups ....................

6.6.4.5 Social exclusion and discrimination ..................................................................

6.6.4.6 Bringing back social inclusion: Community recommendations ..........................

6.6.5 Physical Assets ...........................................................................................................

6.6.5.1 Elderly households and Physical assets ...............................................................

6.6.5.2 Poor living conditions ..........................................................................................

6.6.6 Natural Capital ...........................................................................................................

   xix
8.2.1. Economic context .......................................................... 333
8.2.2. Social context .............................................................. 336
8.2.3. Political context ........................................................... 336
8.3. LESOTHO SOCIAL PROTECTION PROGRAMMEMES ........... 337
  8.3.1. The school meals programme ........................................ 337
  8.3.2. Cash transfer programmeme ........................................ 338
  8.3.3. Vulnerable group feeding ............................................. 339
  8.3.4. The old age pension .................................................... 340
8.4. PROCESS OF PENSION MANAGEMENT ............................... 341
  8.4.1. Legal and institutional framework ................................. 341
  8.4.2. Funding source ......................................................... 342
  8.4.3. Targeting and distribution process ................................. 343
    8.4.3.1 Registration ............................................................. 343
    8.4.3.2 Distribution process ............................................... 344
  8.4.4. The role of the district and local structures ..................... 346
  8.4.5. Political commitments ................................................ 347
8.5. THE ROLE OF SOCIAL PENSIONS: 2005-2012 ...................... 348
  8.5.1. Extending social security coverage to all the elderly .......... 348
  8.5.2. Poverty reduction: food security and improved well-being of elderly 349
  8.5.3. Global demographic shifts: the elderly are self-sustaining 351
8.6. CHALLENGES WITH SOCIAL PENSIONS IN LESOTHO ............ 352
  8.6.1. Targeting and Coverage .............................................. 352
  8.6.2. Registration and distribution ........................................ 353
  8.6.3 Financing the Pension ................................................ 354
8.7. ROLE OF SOCIAL PENSIONS FOR ELDERLY LIVELIHOODS: FINDINGS FROM INTERVIEWS ................. 355
  8.7.1. Study demographics ................................................... 356
    8.7.1.1 Age of orphans ....................................................... 357
    8.7.1.2 Extent of orphans in Lesotho: number of orphans within elderly households ................... 359
  8.7.2. Challenges facing the orphans ...................................... 361
  8.7.3. Rationale and benefits of looking after the children .......... 362
  8.7.4. Main source of income ............................................... 366
  8.7.5. Broad challenges facing the Elderly .............................. 367
8.8. LESOTHO SOCIAL PENSIONS – BENEFITS AND EFFECTS ON THE ELDERLY .... 370
  8.8.1. Benefits of social pensions ......................................... 371
    8.8.1.1. Beneficiary knowledge of entitlement and process ......................... 371
    8.8.1.2. Benefits of social pensions ......................................... 371
  8.8.2. Negative effect of the social pensions ........................... 374
8.9. APPLICATION OF THE LIVELIHOODS FRAMEWORK FOR ELDERLY HOUSEHOLDS IN LESOTHO

8.9.1. Human capital and social pensions .............................................................. 378
8.9.2. Natural Capital and social pensions for elderly .............................................. 381
8.9.3. Social capital and social pensions for elderly .................................................. 383
8.9.4. Health capital and social pensions for elderly .................................................. 386
8.9.5. HIV/AIDS and the Elderly ......................................................................... 387
8.9.6. Financial capital and social pensions ........................................................... 388
8.9.7. Physical capital and social pensions for elderly .............................................. 389
8.9.8. Livestock ownership .................................................................................... 390

8.10. COPING STRATEGIES .............................................................................. 391

8.11 SUMMARY ............................................................................................... 392

CHAPTER NINE .............................................................................................. 394

REFLECTION ON THE ROLE OF SOCIAL PROTECTION AND ELDERLY LIVELIHOODS IN MALAWI

9.1. INTRODUCTION .............................................................................................. 394
9.2. JUSTIFICATION OF NEED FOR SOCIAL PENSIONS OF ELDERLY HOUSEHOLDS ............................................................................................................. 396

9.3. THEORIES - SOCIAL PENSIONS RESPONDING TO ELDERLY LIVELIHOOD CHALLENGES ............................................................................................................. 397
9.3.1. Poverty reduction for elderly households..................................................... 398
9.3.2. Social protection and elderly household natural capital ................................ 400
9.3.3. Access to health care .................................................................................. 402
9.3.4. Human capital for elderly households ......................................................... 403
9.3.5. Financial Impact for elderly ...................................................................... 405
9.3.6. Social pension and social capital ............................................................... 407
9.3.7. Livelihoods and labour market engagement .............................................. 409

9.4. IMPLEMENTATION OF THE PENSION SCHEME ........................................ 410
9.4.1. Political process ....................................................................................... 411
9.4.2. Financial resources .................................................................................. 415
9.4.3. Benefit size ............................................................................................... 416

9.5. INSTITUTIONALISATION AND STRUCTURAL PROCESSES ...................... 418
9.5.1. The role of the different sectors: Ministry of Elderly and Disability ............ 418
9.5.2. Critical roles of the chiefs ....................................................................... 419
9.5.3. Inclusion and exclusion of elderly participation in social protection ............ 421
9.5.4. Distribution system .................................................................................. 422
9.5.5. The Importance of management information systems ............................... 423
10.9.1. Build human capital for elderly households ................................................... 466
10.9.2. Improving elderly health through accessible medical facilities ....................... 467
10.9.3. Sensitising communities on the role of social capital in supporting elderly needs 467
10.9.4. Support interventions that contribute towards long term food security .......... 468
10.9.5. Ongoing financial support through social pensions ........................................ 468

REFERENCES ................................................................................................. 472

APPENDICES .................................................................................................... 503
LIST OF FIGURES

Figure 1: (a, b, c) Maps of Malawi 4-6
Figure 2: Number of orphaned children from 1990 to 2010 15
Figure 3: Bronfenbner’s Ecological Model 32
Figure 4: The Sustainable Livelihoods Framework (SLF) 62
Figure 5: The Asset Pentagon 63
Figure 6: The conceptual framework 145
Figure 7: Summary of the research design 187
Figure 8: Age of the elderly 209
Figure 9: Focus group discussion 212
Figure 10: Total number of orphans per household 214
Figure 11: Total number of years looking after orphans 216
Figure 12: Elderly respondents and their household 222
Figure 13: Children under elderly care 226
Figure 14: Benefits of looking after grandchildren 229
Figure 15: General challenges facing the elderly 232
Figure 16: Land cultivated by the elderly in Rumphi and Zomba 235
Figure 17: Children helping with chores in elderly household 236
Figure 18: Main source of labour in elderly households 239
Figure 19: Main sources of household income 249
Figure 20: Picture of elderly people and grandchildren 258
Figure 21: Diseases affecting the elderly 260
Figure 22: Grandmother who ran away from the hospital 265
Figure 23: Elderly hope to have someone to care for their children 270
Figure 24: Households with assets 284
Figure 25: Dilapidated household belonging to elderly people 287
Figure 26: Household harvest 290
Figure 27: Map of Lesotho 332
Figure 28: Age of the elderly 357
Figure 29: Years looking after orphans 359
Figure 30: Number of orphans per household 361
Figure 31: Example of elderly households in Lesotho 364
Figure 32: Benefits of looking after orphans 365
Figure 33: Lesotho elderly source of income 366
Figure 34: Elderly person assaulted by grandson due to pension 370
Figure 35: Benefits of social pensions 372
Figure 36: Elderly able to send children to school 380
Figure 37: Example of keyhole garden belonging to elderly person 381
Figure 38: Malawi vs Lesotho on elderly land cultivation 382
Figure 39: The health challenges facing elderly 387
Figure 40: Elderly household capital assets 390
Figure 41: Elderly household livestock ownership 491
Figure 42: Elderly Sustainable Livelihoods Framework 454
Figure 43: Framework for supporting and understanding elderly livelihoods 459
### LIST OF TABLES

Table 1: Brief conceptualization of the research process  
Table 2: Environmental & social changes impact on extended family  
Table 3: A framework for social protection programmes  
Table 4: Social protection journey in Malawi  
Table 5: Countries with social protection in Africa vs HIV prevalence rate  
Table 6: Research related to the study  
Table 7: The participants interviewed  
Table 8: Selection criteria for case study participants  
Table 9: Participants for interviews in Lesotho  
Table 10: Analysis grid  
Table 11: Benefits of staying with grandparents  
Table 12: Benefits of staying with grandparents  
Table 13: Social Protection Intervention 2012-2016  
Table 14: Ages of orphans under the care of the elderly
LIST OF ABBREVIATIONS AND ACRONYMS

ADB  African Development Bank
AIDS  Acquired Immune Deficiency Syndrome
ADMARC  Agriculture Development and Marketing Co-operation
CARE  Cooperative for Assistance and Relief Everywhere
CECO  Community Elderly Committee
CFLP  Cash and Food for Livelihoods Pilot Project
CRECCOM  Creative Centre for Community Mobilisation
DECO  District Elderly Committee
DFID  Department for International Development
EU  European Union
FGD  Focus Group Discussion
FHI  Family Health International
GOM  Government of Malawi
GDP  Gross Domestic Product
HAI  Help Age International
HH  Household
HIV  Human Immunodeficiency Virus
ILO  International Labour Organisation
IMF  International Monetary Fund
IFPRI  International Food Policy Research Institute
LCD  Lesotho Congress for Democracy
LDC  Least Developed Country
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>LPIG</td>
<td>Lesotho Pension Impact Group</td>
</tr>
<tr>
<td>LVAC</td>
<td>Lesotho Vulnerability Assessment Committee</td>
</tr>
<tr>
<td>MK</td>
<td>Malawi Kwacha</td>
</tr>
<tr>
<td>MASAF</td>
<td>Malawi Social Action Fund</td>
</tr>
<tr>
<td>MEPD</td>
<td>Ministry of Economic Planning and Development</td>
</tr>
<tr>
<td>MDG</td>
<td>Millennium Development Goal</td>
</tr>
<tr>
<td>MCP</td>
<td>Malawi Congress Party</td>
</tr>
<tr>
<td>MOE</td>
<td>Ministry of Education</td>
</tr>
<tr>
<td>MOF</td>
<td>Ministry of Finance</td>
</tr>
<tr>
<td>MFI</td>
<td>Micro Finance Institute</td>
</tr>
<tr>
<td>MOA&amp;FS</td>
<td>Ministry of Agriculture and Food Security</td>
</tr>
<tr>
<td>MPRS</td>
<td>Malawi Poverty Reduction Strategy</td>
</tr>
<tr>
<td>MOLG&amp;RD</td>
<td>Ministry of Local Government and Rural Development</td>
</tr>
<tr>
<td>MVAC</td>
<td>Malawi Vulnerability Assessment Committee</td>
</tr>
<tr>
<td>NGO</td>
<td>Non Government Organisation</td>
</tr>
<tr>
<td>NECO</td>
<td>National Elderly Committee</td>
</tr>
<tr>
<td>NSCOP</td>
<td>National Steering Committee on Older Persons</td>
</tr>
<tr>
<td>NTCOP</td>
<td>National Technical Committee on Older Persons</td>
</tr>
<tr>
<td>NSNS</td>
<td>National Safety Nets Strategy</td>
</tr>
<tr>
<td>NSSP</td>
<td>National Social Support Policy</td>
</tr>
<tr>
<td>NSSSSC</td>
<td>National Social Support Steering Committee</td>
</tr>
<tr>
<td>NSSPIS</td>
<td>National Social Support Programme Implementation Strategy</td>
</tr>
<tr>
<td>NREGS</td>
<td>National Rural Employment Guarantee Scheme</td>
</tr>
<tr>
<td>NSR</td>
<td>National Statistics Report</td>
</tr>
<tr>
<td>ODI</td>
<td>Overseas Development Institute</td>
</tr>
<tr>
<td>Acronym</td>
<td>Full Form</td>
</tr>
<tr>
<td>---------</td>
<td>-----------</td>
</tr>
<tr>
<td>OPM</td>
<td>Oxfam Policy Management</td>
</tr>
<tr>
<td>OVC</td>
<td>Orphans and Vulnerable Children</td>
</tr>
<tr>
<td>SAP</td>
<td>Structural Adjustment Programme</td>
</tr>
<tr>
<td>SCTP</td>
<td>Social Cash Transfer Programme</td>
</tr>
<tr>
<td>SLA</td>
<td>Sustainable Livelihoods Approach</td>
</tr>
<tr>
<td>SLF</td>
<td>Sustainable Livelihoods Framework</td>
</tr>
<tr>
<td>UDHR</td>
<td>Universal Declaration on Human Rights</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>United Nations Programme on AIDS</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
</tr>
<tr>
<td>VDC</td>
<td>Village Development Committee</td>
</tr>
<tr>
<td>WB</td>
<td>World Bank</td>
</tr>
<tr>
<td>WFP</td>
<td>World Food Programme</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
</tr>
</tbody>
</table>
CHAPTER ONE
THE SITUATION OF THE ELDERLY

1.1 INTRODUCTION

HIV was detected in East and Southern Africa in the early 1980s and the region bears the greatest burden of HIV infections. Since the beginning of the epidemic, almost 60 million people have been infected with HIV worldwide and 25 million have died due to the epidemic (UNAIDS, 2009). By 2011, an estimated 34 million people were living with HIV and AIDS, of which 23.5 million or 69 per cent are in Sub Saharan Africa (UNAIDS, 2012). These deaths from AIDS have left in their wake a growing number of orphans and vulnerable children. The region has the unenviable record of having the world’s highest proportion of orphaned children with the best available estimates suggesting that between 13 per cent and 15 per cent of children may be single or double orphans (UNICEF, 2011; UNAIDS, 2012).

HIV and AIDS has increased the numbers of orphans internationally and nationally. In Malawi, as in other countries, grandparents have stepped in to address the gap left by deceased parents. Over 50 per cent of children orphaned by the HIV and AIDS pandemic in Malawi live with their grandparents who play an important caring role in caring for them and also nursing the sick parents (UNICEF, 2009).

With this background in mind, this research was aimed at examining the challenges facing the elderly (grandparents) looking after HIV and AIDS orphans with a special focus on examining the role that social protection can play in supporting this age group. The study was based in Malawi, specifically in Rumphi and Zomba districts, where it documented the challenges facing the elderly who are looking after orphans.
In addition, a complementary case study was conducted in Lesotho with the aim of learning how social assistance programmes have been implemented to support the needs of the elderly people in that country. This was to illustrate success factors that are put in place to allow for a progressive supporting mechanism for the elderly looking after orphans. The lessons from Lesotho provide a good basis for proposing evidence of some of the interventions that can be considered to support the needs of the elderly after documenting the challenges of the elderly in the Rumphi and Zomba districts in Malawi. Through the research in Malawi, it was evident that the elderly needed support and the Lesotho case was an illustration of examples of possible responses to the challenges facing the elderly looking after orphans.

This study has used two disciplines to understand the elderly livelihoods and their challenges. The sustainable livelihoods framework was used as an analysis tool that documents elderly challenges, whilst social protection, specifically social assistance through social pensions, has been used as the discipline to respond to these challenges. Social protection is a broad discipline and as such the study has explored the role of social pensions in responding to the needs of the elderly.

The research will present the study background focusing on the country’s economic, social and political context. This will be followed by the research problem which will articulate the context of the study and the knowledge gap that exists in this field as the possible rationale for the study. Following this section, the purpose of the study as well as the study objectives will be presented. In its critical analysis, the paper will present the literature review as a foundation for the justification of the research problem. The research study design will then be presented and will provide the parameters of this study.
1.2 BACKGROUND

1.2.1 Country profile

Malawi is a landlocked country located in Southern Africa, sharing international borders with Tanzania in the north, Zambia in the west and Mozambique in the east, south and south-west. Malawi has a total area of 118,484 square kilometres, a fifth of which is covered by water. Malawi is one of the ten poorest and least developed countries in the world. Poverty in Malawi manifests itself at the individual, household, community and national levels (World Bank, 2012). It is widespread, deep and severe and over 65.3 per cent of the population is poor (Government of Malawi, 2010). Malawi has three regions; this study is based in Zomba (district 17) which is in the Southern Region and Rumphi (district 15) which is in the Northern Region. The two districts represent the regions in Malawi.

The population in Malawi is predominantly rural based with the urban areas populated by a formal labour force dominated by civil servants as well as the fast growing informal labour force which engages in micro enterprise and unregulated trading (Durevall and Musa, 2010). The Malawi political and economic elite along with the middle class are urban based. The 2008/9 census conducted in Malawi indicated that 85 per cent of the population lives in rural areas and is engaged in agriculture and livelihoods activities that use natural resources (Government of Malawi, 2010).

Traditionally, Malawi has three distinct regions which represent different cultures and beliefs. The Northern region is a mostly patrilineal system where orphan care is based on the descendants from the fathers’ side, whilst in the Southern and central regions, they are mostly a matrilineal society. These two systems might have similarities and differences in ways of supporting orphaned children; the study tried to understand how these
systems operate and the role grandparents play in the different contexts hence the choice of the two districts representing the two regions.

**Figure 1a: Map of Malawi**

Source: //www.weather-forecast.com
Msondole Village is about 15 kilometres from Zomba, close to Likongaji.

Mtunthika is 5KM from Njakwa towards Ng'onga
1.2.2. The Economic Context of Malawi

Malawi is one of the poorest countries in Africa, with more than 55 per cent of its population living in poverty and 24 per cent considered extremely poor (National Statistics Office, 2005). Many Malawians are regarded as poor due to the fragility of their livelihoods and susceptibility to shocks (Devereux and MacAuslan, 2006). For almost forty years, the Malawi economy has been characterized as unstable and continuously changing (Chisinga, 2007). Since 1981, the country economy has experienced both peaks and troughs in growth patterns underpinned by rising levels of inflation, declining agriculture activity, rising interest rates and spirals in both domestic and external debt (Jenkins and Tsoka, 2003).

Malawi is heavily dependent on donor aid. It is estimated that donors provide up to 80 per cent of the country’s development budget and about 50 per cent of its recurrent expenditure (Harrigan, 2011; Chinsinga, 2007). Being highly donor-dependent, Malawi’s economy is predominantly agro-based. According to Chirwa (2006), agriculture accounts for about 39 per cent of the GDP, 85 per cent of the labour force and 83 per cent of the foreign exchange earnings. While agriculture demonstrated good performance in the first decades of independence, its performance has been erratic in the years from the late 1980s to the 1990s (Harrigan, 2011).

This situation turned around with the introduction of the fertilizer subsidies scheme from the 2005 growing season. The 2006 production indicated that Malawi enjoyed its biggest harvest ever of 2.6 million metric tons, at least half a million tonnes more than its annual food requirement of two million tonnes (Durevall and Mussa, 2010:55). This trend continued to the 2009 harvest period where Malawi enjoyed a bumper harvest and exported maize to Zambia and Zimbabwe.
Several economic drivers contributed to the macroeconomic performance, including, among others, the rise in foreign investment from 2004 led by mining investment. Malawi opened its first uranium mine in Karonga which has boosted the economy (Harrigan, 2011). Secondly, the increase in the selling price of agriculture commodities such as tobacco and tea which are Malawi’s major exports benefited the country to ensure it leverages on this hence promoting growth (Derevall and Mussa, 2010). Furthermore, the debt relief under the Highly Indebted Poor Countries (HIPC)/multilateral debt relief initiative in 2006 from the International Monetary Fund (IMF) relieved the pressure on the revenue account and allowed the ruling Mutharika party to undertake other interventions like fertilizer subsidy programmes (IMF, 2012).

However, since then it was reported that the Malawian economy has declined. According to the World Bank strategy report, the growth in the Malawian economy reduced from a peak of 9.7 per cent in 2008 to an estimated 5 per cent in 2011 (World Bank, 2012). The past two years (2011-2012) saw a number of economic indicators getting worse, including foreign exchange deficits, fuel and electricity supply shortages and continuing inflation.

Malawi is heavily dependent on donor aid, and from 2011 most donors suspended their aid to the country due to the deterioration of the macroeconomic and democratic governance environment (World Bank Report, 2012). This resulted in worsening the situation of the country that was already challenged.

However, after the death of President Bingu Wa Mutharika in 2012, donor confidence returned. Most donors who had suspended their aid, including Britain, the United States and Germany, reinstated their position in supporting Malawi. The new president appealed for more donor funding and reversed decisions that Bingu had taken that resulted in the
suspension of aid to Malawi. Such actions included the victimization of opposition leaders and marginalization of ethnic groups, amongst others. As Malawi positions itself for the upcoming elections in 2014, uncertainty continues to grow as the current leadership of President Joyce Banda has come under increasing criticism due to the way in which resources have been managed within the two years she has acted as interim president. The economy has remained stable but highly inflated.

1.2.3 The impact of HIV and AIDS on the Malawi economy

As much as the Malawian economy has grown, HIV and AIDS has also had a significant impact on the Malawian economy. This impact has been felt through its effect on the labour force, households and enterprises (Bollinger, Stover and Palamuleni, 2000). Generally, HIV and AIDS has contributed to a development reversal to the economy, which, in turn, has made it more difficult for Malawi to respond to the crisis.

Malawi was under the rule of President Banda for thirty years starting in 1964, during which time little attention was paid to the escalating AIDS crisis. Banda’s puritanical beliefs made it very difficult for AIDS education and prevention schemes to be carried out, as public discussion of sexual matters was generally banned or censored, and HIV and AIDS were considered taboo subjects (Chinsinga, 2007). Between 1985 and 1993, HIV prevalence amongst women tested at urban antenatal clinics increased from 2 per cent to 30 per cent (UNAIDS, 2000).

In 1994, following protests and international condemnation, President Banda agreed to relinquish power and Malawi became a multi-party democracy. President Bakili Muluzi took office and acknowledged the impact of the epidemic. However, by this point AIDS had already damaged Malawi’s social and economic infrastructure. Farmers could not provide food, children could not attend school and workers could not support their
families, either because they were infected with HIV or because they were caring for someone who was (Chinsinga, 2007). In 2002, Malawi suffered its worst food crisis in over fifty years, with HIV recognized as one of the factors that contributed strongly (UNAIDs, 2008).

It needs to be acknowledged that the impact that AIDS has had on the economies of African countries is difficult to measure (UNAIDS, 2008). The economies of the worst affected countries were already struggling with other development challenges, debt and declining trade before the epidemic began to affect the continent. AIDS has combined with these factors to further aggravate the situation. It is thought that the impact of AIDS on the gross domestic product (GDP) of the worst affected countries is a loss of around 1.5 per cent per year; this means that after 25 years the economy would be 31 per cent smaller than it would otherwise have been (UNAIDS, 2008; UNAIDS, 2009).

As much as it is difficult to measure, the economic impact of HIV and AIDS at household level is easily felt. HIV and AIDS has affected the most economically active members of the household. When these family members succumb to the disease, the family becomes vulnerable as bread winners die. HIV and AIDS has destroyed the human capital that is their life experience, knowledge and skills built over the years. These are not easily replaceable and as such the family future is destroyed.

1.2.4. The social and cultural context

Since independence in 1964 Malawi has experienced remarkable population growth with the population more than doubling between 1964 and 2008. The Malawian population has grown from 4,039,583 in 1966 to 13,077,160 in 2008, an increase of 9 million (National Statistics Report, 2008). Women constitute about 51 per cent of the total population. The population is unevenly distributed between the three regions of the
country. In 2008 about 45 per cent of the total population was enumerated in the Southern Region. The corresponding figures for the Central and the Northern Regions were 42 per cent and 13 per cent. It is estimated that about 86 per cent of the population resides in the rural areas. Malawi has one of the highest death rates during childbirth. Recent figures from the Malawi Demographic and Health Survey show that 1,120 mothers and 4,200 babies die for every 100,000 live births (NSR, 2008). Of the 13 million Malawians, 10.8 million (83 per cent) are Christians, 1.7 million (13 per cent) are Muslims, 2 per cent belong to other religions and 2 per cent do not belong to any religion (NSR, 2008). The literacy rate in Malawi stands at 64 per cent.

Like any other society, Malawi is governed by a culture whose beliefs, values, customs and social practices have a powerful influence on the community way of living. Culture is very important for the Malawian national identity. One of the underlying cultural values is the strong community support system which relies heavily on support provided by extended families within the communities (Foster, 2005). This is where the community/village is united to look after the well-being of the people living in the community, including raising children which is guided by the culture of the specific ethnic group.

While people often talk of a “Malawian culture” it is important to bear in mind that there are many ethnic groups in the country. Hickey (1999) quotes Mkandawire and Mataya (1985) as indicating that there are approximately fifteen (15) major ethnic groups in Malawi. The major ethnic groups and the regions where most of them are found are the Tumbuka and the Tonga in the Northern Region, the Ngoni in the Northern and Central Regions, the Chewa in the Central Region, and the Yao, the Lomwe, the Sena, and the Mang’anja in the Southern Region. Regardless of tribes, Malawians still rely greatly on extended families and community support structures.
All the ethnic tribes above have their own traditional practices with regard to initiation, marriage and funeral rites. They have some traditional beliefs distinct to their tribes as well as to Malawians more generally. Inasmuch as each ethnic group has its own language, the most common spoken languages are Chewa, Tumbuka and English.

1.2.5. The policy and legislative context

Politically, Malawi became a one-party state soon after independence from British rule in 1964. The Malawi Congress Party (MCP) under the leadership of Dr Hastings Kamuzu Banda became the only officially recognized party. The party ran affairs of the state in a manner that resulted in little separation between party and state affairs.

In 1992 the publication of the *Pastoral Letter* by the Catholic Bishops in the country called for change in the political system in order to ensure that people had all their basic freedoms such as freedom of the press, freedom of dress, freedom of speech and freedom of association. This resulted in the introduction of multi-party democracy in the country. Malawi has a multi-party system of government, with presidential and parliamentary elections held every five years.

The transition from the authoritarian party rule to multi-party democracy has been one of the greatest achievements in Malawi. However, this has also been a tipping point in the versatility of the country’s policy-making processes (Chisinga, 2007). From the mid-1990s when President Muluzi took power, the quality of policy making as well as good governance in the state rapidly deteriorated. President Muluzi ruled the country for two terms from 1994-2004, years characterized by severe macroeconomic mismanagement, rampant inflation, dramatic fallis in the value of the
Malawi kwacha and weakening of government capacity (Booth, Cammack, Harrigan, Kanyongolo, Mataure and Ngwira, 2006).

In other words, as stated by Chisinga (2007), government’s capacity for policy formulation and more importantly implementation weakened and in some cases was almost non-existent, resulting in a complete loss of direction for state business. Malawi was considered as one of the most corrupt countries during the reign of President Muluzi.

There were, however, some signs of recovery regarding the government’s capacity to formulate, articulate and implement credible policy interventions and practice good governance. President Muntharika who succeeded President Muluzi in 2004 restored and championed a technocratic approach to policy-making modelled on an elaborate development vision of the country with proper developmental goals and agendas. This vision is underpinned by the Malawi Growth Development Strategy (MGDS) which supports the thematic areas of sustainable economic growth, social protection, infrastructure development and improved governance. The Malawi President was commended for his efforts in promoting agriculture and food security in Malawi (Harrigan, 2012).

However, after his second term in office in 2009, President Muntharika’s popularity greatly deteriorated, largely due to poor governance. Concerns over his leadership greatly increased with the civil societies, religious leaders, opposition parties and academics criticizing the president and his party over lack of commitment to human rights and freedom. In 2012 Muntharika died; this brought yet another change to the political landscape of Malawi, with the election of the first female president in Southern Africa, Dr Joyce Banda.
Malawi is governed by a legislative branch that consists of the national assembly of 193 members who are voted into office every five years. Even though it is stated in the Malawi constitution that there is provision for 80 senate seats, this has never been adhered to in practice (Government of Malawi, 2012). If this had been done, the senate would comprise traditional leaders and a variety of geographic districts and other interested stakeholders like disabled people, youth and women. The independent judicial branch is based on the English model and consists of a constitutional court, a High Court, a Supreme Court of Appeal and subordinate Magistrate Courts (Government of Malawi, 2012).

1.2.6. The Malawi government’s response to HIV and AIDS

Malawi continues to suffer from the inter-connected problems of poverty, famine and AIDS. However, intensive efforts have been made in recent years to increase awareness about HIV and to prevent its spread, and these efforts appear to have had a positive effect. These efforts have been made through the government, non-governmental organisations (NGOs) and also the private sector.

In 2000, a five-year National Strategic Framework to combat AIDS was implemented. The policy was slow to take effect as internal financial and organisational difficulties persisted. A more structured body was needed to co-ordinate Malawi’s response to AIDS, and the National AIDS Commission (NAC) was set up in 2001. The NAC has since overseen a number of AIDS prevention and care initiatives, including programmes to provide treatment, increase testing and prevent mother-to-child transmission of HIV (UNAIDS, 2008).

The government’s response to AIDS was further intensified in 2004 with the election of President Bingu Wa Mutharika, who launched Malawi’s first National AIDS Policy. This policy set the goal of improving the provision of
prevention, treatment, care and support services, and called for a multi-sectoral response to the epidemic. A Principal Secretary for HIV and AIDS was appointed within the government, and treatment and prevention programmes were scaled up (Government of Malawi, 2004).

According to the national statistics report of 2009, the national HIV prevalence in Malawi has stabilised between 11 per cent and 17 per cent since the mid-1990s and prevalence amongst women attending antenatal clinics has fallen slightly. Several urban areas, such as the capital Lilongwe, have witnessed a decline in HIV prevalence, although some rural areas have seen prevalence increase. Latest figures suggest a stabilisation of national prevalence at around 12 per cent (National Statistics Report, 2008).

Malawi, like most countries in East and Southern Africa, has been aggressive in ensuring adequate prevention and sensitisation messages are communicated to all people in the country. Governments, NGOs and the media have played an important role in ensuring that HIV and AIDS messages reached all corners of the country. The government has also been aggressive in promoting voluntary testing and within the Bingu administration, the President set an example by being tested for HIV together with other cabinet ministers. A number of orphanages have been established but with the growing numbers of orphans, these are insufficient. With the alarming increase in the number of HIV and AIDS orphans, most Malawians have resorted to strengthening the community networks systems with heavy reliance on extended families (Foster, 2005).

1.2.7. The situation of HIV and AIDS orphans

Nine of the ten countries most severely by HIV and AIDS are in Sub Saharan Africa: Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe. AIDS is the leading cause of
mortality among adults in this region. UNAIDS (2007) estimates that AIDS accounts for approximately 7 out of 10 deaths among adults aged 25 to 49 in the region.

These deaths from AIDS have left in their wake a growing number of orphans and vulnerable children across the Southern Africa region. The region has world’s highest proportion of orphaned children with the best available estimates suggesting that between 13 per cent and 15 per cent of children may be single or double orphans (UNICEF, 2006).

According to UNICEF (2010), by the end of 2010, there were approximately 15,700,000 AIDS orphans in Sub Saharan Africa. In Malawi, the number of orphans aged 0 to 17 has been estimated at 560,000 (UNAIDS, 2009). UNAIDS (2012) indicates that this figure rose to 612,908 in 2011. Figure 2 below shows the increase in orphans in Sub Saharan Africa from 1990 to 2010.

Figure 2: Number of orphaned children from 1990-2010

Source: UNICEF: 2010
Figure 2 above shows the growing number of orphans in the region. It can be seen that the trend is on the increase, implying that there are more children that require care from extended families. These figures only show the orphans as they require external care. However, the figures do not adequately reflect the magnitude of the problem, since they do not include children who are affected by HIV and AIDS who are living with parents who are ill or those in families that have taken on the additional burden of caring for additional children. This suggests that these children will soon be added to the figures above of orphans.

In 2010, UNAIDS modelling suggested that most countries in Southern Africa will continue to experience increasing numbers of orphans and vulnerable children due to HIV and AIDS over the next five years (UNAIDS, 2010) and Malawi would experience similar challenges.

Most literature has been written on the impact of HIV and AIDS in the community, prevention messages and support for orphans. Little attention has seemingly being paid to the negative impact caused by the epidemic and its intensive effect on the grandparents. Much is heard about the increasing numbers of AIDS orphans, both actual and expected numbers, and a growing need is frequently mooted for the establishment of more orphanages. Although the role and contributions of grandparents, particularly grandmothers, as caregivers are acknowledged, it is doubtful if there is much focus on the effect of the absence of the family unit in the upbringing of the children and the burden this has on the elderly. This research has discussed some of the contextual issues related to this study within the literature review and the research methodology, noting that there has been little documentation in this area.
1.3 PROBLEM STATEMENT

Several studies have documented the declining wealth of households as a result of HIV/AIDS (UNICEF, 2010). It is noted that where poverty and HIV and AIDS co-exist, children and the households are at risk of greater deprivation. Some of the notable challenges include decreased income, increased expenses, and higher dependency. As the number of orphaned children continues to increase, it is evident that they end up in the poorer households that cannot afford the same care and are becoming saturated (UNICEF, 2010).

It is reported that in Sub Saharan countries, including Malawi, the most preferred primary caretaker of orphaned children are grandparents (UN, 2003; UNICEF, 2010; HAI, 2003). Grandparents have taken up the children burdened with loss and supported them throughout their lives. Over the last 20 years, elderly people in Sub Saharan Africa have had devastating social, economic, health and psychosocial challenges due to HIV and AIDS that are under-reported if not unreported. The epidemic has slowly changed their roles to providers of especially medical care and education of orphaned grandchildren (UN, 2002).

Evaluation studies conducted in Zimbabwe (WHO, 2002) and Thailand (Knodel and Im-em, 2002) showed that older caregivers could face financial, physical and emotional stress due to their care-giving responsibilities. The AIDS epidemic not only puts more stress on older persons, but it also impoverishes them at the same time that they may need to be taken care of.

The example provided above for both Zimbabwe and Thailand suggests that there are increasing numbers of older men and women who are struggling to absorb the multiple impacts of HIV and AIDS on their families.
and households. Many old men and women are facing the task of providing for themselves, their sick children as well as their orphaned grandchildren just at the time when their incomes are decreasing (Help Age International, 2003). Like other Sub Saharan countries, Malawi has also suffered greatly due to HIV and AIDS as the elderly have become more vulnerable to the pandemic. However, the documentation of their challenges and needs has been unco-ordinated if not limited.

The scenario of HIV and AIDS and the elderly as discussed above suggests that older people in African households have taken up a new responsibility and their role has changed significantly. According to Nhongo (2004), traditionally the role of older people was to advise, direct and lead their families and societies in those practices, rituals and ceremonies that ensured their survival, existence and continuity. Generally, older people were involved in the socialization of the society and ensured attainment and passing of society knowledge, values and norms. However, with HIV and AIDS another dimension has been added. With ageing, older people are now key to the survival of an increasing number of orphaned and vulnerable children and those adults that are ill with AIDS in their old age (Nhongo, 2004).

Research done by Help Age International (2003) in Kenya and Zambia indicates that older people make up a significant proportion of the poorest of the poor and even without the added threats created by HIV and AIDS, many older people struggle to survive and suffer poverty, social exclusion and age discrimination (Help Age International, 2003). In Malawi, many older people have few forms of support outside their families. Pensions that exist in Malawi are only given to those who have had formal jobs in government and in some private sectors.

With the shifts in the social family system, there is a lacuna evident in documenting how adequately elderly carers (grandparents) are being
provided for in Malawi, specifically looking at Rumphi and Zomba districts. With the growing demands that this age group is facing, there is a need to better understand how adequate the support being provided to this group is, so as to ensure effective support to the children left in their care. Little has been documented on the challenges faced by the elderly who are looking after the children orphaned due to HIV and AIDS. Furthermore, there is limited research in Malawi on understanding the role of social protection to supporting the needs of the elderly especially those looking after orphaned children. This overall situation justifies the need for conducting this research that aims to examine the challenges facing the elderly looking after HIV and AIDS orphans.

1.4 PURPOSE OF THE STUDY

The effect of the HIV and AIDS epidemic is experienced most severely at the household level because it exacerbates poverty and the supportive caregiving systems of families. In attempting to be of assistance, uncoordinated and sometimes inappropriate actions are being taken to help vulnerable children. Elderly people (grandparents) have been regarded as part of the extended family and able to absorb the largest portion of the economic, social, and psychological costs of the epidemic on households as they have effective mechanisms to support the affected children.

The purpose of this study was to describe and explain the challenges faced by elderly people looking after children orphaned by HIV and AIDS in Malawi through livelihood approach and to understand the role of social protection in supporting the needs of the elderly to enhance their livelihoods. The livelihood approach has seen its contribution towards poverty reduction and is regarded as one of the development approaches that has moved away from conventional approaches towards poverty reduction with the focus of inclusive and people centred approach (Kranz, 2001). Complementing the study is the understanding of the role of social
protection towards elderly households. Scholars have linked social protection as part of social development (Midgley, 1995). Social development focuses on local community development with emphasis not only on economic development, but improvement in health, education, environment and standards of living. It is on this basis that the research aims to contribute to the body of knowledge by analysing elderly livelihood through livelihood lenses and supporting the elderly through social pensions as part of social development.

The research envisaged that a picture will emerge explaining how the HIV and AIDS pandemic has affected the social support system by focusing on its effect on the older caregivers, the grandparents. This study aims to provide a better understanding of the needs of the elderly when looking after orphaned children. This knowledge can be used by governments and other stakeholders as a basis for conducting further research on national and international policies that will support the survival of grandparents, aunts, siblings and orphans in the HIV and AIDS crisis. It is also hoped that African governments will take the voices of the elderly into consideration when developing policies.

1.5 OBJECTIVES OF THE STUDY AND RESEARCH QUESTIONS

1.5.1. Objectives of the study

The objectives of this study was to describe and explain the challenges faced by elderly people looking after children orphaned by HIV and AIDS in Malawi. With this, the research looked further at the role of social protection as one of the possible interventions to support this group. It is intended that the research will produce knowledge that may be used to provide information for Policy options based on the experiences from Malawi. This study was descriptive and explanatory in nature. The first part
is descriptive as it aims to understand the challenges facing the elderly in Malawi and describe them in detail, whilst on the other hand, the study is explanatory as it looks at understanding the implementation of social assistance programmes in Lesotho as a reference to explain the need of social pensions for the elderly households. In documenting the two sections the research takes on two distinct approaches, being phenomenology aimed at sharing the experiences of the elderly looking after orphans, and a case study that demonstrates the role of social pensions for the elderly.

1.5.2. Research questions

This study was guided by the following research questions:

What are the challenges faced by the elderly who are looking after HIV and AIDS orphans in Malawi?

The aim was to document the challenges that elderly people looking after orphans are facing. These were categorised into thematic areas – human, natural, physical, social and economic challenges based on the livelihoods framework. The information was taken from the elderly people, community members and the orphaned children to get a clear picture of the different challenges facing the elderly. By documenting this, the paper addresses the knowledge gap in consolidating the livelihood challenges of the elderly looking after orphans.

What social protection measures exist in communities to support the elderly who look after HIV and AIDS orphans?

Social protection has been recognised as an approach that helps to address the plight of vulnerable people. This question allowed the researcher to review the existing supporting mechanisms that are intended
to help elderly people looking after orphans, including, for example, social networks, community networks, support groups, institutions and government policies. By documenting this, the research was able to develop an overview of existing mechanisms that support the elderly and explore further what could be enhanced to support the elderly.

The research uses the example of Lesotho as it has implemented social pensions for the elderly and aims to support their needs. The aim was to propose social assistance as one of the recommended approaches to support the needs of the elderly.

How are the national policies and government interventions addressing the needs of the elderly looking after HIV and AIDS orphans?

This was aimed at documenting the process and challenges of the implementation of the government policies and interventions to support the elderly. The question above aimed at documenting the activities being undertaken by government to support the elderly. Arising from the responses, information emerged as to how governments could support the elderly through social protection interventions.

The research used the example of Lesotho which has implemented social protection, specifically social pensions to support its elderly group as a model of an intervention that governments can draw on.

Table 1 below on conceptualisation of the research process summarises the research problem, purpose statement and the research questions with the aim of sharing the linkages between the problem, purpose and objectives of the study. This was intended to ensure that the clear linkages between the three parameters are continuously understood throughout the research study. Furthermore, having the summarised table allowed the
researcher to have a clear focus of the issues that should be documented within the study without moving away from the scope.

Furthermore, Table 1 introduces the literature review, conceptual framework and research methodology that guides the understanding of the research question. This was aimed at sharing further linkages of other important areas for the study to demonstrate their relationship with the overall topic under review.
Table 1: Brief conceptualisation of the research process

<table>
<thead>
<tr>
<th>Research Problem</th>
<th>Purpose</th>
<th>Research Questions</th>
<th>Literature Review</th>
<th>Conceptual framework</th>
<th>Research Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is a growing number of HIV and AIDS orphans in Sub Saharan Africa and evidence indicates that grandparents are part of the extended family providing care (UNICEF, 2010) Grandparents have fewer economic resources than adults in prime working age and more often require external support. Also, because of their age, grandparents may not survive until children in their care reach 18; these children will again experience loss and a transition to new caregivers. In this regard, few studies have been done to document challenges faced by the elderly looking after orphaned children. Elderly people are the most vulnerable in the poverty line.</td>
<td>The purpose of the study was to explain and describe challenges faced by the elderly people looking after orphaned children.</td>
<td>What are the challenges (economic and social,) faced by the elderly who are looking after HIV and AIDS orphans in Malawi?</td>
<td>Statistics on the number of orphaned children. The role of extended families and the current state (Foster, 2005; WHO, 2002; UNICEF, 2010). Understanding of households and livelihoods (Carney, 1998; Davies, 1996). Livelihoods approach for households and Sustainable Livelihoods Framework (Chambers, 1999; DFID, 1999). The effect of HIV and AIDS on the livelihoods of the elderly.</td>
<td>Using the livelihoods framework to engage on the needs of the elderly and analysis of their challenges categorised in household assets being human, social, physical and natural assets.</td>
<td>Using qualitative research and taking interviews as the main tool to document the challenges facing the the elderly. Interviews conducted for elderly, orphans. Focus group discussions conducted for the community members where the elderly are part of, to understand their perceptions of the challenges faced by elderly. Key informant interviews with community leaders.</td>
</tr>
<tr>
<td>As the interest in social protection has risen, unco-ordinated efforts have been made to support the elderly through short term cash transfers in Malawi, however there has been little attention given to the role of sustainable social protection in supporting the elderly, specifically</td>
<td>The study explained and described the role of social protection as done in other countries (Lesotho) as an example of an intervention that could support the elderly looking after orphaned children.</td>
<td>What social protection measures exist in communities to support the elderly who are looking after HIV and AIDS orphans?</td>
<td>Understanding social protection, types and examples where implemented. Social protection framework and mechanism to support elderly (Devereux and Wheeler, 2002). Challenges of social protection (Cook and Kabeer, 2002) and challenges of the sustainable livelihoods approach (Scoones, 2009).</td>
<td>Social protection framework that categories social protection into distinct areas for the elderly in supporting their needs Namely social assistance, social services, social insurance and social</td>
<td>Case study approach documenting the operation of social pensions for the elderly in Lesotho, how it has benefited their needs, how it is being managed and the contributions to the needs of the HH. Semi-structured</td>
</tr>
<tr>
<td>Looking after orphaned children.</td>
<td>Children.</td>
<td>What is the role of governments in supporting the needs of the elderly.</td>
<td>Social assistance/pension documents/literature focusing on what is currently being done. Review of documents in Lesotho with a focus on sharing the implementation of the social protection programme.</td>
<td>Equity. The focus is on social assistance as contributing to the enhancements of livelihoods assets for the elderly.</td>
<td>Interviews with elderly and orphans. FGD with community members and semi-structured interviews with government officials.</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----------</td>
<td>---------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Little attention has been given to the extent to which international and local policies have been implemented to support the elderly people who are looking after orphans.</td>
<td>The study explored and documented the extent to which international and national policies have been implemented to support the plea of the elderly looking after orphans.</td>
<td>How are national policies and government addressing the needs of the elderly looking after HIV and AIDS orphans?</td>
<td>Review of international and national commitments on social protection. Review of policies related to social protection in Malawi and how they have been implemented in supporting the elderly. Review and document the experience of Lesotho on social assistance.</td>
<td>Using the livelihoods framework engaging on the role of the government and other stakeholders in supporting the elderly. The role of institutions as proposed in the conceptual framework.</td>
<td>Interviews with governments' representatives responsible for social protection intervention. Review of strategies and policies aimed at supporting the needs of the elderly.</td>
</tr>
</tbody>
</table>

Source: Own, 2012
1.6 STRUCTURE OF THE THESIS

Chapter One: The Situation of the Elderly
This chapter provides an overview of the study area by providing the contextual information to allow the research to be grounded in its location. The chapter further presents the background to the research on the challenges facing the elderly in Malawi, and it presents the research problem, purpose and objectives. The chapter summarises the research being undertaken and offers a brief overview of what the subsequent chapters will present.

Chapter Two: The elderly, poverty and household structure
In this chapter, the linkages between HIV and AIDS and household poverty are explained. It examines the elderly, and how their livelihoods are changing due to the demanding role they are playing to look after orphans. It will then explore the household livelihoods with the aim of presenting the basic needs of each household, namely human, social, physical, natural and economic needs. This is aimed at assessing how elderly households are coping within the vulnerability they experience.

Chapter Three: Social protection and elderly households
This chapter presents the definitions, models and possible lessons on social protection. Social protection interventions are proving to be a means of supporting vulnerable groups. The aim is to link this as the intervention that could support elderly households to uplift their livelihoods that have been impacted due to the effect of the HIV and AIDS pandemic.

Chapter Four: Conceptual framework-Social assistance supporting the elderly livelihoods
This chapter presents a model for the understanding of the needs of the elderly. It links the discussion on livelihoods and social protection and selects social assistance as the model for supporting the elderly. The
discussion will centre on social assistance as support for elderly livelihoods.

Chapter Five: Research methodology
In this chapter, the research methodology that guides the research is presented. It brings out the justification of using qualitative research as the method to guide the study and explains the interview processes.

Chapter Six: The situation and challenges of the elderly in Malawi
This chapter presents the analysis of the challenges facing elderly people looking after orphans in Malawi. It categorises these challenges into economic, health, physical, social and natural. It also presents the overall analysis of the situation of the elderly.

Chapter Seven: Analysis of social protection policies in Malawi
In this chapter, the research will analyse the various social protection policies as well as elderly policies in Malawi and how they support the needs of the elderly. It will present the implementation status of the policies and how they have been adopted to support the needs on the ground.

Chapter Eight: Social pensions for the elderly in Lesotho
The case study of Lesotho is presented which has implemented social assistance programmes for the elderly. This presents a model that could be followed by Malawi in supporting the needs of the elderly.

Chapter Nine: Reflection on the role of social protection and elderly livelihoods in Malawi
This chapter will analyse the challenges facing the elderly in Malawi and bring into perspective the role of social pensions as implemented in Lesotho. It will draw some commonalities and propose recommendations
based on the evidence of the challenges facing the elderly in the Rumphi and Zomba districts and share insights from the Lesotho case study.

Chapter Ten: Conclusion, Recommendations and issues for further research

This chapter summarises the overall research. The paper presented a brief background to the study, an overview of Malawi, and the legal, economic and social context. It will also bring into perspective the growing number of orphans in Africa and Malawi in particular with statistics from different sources with the aim of providing an entry point to the topic under study. The study will identify the contribution it has made to the body of knowledge and share recommendations for the study.

In the next chapter, the researcher shares the overall literature on the understanding of the elderly. This is followed by the changing dynamics in society in terms of elderly responsibility. The study then presents the literature around livelihoods to provide an understanding of what each household needs to show the required needs of elderly households looking after orphaned children.
CHAPTER TWO

THE ELDERLY, POVERTY AND HOUSEHOLD STRUCTURE

2.1. INTRODUCTION

This section presents the understanding and role of grandparents in broad terms by reviewing the academic literature on the role of grandparents, their livelihoods and social protection. It aims at bringing the evidence that the grandparents are indeed looking after orphans, and to assess their ability to do this based on their physical, mental and health status. The section will provide the definition of key terms for this study including elderly and extended family.

The research will then present the understanding of the traditional extended family in Africa, understanding of the older generation and then provide an analysis of their vulnerable conditions and of the policies that are supporting or meant to support grandparents to address the gaps that exist. It will further examine the livelihoods approach as a means of understanding the vulnerability of the elderly using the social, financial, human, physical and natural resource base as the foundation of holistic livelihoods of individuals. This is done to explore the challenges faced by the elderly holistically.

Chapter three presents the contributions of social protection to the vulnerable groups. Having understood livelihoods and how HIV and AIDS have affected community livelihoods, the researcher presents some responses that are meant to assist such groups. There has been a growing interest in social protection interventions internationally as a response to the needs of the vulnerable including the elderly. Chapter three explores the social protection framework with the aim of establishing
its role in supporting the elderly groups affected by HIV and AIDS. The two chosen areas guide the framework for the literature for this research.

2.2 THE TRADITIONAL EXTENDED FAMILY IN AFRICA

2.2.1 Understanding of households and families

Generally, families are social groups connected by kinship, marriage or adoption with clearly defined relations, mutual obligations and responsibilities (Amoateng, Richter, Makwane and Rama, 2004). Families can either be nuclear (a couple with or without a child) or extended (multi-generational) in nature. In most developed countries the most common nature of families is the nuclear type, while in developing countries like most countries in the South, the extended family is the most predominant (Amoateng, et al., 2004).

In most countries, families have always had productive, reproductive and protective functions (Besley, 2005). That is, families provide food and shelter, share domestic labour, distribute family goods and resources, socialize the young, make decisions regarding access to health and educational opportunities and transfer cultural and moral traditions from one generation to the next (Besley, 2005). The family also produces individuals fit for the society, hardworking, honest and considerate of others.

It needs to be acknowledged that families have evolved over time due to cultural, economic, political, social and technological influences. However, in most developing countries they continue to be an important safety net which is expected to protect members in times of crisis and shock (Foster, 2005). Such shocks include illness, death and divorce. Whilst the value of families is understood, in Africa the roles that different individuals play are distinct. The father is traditionally the head and provider whilst the mother
is the carer and nurturer within the family. Children grow up under the care of their parents and as such they are regarded as the immediate guardian for the child.

Having understood the different family contexts, it is clear that the only way to effectively protect, promote and enhance the health and well-being of young children is to improve the functioning of the care provided to children by those closest to them – caregivers and families (see Figure 3 below). When this intimate circle of care is functioning well, it can compensate for negative influences on children that arise in the wider environment. For example, in the original family, children in close and affectionate families who teach values to children of which they are proud, are much less likely to suffer the ill effects of poverty and deprivation than children who have families that are unstable, fight amongst themselves, and in which adults have little time or attention for young children. The model below shows the importance of having caregivers (parents) who could work as role models and provide for the children in their care. It has always been assumed that parents will take charge of this responsibility. Nowadays this care is being taken over by those who also want to receive care, changing the original model.
This model looks at child development within the context of the system of relationships that forms his or her environment. Bronfenbrenner’s theory defines complex layers of environment, each having an effect on child development. The interaction between factors in the child’s maturing biology, his/her immediate family/community environment and the societal landscape fuels and steers his/her development. According to this theory, changes in one layer will ripple throughout other layers (Bronfenbrenner, 1977; 2005). Within this model, grandparents are regarded as the next layer and not the caregiver, but rather the family.

The caregiver has been replaced with family networks as there is no parent to support the child in its development. How is this affecting the caregiver who is supposed to have an extended responsibility as well as the impact of this change on the children themselves? It is through this study that some of these questions will be answered through the review of challenges facing the elderly looking after orphaned children.
It must be clarified there are other theories that have viewed family networks in different forms. Such theories have included attachment theory led by Bowlby (1969) who profiled the role of the mother in relation to the upbringing of the child. He emphasised the relationship that the child has with the mother and did not dwell on the other networks that surround the family. Over time, he conceded that any child has different attachments including alternative carers such as aunts and grandparents (Bowlby, 1988). On the other hand, family systems theories look at the interaction of the different sets of layers as well as what people think of their relationships (Kruk, 1994). The family theories go beyond examining how the different layers interact and survive in different settings.

In illustrating the changing family dynamics, this research leverages the ecological theory and Bronfenbrenner’s as it suits the context of the extended families being presented in this research. The ecological theory is able to unpack the different roles and layers of support that are necessary to supporting children and how the absence of one layer has impact on the others.

Within all the family theories, it may be emphasized that a sense of belonging is integral to a family. A sense of community and culture is another essential feature that contributes to the development of children as highlighted in Bronfenbrenner’s theory. With HIV and AIDS, children no longer belong to the immediate family only, but move from one place to another. This movement and change affects their well-being. In this regard it is important to know if grandparents are coping and whether they are able to provide the care needed by the children for their development.

Generally, having a supportive environment where there is a positive climate and the availability of support and resources within a family and broader community context serve as a protective function in child
development. Having adequate and competent adults who serve as consistent role models is important in molding a positive attitude and adaptive coping for children. By making themselves emotionally and socially viable to the children, the caregivers help in developing strong moral values and principles to guide them through life and provide a structure for their dreams and aspirations. However, due to HIV and AIDS, there is a change in the model as the care being provided is from grandparents who are often also socially and economically challenged.

2.2.2. The extended family

Having understood the influence and relationship that children have with their immediate caregivers, it is important to understand the nature of families that exist and provide the needed care to these children. This allows the research to examine and assess the changes that are happening with family situations.

A well-known African proverb states that, “It takes a village to raise a child”, and encapsulates the wisdom embedded in African societies with regard to raising children. African communities are known throughout the world for their strong neighbourhood relationships and for embracing all children as communal responsibilities (Shimelis, 2007). This is what has defined the understanding of extended families in Africa.

The extended family safety net is still by far the most effective response to economic and social crises throughout Sub Saharan Africa. Members of the extended family assist each other socially, economically, psychologically, emotionally and financially (Foster, 2005:67). According to Foster (2005), such assistance most often takes the form of regular urban-rural, inter-household income transfers. When crops fail, family members in town purchase food for their needy relatives in rural areas. Equally true, when the situation is difficult in the urban areas, food is brought from the
rural homes where there are farms to produce for the families. In Malawi, most urban dwellers have their farm land in the rural areas where they normally would send fertilizer and employ cheap labor to work in the field. The strong family network is not only strong in African communities but also in Asia, Latin America and Europe. Traditional social security activities which allowed families and clans to support one another through difficult times allowed the vulnerable to access the needed support without any challenges (Kanyongo-male and Onyongo, 1984).

In the context of orphans, the situation has been regarded as complex and varies according to social setting. It is recorded that in Sub Saharan Africa there are at least 13 million children orphaned by AIDS (Alpaslan and Mabutho, 2005:276). Furthermore, the practice of adoption does not exist in most African countries as in the western sense, where it is legalized and formalised (Williamson, 2005). Even in the absence of parental death, in Africa, children could be looked after by foster relatives (Nyanguru, 2000). In most African countries, fostering by non-relatives remains a practice that is regarded as westernized hence it is not common. It is believed that there is no such thing as an orphan in Africa as relatives have always taken on the parenting of orphaned children (WHO, 2006).

The concept of extended family duty and responsibility in Africa was without limits. As stated by Foster (2005), even though a family did not have sufficient resources to care for existing members, orphans were taken in. The extended family was seen as a means of not only providing for the physical and nutritional needs of children but also as a way of introducing one to the cultural practices of that particular community (Ankra, 1993; Freeman and Nkomo, 2006). As stated by Shetty and Powell (2003), for most African communities the extended families together with the community support has often been highlighted as the model that has worked to ensure the survival of the orphans and vulnerable children. Most African countries have looked after their sick
relatives and taken over the responsibility of looking after orphans without any protocols or legal processes (Alpaslan and Mabuto, 2005).

However, the extended family which has proved so effective in the past is now becoming stressed as a result of both dramatic increase in the number of maternal and double orphans, as well as a reduction in the number of prime age caregivers, such as aunts and uncles (UNICEF, 2005). If the present rates of death among prime age adults continues, it is projected that this will result in distortion of the population structure of affected countries (Foster, 2005).

Even prior to the HIV and AIDS epidemic, the role of extended families and communities was in a state of flux. Foster (2005) has outlined some of the changes that have taken place which has weakened the kinship. He indicates that labour migration, urbanization, formal education and even increased life expectancy and family size contributes to weakening the role that the extended family used to have. Families have begun to adopt the western style of living (Maes, 2003). However, the impact of HIV and AIDS on the families has now reversed the situation with value being placed on the role that extended families were playing in the past. Table 2 below indicates the changes.

These changes show that African communities have gone through transformation which has affected the kin networks that used to exist in the past (Ainsworth and Dayton, 2003). Labour migration has created women-headed households, leaving communities exposed to supporting different families (Barnet and Blaikie, 1992). Furthermore, the introduction of formal education has created a new dimension of what a family should be able to do as well as creation of new forms of networks. Table 2 shows some underlying changes that have occurred and then brings into context the contribution of HIV and AIDS in changing the family dynamics.
Table 2: Environmental and social changes and their impact on the extended families

<table>
<thead>
<tr>
<th>Change</th>
<th>How it has weakened extended families</th>
</tr>
</thead>
</table>
| Labour migration, urbanization and cash economy | Reduction in the frequency of contact with relatives  
Social and economic dependence; possessions are perceived as personal property and no longer belong to extended families |
| Increased life expectancy and family size   | Impossible for an extended family of three or four generations to reside together. Diminishing availability of land makes it difficult for large families to be economically independent through subsistence agriculture |
| Formal education                            | Education about social values occurs through schools and interactions of children with their peers, rather than through traditional mechanisms, lessening the ability of older people to exert social control over children |

Source: Adapted from Foster (2005) Safety nets for children affected by HIV and AIDS in Southern Africa

The majority of vulnerable children are now being cared for by extended families (Alpaslan and Mabutho, 2005). Nowadays, it is the networks of kin that constitute an extensive safety net for vulnerable children. In most communities in Africa, the children are now under the umbrella of uncles, aunts and even siblings (Gopane, Makiwane and Shneider, 2004). However, this is a system of protection that is under strain as it has taken over unplanned responsibilities. The strain arises from the increasing stresses and destitution associated with the AIDS epidemic, which is negatively affecting family networks and communities (WHO, 2006). Children’s well-being and their emotional, social, health and educational outcomes are dependent on supportive families and communities (Shatz, 2007). In turn, supportive and stable families and communities are the product of social and economic participation and empowerment on the one hand, and enabling policies and institutions on the other hand (Ainsworth and Dayton, 2003).
As the traditional practice of inheritance by uncles and aunts has lessened, it has been replaced by alternative safety nets, with care provided by grandparents or other siblings (WHO, 2006). Grandparents agree to take in orphans in most cases when other relatives refuse (Nel, 2007). As much as this provides remedy, the ability of many elderly people to protect and provide for children in the long run without any support is limited (HAI, 2001).

As much as the extended families practice has risen in Africa, it needs to be acknowledged that a similar pattern has emerged in developed countries, mostly Europe and America. It is reported that in the United States, the proportion of children living with grandparents has risen from 7 per cent in 1991 to 11 per cent in 2009 (Kreider and Ellis, 2011). This is mostly attributed to divorce and death in the family. According to the study done by Kreider and Ellis, (2011), it was noted that children in this skipped generation suffer from physical and health problems. Furthermore, the grandparents in these skipped generation arrangements were reported to suffer from problems such as depression, social isolation and poverty.

This section has examined the role of extended families with the aim of understanding the social networks with regard to the upbringing of children. It is clear that extended families are playing a greater role due to the effect of HIV and AIDS. It needs to be acknowledged that within extended families, there are other factors that determine how the families interact and these include whether one is a patrilineal or matrilineal society. These two systems and possible implications for the study are explained below.
2.2.3 The role of patrilineal and matrilineal societies

Within the family context there are principles that define family lineage which have implications on how care is provided to children. Both matrilineal and patrilineal kinship exist in Malawi and these have implications for how households cope with death, illness, orphanhood and inheritance. This section explores these two systems and implications for this study.

Generally kinship is recognised in many different ways across cultures around the world. In most cases, descent is traced through a single line of ancestors, whether through the mother or father (unilineal descent) (Tew, 1950). The two basic forms of unilineal descent are patrilineal and matrilineal, depending on whether descent is traced through a female or male respectively (Mtika and Doctor, 2002). In patrilineal societies, children are considered to be part of their father’s kin group and not of their mother’s. Family kin membership is then passed by male children to their own children.

In matrilineal societies children are part of their mother’s kin group and only female children can pass kin identity on to their offspring (Marwick, 1952; Phiri, 1983; Tew, 1950). The existence of these two approaches and in some instances co-existence in the same area between different ethnic groups has interesting economic implications in that they involve substantial differences in social organization as well as transmission of property (Phiri, 1983). Managing these dynamics is crucial as it has implications for how issues are interpreted across the different sectors.

Patrilineal systems of descent are practiced in the northern region of Malawi and in the lower Shire River valley far in the south. When a woman marries, she goes to stay with her husband in his home village (Peters, 1997, Peters, 2010). When she dies, she is buried there. Marriage in a
patrilineal system also involves the transfer of *lobola* or bride-price from the husband’s family to the woman’s family (Mtika and Doctor, 2002). A number of reasons have been given for the payment of *lobola*: compensation to the bride’s family for the loss of her companionship and labour, making of the children born out of that marriage full members of the husband’s family and his clan (only if bride-price is paid in full) and recognition of the man as the legitimate husband of their daughter (Mtika and Doctor, 2002). In this system, sons inherit their father’s property and in some instances women are denied any property rights to land, livestock, resulting in the woman’s economic dependency on men in the family (Berge, Kambewe, Munthali and Wiig, 2013).

This type of arrangement has implications for coping mechanisms and strategies. If a husband dies, the woman may choose to remain in her husband’s home where the family will be taken care of. In the event that she goes, the children are automatically taken care of by the husband’s family. However, this is one of the areas that also practices property grabbing, hence the husband’s family has much influence over his property and might inherit it even without looking after the children, who are later taken in by the grandparents. Furthermore, when the man dies, the community regards the children as theirs, hence the role of the woman is reduced as the children are seen as half orphans.

On the other hand, in the southern and central parts of Malawi, the matrilineal system is practiced mostly among the Chewa, Lomwe and Yao tribes. Under the matrilineal system, a family is an integral part of the wife’s lineage rather than the husband’s (Fortes, 1987; Richards, 1987). Upon marriage, the husband goes to live in the wife’s home village. Domestic authority is exercised by the wife’s brother who has control over his sister’s children and land under their care (Hatcher, Meggiolaro and Santonico-Ferrer, 2005). In this context, kinship and inheritance is traced through the maternal line and in general children belong to their mother
and her clan (Richards, 1987). Husbands/fathers play a minimal role in their guardianship responsibilities. Husbands/fathers are sidelined not only in guardianship responsibilities but in succession and inheritance processes as well as social and economic activities. Succession and inheritance follow the maternal line and the husband’s/fathers’ social and economic activities are significantly controlled. For example, husbands/fathers produce their crops on land allotted to them by their wives but have little control over the use of what they produce (Fortes, 1987).

These observations suggest a bias in wealth flow in favour of maternal relatives in the matrilineal kinship system. It is thus expected that the middle generation would be transferring their money and goods to maternal kin (mothers, uncles and aunts) more than paternal kin (fathers, uncles and aunts) (Doctor and Mtika, 2002). In this regard, the maternal grandparents have more responsibilities regarding the upbringing of the children in the event of the death of the parents. In the event that the woman dies, the community expects the man to go and live with his own people leaving the children in the care of the wife’s family.

Having noted this distinct difference, it is important that this study documents challenges facing the elderly from both systems to establish whether there are any distinct differences in challenges facing the elderly as they raise orphaned children. The understanding of the culture difference might have implications for how children are raised in the two different scenarios.
2.3 UNDERSTANDING THE ELDER (GRANDPARENT) IN THE CONTEXT OF THIS STUDY

2.3.1 Definition of the elderly

Having presented the family context and differences in family alignments, this section is aimed at defining and presenting the understanding of the elderly. This will be followed by an explanation of the role of the elderly in Africa in the context of the changes that have happened over the past years.

To begin with, it is important that the definition of elderly people be understood within the scope of this study in order to direct the objectives of the study. There are different understandings of who the elderly are, depending on the social setting, and there are many factors that complicate the issue. However, as much as there are various definitions, there is no general agreement on the age at which a person is considered to be old (WHO, 2006).

The United Nations defines older people as those aged 60 years and above. This simple definition does work in Western countries but presents a lot of challenges in Africa. Some of the notable challenges have included that most elderly people do not know when they were born and tend to use events to determine their age. For example, in Malawi, most elderly people determined their dates based on the time when there was the Second World War, drought or a certain crisis. Furthermore, societies define their older people differently. In some cases, these definitions are based on what people have achieved in life, their wealth, number of wives, and number of grandchildren, so people are respected and considered as old based on these achievements (Nhongo, 2004).
In certain areas, elderly people have been defined according to physical features, such as colour of hair, the stoop while walking, or a wrinkled face. This has also included the knowledge one has of important events, rituals and traditional processes (Nhongo, 2004). Retirement ages are also used to define older people and in most countries in Africa they range from 55 to 65 years of age. In Britain, as far back as 1875, the friendly society act noted the definition of old age as, “any age after 50”, yet pension schemes mostly used the ages of 60 or 65 to determine eligibility (Roebuck, 1979).

Based on this scenario, issues regarding the definition of older people in Africa remain challenging. However, the Organisation of African Unity (OAU) policy framework and plan of action on ageing recommends that Africa also uses the United Nations (UN) definition of 60 to define its older people. This simplifies operational issues within a broader context. In such a case, as much as there are the above challenges, this research uses the United Nations and African Union policy frameworks and defines older people as those aged 60 and above.

2.3.2 The changing role of older people

Generally, the social and demographic changes that have happened over the past years have shown the importance of the elderly in our society, whether Western or in Africa. According to Szinovacz (1998a), research on grandparenthood as a distinct theme emerged in the late 1940s and early 1950s. Between this period, grandparents were seen as rescuers and supporters of children whose parents died during the wars. They appeared to be the majority providing support to the children (Szinovacz, 1998a).

Over time, and after the 1950s, the perceptions of grandparents within the various societies, and particularly in Europe and America, started
changing. With the primacy of nuclear family and the related notion of
generational dependence, grandparents and the elderly people were
looked at as unimportant family members, (Bernal and de la Fuente
Anucibay, 2008:68). Furthermore, the study of older people as dependent
and disengaged within the social gerontology literature might have
contributed to how the societies perceived grandparents and elderly
(Sninovacz, 1998a).

Regardless of having a positive image, it is reported that in the 1930s,
1940s and 1950s in most European countries, grandparents were also
seen to have a negative influence on their grandchildren. For example,
Smith (1991) cites various studies during this period which saw the
negative influence of grandparents on grandchildren; this included the
following titles: The grandmother: A problem in child rearing (Vollmer,
1937); Grandma made Jonny Delinquent (Strauss, 1943); and The role of
grandparents in children’s behaviour problems (Borden, 1946).

On the other hand, historically in the African culture the elders provided
care to the children who in turn provided care to them in their old age. As
stated by Nhongo (2004), the more children one had, the more chances
there were of receiving better care when one was no longer able to
provide for himself/herself. This was to ensure that everyone was taken
care of regardless of the situation. In many traditional African societies an
individual’s social status rose in relation to his/her age. At the level of the
family, a person’s status was enhanced when he/she ceased to be a child
and became initiated into adulthood (Moore, 1971). The new status gave
an individual limited access to certain privileges originally not available to
him or her. Following this, when the individual become older, he or she
became a well-respected person with wisdom, experience, power, control
over family property as well as ritual power (Syder, 1981). Most
communities respect this progression as both custom and religion
supports this principle. Hence being elderly in Africa was seen to carry many valuable benefits.

It has been argued by some writers that the transition from indigenous Africa to colonial occupation weakened the social and economic arrangement which formerly had guaranteed social security, not only for the elderly but also for the entire community (Yeld, 1966; Moore, 1978; Snyder, 1981). The introduction of the monetary economy, new religions and new forms of social and political control, weakened the dominant position of the elderly in many parts of Africa, leading to their loss of authority, political power and economic security (Moore, 1975; Snyder, 1981).

In the traditional African settings, roles and relationships were clear and understood by each generation. It was the role of older people (grandparents) as the custodians of the traditions and cultural practices to pass this knowledge on. Such practices have included traditional ceremonies, beliefs, and clan identity, to mention a few. Older people had a special place in families and communities to guide, advise and pacify (Nyanguru, 2000). Giving the example of Malawi, it is the elderly who lead in all traditional cultural practices, including funerals, initiation ceremonies and traditional marriages.

It needs to be acknowledged that with the advent of formal education and churches, these new institutions subsumed the central role of older people in socializing families (Nhongo, 2004). New values and norms redefining the way families related with one another were ushered in to the African population. Older people began to be viewed negatively, their status diminished and their roles undervalued (Nhongo, 1998; Nyanguru, 2000).

The situation has now significantly changed, due to the impact of HIV and AIDS, and older people are being requested and required to fill the gap left
by other demographic groups in providing for care and support to family members (Ainsworth and Dayton, 2003). At the time when they are normally expected to be the recipients of care and support, many older people have no option but to become ‘Africa’s newest mothers’ (Nhongo, 2004). It is clear that older people, mainly older women, are providing economic, social and psychological care and support for a large number of family members (Alpaslan and Mabutho, 2005), caring for the sick, the dying and the children made vulnerable due to the HIV and AIDS epidemic. Their roles and responsibilities have changed once again from the traditional roles they used to have (Fouad, 2004).

Generally, children who are orphaned are not necessarily in need of additional assistance other than the stability, support and care provided by alternative caregivers, especially if this takes place in a close and affectionate family environment (Drew, 1998; Foster, 1996). A recent study in Malawi focusing on the role of communities in supporting orphans found that community members did not view all orphans as vulnerable. Many praised the traditional support structures that enabled orphaned children to be taken in by the extended family, grandparents inclusive. However, at the same time, they indicated how these traditional support structures were being both overburdened and broken down with the increasing adult mortality rate caused by HIV and AIDS (Cook, 1998).

In supporting this view, a number of studies have been conducted over the years on the effect of HIV and AIDS on communities. The indications are that most adults who are sick return to their parent’s homes when they are no longer able to manage by themselves (Ssenengozi, 2009). In a study by Ntozi (2001) in Uganda, parents were cited as the principal caregivers of AIDS patients. The older people take upon themselves the responsibility of caring for their children, thus providing physical, economic and social support (UNAIDS, 2004; HAI, 2007). As they take care of the sick, they no longer have time to participate in income generating activities and also
need extra time for those who are sick, such as consulting traditional healers (Cook, 1998). They then take up caring for the orphans when AIDS overcomes their households.

Furthermore, according to a study done by UNICEF (2003) in South Africa, Namibia and Zimbabwe, 60 per cent of orphans are living with their grandparents, while in Botswana, Ghana, Tanzania, Malawi and Uganda, 50 per cent of orphans are living with their grandparents. Other studies have been carried out to indicate the care being provided by grandparents. For example, a study by Jazdowka (1992) carried out in Zimbabwe found that 90 per cent of those caring for orphans were older people and most of them were women. In Tanzania (Urassa, 1997) it was found that 143 people out of 292 people caring for orphans were older than 60, suggesting the elderly group. In Kenya, a study by K’oyugi and Muita (2002) found that older people were not only taking care of children orphaned by AIDS but orphans in general. A WHO survey conducted in Zimbabwe in 2001 found that 71.8 per cent of those providing care to the sick and orphans were over the age of 60. In Tanzania, Ainsworth and Dayton (2002) found patterns similar to those presented in the WHO study in Zimbabwe.

Furthermore, an analysis of the demographic and health survey data from Sub Saharan African found that orphaned children were more likely than others to live in grandparent-headed households (Bicego, Rustein and Johnson, 2003). UNAIDS in its fourth global report has acknowledged the fact that a large number of orphaned and vulnerable children are being taken care of by older people. Studies by Help Age International in South Africa indicate that the state pension older people are receiving is important in providing support to family members and sustaining many households (HAI, 2005).
Few studies have documented the challenges facing the elderly and elderly concerns with regard to caregiving. A WHO investigation in Zimbabwe, Ghana, South Africa and Tanzania suggested that the role elders were playing in looking after children could lead to distress for the elders (Agyarko, Madzingira and Mujuru, 2002). In South Africa, a death in the household was reported to have impact on the living arrangements of the elderly especially their economic well-being (Ogunmefun and Schatz, 2006). Furthermore, in a related study in Uganda, elders reported financial challenges, distress and health problems as being some of the issues they faced as they took up the role of caring for orphans (Sengozi, 2007). Similarly, Kakooza and Kiumuna (2005) indicated that among elder-headed households in the Kayungu district in Uganda, most had three children who were of school-going age, implying the need for educational support as well.

Unfortunately the role and support provided by the older people within communities is often overlooked due to a disproportionate emphasis on the older people as recipients of help and support rather than being the contributors of help (Hoff, 2007). In African as well as in Western countries, elderly people are coming in to provide for the financial and emotional care of their grandchildren. As Hoff (2007) explains, the transfer of money, time, care and other forms of support is shifting from grandparents or the elderly to the young generations.

International research indicates that the number of children that are being cared for by their grandparents has increased. Most children are reaching adulthood with their grandparent still alive and actively engaging in their lives. Whilst the changes in family sizes, for example, with most households preferring to have fewer children, implies that the grandparents have fewer grandchildren, the role they are playing in their lives still remains significant. Lowenstein (1999) observes that the shape of families is shifting from horizontal to vertical, where the size of
generations is becoming smaller but the number of living generations is increasing (Lowenstein, 1999:398).

Surprisingly, little has been written about the role grandparents are playing in their families considering the changes in the dynamics of families. The governments of most African countries have not prioritized the collection of statistics on grandparents and grandparent-headed families with their growing needs. Based on this analysis, it is clear that extended families, kin and communities remain the principal support for children affected by HIV and AIDS in Sub Saharan Africa. It may be assumed that the elderly group is indeed playing an important role in taking care of the sick, the orphans and family members in general. However, it is important to assess the challenges they face and whether there is adequate support from government and other stakeholders.

Many African countries find that families and communities absorb orphaned and affected children as long as their meagre resources allow for this (Family Health International, 2001). However, older carers are more prone to accepting the care of their grandchildren. This group might face difficulties responding to the economic, health and psychological needs of children and may suffer severe resource constraints. In addition, the grandparents themselves may die, leaving children who have experienced multiple losses with limited support structures.

Generally, the family structure and function is changing as a result of the HIV and AIDS epidemic. Emerging family forms include families with fostered children of kin, elderly household heads with young children, large families with unrelated children, single parent households and child-headed households (Hunter and Williamson, 2000; UNICEF, 2010). All these family forms need to be supported because they provide care for vulnerable children and other dependent members.
As the grandparents age or experience deteriorating health, the situation in which the elderly provide childcare is reversed and grandchildren may increasingly care for the frail grandparents (Foster, 2005). In situations when the grandparent die or move in with relatives because of illness, the possibility of the children being left alone becomes high. The need to document the challenges facing the elderly is thus important.

2.4. THEORETICAL FRAMEWORK- THE LIVELIHOODS APPROACH

Generally, the worst effects of HIV and AIDS have been felt at the household level. It has affected the livelihoods of the most vulnerable groups, including the elderly. The epidemic deepens poverty for individuals and increases inequalities at every household, community, regional and sectoral level. Over time HIV and AIDS has undermined efforts towards poverty reduction strategies, income and asset distribution, productivity and economic growth (Barnett and Whiteside, 2002). While poverty has been understood from different angles, this section will explore the livelihoods approach as the basis of the theory in understanding elderly households.

This section will present the first part of the theoretical basis of this study and will pay particular attention to the sustainable livelihoods framework as presented by Chambers and further utilised by DFID. The broad understanding of livelihoods and the impact of HIV and AIDS on the livelihoods of the elderly will be explored. In finding the theoretical lens, the chapter will explore in detail the sustainable livelihoods framework that categorises households based on their vulnerability, household assets they possess and livelihood outcomes as the holistic nature of understanding the basic needs of every household.

In building on this theoretical foundation, chapter 3 will present another theoretical foundation based on social protection. The combination of the
livelihoods approach and the social protection approach will lay the theoretical foundation of understanding the elderly household in Malawi.

2.4.1 Definition of livelihoods

The concept of livelihoods has gained wide acceptance as a valuable means of understanding the factors that influence peoples’ lives and well-being, particularly those of the poor (Carney, 1998; Davies, 1996). Livelihoods debates have emerged from three decades of people attempting to define poverty, the root causes of poverty, and how to address the challenges of poverty most effectively (Ashley and Carney, 1999). Arising from this, the concept of livelihoods has become popular as a way of understanding and analyzing the economic activities of poor people and how they could be supported to survive.

Livelihoods perspectives start with how people in different places live. A variety of definitions are offered in the literature to understand the meaning of livelihoods and they include, “the means of gaining a living” (Chambers, 1999:vi) or resources used and the activities undertaken in order to live (FAO, 1999) There are many different definitions of livelihoods; Carney (1998) presents one based on the work of Chambers and Conway (1992) which brings simplicity. They define livelihoods thus:

A livelihood comprises the capabilities, assets (including both material and social resources) and activities required for a means of living. A livelihood is sustainable when it can cope with and recover from stress and shocks and maintain or enhance its capabilities and assets both now and in the future, while not undermining the natural resource base (Carney, 1998:4).

According to this definition, it is clear that the livelihoods of individuals are complex and diversified. People combine different activities in a complex
portfolio of activities to earn a living. Unlike the understanding of the previous conventional approaches to rural development, which looked at defined activities to promote rural development, namely agriculture, wages, employment, labour, small scale enterprise to mention a few, the livelihoods approach looks at more complex terms including coping, adaptation, improvement, diversification and transformation (DFID, 2000; FAO, 2000; Scoones, 2009).

Chambers and Conway (1992) articulates that the livelihoods approach has challenged the single sector approaches of supporting vulnerable people with the aim of solving complex rural development problems. It promotes the understanding that people need to look at the real world and try to understand the needs of people from the local perspective. If any government or agency is keen to respond and support the needs of the vulnerable, their responses should align with the local realities and avoid imposing artificial categories on people’s realities. In this regard, there is a need to emphasise the holistic needs of vulnerable groups and address these needs realistically (Chambers and Conway, 1992).

In this regard, the livelihoods approaches which do not belong to a particular discipline provide for bridging the divide and allowing for different people to work together across natural and social sciences (Scoones, 2009; Morse, McNamara and Acholo, 2009). This approach allows economists, agriculturalists and physical planners to consolidate their approaches. As livelihoods approaches focus more on understanding complex and local realities, they become an ideal point for participatory approaches to inquiry and a basis for support.

The overall objective of livelihoods discussion is to allow for the understanding that survival for poor people depends on multiple factors interacting together simultaneously by different family members taking up
different opportunities that build that particular household. As Chambers (1997) observed:

They maintain a portfolio of activities. Different members of the family seek and find different sources of food, fuel, animal fodder, cash and support in different ways in different places at different times of the year. Their living is improvised and sustained through their livelihood capabilities, through tangible assets in the form of stores and resources, and through intangible assets in the form of claims and access (Chambers, 1997:163).

It is clear, therefore, that the survival of every household depends on multiple players and factors (Morse, et al., 2009). Through this, the development of the sustainable livelihoods framework was appropriate with its focus on dealing with the varied needs of households.

2.4.2 Origins of the Livelihoods Approach

The livelihoods approach has its intellectual origins in a wide variety of disparate fields of analysis that range from micro-level analysis of how rural people earn a living, cope and survive in the face of shocks and disasters, to farming systems research and peasant studies (Sousson, Blaikie, Banginski and Chadwick, 2000). Participatory development later followed a parallel course and has built on the work of Chambers (1983, 1993) and many others and is one of the mainstream approaches to development.

Some scholars believe that the livelihoods approach started with the work of Chambers and Conway with their influential paper of 1992. However, Scoones (2009) presents the history that goes back 50 years to where a cross-disciplinary livelihoods perspective influenced rural development thinking and practices. One example presented by Scoones (2009) is the
work of the Rhodes Livingstone Institute in Zambia, where a collaboration of ecologists, anthropologists, agriculturalists and economists investigated the changing rural systems and related development challenges (Fardon, 1990). Through the engagement of the various disciplines, they were able to understand the needs of the rural people.

Fardon (1990) presents this work as an example of a livelihoods approach. While acknowledging that this work did not dominate development thinking, it was the modernization theories that influenced the development focus. Policy advice was increasingly influenced by professional economists rather than rural development generalists and field-based staff (Scoones, 2009). However, during this period the Marxist scholars, particularly in the field of agricultural economics and geography, offered nuanced views on capitalism and post-colonial formation at macro level. Village studies, dominated by economists, were another alternative to rural development studies. These were all studies that looked at livelihoods though not termed as such (Scoones, 2009).

Building on this work, the household and farming systems studies drawing on village studies work became an important part of development work in the 1990s (Mock, 1996), particularly with the focus of intra-household dynamics (Guyer and Peters, 1987). According to Scoones (2009), Conway (1985) built on these studies with agro-ecosystem analysis and Chambers (2008) on rapid participatory rural appraisals, which expanded the methods and styles of field engagement.

Building on village studies, household economics, farming systems research, agro-ecosystem analysis and rapid and participatory appraisal offered insight into how complex rural livelihoods is and how it interacts with the environment that includes political, economic and environmental processes. The emergence of the sustainable livelihoods approach began
to link the various aspects to better understand the needs of the vulnerable groups (Barrientos, 2010).

Central to this process was the need to understand poverty and find mechanisms to support the most vulnerable groups in the rural communities. Poverty and development is not just about assets owned or goods and services consumed. Other non-material factors such as security, health, education, civil rights and culture are central to the quality of life (Sousson, Blacke and Baginski, 2000; Barrientos, 2010). The World Bank has defined poverty in its simplicity as being hunger, lack of shelter, being sick and not able to see a doctor, not being able to go to school and not knowing how to read. Poverty is also not having a job, feeling fear for the future, or living one day at a time. Poverty is losing a child to illness brought about by unclean water. Poverty is powerlessness, lack of representation and freedom (World Bank, 2010).

In linking poverty and livelihoods, Sousson, et al., (2000) observes that poverty is relative as it depends on the specific characteristics of the time and place where people live. In this regard, each community defines their livelihoods in relation to the time and place where they live, and their needs will thus differ from others based on this parameter. Additionally, Sousson, et al., (2000) indicates that poverty is dynamic as people and communities move in and out of poverty, and the specific form that poverty takes changes over time (Barrientos, 2010).

The different trajectories of change that households experience, and the factors that define the vulnerability context within which livelihoods exist, are important to understand poverty and livelihoods (Morse, et al., 2009; Chambers and Conway, 1992). Change can be seen in different contexts, for example, due to the HIV and AIDS pandemic, the situation of the different stakeholders may have changed (Seeley, 2002). The elderly,
who in most cases are seen as the most vulnerable group, are now looking after orphans.

Therefore, in order to understand the challenges faced by the elderly in supporting orphans and vulnerable children, the need to understand the livelihood strategies and vulnerability of the poor as the starting point is of paramount importance. It is assumed that the poor and vulnerable will always behave in a strategic manner in negotiating their livelihoods. On the other hand, it is important to note that most vulnerable groups, including the elderly, require resources in order to compose their livelihoods and also require institutions that support them, which are the principles around the sustainable livelihoods approach.

There are a number of studies that have borrowed the livelihoods approach to understand household poverty in the context of HIV and AIDS, including Seeley, (2002) and Stokes, (2003). Both these studies present the need to understand households holistically so as to understand the extent of poverty in that particular household. Other studies have examined only a few aspects within the household livelihood, including Ainsworth and Over (1992), Cuddington and Hancock, 1993; Craft and Haacker, 2003). These studies touched on some aspects of household livelihoods but did not go deeper in applying the holistic approach. In order to understand the challenges of the elderly looking after orphans, this study borrows the DFID framework, namely the Sustainable Livelihoods Framework (SLF) that examines in detail the needs of each household. The section below explains the selection of this framework as the best mechanism in seeking to understand household poverty and needs.
2.5 SUSTAINABLE LIVELIHOODS FRAMEWORK AND SUPPORT FOR THE ELDERLY CARING FOR ORPHANS

In trying to understand livelihood needs and poverty, DFID has developed a framework called the Sustainable Livelihoods Framework (SLF). This model presents the basic dynamics of livelihoods, something that is inevitably complex given the different factors that influence livelihood choices (Ellis, 1998). However, it is noted that people live within a set of contentions and relationships. The extent to which a livelihood is sustainable is determined by the interaction of several forces and elements. It is further stated that the framework is based on the understanding that there are multiple influences, multiple actors, and multiple strategies, hence a framework should be holistic in nature in understanding the needs of the poor (Sousson, et al., 2000).

This framework has been used by various actors over the past decades, including the Department of International Development (DFID) in the United Kingdom (one of its most affluent supporters), the United Nations Development Programme (UNDP), as well as non-governmental organizations like Oxfam, World Vision International and CARE (DFID, 1997; Carney, et al., 1999). The core within this framework is the understanding that a household livelihood is dependent on four interlinked dimensions: livelihood assets, vulnerability context, livelihood strategies, and transformation structures and processes.

Additionally, the framework has been defined by its characteristics of being dynamic and understanding that change is complex, and that there are cause-and-effect relationships that occur in the lives of poor people (Morse, et al., 2009). However, as one understands the changes, there is a need to look at the strengths that the poor already have and build on everyone’s inherent potential (DFID, 1999). This is a framework solely aimed at analyzing poverty, people’s access to resources and their diverse
livelihoods activities, and the relationship between relevant factors at micro, intermediate and macro levels (Barnett and Whiteside, 2000).

In trying to understand the Sustainable Livelihoods Framework, it is important to keep in mind that this framework looks beyond poverty and discusses a number of principles and factors, (Narayan-Parker, Patel and Schafft, Rademacher and Koch-Shulte, 2000). Formerly, conventional poverty was measured based on income, consumption and nutrition, but further factors that are taken into consideration in current discourse include access to land, water, credit or education, vulnerability to natural disasters, political rights, physical safety and social relationships that provide economic security and social well-being (Narayan-Parker, et al., 2000).

Secondly, it is emphasized within this framework that poverty is not static; those who are poor and vulnerable today might not be poor tomorrow (DFID, 1999). Furthermore, in this same manner, the assessment of who is poor is relative, based on the understanding of the community and not on the scholarship. As such, external standards to self-perception by local communities on who is poor and what poverty means should be central in the understanding of livelihoods (Narayn-Parker, et al., 2000).

The SLF recognises people themselves, whether poor or not, as actors with assets and capabilities who act in pursuit of their own livelihood goals. This is a genuine aspect since, in most cases, poor people have always been seen as passive victims or recipients of government policies and external aid (Adato and Meinzen-Dick, 2002). The SLF consists of a number of key elements: livelihood assets and activities; vulnerability and coping strategies; policies, institutions and processes; and livelihood outcomes as key areas that define the livelihoods of poor people. These are explained further below.
To begin with, to sustain a livelihood for a household, one needs to acknowledge that people draw on a set of capital assets as a basis for their livelihood (DFID, 1999). Carney (1998) identifies five assets that are important for individuals to address their needs: human, financial, physical, natural, and social assets. These capitals allow individual households to gain access to systems, namely the resource base, the financial system, and society, through which the assets are produced (Koestle, 2002). It must be examined how the elderly are facing the challenges that result from looking after orphans, and how their asset base is being protected. The extent to which productive assets are being eroded to support the needs of orphans is an important aspect that will be further explored in this research.

Based on the shifts experienced by households as a result of the HIV and AIDS epidemic, it is clear that there are different choices being made by the households that are absorbing the orphans. As they make these livelihood strategic choices, they may move to selling livestock, moving houses, reducing meals, or withdrawing children from school (Scoones, 2009). Livelihood strategies are categorised in different forms, that is, some are reactive whilst others are proactive (Devereux, 1999). All these are critical typical examples that the elderly might make in supporting the children in their care. As they opt for this type of coping mechanism, there is a need to examine the challenges they face and the impact of these on their continued well-being as well as that of the entire household.

According to Sousson, et al., (2000), as households make different choices, they do what is called livelihood activities where the household could start growing crops, or engaging in provision of casual labour to generate income for the household. As they get money in, it is presented as inputs into the livelihood activities, social payment of taxes, invested or consumed. Linking this to the topic under study, it will be useful to explore
the extent to which the elderly are able to engage in such livelihood activities to sustain their livelihoods.

It must be acknowledged that many local and external factors will influence the livelihood of the households and include markets, the physical environment, and the social and political context (Scoones, 2009). These features are inherently dynamic and livelihoods are vulnerable to shocks and trends (HIV and AIDS, drought, floods), known as the vulnerability context. Vulnerability context describes the trends that can materially disrupt different aspects of a livelihood (Ellis and Alderman, 2002). These are outside of people’s control (Adato and Meinzen-Dick, 2002). Examples of such shocks include the earthquake disaster that occurred in Haiti in 2010 and 2013, as well as the impact of HIV and AIDS as an epidemic. As such, the impacts that are felt at each household due to such shocks are different and these need to be properly identified.

For a livelihood to be sustained, there is also need for synergy in a wide range of influences that will condition the flow of activities (Ostron, 1992; Devereux, 1999). In this regard, the important main players include the local community, external institutions and the wider natural environment (McDanagh, 2002). These three factors are what are termed the transforming structures and processes. According to Sousson, et al. (2000), the local community – that is social groupings, networks and institutions within where the household is enmeshed – have a central role to play as they are a form of interaction with the external environment. The relationships with kin, as well as religious and ethnic groupings are of central importance for every household (Foster and Williams, 2005).

Furthermore, the external institutional context – legal, political, social, economic and institutional – plays a role in the survival of the household. In this regard, the nature and operation of the government, directly through agricultural subsidies or health services, and indirectly through policies
and enabling political environment, will contribute to how a household sustains itself. Lastly, the wider natural environment is important with emphasis on rain patterns as well as negative issues like cyclones, earthquakes or droughts.

Within the SLA as espoused by DFID, the concept of sustainability is key to a successful livelihoods approach. In this understanding, livelihood sustainability is defined when households are resilient in the face of external shocks and stresses; maintain the long term productivity of natural resources; and do not undermine the livelihoods of, or compromise the livelihood options open to, others. In looking at the shocks that have affected the elderly, this research explores the possibility of using social protection to support the elderly and make them sufficiently resilient. It needs to be acknowledged that within this approach, there are key principles that guide its implementation, as outlined in Figure 4 below.
2.6. SUSTAINABLE LIVELIHOODS FRAMEWORK – THE CAPITAL ASSET PENTAGON

According to DFID, every household requires assets. Assets refer to the resource base of people (DFID, 1999). Assets are represented as a pentagon in the SLF, consisting of the following five categories: natural, physical, financial, human, and social capital. Increasingly, it is being recognized that in addition to these five categories, it is important to include analysis of political capital. According to Scoones (2009), the political capital goes beyond social capital, in that an individual’s stock of political capital will determine his/her ability to influence policy and the processes of government. An understanding of political capital is important
in determining the ability of households and individuals to claim rights to assistance after a disaster.

The asset pentagon lies at the core of the livelihoods framework, within the vulnerability context. This helps to place people’s assets in a visual form. This also helps to understand the important inter-relationships with and between the various assets.

**Figure 5: The Asset Pentagon**

![Asset Pentagon Diagram](image)

Source: DFID, 1999, Design of framework drawn from the DFID publication “sustainable livelihood guidance sheets”.

The shape of the pentagon is a way to depict schematically the variation in people’s access to assets. The idea is that the centre point of the
penta gon, where the lines meet, represents zero access to assets while the outer perimeter represents maximum access to assets (DFID, 1999). On this basis, different shaped pentagons are drawn for different communities or social groups within communities. The different assets are explained in more detail below.

2.6.1. Human capital

Human capital represents the skills, knowledge and ability to labour that together enables households to pursue different strategies and achieve their livelihood objectives (DFID, 1999). At the household level, the human capital is a factor of the amount and quality of labour available, which varies according to household size, skill sets, leadership potential and health status (Ellis and Alderman, 2002). Human capital appears in the generic framework as a livelihood asset, as a means of achieving livelihood outcomes. Human capital is important in order to make use of any of the other four types of assets towards attaining livelihood outcomes (Morse, et al., 2009; DFID, 1999, Scoones, 2009).

HIV and AIDS is unique in that it attacks the most economically active segment in the society, thus robbing households of adult labour and knowledge (Serpell, 1999). Additionally, due to the loss of labour, household income is also affected as the breadwinner is no longer available (Seely, 2003). In a study done by the Ministry of Gender in Zambia in 2005, it was indicated that one of the challenges faced by households that had lost one of their productive members faced was the inability to work by the remaining household members either on their farm land or through providing casual labour, and failure to send children to school as they could no longer afford the expenses. This indicates the challenges that are faced by households with regard to human capital.
Looking at the impact of HIV and AIDS on the elderly, it is clear that due to the loss of the most productive members in the families, the elderly are affected as they themselves cannot be regarded as productive. It may be assumed that they will be challenged in finding means to cultivate their farm lands, feeding orphans and sending them to school. This affects them in that they in turn are supposed to be providers to the children where their skill set is low, household labour is affected and in most cases their health situation is weak.

Poverty in elderly people is due to a number of factors, including the fact that old age poverty is strongly associated with the reduced framework of capacity arising from the ageing process (Schneider and Gopane, 2004). Secondly, old age poverty is a status from which few if any can be expected to escape and is both a function and cause of chronic inter-generational poverty (HAI, 2008).

2.6.2. Social capital

Within the context of the SLA, social capital means the social resources upon which people draw in pursuit of their livelihood objectives (DFID, 1999). These are developed through networks and connectedness with individuals and groups (Topouzis and Du Geuny, 1999). Membership of more formalised groups is another form of social capital. Overall, social capital helps in building trust between individuals and groups within a community. Of the five livelihood building blocks, social capital is the one that contributes towards transforming structures and processes (DFID, 1999).

Social capital was first coined in 1916 by Hanifan (1916) where he was making reference to community involvement in ensuring that there are appropriate community schooling systems. Since then, the work on social capital has been augmented by Putnam (1995), amongst others, who
notes the strong relationship between levels of trust, reciprocity and civil participation and the quality of governance among diverse Italian communities. Putnam defines social capital as being characterised by aspects of social organization such as trust, norms and networks that can improve the efficiency of society by facilitating co-ordinated action (Putnam, 1995). Coleman (1988), however, defines social capital as not being a single entity but a variety of entities, with two elements in common, namely social structures and actions of actors, whether persons or corporate structures. According to Portes (1998), Bourdieu views social capital as the aggregate of the actual or potential resources which are linked to possession of a durable network of more or less institutionalised relationships of mutual acquaintances and recognition.

It is important to note that social capital was fully developed by three scholars namely Putnam, Bourdieu and Coleman. For both Bourdieu and Coleman, it is critical to note the emphasis on the strengthening of community ties as an important element in building individual needs. Within Putnam’s definition, the emphasis is on the benefit of social capital for communities and not individuals (Watson and Papamarcos, 2002). Social capital is perceived as important for economic and social development. Social capital has its roots in early development theory works by Marx, Durkheim and Weber (Watson and Papamarcos, 2002). Marx’s work on mobilisation as a means of ensuring effective social systems and Durkheim’s ideas on group like as a remedy for anomie relates to the value of social capital (Portes, 1998).

Social capital as understood by Putnam has three components critical for its success: moral obligations and norms, social values especially trust, and social networks especially volunteer association, which results in the success of a region or political integration (Putnam, 1997). Within this understanding, Putnam reviewed the decline of social capital as one of the factors that led to the rise in social problems. These three ingredients
contribute to having social capital that can lead to the success of other related capitals like economic development and financial capital. Coleman (1988) looks at obligations, expectations, the trustworthiness of structures, information, norms and affection as being critical for social capital. The social structures that facilitate this are the networks and appropriate social organisations.

According to Putnam (1997:14), trust is one critical element within social capital. Within a society, “the emphasis on modern societies is on consensus based on interconnected networks of trust among citizens, families, voluntary organisations, religious denominations, civic associations and the like. Similarly, the very legitimation of modern societies is founded on the trust of authority and governments as generalizations”.

Newbert and Tornikoski (2012) suggest that the existence of trust is reciprocity within the networks. Hence, if trust is not returned then disconnectedness occurs. Other scholars have disagreed with Putnam and suggest that he does not explain the origin of social trust. According to Newton (1999), social trust is complex and is seen from two sources, being norms of reciprocity and networks of civic engagement. There are contextual factors that contribute to trust, hence critiques of Putnam indicate that trust is relative and is difficult to monitor or manage. De Fillipe (2001) argues that social capital based on civic organisation and networks has value only if the poor people involved have authority and influence on the flow and operations of the organisation and if they can trust the whole process.

Apart from trust, another important feature within social capital is social networks. Social networks provide a flexible system through which actors or agents interact with each other (Barr, 2000). Similarly, another definition of social network states that a network is the relationship that exists
between objects, individuals and organisations called actors or agents of change (De Fillipe, 2001). Within these networks is inter-connectedness as well as interaction with each other. Most importantly, the actors in the networks change over time and adapt or grow together (Temple, 1998). It is important to realise that within networks there is a need for interaction by the various members to ensure that the networks build trust. Without interaction, there is limited trust that can be realised.

As stated by Coleman (1998), within this understanding of social capital, there is a need for face-to-face interaction between citizens which leads to the development of prolonged trust (Coleman, 1998). However, other scholars have argued that it is helpful to understand the value of this within a context. Face-to-face interactions are not interpreted the same way across regions, hence having a clear understanding of the value of face-to-face interaction in a social context is important (De Fellipe, 2001).

Generally, social capital has been applied and used by different people. The interpretation of social capital has varied based on the particular discipline that people have followed. What remains critical within social capital is that relationships matter. Within social capital, social relationships are most important as it enables communities to share their values and build their societies on the basis of trust and agreed norms (World Bank, 2012). The most important factor is that social networks within a community allow the community to build trust, tolerance and cooperation to solve ongoing challenges and achieve collective goals set within the community (Temple, 1998). According to the World Bank (2012), social capital is one of the areas that is able to alleviate poverty, and contribute towards sustainable economic and human development.

According to various studies done on the contribution of social capital, there have been some that linked social capital to financial development. The World Bank (2012) indicate that when there is a high level of trust
within a society, the influence on financial development is high. Furthermore, social capital has been linked to development as trust and civic norms are related to economic growth (Knack and Keefer, 1997). From the above information it is evident that trust, social networks and social norms are the ingredients for building co-operation and ensuring economic growth in a country. Within countries, social capital has been seen to facilitate effective functioning of public institutions, economic transactions and co-operative trades (Routledge and Von Amsberg, 2003). Within rural communities social capital has been a driver of support of vulnerable members.

Building social capital is a process that requires appropriate steps to be taken in order for it to be sustainable. There are other capitals that are relevant: human capital as well as financial capital are linked to social capital. It is believed that social capital provides the means to obtain access to other types of capital (Knack and Keefer, 1997). Social capital promotes social networks that help people and organizations attain their goals. However, social capital is more complicated than simply knowing whom to contact to develop relationships as it is fully dependent on trust. It is not enough to have connections but to derive meaningful benefits from those connections (Routledge and Von Amsberg, 2003). This trust is found amongst network members. Social capital is then deemed inclusive if it has the two elements of networks, that is, trust specific to that network and access to resources enabled by that network (Portes, 1998). The kind of trust is specific to the people within the given network. From this, a connection represents social capital only where it helps individuals to achieve their set goals.

According to Barr (2000), social capital does not depend on the number of people or institutions known, since organizations or individuals may know only a few people or institutions, but these connections prove sufficient to improve the quality of life in their communities. Others may have many
connections, but the people and institutions in their networks do not have the resources they need to achieve particular goals (Harayan and Pritchett, 1999). Those people or organizations also have social capital, but the connections may not work in all circumstances (Uphoff, 2000).

It must be emphasised that one can know many people and belong to different networks, but that social capital only becomes relevant if they have trustworthy ties amongst network members. If there are weak ties, then it does not amount to social capital because there is no dependency to get resources when there are weak ties (Haacker, 2004). In the context of the benefits of social capital, HIV and AIDS has brought an added burden on traditional networks and coping mechanisms, in particular in what constitutes care for orphans and sick individuals (Haacker, 2004). Foster (2006), for instance, argues that governments have been slow to react to the orphan crisis in Sub Saharan Africa that is intimately linked to the epidemic causing families and communities to carry most of the responsibility and costs. This strain on social networks could lead to a negative impact on social capital or even to the disintegration of the existing informal mechanisms to cope with economic shocks as existing trust is undermined when people fail to support one another.

As much as there are different views on social capital, the common thread is that social capital is important as it highlights the importance of relationships within members of a community or organisation. There is great importance attached to the benefit of having members of a community being able to organise themselves for mutual beneficial collective action around areas of common interest and to manage social structures to achieve common goals (Portes, 1998).

Social capital is seen from two main angles, that is, structural and cognitive social capital (Uphoff and Wijayarantna, 2000). Structural social capital refers to networks, linkages and practices within and between
communities whilst cognitive social capital refers to attitudes, values, beliefs and social norms and behaviours that exist within a community. Whilst cognitive social capital ensures community members are acting in certain ways based on their cultural principles, structural social capital is observable and extrinsic (Uphoff, 2000). Within structural social capital, there is further understanding of whether it is categorised into bonding, bridging and/or linking.

Bonding is the relationship between people of similar ethnicity, social status and location who have similar social cohesion within the group and community, based on trust and shared moral values and reinforced by working together (Uphoff, 2000). Bridging social capital refers to relationships and networks which cross social groupings, involving co-ordination or collaboration within other groups, external associations, mechanisms of social support or information-sharing across communities and groups (Harayan and Pritchett, 1999).

Linking social capital describes the ability of groups or individuals to engage with external agencies and those in positions of influence, either to draw on useful resources or influences of policies (Harayan and Pritchett, 1999).

When productive adults who are key family providers are lost to the HIV and AIDS epidemic, this undermines the social networks that provided households with community help and support (Barnet and Rugalema, 2001; UN, 2003). Particularly in rural areas where public services are absent or limited, traditional community support systems are crucial to impoverished households (UN, 2003). The AIDS pandemic has contributed in eroding social networks that have been strong in the African context (Seeley, 2003).
Generally co-operatives, networks, membership of groups and exchange relations and access to wider institutions in the society are a critical structure that members of households need to belong to. In Malawi, as in most African countries, co-operatives are an important vehicle through which rural farmers can obtain government sponsored input loans as those fall under the fertilizer subsidy initiatives. Thus membership in such organizations can quite often make the difference between food security and food insecurity for rural households. In this regard, one questions whether the grandparents are able to belong to such co-operatives and access the loans that will assist them in caring for orphans.

Furthermore, community support of households affected by HIV and AIDS is one of the ways that helps households attain the required social capital. In African societies there is the belief that community members should support each other by contributing food and labour during funerals and when visiting sick people. It is also expected that community-based organizations should support vulnerable groups or community members through contributions as needed.

A number of studies indicate that HIV and AIDS may be weakening both the social and economic capital, as traditional knowledge may be gradually lost as members of the working age groups die (Topouzis and Du Gummy, 1999; Drimie and Gandure, 2005). This leaves the survivors with few relatives upon whom to depend; this is sometimes compounded by gender and age which are critical determinants of social exclusion in the face of HIV and AIDs. It is stated that the elderly, widows and orphans might find it difficult to depend on relatives and the ability or willingness of households to do more. As such the social network which is a key asset becomes negatively affected. It is likely therefore that the elderly group looking after orphans might face many challenges as the social capital weakens.
2.6.3. Natural capital

According to DFID (1999), natural capital deals with the natural resource stocks from which the resource flows and services useful for livelihoods are derived. This could be a resource base as diverse as intangible public goods such as atmosphere and biodiversity to divisible assets like trees and land used directly for production (Morse et al., 2009; Sousson, 2005). Natural capital is important for those who derive their livelihood from natural resources-based activities, like fishermen or farmers. However, its importance goes beyond this, since no-one will survive without the help of key environmental services and food produced from natural capital.

According to Drimie and Gandure (2005), between 60 and 80 per cent of the population in the Southern African Development Community (SADC) depends on small-scale or subsistence farming for their livelihoods. In this regard, agriculture is central to the survival of most households in Africa. The major impacts of HIV and AIDS have been seen in agriculture as there has been serious depletion of human resources, diversion of capital away from agriculture, loss of farm and non-farm income and other psychological impacts that affect productivity (Drimie and Gandure, 2005).

In Malawi, the natural capital that is most important to the people includes land, forests, streams, wildlife, rivers and lakes. Furthermore, land in Malawi is mostly communal and for one to access land this must be done through the chiefs who are assisted by the headmen and village committees that process the requests and allocate the land required. Residents usually inherit land through their family lineage, which can be under either the patrilocal or matrilocal system. This research will explore how land is managed in the households of the elderly, whether they have the same access to land as when their children were alive, and the extent to which they use the land that they do have available to them.
The paper further examines access to forests and rivers and in some cases wildlife as part of the natural assets that the communities have. It is believed that having access to these factors does support the household to meet its needs; hence the focus of the study will also be on how the families have managed to use these natural assets.

It is clear that the elderly could be directly affected with regard to the natural capital base in a number of ways. Due to their age, the ability to farm is not as easy hence their food production is less. This is in a context of increasing household members as more children require care. The coping mechanisms of the elderly in this context will be explored.

**2.6.4. Physical capital**

In understanding this capital, DFID (1999) describes physical capital as dealing with basic infrastructure and produced goods needed to support livelihoods. In this category, it includes areas like affordable transport, secure shelter and buildings, adequate water supply and sanitation, clean affordable energy and access to information / communications to mention a few. While assessing the vulnerability of communities and households as well as in poverty assessments, a lack of particular types of infrastructure is considered a core dimension of poverty.

In a study done in Zambia in 2005 by the Ministry of Gender on evaluating the impact of HIV on livelihoods, it was noted that access to physical assets by households caring for HIV and AIDS patients as well as those who have lost household members to the pandemic was becoming weaker over time. Access to assets like hand hoes, axes and shovels were noted as being highly significant to the households. Other property items mentioned included bicycles, radios, fishing nets and to a lesser extent wheelbarrows. Hand hoes were mentioned as being important for land cultivation activities, including land preparation, planting and weeding.
Axes were important for chopping branches while bicycles and wheelbarrows are used for transportation of produce to the market (SARPN HIV and Gender Impact Report, 2005).

Apart from access to such tools, the adoption of improved farming technologies such as fertilizers, chemicals and higher grade seed was one of the factors considered important for household physical assets. Also on the list was the ownership of livestock as well as other farm animals including chicken and goats. The households indicated that most of them fail to access these assets and become more vulnerable to shocks (SAPRN, 2005).

Most developing communities lack access to physical assets like health centres, transport and appropriate shelters. Considering this context, as the communities become vulnerable to the emergence of shocks, their potential to maintain and access the physical assets is weakened.

2.6.5. Financial capital

Financial capital denotes the financial resources that people use to achieve livelihood objectives (DFID, 1999). The definition used here is not economically robust in that it includes flows as well as stocks and it can contribute to consumption as well as production. Financial capital is probably the most important and versatile of the five categories of assets (Scoones, 2009). The savings and the regular inflow of money/income are the two main sources of financial capital. In addition, the assets tend to be least available to the poorer communities and households. Elderly members of the society are prone to being adversely affected in this area as their source of income is no longer available. Failure to cope with regard to financial capital results in depletion of physical and natural capital (Seeley, 2003).
In looking at the financial assets, of interest in the study is the diversity of income sources for the grandparents. This includes sources such as sale of crops and vegetables, beer brewing, piece work, poultry, handcrafts and fishing, to mention a few. The study also explored the expenditure patterns of households so as understand their financial base as well as potential determinants like bartering.

As the paper analyses the challenges faced by the elderly, one of the areas that this study will focus on is to understand how they sustain themselves in terms of income. In exploring this further, the role of social protection will be examined in terms of support for the elderly with financial capital so that they are able to maintain some of the assets mentioned above.

2.7. VULNERABILITY CONTEXT

The SLF examines the vulnerability context which, according to DFID (1999), frames the external environment in which people exist. People’s livelihoods and the wider availability of assets are fundamentally affected by critical trends as well as by shocks and seasonality. Unfortunately, people have limited or no control over trends, shocks and seasonality (Topouzis and Du Guemy, 1999). Trends are population and resource trends, national and international economic trends, political trends and technological trends that could exercise a positive or negative influence on the vulnerability context (Ellis and Alderman, 2003).

The shocks are human health shocks, natural and economic shocks, conflict, and livestock and crop failures (De Waal and Whiteside, 2004). The seasonality factors are the market prices, fluctuations in the production of goods and services, seasonal health epidemics, and seasonal employment opportunities. These employment opportunities vary according to the agricultural season as well as the influence of climate
such as monsoons or cyclones. The factors that make up the vulnerability context are important because they have a direct impact on people’s assets status and the options that are open to them in pursuit of beneficial livelihood outcomes (EU Report, 2010). Not all the trends are negative and some could potentially have a positive influence (Koestle, 2002).

As explained, individuals, households and communities are exposed to unpredictable events that can undermine livelihoods and cause them to fall into poverty or destitution. In a disaster, the entire population may have been exposed to the same shock, but the vulnerability and resilience of people to the impact of the shock will vary (Scoones, 2009). Vulnerability depends on the asset base that people have prior to the crisis and their ability to engage in various coping strategies. In this research the most pronounced shock is HIV and AIDS which has contributed to a growing number of orphans affecting the households of the elderly. The study documents the challenges facing the elderly in looking after growing numbers of orphans.

2.8. HIV AND AIDS, LIVELIHOODS CRISIS AND THE PLEA OF THE ELDERLY

There is a growing body of knowledge on the links between poverty, household livelihoods and the effect of HIV and AIDS. AIDS contributes to deepening poverty and increases inequalities at every level (UNAIDS, 2012). This section will present the effect of HIV and AIDS on household livelihoods. It is hoped that a picture will emerge of how the household livelihoods and capital assets of the elderly have been affected by the epidemic.

The HIV and AIDS epidemic in general has contributed to the crisis in three ways. First and foremost, HIV and AIDS has reduced farm production and incomes, as labour is lost to sickness, caregiving and
death, which in turn erodes the capital base of affected households and forces them to plant smaller areas under intensive labour techniques (Drimie and Gandure, 2005; De Waal and Whiteside, 2002). Giving an example of Malawi, in 2005 it was reported that the agriculture production in Malawi went down due to caregiving of sick family members by the active members of the household. As a result, the natural capital becomes negatively affected (Chinsinga, 2007).

Furthermore, over the years it has been recorded that HIV and AIDS has contributed to financial, resource and income impoverishment at the macro level. According to Barnett and Whiteside (2002), World Bank economist Rene Bonnel estimates that AIDS reduced African economic growth by 0.8 per cent in the 1990s. HIV and AIDS combined resulted in a 1.2 per cent point decrease in per capita growth between 1990 and 1995 (Barnett and Whiteside, 2002).

Additionally, HIV and AIDS has eroded household resilience and ability to cope with other shocks, particularly as the asset base is eroded and livelihood options are reduced (Sousson, 2005). In this regard, households will spend much on caring for the sick family members and when the person dies, the household has to adapt to this change. In most cases the children are then cared for by extended families (Drimie and Gandure, 2005), who now take on the additional responsibility of care which affects their asset base (Alpslan and Mabutho, 2005).

Finally, the epidemic undermines the ability of institutions to respond, particularly as professional staff are affected and the combined impacts erode the economic performance of the country. HIV and AIDS has affected everyone and in this regard, institutions are failing to implement sustained interventions that can support the different groups of people who have been affected directly or indirectly. These groups include the
elderly who in some cases might be forgotten as a central community that has taken over many responsibilities.

Based on the above, it is imperative that HIV and AIDS is recognized as a shock that affects livelihoods of households and in particular the livelihoods of the elderly. According to Drimie and Gandure (2005), the impact of an adult death on household livelihoods and coping strategies suggests that individuals and households go through a process of experimentation and adaptation as they attempt to deal with immediate and long term demographic change (Serpell, 1999).

Most households already under stress from hunger, poverty and disease will be adopting a range of strategies to mitigate their impact through various livelihood strategies. Such strategies have included taking children out of school, prostitution and skipping meals, to mention a few. This impacts on their asset base, whether human, financial, natural, social or physical. This presents a challenge in achieving sustainable development.

The loss of productive adults to HIV and AIDS damages the social networks that provided households with community help and support (Barnett and Rugalema, 2001). In this regard, in rural areas where public services are not fully functional, community support systems are the sole means of survival for impoverished households. Anecdotal evidence indicates that HIV and AIDs may be weakening the social and economic capital, as traditional knowledge is lost when working age adults die and leave children orphaned in the care of the elderly (De Waal and Whiteside, 2004). There is also evidence that households experiencing income stress due to AIDS send their children to live with relatives (Bennett, 1995). These social networks are under increased pressure and this affects the household viability.
In such situations, orphans, widows and the elderly find it difficult to depend on other relatives for survival and the burden of caring for orphans overwhelms their ability to do more. Looking at the effect on households due to the loss of an economically active caregiver, it is evident that the elderly-headed households face increased challenges. This research explores the challenges faced by the elderly in relation to social, financial and natural capital and reviews the role of various institutions in supporting them. The research also explores the role that social protection could play in supporting the elderly and protecting their assets.

2.9. CRITIQUE OF THE LIVELIHOODS APPROACH

The livelihoods approach has been commended for its emphasis on a people-centered methodology that ensures their full involvement in development issues that affect them. This approach requires the engagement of the communities and households to understand their various needs. The approach is holistic as it examines all the factors that affect a household. In this regard, its ability to review the various capital assets contributes to an understanding of a process that reviews critical areas of need.

As much as the livelihoods approach has gained wider acknowledgement and support, this approach has also been subject to criticism for the way it has approached the vulnerability of the poor and their needs. This approach has been criticized due to its lack of engagement with processes of economic globalization (Scoones, 1999), and is seen to lack engagement with macro level debates as it is more focused on micro activities. Hence this approach has been overlooked by the new aid modalities that have focused more on direct budget support and the requirements of the Paris Declaration on Aid Effectiveness of 2005 (Clarke and Carney, 2008).
The context of aid has seen significant shifts in the past decade and there is a need to remain focused on emerging issues. In this regard, another critique of the livelihoods approach is that it has lacked detailed attention to power and politics. This has resulted in the failure to link livelihoods to governance issues that have come to the fore in the development arena (Scoones, 2009). While attempts were made to engage livelihoods with decentralization (Manor, 2000), and rights-based approaches (Mizer and Norton, 2001); livelihoods generated its own business, with increasing support from NGOs, consultants and researchers. This group failed, however, to connect the state and politics and governance regimes as they emerged (Scoones, 2009) and is viewed by some as being intellectually stagnant.

According to De Haan (2012), another critique of the livelihoods approach is based on the work done by Polanyi, an early 20th century economist, in his posthumous book, “The Livelihood of Man” where it is argued that while people have material needs, to satisfy their livelihoods there is a need to go beyond the material gains. In this regard, the needs of the household should be viewed from a multi-dimensional angle. Bebbington explains that, “A person’s assets, such as land, are not merely means with which he or she makes a living: they also give meaning to that person’s world. Assets are not simply resources that people use in building livelihoods: they are assets that give them the capability to be and to act. Assets should not be understood only as ‘things’ that allow survival, adaptation and poverty alleviation. They are also the basis of an agent’s power to act and to reproduce, challenge or change the rules that govern the control, use and transformation of resources” (Bebbington, 1999:202, cited in De Haan (2012).

One of the general critiques that can be made of this approach is its failure to connect to emerging issues around climate change, which has become the increased focus of most countries given its impact on vulnerable
groups that are also the focus of the SLA. The failure to link in detail livelihoods with the long term debates on climate change has contributed to its lack of popularity (De Haan, 2012; Scoones, 2009).

The other criticism of the SLA is its emphasis on capital assets. As stated by De Haan (2012), this emphasis on accumulating capital assets drew the attention of the critical theorist who perceived the SLA as failing to go beyond material motives and aims. In calling the pentagon resources assets, it emphasises the process of reducing livelihoods to the mobilisation and deployment of social and organisational resources for the pursuit of economic and environmental goals (De Haan, 2012). This argument, inasmuch as it reflects the biasness of capital gains, does not hold in terms of pushing SLA as an economically biased model.

2.10 SUMMARY

As much as the livelihoods framework has been criticised, including its emphasis on assets, failure to include climate change, and a lack of engagement at macro level, it remains one of the approaches that has been adopted by different stakeholders in understanding household poverty. It needs to be acknowledged that the livelihoods framework engages the household on the basis of their actual needs on a day-to-day basis and how they interact with different changes within the society and government at large.

Due to its detailed nature, it allows for an holistic picture of the household, its needs and challenges. Developed in the 1990s, it remains a tool to understand the extent of poverty at the household level. Most organisations have adopted this framework in designing developmentally oriented projects that holistically address the needs of households. Based on this perspective, this research will adopt the livelihoods approach as the lens to understanding the challenges facing elderly households.
In order to document challenges facing the elderly, there is a need to examine the changing context that the elderly are living in. A number of studies have documented elderly challenges including financial, health and labour issues. To fully understand the context it is necessary to examine all their needs from social networks, access to land, policies, and transforming structures. The SLA provides a basis for documenting such challenges and allows the researcher to obtain a comprehensive view of the challenges.

This chapter has shared the changing role of grandparents due to the impact of HIV and AIDS and the traditional extended families including the patrilineal and matrilineal types of families. It has further discussed household poverty and household needs using the Sustainable Livelihoods Approach. There is a need to adopt the livelihoods framework to fully understand the challenges facing elderly households.

Chapter three is a continuation of the literature review and interrogates the role that social protection plays in addressing the needs of households. Considering the multiple challenges facing the elderly due to their vulnerable condition, it is necessary to identify and discuss some of the interventions that are used to address their needs. The chapter presents the contribution that social protection can make in addressing the needs of various vulnerable communities, including the elderly.
CHAPTER THREE

SOCIAL PROTECTION AND ELDERLY HOUSEHOLDS

3.1 INTRODUCTION

This chapter further discusses the theoretical base and demonstrates that social protection has a role in supporting the vulnerable communities in developing countries, as discussed in the previous chapter where livelihoods and vulnerabilities have been explained and the theory has been built around the livelihoods framework. This chapter presents the solutions to addressing these concerns through social protection. This will be discussed through analysing the various social protection strategies, approaches and activities that have been implemented in most countries, with the aim of finding the most appropriate social protection interventions for the elderly looking after orphans in Malawi.

Social protection is a central but often missing piece of the development agenda. Its objective is primarily to tackle vulnerability, poverty and exclusion (EU, 2010).

This chapter will present the global overview and understanding of social protection. This is aimed at explaining the major patterns in understanding the definition of social protection and the different approaches that have been used around the world. From these different approaches, the study will build on the theoretical base around social protection for the elderly. In order to understand this further, the chapter presents the policies that guide social protection globally. In its analysis, the chapter will narrow the discussion to social protection for the elderly and its activities in Africa. Having presented the African picture, the chapter then focuses the discussion on social protection activities in Malawi, in order to demonstrate
currently existing provision as well as other options in supporting the challenges facing the elderly.

3.2 THEORETICAL FRAMEWORK – UNDERSTANDING SOCIAL PROTECTION

Social protection emerged as a critical response to the “safety nets” discourse of the late 1980s and early 1990s (Devereux and Wheeler, 2004). In the 1990s, the World Bank considered this as one of the approaches to address poverty (World Bank, 1990). As such, social protection was conceptualized as minimalist social assistance in countries too poor and administratively weak to introduce comprehensive social welfare programmes (Ellis, Devereux and White, 2009). Commencing in the 1990s, in regard to livelihoods, risk and vulnerability and the multidimensional nature of poverty became more nuanced, safety nets were increasingly criticized as residualist and paternalistic, and more sophisticated alternatives began to be recognized (Devereux and Wheeler, 2004). Over the years, social protection has grown as one of the most ideal approaches to promoting development agendas for most developing countries (EU, 2012).

Social protection has become more popular in development discourse. As much as this is emerging, the term has been interpreted differently by development practitioners as well as policy makers responsible for implementation of social protection globally. Both narrow definitions and wider definitions of social protection have emerged (Conway and Norton, 2002), whilst on the other hand social protection has been argued from a needs based vs. rights based intervention (Devereux, Sebetes and Wheeler, 2007). Below are various understandings of social protection that have been used in different contexts.
Norton, Conway and Foster (2000) explain that social protection has been viewed as a new label for old-style social welfare provided to the deserving poor (widows, elderly, orphans and people with disabilities). In this understanding, social protection is viewed as a way of supporting those vulnerable groups as most governments have been doing to ensure that they have access to basic needs. On the other hand, policy makers have viewed social protection as social safety nets or interventions that cushion the poor against production and consumption shocks such as food aid for drought-affected farmers in subsistence-oriented communities (Norton, et al., 2000; EU, 2010). This is where the emphasis is more on protecting the livelihoods of the vulnerable groups against emerging shocks (Barrientos, 2010). Others have adopted a very broad approach, including education and health subsidies, job creation and microcredit programmes, as well as safety nets for groups that may be vulnerable to shocks but are not usually regarded as being among the poor strata of society (Norton, et al., 2000).

According to Norton, et al., (2000), a more political or transformative view extends social protection to areas such as equity, empowerment and economic, social and cultural rights, rather than confining the scope of social protection to targeted income and consumption transfers. This approach is holistic and looks at the whole well-being of individuals as well as the environment they are in.

Based on the above interpretations, it is clear that social protection has evolved from a narrow definition that entailed social welfare provided to the vulnerable groups such as widows, orphans and people with disabilities to safety nets or interventions that cushion the poor against production and consumption shocks (Kabeer, 2009; Kassy, 2008). Globally, the concept has shifted further to a more broad approach that includes education and health subsidies, job creation and micro credit
programmes aimed at the poor but not necessarily the vulnerable (Ellis, et al., 2009).

As stated by Devereux and Wheeler (2004), the more current and radical understanding of social protection takes promotive and transformative approaches whereby social protection has been extended to areas such as strengthening production capabilities of the poor, and promoting equity, empowerment, economic, social and cultural rights rather than confining the scope of social protection to targeted income and consumption. Different agencies have also defined social protection in different forms.

### 3.2.1 Agency definitions of social protection

Norton, et al., (2000) summarises the various definitions of social protection as understood by different agencies that promote social protection. Such agencies have included the World Bank, Overseas Development Institute (ODI), International Labour Organisation (ILO) and the African Development Bank. Below is a summary of the understanding of social protection from these agencies.

According to ODI, social protection refers to the public actions taken in response to levels of vulnerability, risk and deprivation which are deemed socially unacceptable within a given policy or society (ODI as quoted in Norton, et al., 2000). This definition is closely related with the ILO, which looks at social protection as the provision of benefits to households and individuals through public or collective arrangements to protect against low or declining living standards.

Both the World Bank and African Development Bank have viewed social protection as including policies set by governments and the private sector and as such they define social protection in detail. The World Bank defines social protection as a collection of measures to improve or protect human
capital, ranging from labour market interventions, publicly mandated unemployment or old-age insurance to targeted income support. Social protection interventions assist individuals, households and communities to better manage the income risks that leave people vulnerable (Kaseke, 2005).

Following the definition of the World Bank, the EU defines social protection as a specific set of actions to address the vulnerability of people’s lives through social insurance, offering protection against risks and adversity throughout life; through social assistance, offering payments and in-kind transfers to support and enable the poor; and through inclusion efforts that enhance the capability of the marginalised to access social insurance and assistance (EU report, 2012). In this definition, the focus is on core functions that allow for solutions to avoid hardship for the poor and non-poor alike in the face of serious risks.

Lastly, Norton, et al., (2000) presents the definition of social protection from the African Development Bank (ADB), which views social protection as a set of policies and programmes designed to reduce poverty and vulnerability by promoting efficient labour markets, diminishing people’s exposure to risks, and enhancing their capacity to protect themselves against hazards and interruption/loss of income.

Social protection has only come into widespread use relatively recently. For Lund and Srinivas (2000), the term has the advantage of being viewed and understood as social security which can be used in both less developing and more developed parts of the world within different contexts of needs (Lund and Srinivas, 2000:14). Based on the above definitions, social protection is encompassing the needs of the vulnerable communities across the globe.
However, there is also a danger in how different academics and development agencies use social protection with different definitions in mind. Understandings of the meaning of social protection vary in a number of ways, encompassing both broad and narrow perspectives. Within this, one sees the difference if those that include programmatic approaches, policy implications and intended outcomes. On the other hand, there are those that have defined social protection focusing on the nature of the deprivations and problems addressed, and those which focus on the policy instruments used to address them. These could be considered to be more grassroots and operationally focused. There are also those who have taken a conceptual as opposed to a pragmatic approach to the task (Kabeer, 2009). Noting from the agency definitions of EU, ADB and World Bank, it is clear that these definitions have a dual character, referring to both the nature of deprivation and the form of policy response that is required.

Almost all definitions have included fundamental values of social protection, that is addressing vulnerability and risk, levels of deprivation been seen as unacceptable for any community, and presenting a form of response which is both social and public in character for any benefiting society. Based on the above, social protection for purposes of the research will be defined based on Devereux and Wheeler (2004) where they describe social protection as being,

... all public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks and enhance the social status and rights of the marginalized; with the overall objective of reducing the economic and social vulnerability of the poor, vulnerable and marginalized groups.

In this definition, Devereux and Wheeler (2004) elaborate on mechanisms that deliver social protection. They are more interested in how social
protection is delivered to the most vulnerable groups. To clarify this understanding, they have identified social protection as initiatives that are both formal and informal and provide social assistance to extremely poor individuals and households. Social protection also provides social services to groups who need special care or who would otherwise be denied access to basic services (Midgely, 1997). Social insurance is included to protect people against the risks and consequences of livelihood shocks and social equity to protect people against social risks such as discrimination and abuse (Devereux and Wheeler, 2004).

In understanding this definition, the study embraces social protection as being concerned with the delivery of social assistance, services, insurance and equity to individuals, households or communities to strengthen resilience to adverse events. According to the African Development Bank, there are five key areas of social protection:

- Labour market policies and programmes designed to promote employment, the efficient operation of labour markets and the protection of workers;
- Social insurance programmes to cushion the risks associated with unemployment, ill health, disability, work-related injury and old age;
- Social assistance and welfare service programmes for the most vulnerable groups who have no other means of adequate support, including single mothers, the homeless, and physically or mentally challenged people;
- Micro- and area-based schemes to address vulnerability at the community level, including micro-insurance, agricultural insurance, social funds and programmes to manage natural disasters;
- Child protection to ensure the healthy and productive development of children.
In the areas of focus by Devereux and Wheeler (2004) and the African Development Bank, it is clear that social protection has the objective of reducing the vulnerability of the most poor. The categories of people being identified in the above interpretations include the chronically poor, the economically vulnerable as well as the socially marginalized. This paradigm provides the ethos that will underpin this research.

3.2.2 Background of social protection

It must be recognised that social protection concepts have been implemented in various developing countries for a long time (Midgley, 1997). In the past, the terminology used was not social protection, as this took various forms as appropriate in the different countries. From the early 1960s and 1970s, cases have been reported in various countries where food prices were reduced or subsidised to allow people who could not afford to buy such commodities to do so (Barrientos, 2010). Countries like Sri Lanka, Egypt and Tanzania brought down prices of basic commodities like rice, wheat and maize to ensure that all citizens were able to eat. Based on this, it is clear that social protection is not a new concept, but has existed in various forms, both organised and not organised (Barreintos, 2010).

In continuing to trace the origins of social protection, it is noted that in the past some countries managed to bring down prices of commodities through the delivery of food aid. Large-scale food aid was introduced in various countries to support the needy and to bring down food prices (Barrientos, 2005). However, food subsidies as social protection did not last due to reasons such as bureaucratic mis-management of markets, subsidies being fiscally unaffordable, urban consumers being favoured over rural producers, and global food prices started to decline making it cheaper to buy food from world markets than to subsidise domestic supplies (Ellis, White, Sherlock and Seeley, 2008).
In the 1980s, social protection took yet another form. It shifted ‘safety nets’ with the aim of protecting citizens as they graduate from the dependence on government supports, that is food and input subsidies (Kabeer, 2009). The World Bank and various international aid organisations introduced the Structural Adjustments Programme (SAP) where most government-owned institutions were privatised to ensure that citizens were not fully dependent on government resources and subsidies were then introduced (Ellis, et al., 2008).

In this understanding of social protection, the aim was to ensure that as the country’s economy was moving forward, however, there were some people who were being affected with various vulnerabilities and as such they needed to be protected (Kabeer, 2009).

As explained by Kabeer (2009), the safety net approach is predicated strongly on the notion that as the economy as a whole is moving forward and living standards are rising, nevertheless there are some people, especially in rural areas, that are affected by seasonal or unexpected disasters and who thus require support.

In Asia as well as most African countries, examples of countries that had implemented safety net programmes both positively and with negative effects are well documented. A good example of a well-sustained safety net system is seen in India with a scheme called the National Rural Employment Guarantee Scheme (NREGS) (Barrientos, 2010; Kabeer, 2009). This was established in the early 1980s and has remained central in responding to the needs of the communities in the rural areas. The government of India ensures that it responds to the needs of its communities through this programme which has demonstrated a positive impact on rural communities.
In Africa, there are several countries that have implemented safety nets programmes. Of interest is Malawi where safety nets have been the main response to temporary or seasonal deprivation. Programmes like food for work and fertilizer subsidies have continued to be implemented to respond to the needs of the poor. Different public works programmes where beneficiaries have participated in return for food, cash or inputs have been implemented across the country.

The growth of safety nets has seen a number of challenges and has been regarded as limited in terms of sustainability. Some of the documented challenges have included targeting mechanisms where only a few people participate than on a broader scale; being limited in responding to major disasters; not sustainable; and with limited scope. It did not allow for understanding the underlying causes of poverty (Standing, 1999). Considering that most structural adjustment programmes were set aside to reduce the role of the state and expand markets both locally and internationally to achieve growth, the failure of most programmes paved the way for a more systematic and co-ordinated approach.

Following the 1980s safety net movement, in the 1990s social protection also changed its course. By this time, social protection was transformed more especially for developing countries. There was a shared understanding that social protection was a way of addressing the vulnerabilities facing developing countries (Standing, 1999). According to the World Bank (2001), in developing countries the main emphasis of social protection was addressing the causes of poverty. In developed countries the emphasis was on income maintenance and on protecting living standards for all. Sen (1981) qualified this understanding in his book *Poverty and Famines* which suggested that everyone was entitled to food and lack of food was due to supply and not due to failures of entitlement.
Understanding of vulnerability was critical. While acknowledging that every individual is affected by risks, it is important to recognise the differences between how poor and rich handle these risks (Dercon, 2005a). Moderately well-off people are able to deal with adverse events considerably better than very poor people. It is risk combined with lack of ability to deal with a shock if it occurs that jointly constitutes a definition of vulnerability (Devereux, 2005; Dercon, 2005a). The lack of ability to deal with a shock if it occurs relates to the depleted asset status and lack of options of the household. In this regard, the need to resolve the underlying causes of poverty were core to the understanding of social protection.

The great engagement in understanding vulnerability led to the acceptance that households that cannot cope and respond to different vulnerabilities tend to find negative coping strategies that drive them deeper into poverty (Cornway, et al., 2000). Coping strategies (mainly selling assets in order to purchase food) result in depleted assets, and what matters then is how quickly and how completely families can rebuild their position in order to once again be able to withstand future shocks (Devereux, 1999).

Considering this scenario, debates arose on the differences between building assets (ex ante coping) and selling of assets (ex post coping) as a means to survive (Bigsten and Levin, 2005). It was acknowledged that the limitation in rebuilding assets after a shock does increase vulnerability and provides an explanation of the rising vulnerability trend observed in very poor, risk-prone countries and environments (Ellis, 1999). A number of studies have concluded that the effects of shocks on communities, especially for the most vulnerable, makes it difficult for them to emerge from poverty traps (Carter and Barret, 2007).

This scenario is prolonged when there are no community coping mechanisms to provide support when any shock happens (Ellis, 2006). In
the past 20 years the world has seen the effects of the AIDS pandemic on vulnerable households, as well internationally rising fuel and food prices. These have contributed greatly in harming the already vulnerable communities hence social protection has emerged as a discipline aiming to address the challenges facing the vulnerable groups in their various contexts.

Social protection has long been a domestic concern of wealthy nations, which have developed sophisticated institutional arrangements in order to protect their citizens against risk and provide assistance to the destitute (Devereux, 2005). However, the concept shifted from safety nets to a more co-ordinated, systematic and focused approach. The most defining event that pushed the shift from safety nets to social protection was the financial crisis of East Asian countries (Norton, et al., 2001). This crisis revealed the weaknesses of social security systems and the limits of informal safety nets in countries considered strong and which had experienced successful pro-poor market-led growth (Norton et al., 2001; Atinc and Walton, 1998). Such lessons led to the development of the term ‘social protection’. Social protection thus encompasses those interventions that respond to the vulnerable communities.

3.2.3 The role of social protection

Over time the interest in social protection has grown across Africa. A number of reasons have been identified which have contributed to this growth, including the persistent high rates of poverty and malnutrition; the undermining of livelihoods and family-based support systems by shocks such as the AIDS epidemic; volatile food prices; and the calamities of weather and war (IFPRI, 2008). Most importantly, the rural populations in developing countries are usually exposed to a variety of risks. Rural dwellers have little or no security of employment or income (Schubert and Beales, 2006). Their earnings fluctuate and tend to be very low. A brief
period of incapacity can leave the worker and her or his family without enough income to live on (EU, 2012).

The various risks that have resulted in households being vulnerable have included food and fuel crises, employment crises, health challenges and political instability. According to the International Monetary Fund (IMF) (2010) the commodity prices boom was considered as peaking in 2007. Food prices rose by more than 45 per cent and most commodities reached record highs (EU, 2010). Crude oil, corn and wheat prices rose around the world, and Niger, Cameroon and Mozambique experienced riots during this period. The impact on both the urban and rural populations was significant (IMF, 2010). Following the food crisis came the financial crises of 2009. Sub Saharan Africa was resilient to the crisis due to “entering the crisis on a strong footing” (AfDB, 2010).

Other notable challenges that contributed to the growing needs across the populations included employment risks. For the households who depended on wages as well as informal sector employees, where there are shocks like financial and food crisis, their ability to cope was compromised. This was exacerbated by household failures to have more productive labour due to the impact of HIV and AIDS. The failure to increase productive labour contributed to making more households vulnerable as evidenced in most households in Malawi.

The upsurge of civil unrest in North African countries as well as in certain Sub Saharan countries is yet another contributor of vulnerability. The households in war zones and areas of civil unrest fail to remain productive and as such they are vulnerable to shocks.

Considering the above risks, various studies have indicated the impact of social protection in responding to these challenges (Cohen and Manken, 2006). Such studies have included the DFID impact evaluation studies that
show clearly that social protection has a role to play in supporting the social, economic and health development of the most vulnerable communities. The most immediate impact of social protection programmes for the very poor relates to basic consumption needs, particularly nutrition and food security. A review of 23 DFID-supported social transfer schemes reported positive impacts on food security for around half of the programmes, generally through direct increase in purchasing power (Devereux and Coll-Black, 2007).

Additionally, IFPRI (2008) indicates that there is extensive evidence that denying children basic nutrition, health, and education has lifelong, irreversible and inter-generational consequences. There is growing evidence of the effectiveness of social protection in low-income countries throughout the world, particularly in contributing to poverty reduction and improved health, nutrition, and education (IFPRI, 2008).

Social protection contributes to improvements in health and education directly by delivering benefits which are tied to such improvements, as is the case with conditional cash transfers. A number of studies have been conducted in various countries to document the impact of social protection and one of the areas that beneficiaries have highlighted to have been critical has been their ability to access and pay for health and education services (EU, 2010; ADB, 2012). It is believed that social protection contributes indirectly either by raising household incomes so that beneficiaries spend more of their disposable income on such improvements or by stabilising household income and preventing the withdrawal of children from the education system (ADB, 2012).

Additionally, various studies also suggest that social protection has a role in promoting human development. Where programmes such as school feeding and free health services exist, the results show improvements in literacy as well as better school attendance. Such programmes, where
well implemented, indicate the value of social protection interventions (ADB, 2012).

Furthermore, social transfer programmes can contribute to a more sustained economic impact through the promotion of productive investments by households. This may occur directly when households save and invest part of their cash transfers (ADB, 2012). Alternatively, stabilisation of income flows may help to ease household access to credit and the possibility of productive investments through that route (Kabeer, 2009; ADB, 2012).

Social protection can have impacts beyond just the beneficiaries and their households through a range of positive and negative spillover effects. The reduction of child labour or the creation of employment through public works can lead to an upward pressure on market wages to the benefit of poor labour-supplying households, while a stimulus to local demand can create inflationary pressure or provide a stimulus to local enterprise (Barrientos and Hulme, 2005).

3.2.4 Social protection and poverty

Further to the contributions that social protection makes to the economic development of societies, it is critical to understand its contributions towards uplifting the livelihoods of communities. Generally, social protection is a central but often missing piece of the development agenda (Schubert and Beales, 2006). Its objective as set by various entities is to tackle vulnerability, poverty and exclusion (EU, 2010:29). As such, most social protection interventions need to ensure that they address the problems facing the poor and non-poor alike and the responses that are found both rooted in the markets and community-based (Cohen and Manken, 2006).
In Africa, large-scale poverty reduction depends on economic growth and sustained job creation. It is clear that in Africa most poor people are trapped in poverty because they have limited opportunities. Much of their vulnerability to shocks and the persistence of poverty is closely linked to their livelihood opportunities. In this context, social protection is a mechanism contributing to economic growth, and has a strong focus on poverty reduction and on providing support to the poorest (De Haan, 2000; Barrientos and Hulme, 2005), whereas in developed countries social protection has a role in income maintenance and on protecting living standards for all.

3.2.5 Approaches of social protection

The implementation of social protection approaches has varied across regions and countries based on their settings and contextual determinants. Some examples of interventions have included the notable introduction or scale-up of cash transfers for the very poor in Southern and East Africa (Devereux and Wheeler, 2002). While many programmes have been undertaken on a pilot basis, for example in Zambia and Malawi, the successful implementation of large-scale social protection programmes in Ethiopia and South Africa, each with more than 8 million beneficiaries, has demonstrated that social protection systems are no longer only within the reach of wealthy countries (Kassay, 2008). Developing countries are also capable of effectively implementing and managing social protection interventions within their own contextual limitations. Considering the different types of interventions that have been implemented under the umbrella of social protection, Devereux and Wheeler (2002), developed a framework to guide social protection interventions and align these to the needs of the most vulnerable groups, as set out in Table 3 below.
<table>
<thead>
<tr>
<th>Vulnerable category</th>
<th>Examples of affected groups</th>
<th>interventions</th>
<th>Types of programmes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic poor</td>
<td>Severely disabled</td>
<td>Social assistance</td>
<td>Disability benefit</td>
</tr>
<tr>
<td></td>
<td>Terminally ill</td>
<td></td>
<td>Single parent intervention</td>
</tr>
<tr>
<td></td>
<td>Ethnic minorities</td>
<td></td>
<td>Social pensions</td>
</tr>
<tr>
<td></td>
<td>Urban unemployed</td>
<td></td>
<td>Food aid</td>
</tr>
<tr>
<td></td>
<td>Pastoralists</td>
<td></td>
<td>Food for work</td>
</tr>
<tr>
<td></td>
<td>Subsistence</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Smallholders</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Elderly</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Economically at risk</td>
<td>Cash crop farmers</td>
<td>Social insurance</td>
<td>Formalized pensions</td>
</tr>
<tr>
<td></td>
<td>Internally displaced</td>
<td></td>
<td>Unemployment benefits</td>
</tr>
<tr>
<td></td>
<td>Orphans</td>
<td></td>
<td>Health insurance</td>
</tr>
<tr>
<td></td>
<td>Informal sector workers</td>
<td></td>
<td>Maternity benefits</td>
</tr>
<tr>
<td></td>
<td>Widows</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Elderly</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Widows</td>
<td>Elderly</td>
<td>Social insurance</td>
<td>Changes to regulatory framework to protect the groups</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transformative action</td>
<td>Operationalisng economic, social and cultural rights</td>
</tr>
<tr>
<td>Socially vulnerable</td>
<td>Ethnic minorities</td>
<td>Transformative action</td>
<td>Community based care</td>
</tr>
<tr>
<td></td>
<td>Abducted children</td>
<td></td>
<td>Orphanages</td>
</tr>
<tr>
<td></td>
<td>People living with HIV and AIDS</td>
<td></td>
<td>Refugee/IDP camps</td>
</tr>
<tr>
<td></td>
<td>Victims of domestic abuse</td>
<td></td>
<td>Crèches/pre schools</td>
</tr>
<tr>
<td></td>
<td>People with disabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Street children</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Female headed households</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Devereux and Wheeler (2002)

Table 3 above depicts the various categories of vulnerability and recommended social protection interventions for each category. It has
defined vulnerability through three areas: socially vulnerable, economically vulnerable, and chronically poor. However, one needs to be cautious of the categorization as the needs of the households do not remain static and one could move from one area to another.

Generally, the elderly people in African countries have been categorized as chronically, economically and socially vulnerable. This implies that they need social assistance, social insurance as well as transformative action. This research will explore the role of social assistance, which are mostly social pensions in supporting the grandparents. It will also consider other interventions like food aid specifically, general food aid, and school feeding.

Social protection as an approach has been categorized into four major categories: social protection as a protection, prevention, promotion and transformative intervention. Below are the definitions of each category as explained by Devereux and Wheeler (2004).

To begin with, the first category of social protection is where it is seen as a protective intervention. In this area, social protection provides relief from deprivation, through providing relief from poverty and deprivation to the extent that promotional and preventive measures have failed to do so (EU, 2012). This includes social assistance to the chronically poor, especially those who are unable to work and earn a living. Examples include disability benefits, single parent allowances, and social pensions for elderly. In this pillar, social protection is aimed at protecting the vulnerable from emerging shocks (Devereux and Wheeler, 2002).

Secondly, social protection is regarded as a preventive measure. In this category, social protection seeks to avert deprivation and deals directly with poverty alleviation (Devereux and Wheeler, 2002). This includes social insurance for economically vulnerable groups. These are people
who have fallen or might fall into poverty (Kabeer, 2009). Social insurance refers to formalized systems of pensions, health insurance, maternity benefits and unemployed benefits and also includes informal initiatives such as funeral clubs and saving clubs (EU, 2012).

The other pillar of social protection is where it is regarded as a promotive measure. In this category, the aim is to enhance real incomes and capabilities, which is achieved through a range of livelihood enhancing programmes targeting both households and individuals such as microfinance and school feeding (Devereux and Wheeler, 2002).

Finally, the last pillar of social protection is where it is regarded as a transformative measure. This is where it seeks to address concerns of social equity and exclusion, such as collective action for workers’ rights or upholding human rights for minority groups (Cohen and Manken, 2006). This includes changes to the regulatory framework to protect socially vulnerable groups, such as HIV and AIDS victims. The aim is to transform public attitudes regarding these groups.

In this research, the study will look at social assistance as a protective measure for the elderly group. This is due to the fact that in most cases, grandparents are considered to be chronically poor which implies they are economically and socially vulnerable hence they need relief as they are not able to work and remain productive.

3.3 WORLD COMMITMENTS FOR THE ELDERLY

The Universal Declaration of Human Rights of 1948 proclaims that, “everyone, as a member of society, has the right to social security [...]” (article 22), and further refers to the right to necessary social services, to security in the case of sickness, disability, old age and unemployment (article 25). The International Covenant on Economic, Social and Cultural
Rights of 1966 recognizes, “the right of everyone to social security, including social insurance” (article 9).

The international community has made a number of commitments to tackle HIV and AIDS and to reduce poverty as well as to mainstream ageing. As much as these commitments exist, little has been done by most governments to put in place policies that would support all the commitments being made to support elderly communities in relation to HIV and AIDS. Examples of the commitments made to date include the UN (2001) declaration of commitment to HIV and AIDS, which commits member states to ensure the development and implementation of multi-sectoral national strategies that address gender and age-based dimensions of the epidemic and strengthen family and community-based care. It further commits government to review the social and economic impact of HIV and AIDS at all levels of society especially on women and the elderly and particularly in their roles as caregivers.

Secondly, the Madrid International Plan of Action on Ageing (2002) commits all UN member states to improvement in the assessment of the impact of HIV and AIDS on the health of older persons infected and affected by HIV and AIDS, including caring for infected or surviving family members, and to the provision of adequate information, training, treatment, medical care and support to older persons living with HIV and AIDS. This includes their caregivers. It also requires the introduction of policies to provide support, health care and loans to older caregivers to assist them in meeting the needs of children and grandchildren in accordance with the Millennium Development Goals (MDGs).

Furthermore, the African Union (AU) policy framework and plan of action on ageing (2002) commits AU member states to protect the rights and needs of older people affected by HIV and AIDS and other epidemics, including the recognition that older people are a sexually active and at-risk
group and that they are the major providers of care for those who are sick, as well as providing for orphaned grandchildren. Lastly, the MDGs (2000) commit the UN member states to halving by 2015 the number of people living in extreme poverty and halting and reversing the spread of HIV and AIDS.

As much as these policies are known, their implementation is still vague in most countries, including Malawi. This research will therefore focus on the roles of different institutions and the policies that have helped to sustain the livelihoods of the elderly.

3.4. ANALYSIS OF SOCIAL PROTECTION POLICIES

Generally, developing and implementing appropriate policies is an important aspect of managing a country through a crisis. The strongest criticisms that can be made of country leaders is that they either have no policies in place for a specific issue or they have the policies but there is no implementation. Nowadays policy is becoming an increasingly critical focus for both leaders and citizens, hence there is need for greater effort in how policies are formulated, managed and implemented. In this regard, in the context of HIV and AIDS challenges, it is important to reflect how policies have taken into account the needs of the population affected by the epidemic. Kofi Annan observed that, “we need nothing less than a dramatic reorientation of attitudes, ideas and policies towards ageing. Rigid and dismissive notions of ‘age’ and ‘ageing’ have no place in today’s world” (UN, 2000). Having effective policies to protect the elderly will ensure that their livelihoods are sustained according to the local context.

A study conducted by Help Age International revealed that most national policies and multi-sectoral frameworks do not specifically acknowledge the needs of older people, but stress the link between poverty and HIV and AIDS (HAI, 2004). In most national policies, there is more emphasis on the
rights of people living with AIDS and orphaned children, prevention, testing and care. Some governments have tried to specifically look at having the ageing policies in place as in Tanzania, for example, where there is the national ageing policy which recognises older people as a resource in development and their rights within the framework of the Tanzanian institutions. This policy commits the government of Tanzania to, among other things, review the costs and access to quality health care for older people, raise awareness of their needs, counsel and train older people in the care of people living with HIV and AIDS and ensure that they participate in the planning and implementation of development plans. The policy further seeks to establish credit funds for older people and encourage district councils and civil society to build the capacity of older people to engage in income generation activities (Help Age International, 2004:7).

The Tanzania example offers more opportunities for governments to have policies that support the elderly, although the challenge still lies in the implementation of this policy on the ground to support the needs of the elderly. Little is known in relation to the implementation of the policy in Tanzania.

In South Africa, the government has made provision in their social grants where older people looking after orphans could access such services. However, it is indicated that as much as they are eligible for child support grants, the take-up rates are very low. Not only are there stringent eligibility requirements, but older people also face discrimination from social workers who deem the older people to be “too old” to be the carers of the children despite the fact that they are already undertaking this role (Kassey, 2008).

As indicated, in Malawi, the Government of Bingu wa Mutharika was the first to seriously start considering the issues affecting the elderly in Malawi.
This has been seen through the current Malawi Growth and Development Strategy (MGDS) of 2006-2011 which has recognised the role of social protection and the needs of the most vulnerable people, including the elderly. The government has introduced the Ministry of People with Disabilities and the Elderly and has drafted a policy on the elderly as well as on social protection, commencing in 2011 (HAI, 2004). However, there is limited information regarding the planned implementation of the policies and interventions to support the needs of the elderly, and this will be further explored in this research.

3.5 SOCIAL PROTECTION – EXPERIENCES FROM AFRICA

According to Kessy (2008), Botswana, Mauritius, Namibia, Senegal and South Africa operate large-scale social pension systems for the vulnerable groups. The South African and Senegalese schemes are means tested whilst the Botswana, Mauritius and Namibia schemes are universal. The South African scheme was introduced in 1928 for white and coloured South Africans who lacked occupational pensions and was broadened in 1944 to cover all South Africans. The scheme in 2008 provided R740 a month (US$105) for men aged 65 and over and women aged 60 and over. According to the World Bank, in 2012 South Africa gave an equivalent of $144 to each beneficiary per month. This scheme could be regarded as universal as the majority of the black population qualifies and it is the highest paying in Southern Africa, followed by Mauritius which provided $93 per month in the same year (World Bank, 2012).

The Namibian government introduced a national pension fund in 1992 which by 2012 provided the equivalent of $59 non-contributory pension to all Namibians over 60 years of age. By the year 2001, the scheme had reached 96,767 beneficiaries from a total of 105,000 people over 60 (Kessy, 2008). In 1996 the government of Botswana launched its universal pension scheme targeting all elderly people over the age of 65. This
scheme had 80,000 beneficiaries and reached between 65 and 74 per cent of the target group and 42 per cent of the total population by the end of 2008. In Botswana, the value given by 2012 was $29 (World Bank, 2012). Mozambique operated a cash transfer system targeting about 70,000 urban households headed by the elderly, chronically ill or disabled people with an annual budget of approximately US$6 million (Kessy, 2008).

Lesotho started social protection in 2004 with a universal non-contributory pension where all citizens over the age of 70 received $39 per month by the end of 2012 (World Bank, 2012). Compared to the other countries, the age threshold is the highest, but by 2005 this scheme reached about 69,046 beneficiaries.

Other countries have piloted the cash transfers scheme covering the poorest households, most of which are the elderly. This includes the Kalomo Cash transfer scheme in Zambia which provides $6-$8 a month. The same programme operates in Burkina Faso, Cameroon, Ethiopia, Guinea, Kenya, Senegal and Tanzania (Kessy, 2008).

Through these social pensions, a number of economic and social benefits have been documented. Examples include Namibia where it is noted that 13.8 per cent of the cash received by the beneficiaries is spent on health care and medicines. In South Africa and Zambia pension money has been spent on health and education of dependents (Kessy, 2008).

3.6. SOCIAL PROTECTION AND THE ELDERLY

In the context of the elderly, classified above to be both socially and economically vulnerable, it is clear that where there is no effective social protection their potential to face several economic and social risks is very high. Their likelihood of being harmed by adverse events is high (HAI,
Such types of adverse event include the HIV and AIDS epidemic. As a result of HIV and AIDS, there is increased probability of the elderly to fall below the poverty line and for those already below the poverty line to remain there and fall even further into poverty (Kessy, 2008). The vulnerability of this group will vary according to their capacity to prevent, mitigate or cope with such events as well as the capacity of the social security system to protect them (Ssengozi, 2007).

In Malawi the elderly used to depend on the economic and social support provided by their children and communities. With the increased socio-economic challenges and shifting family structures, children are failing to look after their ageing parents. The existing social structures where communities could take care of the elderly no longer function effectively.

HIV and AIDS has increased the number of orphans globally. In most countries, grandparents have stepped in to fill the gap left by deceased parents. With the growing epidemic on the African continent, there is a renewed focus on social protection and social transfers as tools to reduce poverty, to promote growth and to strengthen the social contract between the state and citizens and enhance social cohesion. This was supported at the inter-governmental regional conference of March 2006 where the “Livingstone Call for Action” was launched, which advocates for social transfer programmes to vulnerable children, older people and people living with disabilities with the aim of enhancing their livelihoods.

It must be recognised that the elderly population is increasing. In Sub Saharan Africa, the number of people aged 60 and over will double in the next 30 years, despite the impact of HIV and AIDS on life expectancy at birth (Lutz, 2001). By 2050, nearly one in four people in Asia and Latin America and more than one in ten in Sub Saharan Africa will be over 60 (HAI, 2002). There is a growing need to target this population. While an increase in older people is a positive indicator of progress in human
development, there must also be some consideration of quality of life indicators (Apslan and Mabuthu, 2005).

The question of whether social protection is the possible solution to the challenges faced by the elderly in caring for orphans will be addressed in the research, considering all possible solutions to support the effects of HIV and AIDS on the elderly.

3.7 SOCIAL PROTECTION JOURNEY AND EXPERIENCES FROM MALAWI

The social protection discourse in Malawi is not new but has been in evidence since independence in July 1964 in various forms. The shift to social protection terminology is, however, a recent one (Harrigan, 2003). This notion underlies government commitment to move towards long term and developmental activities to both alleviate and reduce poverty. According to Slater and Tsoka (2007) there are four distinct stages in the evolution of social protection in Malawi: price controls, structural adjustment programmes, social dimension adjustment, and safety nets strategy (Slater and Tsoka, 2007). On the other hand, Harrigan (2013) views the changes around social protection based on the presidents that ruled the country. Each of them looked at social protection in a different lens: these were Dr Banda from 1961-1994, Dr Muluzi from 1994-2004 and Dr Bingu Wamutharika from 2004-2012.

Table 4 below depicts the social protection journey in Malawi, with specific milestones of policies and strategic political will.
Table 4: Social Protection Journey in Malawi

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1964</td>
<td>Malawi independence</td>
</tr>
<tr>
<td>1971</td>
<td>Agriculture Development and Marketing Co-operation established by parliament and mandated to make Agriculture inputs</td>
</tr>
<tr>
<td>1978 - 1990</td>
<td>National Rural Development Programmeme, first of four World Bank funded</td>
</tr>
<tr>
<td>1981</td>
<td>Agriculture Development and Marketing Co-operation established by parliament and mandated to make Agriculture inputs</td>
</tr>
<tr>
<td>1986</td>
<td>State development policies revised rural development strategy for period 1987-1996</td>
</tr>
<tr>
<td>1988</td>
<td>The smallholder Agriculture Credit Administration (SACA) was established as an organisation within the Ministry of Agriculture</td>
</tr>
<tr>
<td>1994</td>
<td>Change of government to United Democratic Front</td>
</tr>
<tr>
<td>1994</td>
<td>Malawi Rural Finance Company established as an independent legal entity to provide farming input credit to small farmers</td>
</tr>
<tr>
<td>1995</td>
<td>Agriculture and Livestock Development and Action plan (ALDSAP) launched</td>
</tr>
<tr>
<td>1995 - 2014</td>
<td>Malawi Social Action Fund established as the major social protection instrument to mitigate social aspects of adjustment programmes</td>
</tr>
<tr>
<td>1998 - 2000</td>
<td>Government implements starter pack programmes</td>
</tr>
<tr>
<td>2000</td>
<td>Government launched the National Safety Net strategy</td>
</tr>
<tr>
<td>2001 - 2004</td>
<td>Government implements the targeted inputs programme</td>
</tr>
<tr>
<td>2002</td>
<td>Government initiates a National Safety Net programme under World Bank supported by the Malawi Poverty Reduction Strategy (MPRS)</td>
</tr>
<tr>
<td>2004</td>
<td>Change of government, Bingu Wa Mutharika</td>
</tr>
<tr>
<td>2006</td>
<td>Government implements the Agriculture inputs Subsidy Programme</td>
</tr>
<tr>
<td>2006</td>
<td>The Malawi Growth and Development Strategy (MGDS) 2006-2011 launched as the successor to MPRS. Policy-specific to achieve social protection and disaster risk management as core</td>
</tr>
<tr>
<td>2009</td>
<td>Government launches a social support strategy</td>
</tr>
<tr>
<td>2012</td>
<td>New administration under Joyce Banda</td>
</tr>
<tr>
<td></td>
<td>Government launches social policy</td>
</tr>
</tbody>
</table>

Source: UNDP Discussion paper 2013 - Malawi Case study: Social protection Measures and labor Markets
3.7.1. First phase 1964-1994: Dr Banda era

On gaining independence in 1964, President Banda aimed to address the marginalization of Malawians and allow them to be self-sufficient. He was able to do this through the development of large-scale agriculture schemes funded by the World Bank, awarding of large landholdings to parastatals to produce cash crops like tea and tobacco, middle class people getting land to produce tobacco on a tenure of 99 years, and finally giving restrictive private sector opportunities to trade consumables and agriculture commodities like ADMARC (Harrigan, 2013). Through the leadership of Dr Banda, Malawians in the rural areas were mostly food secure as the government focused on rural agriculture.

Malawi is an agro-economy which implies that farming both at small scale and large scale is the means of survival for any household. Most people in Malawi in the old days would not have considered purchasing maize as each one was very active in farming their own lands as a means of survival. It was only those who were residing in towns where access to land was limited who resorted to buying maize. As a result of this production, Malawians could export maize to other countries like Zimbabwe, Zambia and Mozambique.

Every year Dr Banda would monitor harvesting progress in the various districts, conducting personal "crop inspection" to encourage Malawians to engage in productive farming. The model farms visited would act as a signal for each Malawian to emulate these and ensure their own production was of a high standard.

The Banda Social Protection Intervention approaches could be categorized into his rule between 1964 and 1981 and from 1981 to his final year of office in 1994. In his first phase of rule, social protection interventions in Malawi took the form of price controls and subsidies
(Slater and Tsoka, 2007). The government took the initiative of controlling input and output prices to protect the most needy, provided universal input subsidies as well as supported farmers through farmer clubs with various subsidies (Chinsinga, 2007). The government invested strongly in research for green revolution technologies with the aim of improving farming for the betterment of the Malawian population (Harrigan, 2013). Other activities in this era were the food aid given to Malawians in need especially during the 1980 famine (Devereux, 2006). This continued in 1991-1994 where the World Food Programme supported Malawians who were food insecure. In the period 1982 to 1994, the price control mechanisms were observed as being fiscally unsustainable (Slater and Tsoka, 2007). In the 1980s, Structural Adjustment Programmes (SAPs) were introduced with the support of the World Bank and the IMF.

Structural Adjustment Programmes (SAPs) in Malawi were first implemented in 1981 after an economic crisis in 1979 and 1980. SAPs are a series of reforms at a changing structure of the economy from government controlled to private sector-led (Harrigan, 2012; Harrigan, 2003). These programmes are expected to create a free market economy through market reforms (Slater and Tsoka, 2007). The aim of these programmes was to deal with the external and internal fiscal imbalances experienced by Malawi at that time as a result of slow growth in smallholder exports, increased reliance on tobacco, and dependence on imported fuel (Chinsinga, 2002).

In Malawi a number of factors were identified as creating a foundation for the country to adopt SAPs including the slow growth of smallholder exports, the narrowness of the export base and increased dependency on tobacco, the increasing budget deficits of the late 1970s, and the inflexible system of government administered prices and wages (Harrigan, 1991). These weaknesses were compounded by the shocks that Malawi experienced in the late 1970s where there was a dramatic worsening of
terms of trade; a sharp rise in international interest rates; drought conditions in 1979-1980; and disruption to Malawi's traditional trade route to international markets (Chinsinga, 2009).

During the SAP implementation phase, Malawi took seven loans within 18 years from the World Bank and IMF. This created a high debt burden (Harrigan, 1991). SAPs were designed to give incentives for the production of tradeables, rationalise government taxes and expenditure, and strengthen key sectors and institutions with a view to setting the stage for sustainable macroeconomic growth (Barrientos, 2012). The expansion of output that is expected from these adjustment measures would have a positive impact on employment creation (Chinsinga, 2002). However, Malawi did not see this full benefit. Rather than supporting the needs of vulnerable communities, SAPs is known to have weakened the economy even further.

As much as Malawi committed to SAPs the promised deliverables were not attained. As a result of SAPs women and children suffered greatly as SAPS phased out universal subsidies which had benefited the majority of the vulnerable communities (Harrigan, 2013). According to Slater and Tsoka (2007) targeted nutrition programmes (therapeutic and supplementary feeding) for children and pregnant and lactating mothers become the sole interventions for protecting the vulnerable (Chinsinga, 2002). SAPS was thus viewed as a negative initiative for the poor.

Having realized the negative effect of SAPs, from the 1990s the Social Dimension of Adjustment (SDA) commenced with a focus on adjustment of the human face with the aim of managing the impact of the SAPS on the most vulnerable groups (Slater and Tsoka, 2007). The aim of this programme was to develop partnerships between government and civil society to integrate social and poverty concerns in the development process (Harrigan, 2013). This was after the realization by the World Bank
that the SAPs have had a greater negative impact on the most vulnerable groups. Through the Banda era, the country saw economic growth, but in the 1980s the country suffered because of SAP as rural Malawians were not able to fend for themselves. The Banda strategy was successful as it managed to foster economic growth through agriculture. The economy grew at 5.5 per cent (Harrigan, 2003:848) and this proved to be beneficial.


Having realised the effect of SAPs, a pro-poor agricultural development strategy began to emerge. This led to the development of the Malawi Social Action Fund (MASAF) under the umbrella of the poverty alleviation programme under the leadership of Bakili Muluzi (Chinsinga, 2007). The Muluzi era was characterized as neo-patrimonialism where it wanted to reward its supporters but failed at good governance. During this period, corruption was rampant and Muluzi’s hold on the Malawian economy was negative, resulting in inflation and high debt (Harrigan, 2010). However, his leadership was attuned to the needs of the rural Malawians and the desire of the poor to move out of poverty and have a better life (Chinsinga, 2009). Programmes like MASAF were aimed at allowing the Malawian population to benefit through wealth transfers and technical support. Muluzi was characterized by his responsiveness to the needs of the poor but failed at governance.

Towards the end of the 1990s after implementation of various safety net programmes under MASAF, it was revealed that the programmes were having a greater impact on the vulnerable groups (Slater and Tsoka, 2007). Because the safety nets programmes were done on an ad hoc basis, the National Safety Nets Strategy (NSNS) was developed in 2009 (Chinsinga, 2007). This strategy is rooted in the Malawi Poverty Reduction Strategy pillar three which states that “improving the quality of life of the most vulnerable, provided for four main safety nets interventions. These
included 1) Public works programmes; 2) Targeted nutrition programmes; 3) Targeted input subsidies; and 4) Direct welfare transfers including food aid support to secondary school OVCs (Rook and Maleta, 2000; Slater and Tsoka, 2007; GoM, 2002:64).

As much as this was the case, the NSNS failed to deliver on the above commitments. According to Slater and Tsoka (2007) the Safety Nets unit which was housed in the Department of Economic Planning and Development did not have the capacity or mandate to bring together sector ministries and donors to drive the programmes within NSNS. Most donors were unwilling or unable to align their programmes to the strategy making the large number of donor-driven interventions difficult to manage (Barrientos, 2011).

3.7.3. Bingu Wa Muntharika era: 2004-2012

After Dr Muluzi left power, the new president Dr Bingu Wa Mutharika took over from 2004 to 2012. President Wa Mutharika sought to emulate aspects of President Banda’s leadership and took over supervision of key ministries that would address the core problems facing Malawians (Harrigan, 2013). He introduced the Agriculture Inputs Subsidy Programme which contributed to the achievement of record maize yields and above average production for the period 2005-2010. Most Malawians will remember him as holding out against donor demands for liberalization of agriculture markets and reforms to strategic parastatals (Harrigan, 2013).

Agriculture is not only important for rural livelihoods but also plays a significant role in the economy of the country. About 35-39 per cent of the GDP and 90 per cent of foreign exchange earnings originates in the agriculture sector (Barrientos, 2011). Through the agriculture input subsidy programme, most poor people in Malawi were targetted and this included
smallholder farmers, female and elderly headed households and households with orphans (Dorward and Chirwa, 2011).

The Farm Input Subsidy Programme (FISP) was implemented in all districts but not as a rights based programme. There were no specific laws to guide this intervention. It was supported by the National Development Strategy which had less binding budgetary provisions (Barrientos, 2011). This programme has been implemented for over six years (2006-2012) and reached an estimated 1.7 million farming households, fully funded through the Malawi fiscus (Harrigan, 2013). Notable impacts of the FISP include the increase in maize production during subsidy years 2005/6 to 2009 ranging from 273,000 to 836,000 metric tonnes (Dorward and Chirwa, 2011). The Ministry of Agriculture presents the increase ranging from 975,000 to 2,031,00 metric tonnes. Both data show that maize production increased significantly (Government of Malawi, 2010).

Additionally, FIPS benefit across the country is seen through the availability of maize in the communities and a lack of evidence of food shortages despite price hikes of maize (Barrientos, 2011). Furthermore, it is stated that even labour wages increased as fewer people sought work since they were food secure.

By 2006, efforts were made to develop the social protection policy framework within the MDGs. The policy intended to translate the ideals of the MDGs into actionable programmes and interventions that would address the needs of the most vulnerable people in Malawi. The aim of the policy was to ensure a strategic co-ordination of new and existing social protection initiatives within a common institutional and funding framework.

In summary, from 1994 to 2010, Malawi implemented various social protection interventions. These included food and cash transfers which were aimed at supporting the food insecure households; food and cash for
work targeting transient food insecure households able to work; nutrition and school feeding programmes; and starter packs and farm input subsidies (Charman, 2007).

Even where these programmes were implemented, Barrientos (2011) presents challenges that faced the implementation of the successful fertilizer input programme. Such challenges included the need for sustainable resources to target all poor and vulnerable households. Considering that this was funded through government, all communities expected to be recipients of the programme although there was a division in communities of those who were part of the programme and those who did not qualify. The input subsidy alone amounted to 2.1 per cent of GDP and 6 per cent of the national budget in 2005/06 (Barrientos, 2011). Due to the increase in price of fertilizer, the subsidy rose to 6.6 per cent of GDP or 16 per cent of the national budget in 2008/9 (Barrientos, 2011). This indicates that the programme required a significant budget allocation and was perceived as an expensive programme.

Additionally, knowing that this was not rights-based and there was no legislation to support its implementation, it was highly dependent on the political will of the government. The lack of appropriate legislation, proper co-ordination amongst various stakeholders, inclusion and exclusion errors and the duration of access highly affected the management of the programme. This has implications for any social protection intervention that targets the elderly.

Even though this intervention faced challenges, it had the political support that allowed it to succeed. By having a special budget that was properly co-ordinated and managed, the fertilizer subsidy remains a good example of a social protection programme that worked in Malawi. The programme allowed vulnerable households to be food secure, have income and
improved health and education for the vulnerable communities (Barrientos, 2011; Devereux, 2005).

By 2010 Malawi had decided to implement a social protection policy. The final policy on social protection was only released in 2012, titled the National Social Support Policy (NSSP) which detailed the various interventions that the Government would undertake in order to support the needs of the poor. In the same year, Government established the Ministry of Persons with Disabilities and the Elderly as well as formulating the policy on the elderly. The Malawi President indicated his commitment to the needs of the elderly by establishing what is called Bingu Silver Grey Foundation for the Elderly (BSF). In November 2007 the foundation was launched by the president, who said that, “being elderly does not mean that one was useless, but that one had something to contribute to society” (Late President Muntharika, Lilongwe, November 2007). One of the objectives of this foundation is to safeguard the needs of the elderly. To date, no evaluation has been done to evaluate the outreach and impact of this programme for the elderly.

Unlike other countries such as Botswana, Namibia and South Africa, Malawi has not managed to start any social assistance scheme to support the elderly. Pilot studies on direct cash transfers have been undertaken; for example the UNICEF cash transfers programme in Mchinji in 2004 was discontinued due to structural challenges. The government has drafted a policy on the elderly and social protection which has not yet been implemented. As part of the policy review, Chapter seven will present a detailed review of the implementation of the policies.
3.8. SOCIAL PROTECTION INTERVENTIONS AND ACTIVITIES IN MALAWI

The section below presents the various programmes that have been implemented in Malawi with the aim of understanding how they have supported the elderly.

3.8.1. Social Cash Transfer Programme

The Malawi Social Cash Transfer Programme (SCTP) was initiated with the objectives of reducing poverty, hunger and starvation and increasing child school enrolment, health and nutrition among vulnerable households (UNICEF, 2012). This project was piloted in Mchinji in 2007 and was deemed to be a success in targeting and responding to the needs of the ultra poor. Following the successful implementation of the programme in Mchinji, the project was later scaled up to six additional districts: Machinga, Likoma, Mangochi, Chitipa, Phalombe and Salima. From 2006 to 2011 the project reached over 25,000 households through the SCTP, viewed as a needs based social assistance programme (UNICEF, 2012). Other countries including South Africa, Kenya and Zambia have also implemented similar cash transfer programmes.

The SCTP received funding from various sources with the major donor up to 2011 being the Global Fund to fight Malaria, AIDS and Tuberculosis through the National AIDS Commission (Devereux, 2006). Additional funding for the programme was provided by Irish Aid. After 2012 the programme was to receive funding from the German government through Kreditanstalt für Wiederaufbau (KfW). A total of €13 million was earmarked for this programme with UNICEF Malawi co-ordinating the technical assistance and capacity strengthening aspects (UNICEF, 2012). The Ministry of Gender, Children and Community Development was given the mandate of directly implementing the programme while the policy direction
on social protection is provided by the Division of Poverty Reduction and Social Protection in the Ministry of Economic Planning and Development (UNICEF, 2012).

As much as the programme was scaled up to additional districts, evaluation of the programme indicates that it failed in targeting the appropriate beneficiaries as the majority of Malawians are poor. As such it created divisions within communities as all are deemed to be potential beneficiaries. Over 300,000 households were known to be eligible for this programme which benefited only 25,000 households. This programme targeted all vulnerable communities, with some of the beneficiaries being the elderly. There is little information to show the number of elderly that benefited from this intervention. Subsequently other cash transfer programmes led by the UN and NGOs were introduced in different areas.

3.8.2. Supplementary feeding programmes

Another large-scale government-led social protection intervention is the supplementary feeding programme implemented with the Government of Malawi through the Ministry of Education with support from the World Food Programme (WFP, 2012). Other key players in this programme include Mary Meals, Millennium Village Project Zomba and Land O"Lakes.

Malawi has a low level of literacy and in most rural communities this is exacerbated by food insecurity. Many children drop out of school due to hunger. Considering this need, these programmes are designed with the aim of improving school enrolment, attendance, retention and the nutrition status of children of school-going age. The WFP’s School Meals Programme started in 1999 as a pilot in one district and is currently being implemented in thirteen districts in the southern and central regions of the country (WFP, 2012). Mary Meals School Feeding Programme started in
2000 and targets districts that are not served by the WFP’s School Feeding Programme.

The establishment of the Malawi Vulnerability Assessment has allowed for enhanced institutional capacity by the Malawi government to be able to assess the extent of food insecurity in the country and respond accordingly through geographical targeting (Harrigan, 2011).

Most districts that are implementing school feeding have seen good attendance and growth in enrolment and improved well-being of children. However, there have been growing concerns regarding the selection criteria of districts as well as participating schools within each district. Not all schools have been given the opportunity to benefit from school feeding programmes and as such there has been a migration of children from non-benefiting schools to benefiting schools. This has affected overall enrolment in the participating schools. This intervention solely targets the children and not the elderly.

3.8.3. Public works programmes

Public works programmes are where individuals and households with labour are engaged in various public works initiatives, and earn income for their labour (Harrigan, 2011). Through such programmes beneficiaries were able to do land clearing, conservation agriculture and rehabilitation and construction of economic infrastructure. An example is the Local Development Fund Public Works Programme (formerly known as MASAF PWP) implemented through local councils with support from the World Bank (UNICEF, 2012). In Malawi various NGOS have implemented public works programmes targeting beneficiaries within their operating districts. One such example is World Vision Malawi which was able to implement a Cash For Work programme in Chikwawa district targeting the most vulnerable members of the family in collaboration with the World Food
Programme. Through this intervention the communities were able to create community-based assets that included dams, fish ponds, banana plantations, and rehabilitation of schools. Both the fish ponds and banana plantations have raised income that is divided among the community members.

Another example is the Income Generating Public Works Programme supported by the European Union, whose main aim is to achieve durable poverty alleviation and food security by improving the overall socio-economic status of households through such initiatives as addressing lack of accessibility to rural areas; developing sustainable fuel wood and timber supplies; improving dry season gardening and providing an alternative to the distribution of food to needy communities; and to replacing these food hand-outs with projects and activities that enable communities to achieve longer term food security (Chirwa, 2010).

3.8.4. Farm Input Subsidy Programme

The Agricultural Input Subsidy Programme in Malawi started during the Banda era and was reinforced during the Bingu wa Mutharika era (Harrigan, 2013). The aim of these programmes was to improve agriculture production and productivity of smallholder farmers for both food and cash crops and thereby reduce food insecurity. These input subsidy programmes have been in existence since Malawi attained its independence from Britain in 1964 (Levy, 2005). The Starter Pack programme is one such agricultural input programme that was implemented from 1998 to 2004. The programme provided 10-15 kgs of fertilizer and ample hybrid maize seed, free of charge, and sufficient to plant 0.1 hectares of land. It targeted between 33-96 per cent of rural smallholder farmers which was scaled down from being a universal subsidy in 1998/1999 to a targeted input programme in the 2003/2004
production periods (Harrigan, 2003; Levy, 2005). This was done during the Muluzi era.

During the Bingu Wa Mutharika era, Malawi implemented the fertilizer subsidy programme. President Mutharika wanted to ensure that the investment in agriculture made by the late President Banda would be reinforced and input subsidies sustained. There was also some interest in undertaking a clear strategy that did not fear the western influence (Chinsinga, 2008). The Agriculture Input Subsidy Programme (AISP) has been recognised for its contribution to the bumper yields that Malawi saw between 2005 and 2010 (Harrigan, 2009). This contributed to making Bingu one of the most admired presidents in Malawi during his first tenure although this view later changed. President Mutharika managed to hold out against donors like the World Bank and the IMF for further liberalization of agricultural markets and reforms to strategic parastatals. He also engaged on the provision of agricultural extension and subsidies for small farmers.

It is widely known in Malawi that the fertiliser input subsidy contributed greatly to the bumper harvest. It meant that most vulnerable households being able to be food secure. Malawi also exported maize to Mozambique and Zimbabwe. In 2012/2013 the government of Malawi spent about MK54 billion on this project yet it remains a controversial programme (Harrigan, 2009).

A review of this programme indicates that there was no special targetting of the elderly throughout its design. All people were defined as vulnerable in accordance with set criteria and there were no special conditions for the elderly who were simply categorised as vulnerable based on the overall criteria.
3.9. CHALLENGES OF SOCIAL PROTECTION

As much as social protection has gained momentum in various governmental and international agendas, this field has also presented many challenges. This section will explain some of the challenges associated with social protection. These have been categorized as politics and political economy of social protection, finance resource mobilization, and institutional arrangements.

It must be acknowledged that the implementation of social protection interventions in most countries is more political. According to Cook and Kabeer (2009) and Barrientos (2003), politics, political regimes and political interest play an important role in shaping the implementation of social protection interventions in any country. In this view, social protection is dependant on the political will of the parties that are running the government at that time. Some political parties take this as an opportunity to further their political regimes without any sustainability mechanisms being put in place. In this type of situation, most social protection interventions fail to meet their desired standards. Other parties use this as their campaign with Kenya providing an example, where a parliamentarian told the communities that he was responsible for the food aid they were getting and if they did not vote for him they would no longer receive this.

Secondly, for any social protection intervention to survive there is a need for financial resources. According to Ellis, et al. (2008), every political system will need to find a way of allocating the limited resources. In some cases, the motivation for expenditure on social protection may be derived from buying political support and maintaining regime or party legitimacy. Depending on the agenda of the government, the social protection interventions might be progressive in distributing wealth from the rich to the poor or just having minimal distributions. In Africa, social protection interventions are mostly challenged by hard budgets in most African
states. Such being the case, most governments worry about sustainability of any social protection intervention, making it difficult to easily implement these interventions (EU, 2012).

With regard to funding, it is noted that in most African countries social protection interventions have relied on donor funding (Mutangura, 2007). This depends on the political will of the donors and if the donor reduces or withdraws the funding, it means the end of the social protection intervention being implemented. As such, most governments are careful in starting these interventions for fear of failing to sustain them.

Another challenge of social protection has also been the limited information dissemination on availability of existing social protection programmes and the added value they have contributed to the needs of the vulnerable groups. There has been a lot of documentation in some areas research on social protection. However, the information has remained either with the organizations implementing or within government sectors (Behrendt, 2008). Failure to widely communicate and publish the success of social protection interventions has limited the sharing of the value of these interventions. Behrendt (2008) argues that in Sub Saharan Africa, basic social protection is feasible and has a marked effect on the reduction of poverty. Furthermore, the cost of basic social protection benefits packages are within reasonable and affordable limits if countries and donors make a strong commitment.

As much as the political and financing will have a role to play in social protection, so too does the specific institutional arrangements at national level have implications in the design and implementation of social protection interventions. For a government to effectively design, implement and deliver an effective social protection system, the need for comprehensive and sustainable institutional frameworks is of critical importance. This requires a citizen-centred approach and having
governments that have the right infrastructure to implement desired programmes which in most situations is lacking. Most government structures are not accessible to the rural population. Most of them are based in towns where the rural communities have to travel for over two to three hours to access the services.

This is coupled with the lack of reliable data on which policies on social protection could be based. As governments design these interventions, they face challenges in choosing the right mode of intervention as there is limited information to inform the decision. This is further aggravated by failure to even monitor and evaluate the effectiveness of social protection interventions. Targeting the right beneficiaries becomes yet another challenge. A number of interventions around social protection in Asia and Africa have indicated the challenge in selecting the beneficiaries to participate in the programme. Apart from universal social pensions, other interventions are faced with inclusion and exclusion errors.

3.10 SUMMARY

Social protection is considered one of the integral category that is responding to severity of poverty in the development discourse (Norton, Carnway and Foster 2013). Based on this, social protection is critically linked to social development on the definition, explanation and identification of the poor and also the discourse on what contributes to sustainable development especially sustainable poverty reduction. The discussions around livelihoods in chapter 2 presented an understanding of the three critical traditions of poverty namely vulnerability and risks, social exclusion and cohesion, and issues of economy. it is evident that social protection has a role to play in development discourse in addressing these critical issues.
The discussion around elderly challenges requires more detailed discourse in understanding household poverty and interventions that are meant to address these types of deprivation. The elderly in this study could be seen as a group that is deprived due to social and economic status. Through social assistance as presented in this research, the elderly could be supported and embraced as part of the society. Social protection through social assistance is seen to deliver assistance to the poorest and is able to strengthen their livelihoods, resulting in the elderly not being vulnerable again due to their status and role in society. Evidence suggests that the poorest households in poor countries seldom benefit from direct state support, relying instead on transfers from a range of non-state sources (kin, community, religious organizations) (Norway, et al, 2013).

This chapter has presented the evidence that social protection does contribute fully in supporting and strengthening social capital, social cohesion and economic well being of the deprived.

Social protection interventions continue to receive positive attention, mostly in developing countries. As much as there are criticisms of governments abusing the interventions to promote their own political agendas, there is strong evidence that social protection has addressed the needs of the vulnerable. It is evident that in order to have a more sustained social protection activity there is need for good institutional structures, political will, effective monitoring systems and financial support.

It may be argued that older persons are important and have contributions to make to the socio-economic development of the country. With the increase in orphans due to the impact of HIV and AIDS, the role that the elderly are playing must be emphasised. It is important, therefore, that issues around ageing in Malawi are given adequate attention and are properly documented to influence policies and government priorities in addressing the needs of this age group. For this study to effectively
understand the needs of the elderly, the factors that will determine the well-being of the elderly and their priorities to survive in this changing environment need to be determined. In this regard, the research explores the livelihoods approach as an holistic framework to understand the challenges that the elderly face in sustaining their livelihoods within a highly vulnerable context.

This chapter has explained the role that social protection can have on the vulnerable and for the purposes of this research it is the elderly. It has further examined social protection and identified the various types of social protection. Social assistance has been identified as the potentially ideal intervention to address the needs of grandparents. In Chapter four, the research presents the conceptual framework that will guide the study. The literature has presented two important concepts, livelihoods and social protection. In the next chapter, the researcher explains how the two approaches drive the whole research project.
CHAPTER FOUR

CONCEPTUAL FRAMEWORK: SOCIAL ASSISTANCE
SUPPORTING ELDERLY LIVELIHOODS

4.1. INTRODUCTION

This section outlines the conceptual framework that will guide this study. Based on the broader understanding of livelihoods as a basis to understand the well-being of the elderly and the social protection framework, that is social protection as a means of providing social assistance to the chronically poor, or social protection as a means of providing social insurance to those economically at risk, and social protection as a transformative action provided to those socially vulnerable, the research will seek to explore social protection as a way of providing social assistance to the chronically poor who have been made vulnerable by HIV and AIDS and through this, how their livelihoods have been changed.

4.2. RATIONALE FOR SELECTING LIVELIHOODS FRAMEWORK

In choosing this model as the framework, the rationale is that it is able to provide the understanding of both household livelihood processes and how these are affected by various shocks; in this study the shock identified is HIV and AIDS. There is a strong possibility that the elderly in the Malawian rural community could be viewed as poor and greatly affected by the HIV and AIDS epidemic. As such, their assets could be eroded, and the policy and institutions could be addressing their needs inappropriately. However, they are still expected to carry the responsibility of looking after orphans.
It is important to understand the vulnerability of any household through the lenses of the holistic needs of every household to survive. The livelihoods approach offers an understanding of the interaction of the context that every household lives in, the critical factors that every household needs to have in order to survive, and the effect of the external environment on the survival of every household. In analysing the elderly household through these lenses, it is assumed that there is a more detailed analysis on the challenges facing the elderly.

Furthermore, through this framework it is expected that it will allow for the mapping of specific interventions that will bring desirable changes to the vulnerable groups. This includes changes brought about through external interventions to improve people’s lives, for example through social protection. The framework also provides for interventions that address the livelihoods of elderly people.

Such being the case, it is important for the study to look at the different assets that define a household livelihood and document the challenges that are faced by the elderly in relation to these assets.

4.3. SOCIAL ASSISTANCE AS THE CHOICE

Every society has people who are vulnerable because of age, illness or disability, or who suffer from the effects of natural disasters, economic crises or civil conflicts. The vulnerable have been defined as those elderly and looking after children orphaned by HIV and AIDS. Social assistance schemes have been designed to assist the most vulnerable individuals, households and communities to meet a subsistence floor and improve living standards (ILO, 2011).
Looking at the different social protection interventions that exist in supporting vulnerable people, it is advisable that the role of social assistance, especially social pensions, be explored further as regards the needs of the elderly looking after orphans. This category has no formal jobs hence social insurance is not an option and Malawi does not have a good system to host health insurance. Such being the case, the role of social assistance as the underpinning area will be considered in this study.

Social assistance is defined as a “benefit in cash or in kind, financed by the state (national or local) and usually provided on the basis of a means or income test” (Howell, 2001). These programmes include public actions, government and non-government interventions designed to transfer resources to eligible vulnerable and deprived persons (Norton, Conway and Foster, 2001; Howell, 2001). Examples of such interventions include a disability benefit, single parent intervention, social pensions, and food aid (EU, 2012). In this research the focus will be on the role of social pensions as a social assistance intervention to support the needs of the elderly.

It has been acknowledged that the elderly are vulnerable. Every vulnerable group suffers from both human poverty and income poverty. Vulnerabilities are caused through social exclusion hence social assistance programmes should include income as an important factor but not the only factor (Barrientos, 2010). Vulnerability is multi-dimensional encompassing health, education, employment, housing, social ties, community participation and income consumption (Norton, et al., 2001). In this regard, social assistance programmes could be designed to achieve other social objectives, for example, the provision of free school meals to encourage poor families to keep their children in school, especially girls, as well as the provision of nutritious food to meet health outcomes (Devereux and Vital, 2008).
According to Howell (2001), social assistance programmes have usually been designed to help people cope with sudden crises or shocks. These programmes are linked with poverty alleviation interventions due to the nature of the target groups, namely the most vulnerable members in the society (EU, 2012). The need to have social assistance programmes greatly relies on the target audience and the nature of social assistance that will address their needs.

Additionally, Kabeer (2009) states that social assistance programmes contribute to a more sustained economic impact of vulnerable households. This mostly happens when the targeted households invest or save their money. In cases where the social assistance programme was in the form of input subsidy, evidence indicates that there are more savings in these homes as the cash in the house is used for other needs (Gertler, Martinez and Rubio Cordina, 2006). Gartler, et al. (2006) in the review of a programme in Brazil relating to cash transfers states that a notable 12 per cent of beneficiaries invested their cash in agriculture activities.

This research will explore and describe the interventions in Lesotho as an example of social pensions that have targeted the elderly. In the review, the research will also focus on other examples of social assistance in other countries to provide examples which have worked over time. Lesotho forms the basis of a detailed case study that will present the processes followed, the stakeholders involved and potential benefits as seen from the perspective of the elderly housing orphaned children.

It must be noted that across Southern Africa the provision of social pensions or regular cash transfers for the elderly is increasing. As outlined in chapter three, South Africa first implemented social pensions in the 1920s and in the 1970s this was adopted by Namibia. Lesotho has recently joined and has provided social pensions for the elderly as from 2004 and Swaziland from 2005. While the targeting criteria has not looked
at the challenges of the elderly who are specifically looking after orphans, it is important to note that social pensions have been implemented in other African countries at a national level with good results.

Social pensions are not the same as standard pensions. According to Devereux and Viatla (2008), standard pensions are usually paid to workers when they retire after formal employment and are funded by contributions linked to pre-retirement income, made both by the employer and employee. Social pensions are given by the state as an unconditional cash transfer to all elderly citizens and in some cases to poor elderly citizens with 60-65 years being the most common age threshold. An important thing to note with social pensions is that they are a legal right that can be claimed by all elderly citizens.

Economic insecurity is the main concern for older persons, whether they are agricultural wage labourers or unemployed (Handayani and Babajanian, 2012). Most of the elderly people are not able to save or accumulate enough income in their old age. Due to poverty, a large proportion of elderly people have to continue finding ways of surviving as they cannot cope otherwise. In this context legal social pensions provide a basis for the elderly to demand their entitlement and are an important safety net for the elderly who are socially, economically and chronically poor.

4.3.1. Benefits of social pensions

In the countries that have implemented social pensions, notable benefits have been seen. To begin with, it is noted that social pensions are administratively simple. Unlike other social protection interventions, once the government has agreed on the standard amount and payment channel, administering the pension itself is easy and its outreach is wider considering that government infrastructure exists widely (Kabeer, 2009).
Furthermore, the various social pension programmes that have been implemented around the world indicate immediate impact in addressing food insecurity in the households. This has been achieved by increasing the capacity of the household to buy food in response to economic shocks (EU, 2012; ADB, 2012). Social pensions being given to the elderly has allowed them to purchase more food and be independent providers for their households.

Barrientos and Scott (2008) estimates that in Bolivia in a social pension scheme the overall consumption rose by twice the amount of the pension among social pension beneficiaries in rural areas, indicating improvements in household production. In Brazil, due to the sustained implementation of the social pension scheme for informal workers, beneficiaries were allowed to borrow from the banks to invest in various activities in their community as long as there was proof of continued cash flow (Barrientos and Scott, 2009). Similarly in Namibia, through the social pension scheme, an impact study found that social pension increased the volume of trade for grocery stores, and contributed to the development of market infrastructure and trade nationwide (Devereux, 2001). It was further reported that social pensions contributed to containment of malnutrition and avoidance of hunger (Morgan, 1991:351) In a pilot programme in Zambia, it was found that 29 per cent of the transfer was invested in chickens, goats and agriculture supplies. This programme targeted 10 per cent of the poorest in the community and its effect was felt (Kabeer, 2009).

Inasmuch as social pensions do contribute to household food security, they also become a source of conflict in families. As stated by Devereux and Naraa (1996), when there are challenges like drought, or financial crisis in the family, the family becomes fully dependent on social pensions. This results in failure of the contribution to meet the desired output. Families can end up in dispute around insufficient resources.
Regardless of the above challenges, the positive benefits of social pensions are widely felt. Apart from the economic impact, social pensions programmes contribute greatly to addressing structural forms of inequality within a society, inequalities which can be traced to aspects of people’s circumstances beyond their control (World Bank, 2006). It refers to the ability to bring back dignity to those who are excluded by mainstream development processes. These are people who are, “excluded from market led growth process or overlooked by purposive development interventions” (Kabeer, 2009).

As stated by Members of Parliament during a session in Namibia:

“Here in Namibia the pension is quite often the only income of an entire family. The grandmother gets the pension, the children who cannot find employment live with her, the grandchildren live with her, the women who have babies and cannot trace their fathers send their children to the grandmother and they all live on that old age pension” (Republic of Namibia, 1992b:70, in Devereux, 2001).

Social pension programmes have enabled older people to have access to various services including health care, and education for children housed in the elderly household. For most families headed by an elderly person, the pension schemes have allowed the household to pay for fees for the children and also to purchase medicine (ADB, 2012).

For most elderly households within Southern Africa with the highest HIV and AIDS prevalence rates, the governments of these countries have introduced social pensions targeting the elderly as indicated below:
Table 5: Countries with social pensions in Africa vs HIV Prevalence rate

<table>
<thead>
<tr>
<th>Country</th>
<th>Prevalence per cent</th>
<th>Social assistance targeting older people</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central African Republic</td>
<td>6.3</td>
<td>No</td>
</tr>
<tr>
<td>Malawi</td>
<td>11.9</td>
<td>No</td>
</tr>
<tr>
<td>Mozambique</td>
<td>12.5</td>
<td>Yes</td>
</tr>
<tr>
<td>Zambia</td>
<td>15.2</td>
<td>Yes</td>
</tr>
<tr>
<td>Namibia</td>
<td>15.3</td>
<td>Yes</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>15.3</td>
<td>Yes</td>
</tr>
<tr>
<td>South Africa</td>
<td>18.1</td>
<td>Yes</td>
</tr>
<tr>
<td>Lesotho</td>
<td>23.2</td>
<td>Yes</td>
</tr>
<tr>
<td>Botswana</td>
<td>23.9</td>
<td>Yes</td>
</tr>
<tr>
<td>Swaziland</td>
<td>26.1</td>
<td>Yes</td>
</tr>
</tbody>
</table>

*Source: World Bank (2012)*

Table 5 above lists the different countries that have implemented social pensions as well as the HIV prevalence rate. This is aimed at showing the context challenges that each one of them is facing due to the effects of HIV and AIDS as well as the contribution that social pensions can have on the affected communities, including the elderly. Of the highest HIV and AIDS prevalence rates, only Malawi and the Central Africa Republic do not have social pensions targeting the elderly. It is on this basis that this research aims at documenting the challenges facing the elderly and sharing the case study of Lesotho as one of the countries with high HIV prevalence that is implementing social pensions and how this addresses the needs of the elderly.

Based on this analogy, the aim of this study was to propose the role of social assistance with a push towards social pensions for the elderly looking after HIV and AIDS orphans. The study proposes universal
pensions that are means tested to ensure that they reach only the most needy families.

4.4. DIAGRAMMATIC PRESENTATION OF THE CONCEPTUAL FRAMEWORK

Outlined below is the presentation of the conceptual framework that will guide this study. This study will consider the vulnerability of the elderly due to HIV and AIDS and how this has contributed to challenges the elderly are facing to sustain their livelihoods. The paper then proposes social assistance as a possible intervention to support the group.

4.4.1 Understanding the conceptual framework

This research is informed by two main theoretical underpinnings: social protection through social assistance and rural livelihoods through the sustainable livelihoods approach as critical lenses that allow for an understanding of the needs of elderly households looking after orphans. There are different reasons why the elderly looking after orphans need to be viewed through the lens of livelihood and social assistance as presented in the diagrammatic summary above. The rationale for this conceptual framework is explained below.

4.4.2 The Vulnerability context of HIV and AIDS and the Elderly

The vulnerability context within the livelihoods framework is one of the critical areas that contributes to either a household surviving or not. There are many factors that contribute to making any household vulnerable. In this study, the known factor that has affected the elderly household has been contributed by HIV and AIDS. Due to this pandemic, most elderly households who were being looked after by their own children have now been left not only to fend for themselves but also to support grandchildren.
(Patnaik and Prasad, 2014). Considering that most rural families are already made vulnerable due to other factors like drought, conflict and poverty, the added challenge to the rural livelihoods of the elderly makes their situation worse. It is through the livelihoods framework that one is able to appreciate the holistic needs of families, hence adopting the vulnerability context of the elderly household from the overall framework is critical.

As noted above, the vulnerability context deals with the risk, susceptibility and likelihood of livelihood collapse due to economic and environmental factors beyond the household’s control (Masanjala, 2006). In the context of rural Africa, specifically looking at elderly headed households hosting orphans, the vulnerability context includes limited access to farming land. Malawi relies heavily on subsistence agriculture which is wholly dependent on seasonal rains. Through the produce of the farms, most people are provided with food and also generate minimal income (Barrientos, 2010; Ellis and Alderman, 2002; McDanagh, 2002).

Even in the absence of AIDS, reliance on rain-fed subsistence agriculture has rendered most African households vulnerable to the risk of livelihoods collapse in the face of shocks such as droughts, floods and seasonality (Conway, 2011). In Malawi as well as in most African rural communities, families have found mechanisms to survive in the event of droughts and floods. However, the the AIDS pandemic has compounded this problem by increasing the number of households that are dissolving due to the loss of the most economically active members of the family. The prolonged illnesses also contribute to economic losses to these families even before the loss of their loved ones make them vulnerable.

It is on the above basis that this study brings forward the understanding of the vulnerable context as a critical factor to consider when dealing with elderly households that are looking after HIV and AIDS orphans. The AIDS
epidemic can be expected to create new poverty by increasing the risk of income failure overall by diluting the diversity of the household portfolio and increasing inter-year income variability due to instability in agricultural production (DeWaal and Whiteside, 2004).

In order to understand the challenges facing the elderly, a picture emerges of a family that through the loss of the breadwinner in the house resorts to negative coping strategies like borrowing food, and access to informal affordable credit. This is more troubling when one considers that the extended family and other traditional social safety nets are also facing enormous pressure and are collapsing at a time when state support systems, rather than replacing these, are also collapsing (Masanjala, 2006).

Additionally, poverty faced by households headed by the elderly looking after orphaned children can only be understood by the elderly themselves. It is evident that what they are going through is not only the loss of income but other major losses of their immediate families and social connectedness with the community network. In this regard, looking at the elderly livelihoods and their support needs is critical.

4.4.3 Household Assets and elderly households

Having understood the vulnerability context as explaining the current operating environment of the elderly looking after orphans, this study has to examine the five critical assets that define the livelihood of each household. In doing this, the study is able to understand the extent of the challenges of the elderly household. As discussed in chapter 2, there are five assets presented by the sustainable livelihoods framework: human capital (productive or marketable skills); financial assets (like savings, cash); social capital (kin, patronage and other networks); physical capital
(agricultural assets); and natural capital (land resources) (Pratnaik and Prasad, 2014).

Numerous studies conducted in Africa and Asia indicate the important role of assets in anchoring livelihoods and imposing constraints on the repertoire of livelihood strategies open to different households (Ellis and Alderman, 2002; Kutengule and Nyasulu, 2002; McDonagh, 2002). The HIV/AIDS pandemic has affected most households especially as it directly impacts on human capital. As much as human capital is direct, this pandemic has contributed towards the depreciation of other core capitals in households and include social, physical, natural and financial capitals. This has resulted in a new layer of poverty as households are now faced with illness, loss of labour and loss of income (De Haan, 2012).

The AIDS epidemic has generated new poverty as affected households suffer reductions in total income owing to illness, the diversion of household resources to caring for those affected or total loss of income due to the death of a breadwinner (Serpell, 1999).

This study examines the challenges facing the elderly who are raising orphaned children. It is known that due to AIDS-related illnesses, the overall household labour productivity decreases. The household income of the family changes and members always resort to borrowing money and withdrawing children from school to survive (Koestle, 2002). Families then start selling their own physical assets like hoes, oxen and land thereby affecting their long term survival.

Dealing with this pandemic has also seen families withdrawing from their social networks and community support. Formerly, any death associated with HIV and AIDS created stigma and contributed to exclusion. As most governments mobilised communities to understand the effect of stigma, the second layer of problems has been the withdrawal of the family
members from most social activities. As one looks at the challenges facing the elderly, the effect on their social connectedness is something that needs exploring, hence it is critical to include this aspect of assets within the framework of understanding elderly households.

It is on this basis that the study has taken the livelihood assets as a critical way of understanding the elderly households. This considers how their livelihoods change as they care for orphans in their old age. As one analyses the household in this manner, it is envisaged that a detailed picture emerges on how the elderly are surviving.

**4.4.4 Social Assistance**

The livelihood approach as presented above does allow the researcher to have detailed understanding of elderly households as well as the vulnerability context that they live in, which relates to making them to be amongst poorest and vulnerable members of the community. However, the issues of poverty require the investigation of proposed responses that could support the households in need. In this regard, the need for having possible safety nets that could cushion households against shocks is ideal. Social protection is thus one of the possible responses to the elderly household. Social protection is premised on the widely shared understanding that poverty is multidimensional and persistent in time and across generations. Social protection is thus understood as having a role in lifting constraints to human and economic development whilst also being a way of achieving basic needs or within the rights-based approach in development (Barrientos and Hulme, 2009)

Chapter 2 has discussed the role of social protection in responding to the needs of the more vulnerable groups. It has gone further to discuss the role of social assistance in supporting the needs of the elderly as this is the response that is needed for them. It is on this basis that this study has

141
grounded its conceptual framework on bringing across the role of social protection in responding to the needs of the elderly.

There is considerable evidence that the provision of social assistance promotes household-level consumption, with the extent of the impact determined by the value of the transfer relative to the poverty gap of the recipient household (Barrientos, 2013). Considering the needs of elderly households, this study believes that social protection, especially social assistance, has a role in supporting the elderly as they look after orphaned children.

Various studies have proved that social protection does affect the most vulnerable household outcomes by supporting them both financially and increasingly in their physical and social capital (Barrientos, 2013, Devereux, 2013). It is suggested that any poor household would benefit more from social protection as it addresses the most immediate needs. It has to be acknowledged that social pensions have emerged only in recent years and as such there is little documentation or literature on this topic. As much as this field is well recognised, there is a need for more work to be done on addressing the different gaps on the benefit of social assistance and its adoption.

Barrientos (2013) suggests there are large gaps in knowledge about the impact of these schemes, as well as their institutional and contextual replicability. However, as much as the gaps exist, the limited literature demonstrates that social pensions are successful instruments for reducing poverty amongst older people by sustaining consumption and providing resources to be invested in small-scale economic activities. On this basis, it is critical that the study on the elderly also looks at the role that social assistance plays in the overall well-being of elderly households.

In all countries, both developed and developing, older people face an array of vulnerabilities (Cecchini, 2014. Among these are lack of income,
health insecurity, and the need for physical care. The extent of the vulnerability of older people varies considerably from one population group to another. Those at the higher end of the income spectrum are more secure than the poor at the lower end. Those in good health, or whose health problems are compressed into a relatively small portion of their lifespan, have less to deal with than those who are chronically ill. Evidence demonstrates that pensions/social assistance are drivers for overall well-being in these households. The little that is received is shared with other family members and spent on the next-of-kin or generations within the elderly households. This is critical in the HIV and AIDS context where the nature of families has been transformed, making elderly members the breadwinner and looking after grandchildren (Samson and Kaniki, 2008).

Bearing this in mind, in order to understand the challenges facing the elderly who are looking after orphans, it is imperative that there be a consideration of what should be done in these households as opposed to simply listing the challenges. In this study, the aim is to construct a framework that examines the challenges facing the elderly and to consider a potential response to these challenges to support the well-being of the elderly.

4.5 SUMMARY

This research draws on two existing frameworks to suggest a methodology that provides an analytical starting point for analysing the connection between elderly livelihoods and social protection. The livelihoods framework demonstrates that the AIDS epidemic affects every part of a livelihood. The AIDS epidemic depletes livelihood assets, undermines normal livelihood strategies, renders households more vulnerable to collapse of livelihoods and creates a cycle of poverty and HIV and AIDS. By complementing the livelihoods framework with a protection framework, the study is able to demonstrate any possible existence of reverse causal
link whereby having social assistance contributes to strengthening of the household needs of the elderly.

In chapter five the research will explain in detail the research methodology that guides the study. It is necessary to understand the choice made by the researcher in designing the methods to use for data collection, analysis and interpretation. The researcher uses qualitative methods to undertake this study.
Figure 6: The Conceptual Framework

ELDERLY LIVELIHOODS

Vulnerability Context
HIV/AIDS Contributing to Orphans in elderly HH

Assets
Human
Physical
Social
Natural
Economic

Social Assistance
Role of Government
Role of Private Sector
policies

Contributing
Well being for the Elderly

Source: Own, 2012
CHAPTER FIVE

RESEARCH METHODOLOGY

5.1. INTRODUCTION

This chapter seeks to explain the approaches used to gather the information that informs this study. As it progresses, this chapter identifies the rationale for the selection of a qualitative approach as an appropriate methodology for this study. The discussion will then focus on the use of semi-structured interviews, focus group discussions and case study as the research tools used. The rationale for selecting sites for this research will also be discussed, alongside an analysis of the target population and the interview design. In concluding, the focus of the chapter shifts to a discussion of the approach used to analyse the data for the study.

Of the two approaches used to collect information, namely the qualitative and quantitative approach, this study makes use of the qualitative approach. Qualitative research, as defined by Leedy (1993), is concerned with developing social phenomena. In other words, qualitative research aims to help us understand the world we live in and why things are as they are. This type of research seeks to answer questions like: Why? How? In what way? Since this study is concerned with the question of what the challenges facing the elderly are, it was clear that the approach that would best suit this type of research should be qualitative in nature.

5.2. RESEARCH METHODOLOGY

The relationship between data and theory is an issue that has been hotly debated by philosophers for many centuries. According to Smith, Thorpe and Lowe (1991) failure to think through philosophical issues such as this,
while not necessarily fatal, can seriously affect the quality of research. This is why the philosophical nature of this research will be discussed in order to link the research topic, design and research methodology and implications for the research findings.

Research design refers to a specific, purposeful and coherent strategic plan to execute a particular research project for the purpose of providing findings that are relevant and valid (Bergh and Theron, 2005). This is a procedure that allows a researcher to define their scope of operation. Looking at the topic under study, namely the role of social protection for the elderly looking after HIV and AIDS orphans, there is a need for the researcher to define the scope that will guide the research.

There are different philosophical assumptions that support four different paradigms of research design: positivism, realism, constructivism and critical theory. Underlying these four paradigms is the question of knowledge creation (De Vos, Strydom, Fourche and Delport, 2002). Within positivism, it is believed that knowledge is statistically generalized to a population by statistical analysis of observations about an easily accessible reality, whilst in the realism paradigm, the findings of one study are extended by analytical generalization that shows how the empirical findings of a research project reside within theories (De Vos, et al., 2002). On the other hand, in constructivism and critical theory, reality is perception and so generalization of research findings about someone’s perceptions of another person’s theory about reality cannot be done (De Vos, et al., 2002). Other scholars have categorised these assumptions into quantitative and qualitative research as the understanding of the two philosophical positions (Creswell, 1998).
5.3. QUANTITATIVE AND QUALITATIVE RESEARCH

In the social science arena, there is a long-standing debate about the most appropriate philosophical position from which methods should be derived. On one side there is quantitative research whilst on the other side there is qualitative research. Each of these positions has to some extent been elevated into a stereotype, often by the opposing side (Hussey and Hussey, 1997). With this understanding, in order to draw an appropriate research paradigm, one has to subscribe to one of the positions presented above, although it is important to note that in some cases the decision is to mix the two approaches to effectively present the reality.

5.3.1. Quantitative research

Creswell (1998) has given a concise definition of quantitative research as a type of research that explains phenomena by collecting numerical data that are analyzed using mathematically based methods (in particular statistics). Another definition looks at quantitative research as social research that employs empirical methods and empirical statements (Cohen, 1980). Quantitative research resides in the inherent belief that truth already exists and its meaning only needs to be discovered (Crotty (1998) in Kamangala, 292:12). This is an objective view that makes researchers subscribe to quantitative research techniques in search of the truth.

Quantitative research is characterized by its deductive approach, its non-naturalistic nature and its meaning objectivity (Babbie and Mouton, 2001). Deductive approaches are aimed at testing theory rather than generating it. The theory is tested for generalisability. A deductive research approach therefore begins with theory from which hypotheses are drawn and tested (Bergh and Theron, 2006). Looking at this understanding, quantitative research can be seen as an objective approach to inquiry.
Quantitative research has its own advantages. It allows the researcher to measure and analyze data. The relationship between an independent and dependent variable is studied in detail. This is advantageous because the researcher is more objective about the findings of the research. Quantitative research can be used to test hypotheses in experiments because of its ability to measure data using statistics (Hussey and Hussey, 1997).

The unnatural nature of quantitative research has received criticism and some of the criticisms highlighted by Hussey and Hussey (1997:53) include the fact that it is not possible to treat people as being separate from their social context and they cannot be understood without examining the perceptions they have of their own activities. Furthermore, this research is associated with a positivist paradigm which is concerned with the external reality based on certain laws and used by detached and objective researchers, to test the hypothesis against experimental methods (Bergh and Theron, 2006).

Additionally, quantitative research is a highly structured research design which imposes certain constraints on the results and may ignore more relevant and interesting findings. In this research, researchers are not objective but are part of what they observe and hence they bring their own interests and values to the research.

Based on the above analysis, it is evident that in order to study the challenges faced by the elderly looking after children orphaned by HIV and AIDS with the aim of identifying the role of social protection, the choice of quantitative study did not suit the project. This research required one to examine the why, how and what questions to which quantitative research is not core. With the challenges facing the elderly, one needs to have a
thorough one-on-one in-depth discussion to understand their world, experiences and challenges.

5.3.2. Qualitative research

According to Creswell (1998), qualitative research is seen as an inquiry process of understanding based on methodological traditions of inquiry that explore a social or human problem. In this regard, the researcher should not be interested in gathering facts and measure how often certain patterns occur, but should appreciate the different constructions and meanings that people place upon their experience. In other words, one should understand and explain why people have different experiences.

Crotty (1998:8) describes qualitative research based on the belief that truth comes into existence both in and out of involvement with reality, and is construed differently by different people. In this study, human beings are both the subject and object of inquiry, implying that knowledge of society is a form of self-knowledge (Mignot, 2003:2). Inherent to qualitative study is the belief that behaviour cannot be described as some kind of social fact independent of motives and reasons.

Additionally, qualitative research is characterized by its inductive approach, naturalistic nature and meaning subjectivity (Babbie and Mouton, 2001; Tailory and Bogdan, 1984). The inductive approach is discovery oriented, an orientation geared to generate, rather than test, theory (Bergh and Theron, 2006; Bryanman, 2001). For this reason, the inductive approach is often referred to as the bottom. Patton (1997) describes the naturalistic nature of qualitative research as referring to its non-interference with the natural setting of the subjects under study and taking into account the context or setting. The subject is therefore studied in its natural setting.
Subjectivity in qualitative research refers to the subject interpretation of, or giving meaning to data by the researcher (Taylor and Bogdan, 1984). The objective is to understand in detail the perspectives of the people and not offer opinions as to what is right or otherwise. The researcher is usually the key data collection instrument in qualitative research (Babbie and Mouton, 2001).

Based on the discussion in this report, it is being proposed that in order to study the proposed research topic, namely “The role of social protection on the elderly caring for HIV/AIDS Orphans in Malawi” qualitative research was the choice.

5.3.3. Rationale for qualitative research as the choice

In doing the study around the role of social protection for the elderly looking after HIV and AIDS orphans, one of the underlying factors was that the topic around HIV and AIDS is one that has been heavily debated and discussed in various arenas. This includes its focus on productive age groups, orphans as well as the elderly. The impact of HIV and AIDS on the elderly is receiving growing attention and studies have been undertaken to document the impact of HIV and AIDS on the elderly households, especially taking care of the sick members of those households. Other studies have examined the role of cash transfers in supporting the vulnerable households as well as the coping mechanisms of these households. Most of these studies have used mixed methods that are both qualitative and quantitative approaches.

Based on the above, the researcher chose the qualitative approach as it allowed direct interaction with individuals, namely the grandparents, children and government officials and community members, on a one-on-one basis as well as in a group setting. This type of research offered the researcher various advantages as it allowed for more detailed discussion
in various areas and follow-up with more clarifying questions especially given that the interviewees were elderly as well as children.

The benefits included those that have been documented in literature namely that this type of research is rich in data. Looking at the research previously undertaken, most of the researchers used mixed methods to collect data. With the closed methods, most of them relied heavily on the surveys and used the Focus Group Discussions to qualify and interpret the analysis from the quantitative data. The researcher selected a more thorough and engaged qualitative research that used qualitative tools with various stakeholders.

Furthermore, in doing this research, the researcher had a certain degree of flexibility in terms of the type of data collected as in most cases, based on the time of the interview or the age of the respondent, the interview guiding questions were changed. There were certain areas that the researcher opted to explore more and learn more about and in some situations, when the elderly seemed more tired and sick, the questions were reduced and the focus was on the core areas of the study.

This study continued the work done by the previous researchers who engaged and interviewed the affected and infected respondents with the aim of understanding their challenges. However, this research brings about the clear understanding of the challenges through a framework called the livelihoods framework and defines a clear conceptual framework that drives the research. The framework allowed the research to have as the parameter interpreting the challenges faced by the elderly. This also examined assets defined within the overall livelihoods of the elderly and contributed to an holistic view of the challenges they face.
5.4. APPROACHES IN QUALITATIVE STUDY

In qualitative research, there are different approaches or strategies that are employed to doing qualitative research. Merriam (2002) identifies eight approaches to qualitative research, namely basic interpretive, phenomenology, grounded theory, case study, ethnography, narrative analysis, critical, post-modern and post-structural. All these have various elements that qualify them to be approaches within the umbrella of qualitative research (Merriam, 2000:22). On the other hand, Creswell (1998) describes five approaches of qualitative research, namely biography, phenomenology, grounded theory, ethnography and case study. Looking at the nature of the topic under study, this research used two approaches: phenomenology and case study.

Below are the understandings of the two approaches with the justification for why they fit the research under study.

5.4.1. Phenomenology

Phenomenological studies examine human experiences through the descriptions provided by people involved. Creswell (1998) defines phenomenology as an approach that describes the meaning that lived experiences of a phenomenon or concept has for various individuals. Phenomena may be events, situations, experiences or concepts and one needs to understand these. According to Donalek (2004), the experiences are called lived experiences and the goal is to describe the meaning that experiences hold for each subject. Hancock, Windridge and Ockleford (2007) defines phenomenology research as the study of phenomena. In this type of study, respondents are asked to describe their experiences as they perceive them and information is collected using various techniques, such as writing about them or conducting interviews (Hancock, et al., 2007). Creswell (1998) alludes to the fact that in this research, data
collection relies on different methods including interviews, discussion and participant observation.

Phenomenology, developed by Edmund Husserl, is a philosophy for understanding a phenomenon as experienced from the first-person point of view that is used as a method to study phenomena (Smith, 2011). It is the study of lived experiences from the perspective of the individuals living it (Lester, 1999). Phenomenology pays attention to the meaning of a phenomenon under investigation rather than visible actions and behaviours (Smith, 2011). Within this method, the focus is on human experiences and not indirect reports but the structural meaning of experience. The aim within this research method is to describe the structure of the given experiences.

In phenomenological research, there is a need for the researcher to understand the vantage point of the subject and to do this, one must be able to take into account her or his beliefs and feelings. Hancock, et al., (2007) states that the researcher must first identify what she or he expects to discover and then deliberately put aside these ideas. This process is called bracketing. Phenomenological research begins with the acknowledgement that there is a gap in our understanding and that clarification or illumination will be of benefit from the individual subjects themselves.

Parse, Coyne and Smith (1985) indicates that to analyse this type of research one needs to be with the subjects in quiet contemplation where they put their own ideas aside and just listen. The researcher will uncover the meaning of the lived experience from each subject and then themes and patterns will emerge about their world. As such, data collection and analysis will occur simultaneously. The priority within this method is for the researcher to hear the voices of those involved and the stories they tell about their experiences within a particular situation. Thus phenomenology
serves as a powerful tool for, “understanding subjective experience, gaining insights into people’s motivations and actions, and cutting through the clutter of taken-for-granted assumptions and conventional wisdom” (Lester, 1999). In phenomenology, the researcher is required to be neutral and to strive towards having the subjects speak for themselves about their situation whilst the researcher withholds or suspends his/her judgment about the phenomena. The subjects are expected to explain about their situation. Within phenomenology what is core is to allow the actual voices of the participants to be heard (Creswell, 2009).

In order to explore the challenges facing the elderly, phenomenology study was used. This was based on the assumption that there is limited detailed and systematic documentation on the challenges facing the elderly. In order to understand their experiences in detail, the phenomenology approach allowed the researcher to describe, explain and give insight into the phenomenon of elderly challenges. The core focus was to give meaning on the new role of the elderly looking after children and their challenges as they take up this role in their own lives. This provided the opportunity to understand the elderly challenges within their immediacy.

Additionally, within this scope, the aim of the research is to understand “what” rather than “why” of a lived experience and to reveal the structure of elderly challenges as perceived by the elderly. Based on this, the study had three critical questions:

1. What are the challenges faced by the elderly who are looking after HIV/AIDS orphans in Malawi?
2. What social protection measures exist in communities to support the elderly who look after HIV/AIDS orphans?
3. How are the national policies and government intervention addressing the needs of the elderly looking after HIV/AIDS orphans?
In order to respond to these questions, there was a need for the researcher to use an approach that allows the interviewer to listen to the elderly experiences and challenges as seen from their own point of view. Additionally, to ensure that these experiences are well documented, the experiences of the children in the care of the elderly were also important to document their own stories. Community members also have experiences in living with the elderly within their community and seeing their challenges. The voices of the community in this study were equally important as a way of validating the different views expressed by the elderly.

There are various studies that have applied phenomenology studies to document lived experiences of different members of the society. Such studies include doctoral studies by Fourounas (2003) on the experience of letting go by grandparents. Additionally, a study by Makadzange (2004) documented the experiences of elderly people caring for HIV-positive orphans on antiretroviral treatment in Swaziland, using phenomenology as the method of orientation to allow them to learn about the experiences of the elderly. Another study by Matepe (2006) focused on documenting life skills for early adolescent AIDS orphans. Through this study, the researcher was able to bring out the real experiences of the orphaned children in relation to their adolescent journey. In all the examples of the studies given above, one common theme within the studies was that there was an appreciation of using phenomenology as the study orientation as it allowed the researchers to listen to the voices of the research participants and hear their lived experiences as they were the subject of discussion.

In documenting the challenges facing the elderly, this phenomenological qualitative research aligned with the outcomes of the study. This allowed the researcher to understand the experiences of elderly households as they raise their grandchildren using the livelihood lens. By documenting these experiences, the researcher was able to share lived experiences by
the elderly. In turn, this provided the rich information that the research was trying to obtain.

5.4.2. Case study

The other approach used in this research was the case study. A case study can be defined as an empirical inquiry that investigates a contemporary phenomenon within its real-life context, especially when the boundaries between phenomenon and context are not clearly evident (Yin, 1994:13). A case study relies on multiple sources of evidence which allows for triangulation (Yin, 1994). Miles and Huberman (1994) define a case study as a phenomenon of some sort occurring in a bounded context. It is a unit of analysis, which may be of just one case or several. Bromely (1990) describes a case study as a systematic inquiry into an event or a set of related events which aims to describe and explain phenomena of interest. In this research, a case study will be understood as based on Bromley’s definition.

Most developmental organizations and research institutes use case studies to explore qualitative changes in the circumstances of a limited number of typical cases during the life of the programme. This method is normally augmented with other approaches that add to the full picture of the studied organization. In this study, the case study method was used to explain and describe how the Lesotho government implemented old age pension provision. The case study allowed the researcher to understand the process of implementing social pensions, benefits of the system, gaps that need to be addressed, and policy recommendations. This study is an illustration of an example that could be done by governments in responding to challenges documented in Rumphi and Zomba. This will allow for a more informed basis that can be used to lobby for initiatives that are working in supporting grandparents or caregivers in the absence of the natural social family system.
According to Yin (1994:4) there are three types of case studies: exploratory, descriptive and explanatory. Exploratory case studies answer ‘what’ questions while descriptive and explanatory case studies answer ‘how’ and ‘why’ questions. In this case study, both descriptive and explanatory approaches were used to present a clear picture of the implementation of the social pension for the elderly in Lesotho.

Nisbet and Watt (1984) point out the following as the main weaknesses of case studies that needs to be taken into account:

- Results of the case study are usually not generalisable;
- Case study results are selected, and may be biased, personal and subjective.

However, these views can be challenged if the case study is properly conceived, designed and applied, using a robust method which can provide a valuable in-depth understanding of the issues under study. Many experts support this view, such as Cohen, et al. (2001:184) who argues that case study enables an in-depth understanding of issues that may not be easily obtained with a larger scale quantitative method like surveys.

In addition, the case study approach is preferred when it is necessary to probe deeply into the inter-relationships between people and organizations; to establish and explain current attitudes and beliefs; and to show why certain behaviour occurs (Casely and Lury, 1962:63). According to Nisbet and Watt (1984), generalization can still be made from case studies particularly about or from an instance to class. Cohen, et al. (2001) points out that the possibility of using various data collection techniques and sources within the case study approach means that it ensures validity and reliability.
Like experiments, case studies are said to be generalisable to theoretical propositions and not to populations (Kennedy (1979) in Yin, 1994:4). According to Yin (1994), the goal of experimental case study research therefore is to expand and generalize theories (analytical generalization) and not to enumerate frequencies (statistical generalization) which is common in surveys.

According to Hamel, Dufour and Fortin (1993) a case study is conducted by giving special attention to totalizing in observation, reconstruction and analysis of the cases under study. Therefore a case study involves in-depth study of cases under consideration. According to French sociology, a case study is a monographic approach employing various methods, which include interviews, participant observation and field studies (Hamel, et al, 1993). Case studies aim at reconstructing and analyzing a case from a sociological perspective. This makes case studies more of an approach although they can appropriately refer to methods as well. Casely and Lury (1987) points out that a case study involves a detailed examination of relatively few items. There is a need for subjects of a case study to be appropriate with regard to the issues under investigation. However, these subjects will not usually be chosen by a formal sampling process (Casely and Lury, 1987). They may be self-selected or volunteer their participation in the study. It has been recommended that case study is typically not of an individual, but an organization, institution or community.

The strength of a case study approach lies in its ability to provide in-depth and detailed analysis. Therefore the method is particularly useful to probe deeply into systems governing behaviour and the inter-relationship between people and organizations, to establish and explain attitudes and beliefs and to show why certain behaviour occurs.

Various studies have been done on the effects of HIV and AIDS using case studies. Such studies have looked at support provided to the
orphans, decision-making frameworks for responding to orphans, and orphan care crisis. Most studies around the effect of HIV and AIDS have focused on the effect of the epidemic on orphans, sexual workers, women and the youth. Such examples include those of Fletcher (2012) and Gibson (2009). Other scholarly studies have been done on the elderly but focusing on educational challenges of this age group as well as social support. Such research includes a study done by Nyanguru (2003) on promotion of the rights of the elderly in Lesotho.

There are limited case studies on elderly looking after orphans, however the critical lessons from all these case studies indicate that by making a concentrated effort to understand the needs of a study group, case studies provides a detailed review of a situation.

In this research, the case study method was used to collect information from Lesotho as a learning focus area that has implemented a social assistance programme. This was based on the rationale and need for documenting in detail evidence-based information responding to the challenges facing the elderly in the Rumphi and Zomba districts. The role of social pensions for the elderly is ideal in responding to the challenges they face, hence the case study was used as an example of how other countries have addressed the needs of the elderly. This offered the researcher an in-depth understanding of the role of social protection for elderly people. Lesotho is one of the countries in Africa to have implemented social pensions using its own resources, hence the choice for this study to leverage on one of the best countries implementing social pensions.

5.5. SIMILAR RESEARCH

Having chosen phenomenological qualitative study with a small focus on using case study as the approach for this research, it was important for this research to analyse and acknowledge the research done in a similar
field to learn from the experiences and use this research to enhance the past studies. As indicated, the topic of HIV and AIDS is one of the areas that has been heavily researched hence it is important to understand the various approaches, tools and topics that have been used.

Both academic and organizational research has been done to document the impact of HIV and AIDS on individual families and communities. As noted earlier, particularly in the literature review, research exists indicating that the social networks and family structures have changed. This has included the emerging of new households that includes the child-headed households, elderly households and stigma related issues.

In Table 6 below, the research done within the same field of the elderly is summarised, and also their challenges, with the aim of building on their work and qualifying the rationale for choosing qualitative study as the chosen approach. In presenting the research done, Table 6 presents the research title, author of the research and year published. This allows the researcher to have current information on what other researchers have done on this topic. Following this, the objectives of the research are highlighted. In this area, the researcher is able to know the core focus of this research and what it aimed to achieve. The research methodologies used for the studies are listed so as to learn from the different methods that have been used to document some of the research done in the same field. The last column presents the limitations of the studies as seen from the researcher’s perspective and how these are leveraged for this research in order to enhance other studies done in the same field.
<table>
<thead>
<tr>
<th>Research Title</th>
<th>Objectives</th>
<th>Research Methodology</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>PhD African American grandparents raising their grandchildren in rural areas. A phenomenological investigation in South Georgia by Emmanuel Clottey (2008)</td>
<td>To examine the challenges to health and well being faced by grandparents To investigate resources and health needs for the well being of children</td>
<td>Qualitative research using in-depth interview and document review</td>
<td>The study explored the challenges of the grandparents without a structured framework, and explored the role of grandparents raising children within a society and listed a number of issues without engaging in deep reflection</td>
</tr>
<tr>
<td>PHD Thesis- The impact of adult HIV and AIDS mortality on elderly women and their households in rural South Africa. PhD Thesis by Catherine Ojimola Ogonmufen (2008)</td>
<td>To examine elderly female household headship as a demographic impact of adults HIV and AIDS related mortality. To ascertain the contribution of the old age pension grant to the economic well being of elderly womens households with adult HIV/AIDS related morbidity and mortality To explore secondary stigma as a socio-cultural impact of HIV/AIDS on elderly women</td>
<td>Both quantitative and qualitative research. Quantitative research used the Agincourt Health and Demographic Surveillance System (AHDSS), longitudinal data collected by the Medical Research Council/Wits Rural Public Health and Health Transition Research Unit. Qualitative data was collected using in-depth interviews with the elderly households</td>
<td>Heavily relied on quantitative approach and the focus only on women who have just experienced death in their HH. As well as explore stigma issues. In depth interviews were collected with few selected HH.</td>
</tr>
<tr>
<td>Phd Thesis- The closeness of grandparent and grandchildren and its impact on grandparent well being Won, 2009</td>
<td>Study was aimed at investigating the closeness of grandparents to their grandchildren in the absence of biological parents. It aimed at documenting their experiences and how it affects their well-being</td>
<td>A quantitative study and it used surveys</td>
<td>Study used quantitative approach only and focused mostly on pre and post test methods.</td>
</tr>
<tr>
<td>PhD Thesis - Care, Caring and Coping: Attitudes of children orphaned by HIV/AIDS and their caregivers towards schooling in a South African Township Joseph (2007)</td>
<td>The study explores the relationship between the attitudes of orphaned learners and their caregivers towards education and schooling itself, uncovering the struggles and the strengths of caregivers and orphaned children that directly relate to success or failure in school</td>
<td>The study used both qualitative and quantitative methods through interviews, surveys</td>
<td>The study focused more on the orphans and not the elderly. Core within the study was their attitudes towards education hence it only touched one aspect that elderly are faced with</td>
</tr>
<tr>
<td>Research Title</td>
<td>Objectives</td>
<td>Research Methodology</td>
<td>Comments</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Grandparents’ coping, social support and needs in caring for their AIDS orphaned grandchildren. (Masters Thesis), Anonymous</td>
<td>To document the challenges facing the elderly people in South Africa focusing on social support in providing for the elderly households</td>
<td>Qualitative research using semi structured interviews. Used a sample size of 10 grandparents in Katlehong and focused only on the social group receiving support from a local NGO and how their involvement with NGO supported their social capital</td>
<td>Focused on the impact of the death of the adult in their HH starting from caring of the sick to the management of their funerals and stigma issues. Mostly focused on HIV and AIDS as an epidemic. Only interviewed elderly people and did not focus on the grandchildren, the governments, and other sectors. Hence this research lacked triangulation and did not use lessons from other sectors.</td>
</tr>
<tr>
<td>Masters Thesis- The old age and social change: an Anthropoological study of the lives of elderly among the Amora of Ensrac, Ethiopia Mangesha, 2002</td>
<td>Describe and analyse social economic life of elderly in rural community</td>
<td>Used participatory observation, interviews and focus group discussions and sample surveys. adopted the social cultural economic framework to understand the social change</td>
<td>Focused on anthropological approach in understanding the lives of the Amora and used their experiences more through observation to understand their lives. This study did not document holistic issues as it just focused on social and economic issues.</td>
</tr>
<tr>
<td>Impact of cash transfers for older people in Tanzania Lessons from the KwaWazee project by Stephan Hofman and Mandy Heslop conducted in 2008.</td>
<td>Assess the efficiency and the effectiveness of the cash transfer programme of KwaWazee as a tool to access vulnerable older people. To create a platform and the data to support the project for public, media, government and funder advocacy. To contribute to the ongoing policy discussion on social protection through a review and analysis of the broader context of the pension fund programme and the respective institutional support for older people and orphans cared for by grandparents at district, regional and national level.</td>
<td>Quasi-experimental comparison group design was chosen to assess the impact of the cash transfer through both quantitative and qualitative data The Experimental or Project group, included people, who by November 2007 had received cash for at least 14 months. The Control group consisted of an equal number of older people with comparable social and economic background in the same geographical area.</td>
<td>The study relied mainly on quantitative survey and conducted focus group discussions with both the control and experiment group. The limitation in using only focus group discussions shows that the respondents might not have been all comfortable to share their individual livelihoods experiences. Further the researchers were more biased towards the quantitative and did not provide enough sample size for the qualitative side hence the need to focus on this more. It needs to be known that an</td>
</tr>
<tr>
<td>Research Title</td>
<td>Objectives</td>
<td>Research Methodology</td>
<td>Comments</td>
</tr>
<tr>
<td>----------------</td>
<td>------------</td>
<td>----------------------</td>
<td>----------</td>
</tr>
<tr>
<td>The impact of AIDS on older people in Africa case study of Zimbabwe by World Health Organisation done in 2002.</td>
<td>To examine the impact of HIV/AIDS on older caregivers To identify barriers to supporting older people in the context of HIV/AIDS. To create a body of evidence on the needs and contributions of older people dealing with The HIV/AIDS pandemic. To develop policy and programme interventions with the government, NGOs and academia for supporting older persons as care-givers and surrogate parents for orphaned children</td>
<td>The study was designed to develop, test and validate a research methodology based on complementary approaches (qualitative and quantitative) to assess the impact of AIDS on older people in Zimbabwe, in particular, and in Africa, in general. Quantitative tools (survey) and qualitative tool (FGDs) were used in documenting the impact of AIDS on the well being of older people.</td>
<td>Both quantitative and qualitative methods were used for data collection and this included HH questionnaires interviews were conducted in the homes of caregivers. Few focus group discussions of older people were done. The focus was on the impact of caring for a sick person till they die and did not include the focus on orphaned children. The mixed method approach used heavily dwelt on quantitative methods with few focus group discussions</td>
</tr>
<tr>
<td>Retirement lost”—the new role of the elderly as caretakers for Orphans in western Kenya. Research conducted by Nyambedha, E and Wandibba, S in 2003.</td>
<td>To provide a description of the drastic changes in the lives of many older people in Kenya and elsewhere in Sub Saharan Africa as their prospects change from peaceful retirement to a second round of strenuous childcare.</td>
<td>A major part of the data was derived from two surveys: The first survey was based on semi-structured interviews with 100 purposively sampled caretakers of orphans in 1999. The second survey was conducted in 1999–2000 in 465 randomly sampled households (With and without orphans) using a questionnaire with closed as well as open questions. In-depth interviews were conducted with a sub-sample from the first survey of twenty orphans and their caretakers as well as key informants in the local community. FGDs and interviews with orphans, their caretakers and the community leaders.</td>
<td>This study relied on mixed method and was able to bring about the various needs of elderly households. It allowed the focus to be on various stakeholders with various tools and the aim was to document that elderly people are looking after orphans indeed. This research will then continue the work done in Kenya and use it as a platform now to document the actual challenges of the elderly as this paper proved that most people looking after orphans are the elderly.</td>
</tr>
</tbody>
</table>

**Source:** Own, 2013.
Based on the analysis of Table 6 above, this research focused mostly on phenomenological qualitative approach. This research built on the thematic research done by Hofman and Mandy (2008) where they looked at the impact of cash transfers on the vulnerable but focusing on the impact of the cash transfers on the elderly.

In terms of the methodological approach, this research enhanced the Masters research entitled “Grandparents coping, social support and needs in caring for aids orphaned children” where the research focused on the social challenges faced by the elderly people especially those who belonged to social networks. The study relied heavily on qualitative research and used interviews with a sample of ten women. Following this, it is believed that there is need for the study to get more insight on the challenges facing the elderly by talking to the orphaned children or other household members, the community members and government representatives. Building on this, the researcher included other target groups: orphans, community members, teachers as part of the sampled respondents.

This research documented the effect of the social pension being implemented in Lesotho with the aim of recommending evidence to the Malawi government on the contributions of the social pensions to the elderly. The aim was to present an example of a similar economy which has rolled out social pensions for the elderly as a response to the needs of the Malawian elderly looking after orphans.

The research done by Nyambedha and Wandiba (2008) provided more supporting evidence that nowadays the elderly people are looking after orphans. This research reinforced this work and documented the potential challenges facing the elderly using a guided approach through the Sustainable Livelihoods Framework. Unlike previous research that has documented general challenges, this research used the livelihoods
framework as well as the understanding of poverty to direct the categorization and understanding of the challenges facing the elderly.

5.6. RESEARCH SITE

The research was done in two districts in Malawi, namely Zomba in the southern part of Malawi and Rumphi in the northern region. In these two districts, the research focused on interviewing the grandparents, community members, teachers and orphaned children. As much as the research was based in these two locations, Ministry officials in Lilongwe were also consulted and interviewed. All the above sites were visited for the purposes of data collection.

In Lesotho, the research was done in four districts and in each district there were two villages represented. The districts included Mohale’s Hoek in two villages, Ha Mahase and Bulu Bulu; Berea in two villages, Berea and Mahlatsa; Quthing at Ha Jobo and Mabele a Tlala; and Qacha’s Nek at Tellong and White Hill. In these districts, the researcher interviewed community members, teachers, the elderly and local leaders. Government officials in Maseru were also interviewed for their perspectives on the social protection scheme.

5.7. RESEARCH POPULATION AND SAMPLE

Generally, as stated by Kerlinger (1986:109), ‘to learn something about people, one takes some people whom one knows or whom one does not know and studies them. After the study, one comes to certain conclusions about people, in general’. Equally true, in conducting this study, there was the need to select a target population that could clarify, add and provide first-hand information on the topic under study, in order to get a sense of the views of the broader population.
To select the target population for this study, a sampling method was used. As defined by Mulder, a sample is: “a group, which is selected from the population and is thus less than a population” (Mulder, 1992:55). There are various types of sampling and this study used purposive sampling method. With the nature of the study for both Malawi and Lesotho, the sample selection was pre-determined and purposive.

Purposive sampling is based on some pre-determined characteristics, where the researcher selects the sample subjectively based on set characteristics (Putton, 1990). In this regard, three distinct characters were used to select the proposed respondents. Firstly, the older people (over 60 years of age) were selected as part of the interviewees to establish their needs. Furthermore, these elderly people needed to be housing and caring for orphans, and lastly, these orphans became orphans as a result of HIV and AIDS.

Apart from the elderly, local leaders and school teachers were also chosen to share their own perspectives on the needs of the elderly and the orphaned children under their care. The chiefs and school teachers were chosen as key informant interview participants for this study as they hold much knowledge about the activities in the communities and are decision-makers for certain issues surrounding children and the elderly.

Government officials, specifically those looking after the elderly as well as social protection were chosen and interviewed as part of the study. The government officials were selected based on their roles within the Ministry hence the Director of Economic planning was chosen as he leads the implementation of the social protection interventions in Malawi. From other ministries, it was the director for the Elderly, under the Ministry of Disability and Elderly as well as the Director within the Ministry of Gender, as this ministry is also contributing greatly to the roll-out of social protection.
In Lesotho for the case study, the researcher interviewed a total of 48 grandparents who were hosting orphaned children. A total of 29 orphaned children were interviewed to get their perspectives. A total of four local leaders, one in each district, as well as four teachers also formed part of the research population for the Lesotho case study. The elderly targeted in Lesotho were above 60 and included both those who were benefiting from social pensions and those who were not. Focus group discussions were held for community members in all the four districts.

**5.8. RESEARCH PROCESS**

**5.8.1. Introducing the research to local leaders**

Prior to starting the research, the researcher went to meet the local leaders surrounding the schools chosen for the research in Malawi. During this sensitisation meeting, the researcher briefed the local leaders about the objectives of the study as well as the support needed in identifying the right respondents. Through this meeting, the chiefs were able to mobilise some community members to agree on some of the households who could form part of this interview.

Following this meeting, the researcher also visited the schools and discussed the objectives of the research with the school headmaster as well as selected teachers. This was also to sensitise them about the research as it was going to involve some of the children at the school. This was done prior to the actual research process.

In conducting the interviews, the researcher started with the elderly. This was due to the fact that they were the ones to share their own experiences in terms of challenges they were facing in raising the children. A detailed discussion was done with the elderly. Following this, the interview was conducted with the children under elderly care. Having finalised the
interviews, the researcher held key informant interviews with the local leaders and teachers. Lastly, focus group discussions were conducted as the last data collection method.

Through this process, the researcher was able to use what the grandparents had shared and validate with the children as well as with the community members. This allowed the community to hear some of the concerns raised by the elderly but also to agree by themselves some of the areas they needed to work on. Having the informant interviews after the elderly and children also allowed the researcher to have another perspective on the elderly challenges which were not fully mentioned by the elderly themselves as these were more school focused.

Considering that this research took the phenomenological approach, it was critical to get the experiences first from the individuals affected as such in this study it was the elderly as the core focus. However, knowing that they live with the children, it was also important to hear the children's experiences. Having listened to them, the researcher opened it up to other broader participants to share their own views. This allowed the researcher to have a focused process of listening to the concerns and lived experiences of the elderly.

In Lesotho, the researcher used the food assistance programme that she is supporting as part of the organisation she works for. The World Vision food assistance team in Lesotho shared the different sites where data could be collected. It was agreed that the researcher should target all the four districts to have an holistic view. Data was then collected from all the four districts with the help of the field monitors working with World Vision. The researcher trained them on the semi structured interview for the elderly and children and after this, the team collected the data in the field with the researcher.
Similarly, the researcher started the process by gathering information from the elderly themselves. This was later followed by the children, key informants and then focus group respondents. This approach helped in bringing different issues together and allowed the researcher to validate the information from the different sources. The focus of this study was to understand the challenges facing the elderly and the role of social protection, hence it was important to start with the target group itself and listen to their experiences before involving others who will share their own perspectives.

5.8.2. Selection of research participants

Using the school as the centre for the research, the researcher engaged the teachers to identify children who were orphaned and being looked after by their grandparents. Knowing that the school system started with children from standard one, mostly about 5 years old, to Standard 8 who will be about 16 years old, it was agreed that the research target those in standard 6. This was also due to the fact that during the research period, those in standard 8 were writing their exams and could not be disturbed. Standard 6 offered a good balance of children that could not create stories just to participate in the study. As part of ethical considerations, this study had to have the appropriate age for interviews.

From the sampled children, it was noted that most of them indeed were 13 years and above making it easy for the interviews to be conducted with the consent of the grandparents. Having identified the children from the school, the researcher then documented their names and requested for detailed information about their homes as this guided the researcher to the elderly households where consent was received from the grandparents to interview the children within the week at school.
Before engaging with the grandparents, the researcher verified the way the parents had died by asking the children what happened. The responses were that both of them became very sick for a long time and then one died followed by the other. This deduced the cause as being due to HIV related infections.

Having identified the children, the researcher then requested to go to their households to identify their grandparents. This is where causes of death of the children’s parents were validated. It was important to note that with some of the grandparents, they were able to disclose the cause of death being AIDS whilst others just indicated that the parents were sick for a long time. Having established this, the researcher then organised the interviews for each household first and after that, the children were interviewed separately after engaging with the grandparents.

Furthermore, members of the community were selected by the local chief to form part of the focus group discussion and share their perspectives on challenges facing the elderly. These sampled respondents were reached through the local leaders who were able to invite the people in the community, having established the objective of the study. A group of 12 people that included both male and female were part of the focus group discussions in Zomba and in Rumphi. A total of 14 participants were part of the focus group discussions.

Additionally, following discussions in the community, the researcher also interviewed school teachers and local leaders. A total of four school teachers formed part of the targeted interview group and in both Rumphi and Zomba, the researcher interviewed the headmaster of the primary school and the deputy headmasters.

In Lesotho, the researcher sampled the elderly, orphans as well as government officials to get their opinions of the social protection
intervention being implemented. The aim was to document the benefits and challenges they face as they access social pensions and understand the role social pensions play in their lives. In this light, purposive sampling was used where elderly houses hosting orphans and benefiting from social pensions were chosen. Considering the definition of elderly in this study, the researcher also included those who were above 60 as a comparative group as this did not receive any grant.

Through the food distribution team, the researcher went through the distribution list of the organisation and was able to identify the elderly. After this, the food monitors interviewed the elderly who were registered and looking after orphans to check their status as well as the rationale of why they had the children in their care. It was then established that some were hosting the children because they were orphaned whilst some were hosting them because their parents were working in Johannesburg. For those hosting orphans, the team went further to verify how their parents died and this is where the cause of death was determined. The elderly were interviewed and also the children under their care were later followed up for the interview.

Apart from the above target group, the researcher also discussed the issues affecting the elderly through focus groups with the community members. Through the local leaders, the community members were invited to participate in this focus group and the criteria was a balance of women and men. Children were not part of this focus group discussion. In each village, community members reflected on the challenges and benefits of social pensions.

Generally, in relation to the topic under discussion, there was a need for the researcher to select a target sample that would be in a position to provide insight into the topic from government representatives. Apart from selecting members from the community, there was a need to select key
members from the Ministries of Social Development, Disability, Economic Planning and Ministry of Gender who could add their views on the issue under discussion in both Lesotho and Malawi.

5.9. DATA COLLECTION

Having presented the appropriate design and research population, this section discusses how data was collected. Scott (1965) observes that there are many approaches to field research and it is partly due to the nature of the phenomena being investigated and the objectives of the study which must determine what approaches are taken and what materials are gathered by what methods. To this must be added the researcher’s own philosophical beliefs, since before anything is observed in an organization or community, the researcher has already formed opinions of what constitutes reality, what is worthy of study and what an appropriate means of conducting the study is (Perakyla, 1997).

If the aim of the study is to produce descriptions of the social world, then those descriptions need to correspond in some way to that particular social world (Perakyla, 1997:201). In this regard, the descriptions will achieve the set aim if they are based on interactions and observations of the way people actually act and relate (Hussey and Hussey, 1997). In this regard, the researcher in this topic gathered a variety of types of data, to contribute to the understanding of the challenges facing the elderly as well as the role of social protection for the elderly. Data gathered from interviews, action research, case studies formed the reservoir of materials on which this research based its description and analysis of issues surrounding the elderly.

Considering the objectives and design of this research, the focus on data collection was more aligned towards qualitative tools as the research design was skewed towards qualitative study. Data collection as the name
suggests is that of the research process which is concerned with collecting data. Most research methods use more than one approach. In qualitative research, qualitative methods have been described as “an array of interpretative techniques which seek to describe, decode, translate and otherwise come to terms with the meaning, not the frequency of certain more or less naturally occurring phenomenon in the social world” (Hussey and Hussey, 1997:140).

In conducting any research, a number of techniques exist that are used to collect data in order to have as much information as possible on the cases under study and to allow for the validation of the results. Examples include interviews, diaries, focus groups, observation, protocol analysis, questionnaires, case study and action research.

In researching the topic under study, the author selected four data collection methods, namely interviews, focus group discussions, case study as an approach and document review as part of the qualitative study. Interviews were the core approach for the study. The rationale behind this selection is presented below.

5.10. INTERVIEWS AS RESEARCH DATA COLLECTION TOOL

Interviews were chosen as the main tool for collecting data in this research. Generally, interviews are associated with both quantitative and qualitative methodologies. Interviews are a method of collecting data in which selected participants are asked questions in order to find out what they do, think or feel (Hussey, 1997:156). In qualitative studies, interviews are defined as attempts to understand the world from the participant’s point of view, to unfold the meaning of people’s experiences, and to uncover their lived world prior to scientific explanations. As much as both paradigms use interviews, the positivist approach suggests structured closed sections while the phenomenological approach suggests
unstructured questions, where the questions emerge as the interview progresses. In this research, the focus was on using interviews as a qualitative tool.

Leedy (1993:185) states that:

To behold the fact, to observe, to go beyond observation, look at the world of men and women, and you are overwhelmed by what you see, select from the mass of humanity a well-chosen few, and they will tell you more than all multitudes together. This is the way we must learn, by sampling judiciously, by looking intently with an inward eye. Then, from these few that you behold tell us what you see to be the truth. This is the descriptive, the normative survey method.”

Similarly, Seidman (1998) states that one interviews because of an interest in other people’s stories. Stories are a way of knowing. Every word that people use in telling their stories is a microcosm of their consciousness. Patton (1990) as quoted in Merriam (2001) states that, “we interview people to find out from them those things we cannot directly observe…. we cannot observe feelings, thoughts and intentions…” (Merriam, 2001:72). This is the basis of qualitative inquiry hence the selection for this paper.

This is the rationale behind the selection of the interview as the tool used to conduct this research. By selecting a sample of grandparents, orphans, teachers and local leaders and talking to them in a relatively open and in-depth manner, the researcher was able to learn more from them. This research was aimed at analyzing the challenges faced by the elderly looking after orphaned children with the aim of understanding if social protection could have a role to play in supporting this group. The detailed discussions with each grandparent allowed the researcher to obtain greater insight into this topic.
It needs to be presented that there are various types of interviews that can be used to conduct qualitative research. They include:

- **Structured interviews**: which involve asking each respondent the same question, in the same way;
- **Semi-structured interviews**: which involve a series of open-ended questions based on areas the researcher wants covered; and lastly,
- **Unstructured interviews**: which have very little structure and where the interviewer frames questions in such a way that they follow on from an interviewee’s previous responses.

This research used the two types of interview methods, structured and semi-structured interviews for the different groups because of the nature of the topic and information that was needed. The topic required the interviewer to talk to different people, that is grandparents, orphans, local leaders and these were ideal for semi-structured interviews. Then there was a need to have structured interviews with the government officials with a specific focus on implementation and management policies supporting the elderly. This went beyond policies and focused on looking at the interventions currently in place to support grandparents.

### 5.10.1. Semi-structured interviews

Semi-structured interviews are defined as those organised around areas of particular interest, while still allowing considerable flexibility in scope and depth (De Vos, *et al.*, 1999:292). This type of interview is used in order to gain a detailed picture of participant beliefs about, or perceptions or account of, a particular topic (De Vos, *et al.*, 1999:296). This allows for the researcher to follow up interesting avenues that emerge in the interview and the participant is able to give a full picture.
A total of 20 semi-structured interviews were conducted with older people and 20 interviews with orphaned children with the aim of generating in-depth qualitative data concerning challenges they face, existing forms of social protection, coping mechanisms in Malawi of older people, and the kind of assistance received from relatives and community members. The interviews were held in Chichewa language for the southern part as well as Tumbuka language for the northern region. These are the languages spoken by the local community and the researcher is fluent in both. This made it easy for the research to be done. In doing the interviews, the rationale behind this was to establish:

- What are the challenges faced by the elderly looking after orphans in Malawi (economic, social, natural, physical and health)?
- What are the social protection measures that exist in communities to support carers (grandparents) looking after orphans?
- How have government policies addressed the needs of the carers (older people) looking after orphans?

By interviewing this target group, the researcher was able to establish the challenges facing the elderly, the type of social networks that exist in the two districts as well as the roles the elderly are playing.

Secondly, semi-structured interviews were also used in Lesotho to establish the extent to which social protection interventions have supported the elderly looking after orphans. In this regard, Lesotho has been chosen as the ideal country that has operationalised social protection interventions and the researcher interviewed the grandparents who have benefited in this scheme. This was aimed at documenting the process followed, potential benefits, and any challenges with the aim of recommending this system for Malawi.
A total of 48 grandparents were interviewed in Lesotho, while 29 children also under the care of the grandparents formed part of the semi-structured interviews. Their input into the process allowed the researcher to have current information on the role of social protection in supporting the elderly and children in their care.

5.10.2. Structured interviews with key informants

Structured interviews were conducted with selected key informants who included policy makers and managers in government focusing on more strategic issues regarding the broader role of government in supporting the elderly. Mostly the government officials targeted for this study were from the Ministry of Disability and the Elderly, Ministry of Economic Planning and Development and the Ministry of Gender. These were the ministries responsible for the implementation of the social protection policy.

The questions for the ministry officials related to the review of the policy on the elderly to know the status of implementation of activities to support the need of the elderly, the current status of the elderly population in Malawi, types of social protection interventions as well as the government’s plans in supporting the needs of the elderly. Furthermore, the questions explored the progress made to date in the implementation of social protection activities.

Additionally, structured interviews were done with two key government officials from Lesotho responsible for the implementation of social pensions with the aim of documenting successes, challenges and recommendations and how this approach could support the situation of grandparents and orphans in Malawi.
Key informant interviews were also done with local leaders and teachers. These were chosen as they were able to present an holistic picture of the grandparents as well as children in their care. By talking to the teachers in detail, the researcher was able to document the challenges faced by the children in the care of grandparents. Furthermore, the local leaders presented the overall community perspective on challenges facing the elderly and made recommendations to support their needs.
<table>
<thead>
<tr>
<th>Stakeholders</th>
<th>Type of interview</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carers (Elderly-Grandparents)</td>
<td>Semi structured interview (20)</td>
<td>This was the group looking after HIV and AIDS orphans. The aim was to document their experiences and propose recommendations for the type of support they need to cope with the caring for orphaned children. The team was interviewed in a detailed manner using the livelihoods framework categories. Ten interviews were done in the North for grandparents older than 60 and ten in the southern part of Malawi.</td>
</tr>
<tr>
<td>Orphans</td>
<td>Semi structured interview(20)</td>
<td>This is the group that is no longer cared for by own parents but elderly. Their experiences were critical for validating some of the challenges faced by the elderly. Also it was important to document the children’s own challenges to ensure that the research is holistic in analysing the challenges faced by elderly. Ten interviews were done in the North and ten in the southern part of Malawi.</td>
</tr>
<tr>
<td>Local leaders</td>
<td>Semi structured (4)</td>
<td>This group was interviewed with the aim of giving a broader community perceptive in terms of challenges faced by the elderly in this context. The group was used as part of the verification and validation of the information shared by the grandparents as well as the children. Furthermore, this team was interviewed to check the kind of support the community still provides towards vulnerable households and in this study, the elderly households.</td>
</tr>
<tr>
<td>Community members</td>
<td>Focus Group discussion (26)</td>
<td>Considering the sensitivity of the issues and the age of the elderly, there was need to document perceptions of the community at large to understand the challenges facing the elderly from a different target group. This helped in triangulation of the findings as well as understanding the context and culture better. Two focus groups were done, one in Rumphi and the other one in Zomba.</td>
</tr>
<tr>
<td>Government officials</td>
<td>Structured interviews (3)</td>
<td>These were selected in order to obtain information on existing strategies being used to support the changing system. The director for economic development, director within the ministry of disability and elderly as well as the director within the ministry of gender were interviewed with the aim of getting the picture of the status of elderly support in Malawi.</td>
</tr>
</tbody>
</table>

Source: Own, 2013
5.10.3. Challenges in using the Interviews

As much as the author selected interviews as one of the approaches to be used to gather information, there were some challenges faced during this exercise. Firstly, as much as interviews provide rich information, the participants are likely to provide the researcher with the official account which is not always accurate (De Vos, et al., 1997:298). In this light, during some of the interviews, especially with the key informant, there was a tendency to provide information targeting government to offer services in the area. The researcher had to ensure that the local leaders were fully informed of the only objective of the research as being information collection and with nothing expected in return.

Furthermore, the topic under study is sensitive as it deals with loss of a loved one as well as orphanhood. In one household, soon after establishing the objective of the interview and getting consent, the head of the household broke down and started crying, blaming the passing of the children’s parents and the burden that was left in her care. The researcher established a rapport and the process continued. As stated by De Vos, et al., (1997) when such situations happen, the researcher must find means of establishing rapport in order to gain information from participants, coping with the unanticipated problems on interviewing in the field, and recording and managing the large volume of data generated by even relatively brief interviews (May in Morse, 1991:188; De Vos, et al., 1997:287). The researcher had to involve the respondent to agree on the proper time to proceed or terminate and the respondent asked for a few minutes and the researcher continued at the agreed time.

One critical challenge observed in interviewing both the grandparents and children was the length of the questions and the details that were needed. There were many detailed questions and the grandparents especially those above 75 were easily tired. As such, the researcher had to pause
and allow for some flexibility. The children were also tired by answering the questions and as such the researcher had to cut some questions that were already established through the dialogue with the grandparents.

Whilst conducting the interview in the Rumphi district, the wife of the local leader escorted the researcher to some of the households. She had insisted that there was a need to introduce the researcher to the individual households. This proved to be a challenge as she stayed on during the interviews and then the respondents became shy in responding to the questions. The researcher asked to be left alone and had to explain the rationale. This was taken positively and the interviews continued as scheduled.

5.11. FOCUS GROUP DISCUSSIONS

Focus Group Discussions (FGD) were conducted for the community members in Zomba and Rumphi. Focus groups are used to gather data relating to the feelings and opinions of a group of people who are involved in a common situation. Under the guidance of a group leader, selected participants are stimulated to discuss their opinions, reactions and feelings about a product, service, and type of situation or concept (Hussey and Hussey, 1997:155). A total of 26 members participated in the focus group discussions held in both Zomba and Rumphi.

Focus Group Discussions allowed the researcher to get more information about the role the community played in supporting the elderly, the actual situation of orphans in the area, their economic well-being and cultural situation. Furthermore, during these discussions, the community members provided their own in-depth analysis on the challenges being faced by grandparents looking after the HIV and AIDS orphans. In both districts, the focus groups discussion members comprised of women and men dwelling in the same community as the grandparents offered their own perspective
of the challenges faced by the grandparents. Through this dialogue, community members responded on challenges facing the elderly that were categorized using the livelihoods framework. For more details of the questions refer to the annexures.

In Lesotho, focus group discussions were done in each village. A total of eight focus group discussions with a total of 60 participants shared their views on the challenges the elderly were facing, the role of social pensions in their livelihoods and recommendations to support the elderly. Having these focus groups helped the researcher to obtain an holistic picture of the elderly household.

5.12. CASE STUDY FOR LESOTHO

This research used a case study to document the experiences from Lesotho in implementing a social assistance programme for the elderly. This is a small part of the research for learning. This case study was chosen as it offered the researcher the opportunity to obtain in-depth and detailed analysis of the situation facing the elderly and examples of support they can be given. In this study, the researcher explained and described the benefits of the social pension scheme for elderly people in Lesotho as presented from the review and interviews done. The research focused on four districts and eight villages where the elderly were benefiting from the social pension. The aim was to study the approach and whether it could be used to address the challenges facing the elderly in Malawi.

By having the detailed engagement with the elderly in Lesotho as well as with government officials, critical lessons were documented that indicated the benefits as well as challenges of implementing social pensions for the elderly.
Members of the case study group were selected using Mann, et al., (1989:54) criteria where the main components are size, activities, area of operation (rural or urban or both), target beneficiaries (whether women or men), ownership (whether public or private), and sector (whether informal or formal). Robson (1993) argues that the researcher’s judgment as to the typicality or interest is crucial. Table 8 below presents the study criteria.

Table 8: Selection criteria for case study participants

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Propositions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Size</td>
<td>48 grandparents looking after orphans in Lesotho, 29 Sampled orphans in the care of grandparents, 5 Community members 4 Local leaders, 1 government official representing different entities.</td>
</tr>
<tr>
<td>Activities</td>
<td>Looking after orphans, beneficiary of the social pension by government</td>
</tr>
<tr>
<td>Area of operation</td>
<td>Lesotho</td>
</tr>
<tr>
<td>Target beneficiaries</td>
<td>Grandparents, Orphans, Local leaders, Teachers, Community members</td>
</tr>
<tr>
<td>Ownership</td>
<td>Public</td>
</tr>
</tbody>
</table>

Source: Own, 2013

In documenting this case study, the paper used semi-structured interviews and focus group discussion to document the experiences of Lesotho as outlined below in Table 9.
Table 9: Participants for Interviews in Lesotho

<table>
<thead>
<tr>
<th>Stakeholders</th>
<th>Interview</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carers (Grandparents)</td>
<td>Semi-structured interview (48)</td>
<td>This is the group that is looking after orphans and their experience. It allowed the researcher to document the benefit of social pensions in Lesotho</td>
</tr>
<tr>
<td>Orphans</td>
<td>Semi-structured interview(29)</td>
<td>This is the group that is no longer cared by own parents but elderly. They were used to share the benefits of having access to social pensions but also what it meant to grow up under the care of the elderly</td>
</tr>
<tr>
<td>Local leaders</td>
<td>Semi-structured (4)</td>
<td>This group gave a broader community perceptive in terms of challenges faced by the elderly in this context as well as the benefit of social pensions</td>
</tr>
<tr>
<td>Government officials (Social services)</td>
<td>Structured interviews (1)</td>
<td>He was selected in order to obtain information on how the social pension is implemented in Lesotho, some known benefits, challenges and recommendations on how to effectively implement this</td>
</tr>
</tbody>
</table>

Source: Own, 2013

5.13. SECONDARY DATA

5.13.1. Policy review

Apart from the interviews, policy reviews on the existing social protection policies were undertaken to obtain a clear picture of the status of social protection policies in supporting the needs of the elderly in Malawi. Policies for social protection, national social support and policy for the
elderly formed part of the review. This was done to understand the actual policies set to support the needs of the elderly as well as on social protection. Additionally, structured interviews using a questionnaire were used to examine to what extent the different social protection policies in general were responding to the needs of the grandparents or carers in the HIV and AIDS orphan crisis. The questionnaire was directed at managers from the Ministry of Disability and Elderly as well as the Ministry of Economic Planning.

Structured interviews were done to elicit the extent to which policies, strategic plans and programmes were being implemented at district level to support the needs of grandparents and carers in Malawi.

In Lesotho reviews were done on the actual social protection policy and other supporting documents to understand how this policy has been implemented. This information further informed the interviews to be done by both the government officials and donors. Annual reports of social pensions in Lesotho were reviewed as well as documented information from the United Nations, African Development Bank and researchers who have included Lesotho as one of the countries to have successfully implemented social protection.

5.13.2. Literature review

As stated by Bryman (1989:197), since materials are non-reactive (for example, they are not the product of investigations in which individuals are aware of being studied), the possible biases, which are often recognised to derive from interviews and questionnaires are removed. This is one of the advantages of doing a literature survey. Furthermore, secondary data offers the advantages that it is readily available; inexpensive to find; it alerts the researcher to potential problem areas; helps to clarify research problems and hypotheses; and it can cover greater periods of time than other approaches. For this study, a literature review was undertaken to
document the information that has been documented touching the needs of the elderly as well as the impact of HIV and AIDS broadly.

In analysing the implementation of the pension scheme in Lesotho, this research reviews and leverages on the impact study report conducted by the Lesotho Pensions Impact Group (LPIG) from the National University of Lesotho. The report was published by Croome and Mapetla (2007) and was done after the research that interviewed over 215 pensioner households and another 215 non-pensioner households to review the impact of the social pensions as well as other studies. All these studies reflect on the process, benefit and challenges in the implementation of the old age pension in Lesotho. These were reviewed in detail and provided information for the understanding of social pensions in Lesotho.

The overall research design is presented in Figure 7 below.

**Figure 7: Summary of Research Design**

![Summary of research design](image)

**Source:** Adapted from Lweya, 2007.
In conclusion, this research is purposive in nature and is a qualitative study that will use various techniques including interviews, focus group discussions and policy reviews as summarized above.

5.14. DATA ANALYSIS

Data analysis may be described as an attempt to organize, account for and provide explanations of data so that some kind of sense may be made of it. The research moves from a description of what is the case to an explanation of why that is the case (Hitchcock and Hughes, 1989:73). In yet another definition, Marshall and Rossman (1995) describes data analysis as the process of ordering, structuring and providing meaning to the mass of data collected.

In qualitative research, the richness and complexity of the data compound the difficulty in interpretation and analysis (Roberts and Scapens, 1990). However, as much as analysis may seem confusing, qualitative data analysis begins as soon as the researcher begins collecting data (Shaw, 1999:4). It is an interactive process throughout that allows the investigator to produce believable and trustworthy findings (Merriam, 2001:151). In this regard, data analysis is conducted simultaneously with data collection and in some cases with theory development. This helps in terms of understanding and shaping the proposed study as it continues. It needs to be emphasized that qualitative data analysis is not a passive endeavour, but requires comprehension, synthesizing, theorizing and re-contextualising by means of “astute questioning, relentless search for answers, active observation and accurate recall” (Morse, 1994).

In qualitative research, there are different approaches in analyzing data. Merriam (2001) identifies four types of analysis: ethnographic analysis, narrative analysis, phenomenological analysis, and the constant
comparative method. In ethnographic analysis the aim is to reach across multiple data sources (recording artifacts, diaries) and to condense them, with somewhat less concern for the conceptual or theoretical meaning of these observations (Miles and Huberman, 1994, as quoted in Merriam, 2001:156).

Apart from the four main data analysis methods, there are two less common ones, namely content analysis and analytic induction. As stated by Merriam (2001), these techniques are used implicitly in any inductive analysis of qualitative data. In analyzing any qualitative data either using phenomenology or constant comparative method, all researchers analyze the content of interviews or field notes, and in this regard, analyzing the content. Merriam (2001) explains that content could be analyzed for themes and recurring patterns of meaning. Analytic induction involves the process of continual refinement of hypotheses as the researcher finds instances that do not match the original hypothesis until a hypothesis evolves that explains all known cases of the phenomenon.

### 5.14.1. Selection of the appropriate data analysis method

In order to effectively analyze the data in this qualitative research study both for the case study of Lesotho and the interviews in Malawi, content analysis was the technique used. All the semi-structured questions were analysed through a thematic process. Content analysis will be understood as, being a, “procedure for the categorization of verbal or behavioural data for the purpose of classification, summarisation and tabulation” (Hancock, 2002:17).

Content analysis is a way of systematically converting text to numerical variables for quantitative data analysis using various coding units. These could be words, theme, item or time. According to Merriam (2001), in analysing qualitative data, content analysis becomes core in interpreting
meaning. There are three approaches to content analysis described by Hsieh and Shannon (2005), namely conventional content analysis, directed content analysis, and summative content analysis. Conventional content analysis determines coding categories directly from raw data and is primarily used to develop theory. Directed content analysis determines coding from a theory or relevant research findings and is usually used to validate theory. Summative content analysis begins with words or content counting and then extends to the exploration of implied meanings and themes thereby exploring the usage of words in an inductive way.

This research required that the researcher understands the challenges of the elderly in thematic ways: social, natural and physical issues, and as such the researcher needed to establish these patterns. In this regard, the researcher condensed the raw data collected into categories based on valid inference, deduction and interpretation. This raw data contained words and phrases that needed to be categorized within the questions asked. In this regard, the researcher employed the directed content analysis which allowed the raw data to be condensed into categories. Furthermore, after the categorization, the research then engaged summative analysis to allow the data to solicit themes and categories. Weber (1990) states that themes are most useful as meaningful units of analysis.

In order to be systematic, the content analysis was directed by the interview questions as stated by both Gilhams (2000) and Lee (1999). The interview structure defined the way the data analysis was done. The questions were categorized into thematic area challenges facing the elderly and children within the livelihoods framework of social, natural, physical and financial capitals. Following this, the second step was to read the transcript for content analysis. Content of substance is the evidence required for drawing meaning. The interview questions were then
clustered into theme categories and responses as per the example shown below in Table 10.

**Table 10: Analysis Grid**

<table>
<thead>
<tr>
<th>Theme</th>
<th>Respondent 1</th>
<th>Respondent 2</th>
<th>Respondent 3</th>
<th>Respondent 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Following this, after classifying all relevant and important statements, then count analysis and meaning analysis was carried out. Count analysis describes the number of respondents who would say the same thing. Count analysis is important because it shows the concurrence or variability of the respondents. Meaning analysis involves the analysis of the understanding of the challenges faced by the elderly. Within each thematic response, the total number of respondents with the same theme indicated the greater occurrence of the issue implying its relevance to the population under study.

Gillham (2000) proposes the cross-referencing of transcripts to the analysis grid of all substantive statements. This was done within this study and it helped in ensuring completeness and minimized the risk of omitting important statements.

Furthermore, the researcher used a case study showing how the Lesotho government has implemented its social pension, hence content analysis was used as the ideal way of analyzing this data following the above steps.
5.15. DATA PRESENTATION

This research was based on qualitative tools and as such it will share the research findings in summarising the responses. In sharing the findings, the research uses graphs, pictures, stories to illustrate the responses that were received during the study. Graphs are used as an illustration of demographics as well as the number of respondents who shared a similar response during the interviews. Participant quotations are used as a way to qualify the actual words said by the respondents during the interview.

The above approach has been adopted as it allows the researcher to present the research findings in a consolidated and summarised manner.

5.16. VALIDITY

As observed by Merriam (2001:198), all research is concerned with producing valid knowledge in an ethical manner. In any research, the aim is to find meaning and to document the reality. Every researcher is interested in ensuring that their study adds to the body of knowledge and is trustworthy and ethical. In any research validity and reliability needs to be taken into account to ensure the quality of the research.

Validity has been described by a wide range of terms in qualitative research. Winter (2000) notes that this concept is not single, fixed or universal concept, but rather a contingent construct, grounded in the processes and intentions of particular research methodologies and projects.

There are different approaches to validity. Merriam (2001) identifies internal validity, reliability and external validity. Internal validity “deals with the question of how research findings match reality, or how congruent are the findings with reality” (Merriam, 2001:207). This is important for a
researcher to know if the study has really matched with the reality as perceived by the researcher. Reliability refers to the extent to which the research findings can be replicated. If the same study was to be done again will it have the same results? However, in qualitative study this is not difficult as there is no way reality can be the same as it will be interpreted differently by different people. External validity is concerned with the extent to which the findings of one study can be applied to other situations and whether the research findings are generalisable (Merriam, 2001:207).

To make research more credible, there is a need to check validity or trustworthiness to ensure that the research done is of high quality. As indicated above, this research chose the interview as the method. As stated by Patton (2001) generalisability was one of the criteria for quality. It needs to be known that generalisability of findings is not the concept for qualitative research, however in this research this was used for understanding of common issues. Most importantly, the research focused on using triangulation as the strategy for improving the reliability and validity of the research. Triangulation is defined as a validity procedure where researchers search for convergence among multiple and different sources of information to form themes or categories in a study. This is also clearly elaborated by Mathison (1998) who explains that, “Triangulation has arisen as an important methodological issue in naturalistic and qualitative approaches to evaluation (in order to) control bias and establishing valid propositions because traditional scientific techniques are incompatible with this alternate epistemology.”

In this research, triangulation was applied to ensure that the research was both valid and reliable. This was done by using different data collection methods, for example, different interviews conducted with the grandparents, as well as the children under their care. The semi-structured interviews with the local leaders and teachers was aimed at validating what the children and elders were saying. Furthermore the focus group
discussion with the community ensured that the information provided by the elderly and children was triangulated with their information. In this regard, the researcher interviewed different stakeholders with the aim of arriving at an holistic picture - these include grandparents, orphans, communities and government officials. All these stakeholders provided a picture of the challenges facing the grandparents and from this, the researcher derived common patterns that created the knowledge needed.

Furthermore, for the social pension scheme in Lesotho, the researcher leveraged on the different studies done to compare their findings and verify with the current status. This enabled the researcher to form a comprehensive view of the effects of social pensions on the elderly. By validating some of the findings with the wide scale researchers that targeted the whole country allowed the researcher to have conclusive recommendations as these have also been seen through other eyes.

In Malawi, targeting two districts with different cultural practices also allowed the researcher to have a picture of the general challenges facing the elderly as well as contextual issues. Within each district, interviewing different respondents, that is the elderly, children and local leaders, validated the findings.

5.17. LIMITATIONS

As much as the intentions of this study were to explore the effect of HIV and AIDS on grandparents, specifically looking at the role of social protection, a number of limitations were faced including the sensitivity of the study as the targeted population were the elderly looking after orphaned children due to HIV and AIDS. The stigma that surrounds HIV and AIDS is still evident. However, it was encouraging to note that most grandparents felt free to talk about the disease that contributed to the death of their children. To ensure that the privacy of the respondents was
observed, the researcher requested privacy to interview the grandparents alone.

One challenge that faces any researcher in communities is the fatigue experienced by communities due to various people coming in and out to do their research. It was presented in Zomba during Focus Group Discussions that the communities were tired of people coming to ask questions and they do not see the actual results. This affected the start-up of discussions as more time was spent explaining the objectives and how the research will be used. However, as much as this process delayed the research, it was good to note the acceptance of the community members after understanding the whole process that the researcher was going to use and how important their participation was.

Secondly, the study identified the limitation to get holistic information from the elders who were above 80 either due to age or to illness. Some of the elderly in this study had one or more chronic illnesses. Most of the respondents were at home during the interview with some visibly sick. In cases where the respondent was seen to be very weak, the researcher had to move to the next household.

This research planned to conduct face-to-face interviews with government officials. Unfortunately during the study period, even with prior notice, most of the government officials were booked for workshops or travelled outside the city and country. The researcher had limited time in Malawi and the interview method changed to having telephonic interviews with the government officials. Additionally, the government officials were not willing to share some documents, for example, government planned interventions and criteria. They shared this information verbally.

As much as the researcher faced limitations, it must be acknowledged that measures were taken to ensure that the whole research was not
compromised. Such measures included taking more time to focus on the questions, privacy, clarifying the objectives of the research with the communities, and flexibility during the interviews. Additionally, having different tools to interview different people allowed the researcher more flexibility. The researcher used interviews for the elderly and children under their care, focus group discussions with community members and key informant interviews with the chiefs and teachers. These gave a good picture of the issues facing the elderly. Furthermore, instead of having face-to-face interviews, the researcher resorted to telephonic interviews with the ministerial officials and had follow-up interviews for any areas that needed further input.

5.18. ETHICAL CONSIDERATIONS

Research must be conducted in a manner that minimises potential harm to those involved in the research study (Broomberg and Volpe, 2008). Ethics are considered to deal with beliefs about what is wrong or right, proper or improper, good or bad (McMillan and Schumacher, 2001:196). McNabb (2004) views research ethics as the application of moral standards to decisions made in planning, conducting and reporting results of research. It is therefore the responsibility of the researcher to ensure that ethical standards are considered within the research.

Within qualitative research, there are some ethical considerations that need to be taken into account due to its emergent and flexible design. These can arise in all phases of the research, that is, data collection, data analysis and interpretation and dissemination of the research findings (Broomberg and Volpe, 2008).

According to Macmillan and Schumacher (2001), research ethical considerations will mostly focus on safeguarding and protecting the rights of the participants and will include informed consent, protecting
participants from harm, and ensuring confidentiality. Any researcher conducting qualitative research will need to be attentive throughout the research to the researcher-participant relationship, which is determined by roles, status and cultural norms (Broomberg and Volpe, 2008).

In this research, the researcher employed various ways to ensure that ethical considerations were adhered to and the process is outlined below.

5.18.1. Informed consent for interviews and pictures

This research involved interviewing orphaned children and the elderly. The researcher ensured that before starting the interviews, the children were informed about the process of the interview. This research only interviewed children above 13 and in each case, their guardians were consulted before the interviews to get their consent. A form was developed and presented to the interviewees before commencing with the interviews. The elderly due to their age could easily get intimidated with the process of interviews. The researcher explained the process and got their consent to participate in the research before starting the process.

Furthermore consent was requested at the beginning of the interview from the respondents to allow the researcher take pictures. During this process, it was clarified that the pictures were only intended for use in illustrating the findings within the report and will not be used for any publication outside the University that the researcher is part of. Furthermore, the local leaders were informed about taking pictures of the elderly as well as children and thorough discussions were undertaken on why the pictures were taken and why it was important for the members to give their permission.
5.18.2. Approval from review board

Governments and universities have established institutional review boards whose members review proposals to assess ethical issues and ensure that research adheres to the established standards. This research was guided by the University of the Witwatersrand review board, as well as the government of Malawi.

5.18.3. Ensure privacy of respondents

This research used interviews as the dominant research technique. During the interview process, the researcher asked for privacy from onlookers and family members to only discuss with the household targeted elderly. This ensured that their privacy was observed. Furthermore, considering the sensitivity of the topic, the researcher ensured that all respondents remain anonymous and this was communicated during the interview. The participants’ responses will only be used within the research study and not elsewhere. If there is need for any publication of the results, the researcher will ensure that participants’ privacy is protected.

5.18.4. Objectivity in reporting results

As much as this research required the researcher to engage in detail with the participants, the researcher ensured that the results are presented objectively without any biasness. The researcher aimed to present the challenges of the elderly with regard to their new emerging role of looking after orphaned children. This topic brings recognition to the issues facing the elderly in a detailed manner, hence there need to ensure the facts were presented objectively.
5.18.5. Cultural sensitivity

Malawi as a country has strong cultural values and beliefs. This includes the way one interacts with elders, dressing, and mannerisms to mention a few. During this research, considering that the researcher is from Malawi, the following cultural practices were observed. Before starting the interviews, the researcher had to present herself to the local leaders to explain the purpose of the research as well as acknowledging their leadership and support. Secondly, proper dressing in the Malawian cultural way is one critical factor to ensure that the researcher is able to gain trust and relevant data from the community. In this regard, the researcher ensured that she conformed to accepted dress code. The researcher was expected to sit on the ground when even offered a chair as culturally, the young person cannot sit on a chair whilst the elderly are sitting on the mat. By sitting on the mat with them, the elderly open up as they know they have been respected. Furthermore, in Malawi one cannot point fingers at the elderly. These requirements were strictly observed.

5.19 ROLE OF RESEARCHER IN THE PROCESS

As part of the ethical considerations, it is important to clarify the role of the researcher in collecting data from the same area in which the researcher’s organisation is operating. In Lesotho, World Vision international has programmes where the researcher leveraged the sites to collect data. During the interviews with the participants, it was highlighted that one of the members of the team was doing interviews to understand how social pensions were helping the elderly people. Participants were asked whether they would be willing to provide information to the researcher. It was further clarified that the information collected was not going to influence their participation in the programmes or even justify another intervention. It was a different study. The participants were willing to be part of the research and to ensure objectivity, and the researcher worked
with the monitoring teams in all four districts to collect the information. Instead of using field personnel, the role of the Monitoring & Evaluation team is to collect data and they do not have constant engagement with the distribution process of food assistance. This allowed for transparency from the respondents as well as objectivity of the process.

5.20 SUMMARY

In this chapter, the research has explored the methodology that guided the research. This study was qualitative in nature and employed interviews as the main method of data collection. This allowed the researcher to obtain more insight on the needs of the elderly people looking after orphans. The research, which spanned two years, undertook both interviews for the data collection in Malawi documenting the challenges as well as a case study of Lesotho to capture the process of the implementation of the social pension scheme. Through this, a picture of how social pensions are implemented was provided that could be considered for Malawi, since Lesotho is also a least developing country.

Considering the target group selected, the study employed purposive sampling as it has a well-defined group that needed to be interviewed. Interviews were structured and semi-structured, and focus group discussions and key informant interviews were used as the data collection methodology. Literature search and policy review were done to ensure that the policy implementation and strategy for the elderly in Malawi were reviewed accordingly. Furthermore, studies done in the same area were sampled to ensure that this research leverages on the gaps identified to document new knowledge that can be used within the area of elderly and social protection.

In order to analyse this data, the research mostly used content analysis. This research required that the researcher understands the challenges of
elderly in thematic ways: social, natural, and physical issues, and as such the researcher needed to establish these patterns. In this regard, the researcher condensed the raw data collected into categories based on valid inference, deduction and interpretation. This raw data contained words and phrases that needed to be categorized within the questions asked. In this regard, the researcher employed the directed content analysis which allowed the raw data to be condensed into categories. Furthermore, after the categorization, a summative analysis was developed to allow the data to solicit themes and categories.

The researcher also ensured validity of the research by triangulating the data collection tools and respondents. Community members, key informants, children, and grandparents were all interviewed to determine the challenges facing the elderly in the community. School teachers also offered perspectives that added to some of the challenges that children shared.

Chapter six presents the research findings based on the information received through the various tools that were employed during data collection. The chapter is divided into two distinct sections, sharing the findings from the interviews, and focus group discussions conducted in the two districts.
CHAPTER SIX

THE SITUATION AND CHALLENGES OF THE ELDERLY IN MALAWI

6.1. INTRODUCTION

This chapter presents the analysis of the challenges facing the elderly looking after orphans in Malawi. As a first step, this research will present the characteristics of the study population which is linked to the objective of the study where it analyses the challenges facing this group. Following this, the analysis will examine the challenges facing elderly people looking after orphans. This analysis is presented according to the livelihoods framework that identifies the holistic needs of the household, being human, social, physical, and financial as the key assets for each household.

Furthermore, the research explores issues of marginalisation, discrimination and social exclusion. Within this analysis, the research will also look at social protection mechanisms and associated problems that limit their adequate provision within communities. The various coping mechanisms that older people apply to support their daily needs will be discussed. Looking at the two different districts where the research was done, some analysis on the care of the elderly and challenges between patrilineal and matrilineal settings will be explored.

In order to present the data, the chapter will use graphs, pictures, and tables to illustrate the information shared by the participants. This enabled the researcher to present the different opinions shared by the respondents using different illustrations. As a qualitative study, the chapter uses statistical information to summarise the number of people who presented
the same information and sentiments as presented under the methodology section. This is part of the adopted content analysis presentation that the researcher used.

In this chapter, the data is presented from information gathered from the elderly and orphans through one on one interviews, community members through focus group discussions and key informant interviews as shared by the local leaders and teachers. The researcher qualifies information from different sources to present the findings. In doing this, a good picture emerges on what the respondents as well as the people around them feel on a particular area of the study.

Chapter seven presents findings from the review of policies to support the challenges as documented facing the elderly in the Rumphi and Zomba districts. The sections are arranged in this way as the study started by conducting interviews with the elderly and communities before interacting with government officials. Policy reviews only happened after understanding what the elderly had expressed, where it was indicated through the various interviews and community focus group discussions that there was no knowledge of any government policy or interventions. The researcher interviewed government officials as well as reviewed the elderly policies and social protection as part of document review to validate some of the information that was shared by the elderly and community members through interviews. With this approach, the researcher was able to have a better picture of the challenges facing the elderly and the role of government to support their needs through policies and other interventions. The researcher used some of the findings in chapter six to cross-check the extent to which the policies or interventions have managed to reach the elderly. This will be shared in chapter 7.
6.2. BACKGROUND TO THE RESEARCH SITE

Zomba district is situated in the southern part of Malawi and is one of twelve districts in the southern region of Malawi. Zomba borders Chiradzulu, Blantyre, Mulanje, Phalombe, Machinga, Balaka and the Republic of Mozambique to the east. The district has three main ethnic groups namely lomwe, Yao and Chewas and within the district, the most predominant tribe was the Yao. This research was done in Msondole area, which is about 20 kilometres from the district central. The two main religions for the people of this area are Christianity and Islam. It was noted that the majority of the houses were Muslim with few Christians belonging to different denominations.

Various income generating activities were found to be practiced in the area, and the predominant source of income for most houses in the area was fishing. It was established that most men were either fishermen or tailors. Due to this profession, most men were absent in their homes, as they were either in the cities where they were employed as tailors or along Lake Chirwa which is within the area where they were able to fish and sell to vendors. The women continued to take care of the daily needs of the family.

Cultural identity remains central for the people in Msondole area and they continue to promote and practice their cultural and traditional beliefs. Such values include speaking their local language which is Yao and practicing initiation rites for both boys and girls as well as being a matrilineal society. It was evident through the research that the role of the woman and her brother were more pronounced in the daily activities of the families within the village.

Furthermore, in Msondole, the members of the community practice their initiation ceremonies. When a girl reaches the age of 8, she is taken for
an initiation ceremony called *Msondo*. During this initiation, the girl is taught amongst many things about household duties, good manners and also she is taught to prepare for menstruation and her female roles. The elderly women initiate the girl into womanhood and teach her about her body and what is expected of a woman in a marriage.

Boys are initiated into manhood at the age of 8 to 13. The boys' initiation is called *Jando* where they are introduced into their roles as men and how to look after their family. During *Jando*, boys are circumcised according to the Yao tradition. Boys are taught strict discipline about their role in the society and are told that they are now adults and should be expected to behave like grown-ups.

In this village, two distinct leaders are respected to guide the community and these are the sheik, who is the religious leader and the chief, who is the community leader. Both of them hold a special place in the community. The sheik leads during funerals, weddings, religious studies and days of prayer. On the other hand, the chief is responsible for all engagements with community members from land allocation, conflicts, and community development initiatives, to mention a few. During this research, the researcher needed to engaged with the chief before starting any meeting within the community and explain the objectives of the research and how it will help the community.

The other research site was Rumphi district which is in the northern part of Malawi. This district has one predominant ethnic group called Tumbuka. The Tumbuka are a group of people living mostly in the northern region of the country. They encompass Kasungu, parts of Nkhat a Bay, Mzimba, Rumphi, parts of Chitipa and Karonga which are all in the northern part of the country, except Kasungu which is in the central region of the country. This research was done in Mtunthika village, which is about 15 kilometres from the Rumphi central district.
Unlike the other cultures, the Tumbukas do not practice any rituals as done in the central and southern region such as Nyau and Chinamwali. Though there have been a number of alterations in the culture due to Christianity, the Tumbuka of northern Malawi have lacked these rites and rituals from the beginning. When a Tumbuka child grows up he or she can receive individual counselling from the elderly. However this is different from the Chewa or Yao who organize boy and girls into separate groups that will be initiated in the bush. There they will be taught how to live in the community and take care of themselves.

Like the Yaos, Tumbukas are also led by a traditional chief who manages the activities of the communities. Chiefs inherit the title from their fathers and it is passed on the children. The chiefs in the north play a central role in any development as well as political mobilisation.

Unlike the men in Msondole, within Mtunthika Village, it was noted that most men were more dependent on farming as their source of income. This included farming cash crops like tobacco, both on small scale and large scale depending on the resources of the household. Some of the middle aged men were reported to have gone to South Africa seeking good employment. The study did not verify the figures, although working in South Africa was seen as one of the key job opportunities for the members of the village.

The people of the northern region are known for their passion for education as they believe it is the route to a better life. There is a perception that they are arrogant and see themselves as being more knowledgeable than others in Malawi. This stems from the fact that development has been more pronounced in the central and southern areas of Malawi, with the north lagging in most development programmes. Such visible outputs includes the road network, so for most people to
access good jobs, they needed to be stationed either in the central or southern part of Malawi.

Cultural beliefs, especially initiation ceremonies, have a major role to play in the education of the children. The study found that there were more school dropouts in Zomba than Rumphi due to early marriages. It was stated that once the children are initiated, they believe they are grown up and ready for marriage. This fosters their interest in having relationships and eventually dropping out of school. This is supported by the research. The Creative Centre for Community Mobilisation (CRECCOM) documented the effect of some cultural practices on education and found that most of the girls were dropping out of school and getting married due to the education they were receiving during the initiation ceremonies. This NGO which worked in the district for over 20 years continued to document these challenges, even though it was stated that the figures are now declining (Kaunda, 2012).

6.3. DEMOGRAPHIC STUDY POPULATION

Within this research, a total of 20 elderly people were interviewed with the aim of understanding the challenges they face in taking care of the grandchildren left in their care. The study first established their age and the relationship with the children. It was important to establish this as the focus of the study was for the elderly over the age of 60 years who were looking after their grandchildren. As such, the village head and the school headmasters were asked to identify the elderly “grandparents” hosting orphans. Following this, the individual interviews with the chief confirmed which of the elderly households had lost their children to the HIV and AIDS pandemic. This was further verified prior to the actual research. Individual interviews were then conducted to establish the age as well as other focus areas of the study.
Of the total 10 grandparents interviewed in Zomba, six were able to identify their actual age whilst four gave indicative years of when they were born based on various milestones. This was different from those in the northern region where a total of 10 were able to state the actual year in which they were born or gave the year, month and the actual age. Of the total 20 respondents, the 10 interviewed in Zomba were females whilst in Rumphi seven were female and three were male.

It is important to note the absence of male older people in Zomba as the research discovered that due to matrilineal practices, when the woman dies in the family, the man is sent home to his people, unlike in the north where the woman chooses whether to stay or to go. This will be further explained in the study.

6.3.1. Age in years

The study asked the respondents to share their age with the aim of verifying the categorisation of elderly as proposed in this study. This was done to fit the pre-selection criteria for the study. It was noted that the study wanted to interview grandparents over 60 years of age. However, three of them were fitting this category by having grandchildren and were just turning 60 in 2013 whilst one was 58 and the research excluded her as this was found at the end after further verifications. The researcher opted to include them in the interviews as they still fitted the definition of elderly within the year of study.
Based on the age groups in Figure 8 above, most of the elderly interviewed in this research were over 70 years of age. This is due to the pre-sampling discussion with the school headmaster and the local leaders where the researcher requested to meet with old people that are looking after orphans. In using the local language, “research ikufuna kutcheza ndi agogo akuyangánila ana amasiye”, that is, this research is focusing on the grandparents looking after orphans and should be over 60 years. This proved to be difficult, hence the inclusion of the 59-year-old grandparents was on the basis that they said, “I am turning 60 within this year so I will be 60 in few months time.” (Elderly respondent, (Mtunthika, 14 June, 2013).

Within the Malawian community, being elderly is understood and considered using various parameters. From the focus group discussions held in Zomba, such comments include, “the status of the person in the society, that is how senior one is, what role the person plays within the community and most surprisingly even the marital status that is if one is widowed, they hold certain spaces in the community.” (FDG, Msondole, 15
June, 2013). In other cultures, even what position the person holds in church is part of the parameters that define the elderly. As stated by Heslop and Gorman (2002), old age in Sub Saharan Africa is complex and sensitive and it needs to be understood within a specific context.

As much as this situation presents itself in this way, it was surprising to note the difference between the two districts where the research was conducted. In the northern region, all elderly interviewed were able to state the year they were born or the actual age. This was attributed to the differing literacy levels between the two districts where most people in the northern region are seen to have gone to school to a certain level of literacy, hence the ability to recall certain important factors of their lives.

On the other hand, the grandparents interviewed in Zomba district struggled to recall their age and could recommend some distinct memorable episodes. Even when they called for help, the children or relatives would just state that, “We have never known the actual age and have always assumed her age.” (Child respondent, Msondo, 15 June, 2013).

Similarly, another grandparent indicated that, “I have never known my actual age as nobody had written down the year I was born, however I remember that when Kamuzu come to Malawi I was already married with my second child. Considering this, most people in this village would be married by the age of 18 hence one would deduce that she might have been 20 making her age to be around 69 or 70.” (Respondent, Msondo, 15 June, 2013).

The failure to have birth certificates in Malawi also contributed greatly to old people not being able to present something that identifies their actual age. This brings into focus the challenge of registering these groups for any interventions done by various organisations as it will limit other
benefiting members to actively engage when such opportunities arise. For example, considering the role of the social pension for the elderly in Malawi, some members might be excluded by failing to give the actual years of birth or their age which will result in inclusion or exclusion errors.

6.3.2. Definition of Elderly by the community

During both focus group discussions held in the Rumphi and Zomba districts, the community and grandparents were asked to share the “understanding of who is a grandparent in the community and what it means nowadays to be a grandparent and elderly”.

Two distinct interpretations were presented which have implications for how the society has changed and the inter-generational challenges it faces. First and foremost, it was established that, “we define elderly or grandparent by age, how one walks or works in the field. In the past we used to cultivate till late, now we cannot manage to do so, and when one sees that their energy is going down, you should know that you are becoming old.” (FGD, Msondole, 16 June, 2013).

Furthermore, old age is also defined by, “how a child relates to you, that is, if they call you grandparent, then you are old.” (FGD, Msondole, 16 June, 2013).

However, not everybody in the community agreed with this definition as they acknowledged that within their community, “… there is a lot of early marriages as such children get married at the age of 15 whilst their own parent could be 40, how does one get regarded as an elderly with such situations. “We cannot classify the 60 year old elderly to be regarded in the same manner as a 30 year old just because they gave birth at a very young age and their own child has followed suit and gave birth at 15 as well.” (FGD, Msondole, 16 June, 2013).
After debates, it was agreed that there should be two different understandings of the grandparents that is those middle-aged grandparents and also older grandparents. Those between 30 and 50 years of age should be referred to as “gogo wachinyamata” or young grandparent and the older grandparents will be those over 60 years of age. Having established this understanding, it was then agreed that the study was only focusing on the elderly over 60.

Based on this analysis, there is need for the understanding that due to early marriages, the role of grandparents over 60 has tremendously changed. Most of the households interviewed in the Zomba Msondole area had two generations of children under their care, that is, grandchildren and also great-grandchildren. In one household, the researcher found that after the death of her own children, the grandmother had to go through yet another challenge of taking the whole household, that is, her grandchildren as well as great-grandchildren, as they were
being kept by their parent. This strain was too great for the elderly household especially as she was over 70.

In Rumphi district, the community defined elderly as, “the ones who have grandchildren and have retired from active duty. They are above 55 years of age.” (FGD, Mtunthika, 19 June, 2013). There was a general consensus on understanding the elderly’s age and it was agreed that for the study under review, the researcher was talking of the elderly as those above 60 years of age.

**6.3.3 Number of orphans in the household**

The critical focus of this study was to target the elderly looking after orphans. Due to the impact of HIV and AIDS, older people have been requested and required to fill the gap left by other population groups in providing for care and support to other family members. It is clear that older people, mainly older women, are providing economic, social and psychological care and support for a large number of family members. Using the above analogy, this study found that from the 20 interviewed elderly households, they were hosting a total of 56 orphans and most of these elderly were 70 years and older.
In the focus group discussions with the community, it was alarming to note the numbers of households that were elderly headed and looking after orphans as well as orphan-headed households. These have become a normal family arrangement. The community indicated that, “we have so many elderly people looking after orphans to the extent that they can also form their own village. Within these households, each one of them is hosting an orphan or orphans and the elderly have become so overwhelmed.” (FGD, Msondole, 16 June, 2013).

This was agreed by the local leader during the key informant interview, who indicated that there were, “so many elderly looking after children in the village and I took this issue to the local village meetings and briefed the counsellor about the challenges facing the elderly. This was raised at the district level, however not much has been done to date.” (Local chief, Msondole, 16 June, 2013).
The research also focused on understanding the number of years that the elderly have been looking after the orphaned children with the aim of documenting the extent of this challenge. Most of the elderly have looked after these children for over seven years on average, with the highest being 16 years. It was not surprising to learn that there was no orphan above 17 years still staying with the grandparent as at this time either one would be gone to high school, or married or started piece jobs in the nearest towns to support themselves.

Most grandparents did not even feel the number of years they have spent mattered as some indicated that, “I stayed with him since he was one, do not know how many years that is, but ask him his age then you will know.” (Elderly respondent, Mtunthika, 17 June, 2013). This could also be verified from this other response from Msondole area: “I cannot even remember the number of years, but he come in when he was in standard one.” (Elderly respondent, Msondole, 15 June, 2013). Some even alluded to the situation that led to them looking after the children: “The last parent died when she was just 6 months old, so I stayed with her from that time till now.” (Elderly respondent, Mtunthika, 17 June, 2013).

Figure 11 below shows number of years that the elderly have spent looking after orphans.
Malawi is a country known for its community way of life where extended families play a critical role in supporting one another during times of need. However, during this research, it was identified that the role of the family structure and function has indeed changed as a result of the HIV and AIDS epidemic as well as urban migration. Most of the elderly households were found to have been looking after the orphans for more than seven years indicating that they have been taking on this responsibility for a long time.

In both Rumphi and Zomba districts, the community was able to identify the various forms of households within their community that included single-headed household, orphan-headed household, elderly households and those large families hosting three generations. When the communities were asked during focus group discussions which households were vulnerable, they cited the orphan-headed and elderly households being
the most in need. However, of these two categories, elderly households were not given the priority as most of the programmes in Msondole and Mtunthika areas focused on orphan-headed households as opposed to the elderly. The community also believed that, “it was better to support the orphan headed household as these were young children with no knowledge how to raise the family whilst the grandparents have had this experience before hence are not really a priority. The elderly household have been treated as any other household.” (FGD, Msondole, 16 June, 2013).

6.4. PATRILINEAL versus MATRILINEAL MARRIAGE SYSTEMS AND THEIR IMPACT ON THE CHALLENGES OF THE ELDERLY

Within the family arrangements there are principles that define family lineage which have implications for how care is provided to children. Both matrilineal and patrilineal kinship exists in Malawi and these have implications for how households cope with death, illness, orphanhood and inheritance. Within the study, Zomba district is a matrilineal society whilst in Rumphi it is a patrilineal society.

6.4.1. Household arrangements and type of care

The study identified some distinct differences between patrilineal and matrilineal systems on coping mechanisms and strategies used by both grandparents and communities around them to support the needs of the orphans in their care. Within the patrilineal system, it was worthwhile noting that most of the orphans were being kept by their grandparents whether male, female or single-headed. No dominance of one gender existed, whilst in the south it was female-headed households, or both but no male-headed household. In establishing this through the focus group discussions held in the two districts as well as key informant interviews by the chiefs, it was stated that traditionally in the north, when a man dies, the
mother is allowed to stay in the village because the bride price was already paid. If the woman wants to go to her home, she just has to go through the court and ask that she is allowed to go and when she goes, she leaves the children behind as they belong to the male side. She is not forced to go to her original village unless there were prior challenges otherwise, she can go when she wants. Most of the women stayed behind with their children because they wanted to look after their children and mostly protect their land.

It has to be noted that in the past the woman would leave immediately to her home. This has changed due to the intervention by government and human rights groups as it was the basis of property grabbing by relatives. With this, the interview established that there were so many grandmother-headed household within the area due to the fact that most of them chose to stay. The rationale provided was that, “when we leave, we have to leave the children behind and the relatives will take away our land since the children are still young, hence it is better to remain and ensure that the children are well taken care of.” (Elderly respondent, Mtunthika, 17 June, 2013).

This was further clarified by a local chief who said that, “with the coming of the gender sensitisation and property grabbing interventions by the government, most women have felt free to remain in their married homes when their spouses die. You will see in this village so many women headed households who are continuing to look after their children without fear. Even the practice of chokolo has completely died”. [wife inheritance] (Local chief, Mtunthika, 19 June, 2013).

The focus group discussion also presented the same picture as shared by the chief, where it was highlighted that, “nowadays, you never find women going back to their own villages. They remain to safeguard their land and
property because if they go, the family will take their land and the children will suffer.” (FGD, Mtunthika, 19 June, 2013).

On the other hand, the study found that in the matrilineal arrangements, most of the grandparents looking after the children were women. This is due to the fact that when the wife dies, the man goes to his place, and as such the remaining one is always a woman because when the husband dies, she does not need to move as this is her home. As such if the household does have one grandparent alive, then it will be the grandmother as she belongs to the community. It is believed that when the man goes to his own home, he completely forgets about his family and as such there is no need to even bother making him stay or take the children with him because when he goes to his own area, he will not look after them. It was further indicated that it does not matter at what age the man is widowed, so even at the age of 70, if his wife is dead, he has to go back to his own village.

An example was given during the focus group discussion by the community of so many elderly men who went back home due to this practice: “In our culture, once your wife dies, you have to leave, it does not matter what age, you are no longer expected to stay. In most cases, nobody will tell you to go, you just know that you need to go back to your own village.” (FGD, Msondole, 16 June, 2013).

In the matrilineal community, the belief is that women will always do everything to ensure the children are well looked after and as such they value the grandmothers to ensure they are able to provide all the support to their grandchildren. As an example, it was stated that when a man dies, soon after burial and doing all the cultural practices, the grandmother will be able to come home, cook for the children and continue with life. For the man, when the wife dies, the grandfather’s first thoughts will be to pack his belongings and find his way home as he will not cope with the responsibility. As a result of this practice, children face challenges when
the grandmother dies as they are cut off from their father’s side even if they are able to continue providing the needed care.

In this tradition, being orphaned is seen especially when one loses the mother and grandmother as immediately when she dies, the man leaves for his own home and as such the children feel the pain even more. Moreover, the children are left even in the care of distant relatives as long as the father knows that he is supposed to leave. The father is not seen as a strong figure within this community.

Considering the above scenario, the implication of the cultural practices are that in most matrilineal elderly households, the burden is greater as the absence of a grandmother implies that the children are left even more vulnerable. Furthermore, the fact that the grandfather is not counted as much makes the burden of care greater on grandmothers.

6.4.2. Type of care

The other notable challenge for matrilineal grandmothers was that the existing poor economic conditions as well as the extent of the burden created by HIV and AIDS has led to uncles, who are supposed to take care of the children of their deceased sister in the matrilineal marriage system, failing to manage to pay school fees and provide other needs for the children. It was traditionally expected that when the sister dies, the children would be in the uncle’s care. Due to the economic hardships that have befallen most communities; the uncles are no longer having the same influence over their sisters’ children. Due to this, the children are ending up in the care of the grandparents with no support from uncles.

During the elderly interviews as well as focus group discussions, the researcher asked what the role of the uncles is if the grandparents were taking care of the children. It was indicated by both groups, that is
grandparents and the community, in that nowadays each person wanted to take care of their own immediate families and as such most of them opted not to be involved in raising their sisters’ children. The death rate had risen with the number of families affected increasing, and one would not easily manage, as it was not only family that need intervention, but the more sisters one had the more support one would need to provide, as indicated below:

*Even uncles themselves need support and nobody nowadays can support another household unless you are rich. Nowadays it is the “table principle” where each individual minds his own children and wife unlike in the past when people used to eat communally. This has led to the suffering of the orphans. Individuals do not mind the plight of the orphans or elderly household. There is too much selfdom! This “table” concept leads to each family caring for their own biological children. It has changed the traditional (cultural) definition of the family.* (FGD, Msondole, 16 June, 2013).
On the other hand, within the patrilineal society, when the father dies but the mother is alive, the relatives of the deceased husband would have allowed her to return to her land of origin. However, due to changes in the laws and community sensitisation on managing deceased estates through various programmes, the choice of going back home is left solely to the woman. As stated by the grandmother in Figure 12 above:

Even though I lost my husband ten years ago, I have stayed on because I need to safeguard our land and look after my grandchildren. I will die here and they will bury me next to my husband, nobody can take my property or land, I will report them to the police. (Elderly Respondent, Mtunthika, 19 June, 2013).
However, as much as there is this change, the care that is supposed to come from the relatives of the husband is limited. The woman and her children are left to look after themselves in the event of death. Grandparents have taken over, with limited support provided from any other relatives.

Because of this culture, the orphans are supposed to either remain at the mothers’ side (matrilineal) or father’s side (patrilineal) after the death of the parents. At Msondole in Zomba district, the research found out that most orphan were staying at their mothers’ home. They were not nomadic. It was not so with the patrilineal system of marriage. It was observed that when the husband and wife died the children were either kept by the grandparents from either the male or female side. At times the brother or sister of the deceased parent took the child. Most of the interviewed respondents indicated that the children moved from one place to the other for school and good support. This study did not explore this issue further.

6.4.3. Rationale for taking care of the children: circumstance or choice

It was important for the study to fully establish the rationale for the grandparents to take over the responsibility of caring for orphans. The aim was to see how the grandparents felt about this decision. Multiple responses were received and showed that this was not an option but an area where grandparents needed to step in. Below are examples of the most common responses from different respondents:

*I had no choice for I am the most ideal person within the family to do so.* (Elderly respondent, Msondole, 13 June, 2013).
Similarly another elderly person indicated that,

\[\textit{Nobody could take them in when parents died hence I had to take over. Nobody has come back to say they can help, I have other children but they do not want to look after their sister’s children. (Elderly Respondent, Mtunthika, 17 June, 2013).}\]

In another response, it was visible that the elderly was in pain with the responsibility as they explained that:

\[\textit{Nobody wanted to assume responsibility of the children when their mother died. The father of the children left and went to his home and died there as well and when he left the children were already in my care. I started taking this responsibility immediately when my daughter died and with chikamwini (matrilineal practice) the father is already not relevant. (Elderly respondent, Msondole, 13 June, 2013).}\]

Yet another elderly person shared a story which was similar to the above respondent:

\[\textit{I had only one son and he asked me to help in looking after his two children when he died. The wife died first and when he got so sick, he asked me that I should look after the children. I had no choice. (Elderly respondent, Mtunthika, 17 June, 2013).}\]

More stories were shared from the elderly in Rumphi and Zomba and they all shared the same reason, that there was no option, the elderly had to step in and help:
When their parents died, I was the remaining close family that was there and it was my responsibility to take care of them. (Elderly respondent, Mtunthika, 17 June, 2013).

In a similar response another elderly added the blood relationship as the key and they said:

They are my son’s children and they belong to me and I am their closest blood relative. Their uncle took them, he also died, I was the only remaining one to do so. (Elderly respondent, Mtunthika, 19 June, 2013).

Similar sad stories come from all elderly members with another one adding that:

Their mother died, the father went to his village and I remained with them. He also died. (Elderly respondent, Mtunthika, 17 June, 2013).
From the responses given, it could be seen that most of the elderly felt obliged because these children were their own grandchildren. In addition to being compelled to provide care, as was the case for most older people, they felt a strong sense of responsibility: “It is my responsibility, I am the head of the household and oldest brother in our family.”

This evidence suggests that most grandparents have no choice and have taken on this role because it is the only available option for the children. As heads of households they proudly felt it was their responsibility to do so especially if aunts and uncles were not willing to do it. About 75 per cent of all respondents indicated this response, whilst 25 per cent showed that they were forced into doing this as others refused. For example some of those who felt were forced indicated that:
Nobody come forward, they expected me to step in as am their grandmother. (Elderly respondent, Msondole, 14 June, 2015). Additionally another elderly member indicated that:

I was not even informed about the decision, I just saw the children coming to me, so I had to take them in. (Respondent, Mtunthika, 17 June, 2015).

From this analysis, most of the grandparents felt obliged to take on this responsibility and they were the closest to the children. On the other hand, the children when asked why they stayed with the grandparents and whether there were any other options, provided some common responses from different children’s perspectives:

When my parents died, the grandfather come to take us to his place, nobody else come. (Child respondent, Mtunthika, 18 June, 2013). Furthermore another child shared his story and indicated that:

Since my parents died, I was called to stay with the granny, from my father’s side, most of the family members also passed on. (Child respondent, Mtunthika, 18 June, 2013).

More stories were shared as below:

When my parents died, people in the village thought that the siblings will not care for me hence I was brought to my grandparent. (Child Respondent, Msondole, 15 June, 2013).

I did not choose, I was told to go and live with her. She was the only one who could make me feel at home. (Child respondent, Msondole, 15 June, 2013).
I was taken at the age of one so do not know why I was taken with them and not others. (Child respondent, Msondole, 15 June, 2013).

After losing my mother, the father got mentally disturbed as such the grandparents were the only ones to look after us. (Child respondent, Mtunthika, 18 June, 2013).

It can be seen that with the changing role of communities in supporting one another in times of crisis, grandparents have become the most ideal to take care of the children. They consider this to be their responsibility and the children also are close to them. This is the neglected household in most communities as government/donor support mostly targets orphan-headed households and other vulnerable households, forgetting this new role that the elderly are facing.

6.4.4. Benefits of taking care of the children

Unlike only looking at challenges, this study also established some of the benefits of looking after the children. The grandparents were asked to state some of the benefits they see in taking care of these children and it was surprising to notice most of the benefits were associated with psychosocial indicators and not physical benefits. Figure 14 below provides the analysis.
Similarly, when the children were asked to state why they liked staying with grandparents, below are some of the common responses. Children regard the grandparents as their own parents and most of them stated that they would not prefer anybody else to care for them, but wanted to stay with the grandparent. Most of the children indicated that they benefited from staying with their grandparents as they were able to access food, shelter and clothes. Additional soft support given was also highlighted as critical. Table 11 below presents the benefits as seen from the children’s perspective and indicates that they value their grandparents greatly.
Table 11: Benefits of staying with Grandparents

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provides food, shelter and clothes</td>
<td>20</td>
</tr>
<tr>
<td>Tells stories of their parents</td>
<td>15</td>
</tr>
<tr>
<td>The unconditional love they give</td>
<td>14</td>
</tr>
<tr>
<td>Encouraging them to go to school</td>
<td>10</td>
</tr>
<tr>
<td>Cultural grooming</td>
<td>8</td>
</tr>
<tr>
<td>Spiritual grooming</td>
<td>7</td>
</tr>
</tbody>
</table>

Source: Own, 2013

6.5. CHALLENGES FACING THE ELDERLY

The analysis is presented according to the livelihoods framework categorisation that identifies the holistic needs of the household. Livelihood is identified as a valuable means of understanding the factors that influence people’s lives and well-being, particularly those of the poor (Carney, 1998, Davies, 1996). Within this concept, DFID has developed a framework called the Sustainable Livelihoods Framework. This model presents the basic dynamics of livelihoods, something that is inevitably complex given the different factors that influence livelihood choices. However, it is noted that people live within a set of contentions and relationships. The extent to which a livelihood is sustainable is determined by the interaction of several forces and elements. It is further stated that the framework is based on the understanding that there are multiple influences, multiple actors, and multiple strategies, hence holistic in nature in understanding the needs of the poor (Sousson, et al., 2000).

To begin with, to sustain a livelihood for a household, one needs to acknowledge that people draw on a set of capital assets as a basis for their livelihood (DFID, 1999). Carney (1998) identifies five assets that are important for individuals to address their needs: human, financial, physical, natural and social assets. These capitals allow individual households to gain access to systems, that is the resource base, the financial system,
and society, through which the assets are produced. As the elderly are facing all the challenges that result from looking after the orphans, how is their asset base being protected? Are they eroding their productive assets to support the needs of the orphans?

According to DFID, every household requires assets. Assets refer to the resource base of people (DFID, 1999). Assets are represented as a pentagon in the SLF, consisting of the following five categories: natural, physical, financial, human and social capital. Increasingly, it is being recognized that in addition to these five categories, it is important to include analysis of political capital. According to Scoones (2009), the political capital goes beyond social capital, in that an individual’s stock of political capital will determine his/her ability to influence policy and the processes of government. An understanding of political capital is important in determining the ability of households and individuals to claim rights to assistance after a disaster.

The asset pentagon lies at the core of the livelihood framework, within the vulnerability context. This helps to place people’s assets in a visual form. This also helps to understand the important inter-relationships with and between the various assets.

Before analyzing the livelihood framework, the elderly summarized all the challenges they faced in terms of priority as below. Furthermore, the researcher then explored each of the assets and discussed with the elderly as well as community members some of the challenges that were faced by the elderly in relation to their holistic needs. This allowed the researcher to have a clear overview of the challenges to allow for governments and other stakeholders to prioritize their interventions in accordance with the needs of the elderly.
6.5.1. General challenges facing the Elderly households

Figure 15 below shows the key challenges that were identified by the elderly in both districts. The emphasis is on food, clothing, soap and shelter. When the children were interviewed, they indicated mostly lack of food and clothing especially school uniforms as being the most critical challenges that they face. The pattern indicates food and clothing to be the highest priority whilst soap and shelter are regarded as critical by elderly themselves but less so by the children.

Figure 15: General challenges facing the Elderly

These are some of the challenges that are seen in most studies when a systematic review of the elderly needs is conducted. Below is a critical review of elderly challenges taking into account each household capital asset or need.
6.6. DETAILED ANALYSIS OF THE ELDERLY

6.6.1. Human capital

To document the challenges facing the elderly, the interviewer asked key questions around human capital. Human capital as presented in the literature section represents the skills, knowledge, and ability to labour that together enables the households to pursue different strategies and achieve their livelihood objectives, (DFID, 1999). At the household level, the human capital is a factor of the amount and quality of labour available; this varies according to household size, skill sets, leadership potential, and health status, to mention a few.

6.6.1.1 Limited household labour

The loss of adult on- and off-farm labour is one of the most widely discussed effects of the HIV/AIDS epidemic (Topouzis and du Guerny, 1999). The loss of experienced agricultural workers affects both individual households and communities, resulting in labour shortages and declines in productivity both on and off the farm. In agreeing with this notion, the study found that most elderly households suffered a lot due to limited labour. It was shared from both districts that lack of labour was a key challenge facing them. Some of the issues that were presented included:

*Our greatest worry each day is on having the manpower to go and do casual work. We have nobody that can be hired for a long term duration and this affects our income.* (Elderly Respondent, Msondole, 14 June, 2013).

This was also shared in Rumphi district where one elderly person shared the pain of losing her children and the effects on household labour as articulated below:
When both my children died, my greatest worry was finding someone to support us with farming. My son stayed close by and he used to look after our farm as well and now we are facing a lot of challenges to cope with the demand needed to cultivate the whole farm. (Elderly respondent, Mtunthika, 17 June, 2013).

This was further shared during the focus group discussions in both Msondole and Mtunthika. The members indicated that, “the challenge facing the elderly is that their energy has really gone down, they can no longer stay long in the garden and as a result they fail to have enough food.” (FGD member, Msondole, 16 June, 2013).

In Mtunthika, the community shared that most of the programmes in the area do not target the elderly because, “they cannot manage to participate in development work due to their age, they are weak and frail.” (FGD, Mtunthika, 19 June, 2013).

In a detailed discussion, the elderly and community members revealed many challenges the elderly were facing in their household within the context of human capital. These issues are presented below.

6.6.1.2 Decrease in area cultivated

From the study done in these two districts, the findings indicated that due to the loss of productive members in the family, being the parents of the children, the elderly were affected as they themselves had failed to remain productive. In each of the 20 household interviewed, the elderly were staying with only children and had no productive member of the family staying with them to support them in their needs. Productive members are regarded as those above 18 who are able to support the family with either manual labour or skilled labour as needed. It was found in both districts that the elderly household failed to cultivate their land citing lack of labour
as one of the critical challenges. Of all the 20 interviewed households, only 10 per cent indicated that they were able to cultivate all the land because they paid people to work in their garden: 70 per cent managed to cultivate half of the land, whilst 5 per cent cultivated less than half.

Figure 16: Land cultivated by Elderly in Rumphi and Zomba Districts

![Pie chart showing percentages of land cultivated by elderly]

Source: Own, 2013

In the interviews with the children, they explained that the lack of manual labour contributed to the failure to use all the land. The children needed support to help them in the garden as their grandparents were incapacitated. This was acknowledged by the elderly themselves who said that they fail to use all their land because they are not strong enough to do the work they used to. Looking at the ages of the children, the oldest in the study population was 16 and the amount of work required cannot be done by the children only.
Figure 17 below depicts how elderly households are supported through the children in their care, although the support these children can provide is limited.

**Figure 17: Children helping with household chores in Elderly households**

Source: Own, 2013.

6.6.1.3 Decrease in farm production

Malawi is an agriculturally based economy that is fully dependent on agriculture and as such due to the lack of productivity in the elderly household, their crop yield has been reduced. Seventy per cent of the households reported a decrease in their farm production for the year 2013. It was further noted that there has been ongoing decrease over time for most of the households. This was due to the failure to access fertiliser as much of their land is dependent on fertiliser for bumper yields. The elderly respondents alluded to this in different ways:
I failed to cultivate all the farm land due to limited labour and the children had to balance school and farming, it is not easy. (Respondent, Mtunthika, 17 June, 2013).

This response was common amongst the elderly and some indicated the loss of the bread winner in the family resulting in failing to continue with farming as they needed to hire casual workers. Furthermore, as cited by one child:

I wish my grandparents could hire people that can help us in the farm. There are only two of us who are supposed to work, I am 13 and my sister is 11. We always go to the field and my grandfather is sick, my grandmother is very old, she is around 80. We do not have money to allow us to hire people, but I would love my grandfather would do so. We have failed to cultivate all the land this year and last year it was the same and we run out of food. (Child respondent, Mtunthika, 18 June, 2013).

6.6.1.4 Re-allocation of labour

Of the total 20 children interviewed in this study, ranging from 13 years to 17 years, all of them spend on average 3 to 4 hours per day in the garden during farming season. The time ranges from early in the morning before going to school, during school time to afternoon hours. It was interesting to note that when asked who does most work in the field, the analysis was balanced between grandparents and children, where 50 per cent of the interviewed children cited that they do the work, whilst 50 per cent responded that it was the grandparents and they support only when they are back from school. Within the same analysis, those who indicated that it was the children also cited being absent from school to help in their maize gardens.
During the interviews with grandparents and children, as well as in all focus group discussions, it was shared that in the past, community members used to organise themselves and support vulnerable households through the provision of labour to those households in need. This included going to their gardens as a community and helping them to clear the land, plant and even weed their gardens to ensure that they have food. In both districts, the community members indicated that going to another person's field was no longer possible. They could support the households through other means like visiting them but spending time in people’s gardens was no longer happening. It was stated that each household had their own problems and there were fewer people who could offer such type of support. In the analysis above, all the children indicated that there was nobody who had supported or helped them with labour during the cultivation, planning or harvesting period. As shared in the focus group discussions, some members indicated that:

_When one considers the magnitude of the problems that our community continues to face, you ask how long can you support with your limited resources. In this community, everyone is desperate for help and as such it is rare to find someone offering sustained support to those in need, it is just not possible anymore_ (FGD, 16 June, Msondole, 2013).

Members in Rumphi district had a similar view on the magnitude of the problem and limited support that members could offer.

_Before one can offer any help, they need to look after their immediate needs and nowadays it is difficult to reach out as those needing support within families are many. Considering this, it is not easy to reach out anymore._ (FGD, Mtunthika, 19 June, 2013).
Figure 18 below provides an analysis of the household in terms of source of labour for the household in the farming. When asked what the source of labour was, 60 per cent indicated children whilst 40 per cent indicated the grandparents.

Based on the above analysis, it is clear that due to lack of labour, most of the production of the elderly households has declined significantly. Most of their land is not cultivated and as a result, their production does not last long. As stated by (Topouzis and Du Guerny 1999). The loss of experienced agricultural workers affects both individual households and communities, resulting in labour shortages and declines in productivity both on and off the farm. Declining productivity, in turn, leads to declines in household income through both decreases in the household’s own production and through declines in off-farm income and remittances. As a result, the elderly households continue to remain vulnerable to any shock.
6.6.1.5 Limited investment in human capital due to school drop-outs

Human capital is mostly seen from the loss of the productive labour in the household. The other interesting challenge facing the elderly is their inability to invest in constructing human capital that will allow them to move away from their current vulnerable status. This could be achieved through investment in educating the children in their care. During this study, it was important to note that in both districts, Rumphi and Zomba, the concerns raised by the community members as well as the school teachers were around lack of sustainable mechanisms in investing in education for the orphaned children by the grandparents. This is summarized below.

6.6.1.6 School absenteeism

First and foremost, according to the Msondole and Mtunthika primary school teachers, absenteeism remained a key challenge of the children in the care of grandparents. In using a sample from Msondole primary school as shared by the headmaster, it was highlighted that of the total 20 children that could be absent in one day, almost half will be from a grandparent headed household. The headmaster explained that in most cases when they invite the grandparent to come to school to discuss children’s failure due to prolonged absenteeism, the grandparent would not arrive (Headmaster, Msondole School, 13 June, 2013). At one parents meeting in May, 2013, the grandparents were requested to ensure that children are attending classes regularly. The response from some of the grandparents was that, "What are the children going to eat. Who is strong to go and do piece jobs in the house and if they spend all their time in school, how will they ensure that they are able to survive at home.” (Headmaster, Msondole school, 13 June, 2013). The school was asked to understand such challenges.
Similarly in Rumphi district, the teacher indicated that during the months of October to March, absenteeism is seen greatly in the school as the children are sent to do piece jobs to raise money for the household as this is the lean season. More often the type of jobs during this lean season is cultivating in people’s farms and burning charcoal. Due to absenteeism, most of the children fail to perform well in school and they are the ones who drop out, creating a mass of uneducated children living with the grandparents.

6.6.1.7 Early marriages affecting human capital in elderly households

In Zomba district, it was also noted that early marriages are common due to various reasons. Reasons cited by community members during FGDs included the side effects of cultural practices, food insecurity, poverty and lack of interest in school in general. It was shared that most girls drop out of school and are either forced to get married due to their circumstances or they decide to drop out on their own. According to the school teachers, “for every 10 drop-outs at the school, 4 of them will be children who are residing with grandparents” (Teachers, Msondo school, 13 June, 2013).

The situation is made worse when it is girls as most of them will drop out due to pregnancy. In the area where there is already a high level of dropouts, and early marriages are not controlled, the children find this as an escape from poverty, especially when staying with grandparents.

6.6.1.8 School time versus household priorities

During interviews with teachers, the failure to balance school attendance and household chores was of great concern for orphaned children in grandparents’ care. The school system is structured in the way that children have to attend school in the morning and are released around two o’clock especially the senior school children. The school time itself poses
challenges to the children and it was noted that, “Most people demand piece jobs in the morning as such, the children residing with grandparents find school challenging as they need to prioritise means of finding food. With this, they prefer to be absent from school and go for the piece job (termed ganyu) mostly in people’s farms.” (Teachers, Msondole, 13 June, 2013; Teachers, Mtunthika, 17 June, 2013). The school has tried to work with parents and those affected to ensure that this practice is controlled, but the teachers indicated this as one of the challenge facing the elderly headed households.

According to the school teachers, when they compare the behaviour of those residing with parents and those with grandparents, they find the behaviour different and they stated that those living with grandparents are pampered and not well disciplined. (Headmaster, Msondole, 13 June, 2013). This was argued from different perspectives as some felt grandmothers provide stricter discipline to the children.

6.6.1.9 Failure to afford basic school needs

Most children that are in the care of grandparents are not able to buy school uniform. As stated by the Headmaster from Msondole school, during the month of June, 2013 they had to call those who had not bought uniforms for term two. From the sampled children, the teachers then invited their parents to come to the school. Most parents did come for the meetings and promised to buy the school uniform by the end of the month. However, for the remaining six children whose parents did not arrive, it was proved that they were being looked after by either their own siblings or their grandparents. Going further, the grandparents never come to the meetings as they said they had nothing to promise and rather the school should do what they wanted to do as they could not commit to finding money for the children’s uniform. One grandparent came to the school and challenged the head teacher by saying, “Look at me, where am I going to
find money to buy the school uniform, I cannot even steal.” (Headmaster, Msondole, 13 June, 2013). The school had to do some fundraising to help the children who could not have their uniforms purchased by guardians. Others did casual work and were able to buy their own uniforms. As stated by teachers in Rumphi district,

*One sees the difference in the children during winter time, this is a cold area but as you can see from your interviews, all the children who come to you did not have any warm clothes. They just had their uniform and no shoes and in the class you will see some of them who have warm clothes on and shoes, none of the children raised by their grandparents has that from standard 6.*” (Teacher at Mtunthika, 19 June, 2013).

It was further shared by the teachers in Mtunthika that there was a situation where one student failed to get her uniform and she had a second-hand one donated from another school and had to tailor it herself to make it fit. One of the challenges facing the children is that they cannot afford school uniform; piece jobs becomes the only way of getting this. When they do piece jobs, they miss out in class and in the end, they fail to pass, resulting in drop outs. Failure to build on human capital due to the effects of HIV and AIDS will result in a generation that is even poorer than their own parents and will contribute to a continuation of vulnerability within such households.

6.6.1.10 Support at the school

One argues that the school is supposed to be the centre of development as well as providing the needed support to the children. According to the teachers, the school does its part by ensuring that it supports the needy children, most of whom come from grandparent-headed households or orphan-headed households. In Msondole school, the school supported the
vulnerable children by buying school uniform for at least 20 children who are viewed to be vulnerable and were verified through different sources. Within the current year, about eight children had received uniforms and were residing with grandparents and were orphaned due to losing parents to HIV and AIDS (Headmaster, Msondo, 13 June, 2013). The headmaster of Mthunthika school supported this and explained that the school always presents cases of children that are suffering to the local leaders. A case was shared where the chief approached businessmen in Rumphi town to support some of the children that did not have school uniforms. This was received with positive reaction and some children at school were supported. (Interview with headmaster, Mtunthika school, 19 June, 2013).

There is a non-governmental organisation working within the Msondo area called CRECCOM which supports girls especially when they are selected to go to secondary school. The NGO is able to sensitise girls within the primary school to allow them to see the benefits of secondary education and encourage them to continue as the financial support for them will be provided through the organisation. This has encouraged the girls from this area as they feel they will survive secondary school even though primary school could be challenging. Within this study, the girls interviewed indicated that they felt encouraged by this NGO as it offered them hope that they could finish their high school education.

"My hope is to finish secondary education and become a teacher. I will then support my brothers and sisters as well as my granny. CRECCOM supports all girls going to secondary school from this school, so I will work hard to be one of them." (Girl child respondent, Msondo, 13 June, 2013).

Furthermore, the government with support from the World Food Programme has introduced a school feeding programme which is
sponsored by USAID through WFP. Through this programme, the children are able to eat porridge every day and this is done for all schoolgoing children. The community only provides salt and firewood. Unfortunately the children interviewed on the benefit of this system indicated that due to the fact that it is not consistent, they felt it had lost its objective. The children indicated that they always look forward to this porridge as they leave home without eating. But most times the porridge is not prepared as planned, due to lack of firewood that is supposed to be provided by the community. When this happens, the children do not have the porridge as planned. The research was done within the week that the children did not manage to access the porridge hence the researcher was able to identify the frustrations raised by the children. Such interventions have their own effects on the vulnerable children and for this study, those from elderly households as seen in the two stories below:

My grandparents cannot afford to give us meals three times a day so we only eat in the evening. With the presence of the school feeding meals, I was happy because at break, we eat porridge. But today, parents did not provide firewood and salt so the cooks will not prepare any food. This makes it hard for me. I wish I could eat in the morning before coming to school. (Child respondent, Msondole, 15 June, 2013).

Another challenge was shared by the teachers in Mtunthika on the effect that school meals were having to the vulnerable children:

We have experienced some transfers especially for those from the vulnerable homes going to the other school 6 kilometres from here. This is due to the fact that those other schools are part of the school feeding programme and our school is not participating. Due to this, the children are now walking long distances to school which is not
good. We are sure there are several that are from elderly households. (Headmaster, Mtunthika, 18 June, 2013).

This section has indicated the challenges facing the elderly within the human capital scenario. It is evident that the loss of active members of the family have multiple effects on the elderly households. When grandparents take on the role of looking after the children, they are faced with limited labour, failure to send the children to school, and lack of investment in bringing up new human capital to support them. In both Rumphi and Zomba districts, the elderly households demonstrate stress in this regard. This is corroborated by the school teachers who have seen the effects on the children in the care of the elderly.

It could be stated that the elderly in Rumphi and Zomba districts in Malawi lack the ability to rebuild their households as caring for children in their old age is more complicated. The complications are seen in their failure to providing the needed foundations for human capital. However, it needs to be acknowledged that even though the challenges are many, the children still felt supported by their grandparents.

6.6.2. Financial Capital

The loss of human capital leads directly to a loss of financial capital. Incomes obviously decline as HIV infections and AIDS deaths are disproportionately concentrated in the most productive age groups (Topouzis and Du Guerny, 1999). Generally, when a household is not able to undertake all its farm activities, the source of money in the family is limited. As stated in this research, Malawi is an agricultural economy with full reliance on produce from the farm. Income thus declines from both on-farm and off-farm sources, further rendering the household vulnerable to food insecurity. In establishing the context the elderly were living in, the greatest challenge cited was lack of money to support their basic needs,
where 100 per cent of the respondents cited the lack of money as contributing to their vulnerability. An elderly person explained that, “If we had a source of income, we will not even suffer because I would hire people to work in the field and the children could continue with their school.”

This was also alluded in the focus group discussions in both Msondole and Mtunthika villages where the community members indicated that, “Money is the basic thing that could enable the elderly to be self sustaining rather than depending on other community members to help. The government should find means of supporting the elderly with little cash and they will be more independent”. (FGD, Msondole, 16 June, 2013).

This was echoed in interviews by teachers, who noted that, “If elderly households had some financial support, they will be able to support their families appropriately. For now, they have nothing that’s why they tell us to tell them where we think they will get money to pay for the K100 school fund.” (Teachers, Mtunthika, 19 June, 2013).

Apart from losing their children, some older women have lost their spouses, thereby becoming economically handicapped, because in most cases their husbands were the ones with incomes. In this study especially in Zomba district, 80 per cent of the grandparents interviewed were widows. As a result, they were dependent on the children to support them in bringing in income. In most of the households, respondents indicated that they now regularly experienced critical food shortages, as it had become very difficult to adequately provide food for the family. Generally, inadequate food and clothing, financial insecurity and the inability to meet health needs were identified as the most serious consequences of losing the main income earner.
Due to this situation, most of the households within this study were dependent on various coping strategies to ensure they are able to eat and survive each day. Such engagements included relying on piece jobs to raise money, selling some productive assets when things are challenging, seeking remittances and borrowing where possible. Below is the analysis.

6.6.2.1 Main source of income

Most of the interviewed households in both districts depended on piece jobs (ganyu) as their critical source of income. This included farming, clearing land, making ridges, planting, weeding, harvesting and selling farm products to meet their household needs. This work is done both by the grandparents and the children. With regard to the matter of payment, each household had a preference on how they wanted to be paid, whether cash or in kind. Payment in kind was in the form of a basin of maize or flour depending on the needs in the house, whilst in cash the amount varied with K300 being the common amount paid for clearing a piece of land. As indicated by the elderly, “as you see fit in your house, you either go for a basin of maize or flour or money so that you can use it accordingly to respond to your needs.” (Elderly respondent, Msondoile, 13 June, 2013).

In Mtunthika village it was shared that, “payments depends on the season, during the lean season that is October to March, we prefer being paid in kind, that is a basin of maize or maize flour or beans. However during the harvesting time, we are looking for more cash to buy other household needs hence we prefer to be paid in cash.” (Elderly respondent, Mtunthika, 17 June, 2013). The preferred payment method depended on the season from the two districts. Both forms of payments were used to suit a specific need.

From the study, 54 per cent indicated that ganyu was their source of income, with selling of own produce following as the other source of income at 19 per cent, whilst small income generating activities and
remittances were about 16 per cent and 11 per cent respectively. *Ganyu* seems to be the driver of survival within these households; however, it presents some challenges especially for the vulnerable households.

**Figure 19: Main sources of household income**

![Pie chart showing the main sources of household income]

Source: Own, 2013

From the above analysis, 54 per cent depend on *ganyu* as their source of income. The researcher wanted to understand more on the role of *ganyu* in the elderly households. A detailed discussion was done with the elderly; however, there is need to understand the context of the study. In Malawi just as in many other developing countries, poor rural households have a choice to live from their own agricultural production or to supplement their income through additional casual work on other farms. In Malawi, the latter is called “*ganyu*” and is widespread throughout the country.

According to data from the Second Integrated Household Survey for 2004 (Malawí Government, 2004), overall about 52 per cent of all rural households offer *ganyu*. It is known that even within urban households, *ganyu* appears to play a certain role. *Ganyu* is a crucial poverty issue in Malawí because after own farm production, *ganyu* is the most important
source of livelihood for most poor households. For some it is becoming even more important than own farm production.

During this study, it was established that ganyu is the most important coping strategy for elderly households especially in the crucial hungry period between household food stores running out and the next harvest. Mostly, the period between October to March presents with opportunities for cheap labour as there are more people in need of ganyu hence the supply is very high.

It was established that ganyu is done with the aim of obtaining an immediate supply of food to the family. The need to do ganyu to obtain this has conflicted with elderly household own farm production. This study indicates that as much as ganyu addresses an immediate crisis, the elderly households have been locked into a vicious cycle of food insecurity. As found within this study, lack of labour has resulted in the families failing to use all their land; furthermore, labour has been used on ganyu, as such impacting own production. It has to be known that low ganyu wage rates mean agricultural labourers do not earn sufficient to invest in sustainable livelihood development. The impact of ganyu on elderly households is explained further below from the common responses:

_We failed to cultivate our land as we had to raise money through ganyu. We could not manage to catch up hence we left half of the land._ (Elderly respondent, Msindle, 13 June, 2013).

In presenting the same scenario, the elderly in Rumphi had similar stories to share even though they had clear justifications of why they had to do ganyu.
We had to start with ganyu before going to our own land as we needed to buy food in the house. However, the rains come early and we failed to prepare the whole land. (Elderly respondent, Mtunthika, 17 June, 2013).

The researcher obtained some perspectives from children and this was similar to what the elders shared as indicated below

We decided not to dwell on our land as we needed money desperately for school uniform so we resorted into ganyu. I even missed school most of the days in the first term. (Child respondent, Msondole, 14 June, 2013).

The most dependable source of income stated by the grandparents as well as the children was casual labour. In both districts, casual labour was extensive and it was the reliable source due to the fact that each and every year, people need labour for their farms to clear the land, cultivate and harvest. Casual labour is something that the whole community practices.

What is of importance to note in this study is the fact that it is the elderly themselves who were in the forefront of doing the piece jobs. In this study, the average age of the elderly was 75 years and they were still contributing household labour as they do not have anyone in the family to support with this labour apart from the children. Furthermore, the children under their care ranged between 1 and 16 years of age. These children were also doing piece jobs as they are the other source of labour. As a result, for the elderly, their health situation continue to deteriorate whilst for the children, the school dropouts continued as they are unable to balance the two demanding jobs, going to school and doing piece jobs.
There are different types of *ganyu* done according to the season and these ranged from land preparation, ridging, weeding and banking. Below are comments on the process of doing *ganyu* and its effect on elderly households.

*I know I look old, but if I do not do these things, what are we going to eat. Nowadays nobody in the community will come out to support us, they also have their own problems. We all meet at the piece jobs and each one looks after their own household.* (Elderly respondent, Zomba, 70 years, 14 June, 2013).

During the interview, one elderly person gave a detailed rationale in adding to those above, and explained that:

*Every morning, I take my grandchildren to go for opportunities for harvesting as now most of the farms need this labour. I choose to take them during the weekends and sometimes if it is nearby, we can go in the mornings or afternoons during the week days to ensure we finish the work together and get paid. I know they are supposed to be in school, there are times when I take them out completely because of the nature of the piece jobs and the demand by the owner of the land. Some of them ask that we finish the work within a week, and if we have to go few hours each day, then we cannot make it. If such is the case, I ask the children to come with me until the work is done. The children do understand because they need food and clothes. If we are not able to get paid, what will they eat, for sure they will not eat at school* (Elderly Respondent, Msondo, 14 June, 2013).

The problems induced by this kind of situation are first discussed in the Malawi context by Whiteside (2000). According to Whiteside (2000) *ganyu* is highly problematic because it induces households to supply more ganyu at a lower wage, suggesting a perverse supply function. Secondly *ganyu*
leads households to neglect their own fields in order to be able to supply enough ganyu (Whiteside, 2000). These conclusions are reached predominantly on the basis of local observation of household behaviour, either by the author himself, or by other authors he reviewed (Whiteside, 2000).

This research supports such findings as it was noted that most of the elderly complained about the wages they were getting paid, that is a basin of maize flour for cultivating a piece of land or K300 (less than a $1). Furthermore, it has proved that most of these households have failed to manage their own farms resulting in a vicious cycle of poverty for the elderly households.

Earlier research done in Malawi presents the picture of ganyu being seasonal and very concentrated between October and March, governed by both supply and demand. When agricultural tasks need to be done and when the poor are desperate for a source of food, they will resort to ganyu (Whiteside, 2000). The negative impact of the seasonality of ganyu conflicting with own farm work and the period of poorest health is widely recognised. On the other hand, ganyu does present some benefits, if well co-ordinated. When there are seasonality issues, it is known that this is the period when the poor most need the work and as such it is also the critical hungry period and sometimes also when seed and fertiliser need to be bought for their own fields (Whiteside, 2000).

_Ganyu_ clearly meets short term needs; however while meeting these short term needs it can have negative longer term implications. Mkandawire and Ferguson (1990) identified four main problems for households doing ganyu on estates and these would seem to apply to ganyu for elderly households as well. The remuneration is low and not adequate to sustain the household for a reasonable length of time. Secondly, in cases where both husband and wife go out to do _ganyu_, young children are sometime
left on their own, since the household is already food insecure these children often have insufficient food left for them. Furthermore, households may been unable to fully cultivate their own farms and/or to adopt intensified practices. Finally, especially where payment is made in cash it may not benefit all household members with women complaining that the cash is not spent on food.

All the above factors were evident in this study as respondents themselves indicated that, “the money we get from Ganyu only allows you to buy a basin of flour then you have to go again for more.” (Respondent, Msondole, 13 June, 2013). Another respondent indicated that, “sometimes we fail to get the rate we want, people always want to pay less as such the less money does not even last long in the family.” (Respondent, Msondole, 14 June, 2013). Similarly, in Rumphi the respondents highlighted the limited payments they receive mostly in relation to people negotiating for lower wages. This affected their income.

Considering the above limitations, it is worth noting that the dependency on ganyu for the elderly households does portray a negative effect for the survival of their households. This coping strategy has long term negative effects for the elderly households.

### 6.6.2.2 Small income generating activities

One of the sources of income mentioned was small income generating activities. This included selling sugar cane, rice, vegetables and fruits from their gardens, selling chickens, eggs as well as firewood and charcoal. As much as these were seen as good resources, it was noted that they were not done at a large scale and did not raise funds to last more than three months on average. This was done at a small scale and acted as a source of income to complement piece jobs as the core source.
In Rumphi district, one of the small businesses is selling charcoal and firewood. It was established through the interview that this was done mostly by the children as the grandparents could not manage to go up the mountain as this is where they fetch firewood and burn charcoal. As a result of this, most of the children absent themselves from school as once the charcoal and firewood is prepared, they need to take it to Rumphi district centre where it is sold. The district centre is about 8 kilometres from the village hence it takes time away from their school activities as indicated below.

**Supporting the elderly households through child labour**

In other countries this will be seen as child labour, in the elderly headed household, this is the only way of survival. John, not his real name, is 13 years old and currently doing his standard 3 at primary school. In this school, his age mates are in standard 6 or 7 and as such he is behind by 3 grades. He has been staying with his grandparents for the past 4 years since his parents died. He was staying in Mzimba district, and when his mother finally died, he and his sister were sent to stay with the grandparents in Rumphi from his paternal side.

As part of generating income for the family, John and his sister who is 11 embarked on selling firewood and charcoal. They normally would go to the mountain and collect firewood and prepare it for sale in Rumphi. For charcoal, John goes by himself to the mountain with other elderly people from the village who are doing similar work. They go early in the morning and sometimes spend the whole day to burn the charcoal at night as this is the most ideal time.

After the charcoal is ready, he brings it home and they park it ready for selling in Rumphi. Due to the fact that the bags are big, they normally wait for transport at the junction almost 4 kilometres away
as it is cheaper to walk some distance and then take a lift from the junction to Rumphi. It costs them K200 for transport.

In Rumphi a 90 kilogram bag of charcoal costs about K1,000 ($3). However, most people like negotiating and the price goes down to maybe K900 and if you are not lucky to K800. Apart from charcoal, firewood costs about K450 per lot and if people negotiate, it goes down to K350.

This money is used to buy food at home as well as soap and part of school stationery. Till the time of the interview, John did not have his school uniform as he had not yet raised enough surplus to allow him to buy his uniform. Food was still the core demand by the family. When he generates this income, the grandparent takes over the money and manages it on behalf of the children.

“There is what I do this, at school the teachers are not happy with me, I am absent most of the time and they say I will not progress as all my friends are now in standard 6. Some of my classmates laugh at me saying I smell and am a charcoal seller. It feels bad and they say I will get married soon because I am the breadwinner and breadwinners are supposed to stay at home and not being in school”.

(Child respondent, Mtunthika, 18 June, 2013)

6.6.2.3 Borrowing as a means to access funds

There are different strategies that a household uses to respond to compounding shock. One of them used especially during distress is to borrow from friends, relatives, neighbours and informal banks (DFID, 1999). For some households that have faced dire situations, borrowing does temporally help them to solve their immediate need and work towards finding a means of paying back. From all interviewed elderly
households, none of them indicated the ability to borrow as a way of getting financial help.

The study found that all elderly (100 per cent) households ruled out completely that anyone in the community, being relative, friend or neighbour, will ever lend them money. They indicated that nobody will ever believe that they will be able to pay it back. Asking anyone to lend them money was not only a burden to the relative or friend, but also a waste of time for the elderly. As stated by some respondents,

*Who can borrow you money here, they know we cannot pay back and how do you pluck courage to go and borrow, they will laugh at you and think you are crazy. Nobody can borrow you money here.*” (Elderly Respondent, Mtunthika, 17 June, 2013).

Another elderly person added that,

*Nobody would ever borrow me money, they can give me K20 but not borrow me as I cannot pay back.* (Elderly Respondent, Msondole, 14 June, 2013).

This picture was further painted with one elderly person who even shared the health conditions and the ability for one to borrow money from others:

*With the situation that am going through, being sick, my husband and myself are old, nobody will ever lend me money as they know I will not pay back.* (Elderly Respondent, Mtunthika, 14 June, 2013).
6.6.2.4. Financial Capital and Elderly households

In summarising the financial challenges of the elderly household, the analysis of the study indicates that inadequate clothing and food were the most acute challenges they faced. This is attributed to their failure to access money to buy such needs. All respondents indicated that failure to have enough food, inability to clothe the children and even buy soap made them feel inadequate.

*My grandson come back from school at one point and he was very quiet, I asked him what was wrong and he said that his friends were laughing at him saying he did not bath. This made him sad. I was so shocked and there was nothing I could do as I could not even buy soap.*” (85 year old elderly grandparent, Mtunthika, 14 June, 2013).
During the interviews with the children, they stated that lack of soap and body cream exposed them to so much mockery which was why they resorted to doing piece jobs as this was the only way to have money to buy such necessities.

This happens to be the case even among those who had managed to cultivate their land and sell some produce. These households have, however, resorted to a variety of options to solve the cash flow problem. These strategies range from the legitimate to the illegal. Testimonies depict great desperation and the lengths to which people have had to go to meet household needs.

Food is very expensive, and at times I find it difficult to buy even soap for bathing let alone washing. The children go to school with dirty uniform but what can I do? (75 year old grandmother, Msondole, 14 June, 2013).

From the above analysis, the challenges facing the elderly in financial capital are distinct: lack of income in these houses is resulting in other negative coping mechanisms like employing ganyu. The positive and negative effects of ganyu in elderly households needs further exploration as they are presenting yet other challenges as the elderly take up these coping mechanisms. Doing ganyu is a relevant income generating activity; however, if it brings negative consequences like having children drop out of school, the failure of the elderly household to cultivate their own land presents deeper negative effects.

6.6.3. Health Needs

Following the financial challenges facing the elderly, the study established the health status of the elderly with the aim of understanding how they were managing to care for the children left in their care. The elderly were
asked to state how they rated their overall health; that is poor, average, or very good. Seventy-five per cent of the elderly indicated that they were average because they were able to go to their gardens even if it is just for a short while. On the other hand, 25 per cent stated that they were in poor condition and this was witnessed by the researcher as these respondents were not able to work, while one of them had a cancerous leg and the other had a weak heart.

The most common physical illness afflicting the elderly was found to be rheumatism, whilst other diseases included diabetes, anaemia, ulcers, poor eyesight and chronic backache and headaches as indicated below in Figure 21.

**Figure 21: Diseases affecting the elderly**

![Diseases affecting the elderly](source)

*Source: Own, 2013*

During the interviews, most of the elderly people indicated that their failure to do most household work was due to their physical health. Each respondent indicated that during the harvesting season, as this was the
reference point when the study was being done, their ability to work in the field was poor. They were highly dependent on the children to come from school and in most cases, miss school so that they are able to harvest before the produce is stolen. With their physical capacity diminishing, older people have found it difficult to work in the fields. When asked if they get support this is what one 85 year old said:

Who would come to help you when they are also trying to do the same thing for their own household? Nowadays it is everyone looking out for their family first and if you are lucky you will get support, however, nobody will come to help even if they know I am sick. (Elderly respondent, Msondo, 14 June, 2013).

6.6.3.1 Limited access to health services

Considering the age of the elderly, the study established the different ways the elderly were accessing various health services in their area. In both research sites, the government had put in place clinics within walking distance and accessible to most people. However, in these clinics, it was noted that one would only be treated for basic problems and if the clinic was not able to handle the situation, the patients were referred to the main district hospital. For both districts, the main hospitals were about 10-20 kilometres from the village. This resulted in challenges which were explained by the elderly as below.

6.6.3.2 Lack of transport to access needed medical facilities

It was noted that for most of the elderly, they lacked money to allow them to get transport to medical reviews from the main hospitals. Some of them were on chronic medication which they were not accessing as they said that they could not go to the hospital every time their medication finished.
The main hospital in Rumphi requires about K500 one way for transport. As the grandparents explained,

*It takes K1000 for me to go for my medical check-ups and even get medication, we have to hire a bicycle, for sure for this amount of money I can buy relish for the family. When one looks at priorities, you are better off buying food than spending this money at the hospital.* (Elderly Respondent, Mtunthika, 17 June, 2013).

In a similar manner another elderly person also shared her story from Zomba district, indicating that financial constraints contributed to them not accessing medical facilities:

*Going to the main hospital is so challenging as one has to pay for transport and most of the times a two way ticket is expensive hence we opt just to stay home.* (Elderly respondent, Msondo, 13 June, 2013).

Whilst this is an option that some of the elderly are considering, it was concerning to note that most of them had visible illness and they had not gone to hospital due to the fact that they could not access money for transport. It was stated that the district hospitals have ambulances, however, it is very difficult for the ambulances to be accessible in every situation. As a result, as they explained, most of them preferred staying at home with their illness and waiting for the day the Lord will call them. One 85 year old even commented that,

*what is the value of this body being treated for sicknesses when my time is almost closed. I would rather feed the children.* (Elderly respondent, Msondo, 14 June, 2013).
In a similar response another elderly person indicated that,

\textit{I would rather spend money on food for the whole family that pay for transport to go to hospital. As you see with my age, the most important thing is to secure food for the children and I will just take one day at a time.} (Elderly respondent, Msondole, 13 June, 2013).

In Rumphi, in one of the elderly households, the researcher found the grandfather sleeping on the mat outside the house. Visibly he was in pain and sick. When asked what the challenge was and why he was not in hospital, the wife indicated that they have been using the oxcart and there was something wrong with it and since then, they cannot afford to take him to hospital. She went on to explain that:

\textit{My husband has been sick for a long time, he is diabetic, has blood pressure and now his situation has deteriorated. He has been sick for the whole of the first part of the year and we have been taking him to hospital for his check-ups and he has been admitted and given medication, now we are failing to take him back. We cannot afford transport because we always relied on our oxcart, now it is not working anymore.}

\textit{Myself, I am also sick, diabetic and the children are failing to cope in looking after both of us. They have to go to school and then do piece jobs to support our needs. At the moment, people from the Zion church are the ones praying for him and we believe it is the only option we have.} (Elderly respondent, Mtunthika, 17 June, 2013).

\textbf{6.6.3.3 Fear of hospitals}

As much as lack of financial resources to allow the elderly access the hospital was profound, another interesting challenge that was noted was
the fear of hospitals. This fear has been contributed through a number of reasons and the most common was the treatment by young nurses as well as being scared of hospital admissions as most of the times, at their age, it is believed that one comes out dead.

*I have seen so many people who were taken to hospital in their old age and every time, they come back in a coffin. I would rather die in my house that in a strange place.* (Elderly Respondent, Mtunthika, 19 June, 2013).

In Zomba, about 50 per cent of the respondents indicated that they were scared of going to hospitals because the young nurses do not have patience and respect in treating them. When they fail to respond or answer certain questions they are shouted at. On some occasions even the hospital cleaners shout at them and this makes them avoid hospitals, as one elderly person explained:

*When they ask you questions and sometimes due to the fact that you delayed going to hospital, the nurses shout and they make you feel like a child who does not think. It becomes so embarrassing as they will be shouting in front of everyone. This makes you fear going to hospitals.* (Elderly respondent, Msondole, 15 June, 2013).
On the other hand, there is a belief that once you go in mostly for admission when you are at a particular age, you are not able to come back home alive, and you die in hospital. It is believed that most people who are admitted at that old age especially when you were actually carried to hospital, few or none of them ever come back. As such, they prefer being home and getting well through traditional medicine.
An interesting story encountered during this research is of one of the elderly person in Figure 22 above, who in April, 2013 managed to run away from the hospital after being admitted for a while. She states that after they had checked her wound on her foot, they kept telling her that she needed to remain in hospital and the doctors will monitor the healing of the wound as it was known to be cancerous. In the event that this does not work well, they were recommending amputating the leg. The thought of going through surgery triggered the belief that she was not going to make it, and as such, she opted to run away. During the research interview, she showed the researcher the serious wound and she was in so much pain. However, she has no plans of going back to the hospital as she believes that will be the end of her life.

6.6.3.4 Community support on health needs

Malawi is one of the countries in Southern Africa that is known for its strong community support. The community and extended family safety net was the most effective response to economic and social crisis throughout Sub Saharan Africa. Members of the extended family assisted each other socially, economically, psychologically, emotionally and financially (Foster, 2005:67). This type of assistance is needed when a family faces challenges and these include hunger, sickness, and during funerals.

During this research, it was evident that the role of communities and extended families has changed significantly. Of all the households interviewed in this research, 100 per cent indicated that the community does not help them in dealing with the challenges that sickness brings to a household. In the past, people would help and even rotate in supporting a household that is deemed vulnerable but this has changed significantly.

However, churches are the institutions that have emerged as playing a big role during time of sickness. It was stated that when the elderly or a
member of the family is sick, this information is announced at church and the members come to visit the sick person. During this visit the respondents indicated that the members of the church bring a basin of maize flour and K50 to support the sick. As much as the money is not enough, the elderly appreciated the visit as it showed that there was still a sector within the community that cared for them. An elderly person explained that:

    Nowadays it is the church that plays a critical role of supporting you when you are sick. When I am sick, the women league comes to visit me and they bring maize flour and sometimes money. However, the money has gone down, it used to be more but they have reduced because so many people are sick at a time and they can no longer afford. (Elderly respondent, Msindlele, 14 June, 2013).

This was even more evident during the focus group discussion where community members praised the church for continuing to support the elderly when they are sick.

    Only the church is consistent in visiting the sick and for those who do not belong to any church, it is difficult to be supported. Every Sunday it is announced in church about members who are sick and the congregation is assigned places to visit and support them. (FGD members, Mtunthika, 19 June, 2013).

6.6.4. Social Capital

The illness and death of household members can disrupt a household's link to their extended family and the larger community. In the case of grandparents in both Rumphi and Zomba, the death of their productive children and the responsibility that has been given to them has resulted in a number of challenges including their limited connection to the extended
family and community at large. Thus, the social capital of households that are headed by the elderly continues to be eroded due to their inability to connect with and receive support from the communities. It is stated that social capital for households operating through their relationships with extended kin and the community is critical to their ability to recover from the various challenges they face due to the loss of productive members. Below are the challenges noted from the engagements with the various members as contributing to the vulnerability of elderly households who do not benefit from social capital.

6.6.4.1 Strained relationships with extended family members

Extended families have a major impact on mitigating the effects of any shock on households, including that of the HIV and AIDS pandemic. This is done through their ongoing support in absorbing some of the needs of the families. This support could be through the provision of food, labour or emotional support. From this study, in all 20 households it was indicated that they had extended families within the village. Such relatives included direct aunts, uncles, brothers, and cousins to the children. However, in trying to establish why the other relatives did not take the children into their care, the common response was that they were their own children’s offspring and others did not feel it was their responsibility.

As indicated during one focus group discussion, the communities felt that even the relatives of the elderly themselves do not live up to the expected support they are supposed to provide. They indicated that most of the community members have their own responsibilities and if the family itself fails to consolidate and support one another, the community could not do very much.
We are all one community but it is the responsibility of the immediate family members to look after the children. Nowadays problems are everywhere and we cannot cope. (FGD, Mtunthika, 19 June, 2013).

In interviewing the elderly, a critical question asked was, “Is there anyone in your family that would take care of the children in your absence?” This question raised the conclusion that even the social trust expected of the family members has been eroded. Most elderly people believed that:

There is nobody who can look after these children, I have done this for over 10 years and they all watch me suffering (Elderly Respondent, Msondole, 16 June, 2013).

It will only be known when am gone, because for now, nobody is interested (Elderly respondent, Msondole, 13 June, 2013).

They will fend for themselves, nobody has cared now, why should they care when am gone (Elderly respondent, Mtuthika, 19 June, 2013).

From the various responses received, it was seen that elderly members felt limited connection to the community at large. They believed their children will suffer when they are gone because there was nobody who would take them in due to the strain that each family experiences. Considering the number of people in need, the elderly had limited hope for someone to take care of the children in their care as shown in Figure 23 below.
This presents the picture that in most elderly households there is little sense of belonging or of knowing that their families will still support them. The fact that they are the ones taking care of the children seems to be the last resort, and indicates that there is nobody else.

### 6.6.4.2 Community fatigue

A community’s level of social capital can have major impacts on mitigating the effects of HIV/AIDS. Communities with high levels of social capital can provide affected households with a variety of social support activities that permit families to adjust to the illness or loss of members. Conversely, communities with low levels of social trust and solidarity can leave households and families to fend for themselves or even to isolate and ostracize those households afflicted with HIV/AIDS (Topouzis and Du Guerney, 1999).

For every household, the strength of social ties, social trust and relationships within a community, the sense of collective responsibility and
common outlook, all influence a community’s willingness and ability to organize and support affected households (Topouzis and Du Gurney, 1999). In view of the effect of HIV and AIDs, some communities have provided a variety of support and mitigation activities. In other countries and some parts of Malawi, such community care includes supporting orphan households, labour sharing, provision of food, termed as informal social protection engagements. However, with increasing prevalence of HIV/AIDS in a community, the question arises as to how long even those communities with substantial social capital can continue to offer such support to affected individuals, families and households. The scale of the epidemic in some regions is such that even the strongest-knit communities may not have the human resources to continue such programmes.

This is the situation within the two districts under review in Malawi. During the focus group discussions in both regions, the communities were open to accept that the support they are providing to these elderly households still leaves a lot to be desired. There is more they can do to support them, but this has been eroded due to the extent of the problem.

It was stated that communities do see that elderly people are suffering and they need support, and as a community there are some basic things like giving them food when we have some, and offering them piece jobs that could be done. However, due to the fact that they are also in need, they recommended that the government initiates interventions that could support the elderly especially in providing them with food and clothing. The communities are tired, there is fatigue in responding to the demands that each problem brings.

On the other hand, community members also stated that there are some things that they do that are aimed at helping these households. Examples given included supporting them with building toilets as this has a big health impact for the whole village. This initiative was done in Msondole area,
however it was through the influence of an NGO that started the programme. As stated by community members,

In the past, there was an organisation that led volunteer groups within the communities to support the elderly and needy households. This later changed because there was favouritism as some of them were getting paid whilst others just volunteered for nothing and as such most activities stopped as it created tension within the community (FGD Respondent, Msondole, 16 June, 2013).

In the past, community members could visit each other and for elderly households, help them with their various needs, but this system has changed and it was stated that this is largely due to financial challenges because,

When one visits, you have to bring something and with the financial situation and the number of people who are in need, one cannot afford to do this often hence this practice is dying slowly leaving the grandparents solely in the care of their grandchildren (Local leader in Rumphi, 19 June, 2013).

This was still echoed by grandparents who indicated that they also do not visit anyone as they do not have anything to offer.

I cannot just visit people and not offer even maize flour, especially when they are sick or bereaved hence I resorted to staying in my house (Elderly respondent, Msondole, 13 June, 2013).

The only remaining stable support in the community is through the church. Different churches do organise themselves to visit the sick, elderly or those that have lost a loved one. During such visits, the household is supported with a small basin of maize flour and K50.
Another social practice within the community is the “secret friend network”. In such a network, a person chooses a secret friend with whom they share money and gifts on a monthly basis and they visit each other and have small ceremonials functions of sharing the gifts during the visit. This network, like the *stokvel* groups in South Africa, has even boosted the existing village funds and is supported by NGOs who are interested in establishing village banks. Through the secret friendship, members support each other and form a network of close friends. This practice is only undertaken by females within the community. The elderly interviewed in this study do not belong to any such network because they cannot afford the money and they are not able to walk the distances from village to village to visit the friends. The greatest barrier shared during the interviews was lack of finances to contribute on a monthly basis to this network. Below is the detailed discussion on the groups.

### 6.6.4.3 Informal groups

As explained above, it is important to review some of the informal groups that exist in this area and what role they play in supporting the elderly. The research found that there were two distinct groups that have been formed over the past ten years within the communities; these are called Chi Secret and Village Banking groups.

Within the secret club, community members, mostly ladies, choose a member from another group to be their secret friend. The secret friends then share gifts each month valued at a certain amount. Most female members in the communities, especially those within the ages 30-50 years belong to the secret club and value this. This is due to the fact that during the friendship period they exchange gifts, they also prepare special meals which they are given to take home to their individual families and each one wants to ensure that they are preparing the best for their secret friend.
This type of social grouping has replaced the traditional forms of valuing your neighbour or members within the community, to a friendship that has some financial benefits.

When the elderly were interviewed to indicate if they were part of this group, all denied ever participating in it, or being willing to belong to such a group. The common response given was that:

*The secret friend needs gifts, they want me to visit them, to prepare a special meal, do you think with my age and finance I can manage all this. Furthermore, nobody would ever choose me because they will spend most of their time visiting me whilst sick and this will drain them a lot. I would rather stay at my house and lead a normal life than pretend to belong to such groups* (Elderly respondent, Msondole, 16 June, 2013).

*I know that nowadays people belong to chisiki (secret friend), however nobody can even approach me, what will I give them. This is for those that are financially well off as well as for the young generation* (Elderly respondent, Msondole, 16 June, 2013).

*This secret friend requires one to travel to the next village, with my age, can I even travel or can I prepare a meal that would suit my secret friend who has travelled all the way, there is no money. There are some things that one cannot just do because of age and poverty* (Elderly respondent, Mtunthika, June, 2013).

This was further verified during focus group discussions where community members themselves indicated that elderly could not participate in the secret friendship because they had little or nothing to offer.
This secret friend is now very famous but nobody could pair up with elderly, what will they offer you. You want to be paired with someone that will return your gifts with even more nicer gifts and the elderly will have excuses of having no money or fail to even visit their friends. 

This secret friendship is for active members and not the elderly, they are better off in the church engagements. (FGD, Msondole, 16 June, 2013).

Stated differently, in the focus group discussion in Mtunthika, Rumphi, the community members indicated that there was no age limit for one to belong to the secret friend.

However you need to assess yourself and know that you are required to perform certain duties. The elderly cannot cope with this. (FGD, Mtunthika, 19 June, 2013).

It was later established in the focus group discussions that this secret friend network that spans across villages is something that most women belong to and it is a valued social capital investment. The fact that the elderly are not able to participate in such social groupings brings in the element of social exclusion to age and financial muscle. Every month the women meet and interact with each other and it brings a sense of belonging; however it does create divisions for those not participating.

Equally true, the Village Savings and Loans Group exists to empower people financially to take charge of their lives. Members are able to buy shares, for example priced at 100 Malawian kwacha (MK) for one share and borrow money which has to be repaid at 20 per cent interest as an example. After six months, the money is distributed amongst the members in proportion to the number of shares bought. Those who have invested more, receive a larger return. Records are kept in each member’s share book. Members are encouraged to form groups of between 15 and
25 people to contribute an agreed amount of money. Members know each other and as such they also work on deciding the interest they want to pay.

The members are encouraged to start businesses of their choice. This allows them to access a lump sum to engage in activities they would not normally manage and then return the funds later. This has boosted the economy of selected households within the village and it has been valued greatly. However, all the elderly members within the study indicated that they do not belong to this group. They stated that they could not afford to borrow money as they would not guarantee that they will be able to pay back. Furthermore, they feel that this was meant for only those who can afford and even if they indicated an interest, the community will still reject them. It was worthwhile noting that even though there is no gender bias in belonging to such groups, the village savings loans were also mostly patronised by women rather than men.

6.6.4.4 Linkages to formal and informal community social support groups

In both districts, it was found that there were locally based NGOs who have been working in the area providing various services to different vulnerable groups. However, the focus has mostly been on supporting orphan-headed households. Such support has included building the orphans' houses to ensure protection, provision of goats as an asset, as well distribution of blankets. However, there has never been an organisation that has targeted the elderly in both districts. During the interview with the chief in Rumphi, he was able to share the different organisations that were supporting the vulnerable people in his village, but he indicated that none of these organisations has targeted the elderly. Some of the organisations are listed below.
• Total landcare: Non-governmental organisation helping communities with WASH, farming, irrigation farming, cement for toilets. They target organised groups in the village and elderly were not considered as part of this programme.

• FORUM: Non-governmental organisation that focuses on educating the communities on HIV preventative messages, irrigation farming and gender based violence. This also did not target the elderly.

• Feed the Children: Non-governmental organisation that targeted under-five children working together with the Ministry of Health to tackle malnutrition through provision of food to nursery schools. They give nursery schools pots, iron sheets, plates. For primary school, they give the children shoes.

• RUFA: local NGO that organises communities into Income Generating Activity groups and gives them chickens and goats which they share and raise funds from. Targets all IGA interested members. The elderly do not participate.

• Find Your Feet: gives goats, silos to organised groups to support them with IGA engagements. It teaches the lead farmers how to use granaries and each lead farmer works with a team where they use the improved granaries for storage.

• LEAP: gives loans to organised groups within the communities.

From the above listed local NGOs, none of them have focused on elderly households as one of the vulnerable groups that is being left out within Rumphi. The researcher interviewed the programme officer for LEAP on why the elderly are not targeted and it was explained that:

*Most of these programmes are developmental in their design and they require someone to participate by working on a piece of land or organised meetings and functions. Most elderly people cannot afford to work for example rearing goats to pass over to next families or irrigation farming. As such we do not include them in the programmes*
unless some members of their family are able to work. The other challenge is that the members in their family are also below 18 years of age hence the programmes do not encourage children to be part of their engagements. This is the reason that most elderly are not fully benefiting from the programmes. (Programme officer, LEAP, Rumphi, 20 June, 2013).

6.6.4.5 Social exclusion and discrimination

One of the common challenges that elderly members shared across the districts was the treatment they receive both from family members and the community at large. It was stated that in most cases, the elderly were treated more like a problem to the society and not part of the community. The general picture which emerged from this study in both districts is that older people feel neglected and forgotten by community, family and the broader society and face a number of challenges due to this. It was indeed evident as indicated above that they felt excluded from various activities like economic, social and even educational engagements. As stated by one elderly person:

I do have relatives both young and old who could help, however most of them believe I am a problem to their household. I have stopped even visiting them because they treat me visibly as a problem and they always think I go there to beg. I have also seen that people do not visit at all. (Elderly respondent, Mtunthika, 17 June, 2013).

It was stated that most young people in the community do not respect the elderly. Culturally, old people used to receive respect and anyone who disrespected the elderly was fined a goat, chicken or money. Nowadays the youth believe that because of democracy they are not supposed to be treated like in the old days. This was discussed in a focus group:
It is really sad to see that some of the young people in this community who are actually staying with the grandparents do go out to drink and come back home shouting throughout the night and using abusive language. The youth do not respect the elders anymore in this community. (FGD, Msondole, 15 June, 2013).

Apart from the lack of respect, the elderly members also felt secluded from the economic participation of any engagements in the village. In Rumphi district, the failure of the elderly to be part of the agricultural irrigation scheme projects left many of them bitter. They felt they were not fully engaged since they could send some members of the family to participate on their behalf. This left most of them feeling more vulnerable to their circumstances. Below is an illustration of one programme where the elderly are disgruntled to have been sidelined. Each of the 10 households interviewed indicated their concerns of having being left in this irrigation programme.

**Agriculture irrigation scheme project and elderly exclusion**

Water is of great concern in Malawi, particularly for agriculture. Most farmers have to rely on weather conditions and unpredictable rainfall for their crops. Irrigation is poorly developed and the few large-scale government irrigation schemes have been neglected and fallen into disrepair. As a result, agricultural productivity is low and production erratic.

The Government of Malawi has set irrigation as one of its top priorities, and an irrigation programme, jointly supported by IFAD and the World Bank, was launched in 2006 to tackle the issue. The objective of the Irrigation, Rural Livelihoods and Development Project is to raise agricultural productivity and net incomes of poor rural households by providing an integrated package of support covering irrigation, agricultural/irrigation advisory services, marketing and post-
harvest assets and services. It is implemented in 11 districts of Malawi in the northern, central and southern regions.

In such projects, community members are requested to develop canals which in some areas are hand dug and water is diverted manually from canal to canal using sand bags. The communities organise themselves to ensure that they have enough manpower to cover such projects. In one of the projects, “We had 50 men and 60 women when we started. A year later the membership rose to 135”, said Johan Tsoka, secretary of the club in Zomba. “Each member has a plot size of about 0.4 hectares on average and is responsible for irrigating his or her own crop.”

The members are trained in irrigation techniques, crop production and improvement, group management and accounting. They also received inputs such as enhanced hybrid seeds and fertilizer, and were trained to improve planting techniques and use manure.”

Due to the nature of the projects, most elderly members do not participate as it requires manual labour. For those who are able to send some members of their families, they are considered; however, it was noted in Rumphi that all elderly members indicated their inability to participate in such projects. The elderly felt excluded and sidelined on this project as it is central to their food security. This was the example provided in both districts, indicating social exclusion in development projects.

6.6.4.6 Bringing back social inclusion: Community recommendations

During the focus group discussions, community members were asked to share how they would support the elderly, what could they do differently considering that they had unpacked the various challenges they face. Below is the analysis of what could be done, which implies that the
communities know that they do have a role to play to support these households but that this role has completely changed.

*Most of the grannies in the community require shelter. Most of their houses are in bad condition and require renovations. The community can support in bringing building materials, i.e. bricks but there is need for monetary resources to ensure that the houses are built. Government should be part of this process.* (FGD members, Msondole, 15 June, 2013).

Secondly, these households require food and clothing, because:

*The children go to school hungry and are fully dependent on the school feeding programme happening at the school and only have one meal a day.* (FGD Members, Msondole, 15 June, 2013).

This is a serious challenge for most houses in that it requires support from government. The community also stated the need to ensure that either the government abolishes school uniform or provides uniforms for the most needy students. Evidenced from the area, most of the children who are absent or are sent back home from school are from elderly or orphan-headed households.

Furthermore, for an elderly person to say things are adequate in their household, they require three things: shelter, food and clothing. However, as explained in the focus groups,

*Household labour is lacking in most of the elderly households and as such they are so dependent on the children to go to the farm and do everything.* (FGD members, Mtunthika 19 June, 2013).
With age, one can only go to the garden and do two to three rows and you are tired. We need support on household labour. This is why we fail to cultivate all the land. (Elderly respondent, Mtunthika, 17 June, 2013).

It is clear that the traditional understanding of community support that used to exist in the old days has completely changed. The emerging community support has conditions attached and is fully dependent on governments taking more control of the needs of the vulnerable. There is now the community government partnership in responding to each need and this presents itself with clear challenges as governments will not solve every problem. The community safety net is completely diluted.

This study has established that understanding of the traditional social capital that relied on community networks as support for community households needs has weakened. Most African communities were known for their strong community networks that allowed the vulnerable members of the society to survive through provision of support from each other. There is an increase in the level of community fatigue due to the depth of problems that have befallen the communities, stretching their resilience mechanisms to the fullest. New forms of community support have emerged which leaves the vulnerable even worse off as the new forms are more for the survival of the fittest.

6.6.5 Physical Assets

Each and every household requires physical assets in order to be well supported for their daily needs. Household physical capital refers to those tangible assets and producer goods other than their natural capital which includes their land, biodiversity and water resources (Topouzis and Du Guerny, 1999). It includes their housing, household goods, furniture, tools and equipment, as well as livestock. During distress periods, households
resort to selling some of their physical assets in order to survive when the situation worsens (Carney, 1999). However, in most cases, physical assets become the last resort for the household as these are mainly productive assets. Thus, once savings and credit resources have been exhausted and liquid assets have been disposed of, households resort to selling off other assets (Topouzis and Du Guerny, 1999). These assets include housing, livestock, household goods, equipment, tools, bicycles, sewing machines, and radios.

In a situation where there is distress sale of the physical assets, the result is that the household would fail to adapt to future shocks. Additionally physical assets such as hoes, ploughs and livestock are needed for agriculture production; hence in situations where these are sold, the household vulnerability is worsened and it goes deeper into poverty.

6.6.5.1 Elderly households and Physical assets

During the research, the elderly households were asked to list the types of assets that they have and whether they had sold any of the assets to meet their basic needs. Most of the households, almost 90 per cent, indicated that they had never sold any of their assets. However, the research established that most of these households did not even have the basic assets considered for any production. Figure 24 below lists the basic physical assets the households have.
Apart from having household assets, the elderly were asked about their overall livestock possession as this is an indication of wealth for a household.

Table 12: Livestock ownership

<table>
<thead>
<tr>
<th>Livestock</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draught cattle</td>
<td>0</td>
</tr>
<tr>
<td>Cattle</td>
<td>3</td>
</tr>
<tr>
<td>Donkeys</td>
<td>0</td>
</tr>
<tr>
<td>Sheep/goats</td>
<td>6</td>
</tr>
<tr>
<td>Pigs</td>
<td>0</td>
</tr>
<tr>
<td>Nothing</td>
<td>14</td>
</tr>
</tbody>
</table>

As it can be seen from the above analysis, most of the households do not even have any assets that they can hold on to. In most situations, the household lacked productive assets apart from a hoe, axe and sickle. Within the poverty line, these households are regarded as most vulnerable...
as they do not have enough productive assets. When asked if they did sell any, the response was:

We had the assets when our children could support us, now there is nobody to help hence we borrow most of the things we want to use. Owning a radio is a luxury for the elders unless somebody has donated. (Elderly respondent, Mtunthika, 17 June, 2013).

However, one important factor to note is that of all the respondents interviewed, most of the grandparents from Rumphi had a radio, goats and owned land in the area. They were able to cultivate most of the land or rent it out. In Msondole, the people interviewed could not even rent out land, as they failed to find people who would commit to pay them back accordingly. The assets that the two communities possessed were very different, with those in Rumphi relatively better off economically unlike the south. The research failed to understand the difference in the economic well-being. However, according to the the Malawi poverty index, Rumphi district is regarded as a producer of tobacco, hence most of the households grow small scale tobacco which they sell to the intermediate buyers and raise substantive income. This could be the rationale for them to own assets like radios, brick houses and goats.

6.6.5.2 Poor living conditions

Most of the older people interviewed lacked basic facilities like decent housing and toilets. Through the house-to-house interviews, the researcher physically observed the type of housing the elderly people were living in and the dilapidated conditions of some of the houses. As with the above distinction, the elderly interviewed in Rumphi portrayed a different picture where 90 per cent of the households were brick faced and had iron sheets. For one exceptional household visited, the house had even progressed to have electricity connected within the local setting, but
due to the passing of the productive member of the family, the plans were put on hold till the family could raise enough money to recommence the process again. However, for the 90 per cent brick faced houses, all of them were due for renovations. It was established that in some cases, if both the parents died, the grandparents moved into the house of their late children hence they inherited and stayed with the grandchildren. These houses were built within the villages.

On the other hand, 100 per cent of the houses that were interviewed in Zomba district were made of mud and thatch roof. Within such a setting, almost 70 per cent of the houses were one or two roomed and very small. As communicated by one grandparent in Zomba,

> I live in this house with my 4 grandchildren, one boy and three girls ranging from 8,10,12,16. We have only one room and we share amongst ourselves. I sleep at the corner, the boy who is 13 sleeps on the other corner and the three girls sleep in the centre. In total this small room hosts all the five of us and we always survive. I feel I need my own privacy, the kids are all grown now and the boy is starting to feel out of place, we are planning for him to join other boys in their small huts, he will be free there. My fear is that nowadays the boys do not behave at all and they will influence him and he will start being rude and missing school. But look at this house, this is all I have. (Elderly respondent, Msondole, 13 June, 2013).
Having established the above differences, the common similarities for both districts was the fact that the houses were still in bad condition and always leaked during the rainy season. They all needed to be renovated to ensure that the family was safe during both the cold and rainy seasons. Further, in both districts, the houses did not have electricity or water nearby. They all had to fetch water from the common borehole. Only one house had started the process of getting electricity and it was stopped. With this analysis, it is clear that the elderly were fully challenged by their poor living conditions. Adding this to the limited finances, poor social connections and lack of productive labour, their households were increasingly vulnerable to any shocks.
6.6.6 Natural Capital

The loss of human and financial capital can have important effects on a household’s use and preservation of its natural capital. From this study, it was noted that access and ownership of land is fundamental to the rural social and economic structure of each household. Indeed, in the rural areas, the worth of the household is fully known if it is able to include a piece of productive land. Within the community, members are known for either their ability to cultivate all their land, lease it or become vulnerable because they fail to use their land. The categories of worth are distinct in such situations.

The study discovered that most of the elderly households were considered to be poor because of their inability to use all of their land. Even the elderly households themselves indicated that they failed to use their land and this left them vulnerable. The failure to use all their land was due to limited household labour. However, as much as the elderly failed to use their land, some of them were able to lease their piece of land. They were all reluctant to sell land because this is the primary natural capital that they had and as such they all felt they need to hold on to the land. The failure of the households to cultivate all their land has had some consequences as indicated below.

6.6.6.1 Reductions in soil fertility

One of the general findings on the inability of the households to cultivate all their land was that there was a feeling from the elderly that the land they left bare was losing its fertility. “I had to only cultivate half of the land because we could not afford fertiliser. My worry is that the other one left might lose its fertility.” (Elderly respondent, Msondole, 13 June, 2013). Similarly, the community members also indicated the concern for elderly households in terms of labour: “If we they fail to cultivate the whole land,
the challenge is that the remaining piece becomes infertile and it becomes difficult to use it later.” (FGD, Msindlele, 15 June, 2013).

Unlike the natural crop rotation methodology, leaving the piece of land unattended contributed to weakening its fertility and in the long run the production from the pieces of land decreases. This was mostly shared with the north where the elderly indicated that most of their pieces of land needed more fertilizer than before because they had left them bare for so long. “Due to the fact that we left our land bare, now we need to invest in fertiliser to have the same production. However I have no money to do this.” (Elderly respondent, Mthunthika, 17 June, 2013).

Similarly in the south, the elderly felt that there was too much demand for casual labour in other people’s gardens and as such the focus for their own land was not critical. However, the fact that their land was losing fertility was also a concern.

6.6.6.2. Declines in improved farming practices

Another factor that the community shared was the reduction in having the elderly participate in new methods of farming. It was stated during the focus group discussions that the Ministry of Agriculture and the Ministry of Irrigation have been aggressive in teaching the communities different methods of farming. During these demonstrations, most of the elderly people indicated that they did not attend or participate in such activities as they were not physically fit to participate. Due to this, they did not fit into the selection criteria for the programme and they were left out. This was more pronounced in the Mthunthika village where such a programme had been initiated and was currently under way.
6.6.6.3 Land returning to bush

In cases where the elderly failed to lease part of the land that they did not cultivate, it was stated that part of it became overgrown, which has its own consequences as it loses its fertility and it becomes hard to open up the field again. It was noted that most of them did not want to ask others to cultivate just to keep their land active; however they would rather have it dormant for even more than three years. This was shared by one child respondent, who indicated that,

*We failed to cultivate the whole land and now it turned to bushes. It is becoming difficult for us to clear it and we do not have anyone to help. My grandparents cannot manage to clear this land, so it is being left to waste and I do not think we will use it again.* (Child respondent, Mtunthika, 18 June, 2013)
In the focus group discussion in the same area, the community members indicated that they feared the limited usage of the elderly’s land to have negative consequences for the families that will remain in the future (FGD, Mtunthika, 19 June, 2013). On the other hand, one elderly member indicated that she had managed to cultivate enough maize, as depicted in Figure 26 above. She believed she could have done more if she had used all her land. (Elderly member, Mtunthika, 17 June, 2013).

According to the elderly, this was better than fighting the person who had rented their piece of land when it was time for them to start using it again. There were cases within the communities where people fought over land that they had rented and were asking the tenants to return. Most people who rented the land failed to return it appropriately. This has created fear amongst the elderly as they believe they need to protect their land for their grandchildren and the future generations.

6.6.6.4 Renting or leasing out portions of the household’s landholding

There were some elderly people who indicated that they leased the land for others to use for cultivation. In this process, there are two models of payment: either cash or in kind through the produce from the farm. It was discovered that in most cases the agreement is to pay back in terms of the farm produce, for example one bag of maize out of the total production, but this was not fully followed through. This system was felt to lack integrity as it was stated by most grandparents who had leased land that they are always short-paid. When it is harvest time, there were always stories about crops being stolen, resulting in the lessor failing to pay back the agreed quantity. As one elderly person explained:
We failed to get our payment from the person who hired our land from Rumphi Boma, he harvested and never paid us the agreed harvests (Elderly respondent, Mtunthika, 17 June, 2013).

This was unfair. Another respondent in Rumphi stated that, “when it was time for payment, the tenant had so many stories that he did not harvest as intended and that he had lost a lot of his produce to theft and poor weather. He was only going to give us half of what we had agreed (Elderly respondent, Mtunthika, 17 June, 2013).

Considering that most of the household heads were also above 70, they indicated that they always failed to fight back and as a result just accepted whatever they were paid. The chief in the area was engaged, but he failed to intervene on most occasions and it was believed that he was bribed. The research also established that in cases where the agreement was made for payment in kind, the failure to honour such agreement did not have any penalties from the local authority. It was indicated that more often, the people who rent the land were always from outside the village and as such it was difficult to penalise them through the local chief. Examples of such incidents were given in Rumphi where five households suffered from the failure of the lessor to pay back and adhere to the non-verbal contract stated at the outset.

6.7 COPING STRATEGIES FOR ELDERLY PEOPLE HOUSING ORPHANS

Having established the challenges facing the elderly within the different capitals, it was worth noting their coping strategies in dealing with their situations. Some coping mechanisms are worth building on, whilst others need to be discouraged as they contribute to making the households even more vulnerable. Coping strategies are mechanisms that households put into place during distress to overcome certain situations.
Considering that the study was dealing with the elderly and with orphaned children, one of the common coping mechanisms that each of the household had resorted to was casual labour. It was reported in each household that casual labour did allow the household to survive and overcome their basic needs. Other coping mechanisms included selling of charcoal, green maize and alcohol, dropping children out of school and begging. Below is the detailed explanation of these coping mechanisms.

6.7.1. Casual labour

As one of the coping mechanisms, most grandparents have continued to participate in piece jobs to sustain their livelihoods. Casual labour named *ganyu* has assisted most elderly households as both the source of income as well as a coping strategy. The casual labour payments and activities varied from working on the farms to clearing the land, preparing the fields for planting, weeding, harvesting the crops and other household based chores. In all households, both the elderly who were able to engage in casual labour and the children were the core workers in any activity available. As stated by one elderly: “*We go together, the three of us and we are able to finish the work within a short time*”.

However, as much as *ganyu* is seen as a way out, it is stated that when one considers to do casual labourer, the maximum to get is only about K300 and it is likely that one can only maximise this for twice a week. Considering that most people in Malawi depend on maize as a source of food, this money is mostly used to purchase either maize or relish and it is clear that this amount is not enough.

During the interviews with the elderly, they indicated that they would rather make the children absent to maximise on their support to finish any casual labour given as a source of food and income. This was indicated as the
main coping mechanism to make their lives bearable. The elderly indicated that 2013 has seen a big shift in *ganyu* as this is becoming scarce. This can also be correlated with the recent 2013 Malawi Vulnerability Report which states that the situation for most households in Malawi is dire and most are in need of food assistance. This implies that the elderly households are even worse off than before and *ganyu* which is the survival mechanism might not be easily available as in the past because most houses who offered this opening will not do this again as they themselves are also vulnerable.

It is a known fact that *ganyu* is unreliable and increasingly hard to come by when crops fail and it is known that the Malawi economy is currently struggling. In 2013, the crop production was so poor and income levels so low that it is not easy for the elderly household to be able to get *ganyu* as it was normally done. It was stated that *ganyu* has been difficult in both districts because those households who would normally give them the work are not keen any more and as such there is competition amongst people and the wage rate has dropped from K300 to K200. “*The better off households that normally engage others in casual labour are also suffering like others.*” (Elderly respondent, Msondoile, 13 June, 2013).

6.7.2. Reducing consumption

For any Malawian, when asked if they have eaten and are full, it implies that they have eaten *nsima* (hard maize porridge or cassava flour) since anything less than this is not considered a meal. It is stated that each Malawian eats around 130 kilograms of *nsima* a year and anything else is often considered a snack (WFP, 2012). Animal proteins are consumed rarely and chiefly by the wealthier households or in special occasions.

During the interviews with both the children and the elderly, it was stated that most households missed meals to make things work in times of
stress. Skipping meals for the children meant going to school without anything and waiting for supper. In rare cases some of them would find lunch at home and then also supper. The children shared the following: "When the situation gets tough, we skip meals and only eat once a day". (Child respondent, Msondole, 14 June, 2013). Children in Mtunthika shared a similar sentiment: "We go to school hungry and only eat at night, so when things are tough at home, we normally would skip meals." (Child respondent, Mtunthika, 18 June, 2013). This was shared amongst so many children and it was common for about 16 of the 20 respondent that indicated skipping meals as one coping strategy mechanism used.

As stated in this report, the children asked for school feeding programmes to be implemented across the various schools in Malawi to ensure that they were able to eat at least two meals a day. It was reported that most households had two meals a day or even one meal depending on the situation, with the aim of coping within the differing hardships. Elderly households who could not manage to cultivate the land resorted to this mechanism to survive till the next harvest period.

The recently released WFP assessment report indicates that half of Malawian households (49 per cent) faced food shortages in the year preceding the survey. Most of the elderly households would fall into this category. It is stated that within the two districts in this research, the south including Zomba had experienced the gravest deficits: 57 per cent vs. 39 per cent in the rural north where Rumphi is located (WFP VAM, 2012). For southern households it is overwhelmingly climatic shocks that prompted such shortfalls, chiefly prolonged periods with no rain often coupled with destructive flash flooding.
6.7.3. Begging

Another coping mechanism that was shared by both the elderly and the children was begging. It was indicated that when casual labour is not working, and there is limited remittance, the households resort to begging. This begging was categorised into two aspects: begging from relatives and neighbours where the children are sent with a message to their relatives to ask for help: "Kindly assist us with a basin of maize flour or food because we are lacking." (Elderly respondent, Msoundole, 13 June, 2013). The relatives would normally come in and support them. The second type of begging was done by the children without the elderly even knowing. The children also opted to beg from strangers and they would go to the district centres where they would just beg. In Rumphi, the children would beg and used the market day as an easy day to do so. In both districts, the children indicated that they rarely do this as they are also shy to be seen by friends. However, as children explained:

After going to bed hungry for a number of days, one has no choice as you cannot even concentrate in class hence you resort to begging. Sometimes people feel sorry for you and they give you something, whilst other days, you end up coming home without a single tambala (shilling). (Child respondent, Mtunthika, 18 June, 2013).

Most of the children were open on this issue and similar stories emerged from Zomba:

I normally go to Zomba town and we beg from strangers, they sometimes give you and sometimes not. I also go to the different locations and ask from each house, it works sometimes. (Child respondent, Msoundole, 15 June, 2013).
Most children shared their stories of how they manage to beg when the situation is tough at home. This was seen as a second level coping mechanism. The researcher tried to establish if the elderly could also resort to this themselves, but the indication was that they used the children to do it.

6.7.4. Beer brewing

Of the sampled elderly household, only one household indicated that for them to cope and make ends meet, they depended on brewing local beer. The grandmother indicated that because she is the only one who can try to do small business, the only easy way that she had seen to support herself and the family was to engage in beer brewing and sell it to the members of the community. She raises income from this and has managed to send her older grandson to the community secondary school which demands fees, school uniform and books. She indicated that without her beer brewing income, she could not afford to eat or look after the three children in her care. It was through interviewing this household that it was discovered that there were many other similar households within the same scenario.

6.7.5. Praying

One of the strategies that was a common response from the elderly was praying and making sure that one feels connected with God throughout the trying times. It was stated that only God would understand their challenges, so not forgetting the Lord and making him part of everything allowed the households to survive. During the interviews, it was established that most of the households were Christians with a few Muslim families in the south. For both religions, it was indicated that prayers were able to keep the family strong.
When things get tough, one has to just kneel down and put it in God's hand. (Elderly respondent, Msondole, 13 June, 2013).

Another respondent indicated how much her faith keeps them going and every time they have food on their plates:

What keeps me going is knowing that God will still give us food, there is hope in that. (Elderly respondent, Mtunthika, 17 June, 2013).

More stories emerged on how believing in prayers allowed the elderly to continue doing what they were not traditionally capable of doing due to their age:

Praying is the answer, God provides in his own time. I get consoled by this throughout my toughest time and the children know how to pray as well. (Elderly respondent, Msondole, 13 June, 2013).

The elderly indicated that only God allowed them to look after these children in their old age and gave them strength to survive and as such, they always turned to him when the situation was unbearable. This was one of the most used strategies from both districts and for those who belonged to the women’s groups, they could even pray with them during visits for their own needs.

6.7.6. Selling green maize and part of the harvest

Another coping mechanism that was shared during the interviews both by the children and the elderly was selling part of the harvest when the situation was tough or resorting to selling green maize. In Malawi, households are not supposed to sell green maize in large scale and it was even banned by the government. This was because it limits overall maize production during the harvesting period which is needed to ensure the
household survives throughout the year. This practice has been seen continuing over the years as a coping mechanism. Some of the information shared included:

After the lean season, we cannot wait till harvest as our home will be having no food, so when the green maize starts, we sell it in Rumphi Boma as there are some people who want to buy. (Child respondent, Mtunthika, 18 June, 2013).

Adding to the children stories, the elderly also shared the rationale of why they were selling green maize:

I would sell the green maize to have money for relish; when the green maize is ready, we feel relieved as we can sell part of it for relish. (Elderly respondent, Mtunthika, 17 June, 2013).

The respondents in both districts share a common rationale that they had sold green maize to buy relish or maize flour. Furthermore, it was stated that some have even resorted to selling part of the recent harvest to allow them to buy school uniforms and relish. This is a negative coping mechanism as it also brings the family back to its vulnerable state.

6.8. RECOMMENDATIONS FROM THE ELDERLY ON WHAT NEEDS TO BE DONE

6.8.1. Food, clothing and shelter

First and foremost, it was recommended through all the three interviews for elderly, children and community members that participated in the study that for any support that could target this group, there should be efforts to provide them with three basic needs: shelter, clothing and food. Food was
first on the agenda of all the stakeholders with variations on how this could be done.

It was recommended that in most cases, what makes them more vulnerable is when they fail to provide for food for the children in their care. Having support from different parties in ensuring that the households are food secure will be the first ideal intervention for the elderly households. It was interesting to note the differences in the details of support needed from the two regions. In Zomba, the recommendation was for the government to ensure it intensifies food distribution targeting the elderly and orphaned children. Such food parcels should include maize, salt, relish and soap. It was noted that this village has been a recipient of various distributions from different organisations hence are used to getting such support.

Contrary to this group, the respondents in Rumphi wanted more input support, for example fertiliser subsidies and seeds, to continue using their own gardens for production. They wanted support from government to work on its targeting mechanisms and ensure that the elderly households benefit from the various programmes on inputs in the country. They reflected on the irrigation farming that had excluded the elderly group due to lack of labour. Some of them failed to access the input programmes. It was noted that most of them were active in their gardens and had tried small scale tobacco farming.

One grandparent stated that she always makes four bells of tobacco and she is able to sell one for K65,000 per bell and can then buy enough food. Due to the prospects of this farming, most of them said they do not want once-off support like food distributions, but something that they can continue on their own. (Elderly respondent, Mtunthika, 17 June, 2013).
Apart from food, the other recommendation, mostly from the children, was the provision of clothing. This was specific to school uniforms as most of them had to work to raise money and buy the school uniforms. They all felt that failure to have uniforms took their dignity away as they were sometimes sent home when they do not have a uniform. Grandparents agreed on this need and wanted the support of organisations that could distribute school uniforms once every two to three years. This was seen as a serious challenge for most houses and as such it requires support from government. The community also stated the need to ensure that either the government abolishes school uniform or provides uniforms for the most needy students. Most of the children who were absent or sent back home from school were from elderly or orphan-headed households.

Both communities wanted support with shelter. Whilst their needs varied, some wanted just a renovation to their houses whilst others wanted a new house. There was a realisation that the government will not come to build their houses. The emphasis was on ensuring there was provision of materials like iron sheets, windows and cement and they could then look for support in building their own houses. The community could support in bringing building materials such as bricks, sand, water and grass but there is need for monetary resources to ensure that the houses are built.

6.8.2. Community support: Labour

Household labour is lacking in most of the elderly households and as such they are dependent on the children to go to the farm and do everything. As stated by one grandmother: "With age, one can only go to the garden and do two to three rows and you are already tired, we need support on household labour. This is why we fail to cultivate all the land." (Elderly respondent, Msondole, 14 June, 2013). This was also shared during focus group discussions in both districts. Community members stated that:
In this community, we do agree that household labour is lacking in the elderly homes, however we also have to look after our own homes before we can support them. This will be considered. (FGD respondent, Msondo, 16 June, 2013).

One of the recommendations to support our elderly people in this village is to ensure that their farms are cultivated and that they have water at home. It is an area as a community we can do, but it will require good involvement of our chief to bring the community to this level. (FGD, Mtunthika, 19 June, 2013).

The analysis also indicates the failure of most households to utilise most of their land. Malawi is an agro based economy and the first thing that each household needs to do is to ensure that it is food secure. The failure to cultivate the whole land affects the yearly food security for the individual households.

6.8.3. Avoid eating green maize

One of the recommendations that comes from the community members as well as the children was the challenge they face due to limited food to last the whole year. Once the green maize is ready, most of them start eating this at a large scale and some of it is sold in town where people do not have enough land for cultivation. The overall production in the field gets affected due to the early harvesting. As a result, most of the households are always in need of food during the lean season.

6.8.4. Financial support

Most of the elderly members needed some financial support from any stakeholders who would want to support them. It was proposed that having ongoing financial support would allow them to purchase food,
fertilizer and respond to the needs of the children at school. In exploring how this could be packaged and managed and if it would not create any dependency, most of the elderly indicated that they just needed enough to ensure that it supports the needs of the family. The money could be collected from the local post office or through the school as this is the centre of every development in the community. Each household could be monitored to ensure they are managing the resources appropriately. As stated by the elderly:

> With money one can be self sustaining, we need financial support to raise these children. (Elderly respondent, Msondole, 13 June, 2013).

In Rumphi the story was the same as shared by two different elderly members as articulated below:

> Even in this old age, people do not trust us with money, one can help by giving us money and we will only use it for food, what else can we use money for? (Elderly respondent, Mtunthika, 17 June, 2013).

> We need money, with money your dignity is restored and we can easily support the children under our care. (Elderly respondent, Mtunthika, 17 June, 2013).

### 6.8.5. Free secondary education for orphans

Another recommendation from both communities was the drive towards reducing or eliminating fees for secondary education. From the total interviewed households, three households had their children attending secondary school whilst the others are in the late classes in preparing for secondary school. The greatest worry of the grandparents was how they were going to raise money for the children to go through secondary education. As such, it was recommended that the government should consider abolishing the school fees in secondary school or provide
bursaries for the children that are challenged and cannot afford school fees. This was more distinct from elderly who had their children ready for secondary school. “My fear is whether the child will finish his education as now I have to look for fees and in my current status, I do not know where to start.” (Elderly respondent, Mtunthika, 17 June, 2013).

6.8.6. Accessible medical facilities

All elderly members interviewed in this research had one or two chronic illnesses. The greatest challenge they faced was accessing transport to go to the public hospitals in the various areas. As a result, most of them have resorted to staying home without proper medical care. It was recommended that the government should provide mobile clinics that target the needs of the elderly or have transport services for this group to ensure they access medical treatment. Going to the hospitals cost a lot and as a result the priority in the households becomes food rather than medical care.

6.8.7. Social inclusion and commitment by society and government policies

One of the greatest cultural shifts that the elderly have been challenged with is the decline in community connectedness. As stated by some of the members interviewed, “… nowadays it’s a community where each person priorities their own personal needs”. The recommendation is to see the chiefs, community based organisations and churches working in the old spirit of togetherness that allowed neighbours, friends and community members to help one another without waiting for any favour or payment in return.

Throughout the research, the elderly recommended the need for the government to have policies that fit their needs. It was noted that most of
them were not aware of any policies or interventions by the government that were for this target group. As such, it is recommended that the government sensitises the communities on the rights of the elderly and the policies and interventions that are available to support their needs.

6.9 SUMMARY

This chapter has presented the research findings on the challenges facing the elderly. It is acknowledged that there are many different livelihoods challenges in an elderly-headed household, especially those hosting orphans. Using the livelihoods framework, the research explored detailed challenges in each capital asset: financial, human, natural and physical assets. It has established that through this framework, the demand on the elderly to look after children in their old age has an impact on the physical, health, social and natural needs of the elderly. While there are these challenges, it is critical for Malawi to find solutions that are sustainable to address the needs. The elderly have recommended a number of areas that require support including school fees, food, housing, and health.

Furthermore, the chapter has presented the differences in patrilineal and matrilineal family arrangements. Within the matrilineal, the burden for care on the elderly is more demanding as the role of the male side is less acknowledged. With the male is sent home when the wife dies, the burden of care for orphaned children is stronger in this context. The uncles who were supposed to be strong custodians of the children in the absence of their maternal support have become more stretched.

On the other hand, due to government involvement and activism on property grabbing, there is less burden on the patrilineal side. However, the presence of extended family to support the children remains stretched and requires more support. Having established the challenges facing the elderly in Malawi, chapter seven presents the analysis of social protection
in Malawi. One of the interventions that has been profiled to support the needs of vulnerable members of the society is social protection. This study identified social protection as the intervention that could play a critical role in supporting the elderly in Rumphi and Zomba districts. In order to understand this, the research reviewed the social protection policies as well as interventions in Malawi to see how they supported the elderly as one of the most vulnerable groups.
CHAPTER SEVEN

ANALYSIS OF SOCIAL PROTECTION POLICIES IN MALAWI

7.1. INTRODUCTION

Following the discussion of challenges facing the elderly, this chapter presents an analysis of social protection and elderly policies in Malawi. The researcher reviewed the different policies on social protection as well as the elderly and interviewed key ministerial officials responsible for the implementation of the two areas, namely social protection and support for the elderly. The chapter presents the analysis of the policies and perspectives of some of the issues around social protection and the elderly as perceived by ministerial officials.

7.2. SOCIAL PROTECTION IN MALAWI

Malawi is a Least Developed Country (LDC) with a predominantly rural population who rely solely on agriculture. Most Malawians who are residing in rural communities are highly vulnerable to shocks being drought, diseases or financial crisis (Harrigan, 2009). Poverty is deep and widespread and as much as various programmes have been introduced to support development, Malawi still lags behind. Over 90 per cent of Malawians produce their own food using the old traditional methods. The fuel, financial and food crisis made things worse for vulnerable communities as the poor and vulnerable were caught in a worsening poverty trap (Devereux and Baulch, 2006).

While there are challenges, there is growing evidence that some of the programmes that have targeted the poor like smallholder farming have started yielding positive results. This chapter will look at implementation of
social protection policies in Malawi and how the elderly could benefit from organized interventions. Social protection government-led interventions have been in existence for a long time. Such interventions have included the Social Cash Transfer programme, and direct supplementary feeding programme. As stated in the policy, the objective of the programmes is to reduce ultra poverty as well as the economic and social vulnerability of the poor and marginalised (GoM, 2009). In Malawi the social protection interventions presented so far are categorised into three areas, namely direct welfare instruments, productivity enhancing instruments, market interventions and transformative policy changes (Chirwa, 2010). In this analysis, the aim is to see how the policies respond to the needs of the elderly in the country considering the challenges presented in chapter six.

7.3. ANALYSIS OF THE SOCIAL PROTECTION POLICIES

The paper will summarise the actual policy and what it stands for. This will be followed by a critical analysis of the policy and its current achievement over the years of its implementation. Two policies are of particular interest for this study: national social support policy which presents the management of social protection interventions; and the elderly policy to see what type of priority areas are provided for the elderly.

7.3.1. National Social Support Policy (NSSP)

Malawi has recently finalised the development of the National Social Support Policy which is aimed at reviewing and managing the implementation of social protection interventions in the country. This policy was developed in 2011 and reviewed in 2012 with its aim of designing, coordinating, implementing, monitoring and evaluating social support interventions in the country. The policy is implemented with the support of the National Social Support Steering Committee. Being a policy that has
just been finalised, it is key to understand the objectives and differences with the previous policies.

The NSSP is considered to be an improvement from the national safety net programme under the Malawi Poverty Reduction Strategy (Chinsinga, 2009). The NSNP had four key sub-sections which included public works programmes, targeted nutrition programme, targeted input programmes and direct welfare transfer programme. This was the strategy in the mid-2000s, however as stated above, the strategy encountered a number of challenges namely *ad hoc* and unco-ordinated implementation of programmes across the country (Devereux, Phiri and Sabates-Wheeler, 2006). These changed with each new political party as they wanted to showcase their own unique strategies. Considering this challenge, the recent policy fails to mention how the government will be addressing the shortfalls experienced with the other safety net programmes. The challenges are mentioned with no clear actionable points on how they will be dealt with to ensure it does not happen during the implementation of the new programme.

Furthermore, over the years, the strategy encountered financial challenges. With donors changing their strategies, the financial crisis and poor governance, most social protection interventions suffered (Chinsinga, 2009). This was exacerbated by the decline in capacity and monitoring systems of the interventions being implemented in the country (NSSP, 2012).

Based on the above lessons, the Malawi government then decided to improve the national safety net programme by focusing more on social support interventions which are aligned to MDGs (Devereux, 2005). The social support policy has four key objectives: defining strategies to improve the social economic status of the poor and vulnerable, providing reference guidelines to all stakeholders on the design, implementation and
monitoring of social support programmes, providing guidelines for resource mobilisation and allocation, and finally establishing an institutional framework with mandate to initiate, co-ordinate, implement, monitor and evaluation national social support programmes (NSSP, 2012).

Clear in the policy are the four priority areas being considered by the government of Malawi for the management of social support interventions. The priority areas include provision of welfare for the poor (NSSP, 2012). In this area, the government has identified the poor and vulnerable to include elderly, chronically ill, disabled, orphans and vulnerable children. The government promises to ensure that the needs of these households are fully met (NSSP, 2012:3). In this area, the Malawi government will provide predictable transfers such as food, cash or shelter. The policy has stipulated the MoGC and SW, MoLG and RD, MoI as responsible ministries for the implementation of these activities.

7.3.2. Analysis of the policy

In reviewing the priority number one, the policy remains vague on the actual target populations that is, is it going to be 10 per cent of the ultra poor and also some medium poor beneficiaries. Furthermore, is this going to be universal targeting based on a set criteria or it will target only those that are selected in a certain condition. It is not yet clear what type of statistics the government used and how these figures will look like, that is it needed to be stated whether it is universal or pure targeting.

Secondly, the policy is meant to be implemented through various ministries with a co-ordinating body, but it does not commit in terms of the relationship across ministries and its effective monitoring process. One criticism that has been made of the social protection policies in Malawi is the failure to have clarity on a co-ordinating body. This is what results in everyone doing everything or nothing and in the end blaming each other.
This poses the same problem with the previous policy on poor coordination amongst various ministries. It would be recommended that the policy stipulates what each ministry should prioritise and give them their target figures and results expected.

However, the benefit of the policy on its strategic focus on the provision of food, cash or shelter fits the needs of the elderly as a vulnerable group targeted in this policy. The lack of figures to stipulate the total numbers of those in need affects the appreciation of the whole policy to understand the thresholds that the government will work with. As stated by the director for economic planning during the interviews conducted as part of this research, he acknowledged the limitation: “The policy cannot be judged on the surface but rather see what is being proposed in the programme as the policy alone is not enough. It requires attendant programme financing.” (Director of Economic Planning, 20 June, 2013).

Additionally, the second priority area in this policy is the protection of assets. The policy suggests a need to ensure that the vulnerable and poor household assets are protected from depletion and erosion with the aim of building resilience over time. In this regard, the policy aims at safeguarding community and household level assets to help the vulnerable to bounce back and remain active members of the society NSSP (2012:10). In this area, the public works programmes include food for work as an interventions to be implemented. The government has also included social insurance schemes as part of the activities to be implemented under this goal. It is clear from the priorities that at the moment, Malawi is not clear on the role of social pension schemes as they are not analysed in detail. “The government would like to do social pensions like other countries to support the elderly, however we are still lacking a number of institutional preparedness as well as financial resources to take upon such big programmes to a large scale.” (Director of Economic Planning, Lilongwe, 20 June, 2013).
As with most policies, this policy has failed to present the achievements in the past and the number of people that the government has supported and the impact of the public works programmes done in the country. The policy should include new figures of beneficiaries that the government is looking at and the lessons from the previous public works programmes. Malawi has been doing public works programmes for a long time, and has methods or activities that could be adopted for sustainable public works to ensure it protects assets. The investment by the government in ensuring that the types of assets communities build or protect are sustainable is not clearly articulated. As such, activities remain short term and will result in temporary relief to communities and not allow them to be resilient to shocks.

The third priority in the policy is the promotion through productivity enhancement. The policy aims at targeting poor and vulnerable households to increase their income and accumulate assets. Unlike the categories of households above, this is aimed at moderately poor households to move them above the poverty line and allow them to be active members of development (NSSP, 2012:11). Within this third priority, activities like voucher and cash transfers for the poorest to access agriculture inputs, public works programmes for creation of assets, village savings and loans programmes and conditional cash transfers have been prioritised as key activities within this goal.

One area that has seen more economic growth has been the input programmes. This has tremendously supported most people who were beneficiaries but the programmes remain highly politicised. Every political party has used this to their advantage to win votes and this undermines the core objective of the programme. The government will need to review its strategies to ensure this remains a national commitment and not a political party agenda for survival. All three government officials indicated
the politicising of the input programmes to be of great concern. They asked to remain anonymous but it was evident that each political party that was in power took input subsidy as a way of campaigning for offices.

Finally, the last priority area in the policy is the linkages and mainstreaming of those marginalised or socially excluded members of the society. In this area, the policy supports initiatives aimed at transforming the lives of the marginalised and socially excluded through legislative and administrative means and systems (NSSP, 2012:15). Within this area, key activities include child care support, access to justice, access to school and treatment for people with HIV and AIDS.

In reviewing the whole national social support policy for Malawi, the core challenge that still remains is the funding mechanism. The government still stipulates this should be funded through its budget, but the reality is that this will need funding from major donors. The government has previously failed to raise enough resources. The German government and other major donors indicated interest to support the programmes but nothing concrete was finalised in 2013. There is a need to know who the major donors will be to assess the possibility of having this policy fully implemented. Another important factor to note is the upcoming elections. Malawi goes to polls in 2014 hence it is believed that more funds are being diverted to support political campaigns.

Furthermore, considering the various changes and lessons in implementing social protection interventions, the policy fails to leverage on its lessons and evidence base. A number of lessons have been seen throughout the different political parties in rolling out social protection interventions. Evaluations and research reports are available from various sources presenting the impact of social protection activities in Malawi, but there is no acknowledgement of the lessons throughout the policy to justify the new or enhanced approaches.
It needs to be acknowledged that the fact that there is an improved policy that is aimed at guiding the implementation of social protection interventions in itself is an achievement. However, there is need to strengthen the policy to clarify some of the areas it is promoting. Most of the areas being recommended could benefit the elderly, but this is not fully embraced within the policy as a targeted group.

7.3.3. National Social Support Programme Implementation Strategy (NSSPIS)

It is clear that the national social support policy has its limitations as stated in the above section. However, in analysing the policy alongside the National Social Support Programme Implementation Strategy, a number of areas have been improved that explains government intentions clearly. This section shows the clear direction the Government of Malawi is taking for Social Protection. It has to be known that this strategy was only rolled out in 2012 and developed in 2011 during the Bingu Wa Mutharika administration.

As Malawi finalised the development of the National Support Policy, it also worked on the strategy to implement the policy. Due to a number of delays, the strategy was only finalised in 2012 and it missed the alignment to the funding cycles of government budget, hence it is implemented from 2012 to 2016 whilst most programmes will align to 2011-2015 implementation cycles (NSSP, 2012:12). Like the social policy, this strategy was developed on the basis of poor co-ordination of various entities in the country implementing various social programmes ranging from government, NGOs, UN entities and local community based organisations. It was realised that there was need for a body to co-ordinate the interventions of the various sectors.
It is through this strategy that Malawi clearly states that the need for social protection is growing every day. This is through the realisation that Malawi continues to be trapped in a vicious cycle of emergency appeals affecting the most vulnerable communities. The appeals are directed to similar beneficiaries that the government has been dealing with over time.

Furthermore, it is clear from the literature that there are various instruments that developing countries are using for social protection. In the case of Malawi, it was realised that there was a need to reinforce the different approaches in order to support the needs of the vulnerable. Such instruments have included the growing role of social pensions for the elderly, the innovative ways of using cash transfer programmes being through direct cash, paper voucher systems or even electronic vouchers to respond to the needs of the vulnerable. Furthermore the increasing role of public works in moving away from food or cash for work to food or cash for assets with a stronger emphasis on the assets being created for long term development. All this indicates the new tools available to respond to the needs of the vulnerable.

Additionally, in moving towards this strategy, the government has also seen the need to improve its targeting to avoid both inclusion and exclusion errors. Poor targeting has been visible in most programmes where the most deserving beneficiaries are left out due to the strategies used. As a result, most interventions have suffered from inclusion and exclusion errors due to corruption by community leaders. Furthermore, there has been duplication of efforts in some situations.

Based on this, the need to have a co-ordinated implementation strategy that guides the way the programmes are managed was received as a positive contribution in this journey. Within this strategy, there are clear implementation recommendations and institutions that have been recommended to support the implementation. These include: 1) enhancing
the community targeting based on assessments and baselines; 2) enhanced scale of operations as the programmes now are reaching only 30 per cent of the needed population; 3) strengthening integration of social support with clear graduation packages; and 4) rationalising institutional arrangements (NSSPIS, 2012).

Within the implementation strategy, GoM has prioritised four key areas that would support social protection interventions in Malawi. Such activities have been implemented in the past and are being reinforced and consolidated with a clear operational target. These include social cash transfer, school meals, public works, village savings loans and microfinance (NSSPIS, 2012). As presented in this paper, the Malawi social cash transfer programme will aim at taking the extremely poor people out of poverty through a monthly stipend to access minimum goods. In the past, the Global Fund funded most of the interventions and now the government is working on finding other donors.

Following on social cash transfers is the growing role of school feeding schemes. The government continues to prioritise school meals to ensure wider outreach to the most needy areas (NSSPIS, 2012). Nutritional outcomes are one of the key contributions to the MDGs and remain a key priority area. Unlike the previous school feeding programmes, the need to ensure that school feeding is not fully dependent on wood for fuel is clearly articulated in the strategy.

Public works continue to form part of the priorities for social protection in Malawi. In this regard, the government has divided public works into three phases: short, medium and long term. Short term public works include working for 10-12 days for K300 per day with simple projects like clearing feeder roads (NSSPIS, 2012). The medium term public works will go for 3-6 months especially during the lean season. The aim is to support the food insecure households whilst working on the construction of assets that
support their needs. Such assets include rehabilitation of dams, plantations, and conservation farming. Finally the longer term public works will target generating long term employment for the most vulnerable and generating progressive assets (NSSPIS, 2012). This includes irrigation farming, forestry, soil and water conservation, and harnessing of water. The emphasis with long term public works remains on ensuring that assets created are sustainable for future generations.

The fourth priority social protection activity is the village and savings loans. Through the village and savings loans, the aim is to move the participation of only the moderate communities to the extreme poverty-affected households (NSSPIS, 2012). The government through various stakeholders will work with communities and start village savings loans that support the need of the beneficiaries in the various community settings with access to easy loans (NSSPIS, 2012). These village savings loans will be accessible to all community members and there will be systems that allow the most vulnerable members to participate in the loans. This is not a new concept as this initiative has already been rolled out in various communities in the country.

The last priority in the government plan is to strengthen the microfinance institutions with the aim of ensuring that these institutions remain accessible to the communities in the rural areas. Conditions that would support the presence of microfinance institutions will be developed to attract such institutions in the communities (NSSIPS, 2012). Furthermore, the government has also prioritised funding that could be accessed by the financial institutions to ensure that they are able to sustain themselves within the communities.

In summary, Table 13 below shows the government priorities, how much each will cost, the responsible entity for the operations and key activities to be undertaken. It needs to be emphasised that the Ministry of Economic
Planning and Development remains the co-ordinating entity for the implementation of the strategy. A steering committee comprised of directors of the various ministries listed below will be led by the Ministry of Economic Planning. It is stipulated that funding will come through government budget, development partners and private sector contributions (NSSPIS, 2012:32). The national steering committee will approve projects for funding and the disbursement of funds to implementers within their ministry will be done by the co-ordinating Ministry.
Table 13: Social Protection Interventions 2012-2016

<table>
<thead>
<tr>
<th>Component</th>
<th>Amount</th>
<th>Target Group</th>
<th>Activities</th>
<th>Responsible Ministry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Cash Transfer</td>
<td>MK15,479,495,113.00</td>
<td>Extreme poor incapacitated households</td>
<td>Monthly cash transfers for various vulnerable beneficiaries&lt;br&gt;Establishment of systems for management of Cash transfers&lt;br&gt;Funding mechanisms</td>
<td>MoGCSW, MoLGRD, UN, PPPS, NGOs, CBOs, Volunteers and beneficiaries</td>
</tr>
<tr>
<td>School Meals</td>
<td>MK21,515,859,551.00</td>
<td>All students in primary schools in districts with highest extreme poverty, highest stunting</td>
<td>School meals to various schools&lt;br&gt;Funding mechanisms</td>
<td>MoE, UN agencies, NGO, MoLGRD, MoFS, Department of forestry, volunteers and beneficiaries</td>
</tr>
<tr>
<td>Public works</td>
<td>MK14,208,755,958.00</td>
<td>Moderate and extreme poor adults with labour capacity</td>
<td>Increase land under irrigation&lt;br&gt;Rural road construction&lt;br&gt;Rehabilitation and maintenance&lt;br&gt;Water harvesting&lt;br&gt;Forestation and water conservation</td>
<td>MoLG&amp;RD, Das, MoF, MoSFS, MoT, Department of forestry, NGO and CBOs, Beneficiaries</td>
</tr>
<tr>
<td>Village Savings Loans</td>
<td>MK4,89951,120.00</td>
<td>All moderate and extreme poor adults</td>
<td>HH income, HH asset accumulation&lt;br&gt;Enhanced agriculture production</td>
<td>MoGCSW, MoLGRD, MoF, RBM, MFIs, NGOs, and CBOs and Village agents</td>
</tr>
<tr>
<td>Microfinance</td>
<td>MK23,955,244,864.00</td>
<td>All moderate and extreme poor adults with viable enterprises</td>
<td>Creation of working capital&lt;br&gt;Strengthening of operations and management capacity of MFI&lt;br&gt;Capacity building for entrepreneurs&lt;br&gt;Presence of Micro finance institutions&lt;br&gt;Coordination with government and ministries</td>
<td>MoF, RBM, MAMN, Banks, Mobile phones, NGO, CBO, Tertiary training institutions, beneficiaries</td>
</tr>
</tbody>
</table>

Source: Adopted from NSSPIS, 2012:28
7.3.4 Analysis of the Social Support Implementation Strategy

Unlike the Social Support Policy, this document is well detailed and has mapped out the various priorities of the government over the next four years in managing social support programmes. The document has clearly presented the milestones to be met both for short term through medium to long term and its funding sources. All ministries to be involved in these programmes have been given responsibilities. Furthermore, the document has built on some evidence of failures by other programmes. Such an approach allows others to see clear lessons of previous interventions and promote more sustainable approaches.

Within the analysis of the social support programmes, the strategy articulates certain deliverables for year 1 till it finishes its final implementation in 2016. However, analysis shows that there is no funding at the moment to commence the programmes. In an interview with key personnel within the Ministry of Economic Planning, it was stated that the implementation plan is well detailed and captures the desire of Malawi to move towards well co-ordinated social protection interventions. However, funding remains a key challenge. The donors that committed to support the social protection interventions have not yet committed their funding. Below is a response to the challenges from a ministerial official:

Resources are not enough. Also resource re-allocations are necessary for greater poverty impact, in my view. A good number of donors are there. WB, DFID, Irish Aid, EU, KfW, including the UN Family only to mention a few but as of now they have not yet committed their funds due to some governance issues. But we cannot manage to use these funds for social protection only. (Director of Economic Planning, Lilongwe, 20 June, 2013).
Secondly, it is seen from the priority interventions that Malawi continues to build on the old interventions as it has traditionally done. Such interventions include public works, social cash transfers and school feeding. As much as the strategy indicates that there will be evidence based programmes, it fails to indicate how each intervention will change or be different from what has been traditionally happening. For example, the public works activities promote innovative ways of doing various programmes, but the document does not present the various thresholds of interventions and how the programmes will focus on strengthening creation of assets through the development of guidelines; what assets communities should create; and the involvement of technical people like forestry or agriculture in monitoring the actual asset.

It is important to note that each ministry has been given clear responsibilities of what it needs to do and achieve by the end of 2016. As much as this defines the key roles for the ministry, it still brings into question the need for clarifying their accountability role. Who will be held accountable for the failure to achieve the set target within the strategy? This is not clearly articulated and there was a need for each ministry to develop from this strategy its own plans but with agreed targets with the co-ordinating ministry. The overall monitoring and evaluation plan as proposed still lumps all key ministries together as responsible hence the need for each one to have clear targets to ensure their implementation targets are met.

It has been discussed throughout in the policy as well implementation strategy that funding was one of the major challenges that contributed to the failure of successful implementation of the social protection policy. In a similar light, the current strategic plan requires million of dollars to be raised in order to fully implement the programme. Within this strategy, the document does not spell out the fundraising mechanisms of potential
donors that have been predisposed to support this strategy. Broadly the discussion has centred around donors, government and other private sector entities to support this. This indicates that there is no co-ordination in terms of funding for the implementation of the strategy. In the past implementation, the following major donors played a strong role for the successful implementation of social protection interventions: Department of Overseas Development (DFID), European Commission (EC), African Development Bank (ADB), Norway, Germany, USAID and China. These donors were able to contribute 90 per cent of the needed funds for the social protection intervention prior to 2012. Other donors included UN entities, Global Fund and JICA.

*Social protection requires attendance to programme financing. We need more resources. These efforts are new, although one could also argue that Government is spending a lot on FISP (Over MK54 Billion as for 2012) as one example.* (Director of Economic Planning, Lilongwe, 20 June, 2013).

It is a well debated fact that the input programmes for public works has received a number of criticism from various sectors. Some believe it has contributed to greater agriculture yields and boosted maize production in the country. On the other hand there are those who believe that this is a highly politicised social protection programme that requires a good analysis and review before continuing. Regardless of the opinions, it is clear that before embarking on another input programme, the government needs to evaluate the programmes and proposed ways that it will manage the programmes without them being politicised. The objectives of social protection interventions are always compromised when governments use them for political campaigns or as reward for the people or districts that voted for them. Malawi is going to the polls in 2014 as such, it has seen a number of programmes being used by political party involvements rather
than government initiatives. The role of government in social protection interventions is being compromised.

Finally, considering the nature of the vulnerable groups in Malawi, the government strategy continues to prioritise able-bodied members of households as opposed to the elderly groups. The policy has social cash transfers as one of the interventions that will be implemented in the country. These cash transfers will have elderly members as beneficiaries but not as a targeted group that needs this service. The failure to map out interventions targeting this group specifically still leaves it vulnerable and exposed to shocks. In the interview with the Ministry official it was stated that:

_Elderly groups will remain part of the priorities of the country within its different interventions. At the moment the government does not have plans to specifically target this group, however it will work with other entities to ensure that they are part of the programmes being implemented in the communities. The government do have plans for social pensions and have its officials visiting other countries currently implementing social pensions however this will not be done in due course._ (Director, Economic planning, 20 June, 2013).

This indicates that the elderly members are not yet central to the government interventions for social protection.

**7.4. NATIONAL POLICY FOR OLDER PERSONS IN MALAWI**

Apart from the social protection policies, it was also critical for this research to review the policy specifically for the elderly. This is to ensure that the review takes into account some of the needs that are already taken care of and linkages to the social protection policies reviewed.
Following examples of other countries, Malawi has also developed a policy for older persons with the aim of providing them with a coherent and comprehensive overall framework for facilitating and promoting the social, economic and culture integration of older person into the development processes in Malawi (NPOP, 2011:1). Malawi subscribes to international agreements namely the UN plan of action on ageing of 1982, UN principles for older persons of 1991, and UN proclamation of ageing of 1992. This shows that it has embraced the needs of the elderly and regards them as key members of the society.

Unlike other policies, this policy stipulates that it was developed after intensive surveys and reviews which indicated that older persons in Malawi faced a number of challenges. Some of the notable challenges included accessing services and support like health care, food, transport, and land. Furthermore, the research revealed that older persons are abused, socially excluded and marginalised and prevented from doing development work (NPOP, 2011:1). Through this, Malawi developed its policy to strengthen and scale up programmes that would support the needs of the elderly.

Within this policy, the following objectives have been articulated to support the needs of the older person and they include safeguarding the rights and independence of older persons, increased access to health, water, sanitation services, food and nutrition, implementing poverty alleviation programmes, shelter, education and training, inter-generational transfers of culture knowledge, promoting the role of communities, improving retirement schemes and social support systems and providing for special needs of the older persons. The policy will seek to ensure the older persons’ interests are protected.

The policy has articulated the institutional bodies that will be responsible for the implementation, under the Ministry of Disability and Elderly. Various
roles have been given to key institutions to ensure successful implementation of the policy, including the National Elderly Committee (NECO). This group is responsible for the implementation of the policy in liaison with other key stakeholders. This team will meet on a quarterly basis or as the need arises to ensure that all issues from DECO are supported and incorporated in the implementation plans of the elderly. This team will ensure that it advises the Ministry of the needs of the elderly and ensures equal distribution of benefits. The committee will also be responsible for implementation of elderly programmes at national level (NPOP, 2011:23).

Following NECO, there will also be the District Elderly Committee under the districts. This team is responsible for advising local assemblies on elderly issues, participating in different forums to represent district level needs, feed into NECO on the needs of the districts and act as an entry point for any other service provider (NPOP, 2011:23). Apart from the DECO, the communities where the elderly are housed will have their own Community Elderly Committees which will meet the traditional authorities to consolidate reports and give feedback on the community needs and action points. The CECO will participate in identifying elderly beneficiaries, finding ways to support the needs of the community through traditional leaders and other community leaders and act as entry point for services (NPOP, 2011:24).

The Ministry is expected to work with the national steering committee on older persons (NSCOP) and this body includes principle secretaries from key line ministries, heads of NGOs. This body is chaired by secretary for persons with disability. Apart from the NSCOP, another body, called National Technical Committee on older persons (NTCOP) comprising of technical directors from key ministries, older persons, NGOs and civil organisations is responsible for technical direction for programme implementation. This is chaired by the director of elderly programmes
(NPOP, 2011). Furthermore, the policy states that in working with the decentralised system, a District Technical Committee on older persons will be formed with the District Executive Committee members, NGOs and CBO and this will co-ordinate interventions at the district level.

7.4.1. Analysis of the Elderly Policy

Going through this policy, one is struck by the various bodies that are expected to play a role in ensuring that the policy is implemented. Structures have been set up from the national, district, and community levels with clear roles and responsibilities. This needs to be commended as the structures would allow for effective implementation of the policy. The needs of the elderly are on the political agenda as stated below by one Minister of Gender and quoted in Zachimalawi online newspaper:

Now our women, especially the aged, are taken as citizens of this country. In the past, we had common cases of the aged being tortured or their houses burnt on suspicions that they were practicing witchcraft. How can a normal child wake up today and accuse the very woman who tended them to grow of practicing witchcraft? Why, if that were the case, couldn't she just eat them when they were young? That is nonsense. (Zachimalawi online paper, retrieved 18 July, 2013).

A number of limitations have been seen throughout the policy. As much as there are proposed structures that are to be put in place to promote and support the needs of the elderly, there has been limited progress on the ground. During the interviews with the local communities, they cited that their community does not have any representative that is taking the needs of the elderly forward. However, they noted that during the chiefs meeting and when they are called in the district offices, they reflect about the needs of all vulnerable people and sometimes the elderly become part of
the discussion. Since the policy was rolled out, the proposed structures have not been put in place specifically at the district level and community level. This is evidenced from the review done for the two districts as the community and district members indicated that they were not aware of such structures.

Furthermore, the funding for the implementation of the policy continues to remain vague. Considering that this is an area that has not been central in the government strategies, there is need to show concerted efforts towards the funding commitment for the proposed interventions.

The emphasis in the policy is more on structure as opposed to how the proposed interventions will be realised. There are details of what the needs of the elderly are ranging from health to community engagement, but limited emphasis on how the co-ordination of the various needs by the different role-players will be managed. This leaves room for duplication and poor implementation of interventions.

The policy was approved the past two years, but there is no consolidation of the progress report that indicates the actual interventions that have been made. It appears that most of the proposed initiatives are still under discussion with no monitoring on how far the interventions have been implemented. In the two research sites, there was limited or no knowledge of government plans to support the elderly. Both at the community and district level, the committees are not yet functional.

7.5 SUMMARY

Social protection is not a new intervention, but through the review it shows that there are enhancements that have happened during the different years that indicate the growth of social protection. Malawi has implemented public works, input subsidies and supplementary feeding as
examples of social protection interventions. It has policies in place that have fostered the implementation of social protection. However, there is need for evidence-based research that influences the type and nature of interventions to be implemented across the country. Malawi suffers from politicising government-led social protection interventions and therefore needs to promote separately from any political agenda.

It is evident within the social protection policy that the role of the elderly in the changing landscape has not been articulated as an area that needs special focus. The interventions being proposed by government continue to include various vulnerable groups without identifying the new roles that the elderly are playing. Their issues are not clearly articulated and there is no plan to have social protection - especially social pensions for the elderly - as part of the strategy.

Reviewing the national policy for older persons, it is evident that nothing has taken shape till now. The policy document still remains as a document as the structures being discussed to support the implementation of the policy have not yet been put in place at the district and community levels. These structures are in place only at ministerial level without showing any clear results. It is evident that the needs of the elderly are not fully supported within the government agenda.

Considering this, the challenges that have been discussed in chapter six could form part of the evidence used to articulate some of the areas of concern to the elderly, and thereby influence how government could support this target group through its social protection interventions.

In chapter eight, the research presents an example of how Lesotho has addressed the needs of the elderly through social pensions. Lesotho is an illustration of how other governments have used their policies of social protection and older persons to support the challenges facing the elderly.
The chapter examines this with the aim of obtaining insights to assist in understanding how the challenges documented in Zomba and Rumphi could be addressed.

It must be emphasised that in this research, the main focus is to understand the challenges facing the elderly in Rumphi and Zomba. However, going beyond these challenges is the realisation that social protection has a role to support them and therefore the researcher uses Lesotho as an example that demonstrates how the issues being raised in Zomba and Rumphi could be addressed through government policies and appropriate interventions.
CHAPTER EIGHT

SOCIAL PENSIONS FOR THE ELDERLY IN LESOTHO

8.1. INTRODUCTION

As part of the methodology to understand the challenges of the elderly in Malawi and how they can be supported, this research included a case study of Lesotho which has a programme targeting the elderly. The case study is intended to respond to some of the challenges shared in chapter five and presents some learning areas that are used to support the elderly in other countries. Lesotho was chosen as it is regarded as one of the countries that has been exemplary in implementing social pensions and is also closer to the researcher who resides in South Africa.

In keeping with one of the Millennium Development Goals (MDGs) of poverty alleviation by the year 2015 and the Madrid International Plan of Action on Ageing which calls for the involvement of the elderly in development strategies, in November 2004, the government of the Kingdom of Lesotho introduced a non-contributory old age pension scheme targeting the elderly over the age of 70. This chapter documents a case study on the implementation of the old age pension in Lesotho as a stepping stone for the Malawi government to address some of the challenges affecting the elderly.

It is envisaged that through the analysis of the financial institution, political will and strategies implemented, Malawi could respond to the needs of the elderly in the Zomba and Rumphi districts. The case study will examine the success factors in the Lesotho pension scheme, the benefits of the social pension scheme documented through literature review and
responses from the interviews conducted with the communities using the livelihoods framework.

The study leverages on research done by the Lesotho Pensions Impact Group (LPIG) at the National University of Lesotho, which interviewed over 215 pensioner households and another 215 non-pensioner households to review the impact of social pensions. Other studies have been done including the impact study by Hagen (2008), *The Old Age Pension in Lesotho: an examination of the institutional impact*; Masters research by Winnberg (2012), *The role of social protection, case study of social pension in Lesotho* and Nyanguru (2007), *The Economic and Social Impact of Old Age Pension on the Protection of Basotho Elderly and their household*. All these studies reflect on the process, benefit and challenges in the implementation of the old age pension in Lesotho.

In presenting this case study, the research starts by analyzing the country context aimed at presenting the rationale for social pension. Furthermore, the research examines the implementation process, and structures followed till distribution. After this analysis, critical review of the benefits and challenges is shared through other impact studies conducted. The research then presents the findings documented during the interviews the researcher conducted to understand the role of social pensions in selected sampled interviews with the elderly looking after orphans in Lesotho. In conclusion, lessons and recommendations for the Malawi government are presented based on review of the challenges facing the elderly as well as the institutional structures supporting their needs.
Figure 27: Map of Lesotho

Source: Own, 2013

8.2. THE CONTEXT

The Kingdom of Lesotho is a small landlocked country situated in Southern Africa with a total surface area of 30,355 km$^2$ (Valvede and Pacheco, 2012). Lesotho has one single neighbour, which is South Africa which surrounds the country on all sides. The country has a population of 2,067,000 million (UNFPA, 2009). The west, where the capital and urban areas are located, has plains and foothills, while the east is mountainous, with poor infrastructure and communications, and scarce and often eroded arable land (Winnberg, 2012). In the east, access to markets is difficult, opportunities for income generation are few, and there is greater marginalization in terms of human, physical and political capital than in western Lesotho (Hagen, 2008).
Although Lesotho produces less than half of its staple food needs, food availability is generally promising because of effective market links with South Africa and a strong private sector (Hagen, 2008). For many years, food imports were largely paid for through remittances from mineworkers based in South Africa, but remittances are now a fraction of what they were a decade ago (Nyanguru, 2007). The government also faces an economic crisis due to a significant reduction in Southern African Customs Union revenue, exports and domestic incomes. In Lesotho, food insecurity is caused mainly due to poverty and failure to have liquid assets (Nyanguru, 2007).

8.2.1. Economic context

Unlike other countries in Southern Africa where their economy grew at a fast rate like Mozambique and Botswana, the Lesotho economy struggled as it did not have any special features that would allow it to grow (Valvede and Pacheco, 2012). Its GDP per capita fell from US$3,200 at purchasing power parity in 2005 to US$1,400 in 2009. With a Gini coefficient of 0.63, Lesotho’s national income is the second most unequally distributed in the world (Valvede and Pacheco, 2012). Poverty and household food insecurity remain high, with nearly a quarter of all households classified as food insecure (Nyanguru, 2007). In 2009, following an exceptionally poor harvest, 23 per cent of people were estimated to need external assistance to meet their basic livelihood needs (LVAC, 2009). In 2012, the Lesotho Vulnerability assessment report indicated that a total of 725,000 people in Lesotho faced food survival deficits and from this figure, a total of 210,000 were from the most vulnerable people classified as very poor. The category of most vulnerable includes children, women and the elderly and most of them have already run out of food stocks and require food assistance (LVAC, 2012).
In 2012, the government of Lesotho declared an emergency food crisis. Levels of food insecurity were seen to be at a peak in September 2012, while the lean season normally runs from January to March. Through the government declaration of emergency, it formally requested international assistance and agencies like USAID, UNWFP and UNICEF supported in responding to the needs of the vulnerable through food and cash assistance (LVAC, 2012). The current 2013 outlook projects that Lesotho will be in need of food aid as there is indication of food insecurity in some areas.

Low levels of cereal production have a serious impact in a country where 77 per cent of the rural population and just below 50 per cent of the urban population rely on subsistence farming as their main source of livelihood (LVAC, 2012). Poor rural households count on the casual labour market for up to 40 per cent of their annual income and the increase of fallow land and poor production directly impact on livelihood opportunities (Pelham, 2007).

According to Winnberg (2012), poor production also lengthens the duration of the lean season. Food shortage is usually more pronounced during the lean season (January to April) with observed differences between distinct geographical zones. However, the 2013 crop failure was certain to extend the lean season with the onset as early as September and concluding in April. The cumulative impact of two consecutive poor harvests increased chronic livelihood vulnerability (LVAC, 2013). Food prices also increased during this period, with indications that prices in the SADC region were above those of last year and higher than the current five-year average, a factor which will negatively impact the poor household’s ability to access enough food to meet basic requirements.

Despite the fact that agriculture employs nearly half of the rural population, most Basotho farmers (roughly 90 per cent) rely on rain-fed agriculture
(Hagen, 2008). Agriculture is constrained by a combination of depleted soils, poor use of the available water resources, limited irrigation systems, no or limited use of fertilizers and hybrid seeds, a weak agricultural extension system, poor marketing infrastructure, and little security in land tenure (Nyanguru, 2007, Hagen, 2008).

The worsening agricultural performance in Lesotho is attributed to many factors, including acute reduction of arable land, lack of access to yield enhancing technologies/inputs, severe soil erosion by water and overgrazing and associated declining fertility due to inappropriate traditional farming practices as well as increasingly persistent climatic shocks that are linked to climate change (Velverde and Pacheco, 2012).

Lesotho has relied mostly on the United States for export and on South Africa for employment and remittances (Valvede and Pacheco, 2012; Nyanguru, 2007). A total of 59 per cent of Lesotho exports go to the US and the main source of income for most rural people will be remittances received from their relatives in South Africa (Nyanguru, 2008). It is believed that remittances account for the core survival of many families.

Lesotho is ranked 156 out of 182 countries in the United Nations Development Programme’s (UNDP’s) 2009 human development index. In 2008 life expectancy at birth was 45 years (UNDP, 2009). Maternal mortality increased to 972 per 100,000 live births in 2009 (Lesotho Nutrition Survey, 2007). Rates of stunting are extremely high, averaging about 42 per cent nationally, and child anaemia is 49 per cent. Underweight prevalence is 14 per cent nationally, and 13 per cent of all children are born with low weight (UNDP, 2009).
8.2.2. Social context

High HIV prevalence has had a profound impact on Lesotho’s development potential. Although the prevalence rate has reduced to about 24 per cent from a peak of 31 per cent in 2001, it is still the third highest in the world (Ministry of Health Report, 2010). Estimates of crude death rates in 2007 in the country’s ten districts showed that they exceeded emergency thresholds in two and were at unacceptably high levels in an additional five; dependency ratios are increasing and stretching household resources.

It is imperative to put the HIV/AIDS pandemic that affects Lesotho into perspective. Lesotho has the third highest adult HIV prevalence in the world, at 24 per cent: Twenty six per cent of women and 19 per cent of men aged 15 to 49 are infected (UNAIDS, 2010). UNAIDS (2010) states that each day an estimated 62 people are newly infected and roughly 50 people die due to HIV/AIDS. At the end of 2007, an estimated 270,000 people in the country were living with HIV, of whom 11,800 were classified as children.

The Situation Analysis of Orphans and other Vulnerable Children (2011) estimated that Lesotho has a total child population of 1,072,974 of whom 363,526 are orphans. Approximately 10 to 13 per cent (125,000) of all children are considered to be vulnerable children.

8.2.3. Political context

Lesotho is a parliamentary constitutional monarchy. King Letsie Moshoeshoe III is the head of state but has no executive authority. Executive power is vested in the Prime Minister Pakalitha Mosisili (Hagen, 2008). The Lesotho Parliament has two Chambers, the Senate and the
National Assembly. The Senate consists of 22 hereditary Principal Chiefs and 11 Senators nominated by the King on the advice of the Council of State. Since 1960, when Lesotho adopted the electoral system that was used by the British, the National Assembly has been elected by means of a majority wins, First-Past-the-Post system (Hagen, 2008; RHVR, 2007).

The May 2012 general elections in Lesotho resulted in a new Government being elected and one that is expected to present new strategies to deal with the current food crisis while at the same time putting into place policies and strategies to address the phenomenon of chronic food insecurity. Lesotho operates using a decentralised system of government which is also strongly linked to its previous relationship with South Africa. The Maluti currency is linked to the South African Rand (OPM, 2010).

8.3. LESOTHO SOCIAL PROTECTION PROGRAMMES

Lesotho has over 20 different social protection interventions that are implemented targeting various people and serving different needs. According to the Regional Hunger and Vulnerability Report of 2007, the social protection interventions in Lesotho include both public and non-public initiatives. Of the 20 different social protection activities implemented, only five programmes could be considered critical and geographically effective in terms of their coverage and impact. Such interventions included the non-contributory old age social pension scheme, the civil servant person schemes, the cash transfer programme, the school meals programme and some in-kind programmes for vulnerable group support (OPM, 2010).

8.3.1. The school meals programme

According to Lambers (2009), Lesotho introduced a school meals programme several decades ago with the aim of supporting the needy
children in all schools in Lesotho. This programme was aimed at providing supplementary meals at school and targeting only the school-going children. It is recorded that in 2004 the United Nations World Food Programme (WFP) provided assistance to over 176,695 children; however in 2007 the total number of school feeding recipients declined to 113,695 (Lambers, 2009). The numbers continued to decline after 2008 as the government took control of implementing school feeding programmes. In 2010, the WFP supported 50,000 children whilst the government was able to cover all the children in all public schools. In 2013, the WFP was able to feed 125,000 children in 623 schools (WFP, 2013) whilst the government has continued to support all schools with its school feeding programme.

The school meals programme is the third largest intervention in Lesotho accounting for 25 per cent of the social protection budget in 2012 (OPM, 2010).

8.3.2. Cash transfer programmer

Another wide-scale intervention being implemented in Lesotho is the cash transfer programme. Through this programme, the government targets elderly, chronically ill, orphans and vulnerable children and disabled people as recipients (OPM, 2010). UNICEF and WFP have been supporting the government to implement cash-based programmes in responding to the different needs of the population. Through the vulnerability assessment, potential vulnerable groups are identified and those belonging to the risk group are then provided with the agreed cash transfer amount (WFP, 2013). In 2013, through the World Food Programme, 51,610 beneficiaries were served through its cash transfer programme (WFP, 2013).
8.3.3. Vulnerable group feeding

In Lesotho, social assistance has been used to support the growing needs of people on HIV and AIDS and TB treatment (OPM, 2010). As the government scaled up support towards the update of anti-retroviral treatment, it also noted the need for adherence to medication for those in poor households. To this effect, both medication and food was distributed to the vulnerable groups to allow them to adhere to the required dosage of the medication (OPM, 2010). Good nutrition is therefore a crucial aspect of HIV treatment. As the availability of ART increases, reaching ART clients with appropriate nutrition and food intervention is very important to help improve their health and nutritional status, mitigate the side-effects of drugs and improve adherence to a drugs regimen (WFP, 2013).

Additionally, food-insecure patients on Directly Observed TB Treatment Short Courses (DOTS) were assisted to meet their food and nutritional needs while they are undergoing treatment. In Lesotho, 60-65 per cent of all TB patients have been found to be HIV positive. Someone who is HIV positive is about 20 times more likely to develop TB than someone who is not, and an individual with AIDS is 100 times more at risk of contracting TB. TB patients are more likely to drop out of treatment before it is completed than patients on other medication regimens and when this happens, he or she can develop and spread drug-resistant strains of TB that are much harder and more expensive to treat, hence giving them food for adherence to medication is very critical.

According to the WFP 2013 report, a total of 87,447 beneficiaries were reached through the WFP-unded targeted feeding programme. The numbers only indicate the ongoing response being done with WFP which is at a broader scale.
8.3.4. The old age pension

One of the greatest problems facing many developing countries, in particular the Sub Saharan African countries (Lesotho inclusive), is the chronic state of poverty (Vervede and Pacheco, 2012). The effect of poverty is strongly in evidence amongst the most vulnerable groups such as the elderly. Notwithstanding such poverty incidence, social protection programmes for the older people and their households are scarce (Barrientos, 2005). Regardless of continuous efforts by various groups to push for interventions for the elderly, even when there is a strong indication of the effect of old age pensions in reducing old age poverty, most governments have not yet embraced social pensions (Lund, 1999)

In recognising the growing needs of its elderly population, the government of the Kingdom of Lesotho was one of the few pioneering states in Sub-Saharan Africa to implement large-scale social pension programmes. Lesotho then joined countries like Botswana, Mauritius, Namibia, Senegal, and South Africa in implementing social pensions (Legido-Quigley, 2003; Valvede and Pacheco, 2012). This research will discuss in detail the old age pension as implemented in Lesotho.

In November 2004 the government of Lesotho introduced the old age pension which targeted people aged 70 years or above. This was introduced with the aim of eradicating poverty and providing social security for the elderly (Nyanguru, 2007; Hagen, 2008). Each of these elderly people was to receive M150 a month. In 2009 this amount changed to M300 per month ($39.7) and by 2013 it increased to M450 ($45) (OPM, 2010).

Lesotho is one of the LDC countries in Africa that decided to operate a non-contributory pension along with Nepal (Pelham, 2007). As of 2013, other countries have joined in the implementation of social pensions for
the elderly. The old age pension debates were initiated by various political parties at different times but was implemented by the Lesotho Congress for Democracy (LCD) (Winniberg, 2013). After ongoing discussion in terms of registration of beneficiaries, Lesotho saw its first pension payment in November 2004 (Hagen, 2008). This pension scheme is administered by the Department of Pensions, under the direction of the commissioner of pensions within the Ministry of Finance and Development Planning.

In analysing the implementation of the pension scheme in Lesotho, this research leverages on the impact study report that was conducted by the Lesotho Pensions Impact Group (LPIG) at the National University of Lesotho and published by Croome and Mapetla (2007).

8.4. PROCESS OF PENSION MANAGEMENT

8.4.1. Legal and institutional framework

The Lesotho old age pension was introduced and mandated through the Old Age Pension Act of 2005 and later regulated in 2007, (OPM, 2010). In the budget speech announcement, it was stated that, "it has been the government’s wish to provide our old people with pension" and it goes on to say the registration process will be set up within the year and the required amount of money set aside for the project (Government of Lesotho, 2004). Since its introduction in 2005, the government has introduced the legal framework that supports its implementation.

According to Nyanguru (2007), the decision was made to agree on M150 ($15) in 2004 as the amount to be paid for each pensioner. Social protection issues have underlined the commitments made by the government of Lesotho and these are documented in three other important documents: Lesotho National Vision 2020, Poverty reduction policy statement; and adoption of the requirements to meet the United Nations
Millennium Development Goals by 2015. By 2013, Lesotho continued to implement the social pension with success and it has achieved great results.

8.4.2. Funding source

Lesotho has been viewed as one of the most successful examples of implementing social pensions without external funding. The Lesotho old age pension is funded through government tax and has been implemented for nine years by 2013. At the start of the programme, the social pension faced opposition from the various donor communities who thought the country priorities were misaligned. The other pressing matters like supporting the needs of the children were seen as more important. However, the government decided to implement the social pension scheme funded through the consolidated fund, namely through tax (LIPG, 2006).

Lesotho has managed to effectively fund its social pension to date due to its ability to collect taxes and by taking full advantage of its economic growth and external trade (Valverde and Pacheco, 2012). It is reported that Lesotho has a major fiscal burden that exceeds the average revenue collection capacity of Sub Saharan countries. The results of the 2005-2008 tax revenue indicates that Lesotho was 10 points stronger than in the previous years, and public spending was more prudent, increasing only by 4.4 per cent of GDP between 2004 and 2008 (OPM, 2010). The old age pension in Lesotho stood at M288million (about $28.8M) in the 2009/10 fiscal year or 3.6 per cent of total expenditure and it is reported that during 2005-2010, old age pension accounted for 3.3 per cent of total expenditure, equal to 1.6 per cent of GDP (OPM, 2010 Ministry of Finance Budget Speech, 2011).
In comparison with neighbouring countries, Lesotho has seen limited reduction in the requirements for financing its social protection interventions including old age pensions. Both Botswana and Mozambique have managed to reduce debt payments and promote high growth rates, and in Lesotho, these two indicators performed moderately (Valverde and Pacheco, 2012). Social pensions for the elderly in Lesotho seems to be set for the future.

8.4.3. Targeting and distribution process

Having decided to implement the old age pension the government of Lesotho then had to ensure that its implementation should be effective in order to achieve the desired objectives. In this regard, there are key decisions that are deemed to have contributed to effective implementation of the social pension. Below is the process followed for registration and distribution.

8.4.3.1 Registration

To begin with, considering the fact that the members needed to be identified as above 70 years of age and not receiving any other form of income, the government used data from voter registration cards to authenticate names, residence and date of birth (Nyanguru, 2007; Velverde and Pacheco, 2012). Following the use of the registration card, the local chiefs were then made to verify the old age pensioners. The information was filed in data sets uploaded on a monthly basis to capture the latest entries and exits. Already, there have been issues of ghost pensioners due to non-reporting of deaths by next of kin of the deceased (OPM, 2010). Following this, the government accepted the information profiled in each area as it did not use any means test other than the information presented and validated by the local authorities.
8.4.3.2 Distribution process

Having compiled and verified the list, the government then sub-contracted the post office as it was readily available in all areas for the distribution of the pension. The post offices in Lesotho are based in shops in rural villages and this allowed all benefiting members to effectively collect their pensions without any challenges. The unit received M12 ($1.2) per complete transaction as commission (Hagen, 2008).

When Lesotho introduced the old age pension Act, the post office was the ideal institution to implement this scheme. This is due to the fact that the post office was present in all locations in terms of geographical presence as well as the role it played in the structure of the community. In 2008, it was reported that there were about 47 post offices in the ten districts of the country (Hagen, 2008). As such, in every district, there was one major post office at the centre, or district capital and then at least two or more smaller ones in the rural areas (Hagen, 2008). Where it was not feasible to have a post office, other arrangements were made, that is using schools, houses and buildings that would act as pay points. Lesotho also used helicopters especially where the terrain was bad and it could not reach its members (Winniberg, 2012).

During the distribution time, old age members collect the pension by themselves. According to the study conducted in Mountain Zone district, 40 per cent of the elderly collected their resources, whilst 60 per cent had requested someone else (proxy) to collect for them (Nyanguru, 2007). During the introduction of the social pension, the Post Office acted as a bank as well as a distributor of mail and parcels. As in most countries, due to the growth in technology, the traditional role of the post office had declined. In Malawi, some of the offices have been closed as they are no longer serving the intended purpose as e-mails, fax and web-based
conferences have taken over. Considering the changes with technology, the government of Lesotho resorted to reviving the post office to be the agent of distributing social pensions, hence serving a wider imperative of job creation while also drawing on infrastructure that covers a wide geographical area (Hagen, 2008; Croome and Mapetla, 2007).

However, due to poor performance of the post office, that is, failure to refund the Ministry of Finance and Development Planning (MFDP) any money not distributed, the contract was withdrawn and also resulted in transfer of responsibility of payment to the Department of Private Sector Development and Financial Affairs (PSDFA) (Valverde and Pacheco, 2012). In June 2008, a new distribution system was introduced where the post office requested funding through submission of an actual beneficiaries list and this was to be reconciled after disbursements (Hagen, 2008). To date this is the system under utilisation.

The unit develops a list of names and amounts to be paid for each district and then presents a reconciliation report after distribution every month. One of the main reasons the old age pension is housed within the Ministry of Finance is that the pension is paid out of tax income as well as Value Added Tax. In regard to the economic circumstances of Lesotho, there is an absence of any legal arrangements within the OAP Act about what happens with the pension in times of severe inflation (Hagen, 2008).

In order to manage this process, it requires about 120 employees, vehicles, and helicopters for areas not accessible for the distribution to happen. A total of over 300 pay points have been established to pay for all beneficiaries. This whole process takes about 10 working days every month resulting in spending a total of M17 million on administering the pension (OPM, 2010)
According to the impact evaluation studies conducted in Lesotho, the targeting, registration and delivery systems appear to be operating well. Pension is normally paid at the agreed time and beneficiaries are able to walk to the pay points without any challenges (Croome, Nyanguru and Molisana, 2007). It is reported that by 2010, the old age pension had reached 80,000 people which is 4.3 per cent of the overall total population of Lesotho (OPM, 2010).

### 8.4.4. The role of the district and local structures

Lesotho uses a decentralised system where the local and district structures play a crucial role in the implementation of the government-led interventions. In the case of social pensions, the local structures have a crucial role in identifying and validating the elderly (Hagen, 2008). Through the chiefs, the elderly are identified and validated. Once validated, they complete a form (Winniberg, 2012). According to Hagen (2008) during the period that the pension scheme was introduced, the chiefs were not fully consulted and informed about their role. They were involved as any other citizen in Lesotho.

However during the actual implementation, the role of the chiefs assumed greater importance. They are now recognised as the centre of the operation as they supervise and record births and deaths in a community (Hagen, 2008). It is the chiefs who can confirm the pensioner to be legitimate and also verify their age (Hagen, 2008). Within the process, the chiefs are not asked to validate, however when there are no valid documents, they may validate the applicant. Furthermore, the chiefs have a critical role to play during distributions especially when the pensioners do not have valid documents to be used to validate their entitlement (Winniberg, 2012). In such cases, the chiefs are asked to write a letter to validate the elderly recipient otherwise they will not receive their...
entitlement. This is a critical role of the local leaders in social protection interventions as they hold the historical memory for their community.

Once the form is completed, it is then the role of the district council to process the final registration and ensure that the application has all supporting documents. Where there is no supporting document, that is voter registration card or passport, the district makes a decision on finding other ways of validating the applicant. As stated in the Old Age Pension Act of 2005:

> It shall be the duty of the Commissioner, or any person duly authorized by him, to arrange for the investigation of any application in terms of subsection (a) and to keep record of all the relevant correspondence. Where the applicant does not know the date of birth, it shall be assumed that the 1st January of the given year or the year on which a certain historical event took place at the time of birth is the date of birth, or the first day of the given month is the date of birth (Lesotho Old Age Pension Act, 2005).

### 8.4.5. Political commitments

As it has been documented in various studies, one of the greatest success factors of any social protection intervention has been the political commitment demonstrated by the ruling government. Equally true, in Lesotho, the introduction of both the school meals programme as well as the old age pension were fully supported with clear political commitment to ensure that there were the legal amendments to support the programmes as well as critical reforms to allow for and relocate financial resources to social benefits (Nyanguru, 2007). As stated above, despite the disapproval from the donor community, Lesotho implemented a social pension scheme and it was the drive of the Prime Minister Pakalitha Mosisili, who demonstrated full commitment in ensuring the success of the programme.
8.5. THE ROLE OF SOCIAL PENSIONS: 2005-2012

Over the years, different authors have documented the benefits and successes with social pensions that have been seen internationally. This study aims at validating some of these successes using the case study of Lesotho. The researcher reviewed the different documentation and history supporting the rise of social pensions in Lesotho. A critical analysis was done on the different studies that have shown the impact of social pensions in Lesotho and beyond. Through the reviews of the impact studies, the researcher was able to highlight some of the benefits that have been documented from the launch of the pension scheme till 2013. The three most distinctive benefits include extending social security coverage for more vulnerable people, poverty reduction within elderly households, and demographic shifts allowing the elderly to be more self-sustaining as a critical age group that has a high degree of responsibility due to the vulnerability that has affected the communities through HIV and AIDs, migration effects and poverty.

8.5.1. Extending social security coverage to all the elderly

The International Labour Organisation (ILO) report of 2010 indicates that about 40 per cent of the global old age population is covered and supported by contributory old age pension (ILO, 2010). This is through the formalised employment system that has existed, but in developing countries there is no stable formal employment as such, and most of the elderly groups are not covered by the old age pension. In Sub Saharan Africa, only 5 per cent of the working age population is effectively covered by contributory programmes (ILO, 2010). Considering the growing numbers of the elderly, it is clear that most of them continue to be vulnerable and as such having the old age pension allows for a bigger
geographical coverage that reaches this target group (Velverde and Pacheco, 2012).

The impact study conducted by Nyanguru (2007) in Lesotho indicated that the most profound benefit that the elderly indicated about social pension was the fact that it allowed the elderly to afford some basic needs. The fact that it was universal made it more objective and defeated the perception of it being just a political party agenda. Furthermore, it is reported that since this pension scheme has continued over several years, the people have trusted their government to be pro-poor and keep its promises to support the vulnerable (Croome and Mapetla, 2007). Lesotho has been applauded for making old age social pension to target everyone, above 70 years of age across the country regardless of gender, ethnic tribe or religion (Winniberg, 2012). This is one of the limiting factors on social pension interventions in Southern Africa where activities become politicised depending on the ruling party agenda.

The pension scheme in Lesotho ensures that older people have a right to basic income. According to the research done by Croome and Mapetla (2007), the head count ratio before and after the implementation of the pension scheme revealed that about 90 per cent of the sampled respondents’ households were living below the poverty line compared to 70 per cent after the implementation of the scheme. As such, this old age pension has indeed targeted the vulnerable group within the community.

8.5.2. Poverty reduction: food security and improved well-being of elderly

One of the most overlooked target groups for any support by government or other aid agencies has been the elderly. However, inasmuch as this group has been sidelined in most developmental agendas, evidence shows that older people experience higher levels of poverty than the
general population (Barrientos, 2002). The interventions to support them are always minimal. Indeed, sub-populations among the elderly are often the poorest: “elderly-headed households with children tend to be among the poorest households, and poverty among older women is higher than among older men” (Kidd and Whitehouse, 2009:41). Considering this analysis, social pensions play a crucial role in supporting the needs of the elderly. In a study done by Skinner (2006), it was shared that in Bolivia through the old age pension, the clear benefit that the elderly reported as result of the old age pension was that even the elderly were able to buy their own food and not be dependent on the social system.

In Lesotho, a study done by Nyanguru (2007) as well as the impact study published by Croome and Mapetla (2007) and the University of Lesotho study indicated that most elderly people who had received a pension indicated improvements in their household food consumption. As stated by Nyanguru (2007), “they all come to depend on their pension as a necessary instrument for their food security and it made them well satisfied with their lives and wellbeing” (Nyanguru, 2007:47). Other benefits highlighted in the study included pensioner satisfaction with life to which 56 per cent respondents showed they were a bit more satisfied as they were now receiving pension, whilst 30 per cent indicated they were more satisfied with life. Furthermore, the elderly also indicated more available food in the house as a result of the old age pension (Croome and Mapetla, 2007).

Furthermore, it was presented in the various impact studies including the ones by Croome and Mapetla (2007), Nyanguru, (2007) that one of the contributions of the old age pension has been its contribution towards allowing the elderly to pay for fees for the children under their care. 60 per cent of the respondents have dependent school age children in their households with two thirds in primary school. In this regard, 90 per cent were supported through the social pension scheme by receiving M60 each
month (Croome and Mapetla, 2007). The money was used for school uniforms, school books and travel (Nyanguru, 2007).

In addition, in the review study by Hagen (2008), it is reported that the pensioners were able to pay for treatment and medicine especially in situations where public health services were previously inaccessible. These above factors are critical in any poverty reduction intervention and as such, it can be concluded that the pension scheme has indeed addressed the basic needs of the elderly population.

8.5.3. Global demographic shifts: the elderly are self-sustaining

At international level, life expectancy has risen from around age 58 in the early 1970s to nearly 70 in 2013 and is expected to increase further by 2050 (ILO, 2010). This indicates that there is a growing number of elderly people who will remain relevant and will need to be supported in order to leverage on their existence. This rise has occurred in all income groups, with the largest increase in the low-income countries and the smallest increase (both proportional and absolute) in the high-income countries (Barrientos, 2002). Based on this increase, supporting the elderly with pensions has shown positive results as some of them are still actively engaging in the economy. Furthermore, as stated in this research, some of them are looking after orphaned children hence provision of this support allows them to be providers of their families.

Studies by Croome and Mapetla (2007); Hagen (2008) and Winniberg (2012) present the benefits of satisfaction by elderly. They state that the elderly feel they have hope for the future and are able to contribute to the needs of their families through social pensions.
8.6. CHALLENGES WITH SOCIAL PENSIONS IN LESOTHO

As much as the above benefits were seen, the following challenges were identified through the research done by Hagen (2008), Winnberg, (2012) and Croome and Mapetla (2007).

8.6.1. Targeting and Coverage

Throughout the literature, it is widely accepted that old age starts from the age of 60 years. As stated by the African Union and United Nations agencies, one is regarded to be old by the age of 60. In most countries, people are meant to retire after the age of 60 or 65. As such, it is believed that setting the eligibility age for 70 in Lesotho is questioned as it limits this benefit to fewer people.

In South Africa the age of eligibility for pension is 60 for both women and men. Ellis, et al., (2009) sees the high age of eligibility as one of the weaknesses of the Lesotho pension, since it possibly excludes a group of people who are too old to work and earn an income, but not yet old enough to receive the pension (Ellis, et al., 2009). It also limits the time each household receives the benefits, because of the low remaining life expectancy of those who have already turned 70 (Winniberg, 2013). In the LPIG survey, 66 per cent of respondents said that they thought 70 was not the right age to start receiving the pension, and the majority said it should be between 56 and 69, with an average of 62 years.

Lesotho faces the challenge of expanding the coverage by reducing the old age limit from 70 to 65 which is an internal standard for such schemes (Velverde and Pacheco, 2012) This scheme needs to reach out to those between 65-69 years of age. However, if this was to happen, the scheme will be extended to another 32,300 beneficiaries and cost the country another M116.3Million ($15M), 41 per cent increase of the 2011 budget
(Velverde and Pacheco, 2012). Considering that this is funded by tax funds, it will not be an easy option for the government of Lesotho.

However, it can also be argued from another angle that Lesotho has managed to sustain this initiative by limiting the entry point so that only those who are most vulnerable should benefit from the scheme. Considering that it is funded through tax, to have a bigger group benefiting will not sustain the budget for this. The researcher believes that until such time that funding is guaranteed from other sources, retaining entry age of 70 is more sustainable.

Apart from age coverage, another challenge relates to supporting other vulnerable groups to allow them to benefit fully from the system. Such groups include People Living with HIV as well as orphaned children. There are no interventions for these groups that have reached universal coverage as old age beneficiaries. It is stated that coverage rates do not exceed 50 per cent hence the government will need to address the other needs of the vulnerable groups as well (Winnberg, 2012).

8.6.2. Registration and distribution

Considering the need to verify the age group above, Lesotho continues to face challenges in verifying and registering its old age pensioners. This is mostly due to failure of some of the targeted groups to have valid identification documents. For some that did not have legitimate documents, the process ended up being longer than necessary (Hagen, 2008). There is always a need to ensure that the pensioners that are eligible for the grant have the correct documentation (Nyanguru, 2007). In this regard, Lesotho needs to invest more in registration of its population to ensure efficiency in this area. It will require reaching out to each citizen to have proper documents.
On the other hand, the problem at distribution points is mainly about the
time it takes to receive the pension. As stated by Hagen (2008) it was
noted that the main problem occurring during the delivery process had to
do with the waiting conditions for the older people. When they are called to
receive their pension, all of them arrive in the morning, although they need
to queue and wait until they are called to receive their entitlement. In these
situations, some return home without receiving their grant as they are the
last on the list (Hagen, 2008, Winniberg, 2012). The pension is distributed
in alphabetical order hence this delay. Additionally, when there is shortage
of staff, the situations worsens as it takes even more time to process the
list.

8.6.3 Financing the Pension

As noted, the social pension scheme is Lesotho is fully funded by the
fiscus. There is a need to improve tax collection from other sources which
are playing a very limited role. Such an example is the Southern Africa
Customs Union which has limited the amount that Lesotho benefits from
its exports (Winniberg, 2012). Lesotho needs to lobby for a greater
contribution from this source as it is challenged with the regulations that
support more developed countries like South Africa on how to tax this area
(OPM, 2010). If it can access more funds from this, it will be able to
sustain and reconsider the age bracket for the old age pension scheme.

According to OPM (2010), VAT brought in less than 15 per cent of the total
taxation in 2009 and together with income tax only accounted for three of
every 10 Maloti coming from taxation. There is a need to diversify the
funding source. Considering other donors from Western countries is yet
another option, however sustainability of this initiative has been from using
its own resources.
8.7. ROLE OF SOCIAL PENSIONS FOR ELDERLY LIVELIHOODS: FINDINGS FROM INTERVIEWS

In this section, the study presents the effect of social pensions for the elderly in Lesotho as an example for responding to the challenges of the elderly as shared in the Rumphi and Zomba districts. As a first step some demographic information will be presented of the study population to share the age of the respondents and number of children under their care. Thereafter, the analysis will examine the role of the elderly in taking care of the orphans, and supporting them with their challenges. In the third section, the study will highlight the benefits of social pensions in elderly households using the livelihoods framework.

In this study, the livelihoods framework was used to understand the challenges facing the elderly in the Rumphi and Zomba districts. The same framework is used to understand the elderly livelihoods of those who are receiving social pensions in Lesotho. In concluding this section, the study will provide recommendations as proposed by the elderly to ensure that the positive effects of social pensions are fully realised.

In order to document the impact of social pensions in Lesotho, this study employed the case study method and discussed with selected elderly members on the impact of social pensions. A total of 48 elderly members was interviewed to discuss the effect of social pensions as well as their challenges. Following this, four focus group discussions were done with community members to get their opinion on the elderly situation in Lesotho, social pensions and overall challenges facing the elderly. This information was taken from Mohale’s Hoek, Berea, Quthing and Qacha’s Nek. In Mohale’s Hoek, two villages were engaged in this interview namely Ha Mahase and Bulu Bulu; in Berea, two villages namely Berea and Mahlatsa; in Quthing this was done in Ha Jobo and Mable a Tlala; and in
Qacha’s Nek at Tellong and White hill. A total of 29 children staying with the elderly were also interviewed to get their perspectives. Below is the summary of findings:

8.7.1. Study demographics

The age group in this study were within a very broad scope in the adopted elderly definition used in this research and represented different categories of elderly, that is those who are just into this categorisation, above 60, those that are settled within this category, above 70 years and those that represent the very old generation as indicated in the graph over 80 years old. The difference mentioned on their age represents different categories of older people with different needs and facing different challenges. However, this study was able to present what social pensions are doing in the context of the diversified needs, especially those above age 70.

Most of the elderly were categorised to be within the ages of 71-75 years. Most members interviewed in this study were elderly by definition. However, they did not all receive social pensions as eligibility for elderly categorisation in Lesotho starts from the age of 70. It is critical to note that most of the interviewed participants were above 70 years of age and this has implications for the responsibilities that have been given to them to raise the children. The 48 interviewed members were looking after 132 orphans in total.
8.7.1.1 Age of orphans

The research documented the ages of the children cared for by the elderly. This was important to see the different child development areas of focus for the elderly. Most of the children were above the age of 12, implying that the elderly were dealing with teenage needs as reflected below in Table 14.
Table 14: Ages of Orphans in care of the Elderly Household in Lesotho

<table>
<thead>
<tr>
<th>Range</th>
<th>Total Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-12</td>
<td>4</td>
</tr>
<tr>
<td>13-15</td>
<td>18</td>
</tr>
<tr>
<td>16-18</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>29</td>
</tr>
</tbody>
</table>

Source: Own, 2014

Considering that there were more elderly people above the age of 70, it is important to note the number of years they have been looking after the orphaned children. Most of the interviewed members have been taking care of the orphans for more than three years, with more than 50 per cent looking after the children for more than seven years. This indicates that they have been able to provide this care notwithstanding the challenges they face for a sustained period. The interview process also noted that most of them did not view the number of years as substantial as they have realised that this is a new responsibility and they need to face this task with a grateful heart regardless of the challenges they face.

Some of the elderly members commented this new role as a commitment to ensure that these children are brought up well. It was established that they considered this to be more a blessing to the children as opposed to seeing them suffering in child-headed households. Having a grandparent was better than being raised by an orphanage or child-headed household.

Considering that Lesotho categorises pensioners to be those above 70, the study included even the elderly above 60 as these were agreed parameters in defining elderly members. Even those above 60 years had had more than five years of looking after the children which gave them a
good picture of the challenges. Yet they need to wait for nine years to participate in the pension scheme.

Figure 29: Years looking after Orphaned Children

8.7.1.2 Extent of orphans in Lesotho: number of orphans within elderly households

The situation of orphans in all interviewed areas in Lesotho could be considered very dire. This was raised by the community members and the elderly themselves during focus group discussions conducted in the four areas. It was noted that there were many children being looked after by the elderly or other relatives due to the effect of HIV and AIDS. Furthermore, the practice of having children in elderly households was
seen as common as most of the parents left their children in the care of their grandparents to seek work opportunities in South Africa. Some of the notable responses included the following from elderly respondents: *It is not new for grandparents to stay with children, however nowadays it has become very common as it is no longer South Africa taking their parents for work but HIV and AIDS has killed them.* (Elderly respondent, Qacha's Neck, 16 December, 2013). This is substantiated by other elderly members in the three districts. One in Quthing said she started staying with the children before both of their parents died. The parents were in South Africa and got sick, and when they come home one by one they died and she continued with the role. (Elderly respondent, Quthing, 12 December, 2013).

Considering this, the study documented the number of orphans in each elderly household to see the extent of their involvement. Most of the grandparents had an average of four children per family. Considering that the majority of them are above 70 years of age, one could conclusively say that the elderly have multiple challenges of taking care of their health as well as looking after a number of children. Only 40 per cent of the participants had one or two children in their care whilst 60 per cent had more than three children in their care.
8.7.2. Challenges facing the orphans

Children were interviewed so as to understand the challenges they face living with grandparents. The researcher further wanted to understand how they valued their grandparents. The children responded that they are being physically and emotionally abused by other children, the community or the parents of their abusers, and the teachers. It was reported that the police are not much of a help either. Some even drop out of school because of abuse. Girls who are orphaned and have no guidance sought solace in marriage at a young age to escape from abuse and poverty.

*There are four girls that dropped out of school and they were staying with their grandparents, we believe it is because of lack of proper guidance.* (FGD Mohale Hoek, 15 December, 2013).
In Quthing during elderly interviews, it was also discussed that some girls were dropping out of school as the grandparents could not cope. For example, one elderly person indicated that,

\[I\ failed\ to\ control\ my\ grandchild\ and\ now\ she\ is\ married.\ I\ believe\ she\ did\ not\ want\ to\ listen\ to\ me,\ but\ she\ would\ have\ listened\ to\ her\ parents\ if\ they\ were\ alive.\ \text{(Elderly\ respondent,\ Quthing,\ 12\ December,\ 2013).}\]

In most cases marriage has proved to be a negative choice as the young girls are often abused by the same people they thought would protect them since the abusers take advantage of the vulnerable state these girls are in. In some villages orphans live alone and cannot look after themselves. They are unaware of how to raise complaints when they are treated poorly in their community. The local authorities are not much help to these child-headed households where orphans are left to fend for themselves and become victims of physical and emotional abuse. In Berea it was reported that the majority of these orphans live alone.

**8.7.3. Rationale and benefits of looking after the children**

To document the nature of the elderly household, this research looked into the rationale that led to the grandparents looking after the orphaned children. It was important to establish this to see if they were forced or had volunteered their support. Forty-five per cent of the older people indicated that most of them were involved in caring for their grandchildren because they choose to, and/or as a way of ensuring that their children’s legacy continues. These were their own children. Following this, they unexpectedly found themselves as the sole or major providers of care and as such they continued to take on the responsibility. This varied across respondents as there were some who indicated that the children’s parents
were already working in South Africa or in a town and left the children in their care. When the parents died, the grandparent continued their role. Such responses are outlined below:

Their parents left for South Africa and I was already staying with them before they died. (Elderly Respondent, Qacha’s Nek, 16 December, 2013).

In a similar way, other elderly members from Qacha’s Nek alluded that:

There was nobody willing to take care of them so I stepped in. (Elderly Respondent, Qachas Nek, 16 December, 2013).

There was no one to look after them as elder was ill when their mother passed away. (Elderly respondent, Quthing, 12 December, 2013).

Another different reason was shared that showed the rationale for taking care of grandchildren which was different from the rest.

Parents separated and when the mother died nobody was eager to look after them. (Elderly respondent, Mohale Hoek, 14 December, 2013).

These responses were common in all the interviews that were done in the districts. Some were also validated by the children themselves who indicated that they were staying with their grandparents since birth and only knew that their parents were in South Africa. In other scenarios, the children indicated that there was nobody who came in to care for them hence they were just taken by their grandparents. From the children’s perspective the majority indicated that they had nobody else to look after them and as such they were taken in by the grandparents. Of the 29 interviewed children, 17 indicated that they were taken in as the
grandparent was the only one willing to do so. Of the 29 respondents, six were taken at birth and when their parents died, they continued to live with their grandparent.

**Figure 31: Example of elderly headed household**

![Example of elderly headed household](image)

*Source: Own, 2014*

Figure 31 above depicts Mapaseka Moletsane and her husband Sematse Moletsane with nine children they have taken on and are currently supporting, six of whom have been neglected by their parents and three of whom are double orphans.

Considering this rationale, the grandparents also indicated that they were happy seeing these children in their care. They noted some potential benefits in raising the children where 45 per cent of the elderly indicated the help they got from the children with household chores. They were happy with the children supporting them in cooking, cleaning, and working in the garden. Following this benefit, the elderly indicated that just seeing the children growing up into responsible citizens, and the love they receive
from their grandchildren complemented the role they were playing in their old age. They were happy to be loved by their grandchildren and to see the children doing well in school. Figure 32 below presents their responses.

Similarly, most of the children who participated in the interviews indicated that they were happy to have someone looking after them rather than other children who were fending for themselves. Benefits they saw through living with the grandparents included financial, providers of everything and having someone who loved them unconditionally.

Figure 32: Benefits of looking after Orphans

Source: Own, 2014
8.7.4. Main source of income

Considering the nature of the elderly households in this study, it was also important to understand their main source of income that allows them to support the children in their care, where 41 per cent of the elderly indicated that the social pension was their main source of income, followed by remittances at 14 per cent, beer brewing at 14 per cent and selling farm produce (10 per cent).

Figure 33: Lesotho Elderly source of Income

From this analysis, it may be concluded that the pension scheme has contributed greatly to the well-being of the grandparents especially those caring for orphaned children as it is the main source of income.
8.7.5. Broad challenges facing the Elderly

This study also reviewed the challenges the elderly were facing in raising the children under their care. The elderly highlighted that while they understood the role they had to play, they had limitations. Major challenges faced by grandparents were around disciplining the children as they were very sensitive to any punishment. They indicated that the children were very fragile and sensitive and this is an area where they wanted more support. It was noted that there were some grandparents who were very disciplinarian and some who were flexible. Both groups felt that modern children had many rights and did not listen to the elderly. As such they lacked discipline because they have been exposed to films and beliefs which were external to their own context. Below are some of the complaints that the elderly raised in this regard:

Some of my family members claim that I do not look after these children well and that they lack discipline, I find it unfair for them to expect me to do more at my age. (Elderly respondent, Quthing, 12 December, 2013).

Additional complaints from elderly also included some of the community perceptions around how they raise the children as indicated below:

Some community members interfere with how I raise the children and am so nervous to discipline them properly. (Elderly Respondent, Mohales Hoek, 15 December, 2013).

For some their situation was complicated as even the children ended up in early marriages and were blamed for this as indicated below.
My grandchild got married and everyone blamed me for failing to raise her up properly. (Elderly respondent, Qacha, December, 2014).

Following this challenge was their inability to meet their own household basic needs. The elderly indicated lack of food, shelter and clothing as a major challenge in their households. It was noted that due to the fact that they participated in the NGO programme, Food for Work, as well as receiving old age pensions, they believed that they were better off than the elderly who were not even receiving any food assistance. The elderly in all four districts noted that when there is no food assistance, their pension fund is completely depleted, but when they do have food assistance and pension they can afford more than any other household. As such the responses were that having enough food was the main problem, then a lack of food when the harvest is poor and chronic hunger were the core issues across the four districts.

Following this challenge was their limitation to afford school fees, taxi fares, clothing and Christmas gifts. This was highlighted by 30 per cent of the participants and it was emphasized that during the Christmas break, the elderly household felt more exposed as they could not afford to give the children presents as their parents used to give them: “... one of my greatest concerns each and every year is Christmas time. I fail to buy new clothes and sometimes gifts for friends. Christmas is giving time and in my community we share a lot” (Elderly respondent, Mohales Hoek, 15 December, 2013).

Another great challenge in raising orphans shared by the elderly was around sensitivity about any disciplinary action. It was found that most elderly complained that raising these children was difficult as most of them were very fragile and sensitive. They explained that they resent punishment and think they get punished because they are orphans. The children also complained that the elderly were stricter as compared to
other parents. On the other hand, the grandparents indicated that the children were very unruly and sometimes were the cause of tension in the community. This is one area where community members recommended support to the families looking after orphaned children to be more disciplinarian and seek support from others as they felt the grandparents were not strong enough.

In documenting these challenges from the children’s perspective, it was noted that their greatest challenge was housing. In bad weather houses collapsed, including six houses of the elderly, which had affected the elderly seriously.

In five households, the children complained of the uncle/siblings stealing the pension resulting in the children suffering. They would steal the money and use it for personal things like beer or clothes. This created conflict within the household. Other conflicts were reported from the relatives who have since stopped supporting the elderly households saying they are now earning income. Though the money is not substantial, it has resulted in the elderly fully looking after their households. Below is one case study.

An example of a theft case on an elderly household was explained thus:

*During the Focus Group Discussion with some of Mahase community members who included the elderly receiving social pensions, it was discovered that some of the challenges facing elders is assault and theft by the orphans some of them are the ones elderly are helping to raise. One incident involved 85-year-old Mamatseliso Ntlathe and her 15-year-old grandson who is a double orphan, where by the grandson was alleged to have taken money by force from his grandmother. He took the money for his own interests and left his granny without any money.*
The matter was taken to the chief who in turn reported the case to the local police. The police officer in charge of that case explained that the boy was apprehended and the matter was solved. The police officer explained that they have not heard from the chief again with the same matter so the assumption is that the grandson has stopped. And he also explained that there have been rumours of elderly people being raped after the pension day but those cases have never been solved because victims have not reported perpetrators so they couldn't be brought to trial and they are really difficult to prove. The grandson has since disappeared after that case. The picture below shows Mamatseliso Ntlhathe.

Figure 34: An elderly victim of theft

8.8. LESOTHO SOCIAL PENSIONS – BENEFITS AND EFFECTS ON THE ELDERLY

This research targeted the elderly from the age of 60 as per the definition of elderly. The elderly between the ages of 60 and 69 indicated their dissatisfaction with the targeting criteria of old age pension. They made recommendations that the old age pensions should target all members
above 60. Apart from this, all elderly shared the benefits of social pensions reflecting the perspective of elderly, children and community members. The study used the livelihoods framework as the entry point.

8.8.1. Benefits of social pensions

8.8.1.1. Beneficiary knowledge of entitlement and process

In order to verify the amount received, this research asked the respondents to indicate the amount they were receiving for social pensions and the rationale for why they belong to the scheme. All benefiting respondents indicated that they were receiving M450 per month because they were elderly people who were not working. The members also presented the whole process of how pensions are received and how to get registered as explained previously. Considering this, it could be concluded that there was good sensitisation of the role of pensions in Lesotho and that beneficiaries are aware of both the process and the entitlement.

8.8.1.2. Benefits of social pensions

The benefits of social pensions have been known over the years across the countries that are implementing this grant. It was critical for this research to get current information on the benefits of social pensions for Lesotho and leverage the learning for Malawi. Sixty per cent of the respondents were beneficiaries of the social pensions, where older than 70, and 40 per cent did not receive any social pensions. Figure 35 below indicates the value of social pensions as seen from the elderly participating in the scheme.
As shown in the Table 35 above, 49 per cent of the beneficiaries responded that pensions supported them in affording the basic needs like food, clothing and shelter. This was considered the core benefit of the pension scheme as discussed by the community members during the focus group discussions. This resonates with the various studies that have been made within Lesotho on the benefits of social pensions on the elderly households. It is worthwhile pointing out that the elderly interviewed in this study were also beneficiaries of food assistance programmes. As such the complementary contributions of food assistance and social pensions assisted the elderly households to afford their basic needs. As shared by one respondent:

*Our household also participates in the food programme and as such we receive the food from this activity and then we are able to use the money from pension scheme to buy other relevant needs of the household. This has been a good way of supporting elderly households.* (Elderly respondent, Quthing, 12 December, 2013).
Food assistance has been the main response to repeated and protracted humanitarian crises in Lesotho since 2002. With the introduction of country-wide social pensions, most of the elderly in Lesotho have benefited from multiple sources of social protection. Apart from food assistance through Food for Work, there are school feeding programmes in the areas and as such it is benefiting the children under the care of the elderly as well. This holistic approach has resulted in the benefits being realised to the fullest in the elderly households:

*My grandson eats at school as there is a school feeding programme so we use the pension money to support his stationery and transport needs.* (Elderly respondent, Mohales Hoek, 15 December, 2013).

The benefits of social pensions by the elderly have been seen in supporting the payment of school fees for the children, where 22 per cent indicate the use of pensions for school fees. This corresponds with the objective of building human capital in elderly households through education. As the elderly spent their money on school fees and transport, it is hoped that their household will benefit from the education of the child:

*I am able to pay for school fees for my grandchild, this is the great contribution I can ever make for him.* (Elderly grandparent, Berea, 10 December, 2013).

Similarly in Mohales Hoek and Quthing a number of elderly members indicated paying school fees as one of the greatest achievements of having social pensions.

The other high expenditure of social pensions is on medical care. As shown in this research, the elderly members have varying health needs
and are prone to requiring medical support. This results in their spending money on their own health expenses using part of their social pensions.

It is important to note that due to the contribution of the social pensions, most of the elderly households have joined burial societies and savings schemes. In these schemes, they are required to contribute agreed amounts to the average of M50 per month. The elderly have managed to belong to such groups and are able to contribute the required amounts that support them during funerals. Additionally apart from joining burial societies, it was noted that some elderly members were part of the savings schemes. This was not the case in Malawi. Of all interviewed participants, none of them belonged to any savings group, whilst in Lesotho, 70 per cent of the elderly interviewed were part of the savings group.

Social pensions have been used as start-up income for traditional beer brewing. It was reported by the community, elderly and even children that part of the pension was used in some households for beer brewing. This allowed the households to generate more income to support the household needs. In all, four focus group discussions done in this research, the growth of beer brewing business in elderly households was one of the effects that the community shared about social pensions. In Qachas Nek, the community viewed this negatively and condemned the behaviour of the elderly who had such business, however in the other three districts, the communities were more supportive of this practice indicating that it gave the elderly a good source of income to support their household needs.

8.8.2. Negative effect of the social pensions

Whilst there is a clear understanding of how social pensions are targeted and implemented for the elderly, there are indications of inter-generational and community conflicts due to the participation of some members in the
pensions schemes whilst others are not benefiting. In some places, this has created more harm than good.

Respondents from both interviews with the elderly, children and focus groups reported that social pensions had brought conflicts within the communities. It was stated that during the time that the elderly receive pensions, there have been incidents of theft and quarrels as those not benefiting within the communities feel left out, not supported and say negative things to the elderly. One elderly woman indicated that during the time that they go to receive pensions, there have been incidents of fights and tensions with community members even though the scheme has been going on for a long time. Community members viewed them with negative eyes (Elderly respondent, Mohales Hoek, 13 January, 2013). Additionally another respondent in Berea shared that due to her pension, she was no longer viewed the same by her neighbour, and the neighbour always found problems and even refuses to lend her some farming equipment (Elderly respondent, Berea, 19 December, 2013). Others shared a similar concern in Quthing, and Qachas Nek of having neighbours and even community members viewing them negatively.

Additionally, elderly members indicated the conflicts within households that is, between children, relatives and grandchildren. It was noted that there have been multiple incidents of theft of money by the grandchildren as well as strained relationships with the children. Some of the children reported that the elderly do not want to use the money for the family needs and they are suffering a lot whilst there is money in the house. Six families across the four districts reported incidents of conflict within their households.

During the discussions with the community members, it was reported across the four districts that elderly are robbed. There have been multiple reports of theft in the area where the elderly have been robbed of their
benefits. Additionally, the respondents highlighted the issue of rape. Without further research, it is difficult to judge how serious the problem of rape is and the extent to which they are related across the four districts. In all the four districts this was highlighted during the focus group discussions and the community attested that there have been rape cases. The researcher went further to verify this with the community regarding the frequency. It was noted that theft and community tensions were seen to be high whilst rape seemed to have happened in two cases. There were no statistics shared on the number of people killed.

The two rape cases were reported to the police and the researcher verified this. It was noted that the victims withdrew the cases due to the fact that they were embarrassed and felt victimised. This is a great concern and is worth a detailed investigation.

Whilst the numbers of rape cases of the elderly seem to be low, this is a serious concern around the negative effect of social pensions. The government officials seem unaware of the extent of the issue and as such there is an urgent need to research this problem and document all the reported cases as evidence.

Additionally, the respondents highlighted the challenge the elderly faced in using proxy beneficiaries. Due to the fact that in some areas the distance for collecting pensions is very far and some grandparents are ill, they ask for help from community members or relatives to collect their money. The proxies require payment and sometimes even demand to share the money equally. A total of 15 elderly members had faced challenges with proxies demanding payment. In such cases, the benefit of the pension is not fully realised and it affects its objective:
When I ask any of my relatives to bring my pension, they demand that we share half, and that is what I do otherwise I will not eat. (Elderly respondent, Berea, 19 December, 2013).

He told me that if I wanted him to go, it had to be half as he was going to stop doing his work. I just had to do it. (Elderly respondent, Quthing, 12 December, 2013).

This was further verified during focus group discussions as the community members were all aware that there are issues of proxies and there was a demand of splitting 50:50. Some members were totally against this, whilst others indicated that they were also vulnerable hence it was acceptable to ask for payment as both parties would be better supported.

The elderly members also highlighted the challenge of distance to pay points. In Qchas Neck it was noted that the elderly take more than two hours to reach pay points and the risk of being robbed is very high as this is a known process to all community members.

Of all the recipients of pensions, it was shared that there has been a big growth in beer brewing business run by elderly households. This has both negative and positive effects. On the positive side, there is income generating opportunities through beer brewing. However, most of the respondents during the focus group discussions were opposed to this business for the elderly households. It was emphasised that having them brewing beer brings unnecessary burden on the children in their households. The children are forced to sell the beer and girls are interacting with unruly men. This will need further research to establish the extent of the problem.
The above challenges present yet another perspective on the importance of having strong systems that monitor the usage of pension schemes as well as its negative effects. There is a need for proper structures that include the police services to monitor the incidents around rape and theft. Furthermore, the government will need to guide the elderly households on the best business for their situation.

8.9. APPLICATION OF THE LIVELIHOODS FRAMEWORK FOR ELDERLY HOUSEHOLDS IN LESOTHO

Having presented the livelihoods framework as the tool to document the challenges facing the elderly, this research also used the same framework to identify similarities between elderly households in Lesotho and Malawi on some notable challenges that affect their livelihoods. Below is the analysis of selected areas.

8.9.1. Human capital and social pensions

It was noted that social pensions contributed to the provision of education needs of children in the care of the elderly. In all four districts, the elderly members indicated using part of the pension to pay for school fees, transport and school books. This was verified with the children who indicated that the money the grandparents get is used for their education. As such, it is seen that the pension money was being used to directly contribute to building the human capital of the elderly household. It needs to be noted that school fees in primary schools have been abolished, but there are other needs at the school, for example computer lessons that are charged to the pupil. However, fees are still contributed towards secondary education.
Most of the elderly households use the pension money to pay for school needs and it includes transport, fees and stationary. (FGD Member, Berea, 19 January, 2014.

This was common in the responses by the children. They viewed pension money to be used for their school needs as shared by one child in Quthing:

My grandmother uses the pension for my school stationery and sometimes she gives me money for transport. (Child respondent, Quthing, 13 December, 2013).

Almost 75 per cent of the elderly respondents indicated using the money for school needs as well. One example is from Mohales Hoek where the elderly said:

I use the pension for his school needs, they want specific stationery but also his pocket money to buy something to eat. (Elderly respondent, Mohale Hoek, 15 December, 2013).

In Malawi, most of the elderly members failed to support the education of the children in their care, especially secondary education. Social pensions in Lesotho help the elderly contribute towards secondary school fees. In all the four districts the elderly included paying of their grandchildren’s school fees as the core need of the elderly household. It was indicated that on average, each elderly was paying about M100 a month for this, suggesting that they were able to spare this amount. This was also partly due to the fact that they were receiving food assistance which allowed them to meet their basic food needs hence were able to prioritise this.
Pensions makes us feel in control and that others end up respecting us because we also have our own money to manage and can be relied on. (Elderly respondent, Berea, 19 December, 2013).

Figure 36: Elderly people who are able to send children to school

Source: Own, 2013.

It is seen that social pensions provide regular and predictable household income to the elderly households resulting in them making long term investments in their children’s education. Furthermore, the situation in Malawi indicated most of the orphaned children were being requested to do piece jobs to support their school basic needs. This situation is not prevalent in Lesotho. The children did not spend their time on piece jobs hence social pensions limits the pressure on children to contribute to household income through work hence and enables them to attend school regularly.
8.9.2. Natural Capital and social pensions for elderly

The elderly indicated the importance of the pension in their household especially in allowing them to access more food than before. They compared themselves with houses that did not receive social pensions and were elderly headed and could see their own advantages in having a source of income. Due to their ability to access social pensions, it was noted that in Lesotho, most elderly households were able to cultivate all their land and ensure seasonal management of farmland. Figure 37 shows elderly key hole garden as part of the benefits of having social pensions.

**Figure 37: Example of elderly keyhole garden**

![Image of elderly keyhole garden](source: Own, 2013)

This is also attributed to the Food For Work programme currently under way in Lesotho which is encouraging home grown gardens as well as own production. Figure 38 below shows that 82 per cent of households were
able to cultivate all their land, whilst only 14 per cent cultivated half and 5 per cent failed to cultivate at all. This is in contrast with Malawi where only 10 per cent cultivated all the land whilst 70 per cent cultivated half and 5 per cent failed to cultivate at all; 15 per cent cultivated more than half.

**Figure 38: Malawi versus Lesotho Status of Elderly Land Cultivation**

![Graph showing land cultivation in Malawi and Lesotho](image)

Source: Own, 2014

Based on the above graph, it is shown that the elderly in Lesotho are able to focus on their land as they have other sources of income to support them. Their ability to use own land ensures ongoing food security even though the terrain is not favourable. In understanding how they managed to cultivate their land, some of the elderly members had this to say:

*I have 3 hectares, I managed to cultivate it all because I was able to buy the needed inputs as well as fertiliser. I did not leave any land uncultivated, maybe when am too old.* (Elderly respondent, Quthing, 12 December, 2013).
However, this was not the same of the elderly who are just over 60 and not benefiting from the social pension, and this was shared mostly from those not part of the social pension scheme. They indicated that:

*I was not able to cultivate all the land because I needed money to finish the remaining half for inputs.* (Elderly respondent, Berea, 19 December, 2013)

Both the focus group discussions as well as the children’s interviews indicated that the elderly were able to cultivate all their land as they could even pay someone to do it on their behalf. Payments could be staggered hence the elderly were able to have all their land cultivated. This was shared across the four districts and some community members viewed government as favouring only the elderly because of this advantage.

### 8.9.3. Social capital and social pensions for elderly

The picture emerging from the study in Malawi indicates a decline in community and family support which was essential in ensuring that elderly members of the society are well supported. The decline in community support has been attributed to the extent of the HIV and AIDS pandemic which has made every household vulnerable. In order to survive, community members and relatives have resorted to the “table principle”, only taking care of their own immediate family members. In Malawi, the elderly are highly vulnerable and socially excluded from the community as they cannot participate in the new forms of social capital which exists in Malawi and requires financial contributions from its members.

Given these challenges and formidable financial requirements, the social pensions in Lesotho have given the elderly a basis for interaction. They are regarded as valuable as they can also sustain and contribute financially to the different engagements that are emerging in communities.
A wide variety of informal community-based networks have been developed in Lesotho aimed at spreading friendships that benefit each household in times of need. Rotating savings group have been introduced for communities in Lesotho and in all four districts, 70 per cent of the elderly were participating in the village savings groups.

It was indicated through the focus group discussions across the four districts as well as elderly interviews that most elderly members in the pension scheme were able to participate in village savings groups because they received a grant which enabled them to pay as needed. Considering that in Lesotho, as in Malawi, formal financial savings groups have been unsuccessful, the informal savings groups have penetrated the four districts allowing the elderly to fully participate. This scheme has encouraged small scale capital accumulation and savings and enabled the elderly to meet more of their basic needs hence their ability to afford school fees, buy more food and start businesses like beer brewing.

In understanding the participation in the scheme by the elderly, the community members indicated that,

... *we are failing to participate in some of the savings groups in the society, however most if not all elderly members are participating because they are able to present the monthly contribution of M10.*

(FGD, Mohale Hoek 16 December, 2013).

In supporting this, almost each elderly household indicated that they were part of a village savings scheme. Furthermore, 85 per cent of the beneficiaries indicated that they belonged to a burial society, where members pay periodically to the society and when the member or immediate family member dies, the family receives money to help offset the funeral expenses. Each member contributed from M30 to M50 per month which covers their expenses during funerals. This is one of the
most valued groups in Lesotho and elderly members indicated that their ability to pay this amount allowed them to participate in all community-led social groupings. Community members indicated their frustration at not receiving social pensions as some of them said they failed to belong to such groups whilst the elderly were part of it. As stated by members in Quthing,

... one advantage of these social pension is that it allows the elderly to fully support themselves in terms of funerals. Most of them are able to pay for funerals because they contribute on a monthly basis. (FGD members, Quthing, 12 December, 2013).

The benefits of social pensions are strongly realised in Lesotho through the ability of the elderly to borrow money. When they were asked if they were able to borrow money from community members, all elderly members said they could borrow money as they were able to pay back after they receive their pensions. As indicated by the elderly themselves,

... yes am able to borrow money and I have done it before, I am always able to pay back so I have no problem with borrowing. (Elderly respondent, Berea, 19 June, 2013).

Another respondent in Mohales Hoek indicated that,

... borrowing money is not a problem, you just have to know how to pay back. I have so many people who I can borrow from. (Elderly respondent, Mohale Hoek, 16 January, 2013).

This is in total contrast with Malawi where the elderly could not even afford to borrow money as it was known that they will not be able to pay back. This shows the value of social pensions in allowing the elderly to...
participate in social activities and their ability to manage their household’s needs.

It is therefore concluded that regular income through social pensions has allowed the elderly to redeem their status in society and improve their dignity, self-worth and status. In Malawi it was noted that the elderly were socially excluded whereas in Lesotho there is a great sense of belonging to the community on the part of the elderly members.

8.9.4. Health capital and social pensions for elderly

Good health and nutrition are often emphasized as critical components of basic needs. In 1978 African delegates joined the representatives of other nations in endorsing the Declaration of Alma Ata, which committed all governments to the common goal of achieving health for all by the year 2000 (Beigbeder, 1998).

In this study, the researcher interviewed the elderly to analyse their health status. Considering their age, it was not surprising to find that most of them had one or two chronic illness and were in need of medical attention. Such diseases included diabetes, arthritis and high blood pressure. HIV and AIDS was also one of the illness affecting the elderly. There is a growing burden of chronic diseases associated with old age that requires consistent support. Considering the responsibility they carry, the elderly indicated this as one of their major concerns around taking care of the children. They had to prioritise their health to ensure that they look after the children.

Based on this situation, most elderly members used their pensions to support their medical needs like transport to hospital and medication. Examples across all the four districts from the 48 respondents included using the money to buy medicine at the pharmacy and using it for
transport to the clinic. The children were not as sure about this and community members indicated that there was a possibility that some of the pension money would go towards medical support. In Berea, the members identified some examples of how pension funds have supported elderly health needs. Fig 39 shows the different diseases suffered by elderly.

Figure 39: The health challenges facing the elderly

Lesotho Elderly Health Challenges

Source Own, 2013

8.9.5. HIV/AIDS and the Elderly

While most of the attention to date has focused on how the pandemic affects persons with HIV and their surviving orphans, greater recognition must be given to the consequences of the pandemic for older people, who in many cases are playing critical roles as caregivers for orphaned grandchildren and who, in some cases, are also infected. This study
indicated that 13 per cent of the elderly were themselves HIV positive. More often, this is a group that is not prioritised for sensitisation messages or treatment campaigns. There is a need to address the gap that HIV and AIDS has created in having the elderly looking after orphans, when some of them are also infected and have interventions like ART that targets the elderly.

8.9.6. Financial capital and social pensions

Critical to assessing the impact of programmes intended to assist older persons in poverty is the ability to measure living standards and to monitor how they change over time. The role of social pensions is to allow the elderly to be able to manage their household. In analysing this factor, it was noted that there is already inequality on how to assess the contribution pensions make to elderly households as there was a need to compare two factors, that is, households assessing pensions with the others that did not have anything.

In this study, the role of social pensions is seen as being the main source of income in the household. The elderly are dependent on the contribution of the pension fund to their overall financial well-being. It was noted that some have leveraged on pensions to start small scale businesses. This shows the pension scheme contributes to the financial well-being of the families. Through this resource, the families are able to do other needful activities namely paying for medical health, transport, school fees, and contributing towards burial societies. As stated by some elderly members,

_Pension money has allowed us to manage our own house. With money, one is self sustaining. You cannot always beg._ (Elderly respondent, Berea, 19 December, 2013).
In all the focus group discussions, the community members indicated the benefit of social pensions to be mostly in supporting the elderly to manage their own households:

\[
\text{… the elderly have their own resources as such, they are able to look after their own households. Pension gives them strength to support their own households in their old age. (FGD respondent, Qachas Nek, 17 December, 2013).}
\]

Social pensions have been shown to contribute to overall household income and are directed to support education, improved food intake, health and income generation and reduce inter-generational poverty. On the other hand, the elderly below 70 years of age indicated remittances and sales of own produce or food aid as their main source of income. This indicates the role social pension plays in the elderly households and in protecting their human, financial and natural capitals.

\section*{8.9.7. Physical capital and social pensions for elderly}

Social pensions have been known to protect physical assets in households to ensure they are resilient to any shock. In order to analyse this aspect, the elderly were interviewed about physical assets they possess and if they have sold any of them in the past two years. Figure 40 below provides the analysis of household assets in Lesotho which shows that most of the elderly households do have assets that could protect them in the dire event of shocks. On the other hand, in Malawi it was noted that the elderly households had sold most of their assets to support their ongoing needs. With this, it could be concluded that social pensions are able to protect the household physical assets.
8.9.8. Livestock ownership

The four districts presented differing views with regard to livestock and asset ownership. Quthing stood out as an area that has elderly households who possess multiple assets from physical to livestock. All the ten interviewed elderly households have radios, possessed cattle and seemed to be self-sufficient. This was different from the other three areas where it was staggered across the household with some owning cattle whilst others only had sheep or goats.
8.10. COPING STRATEGIES

Having established the benefits of social pensions, the study documented the coping strategies for the elderly in Lesotho with the aim of understanding how they cope when faced with shocks. It is worth noting the differences between Malawi and Lesotho on coping strategies as it shows the role of social pensions for elderly survival.

To being with, it was noted that in Lesotho, the elderly resort to selling part of their food aid in times of shock. These respondents were recipients of food assistance from World Vision and World Food Programme and they tend to sell part of it to have enough money in the house for other needs. Another coping strategy noted in Lesotho was selling animals. It was reported that some of the households would see part of their cattle in times of stress. Ten households have previously sold their cattle when they were faced with dire situations over the past two years. Unlike in Malawi, the elderly in Lesotho were able to borrow money from their neighbours. As such, in times of stress, the elderly were able to borrow
money from community members to meet their household needs. This is seen as a coping strategy and they repay the money once they have received their pension. Most of the elderly indicated that they were able to repay all the money within the agreed timeframes.

Beer brewing was another coping strategy indicated by the elderly. This was highlighted as the easiest business for the elderly as the market was easy and the process of managing this business was not complicated. The elderly resorted to this unpopular business as a way of coping with their situation as they felt it was another source of income that needed to be supported.

Comparing the two countries, the elderly in Malawi resort to more negative coping strategies than in Lesotho. In Malawi the elderly would skip meals, sell green maize, remove children from school, and do casual work with the children, which have more negative consequences than the coping strategies shared by the elderly in Lesotho. Most of the activities in Lesotho could easily be reversed whilst the Malawi coping strategies result in more negative consequences.

8.11 SUMMARY

This section has examined the effect of social pensions on the elderly in Lesotho by presenting a case study that documents the process and realised benefits. The study has considered the feasibility of doing a similar intervention in Malawi as it can support the challenges that are facing the elderly looking after orphaned children.

The case study confirms what other researchers have found in terms of the objectives of social protection. Social protection programmes have multiple objectives, and because there is considerable diversity of socio-economic and cultural conditions across the developing world, there is
always a need to be clear on the target audience and the benefits it is supposed to be realising. Social pensions are proving to benefit the elderly. Through the livelihoods framework, it is noted that the challenges of elderly households are being resolved as elderly use social pensions to respond to their needs. Social pensions play a role in reducing poverty and vulnerability of the elderly household and reduce inter-generational transmission of poverty.

Chapter nine presents the analysis of social pensions for elderly households in Malawi. It applies the findings of the Lesotho case study to the challenges facing the elderly in Zomba and Rumphi. It applies the livelihoods framework and social protection framework in relation to the needs of the elderly in Rumphi. In doing this, the chapter condenses chapters six and seven to critically examine the nature of the challenges of the elderly in Malawi and the contributions of social protection to meeting their needs.
CHAPTER NINE

REFLECTION ON THE ROLE OF SOCIAL PROTECTION AND ELDERLY LIVELIHOODS IN MALAWI

9.1. INTRODUCTION

Social protection programmes are being mainstreamed and implemented in various countries in Africa with the aim of reducing poverty (Handayani, 2012). Most countries in Africa are keen to design and implement social protection schemes for the elderly (Kabeer, 2009). As indicated in this research, these types of interventions are aimed at supporting food consumption needs of elderly households, providing reliable income to older people, reducing poverty among the elderly, ensuring that those no longer working have their basic needs met, and promoting equal treatment of men and women in retirement security even when lifetime earnings and projected average life expectancy may differ greatly (Bloom and Kinnon, 2013:1).

As discussed in this research report, there are various types of social protection programmes that have demonstrated clear impact for the targeted beneficiaries. Such programmes include child grants, disability payments, cash transfers, and input subsidies among others. In chapter 8 of this research, the study examined and discussed the effect of non-contributory pension for the elderly in Lesotho. This was aimed at sharing the role of social pensions in addressing elderly needs. This research documented the challenges of the elderly looking after orphans. It also recommended the role of social protection for this elderly group. Throughout the discussions presented through the case study of Lesotho, the study has provided evidence that indeed social pensions could address the livelihood challenges of the elderly.
Kakwana and Sabbarao (2005) found that the poverty gap ratio for the households consisting of older people only, or those with only older people and young children and those headed by older people is much higher than the average for the whole population. As a result, state old age social pensions are being implemented in many countries to respond to these needs as the elderly are the most economically vulnerable group in society. Furthermore, it is well documented in this research that the elderly are providers to other vulnerable groups including orphans. Furthermore, according to Pelham (2007), in most developing countries, a high proportion of labour is outside the formal employment sector and as such it is ideal to target this group as it has a big role to play in supporting vulnerable groups within its context.

A total of six African countries are providing pensions to the elderly: Lesotho, Mauritius, Senegal, Namibia, South Africa and Botswana (Winniberg, 2013). Of these countries only Lesotho, Namibia, South Africa and Botswana contribute monthly non-contributory benefits to the elderly citizens (Hagen, 2008). Of the four countries, Lesotho is one of the least developed countries with limited resources and no major mineral presence. It is also the only country that has funded the pension scheme through tax contributions and is not dependent on mineral benefits or donations hence it offers a good learning ground for Malawi which fits into this economic stratum as well.

The effect and impact of the non-contributory old age pension is clearly articulated in chapter 8 and has been documented through studies done by Lesotho Pensions Impact Group from the National University of Lesotho. The quantitative survey published as Croome and Mapetla (2007) involved 215 pensioners and 215 non-pensioners. A study done by Nyanguru (2007) qualified the benefits of the old age pension. These have been validated through the study conducted on a selected sampled size of
the pensioners, children under their care and community members. Through this review, it is clear that the social pension does have a critical role to play in supporting the elderly. Furthermore, the literature shared about the social pension within this research has verified both its direct and indirect benefits.

This section will examine the role of social protection with a focus on social pensions in supporting elderly livelihoods. Chapter six has indicated the challenges that the elderly are facing in Malawi and this section will consolidate the critical challenges as presented with the livelihoods framework and highlight the contribution of social protection in responding to the needs of the elderly. Such factors include the intended benefits of this intervention in addressing the challenges; the process of implementation; management; policy implications; and key recommendations.

9.2. JUSTIFICATION OF NEED FOR SOCIAL PENSIONS OF ELDERLY HOUSEHOLDS

Various studies have presented the view that social protection is an effective response to poverty and vulnerability for the poor (Barrientos and Hulme, 2009). It is evident that social protection is grounded in social development theories, mostly in the understanding of the factors preventing the most vulnerable from accessing economic opportunities that contribute to persistent poverty and vulnerability (Barrentos, 2013).

Malawi has been implementing social protection interventions since independence in 1964. Social protection interventions that have been implemented over the years have targeted various beneficiaries across the country, but the elderly as a target group has not featured distinctively as a beneficiary of this system. This research provides the evidence of the challenges that the elderly are facing especially those who are caring for
orphaned children. The analysis of social protection policies as well as the policy for the elderly in Malawi indicates the limited support being provided to the elderly.

Drawing on the discussion in chapter six on the challenges facing the elderly using the livelihoods framework, it is evident that the benefits of a social pension scheme that has been documented in other countries as well as in this study could provide necessary experience and reflections in how to support the elderly in looking after orphans. The Asian Development Bank (2012) as well as the European Union (2010) indicate that social pension programmes have enabled older people to have access to various services including health care, pay school fees for children in elderly care, purchase medicine, food and access to decent clothes (Handayani and Babajanian, 2012).

The Lesotho case study has detailed the benefits of the old age pension as explained by other scholars as well as from the sampled respondents in this research. It is evident that the social pension directly responds to the needs of older people. The discussion below explains how social protection through social pensions addresses some of the identified challenges facing the elderly in Malawi as presented through the livelihoods framework.

9.3. THEORIES ON SOCIAL PENSIONS RESPONDING TO ELDERLY LIVELIHOOD CHALLENGES

The concept of sustainable livelihoods is a combination of various concepts and ideas within the development context (Yaro, 2004). The core of this area is that it focuses on the assets that poor men and women use and the strategies they employ to survive. It is further suggested that over time the understanding of poverty has changed, moving from income and consumption to one that encompasses basic needs, namely access to
food, shelter, health and sanitation (Prasad and Patnaik, 2014). In this era, poverty is reflected through the understanding that incorporates a rights focus and highlights the need to capture people’s own experience of powerlessness, humiliation and insecurity. In this sense, sustainable livelihoods have been promoted as an integrated approach to addressing multi-dimensional aspects of poverty in rural areas (Farrington, 2001). In agreement with this notion, Scoones (2009) states that a livelihoods approach has challenged the single sector approaches to solving complex rural problems. This is due to the fact that claims and access have been considered key in the livelihoods approach (De Haan, 2012).

This research supports such views as the basis for the elderly to have a decent livelihood that contributes to quality of life at their age. It is important to understand how they are able to secure overall well-being. It is evident throughout the research that the ability of the elderly to cope with the HIV pandemic has contributed to their vulnerability, amongst other factors. Scholars have argued that SLA allows for discussions of social development to have people-centred perspectives as being central to them and contributes to having the poor expanding their choices, diminishing powerlessness, promoting self-respect and reinforcing cultural and moral values of the poor (Prasad and Patnaik, 2015, Corney, 2002).

It is on this basis that the chapter analyses the role of sustainable livelihoods for elderly households as well as showing the contribution of social assistance towards elderly households.

**9.3.1. Poverty reduction for elderly households**

Throughout literature, social pensions have been commended for their benefits in reducing poverty in developing countries. This is supported by the response from the elderly in Lesotho that the greatest benefit of the social pension was its contribution towards bringing them out of poverty.
This is further verified through studies by Hujo and Cook (2012) who states that the most direct impact of social pensions is that they reduce money metric poverty for households with older people. This study goes further to examine the measurement of poverty reduction using micro-simulation analysis in a case study of Nepal. In Nepal from 2004 the social pension reduced Nepal’s poverty gap by an estimated 1 per cent which is anticipated to have quadrupled over the years (Hujo and Cook, 2012).

The provision of social pensions is aligned with the goal of social development which aims at improving the quality of life for all (Midgley, 1995 quoted in Kaseke, 2015). It is argued by Kaseke (2015) that the need to uplift and promote social development has as its basis the understanding that the benefits of development are not shared equally in society. This research agrees with the notion especially on the basis of how the elderly are forgotten in most development work as evidenced in Chapters 7 and 8 of this research.

In other studies, qualitative indicators show the importance of social pensions in the reduction of poverty and in improving household livelihoods. In Vietnam, for example, research by the United Nations Population Fund (2007) and Mujahid, Pannirselvam and Doge (2008) documents the important role of social pensions in supporting older people’s consumption, particularly those living alone.

Within the case study on social pensions in Lesotho, the research has shown that the elderly accessing social pensions are able to meet all their household basic needs, namely food, shelter and clothing. Having documented the challenges of the elderly in Malawi, these lessons are a positive reflection on how Malawi could respond to some of its elderly challenges.
This is in agreement with social development theories which state that development can be effectively achieved only if the state intervenes to redirect the resources where they are needed most in pursuit of ideals of social justice (Kaseke, 2015). This pushes the state to fully own the interventions of supporting the most needy. In this study, the elderly have been seen as the most vulnerable who need government support. As such, social protection, which is understood as a set of transfers and services that help individuals and households to confront risks and adversity and ensure a minimum standard of dignity and well-being throughout their life cycle is the ideal response to the elderly looking after orphans (Blanks and Handa, 2008:4).

9.3.2. Social protection and elderly household natural capital

As previously discussed, natural capital is made up of natural resource stocks from which resource flows useful to livelihoods are derived (Carney, 1998). As such, direct access to these resources is critical for elderly households even though it is known that these might be common pools in communities such as land, water and trees. This study has indicated that most elderly households in Malawi have limited access to these resources due to their age.

However, the study conducted in Lesotho indicates evidence of the contribution of social pensions in improving food security and promoting nutritional outcomes (Nyanguru, 2007; Winniberg, 2012). This is further reinforced by international studies led by DFID and the OECD (OECD, 2009; DFID, 2011; Adato and Bassett, 2008). In documenting the impact of social pensions, the elderly in Lesotho stated its contribution towards directly improving their households’ accessing food, and accessing markets, with consequent improvements in nutrition. The focus group discussion alluded to the elderly members being able to support the needs of their children and ensuring that they are well taken care of.
One of the prominent challenges raised by the elderly in Malawi was the failure to allow their children to access food. This resulted in the elderly resorting to adopting negative coping strategies like the selling of green maize, doing piece jobs, or missing meals. Through social pensions, the elderly are able to buy some of the basic food commodities within their households. In cementing the role of a social pension on food security, a study by Begum and Wesumperuma (2012) summarises the findings from the Bangladesh Rural Advancement Committee (BRAC) (2007), reporting a higher proportion of improved body-weight indicators for older beneficiaries than non-beneficiaries. This impact results from the social pension’s funding of food expenditure: 85 per cent–95 per cent of beneficiaries report some improvement in household food security (Mannan, 2010).

During both the focus group discussion with the communities as well as the individual interviews with the grandparents and children, it was presented that the most critical benefit of social pensions in the elderly households is accessing food. This is also emphasised by the LPIG survey which found that 61 per cent of the pensioners in their sample used the pension to buy more food than before, that the pensioners were now eating better and that they had more food security. Croome and Mapetla (2007) had interesting findings in their study: the number of pensioners who claimed to never or rarely have enough food to satisfy their hunger dropped from 80 per cent to 40 per cent after the pension was introduced. Food was also emphasized in this research as the most common expense. It is on this basis that this research concurs with other scholars that social protection contributes positively to the natural capital of elderly households.

In this study it has been emphasised that access to land is one of the critical needs of the poor people. This aligns to the notion that rural...
poverty in developing countries could be addressed through engagement in farming. In a study in India by Gaihas (1991), analysis of rural poverty reduction strategies indicated that much of it was attributed to increased agriculture production.

In this view, the research agrees that enhancing the natural base does contribute to poverty reduction. In ensuring that the elderly have continued access to own land, new agriculture technologies form an important component of strategies for elderly household. Through social pensions, the elderly are able to afford labour for their land and thus have effective production. There is evidence that agricultural production increases the overall well-being of poor families.

9.3.3. Access to health care

Accessing health care was one of the challenges articulated by the elderly during the reviews in the Zomba and Rumphi districts of Malawi. The study found that most of the elderly members failed to access health services due to financial reasons. They were not able to pay for transport to and from the hospital. As stated by Carney (1999), one of the most notable challenges that affects a livelihood of any family is the failure to access basic services. In this regard, the elderly households fail to access medical services.

On the other hand, the respondents in Lesotho indicated the value of having social pensions in accessing medical services, especially provision of transport to the nearest clinic or health centre. This is further supported by the review in Asian countries, especially in Bangladesh, that indicates the role of a social pension in supporting the elderly to access health services. Since most Asian developing countries subsidize the public health care system, this improved access multiplies the benefits. In Bangladesh about 90 per cent of beneficiaries use the social pension to
finance health care services (Mannan, 2010). In Nepal, the Senior Citizens’ Allowance enables older people to afford the costs of travel to district government hospitals which provide higher quality facilities than those of local clinics, as well as needed medicine not provided through the public health system (Samson, 2012).

Considering this benefit, it is then proposed that in addressing the fear that the elderly looking after orphans in Zomba and Rumphi have, allowing them to access a social pension will support this need. This will help them to remain healthy and have a longer period in which to assist the children left in their care. Through this resource, they are able to respond to their various needs in the house. During the interviews with the elderly in Malawi, there was already the fear of going to hospital. However, this fear was made worse by their failure to afford transport to go to the nearby hospitals for treatment for serious diseases. Examples provided in Lesotho indicate that the elderly are able to pay for their transport to hospital as well as their ability to buy medicine from pharmacies. This responds to the needs of the elderly in Malawi where one of their greatest concerns is around transport.

In this regard, it could be presented that the case study of social pensions in Lesotho indicates the value of social pensions towards contributing to elderly households accessing medical facilities. In their old age, health issues are of great concern, hence social pensions are a vehicle to support this need.

9.3.4. Human capital for elderly households

The loss in human capital in elderly households has implications for their natural capital and financial capital (Topouzis and du Guerny, 1999). Generally, as seen in various studies, household ability to manage their labour assets is affected by many factors, including levels of education.
and skills of the family members (Rakodi, 2000). Additionally, health status of the household members is yet another condition that limits households to take advantage of various economic activities happening around them.

One of the role of grandparents as they raise their grandchildren is to ensure that they are able to go to school and finish their education. In Malawi in both districts where this study was conducted, it was recommended that the elderly need support in ensuring they buy school uniforms and stationery to ensure their children attend school. Both absenteeism rates as well as drop-outs were high in the grandparents’ households due to failure to support the children’s educational needs. This in turn resulted in the family moving deeper into vulnerability as there is no improvement in their human capital. Furthermore, it is evident from documenting the challenges in Malawi that loss of human capital in elderly households resulted in failure to cultivate all the land, limited access to financial support for the elderly, and a high level of exclusion from community engagements.

It was, however, encouraging to note the contribution of social pensions in elderly households within Lesotho where this fund has helped the elderly to support their children with their educational needs. As much as the contribution being given to the elderly is limited, they were able to share how they are able to support the children in buying books and pens as well as school uniforms. This responds to the needs that elderly households are looking for. When speaking to the children in the care of the elderly in Malawi, one of the reasons for them doing ganyu during school time was linked to the need to have school uniform and stationery. Failure to access these two critical needs resulting in absenteeism and school dropouts.

It is worthwhile to point out that international evidence regarding social pensions highlights the key role the programmes play in supporting human capital development, particularly for children (Duflo, 2003; 2004; Samson,
For example, evidence from Brazil, Namibia and South Africa documents how old age pensions without education conditions significantly increase children’s schooling, with a particularly strong benefit for girls (Samson, van Niekerk and MacQuene, 2006). This indicates that social pensions have a role in the improvement of human capital in a house through supporting education of the children. In Bangladesh beneficiaries report spending part of their social pensions to support the education of their grandchildren (Paul-Majumder and Begum, 2008) which helps to lift educational outcomes in about half the beneficiary households (Mannan, 2010).

This study is in agreement with the literature that identifies the limitation for elderly households to be participants in development. However, as shown above, through social pensions households could be assisted and be key players of development. By introducing social pensions, households are able to respond by increasing their role in economic activities. This reduces the severity of poverty rather than the incidence of poverty.

9.3.5. Financial Impact for elderly

The loss of human capital leads to loss in financial capital. Due to the elderly losing productive members in their households, most of them are suffering from both human and financial loss. Social pension contributes greatly to financial capital. In Lesotho the impact of social pensions was seen in the way its contributions allow the families to afford some basic needs and empowered them to afford basic household commodities.

Development interventions to reduce poverty have focused on increasing the access of poor people to institutional credit, increasing in investment of productive assets and purchasing of inputs (Samson, 2012). However,
social protection cushions the poor against such interventions and promotes their overall well-being.

The elderly households in Rumphi and Zomba districts lacked financial capital. As a result, they resorted to doing piece jobs to earn extra income. This was the major source of income for the elderly. However, as presented in Chapter six, this is one of the most abused systems in the country as casual work is not regulated and most of the vulnerable are abused. As a result of doing *ganyu*, most of the respondents in Rumphi and Zomba districts failed to even cultivate their land for survival and this in turn contributed to food insecurity.

On the other hand, according to (Samson, 2012), in countries around the world social pensions promote economic activity, not just for beneficiary households but also through spill-over effects supporting local economies. Begum and Wesumperuma (2012) suggests that the increased household expenditure supported by 2.5 million pension beneficiaries in Bangladesh supports economic activity in local markets. Long and Wesumperuma (2012) acknowledges the lack of rigorous evaluations of local economic impacts in Viet Nam, but points out that the main documented expenditure item supported by social pensions is food, much of which is produced locally. Suwanrada and Wesumperuma (2012) make the same case for Thailand’s social pension, citing the tendency for older people to spend the benefit locally and implying positive local economic impacts. This is consistent with similar findings for social pensions around the world.

Midgley (1995) states that for social development to achieve its intended objectives, the state needs to intervene to redirect resources to the most needy people of the community. According to Kaseke (2015), this indicates that the state has a central role to play in looking after its vulnerable citizens and it recognises the fact that markets are not the ideal
way of sharing resources in society, hence the state needs to play a key role in social development.

The Lesotho case study explains the contribution that social pensions have on elderly households and the role of the state. As one of the livelihood needs, social pensions allow the elderly to be independent and self-sustaining, and as such assist in their role of taking care of children. The case study of Lesotho indicates that such activities have other negative consequences as money could be stolen by family members and some of the elderly are abused. These have been isolated cases that need further monitoring, but the value of social pensions remains critical for the elderly.

Social pensions which are within the attainment of social development, improves the quality of life for all (Midgely, 1995). From the discussions above, it is clear that the benefits of development are not shared equally in society hence the elderly are struggling to meet their needs.

9.3.6. Social pension and social capital

As discussed in this research, social capital discussions centre around social relations at household, community and societal level. In Malawi, based on the discussions in this research, this includes perceptions of trust, unity and spirit of participation and inclusiveness by society members. This is the core of survival for community members in Malawi and most African countries. Social pensions are seen to reinforce social capital benefits for the elderly, although there is a re-definition of the nature of social capital currently being embraced in the communities.

The benefits also generate social impacts, particularly in terms of building social capital for older people and strengthening their status in households and communities. Suwanrada and Wesumperuma (2012) finds that older
people use the pension to maintain connections and social networks within their communities by making donations and contributions as socially required for marriages, funerals, and religious and other activities.

This is an area that has been proved to be declining in Malawi. Chapter six presented the decline in community support that vulnerable households relied upon. This has been replaced with a new form of secret friend, or village banking schemes which require one to have money in order to belong to such groupings. The elderly were discriminated against and left out of normal community social networks and activities. Furthermore, the elderly indicated that apart from the church, nobody would visit or support them as they had nothing to offer. It was evident from the study in Malawi that the elderly felt excluded and discriminated due to their age and status in society.

The most profound benefit of social pensions for the elderly in Lesotho was their ability to participate both in village savings schemes and more importantly in burial societies. Burial societies are very important in promoting a sense of belonging for the elderly. In a context where HIV-related deaths have been common, the ability for a family to afford a decent funeral for their household members is only through burial societies.

A study of Nepal's social pension by Uprety (2010) found that shifting cultural norms are weakening the traditional practice of children supporting their parents in old age. Older people with social pensions benefit from improved self-confidence and self-reliance, and increased status in households and communities as even their children do not support them fully (Uprety, 2010). The provision of social pensions does support the elderly to feel part of the community.
Long and Wesumperuma (2012) find a similar impact on older people’s perception of independence in daily life activities from the social pension in Vietnam, even when the beneficiaries live with children and grandchildren. Beneficiaries in Bangladesh report feeling “happy and satisfied” because the benefit provides some economic security, freedom of expenditure, and opportunities to meet their own needs as well as contribute to household resources (Begum and Wesumperuma, 2012). Paul-Majumder and Begum (2008) find a similar effect, where a secure income, however small, provides peace of mind. BRAC’s study documents feelings of happiness among those receiving a social pension. Studies in South Africa and Botswana indicate the satisfaction of the elderly receiving a pension and their feeling of inclusion in society (Hagen, 2007).

9.3.7. Livelihoods and labour market engagement

Through the discussions on social pensions, there is growing evidence of its role to support households to manage their livelihoods. As indicated above, social pensions respond to the holistic needs of families and are able to support their livelihood needs. Furthermore, there is growing evidence that once a household is able to manage its needs, they are able to invest in small-scale income generating activities. This further promotes their overall well-being. According to the OECD (2009), Samson (2007) and DFID (2011), it has been proved in different countries that social protection interventions promote entrepreneurial activity, labour market participation and improved employment outcomes.

In Lesotho, the discussions with the elderly members indicated that from the total interviewed, about 24 per cent were able to invest their money, even though a small amount, into small-scale income generating activities like beer brewing, selling chickens, goats and farm produce to mention a few. This is also seen in Bangladesh where the assessment conducted
indicated that 15 per cent–20 per cent of beneficiaries were able to use their social pensions to acquire productive assets that support income generating activities or improve housing (Paul-Majumder and Begum, 2008; RED/BRAC, 2007). Furthermore, BRAC’s evaluation of the social pension estimates an average investment by social pensioners of Tk149 ($2), mostly in small scale activities like poultry raising. Pensioners in other Asian countries report similar stories. In India, the social pension helps to protect people’s productive assets. This story is repeated in Lesotho, Botswana and Nepal.

It is apparent that social pensions play a strong role in responding to the elderly livelihoods challenges. In Malawi, this study found that most elderly members did not even own any productive assets and were not able to engage in any income generating activities. Social pensions contribute in promoting the well-being of the elderly and they are then better able to support children in their care. Through the livelihood lens, one is able to respond to all capitals necessary for the sustainable survival of the elderly households.

9.4. IMPLEMENTATION OF THE PENSION SCHEME

This research has examined the various lessons and principles necessary for the success of social transfers, including practicability, political will, fairness, reliability and popularity. However, these are all dependent on the administration and implementation processes. It is the aim of this section to apply the lessons from Lesotho in supporting the strategies to be used for Malawi or any other country aiming to implement social pensions based on the recommendations of this research. Such critical factors for the success of a social pension scheme using the Malawi context include design, political process, administration, funding, implementation strategies, and structural issues.
9.4.1. Political process

Through the review of the Lesotho pension scheme, it is clear that the old age pension requires political commitment by the government and other key stakeholders for it to succeed. The old age pension scheme in Lesotho was announced by the prime minister in 2004 to meet the growing needs of the elderly in the country. This was seen as a strategic need for alleviation of poverty of the elderly as well as the children under their care (Winnberg, 2012). This rationale addresses the need to support the elderly looking after orphans in Malawi as they experience similar hardship. It is also aligned with responding to the objectives of social protection.

It is important to understand the implication of such decisions. When a government decides to implement the old age pension funded from its own tax revenue, the result is that there need to be redistribution of resources. As stated by Bloom and Kinnon (2013) this implies that there is a, “net transfer in society from relatively richer to relatively poorer members, and from “more productive” younger cohorts to “less productive” older cohorts. This creates eventual “winners” and “losers” in the sense that an individual may contribute more or less than another towards the financing of pensions relative to the amount they are actuarially due or actually receive support for it” (Bloom and Kinnon, 2013:3). Such a shift requires a leader who is convincing and trusted to ensure that both the winners and losers will support it fully.

Lesotho presents a good case on how the political commitment was clearly seen through the engagements and activities of the prime minister. As much as others argue that the prime minister did not receive any resistance to the implementation of this process due to weak opposition within the country (Hagen, 2008), it is clear that after so many years, there has been no opposition to the implementation of this programme. All
parties have embraced it and it has been seen as one of the interventions that has directly supported the needs of the vulnerable. Pelham (2007) argues that this could be attributed to the prime minister’s style of governance as well as the small country he is leading which allowed him to make decisions and have them acted upon without political turbulence or lengthy administrative procedures that might prove a hindrance in other democracies (Pelham, 2007:12).

It is thus concluded that this political process in Lesotho might have been built on an inclusive and transparent political mediation and dialogue with all parties involved. As stated by Ghelleb, Varela and Woodall (2011:55), “a process of inclusive and transparent political mediation and social dialogue to shape opinion and give voice to all stakeholders is typically necessary”. This is supported by Boeri and Tabellin (2010) as quoted in Bloom and Kinnon (2013) explaining that the success of any political process for social pension is fully dependent on ensuring that all necessary reforms are presented for public debate in a timely fashion and in a clear and understandable manner.

In Malawi, the late president Bingu Wa Mutharika launched a foundation to support the elderly in 2007 and also reinforced the development of the National Policy for the Elderly and People with Disabilities. This policy was developed to support the needs of the elderly to ensure that they are protected. Following his death, the interim president finalised and launched the policy for the Malawi population. By 2013, the policy activities were yet not implemented nor supported. The analysis of both elderly policy and social protection policies in Malawi indicate limited ownership and political will to support the elderly fully.

On the basis of the above analysis, Malawi has the political will to support the elderly as committed to in the national policy for the elderly. The current environment is supportive to such initiatives as evidenced from the
success of other social protection interventions such as input subsidies, asset protection programmes and targeted feeding. Each political party has continued and enhanced the social protection interventions and introduced policies to support them. What is lacking is the inclusion of the old age social pension as an intervention that can directly support the needs of the elderly considering the growing role they are playing as caregivers. This research has explained the extent of the problem, the growing role of grandparents and the need for the intervention by governments.

It is clear within the old age policy that a number of activities have been earmarked to support the challenges of the elderly. This includes the commitment by the Malawi government to support the elderly to access health services, water, sanitation and poverty alleviation schemes. However, there is no implementation of any of these interventions that could directly be linked to the elderly.

In order to move this political commitment further, Malawi will benefit from the success of the input subsidy as this has been received well by the communities. The limitation has been the continued corruption by some of the officials tasked with the implementation of the fertiliser subsidy. As indicated in chapter 3, this has also been heavily politicised as a party agenda and hence needs to be effectively managed. This is an area that requires review and a process that is transparent with clear accounting processes and systems.

As stated by Samson (2012), the establishment of permanent social protection systems requires the development of a politically sustainable social contract. Any government that decides to undertake social protection intervention across the country needs to make choices as to how the resources will be allocated and accounted for. The selection of the ideal beneficiary for any intervention requires support from multiple
stakeholders. There is a need for discourse and understanding about the political attitudes concerning who deserves support and in what form when developing countries move from temporary, usually externally financed social assistance strategies, to social welfare structures which are part of a domestically financed social contract (Graham, 2002). For Malawi, this is already understood as the policy that has been undertaken to support the elderly.

Leveraging on the lessons from Lesotho, it is opportune for Malawi to create the social contract acceptance for the country. Weak social protection and limited social protection development have been attributed to the absence of a clear social contract (Graham, 2002). For example, Barrientos (2012) argues that the weak redistributive element of taxation in most Latin American countries is the result of the absence of social contracts. In this regard, it is clear that there is need for public approval for social pensions for the elderly in Malawi. In Lesotho, this was done by the discussions conducted with the chiefs who accepted the process, as well as sensitisation as early as the 1990s. By determining the public funding resources of social protection, public attitudes and support, Lesotho accepted the policy. It must be noted as well that generally public support is shaped by policy design and political commitment.

As Malawi considers the challenges of the elderly in Zomba and Rumphi, it is evident that the most pressing challenge will be to sustain the political contract that has developed so far, for continued spending and provision in this area, and to extent the contract further to include the poorest. Hickey (2007) explains that the aim of donor agencies should be to strengthen and extend political contracts for social protection where they exist, and to work towards their establishment where they do not. Malawi politicians have always leveraged on social protection interventions for their campaigns rather than for the the impact it has for the poor. Learning from Lesotho, the prime minister and his party have demonstrated a strong
political commitment to approve and allocate resources to meet the needs of the elderly without politicising this. Furthermore, they have moved beyond only social pensions to allocate more resources to other new programmes.

It is this type of political commitment that is conducive to implementation of national scale social protection interventions using tax revenues. The ability to be trusted as a government and as political parties entrusted with this important scheme requires a clear demonstration of accountability.

9.4.2. Financial resources

The Lesotho old age social pension has been viewed as being successful because of its continued implementation due to availability of funds. The limitation for any social protection intervention is scarce financial resources. This results in limited coverage and impact as the intervention needs to remain within the available funding source (Bloom and Kinnon, 2013). The comparison of spending on social protection policies across countries highlights the higher share of spending on social protection in high-income countries as compared with low-income countries (ILO, 2012). Weigand and Grosh (2008) reveals that spending on social protection ranges from 16 per cent of GDP in member countries of the Organisation for Economic Cooperation and Development (OECD) (excluding Latin American, Caribbean and Eastern European countries) to 2 per cent of GDP in South Asia and 5 per cent in the Middle East and North Africa.

In addition to levels of financing, the sources of funding and “financing mix” is important. In Lesotho the government has leveraged on its tax revenue to fund its social pension scheme. Similarly, considering that Malawi has managed to implement other social protection interventions
through its own budget, it is possible to use tax funds for this and remain sustainable.

Sources of financing for social protection include revenues of national governments, aid from international donors, private, community and NGO financing, and household savings and out-of-pocket expenditure (Bloom and Kinon, 2013). Using ILO data, Barrientos (2007) shows that the share of health expenditure financed by government revenue is dominant in the OECD region, but less so in less developed regions. Among the less developed regions, out-of-pocket financing is substantial and external sources of finance are particularly important in Sub Saharan Africa and Asia.

Considering the review on social protection funding for Malawi, it is recommended that Malawi funds this from its own revenue tax as well as seeking support from donors such as DFID, the government of Germany and UNICEF who have been interested to support the social protection interventions since 2004. There is a commitment from donors to support this as long as the country commits to improving good governance after heavy corruption and misappropriation of funds. Malawi will need to be accountable for its implementation with stringent controls. In such a situation, starting with own revenue funds at a small scale then proving to the donors that this could be done is recommended. When the late president Wa Mutharika implemented the fertiliser subsidy it was received with a lot of criticism but over time most governments and donors appreciated the work done.

9.4.3. Benefit size

Another area to consider when implementing social protection is the benefit size or the amount to pay. As seen in Lesotho, the government has successfully implemented the social pension whilst maintaining a minimum
benefit size. Considering the different interventions being undertaken in Malawi, government should consider rolling out social pensions with a minimum benefit size that can be sustained over time (Samson, 2012).

As stated by Samson (2012) it is preferable to ensure that social pension plans for any government take into account three fundamental objectives: adequacy, acceptability, and affordability. If the design of the intervention is done where the benefit is low, the impact on the security and poverty reduction aspects will not be realised (Bloom and Kinon, 2013). Similarly, an excessive benefit will compromise affordability of the government to sustain the intervention.

Affordability constraints create a trade-off between benefit size and coverage (Samson, 2012). If the country designs a programme with higher benefit size, it will compromise the number of beneficiaries targeted for social pensions (Bloom and Kinon, 2013). As seen in Lesotho, the aim is to have a universal non-contributory pension covering the whole country. The population numbers in Lesotho are lower than Malawi and there are more beneficiaries in Malawi, so the pension amount should be adequate. Both real resources availability and political will influence affordability.

Another area for consideration will be the adequacy of the amount proposed. Adequacy refers to how much should be paid for the social pension to be effective (Samson, 2012). The transfer amount must be sufficient to meet the programme objectives. In this regard, having shared the different challenges that are facing the elderly in Malawi, the design of this intervention should take into account the core issues they need to address, namely food, shelter, uniforms and accessing health care. If the proposed amount is able to support them in obtaining some of these items, it will attain its intended objectives. Providing a transfer that is too small will compromise the social protection outcome of the programme, particularly since a relatively small benefit may be too little to outweigh the
private costs to the beneficiaries in receiving the grant or to change outcomes that are less elastic to small changes in income (Samson, 2012).

In using Lesotho as a case study, it has been stated by Hagen (2007) and Winniberg (2012) that for the programme to be successful it needs to be politically, economically and socially acceptable. Lesotho promoted its intervention through sensitising the chiefs, ensuring that parliament was supportive of the idea and using its own tax revenue in the context of limited resources. In doing so, it ensured that the transfer amount that was proposed was useful to the recipient as well as the policy makers. According to Samson, in targeted programmes large benefits can lead to social tensions if beneficiaries become better off than the less poor who are excluded from the programmes. Large benefits can also create incentives for the included poor to remain poor, creating dependency traps.

There is no objective way to consolidate the analysis on affordability, acceptability, and adequacy. As such it is highly recommended that the actual transfer benefit be thought through and agreed upon by all parties.

9.5. INSTITUTIONALISATION AND STRUCTURAL PROCESSES

9.5.1. The role of the different sectors: Ministry of Elderly and Disability

Through the review in chapter 7, the Ministry of the Elderly and Disability has embarked on the process of establishing systems from the national level to community level to support the implementation of various interventions for the elderly. This is a good starting point in understanding and validating the role of this ministry. Through the establishment of the DECO and CECO, the ministry could be in the forefront of registering the
beneficiaries and monitoring their participation throughout the scheme. This involves both registering and de-registering after death.

As recommended through the policy, the District Elderly Committee will be under the districts. This team is responsible for advising local communities on elderly issues, participating in different forums to represent district level interests, and feeding into NECO on the needs of the districts. It will also function as an entry point for any other service provider (NPOP, 2011:23). Apart from the DECO, the communities where the elderly are housed will have their own Community Elderly Committees which will meet the traditional authorities to consolidate reporting and give feedback on the community needs and action points. The CECO will participate in identifying elderly beneficiaries, finding ways to support the needs of the community through traditional leaders and other community leaders, and acting as an entry point for services (NPOP, 2011:24).

It is proposed that this structure could be used to register the elderly at CECO level, then send the names to the district who in turn will send on to the national team for consolidation with the Ministry of Economic Development which has the responsibility of paying for social pensions, if indeed this is implemented in Malawi.

9.5.2. Critical roles of the chiefs

Malawi, like Lesotho, does not have formal identification for its rural communities. Local leaders, chiefs or sheiks in some cases, play a significant role of identification of a member of the community. Furthermore, they are also requested to validate the age group of any member of the community through their own networks. This study leveraged on this system in trying to determine the age of other elderly members who could not remember their age. Considering this role, it is useful that the chiefs be sensitised and involved to validate the information
of the elderly when they wish to participate in social protection interventions.

Elderly members have felt excluded from social protection interventions in their areas, and having social pensions being managed specifically for them will allow their needs to be fully responded to. Chiefs who reside with the communities are helpful with identification of the beneficiaries and also to monitor the usage of the social pensions.

Within this context, the DECO then plays the role of validating the information received from the CECO members as well as reviewing the proper documentation. Social protection interventions are prone to corruption from various sources and it will be the role of the district to validate the members before entering them into the system that is used at the national level.

As presented in the Lesotho case study, the registration process for the elderly in the social pension scheme faced a number of challenges at the beginning. This is seen in different social protection schemes around the world. Most social pension schemes have faced challenges in reaching eligible beneficiaries, particularly the poorest and most vulnerable (Winniberg, 2012).

In ensuring that Lesotho managed this, the government decided on an age bracket of age 70 that limits the numbers but also ensures that it reaches those most vulnerable and old. This made it manageable for the country especially within the limited resources.

The implementation of a social pension requires building critical administrative systems that identify, target and register older people. To ensure that the beneficiaries are eligible, the role of the chiefs comes into play, especially for Malawi. Knowing that having an official identity
document is not feasible for the elderly, the chiefs will need to play a
critical role in supporting the registration process of the pensioners
through personal verification.

One lesson from the implementation of old age pensions in South Africa,
India and Lesotho is that this process requires information to be provided
to all communities to ensure that they are aware of both the entitlement
and the process. Considering the different contextual settings, publicising
the old age pension scheme both in newspapers and print media offers
Malawi a good platform to ensure this process is well managed and
accounted for. As in Lesotho, ensuring that the media is aware of this
process reinforces accountability of the government to the beneficiaries.

9.5.3. Inclusion and exclusion of elderly participation in social
protection

During the implementation of the scheme in Lesotho, both inclusion and
exclusion errors were noted. Inclusion errors were for the elderly who
found themselves participating in the scheme but were not entitled to. On
the other hand, the exclusion error left deserving elderly people out. Errors
of inclusion and exclusion ultimately affect a pension scheme’s poverty
reduction and development impact, and high levels of error may ultimately
erode support for the programme.

One other factor worth considering regarding the implementation of the old
age social pension in Malawi is the high level of corruption that has been
revealed both during the Wa Mutharika administration as well as the
current Banda era. There is an opportunity for the current ruling
government to use funds allocated for social pensions to meet their own
political interests. Currently, the input subsidy programme has been
characterised with heavy corruption by senior government officials as well
as government representatives doing the actual distribution on the ground.
Corruption at all levels has affected the successfully impact that these interventions were meant to have. BRAC’s evaluation of Bangladesh’s old age pension demonstrated evidence of corruption. Of the study’s respondents, 3 per cent reported that they were unable to “pay” for registration into the programme, suggesting that in some cases bribes were required for eligibility (Samson, 2012).

9.5.4. Distribution system

The success of any social protection intervention lies in its ability to be efficient and effective in the distribution process. This is highly critical so that it does not compromise the beneficiaries. One of the challenges facing any intervention that targets the vulnerable is the time it takes to distribute the project/in-kind support. In some of the programmes it takes up to six hours for the beneficiaries to reach their distribution point. Furthermore, it might take more time before they actually receive their entitlement. This undermines the objective of the programme as it may unintentionally harm the beneficiaries.

According to Norton, et al. (2001) and Samson (2012), social pensions represent one of the simplest social protection instruments to implement. Countries with limited administrative capacity and low fiscal capacity frequently choose social pensions as the initial step in the process of building a more comprehensive system of social protection (Samson, 2012). Some countries such as Lesotho and Nepal have successfully implemented universal social pensions and then continued to extend social cash transfer programmes to other vulnerable groups (Bloom and Kinnon, 2013). This is due to the ability to utilise the infrastructures that exist within the communities that in turn supports the implementation of the programme.

In Lesotho, the Lesotho postal services offered its support and was the most ideal model because it exists throughout the country. It is similar to
Malawi, where the post office structures continue to exist in all districts and within sub areas. However, some of these structures are closing down as they are not being sufficiently utilised. Malawians have resorted to other means of communicating using the new technology, leaving the post offices to support banking needs. Unfortunately, amongst all the banks this is the least utilised banking structure.

Apart from this structure, Malawi could also benefit from using the current government system that is used to pay teachers in all the rural areas. Government vehicles are deployed to selected places to pay the teachers and this system could be augmented through adding on delivery of social pensions. However, the risk of carrying any money through such processes is high.

9.5.5. The Importance of management information systems

In reviewing the Lesotho case study, it is clear is that there are no robust management information systems (MISs) and credible monitoring and evaluation (M&E) frameworks as tools for protecting the success of programmes and enabling them to scale up successfully. In the review with the government officials, it was clear that the process lacks a good accounting and monitoring system that allows them to report adequately both the coverage and management of the social pension. This hence leaves room for corruption.

Considering that the districts will play a critical role in consolidation of their old age members, it is recommended that there are systems built both at the national and district level to allow Malawi to manage the programme, address any risks that arise and have a transparent system that accounts through the agreed standards and processes. With the rampant corruption that has befallen the country at all levels, the investment in this system is well suited to social protection interventions. To consolidate village data
then district up to the national level requires a very systematic approach that minimises risks.

**9.5.6 The importance of monitoring and evaluation systems**

The Lesotho case study has highlighted a critical lesson that is fully applicable to Malawi and any other country implementing social protection interventions, including social pensions. This study leveraged on the impact study led by the University of Lesotho two years after the roll-out of the social pension scheme. The study with over 500 beneficiaries was able to provide the basis of learning about the impact of the social pension scheme, challenges and areas that need improvement. It allowed the government to leverage on this evidence to strengthen its intervention. In Malawi, there is limited evidence of any larger research done on its social protection interventions. The fertiliser input subsidy deserves a national level study that could demonstrate the impact of the programme on its beneficiaries.

This analysis presents the need for having a strong monitoring and evaluation system as social pensions are being rolled out. As stated by Samson (2012), a commitment to monitoring and evaluating social pensions can improve delivery processes, document results, inform policy makers of the effectiveness of different approaches, and mobilize political support for programme sustainability and expansion. The investment in a strong monitoring and evaluation system will allow the government to know the achievements of its target, the impact the intervention is having on its population, and areas that need improvement. This is the evidence that it needs to profile so as to implement the system as well as get donor support.
9.6 SUMMARY

Based on the discussion above, the Lesotho case study has proved that social pensions are useful for Malawi. It is proved beyond doubt that social pensions contribute to the basic livelihoods needs of elderly households, including the need for human, social, natural, financial and physical capitals. The beneficiaries in Lesotho were able to meet their expenditure requirements in terms of food, healthcare and funerals. The beneficiaries also indicated that social pensions were their source of income.

Based on the case study, it is recommended that the benefit size given to the elderly be sufficient but also sustainable. It is important for any government to plan for social pensions that are easy to manage within their budget; furthermore, the amount given should provide the elderly household with the ability to afford some basic needs. One critical area to consider is whether the intervention is universal or targeted. With social pensions, it is preferable to consider universalism and limit the age at which one becomes eligible within the resource constraints of the government. With universal social pensions, there is a need to strengthen the targeting process to ensure there is no favouritism and corruption which result in inclusion and exclusion errors.

This highlights the need to ensure that even the distribution process is well managed. Social pensions require efficiency in registration as well as distribution. Using already existing infrastructures will respond to this need to ensure the programme reaches all the people it targets.

In Malawi, the elderly are suffering from discrimination and exclusion due to their limited participation in community activities, as a result of their lack of a resource base that allows them to participate in new forms of social
engagement. Social pensions have bridged this gap and allowed the elderly to effectively participate in various community activities.

Chapter nine presents critical considerations regarding social pensions and the challenges faced in Malawi. This chapter shared some of the nuances of understanding the elderly households and their challenges. Cultural issues play a critical role in elderly households and should not be undermined. As the study explored the elderly challenges, it was able to introduce other areas that are not included in the normal livelihoods framework. The social pension introduced in Lesotho has allowed the elderly to have social connections which is seen as a critical factor for the elderly in the Rumphi and Zomba districts of Malawi.
CHAPTER TEN

CONCLUSION, RECOMMENDATIONS AND ISSUES FOR FURTHER RESEARCH

10.1 INTRODUCTION

Several studies have been conducted documenting the effect of HIV and AIDS on families as well as the society as a whole. It is evident from this research that the elderly, that is grandparents, have taken on a greater responsibility of raising their grandchildren, although limited holistic documentation is available regarding the challenges that they face, and this research has attempted to present an holistic picture of challenges facing the elderly in the Rumphi and Zomba districts of Malawi.

This chapter presents an overall conclusion of the research by highlighting the key research findings in relation to the research questions and objectives. The purpose of this research was to explore and describe the challenges facing elderly people looking after orphans in Malawi. The research went further to discuss the changing role the elderly are playing but also the role of social protection to support the elderly. The research was guided by three key objectives: firstly, describing the challenges facing the elderly looking after orphaned children; secondly, discussing the social protection measures that exist in elderly communities; and thirdly, reviewing how social protection policies have addressed the needs of the elderly.

In this chapter, the discussion will commence with the conclusions and contributions to the body of knowledge. The chapter furthers moves into providing recommendations for responding to the needs of the elderly looking after orphaned children in Malawi. This chapter is enhanced with
areas for future research. It is clear that the elderly population is a vital and valuable resource of any given country, yet they face a number of specific predicaments and risks that, if not responded to, will result in their contribution being lost.

This research has provided evidence of the relevance and effectiveness of social pensions for older persons looking after orphaned children. Different studies have been done on understanding the challenges that the elderly face in their communities. The researcher has used an holistic framework to examine the different livelihood needs of the elderly and their challenges in raising the children in their care.

Within this process, it is evident that social pensions are still a new concept within the social protection umbrella, but are being implemented in various countries around the world. However, as much as they are new, their adoption when done well proves to be effective in responding to social protection objectives. There is still a need to undertake further research in areas around targeting, policy formulation and rigour in impact evaluations of social pensions, but drawing on the lessons from Lesotho, it is evident that social pensions have an important role in responding to the needs of the vulnerable elderly group.

10.2. CHALLENGES FACING THE ELDERLY IN CARING FOR ORPHANS IN MALAWI

The purpose of this study was to explore and describe the challenges faced by elderly people caring for children orphaned by HIV and AIDS in Malawi. The aim was to document the challenges that these elderly people encounter. These were categorised into thematic areas: social, human, physical, natural and economic challenges based on the sustainable livelihoods framework (SLA).
The researcher concludes that the elderly households in the Zomba and Rumphi districts face multiple challenges in looking after children left in their care. As presented in chapter six, issues to deal with documentation of elderly challenges need to have a holistic approach in order to unpack various areas that are critical to their survival. Furthermore, it has emerged that these challenges facing the elderly are deeply interlinked. The situation of being an elderly person is challenging in its own right as they are in poor health and when required to look after children, it becomes more overwhelming. Considering this challenge, the study has also documented the decline in social capital network measures that were used in communities to support one another from shocks. Such measures included extended family networks, and community-led support of sharing food, clothing, and looking after each other needs. These have completely declined as explained further below.

10.2.1. Household basic needs (food, shelter and clothing)

Most research on this topic documents these three critical items – food, shelter and clothing – as the basic needs of the elderly households. This research supports this view as these were mentioned when the elderly were asked about their challenges. With this in mind, it is important that any support that could target this group should aim at addressing these three basic needs and efforts should support their access shelter, clothing and food. Food was listed as the most important.

In attempting to identify ways of addressing these needs, it was evident that different types of support are needed from the two regions. In Zomba, the recommendation was for the government to ensure that it intensifies food distribution targeting the elderly and orphaned children. Such food parcels should include maize, salt, relish and soap. It was noted that this village has been a recipient of various distributions from different organisations and is thus accustomed to receiving support. Contrary to
this group, the respondents in Rumphi district wanted more input support such as fertiliser subsidies and seeds to continue using their own gardens for production. They wanted support from government to work on its targeting mechanisms and ensure that the elderly households benefit from the various programmes on inputs in the country. They reflected on the irrigation farming that had excluded the elderly group due to lack of labour. Some of them had failed to access the input programmes. It was noted that most of them were active in their gardens and had also attempted small scale tobacco farming.

This indicates the importance of understanding the different contexts of the elderly as their needs would vary considering their own orientation of needs. There are some who are more inclined to “be taught how to fish” and some who “prefer to be given fish” and as such it is critical to ensure that the individual challenges of the elderly and what type of support they require to resolve such challenges is fully understood.

Apart from food, the other notable challenge facing the elderly household was inadequate clothing. This was specific to school uniforms as most of them had to work to raise money for school uniforms. The children in their care felt that not having a school uniform undermined their dignity as they were sometimes sent home if they did not have a school uniform. Grandparents agreed on this need and wanted the support of organisations that could distribute school uniforms once every two to three years. The community also stated the need to ensure that either the government abolishes school uniforms or provides uniforms for the neediest students. Evidence from the study shows that most of the children who were absent or sent back home from school were from elderly or orphan-headed households.

Finally, both communities wanted support with regard to proper shelter. Whilst their needs varied, some wanted assistance to renovate a house
whilst others wanted a new house. However, there was a realisation that the government will not provide houses. The emphasis was on ensuring provision of support in accessing building materials like iron sheets, windows and cement so that the elderly could then solicit community support in building their own houses. The community was able to supply certain building materials such as bricks, sand, water and grass but there is a need for monetary resources to ensure that the houses are built.

10.3. UNDERSTANDING ELDERLY CHALLENGES USING THE LIVELIHOODS FRAMEWORK

Having established the basic needs of the household, this research used the sustainable livelihoods framework to understand more in-depth challenges facing the elderly. It emerged that if the research questions limited the discussions on the above three issues presented, namely food, shelter and clothing, it would not allow the researcher to appreciate and understand the root causes of the challenges facing the elderly and the interlinkages. Through the use of the livelihoods framework, more details emerged and the discussion below will present only some of the challenges.

10.3.1. Social exclusion and decline of social capital

As opposed to the accepted notion that African communities always support each other and help each other in times of need, it has emerged through this research that the elderly households are more challenged in their situation because of lack of support from relatives as well as community members. One of the greatest cultural shifts that the elderly have been challenged with is the decline in community connectedness. As stated by some of the members interviewed, “nowadays it is a community where each person prioritises their own personal needs”.

431
Within this notion is the growing practice of the “table family principle”. It is believed that the communities have now resorted to table families where they only prioritise their own children and look after the ones who eat at the same table. Those outside the immediate family are supported only after one’s own household has been taken care of. This was never the principle in African communities previously, and Malawi in particular. Members of the communities would always look after each other and ensure that the neighbours were supported to look after their children. Elderly households were respected and supported as the aim was to ensure that communities retained their cultural values and beliefs through looking after their elderly. Only this group could support and lead initiations, funerals, and rites for other activities in the village. However, the research shows that community networks have completely declined and the elderly are now seen as a burden rather than an asset. This challenges the African proverb that, “it takes a village to raise a child”.

10.3.2. Community fatigue and new forms of community networks

Community support and involvement as part of social capital can have a major impact on mitigating the effects of HIV/AIDS. Communities with high levels of social capital can provide affected households with a variety of social support activities that permit families to adjust to the illness or loss of members. Conversely, communities with low levels of social trust and solidarity can leave households and families to fend for themselves or even isolate those households facing challenges. From this study, it is evident that communities are tired of providing care and support to other households, resulting in exclusion of elderly members. As reflected in this research, people can no longer be expected to cope with the growing demands of vulnerable households. It is widely believed that it is the responsibility of government to take a leadership role in providing care as the community is overwhelmed. This community fatigue needs to be
reviewed further to obtain more insight and to make proper recommendations.

Evident in this study is the rise of the new form of community friendship and connectedness. This is a friendship approach based on the benefits to be realised by both parties and this benefit is more financial. The rise of the “secret friendship” ensures that there is a role that each party plays in that friendship, that is, exchanging of gifts and money. This is the most highly profiled type of friendship that is emerging in the communities in Malawi. Within this type of network, the elderly are not able to participate as they cannot afford to raise the income to allow them to exchange gifts and travel the distances to see their friends. This type of friendship excludes and discriminates against the elderly purely by its nature.

10.3.3. Implications of patrilineal and matrilineal societies for the elderly

In each society there are principles that define family lineage and which have implications on how to take care of the family and the extended family. In Malawi the country is divided into districts and regions, with the North being patrilineal whilst the south and central regions are predominantly matrilineal. These two differences have had implications on marriage as it is difficult for the two systems to integrate. The north practices lobola as a sign of their patrilineal system whilst the South and central regions do not believe in this as they see it as selling their child in exchange for cattle. Equally true, the uncles in the South have more influence over their sisters’ children’s upbringing, whilst in the North the whole network of kin will have influence in the upbringing of the children.

These principles are evident even in old age. It is worth noting that in the patrilineal situation the research found the presence of orphans being
raised by both grandparents or by a single grandparent, whether male or female. On the other hand, in the matrilineal system, the children were kept by both grandparents or only a grandmother and not housed by only a grandfather. With this arrangement the research found a dominance of elderly grandmother-headed households in the south, whilst in the north it was a combination. Once a grandmother dies within the matrilineal household, the grandfather, regardless of age, is sent back home. This principle contributes to greater vulnerability for the children under the grandparent’s care.

The north was known for its property grabbing of deceased family estates and it was believed that being in the patrilineal situation one would lose assets in the event of the man’s death. The research found that through the government-led campaigns on this issue, property grabbing has completely declined. The communities have been empowered to report such issues. During the research, the presence of grandmother-headed households indicated their willingness to stay and look after their grandchildren.

10.3.4. Effect of casual labour on elderly households

Household labour is lacking in most of the elderly households and as such they are highly dependent on the children. As stated by one grandmother, “with age, one can only go to the garden and do two to three rows and you are already tired, we need support on household labour. This is why we fail to cultivate all the land (Elderly respondent, Msondole, 13 June, 2013).

The first felt impact of death of the productive members of the elderly household is the lack of labour. In some of these houses it was the parents of the children who used to go to the field to cultivate and bring home financial income. This gap is mostly felt in the elderly household.
It is well known that *ganyu* is seasonal and as such it is not fully dependable but is also one of the most abused systems in Malawi. Through this study, it was evident to see the dependency on *ganyu* by the elderly. *Ganyu* has its limitations as it forces households to supply labour at lower wages, and leads households to neglect their own land. What is worse is that the amount of remuneration was so low and not adequate to meet their household needs. However, these households spend more and more time doing *ganyu* and the dependence of the elderly on *ganyu* does portray a negative effect on the survival of their household and makes them more vulnerable.

### 10.3.5. Multiple effects on household capitals

Due to the death of productive members, the elderly-headed households are faced with the challenge of ensuring their children finish school. Through this research, it was found that the elderly are challenged in their ability to invest in constructing human capital that will allow them to move away from their vulnerable status. Lack of sustainable support in elderly households results in little attention being given to education. It is well known in Malawi that education is one way out of poverty in the context of a limited industrial economy that can provide opportunities for work. This has a significant effect on human capital.

The loss of human capital leads to a loss of financial capital. The loss of a productive household member implies no source of income for the elderly household. The lack of income within the household then affects the ability of the household to send children to school, engage in productive farming, or access health services and food. Generally, when a household is not able to undertake all its farm activities, the source of income in the family is compromised. As stated in this research, Malawi is an agro based economy with full reliance on produce from the farm. Income thus declines
from both farm and off-farm sources, further rendering the household vulnerable to food insecurity.

Furthermore, this research has demonstrated the declining health conditions of the elderly who have been left to take care of the young children. In this space, it is worth noting that due to poor health, the elderly fail to even pay for their medical needs. In both districts in the study, the hospitals were about 10 kilometres away, requiring the elderly to board a bus or taxi to access such services. Additionally, the elderly have their own perceptions and stigma regarding hospital admissions.

Lastly, being an economy that depends on agro-based interventions, Malawi needs to ensure that it prioritises the needs of the elderly within its development programmes. It is evident through this research that there is a decline in the land being cultivated by the elderly households. Most of them failed to cultivate the available land due to lack of labour, fertiliser and seeds. An investment in contributing social pensions will ensure that the households are relieved of other needs and can focus on farming as a source of food and income for families. Being able to invest in agro-farming will ensure that throughout the year elderly households are food secure. This is fully dependent on their ability to balance their livelihoods needs. The research indicated that provision of social pensions as evident from different countries allow the elderly to support their farming needs.

10.4. ROLE OF GOVERNMENT AND PRIVATE SECTOR IN SUPPORTING THE ELDERLY IN MALAWI

This research has shown that government has not taken very strategic steps to prioritise the needs of the elderly in Malawi. As shared through the policy review and interviews with ministry officials, there has been limited or no intervention that has clearly directed or responded to the challenges elderly people are facing in raising children in their care. The
late president Bingu Wa Mutharika started a foundation for elderly people but this initiative has not made any progress since his death. This initiative has limited geographical coverage and no resources.

The elderly policy remains a good document that has not been used nor followed through. All the structures and processes shared in the document do not exist at the district and community level. There is no intention to ensure that the elderly challenges are in the forefront of the government imitative. President Joyce Banda has prioritised what she calls the Mudzi Fund, where houses are built for the vulnerable community members. Selected elderly people have benefited from this scheme, but this is not widespread and has been heavily politicised.

Looking at Lesotho, there are clear steps that were followed to ensure that there are systems and infrastructure to support the elderly needs. The policies on the elderly have clear linkages to budget hence these are well implemented. On the other hand, what is spelt out in the elderly policy in Malawi does not align with any budgetary plans and has remained static. It may be deduced that while Malawi has policies on supporting the elderly needs, there is no or limited implementation in ensuring that they are supported.

10.5. ROLE OF SOCIAL PENSIONS FOR THE ELDERLY – LESOTHO CASE STUDY

The Lesotho case study has demonstrated the benefit of having programmes that target the elderly members and the effect of having social pensions which are able to have widespread coverage of elderly people across the country. Lesotho is a small country with a limited number of elderly households. As much as the population for the two different countries would indeed differ, the most important fact is the role and commitment of the government. The Lesotho government has shown
the world what a developing nation can strive to do within its limited resources and produce interventions that can have a wider coverage on the most vulnerable members of the society.

It is evident from this research that the Lesotho old age pension has had a good impact in supporting the needs of the elderly households. This has been attributed to the contribution the pensions make in improving the nutritional status of the elderly households, allowing them to take care of their health, helping them to send children to school, participating in burial societies, and being able to afford basic commodities. It is clear that pensions have a great impact on the well-being of the elderly. The ability to spend money on one’s own health is critical considering that most of the people interviewed in this study were in poor health. These benefits are a positive response to the documented challenges facing the elderly in Malawi.

Most critical to this area is the role the government of Lesotho has played in ensuring that this process is sustained. The political, financial and administrative commitment and infrastructure has made this scheme a success in responding to the needs of the elderly. There are critical success factors that need to be documented and shared. The results from the case study have responded to the title of this research on the role of social protection for the elderly. This underlines the view of the researcher that social pensions address the challenges facing the elderly. The evidence on the usage of pension money demonstrates that social pensions would not be abused in Malawi, but rather will be fully utilised to respond to the needs of the elderly households.

The study acknowledges, however, the limitation of social pensions. Social pensions require proper resources and political will. This is an area that needs reinforcement, as one of the most common reasons for the failure of such programmes will be limited financial resources. It is important to
consider different means that could support such programmes. The misused fertiliser subsidy that has been highly politicised in Malawi could be reviewed and some of those funds committed to supporting the elderly interventions. Malawi has committed enough resources to its social protection interventions hence this could be another area that would show its commitment towards helping the most vulnerable.

10.6. CONTRIBUTION TO THE SUBJECT AND BODY OF KNOWLEDGE

10.6.1. Review of challenges facing the elderly from an holistic livelihoods perspective

The primary aim of this research was to review the challenges facing the elderly looking after orphans in Malawi. This brings a new perspective to the issues that have been raised affecting the elderly in this changing landscape. Thus far, most studies on the elderly have focused on the challenges they face without a thorough analysis and in-depth review of the overall holistic livelihoods needs. With the shifts in the social family system, there is a gap in documenting the extent of the problem and recommending solutions to address these. The current policy on the elderly in Malawi has not been developed on the basis of thorough research of their challenges. This research aims to provide a comprehensive overview and analysis of the challenges and the recommendations to meet the needs as proposed by the elderly.

By using the sustainable livelihoods approach, this research has grounded the analysis on the integrated approach that addresses the multi-dimensional aspects of poverty in development. Sustainable livelihood approaches are considered as a set of principles guiding development interventions and analytical framework that allows for an understanding of poverty (Barrentos and Hulme, 2009). As indicated in this study, the
livelihoods approach challenges single sector development to solving complex problems (Scoones, 2009). In this regard, understanding of the challenges facing the elderly requires an in-depth analysis using the livelihoods approach as part of reflecting on poverty in a multi-dimensional way.

By providing this in-depth review, the research has shifted from merely presenting issues at a surface level, but demonstrated the interlinkage of some of the challenges that are faced by the elderly as they look after the children in a context of shifts in inter-generational requirements. In this regard, through the livelihood approach lens, the grandparents are at the centre and the study has focused on how they organised their lives rather than concentrating on their impoverishment as the 1980s household and survival studies used to do (De Haan, 2012). Grandparents were previously expected to provide wisdom and be the custodians of culture, but now they are expected to raise a second generation. From this review, it is evident that their challenges are many and interlinked and there is a need for co-ordinated efforts by government and NGOs to support their needs. By validating these challenges through the interviews, community focus group discussions and policy review, the researcher is able to present a more nuanced analysis of the elderly challenges.

Whenever the topic of the elderly and orphan children is discussed, there is a tendency to present the common issues and promote different individual interests on the subject matter. Most organisations will present the research problem that allows them to seek funding for a particular model or approach and as such they will align this topic to conform to their problem analysis in order to ensure that the intervention to be approved is aligned to this. Furthermore, different researchers have approached this topic without using any framework or theory. In this regard, research of this type has promoted the simplistic view of the effect of the HIV pandemic on the elderly looking after children and the burden of fostering for the elderly
(Foster, 2000; Ssengonzi, 2009; UNICEF, 2003). This type of study has gained the attention of various reserchers and the aid industry which have presented the elderly and orphaned children as helpless and pathetic members of the society (Ennew, 2005; Meintjes and Bray, 2005). This research has moved away from the simplistic view and analysed the challenges facing the elderly and orphaned children in an holistic and systematic way.

When this research was undertaken, there was an effort to shift the perceptions that the challenges facing the elderly were obvious and have been documented through the years. Most literature on orphaned children and the elderly has recently shifted from looking at their vulnerability to that of understanding their resilience and supporting them in that regard (Becker, 2007). This research has contributed in this manner where the resilience of the elderly is being reflected using the livelihoods approach as a critical development lens. It was worth noting that with the responsibility of having to care for orphaned children, their situation has changed. There are deeper needs of the elderly and their challenges are related. The increased burden of meeting family livelihood needs has also had a significant impact.

Through review of each area, the linkages and deeper challenges are identified. It is important to note that for the elderly household, the role of the children in accruing income for the family is more pronounced than in a normal household. They are equally regarded as carers because the elderly themselves cannot afford to work. Such scenarios provide evidence that the challenges these households face affects the upbringing of the children deeply.

The study has revealed that across different elderly livelihood needs, the elderly are confronted by challenges that constrain their role in the upbringing of the children. These issues, like the increase of *ganyu*, the
failure to cultivate land, and school drop-outs within their household show how disturbing and challenging their situation is. However, through this study there is clear consensus on the role that social pensions could play in responding to these challenges and there is extensive compelling evidence to support the role of social pensions in addressing the needs of the elderly.

10.6.2. Enhancing the Sustainable Livelihoods Framework

The sustainable livelihoods framework presented in this research promotes the understanding that sustained development is only successful if it is based on evidence of the needs of the household or community. As an analytical framework, the SLA focuses on the assets that are available to poor people and the strategies that are employed for their survival. This is a shift from their basic needs as a previous development approach towards empowerment of poor people to be able to make the best choices (Farrington, 2002).

In this regard, before any organization or government decides to undertake any development, it must consider what needs to be done, as well as how and why. Adopting a people-centered paradigm enables one to appreciate multiple realities that face individuals, being economical and political as well as inclusion of local knowledge perceptions and history of that particular community (Yaro, 2004). It is clear in many development theories and practices that this is perceived as standard approach for development programmes. However, it is even more evident that most development work continues to use top-down approaches towards projects planned to deliver change to a population without thinking through feasibility and needs. This research supports the sustainable livelihood approach, especially with the focus on two concepts, livelihood and sustainability. The combination of these two contributes to the building of a
holistic framework for understanding the needs of the elderly resulting in a livelihood outcome.

The process for the Malawian government in developing its elderly policy still lacks the evidence of research having been undertaken to understand their needs and then present a policy that is aligned to the proposed documented needs. This is the only way that programmes are able to bring the desired developmental changes.

By documenting these challenges using the SLA, which is strongly people-centred, the researcher involved the elderly, children and communities to examine the challenges they face using a co-ordinated research tool aligned to the capitals presented in the sustainable livelihoods approach. This affirms the rationale of the SLA around forcing an engagement with those meant to be helped by any policy or intervention. One cannot carry out this process without the involvement of the people hence the documented challenges in this research bring out rich information about what the elderly and the children in their care perceive to be their needs and how they would like to be supported. The SLA cannot be done from an office hence it is indeed only with participatory approaches that it provides opportunities for community-based learning where the researcher was able to learn from the community but also where community members were able to argue and learn from each other.

As stated by Chambers and Conway (1992), a livelihood is sustainable if it can cope with and recover from stress and shocks, maintain or enhance its capability and assets, while not undermining the natural resource base. The elderly in this study have been vulnerable due to the shock of HIV and AIDS which has left orphans in their care. Through the livelihoods approach, one is able to understand how they have survived and coped and mechanisms that could be put in place to support them.
This study has also enhanced the notion that the SLA is holistic. By documenting these challenges using the SLA, this research has allowed for a clear understanding of the challenges but has also managed to identify some of the loopholes within this framework and has made suggestions for reinforcing the SLA. The challenges facing the elderly have been documented in full. This is in contrast with the various scholars and researchers who have criticised the livelihoods approach for linking micro realities at household level with macro or meso policy levels (Norton and Forster, 2001). In contrast, this research provides evidence that the challenges facing the elderly require support from various key players in relation to policies, institutions and organisations. The research agrees with the point that issues affecting people cannot be packaged into three areas of policies, processes and institutions as they are broad and requires specific details. However, the fact that there is a linkage from the household level to macro issues is critical for understanding the elderly household.

The SLA indeed shows the value of engaging multiple sectors that have an effect on the elderly household. For example, it is clear that loss of human capital results in failure of the household to engage in financial and natural capitals, hence the roles of agriculture and education in relation to household needs are interlinked. The approach brings out social, economic and natural assets as capitals that have been promoted for rural development and thus builds on evidence of what worked in the community and presents this is a standardized framework. It is evident from the documentation that there are deeper challenges facing the elderly.

This study has reinforced the understanding that change happens and livelihoods are indeed dynamic (Conway and Chambers, 1992). Before the households lost productive members of their family, their needs were different. Due to the HIV and AIDS pandemic, the effect on such
households has been seen in the new responsibilities of bringing up children in their old age. As in the SLA indicates, history is very important to understand why households are the way they are and what inevitable trade-offs and conflicts occur when prioritising household needs (De Haan, 2012). The understanding of such issues from the beginning as part of the analytical framework provides the SLA with a clear advantage with regard to holistic presentation of issues.

Through this research it may be deduced that demographic, social, and economic transformations are responsible for significant and rapid change in the sources of livelihood and protection in old age. Most of the elderly households in this study have gone through a rapid change process. Such being the case, rapid demographic change due to the loss of the productive member of the family has resulted in the capacity to respond to this challenge being stretched. It is evident that the effect of HIV and AIDS on the elderly has diminished the role they played in the past and has forced them to be productive members of the family in their old age. This is a significant change for them and does not align with the demographic expectation even though it has become common.

As much as the study has enhanced the role of SLA in understanding the livelihoods needs, it is also important to enhance this framework. In documenting the challenges facing the elderly, it was evident that one capital could be more important in the elderly household. It is not easy to assess these capitals as they are highly dependent on the context. For elderly households this study presents the importance of human capital. The absence of the productive member in the elderly household has affected their ability to attain all the other capitals like finance, natural and physical capital. In this regard, the recommendation is that in applying the SLA, it is important to ensure that the context of the study is known and that critical capitals are understood. The lack of human capital in elderly household is a serious concern. The recommendation is for policy makers
to reinforce this area and support the elderly in the education and upbringing of the children so that this human capital is replaced.

It is apparent that the SLA has resulted in detailed analysis of the challenges facing the elderly. This provides a useful tool. It will be important to ensure that these challenges are indeed translated into interventions, such as policy, that will help the elderly. The researcher recommends the use of such information for the enhancement of the elderly policy for Malawi. This process was indeed very liberating for the elderly to be able to share their information, but this research will only be relevant to them if it is able to bring about the changes that they need.

10.6.3. Challenges to the SLA and recommended enhancement for elderly households

10.6.3.1. Role of culture

The evidence from this research further challenges the SLA in that it does not consider all other factors necessary to understanding the elderly households’ needs. As a result, this study further proposes necessary enhancements. Such enhancements include areas like the contribution that cultural practices make in supporting elderly livelihoods. These contributions have not been included as a key asset in the SLA. The evidence from this research suggests that culture is both an asset as well as a transformation process that is both an internal and external condition that influences the flow of activities for every household. This is due to the fact that the changes in cultural practices affect the overall well-being of the household. In the matrilineal system, the elderly are more vulnerable because the death of a grandmother results in new child-headed households being formed as the grandfather is sent back to his original home village. This is unlike the patrilineal system where, in most cases, the grandmothers remain in their homes even after the death of their
partners. Furthermore, this study shows that grandmother-headed households are greatly affected as the support expected from uncles has greatly diminished, hence the burden of care falls to the grandmother.

The concept of culture is used in different areas to mean different things. Development agencies understand culture to be “total and distinctive way of life of a people or society” (UNESCO, 2001) whilst the Commonwealth defines culture as a “whole complex of distinctive spiritual, material, intellectual and emotional features that characterise a society or social group” (Commonwealth Foundation, 2008:1). In understanding the value of culture in this research, the definition made of the Commonwealth Foundation is relevant to understanding the role of culture for elderly livelihoods.

In reviewing the various understandings of livelihoods approaches, evidence shows that limited focus has been put on the role of culture and development. In some instances, culture is seen as part of the human capital as it controls engagements and interactions (Norton et al., 1994). Others argue that culture is part of understanding the concept of vulnerability (Cahn, 1992). For one to appreciate vulnerability, it needs to be reviewed from a cultural perspective. Others have seen culture as part of understanding the capital assets, in that is it is central to the examination of physical, social, economic and human assets (Daskon and McGregor, 2012).

In contrast, this research presents arguments that culture does not support other assets, but that culture should be thought of as another asset within the livelihoods pentagon, especially when analysing elderly households. This research presents the notion that culture capital defines elderly households in the form of values, beliefs and traditional practices and generates feelings like pride and identity critical for livelihood activities. For one to understand the elderly households, cultural capital encourages
appreciation of cultural traits that contextualise developmental needs. Livelihood approaches promotes bringing people to the centre, hence culture is an identity of those people which needs to be examined as its own capital. According to Daskon and McGregor (2012), culture should be central to development processes and discussions. They argue that culture is an identifiable sector for asset-based development programmes and research.

It is evident that in vulnerable situations most people will depend on their values, customs, traditions and beliefs as a critical knowledge base in strengthening resilience and sustaining livelihood systems (Daskon, 2010b). In this regard, this research argues that culture is a vital component of human society and it is critical in shaping people's choices. In most development debates, culture remains a silent and undervalued asset. This study has embraced the contribution made by Sen (2004) where he states that the pursuit of cultural freedom is essential for development. This provides opportunities to celebrate, respect, nurture and preserve community values, knowledge and customs. Huntington (2000) argues that:

... integrating values and attitude change into development policies, planning and programming is a promising way to ensure that in the next fifty years the world does not relive the poverty and injustice that most poorer countries, and underachieving ethnic groups have been mired in during the past half century (Huntington 2000:6).

In enhancing the livelihoods framework, the research has demonstrated the value of culture in understanding the differences between matrilineal and patrilineal systems towards elderly households. This research acknowledges the absence of culture in the asset pentagon of the livelihoods approach and shows the significance of cultural capital in sustaining livelihoods and shaping understanding of elderly challenges.
10.6.3.2. Inclusion of examples of livelihoods strategies

In discussing areas for change, there is a need to consider presenting examples of strategies that contribute to the changes that are needed to transform a household. Considering that some interventions will only support one asset, this study has documented and provided the evidence from this study and other studies that social pensions, specifically for the elderly, contribute to overall well-being as presented in the framework adapted below. As such, in relation to livelihoods strategies for the elderly, the paper recommends bringing in social pensions as a transformative change that will support elderly livelihoods. This framework should present examples that have worked and addressed a particular need. The research has provided evidence of the positive impact of social pensions in relation to capital assets and the role of government.

10.6.3.3. Redefining social capital

Woolcock and Narayan (2000) state that “It is not what you know, it is who you know”. This is the notion that for years has defined the importance of social capital in societies as presented in this research. The core of social capital is the fact that an individual’s family, friends and associates constitute an important asset that ensures that individuals are able to survive during a crisis. According to Moser (1996) and Narayan (1995), those communities that have a stock of social networks and civic associations are in a stronger position to confront poverty and vulnerability and resolve disputes (Schaft, 1998) and to take advantage of new opportunities (Isham, 1999). It is thus evident that social capital has a critical role to play in development. Unlike in the past traditional, social relationships and way of life were viewed as a deterrent of development (Moore, 1997). The focus in the past was on social relations as obstacles, old social institutions were deemed not relevant, ancient philosophies
were expected to be scrapped and people who cannot deal with progress have their expectations of a comfortable life frustrated (Moore, 1997). However, this changed over the years with social capital seen as a critical component of economic development (Woolcock and Narayan, 2000).

Social capital has been central in economic development. Various scholars have argued that social capital provides opportunities for mobilising economic growth (Woolcock and Narayan, 2000). The authors further state that the nature of interactions between communities and institutions hold the key to progress in development in a given society. This has traditionally been the strength of most African communities in that they have strong social capital and are thus able to be resilient to various shocks.

However, evidence from this study indicates that the notion of social capital where community networks are central to improving general livelihoods of societies has completely changed. It was believed that communities always helped each other and there was always support to be expected from relatives and community members. This phenomenon has changed and evidence suggests that this is attributed to community fatigue in offering care and support. The problem is compounded by the extent of the challenges faced by households as a result of HIV and AIDS. As a result, trust and ability to leverage on resources that come with the social networks is constrained. This has had serious implications for the resilience of elderly households as their strongest social capital of being dependent on the social networks is no longer available to them.

The study further reveals other enhancement in the forms of social capital like belonging to secret friendship groups and being members of village banking schemes. However, these growing forms of social networks have limited elderly membership because the prerequisite for participation is one’s ability to contribute money which most of the elderly do not readily
have. With this, the notion of inclusivity for social networks is not true as the evidence in this study indicates social exclusion for elderly households due to their age, gender and lack of physical engagement in the processes. Furthermore, although previously there was less gender consideration embedded in all community networks, this study reveals that this has increased and most of the new groups favour one gender.

10.6.3.4. Growth of negative coping strategies to be included in SLF for elderly households

Another addition to the livelihoods framework is the inclusion of negative coping strategies as part of the vulnerability context. The elderly in this study indicated that they are not able to carry out subsistence activities as well as progressive income generating activities to meet their household needs. On most occasions, the elderly resort to negative coping strategies which renders their households more vulnerable. This means that the children in their care have to survive under conditions of severe economic stress. As much as it is clear from the study that most grandparents took the children in their care as a great personal and emotional commitment to support their own grandchildren, this decision overshadows the reality of the economic challenges they face. It is on this basis that there is the need for the SL approach to consider the inclusion of negative coping strategies which can result in a cycle of poverty for the elderly looking after orphans. As stated by Nyambedda, et al., (2003), most of these caretakers are too old to care for additional children, hence the possibility of adopting negative coping strategies is always high. This should thus form part of the vulnerability context within the livelihoods framework.

This research has presented the growth in negative coping strategies in elderly households due to limited support by government and other stakeholders. The original livelihoods framework does not accommodate the fact that if the transformation structures, that is policies and
government support, fail to respond to the needs of the household, the families resort to adopting negative coping strategies which further affects their vulnerability. Such negative livelihood strategies as encountered in this study include engaging in activities like casual labour (ganyu), selling alcohol, school drop-outs, selling green maize, and begging.

10.6.3.5 Health and Elderly households

The sustainable livelihoods framework treats health as part of human capital. This promotes the tendency of treating livelihoods and health as simplistic issues. This division is seen even in literature and policy debates where health is a subject that is superficially discussed. However, health and poverty are strongly related for all age groups, and this relationship may be particularly significant in later life (Hardiman and Midgley, 1989). This research has examined the effect of health on elderly households and in the discussions, it is clear that health is an important asset for elderly households and poor health greatly affects their livelihoods.

Health status and access to health services for elderly poor people are influenced by both their age and condition of poverty. Most of the older people in this study could be categorised as poor and indicated that they were not able to access the health services in their community. Throughout the study, most of them were suffering from one or more chronic diseases. It is evident that most of the elderly in this study were facing both direct and indirect barriers to health services. As such, it is worth considering health as a separate capital within the livelihoods framework. Most of the elderly households fail to access other services due to their old age, and health as a separate asset for elderly households brings out the value of understanding the role of health in promoting social development.
For one to fully understand the needs of the elderly households, there is a need for the understanding of their health as it affects the overall well-being of the family. Elderly households cannot be viewed in the same manner as any other household. The evidence in this study indicates that most of the elderly households had chronic illnesses. This coupled with old age made them incapable of delivering the needed support to the children under their care. The lack of recognition about the physical health for elderly limits the holistic review of livelihoods as such it is critical to include this area.

Figure 42 below depicts the diagrammatic recommendation of the recommended changes. Failure to have livelihood strategies results in negative coping mechanisms which need to be reflected in the SLF within the vulnerability context section. For the elderly household, the example includes the growth in investing in *ganyu*, which has resulted in taking children away from school for them to survive, affecting the need to grow human capital. Other negative coping mechanisms in this study have included failure to cultivate the whole land, missing meals, eating green maize, dropping children out of school and beer brewing. All these negative mechanisms, if not responded to, exacerbate the situation.
10.6.4. Guidelines for evaluation of elderly households and role of social protection

One of the expected contributions of this study to the discussion around the elderly and social protection is the fact that it provides a reference or guideline for assessing the impact of any intervention on the elderly. This is evident from the fact that most of the studies that have been documented reviewing the needs of the elderly have been done without any systematic framework. These studies could be biased towards...
ensuring that the research responds to specified terms of reference that guide the authors or funders of the research. By using the livelihoods framework to document the challenges, the research presents a foundation that will require any evaluator to look at elderly households holistically within their context.

As the researcher documented the challenges within each livelihood capital, it become evident that social pensions respond to these challenges as indicated by the case study of Lesotho. As this study presented the different components that the elderly household is composed of and their challenges, social pensions were proving to respond to such challenges. With this, for any organisation that would want to measure their impact, it is evident that the baseline study, or any assessment, should ensure it looks at all different needs of the elderly household rather than focusing only on finance and health as the common areas that have been studied and establish whether their intervention supports the elderly household.

It is evident that documenting and evaluating the challenges of the elderly requires an holistic approach. The challenge of this shift becomes how to ensure that there are resources that would allow any organisation to undergo such an holistic review of the challenges and needs of the elderly. Regardless of the resources, it is important to note the advantage of having clearly documented research that looks at the issues affecting the elderly from all angles and makes valid recommendations.

10.6.5. Framework for understanding holistic needs and support for the elderly

Reflecting on the enhancements and some areas that need improvement, this research presents a framework that will address the needs of the elderly. It combines the livelihoods framework as the analysis tool to
understand the needs of the elderly and the need for social pensions within the social protection umbrella as the response mechanism for elderly households.

The livelihoods approach has been a contribution towards poverty reduction and is regarded as one of the development approaches that has moved away from conventional approaches towards poverty reduction as well as the recent analysis of the nature of poverty (Kranz, 2001). This approach is seen as holistic because it promotes the understanding that poor people need to have a relationship with economic growth and they need to participate in it fully thereby putting them at the centre of development. Furthermore, this framework brings attention to the fact that poverty is conceived by the poor themselves and it does not only look at low income but other factors like health, social services, physical and economic dimensions. There is a realisation that poor people best know their situation and needs and must therefore be involved in any development work. Analysing the challenges facing the elderly, using the livelihoods framework for analysis brings out the different livelihood needs in both depth and breadth.

Evidence in chapters 7, 8 and 9 shows the detailed information that is received through the utilisation of the livelihoods approach as the analysis tool towards understanding the challenges facing elderly households.

Complementing the analysis is the role of social protection, in particular social pensions as a response to elderly livelihood needs. Generally, systematic scholarly work in social protection is recent and dates back to the 20th Century. However, scholars have linked social protection as part of social development (Midgley, 1995) Social development focuses on local community development with an emphasis not only on economic development but on improvement in health, education, environment and standards of living. Arising from this, most scholars that have supported
social protection as a development agenda suggest that social protection allows people to participate in development (Patel, 2005). Gray (1996) states that it discourages dependency, promotes active participation of people in their own development and employs a multi-faceted multi-sectoral approach. In this view, social protection is seen as promoting the role of the state and other actors in development, and innovation at household, neighbourhood and community levels (Mupedziswa and Tseane, 2013).

This advocates that the social pension is indeed an ideal intervention for elderly households. Social pensions fall within the ambit of social protection as part of social development (Kaseke, 2015). Within the international discourse, the main role of social protection has been seen as lifting constraints to human and economic development posed by social risk, whilst others look at it as satisfying the basic needs, and yet others state that it is a rights-based approach to human development (Barrientos and Hulme, 2009).

The Lesotho case study presented in this research profiles the social pension as an important social development instrument and policy tool for addressing the needs of older persons in order to support their overall well-being. In a developing country like Malawi, where most of the elderly population are among the poorest, the introduction of a social pension would have a positive impact in reaching out to the majority of the poor. Social pensions would act as a poverty cushion for elderly members of the society to meet their needs in raising orphaned children.

In Figure 43 below, the study presents the effect of HIV and AIDS for elderly households which has resulted to their vulnerability. It needs to be known that there are various factors that contributes to vulnerability and makes elderly households prone to poverty. This study used one example of the effect of HIV and AIDs as a contributor to household poverty.
Having reflected on this, elderly households require various assets as such to understand the depth of their poverty and livelihoods needs, one has to review all livelihood assets to have a systematic and holistic picture of their needs.

Understanding these challenges alone is not adequate as there is need for interventions that could address the elderly livelihoods needs. As such, this study presents social protection through social assistance as the intervention that does respond to the elderly household needs. The study recognises that social protection is a broad field and targets various members of the community. Through a comprehensive review of the Lesotho social pensions, the study presents social pensions as the intervention that does respond to all areas of elderly livelihoods.

Based on this research, it is evident that social pensions have proved to respond to the livelihood challenges of the elderly. Various studies done in Lesotho have demonstrated the impact that social pensions have on elderly households. This research has applied the livelihoods framework that was used to document challenges facing the elderly within their different capital assets and presented the benefits of social pensions using the same livelihoods framework.

Evidence from Lesotho indicate that social pensions have enabled older people to have access to various services such as health care, education, food, productive assets and allowed them to participate in social networks.

By using the SLA framework, the researcher was able to conclude that social pensions are likely to address the multiple challenges facing the elderly in the Rumphi and Zomba districts. The research used an holistic approach to document the effect of social pensions. It is concluded that to understand the challenges facing the elderly, one would need to use the
livelihoods framework to obtain a comprehensive picture. To support the needs of the elderly, social pensions are able to address the multiple challenges facing the elderly and social pensions would therefore support the elderly livelihood needs.

**Figure: 43: Framework for understanding and supporting elderly livelihoods**

Source: Own, 2014.

**10.6.6. Reference for various stakeholders to develop sustained interventions**

One important outcome of the research is the enhancement of other studies which indicate that elderly people looking after orphans have many
challenges due to their new responsibilities and their advanced age. In building on previous knowledge, this research has presented their situation and shared their challenges in a detailed manner through the livelihood lens. This study discussed and presented the role of social pensions for the elderly which indicates that the social pension plays a critical role in supporting the needs of the elderly in Africa.

The impact of a social pension has been documented and this study has presented the issue with a focus on the elderly looking after orphans. The incidence of HIV/AIDS infection in Africa and in most developing countries continues to increase and there seems little prospect of a change. As such, it is important to accept the fact that more children will be raised by grandparents. As this situation becomes accepted amongst various players, it is important to use evidence-based research to develop long term interventions and propose solutions that will offer lasting results.

This research has allowed for more documented reference for the role of social protection for the elderly, especially using the case study of Lesotho on how the social pension has responded to the needs of the elderly. In this regard, it presents information that could be used to justify policy direction as well as the development of long term interventions to support the needs of the elderly in Malawi.

10.6.7. The contextual issues associated with social pensions

Social pensions have resulted in many positive benefits. One profound benefit in the context of Lesotho is the ability of the elderly to participate in burial societies. In Southern Africa, specifically Swaziland, Lesotho and South Africa, burial societies are very important as an insurance for death in low income earning households. These are households that cannot afford formal pensions so their ability to pay for funeral costs is covered
through social pensions. The ability for elderly households to manage their own funeral needs is regarded as a good informal insurance.

Apart from these positive benefits, this study has highlighted the inter-generational challenges within elderly households due to social pensions. There have been conflicts within households as children believe the elderly are not using the money to support them. Furthermore, incidents of theft within some households have been reported.

Incidents of rape and hijacking have also been shared in this study, but these require further investigations to establish the extent of the problem. It is discouraging to note that elderly people are attacked or killed due to them benefiting from the social pension scheme.

10.6.8. Overall research contribution to theory

This research conclusively reinforces the role of social protection for supporting the elderly livelihoods. The researcher’s contribution to theory is embedded in the premises of integration of enhanced and upgraded livelihoods framework as an analysis tool that provides an holistic picture of understanding elderly household challenges and needs and on the notion that social protection through social pensions can be an intervention for supporting the household challenges of the elderly. The combination of these two frameworks results in an holistic and systematic analysis of elderly livelihoods and subsequent support necessary to respond to their challenges.

10.7. AREAS FOR FUTURE STUDY AND RESEARCH

This research has highlighted various challenges facing the elderly who are taking care of children. It has emphasised the contribution of social
pensions to the elderly households. A number of issues have emerged that will require further research as explained below.

10.7.1. Social protection to reduce social exclusion and discrimination

Throughout the discussions in this paper, it has been presented that most elderly people feel socially discriminated against because of their failure to engage in various community activities. There is a need for a detailed review on the role of social protection in reducing social exclusion and discrimination. This requires further indicators on measuring discrimination and exclusion.

10.7.2. Cultural dynamics and livelihoods of the elderly

Culture plays a fundamental role in every household. Practices such as patrilineal and matrilineal control have implications for how households cope with different vulnerabilities. There is a need for holistic documentation on culture and livelihoods.

10.7.3. Effective institutional arrangements for social pensions for the elderly

In Lesotho, cases of rape and theft have been reported because of social pensions being paid. There is a need to investigate the best institutional arrangements for the implementation of social pensions to safeguard the elderly and support the objectives of the social pensions.

10.7.4. Other unintended results of social pensions and mitigation strategies

While most studies focus on documenting the positive effect of social pensions, there is a need for a deliberate move to document the
unintended consequences of social pensions like inter-generational challenges that emerge in accessing social pensions.

10.7.5. Community fatigue and community vulnerabilities due to AIDS epidemic

The research highlights a new model of community involvement and engagement. Most communities are now tired of supporting vulnerable groups and the support that was being shared across community members has declined. There is a need for further research on new forms of community support and their relationship to the new challenges affecting communities.

10.8 SUMMARY

This study continues to leverage on work done by various researchers on the effect of HIV and AIDS on the elderly household. It is evident that the HIV and AIDS epidemic will continue to impact on all sectors of society. In most countries, the focus continues to be on ensuring that testing and treatment is widely available through the health services. As seen in this study, the effect of this in Malawi continues to be seen on the elderly who are raising children orphaned by the epidemic. There are many challenges that the elderly members of the community face due to the new role that they have taken on of raising orphaned children. This was not traditionally their role, especially in their old age.

The epidemic has increased livelihoods insecurity and rural poverty in elderly households, which has resulted in increased food insecurity, school drop-outs, and an increase in negative coping strategies for the elderly headed families. This research has documented the critical challenges faced using the livelihoods framework. The sustainable livelihoods approach assesses the livelihood assets essential to the elderly such as
human capital, financial capital, natural capital, physical capital, social capital, political capital and cultural capital. Using these assets and capabilities, elderly households develop livelihood strategies to cope with their physical, social, economic and political environments. Such strategies discussed in this research include casual labour, farming and begging, which are deemed as negative coping strategies.

The context in which the elderly households operate in Malawi has rendered them more vulnerable to continued external shocks. The decline in dependency on social capital in the communities has rendered elderly households unable to cope with the responsibilities of children left in their care. The elderly households in Malawi are not considered as sustainable households as they are unable to adjust to these threats without compromising their future ability to survive shocks. HIV/AIDS has been a great shock which has resulted in increased vulnerability in elderly households.

The Lesotho case study profiles social pensions as an important instrument and policy tool for addressing the needs of older persons. In a least developed country like Malawi where most of the elderly population is not amongst those with sustained income, having a social pension is a drive towards reaching out to the majority of the informal sector members. Social pensions are seen as providing an alternative for elderly members of the society to meet their needs in raising orphaned children.

The conclusion is that indeed social pensions are one of the tools that could respond to the needs of the elderly in Malawi. However, there is also a need to ensure that this covers all the districts in the country. The geographical coverage makes this approach more effective and will promote a response to the most vulnerable people in the community. Ensuring that the transfer value is manageable is critical in adopting social pensions. In Lesotho, the elderly are receiving M450 which is manageable
within its budget. Equally true, this is a critical area to be considered in Malawi, since it is essential that social pensions target all elderly persons above age 70.

This research has demonstrated that social pensions contribute to meeting the basic needs of older persons as seen in the positive results in a number of developing countries. The benefits in the Lesotho case study indicate that the elderly use their pension for food, health care, social services, and clothing. These are the most pressing needs of the elderly as presented in this research. In Lesotho, social pensions have assisted the elderly by tackling social exclusion as they were able to contribute and participate in funerals and burial societies.

Social pensions are seen as a vehicle to respond to elderly challenges, and there is need for investment in ensuring that social pensions are designed according the context of the country and are built on a strong evidence base. In Malawi, the limitation in the policies for the elderly is their lack of evidence-based research to design the policies and interventions. There has been limited evaluation or assessment done on the effect of other government-led social protection programmes.

Despite these caveats and others mentioned throughout the research, this paper unequivocally supports the positive role of social pensions in responding to the needs of the elderly and believes that Malawi would address this challenge by designing such a programme. The evidence from Lesotho presented in this paper indicates that social pensions have been useful in improving older people’s well-being. However, Malawi will need to consider its own specific context in the event of implementing social pensions.
10.9. STUDY RECOMMENDATIONS

In this section the researcher presents some of the research recommendations based on the overall study done in Malawi. These recommendations are based on the purpose of the study that was aimed at exploring elderly challenges and understanding the role of social pensions.

10.9.1. Build human capital for elderly households

This study has shown that the absence of productive family members contributes significantly to increased challenges for elderly households. In responding to this challenge, it is recommended that interventions in Malawi should consider reinforcing and encouraging the education of orphaned children through provision of bursaries and incentives that will motivate them to continue with education. Their situation is challenging as they lack financial support and it is easy for them to drop out of school. In most cases, orphan-headed households are given priority but this research has shown that even children under the care of one or both grandparents are equally in need of support.

A specific recommendation from communities, the elderly and the children was the drive towards reducing or eliminating fees for secondary education. From the 20 interviewed households, only three households had children attending secondary school whilst the others were in the lower classes preparing for secondary school. The greatest concern of the grandparents was how to raise money for the children to attend secondary education. As such, it is highly recommended that the government should consider subsidising the school fees in secondary school or provide bursaries for the children who are challenged and cannot afford school fees.
10.9.2. Improving elderly health through accessible medical facilities

All elderly members interviewed in this research had one or two chronic illnesses. The greatest challenge they faced was accessing transport to attend the public hospitals. As a result, most of them have resorted to staying home without proper medical care. It is recommended that the government and other stakeholders should consider mobile clinics that target the needs of the elderly or alternatively should provide transport services for this group to ensure they access medical treatment. Attending hospitals is costly and the priority in most of the elderly households is food rather than medical care.

10.9.3. Sensitising communities on the role of social capital in supporting elderly needs

As explained in the research, social capital has taken a new form. The belief that African communities were good for their community support and care is no longer the same. Communities are tired as there are increasing numbers of vulnerable people in their area; this has been exacerbated by prolonged droughts, a disease burden and political instability. Such being the case, each household has resorted to ensuring it addresses its own survival needs first. The principle of having extended families has declined as more dependents are being looked after by their grandparents rather than aunts and uncles taking on this responsibility, as was traditionally the case.

With this shift in mind, it is critical for governments and other stakeholders to ensure support is available for sensitising the communities on the needs of the elderly and bringing in interventions that support the most vulnerable.
Furthermore, throughout the household interviews, the elderly recommended that governments should formulate and implement policies that fit their needs. It was noted that most of them were not aware of any policies or interventions by the government that were specifically for this target group. As such, it is recommended that the government sensitises the communities on the rights of the elderly and the policies and interventions that are available to support their needs.

### 10.9.4. Support interventions that contribute towards long term food security

One of the key challenges expressed by community members, grandparents and children was their failure to access food throughout the year. Once green maize is ready, most of the vulnerable households start eating this while some of it is sold in towns where people do not have enough land for cultivation. The overall production in the field is then affected due to the demand for early harvesting. As a result, most of the households are always in need of food during the lean season.

Malawi was known for its well established agriculture extension work where there were field people in the communities monitoring and sensitising communities about their food production. In reviewing this area, it is recommended that government should consider having more robust systems that sensitise and monitor communities on managing their farm production and using improved methods of agriculture.

### 10.9.5. Ongoing financial support through social pensions

Most of the elderly members expressed the need for financial support from stakeholders who would want to support them. It was explained that having ongoing financial support would allow them to purchase food,
fertilizer and respond to the needs of the children at school. In exploring ways in which this could be packaged and managed without contributing to undue levels of dependency, most of the elderly indicated that they just needed enough to ensure that the basic needs of the family are met. The money could be collected from the local post office or through the school as this is the centre of development in most communities. Each household could be monitored to ensure they are managing the resources appropriately. This is the role that a social pension could fulfil for this community.

The case study for Lesotho has shown that social pensions contribute significantly to basic needs and necessary expenditure of older persons, including the cost of food, school fees, health care, and expenses associated with social inclusiveness. It has demonstrated the strength of this response in addressing chronic poverty and vulnerability of the elderly. On this basis, the documented challenges of the elderly in Malawi can be addressed through a well established social pension scheme.

The Lesotho Old Age Pension displays a number of important strengths, as a means of addressing chronic poverty and vulnerability in a very poor country. It also shows the rationale of choosing the appropriate benefit size to respond to the needs of the elderly without compromising the budget. The possibility of managing the Lesotho scheme has really worked well as it was funded from its own resources and is within manageable allocation.

Furthermore, considering the example of Lesotho where pensions were considered from the age of 70, it is important for Malawi to debate the ideal age group that would be considered for implementation of an old age pension. As much as a high age threshold like 70 causes a variety of implicit or explicit exclusions in terms of country-wide vulnerability reduction, and considering the resource limitations, it is recommended that
Malawi considers this age bracket. It needs to be known that this will exclude people who are younger than 70 but too old to gain a living from productive employment; vulnerable households not containing someone over 70; and duration of pension entitlement in recipient households may be quite short due to the relatively low remaining life expectancy of individuals over 70. However with all these points in mind, it is only feasible for Malawi to consider this age group due to resources and wide geographical coverage.

The Lesotho pension scheme was challenged at the beginning due to limited identity documents for the elderly. Considering their status, most of the elderly in Malawi will be in a similar position as they do not have identity cards. The government would benefit in having a national identity system. This has been planned for a long time and processes were put in place to ensure its implementation but this has not yet happened. There is a need to find proper processes that would ensure clear identity for the elderly.

As in most countries, Malawi has the postal service which is under-utilised due to the growth in technology and advent of emails, fax, WebEx and financial services. Being a government-owned institution, it is appropriate that this be considered, as in the case of Lesotho, as an outlet for social pensions for the elderly. Furthermore, other systems currently used to pay teachers in the most rural areas could be adopted for such an intervention.

One criticism of the fertiliser subsidy programme in Malawi is the mismanagement that has been seen under different governments. If Malawi has to implement social pensions, there is need for strong political will with transparent systems. Theft and corruption in relation to the fertiliser subsidy programme has been widespread. This has undermined its contribution to the alleviation of poverty. The Malawi government has been viewed as being corrupt as a result of this. The possibility of
corruption undermining social pension objectives is high hence there is need to investing in this area if social pensions are to be considered.

Furthermore, the negative effects or unintended consequences that may arise due to the introduction of social pensions needs adequate investment in strong monitoring and evaluation systems that are able to periodically monitor the process and implementation of social pensions. These systems should go beyond monitoring the infrastructure, but should also track the responses of the beneficiaries on what is happening in their community.
REFERENCES


Bangladesh: Targeting, Selection, and Distribution of Benefits and its Association with Different Socio-economic and Health Indicators. Unpublished.


Davies, D. and Dodd, J. (2002) Qualitative research and the question of rigor, Qualitative Health Research 12 (2) 279-289.


Heinrich, K. (2011) Reciprocity in the evolution of self through the making of homes-as-artefacts: a phenomenological study of the BaSotho female in her vernacular architecture, PhD. University of Pretoria


HIV and AIDs and Family Well-being in Southern Africa towards analysis of policy issues, retrieved on 30th May, 2010 from

Holden, S. and Lunduka, R., (2010b) Too Poor to be efficient? Impacts of targeted fertiliser Subsidy programme in Malawi on farm plot level input use, Crop choice and land productivity, Department of Economics and Resource Management, Norwegian University of Life Sciences.


Joseph, V. (2007) Care, Caring and Coping: Attitudes of children orphaned by HIV/AIDS and their caregivers towards schooling in a South African Township, PhD, University of Western Cape.


Lesotho food security and vulnerable report, 2013.


National social support program implementation strategy for Malawi, 2012.

National policy for older persons in Malawi, 2011.


Research and Evaluation Division (RED) and Bangladesh Rural Advancement Committee (BRAC). (2007). Small Scale Old Age and Widow Allowance for the Poor in Rural Bangladesh.


UNAIDS (2012) *Together We Will End AIDS*.


UNESCO 2003 Convention of safeguarding of the intangible cultural Heritage (Paris UNESCO)

UNICEF (2010). Progress for Children: Achieving the MDGs with Equity, No. 9, New York: UNICEF.


Van Dullemen, C. E. (nd) Pensions in Developing countries- A Quest for Modern Format for intergenerational solidarity among older people in Africa needing Cash and Care.


Whiteside, M., (1998) When the whole is more than the sum of the parts: the effect of cross-border interactions on livelihood security in southern Malawi and northern Mozambique, report for Oxfam GB


World Bank (2012) *Responding with global knowledge and experience*


# APPENDICES

## APPENDIX 1: SEMI-STRUCTURED INTERVIEW QUESTIONS

<table>
<thead>
<tr>
<th>University of Witwatersrand</th>
</tr>
</thead>
<tbody>
<tr>
<td>School of Public and Development Management</td>
</tr>
</tbody>
</table>

Interview questions on the role of social protection for the elderly caring for HIV/AIDS orphans in Malawi

*For*

*Elderly*

*By*

*Marumbo Prisca Ngwira*

*Student No: 0213303P*

In fulfilment of PhD in Public and Development Management
Household profile

1. How long have you been looking after the orphans?

2. Why did you decide to look after the children?

3. What are the role of the older person in the household activities?

4. How has the presence of orphans impacted on the household and your caring capacity?

5. Indicate what is involved in caring for orphans and how this is ranked as per your priority
<table>
<thead>
<tr>
<th>Care Responsibility</th>
<th>What you have been doing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional</td>
<td></td>
</tr>
<tr>
<td>Financial/Monetary</td>
<td></td>
</tr>
<tr>
<td>Social Cultural</td>
<td></td>
</tr>
<tr>
<td>spiritual</td>
<td></td>
</tr>
<tr>
<td>Educational</td>
<td></td>
</tr>
<tr>
<td>Physical</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

6. What are some of the benefits you have seen in looking after the children?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

7. What are some of the challenges you have faced in taking care of your grandchildren?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

8. What type of services exists in this area and do you have access to them?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

9. Is there any private sector entity in this community, what do they do? Any support specify
10. What is your main source of income

<table>
<thead>
<tr>
<th>Expenditure item</th>
<th>ranking</th>
<th>Cost per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clothing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td></td>
<td></td>
</tr>
<tr>
<td>other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
13. Which type of expenditure have increased most sharply over time?

14. Do you possess any of the following items?

<table>
<thead>
<tr>
<th></th>
<th>lantern</th>
<th>plough</th>
</tr>
</thead>
<tbody>
<tr>
<td>Car</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Motorcycle</td>
<td>radio</td>
<td>Iron sheet</td>
</tr>
<tr>
<td></td>
<td></td>
<td>roofing</td>
</tr>
<tr>
<td>Bicycle</td>
<td>Sewing machine</td>
<td>furniture</td>
</tr>
<tr>
<td>Cart</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

15. Have you ever sold any of the items to meet your household needs

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

16. What challenges do you have in relation to your finances?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

17. What recommendations do you have in order to meet your financial needs?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Health
18. What are the health needs of the orphans in the HH?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

19. How are their health needs be met by you and the community around?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
20. What are your health needs?

________________________________________________________________________

21. What challenges do you have in relation to your health? How are your health needs being met

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

22. Explore and identify barriers to access and utilisation of health services (financial, attitude of staff, transport, stigma)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

23. Explore their perceptions of health service delivery

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

24. How does the community or social groups that you belong to support with your health needs

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

25. What are your recommendations to support your household health needs

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

26. Do you have relatives in this community? Explain the types of relatives

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Social Capital

26. Do you have relatives in this community? Explain the types of relatives
27. What are the different types of social groups that exist in this community

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

28. Which social group do you belong to and why

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

29. What type of support is provided from these social groups

<table>
<thead>
<tr>
<th>Type</th>
<th>Source of Support</th>
<th>Details of support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial/economic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>spiritual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical caring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

30. Is this support adequate, what else would you wish the community could do to support you?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

31. Does the group that you belong to help you to get access to social services, explain the type of service

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

32. How many friends do you have these days that you feel does help you with the situation you have at hand

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
33. If you needed some small amount of money, how many people do you feel will lend you and why

_________________________________________________________
_________________________________________________________
_________________________________________________________

34. Who would take care of your family if you had to go away

_________________________________________________________
_________________________________________________________
_________________________________________________________

35. Are there any activities in the community that you are not allowed to participate due to your situation

_________________________________________________________
_________________________________________________________
_________________________________________________________

Physical

36. What type of assets do you own, use the table below to indicate which ones and how many

<table>
<thead>
<tr>
<th>Assets</th>
<th>How many of following items are owned by you or any member of your household?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair</td>
<td>[_]</td>
</tr>
<tr>
<td>Table</td>
<td>[_]</td>
</tr>
<tr>
<td>Bed</td>
<td>[_]</td>
</tr>
<tr>
<td>Bicycle</td>
<td>[_]</td>
</tr>
<tr>
<td>Hoe</td>
<td>[_]</td>
</tr>
<tr>
<td>Axe</td>
<td>[_]</td>
</tr>
<tr>
<td>Sickle</td>
<td>[_]</td>
</tr>
<tr>
<td>Panga/Matchet</td>
<td>[_]</td>
</tr>
<tr>
<td>Mortar</td>
<td>[_]</td>
</tr>
<tr>
<td>Radio</td>
<td>[_]</td>
</tr>
<tr>
<td>Ox/donkey car</td>
<td>[_]</td>
</tr>
<tr>
<td>Mattress</td>
<td>[_]</td>
</tr>
</tbody>
</table>
37. **Livestock ownership**

<table>
<thead>
<tr>
<th>Livestock type</th>
<th>G7 How many livestock does your household currently own?</th>
<th>G8 How many did you acquire in the past 3 months?</th>
<th>G9 How many did you sell in the past 3 months?</th>
<th>G10 What was the main reason to sell this livestock (coding below)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draught cattle</td>
<td>1. ___</td>
<td>1. ___</td>
<td>1. ___</td>
<td>1. ___</td>
</tr>
<tr>
<td>Cattle</td>
<td>2. ___</td>
<td>2. ___</td>
<td>2. ___</td>
<td>2. ___</td>
</tr>
<tr>
<td>Donkeys</td>
<td>3. ___</td>
<td>3. ___</td>
<td>3. ___</td>
<td>3. ___</td>
</tr>
<tr>
<td>Sheep/Goats</td>
<td>4. ___</td>
<td>4. ___</td>
<td>4. ___</td>
<td>4. ___</td>
</tr>
<tr>
<td>Pigs</td>
<td>5. ___</td>
<td>5. ___</td>
<td>5. ___</td>
<td>5. ___</td>
</tr>
</tbody>
</table>

---

**Natural Capital**

38. Do you have access to land for cultivation?

---

39. How much land do you own and how many hectares?

---
40. How much land does your household utilise?

41. Did you leave some of your land uncultivated in the last year, if yes give reasons?

42. Does your household own trees? explain

43. Do you grow fruits, vegetables? If yes, what do you use them for

44. What is the main current source of drinking water for your household? Do you pay for this water

45. How far is the source of water and how long does it take your family to get there?

45. What strategies have you used to cope with the impact of having to look after the orphans (sell assets, borrow money, reduce consumption etc)?
Interview Questions on the role of social protection for the elderly caring for HIV/AIDS orphans in Malawi

For

Orphans

By

Marumbo Prisca Ngwira

Student No: 0213303P

In fulfilment of PhD in Public and Development Management
## Name______________________   Age________________

## Date_______________________   Time_________________ ___

## Standard in School_______________________

### Household profile

1. How long have you been staying with your grandparent/s? And how many siblings do you have? Explore if all are staying together

2. Why did you decide to stay with your grandparent? Explore who decided who to live with when parents passed on

3. What role does the grandparent play in the household?

4. What are the benefits of staying with your grandparent? What type of support do you get

5. What type of support do you provide to your grandparents?
6. What have been the challenges of staying with your granny? And how have you dealt with them?

7. What type of government services exists in this area and do you have access to them?

Educational issues

8. What type of expenses do you encounter and how are they met?

9. What are some of the challenges you face at school?

10. What recommendations do you have to make your school life manageable and easy?

Financial issues

11. What is the main source of income in the family? Who contributes to the financial needs of the family
12. What do you think the money is used for in the household?

13. What challenges do you have in relation to finances in the household?

14. What recommendations do you have in order to meet the financial needs of your grandparents household?

**Social Capital**

15. Apart from granny, Do you have relatives in this community? Explain the types of relatives

16. What type of support is provided from the various relatives

<table>
<thead>
<tr>
<th>Type</th>
<th>Type of Support</th>
<th>Challenges with the support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial/economic</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>spiritual</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical caring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
17. Is this support adequate, what else would you wish the community could do to support you?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

18. Do you belong to any network or support groups, provide the details of the support groups

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

19. What are the benefits of belonging to such groups

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

20. What type of support do you get from the support group that you belong to

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

21. What are some of the challenges facing the support group

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

**Natural Capital**

22. Does your house have access to land for cultivation

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

23. Who does most of the work in the farm, explain

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
24. What other support do you need from your grandparent to support you?

25. What strategies have been used by your grandparent to cope with the caring of the children (sell assets, borrow money, reduce consumption etc)

26. What are your recommendations on how you will need the government of other stakeholders to support you? Explain clear areas
Interview questions on the role of social protection for the elderly caring for HIV/AIDS orphans in Malawi

By

Marumbo Prisca Ngwira
Student No: 0213303P

In fulfilment of PhD in Public and Development Management
**Social protection schemes** aim to enable people to respond to various contingencies and manage levels of risk or deprivation that are deemed unacceptable by society. These schemes aim to offset the absence or substantial reduction of income from work, provide assistance for families with children, provide people with health care, housing, water and sanitation, education or social work. The schemes are cash or in-kind benefits, ranging from pensions to user fee exemptions or subsidised services.

**Old age pensions** consist of cash benefits received by persons above a given age whether or not additional criteria are tied to receiving the benefits. Non-contributory pensions, also known as social pensions in some countries, are programmes that do not require prior compulsory contributions from beneficiaries, employers or the State for the payments to be made.

**General Questions**

1) In your opinion what are the needs of the elderly in Malawi

2) How is government responding to the needs of the elderly group

3) What legal frameworks exist to support the need of the elderly people

4) What structures exist to support the implementation of activities aimed at supporting the needs of elderly in Malawi
5) What are some of the challenges that have been shared facing the elderly in the country

6) What do you think of old age pensions as an intervention for elderly in Malawi. What would be the benefits and challenges of this approach

Review of the Malawi policy on the Elderly

1. Based on the policy that has been developed, which interventions/activities have been done to date to address the needs of the elderly

2. Has there been any subsidies for health, agriculture, transport aimed at ensuring the elderly are supported, give examples

3. Has there been any redeployment programmes aimed at utilising the elderly skills?

4. What activities have been done aimed at strengthening community support for the elderly
5. What type of unconditional financial support has been given to the elderly

6. According to the policy, the institutional framework set to support the elderly includes the formation of National, district and community based committees, explain how far these have been done

7. What are your recommendations to support the needs of the elderly in Malawi
APPENDIX 4: GOVERNMENT OFFICIALS

University of Witwatersrand
School of
Public and Development Management

Interview questions on the role of social protection for the elderly caring for HIV/AIDS orphans in Malawi

By

Marumbo Prisca Ngwira
Student No: 0213303P

In fulfilment of PhD in Public and Development Management
Definition of social protection schemes and old age pensions, non-contributory / contributory pensions For the purpose of this questionnaire,

**Social protection schemes** aim to enable people to respond to various contingencies and manage levels of risk or deprivation that are deemed unacceptable by society. These schemes aim to offset the absence or substantial reduction of income from work, provide assistance for families with children, provide people with health care, housing, water and sanitation, education or social work. The schemes are cash or in-kind benefits, ranging from pensions to user fee exemptions or subsidised services.

**Old age pensions** consist of cash benefits received by persons above a given age whether or not additional criteria are tied to receiving the benefits. Non-contributory pensions, also known as social pensions in some countries, are programmes that do not require prior compulsory contributions from beneficiaries, employers or the State for the payments to be made.

**Interview Questions**

1. What are the social protection interventions being implemented in Malawi

2. What is the target audience and geographical coverage

3. What are the objectives

4. What are the policies that exist to support social protection
5. Which donors are supporting social protection

6. What are some challenges on the implementation of social protection

7. Are there any interventions that are supporting the needs of the elderly, explain

**Social protection policies**

1) Are there any policies that guide social protection interventions in Malawi, specify

2) To what extent do these policies address the needs of elderly

3) Are these policies backed by law (Acts)?

4) Were the issues of elderly fully captured in the formulation of these policies?
5) Do the policies have clear strategies?

General Questions

7) In your opinion what are the needs of the elderly looking after children in Malawi

8) How is government responding to the needs of the elderly group

9) What legal frameworks exist to support the need of the elderly people

10) What structures exist to support the implementation of social protection interventions in Malawi

11) What are some of the challenges that have been shared facing the elderly in the country
12) What are your recommendations to support the needs of the elderly

13) What donors support the needs of the elderly in the country
Appendix 5 Interview Questions for orphans in Lesotho

<table>
<thead>
<tr>
<th>Name______________________</th>
<th>Age___________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date_______________________</td>
<td>Time___________________</td>
</tr>
<tr>
<td>Grade in School______________</td>
<td>-------------------------</td>
</tr>
</tbody>
</table>

Household profile

1. How long have you been staying with your grandparent/s? And how many siblings do you have? Explore if all are staying together

2. Why did you decide to stay with your grandparent? Explore why they decided to live with when parents passed on

3. What role does the grandparent play in the household?

4. What are the benefits of staying with your grandparent? What type of support do you get?

5. What type of support do you provide to your grandparents?

6. What have been the challenges of staying with your granny? And how have you dealt with them?
7. What type of government services exists in this area and do you have access to them?

---

**Educational issues**

8. What type of expenses do you encounter and how are they met?

---

9. What are some of the challenges you face at school

---

10. What recommendations do you have to make your school life manageable and easy?

---

**Financial issues**

11. What is the main source of income in the family. Who contributes to the financial needs of the family.

---

12. Do you know about social grants? How much does your granny receive on social grants

---
13. What does your granny use the social grants money for?

14. What are some of the challenges you face because of your family having social grants especially from the community or relatives

---

**Social Capital**

15. Apart from granny, Do you have relatives in this community? Explain the types of relatives

16. Do you belong to any network or support groups, provide the details of the support groups

17. What are the benefits of belonging to such groups

18. What type of support do you get from the support group that you belong to

19. What are some of the challenges facing the support group
Natural Capital

20. Does your house have access to land for cultivation

21. Who does most of the work in the farm, explain

22. What other support do you need from your grandparent to support you?

23. What strategies have been used by your grandparent to cope with the caring of the children (sell assets, borrow money, reduce consumption etc)
Appendix 6: Interview questions for the elderly in Lesotho

<table>
<thead>
<tr>
<th>Name______________________</th>
<th>Age________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date_______________________</td>
<td>Time_________________</td>
</tr>
<tr>
<td>No of orphans in HH_________</td>
<td></td>
</tr>
</tbody>
</table>

Household profile

1. How long have you been looking after the children

2. Why did you decide to look after the orphans

3. What activities do you do to support the children

4. What are the benefits you have seen in looking after the children

5. What challenges have you faced as you looked after the orphaned children

6. What is your main source of income
Social Pensions

7. Are you getting the social grant from government, if yes, how much is it

8. Explain the process of getting this grant, what do you do to receive the funds

9. What are the benefits of the grant for the family, what do you use the money for

10. What are the challenges of having this grant

11. What recommendations do you have on having this grant well managed

Health needs

12. What are your health needs?

13. What challenges do you have in relation to your health? How are your health needs being met

14. Explore and identify barriers to access and utilisation of health services (financial, attitude of staff, transport, stigma)
Social capital

15. What are the different types of social groups that exists in this community

16. Do you belong to any of the groups

17. Have you used your money to pay or support any of these groups

18. If you needed some small amount of money, how many people do you feel will lend you and why

19. Who would take care of your family if you had to go away

Natural Capital

20. Do you have access to land for cultivation

21. How much land do you own and how many hectares
22. How much land does your household utilise (half, less than half, all of it)


23. Did you leave some of your land uncultivated in the last year, if yes give reasons?


Physical

24. What type of assets do you own, use the table below to indicate which ones and how many

<table>
<thead>
<tr>
<th>Assets</th>
<th>How many of following items are owned by you or any member of your household?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chair</td>
<td>□□</td>
</tr>
<tr>
<td>Table</td>
<td>□□</td>
</tr>
<tr>
<td>Bed</td>
<td>□□</td>
</tr>
<tr>
<td>Bicycle</td>
<td>□□</td>
</tr>
<tr>
<td>Hoe</td>
<td>□□</td>
</tr>
<tr>
<td>Axe</td>
<td>□□</td>
</tr>
<tr>
<td>Sickle</td>
<td>□□</td>
</tr>
<tr>
<td>Panga/Matchet</td>
<td>□□</td>
</tr>
<tr>
<td>Mortar</td>
<td>□□</td>
</tr>
<tr>
<td>Radio</td>
<td>□□</td>
</tr>
<tr>
<td>Ox/donkey car</td>
<td>□□</td>
</tr>
<tr>
<td>Mattress</td>
<td>□□</td>
</tr>
<tr>
<td>Mat</td>
<td>□□</td>
</tr>
<tr>
<td>Handmill</td>
<td>□□</td>
</tr>
<tr>
<td>TV</td>
<td>□□</td>
</tr>
<tr>
<td>Harrow</td>
<td>□□</td>
</tr>
<tr>
<td>York chain</td>
<td>□□</td>
</tr>
<tr>
<td>Hammermill</td>
<td>□□</td>
</tr>
<tr>
<td>Plough</td>
<td>□□</td>
</tr>
<tr>
<td>Cultivator</td>
<td>□□</td>
</tr>
<tr>
<td>Treadle pump</td>
<td>□□</td>
</tr>
<tr>
<td>Fishing nets</td>
<td>□□</td>
</tr>
<tr>
<td>Canoe</td>
<td>□□</td>
</tr>
</tbody>
</table>
## Livestock ownership

<table>
<thead>
<tr>
<th>Livestock type</th>
<th>How many livestock does your household currently own?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Draught cattle</td>
<td>1. [<em><strong>] 1. [</strong></em>] 1. [<em><strong>] 1. [</strong></em>]</td>
</tr>
<tr>
<td>Cattle</td>
<td>2. [<em><strong>] 2. [</strong></em>] 2. [<em><strong>] 2. [</strong></em>]</td>
</tr>
<tr>
<td>Donkeys</td>
<td>3. [<em><strong>] 3. [</strong></em>] 3. [<em><strong>] 3. [</strong></em>]</td>
</tr>
<tr>
<td>Sheep/Goats</td>
<td>4. [<em><strong>] 4. [</strong></em>] 4. [<em><strong>] 4. [</strong></em>]</td>
</tr>
<tr>
<td>Pigs</td>
<td>5. [<em><strong>] 5. [</strong></em>] 6. [<em><strong>] 5. [</strong></em>]</td>
</tr>
</tbody>
</table>
### Facilitate discussion of the indicator by focus group participants, using the discussion guide.

<table>
<thead>
<tr>
<th>Discussion Topic</th>
<th>Key Concepts to be Explored</th>
<th>Guide Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. General</td>
<td>a) Orphan situation in the area</td>
<td>o How is the orphan situation in the area</td>
</tr>
<tr>
<td></td>
<td>b) Situation of the grandparents</td>
<td>o What is the role of grandparents and how many are looking after orphans</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o What are the benefits of having grandparents raising the children</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o What are the challenges facing the grandparents in raising the children</td>
</tr>
<tr>
<td>2. Social</td>
<td>a) Major sources of financial support</td>
<td>o What is the source of income for most households?</td>
</tr>
<tr>
<td>pensions</td>
<td></td>
<td>o What are the sources of income for grandparents households</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o What are the benefits of social pensions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o What are the challenges of social pensions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o What are some of the recommendations on how social pensions should be managed</td>
</tr>
<tr>
<td>3. Social</td>
<td>a) Relationship between HH and community</td>
<td>o What type of support does the community render to each other</td>
</tr>
<tr>
<td></td>
<td>b) Support to each other during shock and risk</td>
<td>o What type of support do you provide to the grandparent household looking after orphans</td>
</tr>
<tr>
<td></td>
<td>c) Community based organizations and support</td>
<td>o What additional support do you think grandparents require to ensure they are able to bring up the children under their care</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o What type of community based organizations exists in this community and what role do they play</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o What challenges do you think grandparents are facing in raising the children alone</td>
</tr>
<tr>
<td>Recommendations</td>
<td></td>
<td>o What are the overall recommendations that need to be done to support the elderly</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o What are some of the suggestions on how to manage the social pensions in Lesotho</td>
</tr>
</tbody>
</table>

Appendix 7: Focus Group Interviews for elderly in Lesotho 8-10 community representatives
Appendix 8: Consent Form - Information Sheet

As part of the requirements for degree at University of Witwatersrand in South Africa, I have to carry out a research study. The study is concerned with understanding the challenges that elderly face especially those that are looking after orphaned children left behind by parents. I have selected households which have been affected especially with the HIV and AIDs pandemic that has left behind orphans.

The study will involve us discussing in detail the challenges that are facing in the elderly household. It will take about 1 to 2 hours for us to finish the discussions because I would like to understand the full details and would want us to talk freely and slowly. You have been asked because:

- **For elderly** - you are the one looking after the children in this family and as a head of household, we would like to hear from you what it takes to look after the orphans in your age
- **For children** - because you are part of the elderly household and we would like to learn from you how the grandparents are coping and some of their challenges
- **Local leaders** - as leaders in this community, you see a lot of what happens and your insights on elderly challenges is critical to this study
- **Teachers** - Because we are having a study on children that attend school and some of the issues they face home are seen here at school
- **Community members** - as part of the community, you are aware of the challenges that elderly are facing and also your role to support them..

This study is voluntary as such I will only proceed with your permission. As part of this process, I will ask you to sign the form which indicates that you are willing to participate in this research. You are free to withdraw at any point during our discussions. I will respect your views.

In this research, I will ensure that no clues to your identity appear in the thesis. Any extracts from what you say that are quoted in the thesis will be entirely anonymous and used like "respondent “ said this. I will also ask for your permission to take pictures, the pictures will only be used in this study with the university and will not be published anywhere. Feel free to withdraw from having your pictures taken, I will only take pictures with your permission.
The information collected in this study will be kept confidential for the duration of the study. On completion of the research, the information I have collected will only be retained for a further six months and then destroyed. The results will be presented as part of my full thesis. They will be seen by my supervisor, a second marker and the external examiners. The thesis may be read by future students on the course. The study may be published in a research journal but it will only be for learning and nothing else. If you need any further information, you can contact me and my name is Marumbo Ngwira and my cell number is 00265 888 362 865 whilst in Malawi.

If you agree to take part in the study, please sign the consent form overleaf.

Title of Research: The role of social protection for the elderly

Name of Researcher: Marumbo Prisca Ngwirra

Please tick all boxes

1. I confirm that I have read and understand the information sheet dated for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason, without my medical care or legal rights being affected.

3. I understand that relevant sections of my medical notes and data collected during the study, may be looked at by individuals from university of Witwatersand, where it is relevant to my taking part in this research. I give permission for these individuals to have access to my records.

4. I agree to my pictures being used as part of this study.

5. I agree to take part in the above study.

Name of Participant ______________________ Date ______________________ Signature ______________________

Name of Person ______________________ Date ______________________ Signature ______________________

taking consent.