PERCEPTIONS & EXPECTATIONS OF INSTITUTIONALISED ELDERLY PEOPLE

IN BLOEMFONTEIN

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ABSTRACT

In the proposed policy for the care of the elderly, the emphasis has shifted from institutional care to community based care. However, it cannot simply be accepted that the elderly are ready and willing to be cared for in a different manner. The purpose of this study is to ascertain the perceptions and expectations of institutionalised elderly regarding the old age homes or retirement villages they live in. It would be futile to force community care on the elderly if the necessary services and community involvement in this regard are lacking and particularly if the elderly themselves have a negative perception of this type of care. The successful implementation of the proposed policy at grassroots level thus depends on the resocialisation of the elderly as well as the community.

In the proposed policy for the care of the elderly, the emphasis has shifted from institutional care to community based care

OPSOMMING

In die voorgestelde nuwe beleid vir die versorging van bejaardes verskuif die klem van institusionele sorg na gemeenskapsgebaseerde sorg. Dit kan egter nie sondermeer aanvaar word dat bejaardes gewillig en gereed is om op 'n 'ander' manier versorg te word nie. Hierdie studie het ten doel om geïnstitusionaliseerde bejaardes se persepsie en verwagtinge van die ouetehuis of aftree-oord waar hul woon, vas te stel. Dit sou immers futiel wees om gemeenskapsgebaseerde sorg op bejaardes af te dwing indien die nodige dienste asook gemeenskapbetrokkenheid in die verband ontbreek en bejaardes self negatiewe persepsies en verwagtinge hieroor koester. Suksesvolle implementering van die voorgestelde nuwe beleid hang op voetsoolvlak af van die hersosialisering van bejaardes èn die gemeenskap.

Research

INTRODUCTION

The demographic ageing of a population is defined as an increase in the proportion of people aged 65 and older, with a consequent increase in the median age of the population.

Projections indicate that the proportion of the South African population aged 65 and older is on the increase and that the median age is undergoing a gradual concomitant increase.

According to the Institute for Future Research at the University of Stellenbosch (Van den Heever, 1996), 4,4% of the total South African population of 41,13 million was aged 65 and older in 1995 (Table 1).

This percentage is expected to rise to 4,9 in the year 2006, and to increase to 6.0% in the year 2016, with 7,9% of the total population expected to be aged 65 and older 10 years later.

In the year 2026, thus, there will be an estimated 5,1 million elderly people, in comparison with the 1,8 million of 1995 - an increase of about 180% in 30 years. These 5,1 million elderly people will comprise 3,5% Asians, 67,4% Blacks, 9,1% Coloureds and 20,2% Whites.

According to Hofmeyr and Mostert (in Ferreira et al 1992:19-20), the median age of Whites in 1985 was 29,5, making this group demographically the oldest population group in South Africa, with Blacks demographically the youngest group, having a median age of 17,9. The median ages of Asians and Coloureds were 23,3 and 21,3, respectively.

STATEMENT OF THE PROBLEM AND AIM OF THE PROJECT

From the above, it is clear that the South African society is, globally seen, ageing demographically.

In addition to this, South Africa is currently undergoing a time of societal reconstruction where change in general and in the welfare policy in particular hold far reaching implications for all members of the society. In the past welfare policy stressed **therapy** and **care**, but the shift now has been towards **development** and **prevention**, and care **in the community by the community** .

This shift, however, is not without its complexities. While being welcomed by some, others may refute it because it comes into conflict with existing structures born out of past policies.

The proposed policy framework on age-ing states that it's purpose is to facilitate a process of transformation of the previous dispensation with the main thrust "to ensure accessible, equitable and affordable services to older persons and to empower them to continue to live meaningfully and constructively in a society which recognises them as important sources of enrichment and expertise. ... the guiding principle for the policy on ageing is that older persons should be enabled to enjoy an active, healthy and independent life as part of family and community as long as possible" (Discussion group on ageing, 1995:1).

Recognition is further given to the importance of a strong and open partnership between Government, non-government, welfare and religious organisations within a caring and enabling society.

It spells out the responsibilities of all the partners: the Government's responsibility regarding the plight of the destitute, poor, very old as well as frail older persons being well confirmed and non-negotiable, while at the same time a recognition that older persons are inextricably part of family and community which should also accept full and equal responsibility.

It further states that the policy is a holis-

TABLE 1:

The South African population aged 65 and over as a percentage of the respective population groups

Population Group										
Year	Asians		Blacks		Coloureds		Whites		Total population	
	%	N	%	N	%	N	%	N	%	N
1995	3,8	1,04* (39 520)**	3,6	31,44* (1 131 840)**	3,4	3,48* (118 320)**	9,5	5,17* (491 150)**	4,4	41,13* (1 809 720)**
2006	6,3	1,8* (74 340)**	4,0	39,70* (1 588 000)**	4,6	4,00* (184 000)**	11,6	5,40* (626 400)**	4,9	50,28* (2 463 720)**
2016	9,8	1,27* (124 460)**	4,7	47,02* (2 209 940)**	6,4	4,38* (280 320)**	15,4	5,43* (836 220)**	6,0	58,11* (3 486 600)**
2026	13,6	1,32* (179 520)**	6,5	53,37* (3 469 050)**	10,1	4,62* (466 620)**	19,3	5,34* (1 030 620)**	7,9	64,65* (5 107 350)**

*   Total of the respective population groups in millions

**   Number of people aged 65 and over in the respective population groups

Source: Van den Heever, 1996.

tic and positive approach, recognising ageing as a normal phase of live without denying that older persons have special needs and the right to be treated with dignity and respect. .

In the context of the demographic ageing of the South African population, and the changing policy towards caring of the aged, the Division for Gerontological Research of the Sociology Department of the University of the Orange Free State has undertaken research among the elderly in the Free State.

Part of the general research project comprises a study of institutionalised elderly people in old-age homes or retirement villages[1] in the greater Bloemfontein area. In the light of the proposed new policy on the care of the elderly, this study may be regarded as particularly valuable, since the group under investigation will in all likelihood be the last such generation able not only to exercise free choice but also to enjoy "free access" to old-age homes.

The aim of this study is to investigate certain perceptions and expectations of institutionalised elderly people regarding their residence in old-age homes.

The data are presented in terms of the group under investigation as a whole, but are also consistently interpreted in terms of two groups, namely the group living in traditionally "White" homes, and those living in traditionally "Black" and "Coloured" homes, in order to highlight possible differences among the various groups.

RESEARCH METHOD

In order to investigate the perceptions and expectations of the elderly regarding their residence in old-age homes, the researchers identified and consulted relevant literature as well as collecting empirical data by means of a survey, using questions forming an interview schedule within the framework of an *ex post facto* research design.

In the interpretation, a nomothethic model with deductive reasoning was applied with the aim of investigating only those relationships of which the researchers had certain theoretical expectations. Since there is no way of controlling for intervening variables, it must be accepted that the internal validity of an *ex post facto* study such as this will not necessarily be high.

Sampling

The stratified sample method was used in order to include the various retirement homes in the greater Bloemfontein area on a random basis.

The retirement homes were stratified in terms of composition (ie flats/independ-

ent housing; rooms/frail care unit and a combination of the two first mentioned). Thereafter, eight of the 15 so-called "White" homes were randomly included in the survey along with the only homes for elderly Blacks and Coloureds.

The selected homes provided names of residents, enabling the researchers to include 300 respondents (in proportion to the size of the various homes) by simple random selection.

The rate of response was high, considering that 295 of the selected respondents eventually took part in the study.

The interview schedule was originally drawn up in Afrikaans and then translated into English and Sesotho. The fieldwork was undertaken by third-year Sociology students.

Interviews were conducted by students of the same population group as the respondent, in the respondent's choice of language.

Responses to unstructured questions in Sesotho were recorded in English by the fieldworkers in order to facilitate interpretation by the researchers. Fieldwork took place during the period 3 to 5 October 1995.

Limitations of the study

- The transcultural nature of the research and the fact that the researchers' own mental framework may not necessarily be congruent with that of the respondents may have a limiting effect on the interpretation of the data.

- Due to the particular cultural composition of the respective old-age homes, the results are only subject to generalisation for the group under investigation and the conclusions must be understood within the framework of the particular context.

- Regarding the interpretation of the data, it should be borne in mind that the research took place at the time of the government's announcement of drastic cuts in subsidies for old-age homes, which may in all probability have influenced the responses.

Characteristics of the group under investigation

The names of the ten retirement villages/old-age homes in which the 295 respondents were resident appear in Table 2 along with certain biographical characteristics of the group under investigation.

The Omega home houses mainly elderly Coloureds, and the Boikucho home exclusively elderly Blacks.

The fact that only eight of the respondents in the group under investigation were in frail care centres at the time of the survey should not be construed to mean that only about 3% of the residents of the ten old-age homes are in their frail care centres.

It is not a reflection of the percentage of frail elderly people in old-age homes in Bloemfontein.

Most of the elderly who were in frail care centres - "permanently" or merely temporarily - at the time of the survey were not included in the survey for various reasons and on the advice of the staff of the respective homes.

It may be seen from Table 2 that three-quarters of the group under investigation were female, and the majority single (widows, widowers, divorced or never married) and over 70 years of age.

The median age of the White respondents differs significantly from that of the Black and Coloured respondents[2].

In comparison with the 11% of elderly Whites under 70 years old, almost half (48%) of the elderly Blacks were in this age category.

Less than a quarter (23%) of the Black respondents were over 80 years old, in comparison with the 45% of White respondents in this age category.

The majority of respondents had resided less than five years in the home.

RESEARCH FINDINGS

The main reason **why respondents had moved to a retirement home** related to failing health, with a quarter (25,1%) of the respondents identifying this as their most important reason for residing in an old-age home.

One in five (20,7%) of the elderly respondents indicated that they were living in an old-age home by their **own choice** (without a specific reason), while 18,0% indicated that circumstances had **dictated** their move to an old-age home and that the move was thus not of their own choice.

Forty of the elderly (13,6%) indicated that they had been coerced by other people into moving to an old-age home.

Other reasons which were felt to be important were considerations of safety (8,8%); financial considerations (4,7%); the standard of care offered by the home (4,1%) and the fear of loneliness (3,7%).

There appear to be no differences in the reasons given by Black and White respondents for having moved to an old-age home.

From these details it is thus not possible to establish for how many of the elderly in the group under investigation an old-age home was really the **last resort** or how many actually "**belong**" in an old-age home.

TABLE 2: Biographical characteristics of the group under investigation

CHARACTERISTIC	N	PERCENTAGE
Old-age home/Retirement village		
SASSAR	27	9,2
Noorderbloem	23	7,8
Siesta	27	9,2
Bayswater Village	30	10,2
Mooihawe	27	9,2
Westerbloem	33	11,2
Omega	30	10,2
Boikucho	34	11,5
Aandrus	31	10,5
Ons Tuiste	33	11,2
TOTAL	295	100,0
Type of housing		
Single room	116	39,3
Double room	55	18,6
Alone in a flat	66	22,4
Sharing a flat	50	16,9
Single room in frail care centre	3	1,0
Double room in frail care centre	5	1,7
TOTAL	295	100,0
Gender		
Female	221	74,9
Male	74	25,1
TOTAL	295	100,0
Age*		
Under 60 years	12	4,1
60-69 years	44	14,9
70-79 years	120	40,7
80-89 years	101	34,2
90 years and over	18	6,1
TOTAL	295	100,0
Marital status		
Married	66	22,4
Widowed	168	56,9
Divorced/estranged	37	12,5
Never married	24	8,1
TOTAL	295	100,0
Period of residence in retirement village		
Less than 5 years	162	54,9
5 years or more	133	45,1
TOTAL	295	100,0
Place of recidence for most of their lives		
In a city	165	55,9
In the country	130	44,1
TOTAL	295	100.0

*** The median age of the total group under investigation was 77,6. The median for Black and Coloured respondents was 70,8 and that for Whites 78,8.**

What did become clear from the investigation is that at least 30% of the respondents were not forced by circumstances to end up in an old-age home.

If circumstances should alter and the doors of retirement villages or old-age homes gradually be shut to these elderly people - possibly through changes in policy - fewer and fewer of the independent elderly will be able to seek "premature" refuge in old-age homes in future.

One of the basic principles of the proposed new policy on the care of the elderly in South Africa is a shift of emphasis from institutional care to community-based care (Van den Heever, 1996). This shift of emphasis is in line with the tendency in most developed countries in the world.

The situation in Canada is typical of this tendency. "... Canada's high rate of institutionalization ... suggests that some currently institutionalized elderly Canadians may be capable of being maintained in the community. Yet the current debate over rationing such services comes about in part because of increasing financial constraints facing Canadians.

What is not yet clear is whether adequate community supports will be put in place" (Hendricks & Rosenthal, 1993:4). The philosophy of community-based care for the elderly presupposes the existence of a wide range of available and affordable services.

As with Canada, in South Africa, too, it is "difficult not to be skeptical, especially when severe budget cuts within the health care system are being made daily" (Hendricks & Rosenthal, 1993:4).

The South African situation may differ in respect of the budget for primary health services, but as far as funds for welfare services are concerned, it may be similar to that in Canada.

The question posed by the authors quoted is: "What if these services are not put in place, or not extensive enough? Long-term care beds are being shut down before proper community support can be put in place. Who will be left to fill in the gaps in care?" (Hendricks & Rosenthal, 1993:4).

On the basis of **subjective evaluation**, almost three-quarters (72,9%) of the total group under investigation considered themselves **financially better-off** (22,7%) or financially equally well-off (50,2%) in comparison with the majority of people in the same age group as themselves. There was no statistically significant difference[3] between White and Black respondents.

Only 45 of the 295 respondents (15,3%%) considered themselves finanicially **less well-off** in comparison with the majority of people of their age.

The remaining 11,9% were unsure. This finding, too, indicates that the majority of elderly people in the group under investigation could probably afford to reside elsewhere than in an old-age home.

From responses to a question about their **health**, it appears that only 13,9% of the total group under investigation considered their own health, in comparison with that of the majority of their peers, to be "poor" (11,2%) or "very poor" (2,7%).

Almost half described their health as "excellent" (7,5%) or "good" (40,0%), while 36,6% regarded it as "reasonable", with 2,0% who "did not know".

In comparison with White respondents, Black respondents evaluated their own health as poorer to a statistically significant extent. Whereas only 11,4% of White respondents described their health as "poor" or "very poor", the figure for Black respondents was 25,0%.

It can thus be deduced that, if poor health were considered to be a criterion for admission, only about 10% of the White respondents and 25% of the Black respondents would actually "belong" in an old-age home.

A more objective indication of the health of respondents may be found in Table 3, where respondents had to say **how well they could still perform certain daily activities.**

Thorson (1995:167) has shown that, in the performance of their everyday activities, elderly people experience limitations on a scale from minimal to severe.

As may be seen from Table 3, more than 60% of the total group under investigation could still perform all the activities listed "very well" to "reasonably".

For instance, more than 90% could still bath and dress themselves easily to reasonably easily, while three-quarters could still walk very well to reasonably well. The activities which were most problematic were climbing stairs, writing, and enjoying their hobbies.

A significantly higher percentage of White respondents than Black respondents could still perform the activities listed in Table 3 well, while Black respondents also experienced more problems in performing the activities than White respondents. If the listed activities were to be seen as a criterion for admission, it is clear that the total group under investigation was still to a great degree independent and could thus function outside an old-age home.

The researchers also investigated **social life** as an aspect of the residence of the elderly in old-age homes.

Elderly people in old-age homes have had to detach themselves from their familiar surroundings, and sometimes also from their friends. However, this process of detachment is not an absolute breaking of ties with significant others, thus contact with these significant others remains important for the elderly, including those in old-age homes.

For most of the respondents (85,3%) in the group under investigation, contact with their children was very important. An equally large group (83,7%) indicated that contact with spiritual workers was very important to them, while 80,3% regarded contact with friends **in** the old-age home as very important.

Although contact with other relatives and friends **outside** the home was still considered very important by the majority of

respondents, a smaller percentage than in the cases listed above regarded it as very important (Table 4).

The finding that contact with significant others is very important to the elderly agrees with that of Thompson and Hickey (1994:296-297) as well as with that of Fuller (1972:60).

As far as the **frequency of contact of the elderly** with significant others is concerned, the following findings emerged: More than 70% of the respondents indicated that they often have contact with friends in the home (79,0%), with their children (75,8%) and with spiritual workers (71,0%).

By contrast, only 40,0% of the respondents often have contact with friends outside the home and 37,1% with other relatives.

It appears, thus, that contact with their children, with spiritual workers and with friends in the home is very important for the vast majority of respondents, and that respondents do indeed have most contact with these three groups of people.

It should also be noted that, in spite of the fact that 85,3% of the elderly considered contact with their children very important (Table 4), up to a quarter of them actually had little or no contact with their children (Table 5).

On closer examination of the degree of contact which the elderly enjoy with significant others, it was found that in the case of half the total group under investigation (51,0%), contact with their **children** had remained constant.

Where the amount of contact had changed, it had rather increased than decreased (an increase in contact for

TABLE 3: Perceived degree to which respondents could perform certain activities

Activity	Perceived degree to which activities could be performed						
	Very well	**Well**	**Reasonably**	**Poorly**	**Not at all**	**N**	**%**
Walking	25,1	23,1	26,1	19,0	6,8	295	100,0
Climbing stairs	15,9	22,4	22,7	23,1	15,9	295	100,0
Sleeping	29,8	34,2	23,1	12,5	0,3	295	100,0
Practising a hobby	28,5	27,1	9,2	13,9	21,4	295	100,0
Reading	35,3	27,1	12,5	9,5	15,6	295	100,0
Writing	24,7	21,0	18,0	14,9	21,4	295	100,0
Memory	22,1	34,4	25,2	16,3	2,0	294	100,0
Dressing, bathing oneself, etc	48,1	32,2	13,9	4,7	1,0	295	100,0
Hearing	40,7	28,8	17,6	12,5	0,3	295	100,0
Seeing	23,4	32,9	23,4	17,6	2,7	295	100,0
Thinking clearly	31,2	43,1	19,3	5,8	0,7	295	100,0

TABLE 4: The perceived importance of contact with significant others

Contact with:	Unimportant	Moderately important	Very important	N	%
Children	11,5	3,2	85,3	279	100,0
Other relatives	15,5	14,8	69,7	290	100,0
Friends outside the home	27,8	19,6	52,6	291	100,0
Friends within the home	10,9	8,8	80,3	295	100,0
Spiritual workers, e.g. deacons/elders	6,8	9,5	83,7	295	100,0

TABLE 5: Frequency of contact with significant others

Contact with:	Often	Seldom	Never	N	%
Children	75,8	20,2	4,0	252	100,0
Other relatives	37,1	47,1	15,8	272	100,0
Friends outside the home	40,0	34,2	25,8	260	100,0
Friends within the home	79,0	16,8	4,2	291	100,0
Spiritual workers, e.g. deacons/elders	71,0	22,8	6,2	290	100,0

27,1% of respondents and a decrease for 21,7%). In the case of contact with **other relatives**, contact had decreased for most respondents (46,1%), remained constant for 44,3% and increased for only 9,6%.

Contact with **friends outside the home** had also decreased for most respondents (50,0%), remained constant for 41,6% and increased for only 8,4%.

A statistically significant difference was found beween White and Black respondents. Whereas contact with their **children** had decreased for only 15,5% of White respondents, it had decreased for 52,3% of Black respondents.

The same tendency was found for contact with **other relatives** and contact with **friends outside the home**. Contact with **other relatives** had decreased for 38,3% of White respondents, but for 73,7% of Black respondents.

Contact with **friends outside the home** had decreased for 44,1% of White respondents, but for 76,1% of Black respondents.

From this finding it is clear that elderly Blacks and Coloureds in old-age homes run a greater risk of losing contact with their children, with other relatives and with friends outside the home than is the case with elderly Whites.

Papalia, Camp and Feldman (1996:448-451) quote Lawton's finding that a change of environment (such as moving to another residence) is an anxiety-filled experience requiring a particular adaptability.

People cope with this stressful experience in different ways and with varying degrees of success.

According to the environmental-press model, the environment exerts pressure upon a person, making specific demands on his/her adaptability.

A person's ability to cope with these demands determines his/her degree of success in adapting to a (new) environment. If the environmental pressure increases (as in the case of moving to an old-age home) or the ability to adapt decreases, the person concerned will fall below the normal adaptation level, causing stress. Lawton found that, where both environmental pressure and adaptability are relatively high or relatively low, people feel comfortable in their environment and accept it, or take it for granted: "... they are at their normal adaptation level" (in Papalia et al:450).

Where the environmental pressure is too high or too low, people become uncomfortably aware of their environment and experience it as either overwhelming or boring.

In order to restore the balance of adaptation, means must be found either to lessen the environmental pressure or to improve the person's ability to meet the challenges of the new environment.

In order to operationalise the respondents' adaptation to the environment of the old-age home, a set of statements indicative of adaptation was presented to them for agreement or disagreement (Table 6).

The statements evoking the greatest consensus (more than 80% of all respondents were in agreement) were that they are **happy** in the old-age home (88,5%); that they **enjoy each other's company there** (88,5%); that they are **well cared for** (87,8%), and that **they regard the old-age home as their home** (86,8%). More than 70% of the respondents also agreed that they **do not feel forgotten in the old-age home** (78,6%); that **life in the home is not boring** (72,2%); that **they are not lonely there** (70,5%), and that **they are not deprived of privacy there** (70,2%).

It would thus appear that the respondents as a whole have generally succeeded in adapting to the environment of the old-age home, coped with the environmental pressure, and thus made themselves feel at home.

The major obstacles in this process of adaptation involve an alleged loss of privacy (25,8%), loneliness (23,4%), monotony (19,3%) and a sense of having been forgotten (17,6%).

Judging by these four indicators, only a minority appear to have had problems in

TABLE 6: Indicators of respondents' adaptation to the old-age home environment

Statements	Degree of agreement				
	Strongly agree/agree	Unsure	Disagree/strongly disagree	N	%
I am happy here	88,5	2,4	9,2	295	100,0
I am lonely here	23,4	6,1	70,5	295	100,0
I am well cared for here	87,8	5,4	6,8	295	100,0
I feel forgotten here	17,6	3,7	78,6	295	100,0
I enjoy the company of my friends/peers here	88,5	4,1	7,5	295	100,0
Life here is boring	19,3	8,5	72,2	295	100,0
This is my home	86,8	2,0	11,2	295	100,0
I am deprived of my privacy here	25,8	4,1	70,2	295	100,0

adapting.

When the responses of White and Black respondents are compared, however, certain significant differences emerge.

A higher percentage of Black respondents (37,5%) than White respondents (12,1%) felt forgotten in the old-age home; a higher percentage of Black respondents (29,7%) than White respondents (16,5%) considered life in the home to be monotonous, or boring; a higher percentage of White respondents (90,0%) than Black respondents (75,0%) regarded the old-age home as their home, and a higher percentage of Black respondents (37,5%) than White respondents (22,5%) believed that they had suffered a loss of privacy in the old-age home.

With regard to leisure-time activities, as a whole the group under investigation spent their time listening to the radio, visiting friends, reading and watching television, while activities such as participation in sport, gardening, playing cards or board games and organised exercise were not popular.

By comparison, elderly Whites and Blacks appear to participate equally little in sport, while elderly Blacks spend significantly less time visiting friends than elderly Whites.

As has been noted, elderly Blacks run a greater risk of losing contact with acquaintances **outside** the old-age home.

The finding that they also spend significantly less time than their White peers visiting friends **within** the old-age home is a further indication of the greater danger of social isolation which threatens Black old-age home residents.

Given the current climate of violence and the assaults on soft targets (including the elderly) reported from time to time in the press, respondents were asked **how safe they feel in the old-age home**.

On a scale of one to five, the vast majority (85,4%) indicated that they felt safe to very safe, while only 6,1% said that they felt unsafe to very unsafe. The remaining 8,5% were neutral on this question.

Along with the finding that the members of the group under investigation have generally coped with environmental pressure and adapted well to the surroundings of the old-age home, the fact that the vast majority of them felt safe there is indicative of their satisfaction with their environment in the old-age home.

As far as the **behaviour of staff towards residents** is concerned, the response of the group under investigation was largely positive regarding the way in which they are treated by staff, from management to cleaners (Table 7).

This experience must indubitably contribute to the welfare of residents.

With regard to the **satisfaction of residents with the existing services** at the

old-age homes, the majority (87,5%) of respondents (90,5% of Whites and 76,6% of Blacks) indicated that they were satisfied or very satisfied, particularly with the general care which they receive and with the emotional help, support and friendship which is available.

Judging from the responses, the minimal degree of dissatisfaction appears to derive from residents' own innate unhappiness or bitterness.

Respondents were also asked how the **provision of services had changed over the past five years**. More than half the residents (52,8%) who had been in the homes for at least five years indicated that the provision of services had remained constant.

About a quarter (26,8%) said that the provision of services had improved, while 20,3% felt that it had deteriorated over the five-year period.

The new welfare policy suggests that the elderly should not be cared for in old-age homes, but in the community. If they are now to become the responsibility of the community once more, it is important for the elderly to know whether they will be accepted by society, and how the community regards them.

For this reason, it is enlightening to establish 1) the **elderly's perception of the general public's behaviour towards them** and 2) the **public's view of the elderly**.

TABLE 7: Respondents' perceptions of the staffs' attitude towards residents

Staff	Response				
	Positive	Neutral	Negative	N	%
Management	87,1	8,8	4,1	295	100,0
Administrative personnel	84,1	12,9	3,1	295	100,0
Professional medical staff (e.g. sisters)	90,1	8,5	1,4	294	100,0
Care assistants/Nurse aids	80,5	13,6	4,8	272	100,0
General staff (e.g. cleaners)	76,7	14,2	8,5	283	100,0

As may be seen from Table 8, the group under investigation were, as a whole, of the opinion that in general, the public behaves in a friendly, considerate, helpful and tolerant way towards the elderly, but that the public is only involved with the elderly to a limited extent. When the two population groups are compared, the only statistically significant difference is on the issue of tolerance.

Whereas 71,4% of White respondents considered the public to be tolerant of the elderly, only 56,3% of Black respondents were of the same opinion.

In fact, 28,1% of Black respondents felt that the public is intolerant of the elderly, as against only 10,0% of White respondents.

As far as **society's view of the elderly** is concerned, Table 9 shows that, for the group under investigation as a whole, most respondents (59,6%) were of the opinion that the elderly are not neglected by society; that they are not considered senile (59,0%); that they are still believed to be able to think for themselves (50,8%), and that they are not viewed as a burden on society (50,8%).

TABLE 8*: Respondents' perceptions of the attitude of the public in general towards the elderly

The public's attitude towards the elderly				
Neutral			N	Total
Considerate: 73,6%	14,2	Inconsiderate: 12,2%	295	100,0
Friendly: 81,4%	10,5	Unfriendly: 8,2%	295	100,0
Involved: 53,2%	26,8	Uninvolved: 20,0%	295	100,0
Tolerant: 68,1%	18,0	Intolerant: 13,9%	295	100,0
Helpful: 72,2%	19,7	Unhelpful: 8,1%	295	100,0

* Scale of semantic differentation with 1 = considerate and 5 = inconsiderate, etc. 1 and 2 on scale = considerate; 3 = neutral; 4 and 5 = inconsiderate

A comparison of the two population groups reveals a somewhat different picture, however. Whereas most White respondents disagreed with the statements that most people think the elderly are all senile, that they cannot think for themselves, and that they are a burden on society, the majority of Black respondents agreed with these statements.

If more than half the White respondents had the perception that society does not see the elderly in a negative light or consider them as a burden, one may hypothesise that elderly Whites would be willing to be reabsorbed into the community - a real possibility in the light of the proposed new welfare policy.

This argument, however, does not hold good for elderly Blacks.

Respondents were asked whether they thought it desirable that physically and financially independent elderly people should give up their places in old-age homes in favour of elderly people who are frail or financially embarrassed.

Table 10 reflects the data and indicates that White respondents were less inclined to agree with such an idea than Black respondents. White respondents were overwhelmingly against the idea, while Black respondents were more divided on the issue.

A final aspect of the investigation involved the elderly residents' **fears for the future** and **their worries** concerning their old-age homes. A quarter of the group under investigation could view the future without any **fear**.

The main fears of the remaining three-quarters of the group had to do with personal finance and possible dependency due to failing health.

Almost 40% of the respondents had no **worries** concerning their old-age homes, while the other 60% indicated that they were concerned, particularly about the continued existence of the homes in the light of decreasing subsidies.

DISCUSSION AND CONCLUSIONS

Projections indicate that the number of elderly people (65 years and older) in South Africa will increase by approximately 180% over the next 30 years, from 1,8 million in 1995 to 5,1 million in the year 2026, and that the proportion of the elderly (as a percentage of the total population) will increase in all four population groups.

The percentage of elderly Asians is expected to rise during the period from 3,8 to 13,6; that of elderly Blacks from 3,6 to 6,5; that of elderly Coloureds from 3,4 to 10,1, and that of elderly Whites from 9,5 to 19,3.

TABLE 9: Respondents' perception of society's view of the elderly

Statements	Perception				
	Strongly agree/ agree	Unsure	Disagree/ strongly disagree	N	%
The elderly are neglected by the community	25,1	15,3	59,6	295	100,0
Most people think all elderly are senile	25,4	15,6	59,0	295	100,0
Most people think the elderly cannot think for themselves	37,6	11,6	50,8	295	100,0
Most people consider the elderly as a burden on society	32,9	16,3	50,8	295	100,0

TABLE 10: Respondents' attitude towards giving up places in old-age homes in favour of other elderly people

		Opinion			Total	
Statement	Group	Agree	Unsure	Disagree	N	%
Physically independent elderly people should give up their places in old-age homes to make room for **frail** elderly people.	White	16,5%	9,1%	74,5%	231	100,0
	Black	39,5%	12,5%	48,4%	64	100,0
Financially independent elderly people should give up their places in old-age homes to make room for **financially embarrassed** elderly people.	White	15,2%	13,0%	71,9%	231	100,0
	Black	40,6%	21,9%	37,5%	64	100,0

If it was assumed that old-age homes are a "last" refuge where the elderly can be cared for, the current study has shown that, in the group presently under investigation, a high percentage of the elderly are still independent and thus do not really belong in an old-age home.

These elderly people, with a median age of 70,8 for Black respondents and 78,8 for Whites, would probably be able to function equally well in the community.

The most important reason for moving to an old-age home relates to deteriorating health, and only a quarter of the group under investigation indicated this as their reason for having moved into a home. Only 13,9% considered their own health to be "poor" (11,2%) or "very poor" (2,7%), in comparison with the health of

most other people of their age. It appears, too, that almost three-quarters of the group under investigation considered themselves financially better-off, or at least equally well-off in comparison with most of their peers.

In spite of the limitations which advancing age imposes on everyday activities such as walking, sleeping, reading, bathing and dressing, more than 60% of the respondents were still reasonably able to perform all their necessary everyday activities.

Contact with the outside world, particularly via their children, relatives and spiritual workers, is very important for the elderly. There is always the possibility, however, that this contact may decrease when an elderly person moves into an old-age

home and that he/she may become increasingly socially isolated.

Although for most respondents the amount of contact with their children had remained constant or even increased, for 21,9% it had decreased since moving into a home.

Whereas only 15,5% of elderly Whites experienced this decrease in contact with their children, it was reported by 52,3% of elderly Blacks.

The same tendency may be observed in relation to contact with relatives and friends outside the old-age home, whereas as many as three-quarters of the Black respondents' contact with relatives and friends had decreased since moving into a home.

Elderly Blacks and Coloureds thus run a greater risk of social isolation than elderly Whites.

This study has also shown that a higher percentage of elderly Blacks (37,5%) than elderly Whites (12,1%) felt forgotten in an old-age home; that a higher percentage of elderly Blacks (29,7%) than elderly Whites (16,5%) regarded life in a home as boring; that a higher percentage of elderly Blacks (37,5%) than elderly Whites (22,5%) believed that they had lost their privacy in the home, and that a higher percentage of elderly Whites (90,0%) than elderly Blacks (75,0%) regarded the old-age home as their home.

The group under investigation was generally of the opinion that the public behaves in a friendly, considerate, helpful and tolerant manner towards the elderly. However, significantly more Black respondents (28,1%) than Whites (10,0%) felt that the public is intolerant of the elderly.

White respondents also had a more positive picture of how society views the elderly. Whereas most White respondents disagreed with the statements that people in general think the elderly are all senile, that the elderly cannot think for themselves, and that they are a burden on society, most Black respondents agreed with these statements.

Lastly, the study reveals that White respondents were overwhelmingly against the idea that physically and financially independent elderly people should give up their places in old-age homes in favour of frail or financially embarrassed elderly people - an idea which met with a more positive response from a much higher percentage of Black respondents.

One of the basic principles of the proposed new policy on the care of the elderly in South Africa is a shift of emphasis from institutional care to community-based care.

However, the philosophy of community-based care presupposes the existence of a wide range of available and affordable services. What happens if the community support is lacking and the services are not available, affordable or extensive enough to provide for the increasing number of elderly people?

In spite of the perception of the group under investigation that the elderly are viewed in a positive light by the general public and thus could be reasonably easily reabsorbed into the community, the question remains whether the proposed new welfare policy, with its emphasis on the responsibility of the community for the care of the elderly, can be summarily implemented.

If the policy is not to be phased in gradually, with an accompanying resocialisation of the whole community,

one can not help but share the scepticism of Hendricks and Rosenthal (1993:4), and ask: "Who will be left to fill in the gaps in care?" in South Africa.

On the positive side, the present study suggests that, if generalisation is valid, there are currently, as in Canada, thousands of institutionalised elderly Whites in South Africa who "... may be capable of being maintained in the community" (Hendricks & Rosenthal, 1993:4).

However it is approached, the issue of ageing and the care of the elderly remains a complex phenomenon.

Solving its problems poses such great challenges that one can only agree with Toffler that "... it challenges all our old assumptions.

Old ways of thinking, old formulas, dogmas and ideologies, no matter how cherished or how useful in the past, no longer fit the facts.

The world that is fast emerging from the clash of new values and technologies, new geo-political relationships, new lifestyles and modes of communication, demands wholly new ideas and analogies, classifications, and concepts. We cannot cram the embryonic world of tomorrow into yesterday's conventional cubby holes. Nor are the orthodox attitudes or moods appropriate" (1980:18-19).

Notes

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1. The terms old-age home and retirement village are used interchangeably in this study.

2. Coloured and Black respondents will henceforth be referred to as Black respondents.

3. Differences described as statistically significant are at the ≤ 0,05 significance level.

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