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THE   LIVELIHOOD IN TRANSITION: THE CASE OF ELDERLY WOMEN IN AKITENINO VILLAGE IN UGANDA.

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ABSTRACT

This study makes an investigation of the livelihood of elderly women in Uganda. The investigation is aimed at developing an in-depth understanding of how the elderly women perceive their basic needs and how they secure them. Given the aim, a significant part of this study is a devoted discussion of the use of qualitative case-study, in order to compare and contrast their perception and access to resources and services. I singled out old women because their livelihood burden remains on the family, and those without the family to rely or live in deplorable conditions coupled with discriminations suffered from society because of their gender and age.

In Uganda, the number of people who are ageing is increasing rapidly. The demand by elderly people for basic services such as water, food; housing, medical care, transport and income security has also gone up. The challenge to provide them with these services remains waiting for interventions from the state, families and the local community.

The key concepts in the study are livelihood, networks of relationships, basic services and institutional arrangements.

It is hoped that this study will provide new insights regarding problems and possibilities associated with old age in Uganda.

LIST OF ABBREVIATIONS

HIV/AIDS	Human Immune Virus/Acquired Immune Deficiency Syndrome
DRC	Democratic Republic Of Congo
GDP	Gross Domestic Product
UN	United Nations
UNDP	United Nations Development Programme
HDI	Human Development Index
MDG	Millennium Development Goal
PEAP	Poverty Eradication Action Plan
UK	United Kingdom
DFID	Department for International Development
NGOs	Non-Governmental Organizations
MGLSD	Ministry of Gender, Labour and Social Development
UNMHCP	Uganda National Minimum Health Care Package
STI	Sexually Transmitted Infections
RUM	Rural Urban Migration
PSV	Public Service Vehicles
SAPs	Structural Adjustment Programmes
PAPSCA	Programme for Alleviation of Poverty and Social Costs of Adjustments
NORAD	Norwegian Agency for Development Cooperation
CDOs	Community Development Organisations
WB	World Bank
IMF	International Monetary Fund
DRB	Domestic Relations Bill
PMA	Plan for Modernisation of Agriculture
UPPAP	Uganda Participatory Poverty Assessment Programme
WSSD	World Summit on Social Development

CHAPTER ONE: INTRODUCTION

1.0 Introduction

Generally, in most developing countries in Africa, old people face numerous problems most of which were due to changes in socio-economic and political situations during the last two or three decades. Some of these changes,and the consequences such as the gradual shift from traditional extended family structure to nuclear family are reflected in the life situation of old women in Uganda. These changes pose to be challenges for the elderly regarding their survival, since the family network that used to be their insurance is phasing off without any alternative from which they can seek support. In addition to that, government does not have any social security support for old people in general, and have to depend on their families for support and care.

In Uganda old people constitute a big proportion of the population.In addition to low incomes, majority live under undesired conditions characterised by inadequate facilities regarding housing, health, food etc.Their dwellings lack clean drinking water and sanitation.
These undermine their general well-being.Given these inadequacies in the livelihood of elderly women, this study attempts to make a close investigation of how they cope with challenges of everyday life.

1.1 Aims of the study:

The study is aimed at understanding the relationship between old age and livelihood.My strategy involved an in-depth understanding of these two research issues:
1. How the old women perceive their basic needs in terms of services.
2. How they secure access to the services to satisfy their basic needs.

I have chosen the old women of Akitenino village in Lira sub-county, Lira district, northern Uganda. This is because I know the conditions of this area having lived in this community for over a decade and experienced old women facing challenges in accessing basic services partly because of their age and gender.

The livelihood of the old women as well as lack of government policy on the elderly influenced my choice.It is because we need to find out how these old women meet their livelihood demands. They also lack social security support from the state.The HIV/AIDS pandemic is another factor which added on my choice because the children who should take care of their parents in old age are being claimed off by this scourge calling for alternative means of support for the old women which will be discussed in detail in the next chapters.

The research is comparative in nature.It makes the use of a qualitative case study.Both in-depth interviews and observation were the sources of data on the old women's own understanding and life experiences on how they perceive basic needs interms of services and how they secure it. Because of the complexity of the method, chapter four makes a detailed discussion on the methodological issues.

Whereas Chapter 1 outlines the study's object (old women) and their livelihood situation in Uganda by stating the aims of the study, concepts and methods used for data generation and analysis, Chapter 2 continues to give a more comprehensive background of the study area. The country profile, population composition and brief mention of the main source of livelihood is made.This source of livelihood is discussed in details in the following chapters to show why the old women have been chosen as cases in this study.The chapter ends by giving a brief analysis of the general condition of elderly people in Uganda.It notes that despite the lack of government policy to direct services to the old people,the existing social network still continues to give support especially the extended family to the old people although it is being hit by the waves of change such as of increased living costs,migrations making many preferring for more smaller nuclear families.

Chapter 3 discusses the various concepts and theories used in the study.This chapter begins by discussing the relevance of the concepts of livelihhod,networks of relationships,access to basic services and institutional arrangements in understanding the livelihood of the old women.The concepts are related to the theories discussed such as Esping-Andersen's welfare state models and the social development theory.Social Development theory looks at reciprocity and communitarian approaches of welfare.All these theories in one way or the other play significant roles in understanding the livelihood of old women in Uganda .

Chapter 4 draws on the conceptual and theoretical discussions in the preceeding chapter and discusses the methods used in the study.The methodological discussion gives in-depth analysis of the the choice of methods used looking at both its strengths and weaknesses, selection of cases and data generation.It ends with a concluding argument for the choice of method used as being the most appropriate for this particular comparative case study based upon qualitative data.

Chapter 5 continues with the discussion in chapter 4 on methodology by presenting the different cases, that is old women living with spouses and those living alone.This presentation of cases seeks to find out the differences and similarities in the perception of basic needs and securing access to the needs by these two different cases.The ultimate aim is to compare and contrast the patterns of perception and securing access to needs and find if out if there is are big differences or not.

Chapter 6 continues with giving detailed analysis on the two cases of old women secure their basic needs drawing from the theories discussed in chapter 3 especially where the family remains on the lead to provide for their needs.This is because the state of Uganda being a developing country offers very little opportunity for the majority rural poor population to depend on the market for all their needs.It concludes by stating the invaluable multifunctional roles of the family and kinship in covering economic,political,social and domestic domains that support the old women's livelihood.

Chapter 7 is the concluding chapter which draws the threads of the preceeding chapters together. It also looks at both strengths and weaknesses of the study tools, but ofcourse gives a strong support for the choice of tools used that best fitted the study's requirements.

CHAPTER TWO: BACKGROUND OF STUDY AREA

Uganda is located in the Eastern sub-region of Africa bordered by Kenya to the East, Tanzania, Burundi, Democratic Republic of Congo (DRC) to the South, Rwanda to the West and Sudan to the North.

The total land area of Uganda is 235,887sq.kms with a total of 36,320 sq.kms of water bodies and wetlands.

Uganda is divided into four regions namely,Northern,Eastern,Central and Western with a total of 56 districts.There are over 30 ethnic groups with two major linguistic groups that is the Bantu-speaking found in the south,central and west and the Nilotic group found in the north and north –east of the country.

The current population of Uganda as per the last Population and Housing Census provisional results 2002 is about 24.7 million with an annual growth rate of 3.4% and total fertility rate of 6.9% believed to be the highest in the sub-saharan region. The population is predominantly rural with about 80% employed in peasant agriculture as the major source of living. Agriculture forms the base of the economy accounting for a big percentage of GDP.This means the majority rural population live below the bread line since agriculture is the "provider" of all their requirements.

Uganda's population is described as young although the number of people ageing is increasing steadily.The 1991 Population and Housing Census report put the number of people aged 60 years and above at 686.260(4.1%) of the 16.671.705 people of Uganda.According to 2002 Population and Housing Census results,older persons are currently 6.1% of the total 24.7 million.This is a big population that requires social attention in terms of social support systems for their livelihood.This population is expected to increase more than what is shown in the table below in the next 20 years to come. Uganda's population composition indicated below of infants, children, youth, adults and elderly, whose activity status is either:
a) Household worker (unpaid family work)
b) School (pupils and students)
c) Disabled

d) Very old, the population in one way or the other need support and care, shows that the older persons form a percentage in the population that can not be ignored. In the table, the figures show that old women are more than old men.This is because of the increased life expectancy women have of 45 years and 40 years for men. The implication of this increased life expectancy means care and support is most needed by old women whose ability to work has diminished and are unable meet their daily livelihood requirements .This leaves them to depend on their families ,friends and neighbours for support.

Table 1.0 showing age composition of Uganda's population, 2002 census

Age	Male	Female	Total	Total %
0-14	6,314,371	6,265,681	12,800.052	50.9
15-47	5,803,430	5,789,713	11,593,143	47
65 and above	247,789	278,080	525,878	2.1
			Overall total 24,699,073	

Source: (*CIA World Fact book 2002, Encyclopaedia artilce on Ugandan Population*)

From the the table, the economically active age who engage in agriculture and other income generating activities such as small scale trading is from 10+ years to 64 years at most.Although the number of old persons at 60-64 years who still engage in active production is very small. The old women aged 60 years and above of Akitenino village in Lira district form a portion of the many old women in Uganda who face acute difficulty in provision of their basic needs such as food, water, housing, health and transport to maintain their livelihood.

Lira district was formed in 1974 when the then Lango district was split to form Apac district. Its native inhabitants are the Langi who remain the main ethnic group in the district.The district has a total area of *7,251* sq.km of which *1,100* is wetland and *6,157* sq.km is land.The population is about 1.5 million with a distribution of 380,172 females and *371,000* males.Out of the *380,172* females, the distribution of old women above 65 years in the district is about *10,870*[1] .

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[1]Lira(2002)p.14

Lira district comprises of six counties; Erute, Dokolo, Kyoga, Otuke, Moroto and Lira Municiplaity.These counties are further divided into 28 sub-counties, of which four are Lira municipal divisions. These are Lira sub-county, Ojwina division; Lira central division and Railways division.There are a total of 156 parishes with 2,080 villages in the district.

Currently, the municipality has a population close to one million because of the influx of internally displaced persons from their homes and other neighboring districts.Lira sub-county, my area of study and has a population of about 30,375 with women being 15,252 and men are 15,125.The old persons form approximately ¼ of this population.

From this increased number of women indicated above, and the subsequent increased life expectancy of women in Uganda in general is a big disadvantage to the old women of Akitenino village as well.This is because they have to continue working inorder to meet their needs.Subsistence farming being the means of living further puts the old women in more disadvantageous positions because it requires and demands physical ability which they do not have.The only option left for them is to depend on their families to meet their daily demands.However, this is more problematic for old women without families who have to depend on friends, neighbours and volunteers from the communities they live in.The support and care provided outside the family can't be relied on by the old women because is more of a courtesy than an obligation.These old women who live alone have to struggle to provide for their needs which is difficult for instance; they can't walk long distances to collect water or reach the hospital.Their inability to access these services remains poor, and this increases their vulnerability more.

Furthermore, UNDP's (2002) Human Development Index (HDI) indicates that Uganda is still far below provision of basic services towards achieving the Millennium Development Goal (MDG) 2015. This is because of the uneven demographic and resource distribution across the population.This skewed distribution presents a scenario where the majority of not only old people live below the accepted minimum standards.Hence poverty and living among old people should not be defined only in terms of lack of cash, as the most pressing problem, but by having security of material livelihood needs such as health, housing, clean water and sanitation, electricity, transport, education and leisure which can improve their lives.

To have these basic services provided, the current poverty reduction strategies such as Poverty Eradication Action Plan (PEAP) should target old women whose capacity to work has diminished. This would integrate the old women's needs into the mainstream development process and plans.The elderly don't receive any direct help from formal institutions and if available is very minimal. The integration will add on the supportive networks that provide help to the old women.

Lack of a national policy on the elderly to guide government and donor action to direct services to meet the needs of old women has further "boosted" the low political will and commitment from government to address old age issues. Consequently, the old women in particular have had no guaranteed basic service provision and continuously live below the bare minimum level, while their attempt to manage daily living demands remains a myth year in and out.

The prolonged war in this area puts the old women in a more disadvantaged situation in that many traditionally male tasks of providing for the family are now being performed by women.The young and able males who could provide for their families have and are still being claimed by the war and the HIV/AIDS scourge.

The interest to know more about old people associations in Uganda, such as The Uganda Reach the Aged Association and many others that could be in place are doing to voice out the plight of elderly persons was a big motivation to take up this study.This is because it is hoped that by voicing out the plight of old persons will create awareness among the general population and government to address the concerns of these people.

With these in mind, and from indicators got from data generated on the living conditions of old women in Uganda,it was realistic and convincing enough to take up this study to investigate on how the old women perceive their needs and how they secure access to these basic material needs.

CHAPTER THREE: CONCEPTUAL FRAME WORK AND THEORY.

In this chapter, I will discuss the concepts and relevant theories that have been used in the study. The core concepts are livelihood, basic services, networks of relationships and institutional arrangements.

These concepts are relevant for understanding the challenges faced by the old women in terms of their perception of basic needs and how they secure access to these needs. These are tied to personal relationships and networks within which the old women secure the basic needs and related to theories of welfare and social development used in this study.Social development being a process of promoting people's welfare together with the dynamic process of economic development fits in this analysis.It is an approach that seeks to enhance the well-being of the whole population be it families,communities,societies,individuals if they are to experience social satisfaction of their needs[2].This approach of social development challenges Uganda in that while it boasts of experiencing increased economic growth and development,social conditions among a large section of the population have improved on very marginally.The explanation is that,although some economic growth can be observed, the growth result have not been accompanied by concomitant and even spread out of social development especially in provision of basic social services such as clean and safe drinking water,income and food security,health services and housing[3].The development process excluded some sections of the population from utilizing opportunities available that could improve their standard of living.The elderly have been no exception to this perpetuated discrimination especially the women although they are major contributors to economic development.They don not share adequately in it is benefits because their incomes are lower than men's ,their status is inferior and live in conditions of deprivation and dependency experienced most in old age.

This is partly because as their age increases, participation in livelihood support activities decreases and in most cases they are seen to withdraw from active community life and to live on their own. The result of such withdrawals is isolation of the old women. These raises a question of concern that: **"is their later life their own responsibility, that of their families, or a duty of the state"?**

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[2]Midgley,(1995)p.8
[3](UPPAP,(2002)p.20

The question is basically showing that most old women are vulnerable because they lack buffers against their old age now that they are economically inactive. The need to support them becomes inevitable from either the state of the family.The family in this case takes up the responsibility to provide support for the parents in old age.But this support is fading away slowly due to increased migration of the rural work force to urban areas in search of wage labour.The elderly and children who are remain behind are unable to provide for their needs.Whereas in some parts of the country, this inevitable demand for a living wage that has drawn most of the work force to towns is misconstrued to be a "blessing in disguise" for older children's intended escapes from their obligations to support their parents in old ages.

The result of this massive migration has weakened the old insurance scheme; the extended family which took care of the elderly. The need to put in place new mechanisms to take up roles the family played in providing support and care to the elderly becomes inevitable.This is because of the widening disparity between the old and young in accessing basic needs as changes continue in society. Short of this will see many elderly people being pushed on the margins of society because they are unable to cope up with the challenges to meet their basic needs.

Furthermore, this analysis also shows that ageing is a socially constructed condition. This is because many approaches have been constructed by scholars across professional disciplines to explain old age such as gender, social status of individuals in the society, chronological, physical ,biological and psychological dimensions to mention but a few. Hence this study takes on the approaches that relate to exploration, explanation and understanding of the old women's livelihood.

Livelihood

The concept of Livelihood can be defined and described in context. In this study it encapsulates means of support or subsistence by the old women in terms of securing access to basic services. It also refers to the means needed to support, maintain and sustain life.

In this study, I am defining and describing livelihood as activities pursued by individuals and households to increase levels of wealth ,stocks and flows of food, cash and other resources to provide for the subsistence and security against impoverishment.It is the sum of ways in which people make a living which involves a mix of strategies to mobilize available resources

and opportunities not only from the market but from personal relationships or networks in which individuals are involved.It is therefore one piece of information that can reveal how and why people survive or fail to survive difficult times because it is linked to self employment, social networks and division of work based on gender.

Titi & Singh (1994) in their article "Tracing livelihood diversification in Uganda's changing…"defined livelihood: *as people's capacity to generate and maintain their means of living, enhance their well-being and that of the future generations. The capacities are contigent upon the availability and accessibility of options which are ecological, economic, and political and which are predicated on equity, ownership of resources and participatory decision making.*[4] This definition makes me ask this question **"what livelihood means do the old women adapt to maintain their livelihoods"?.**

This question focuses on how the old women meet their daily livelihood needs. The underlying reason is that old age is taken to mean inability to work and earn to care for one's self; a thinking held by many individuals in this community.The implies that the old women engage in a range of activities that can make them earn their daily need. Among the various activities engaged in, borrowing from kins, friends, neighbours and social associations from outside the family are the most common. Family support is always home based because family members are engaged in subsistence farming, the main source of food and household income.

The local community form the least arm of support to the old women because majority of them do not have morethan enough to share out with others outside their family. The reason being living is more market driven today unlike before where people in this community shared a lot with their neighbouring kinsmen. This was especially during times when famine befell their neighbours and needed food aid. They would willingly give dry food stock to their hungry neighbours for they believed that next time could be your turn populary expressed in Luo as; *alunyu loo akwonga* meaning *one good turn deserves another.*This spirit of helping other members of the community, was in one way or the other a means of redistribution and mutual dependence among the people.It provided social security through reciprocity as a mechanism to help those who suffered calamities and could not cope with. But today,the

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[4] Carney, & Singh,.(1999) ,P.4

community is unable to do this due to several reasons already mentioned which shows how much the traditional voluntary systems have broken down although this varies in many parts of the country. The only hope is the older children to provide protection for their old folks while the childless have no effective sactuaries at their disposals but to depend on voluntary networks of friends and neighbours. Thus, livelihood remains central in the study because it is important to know how the old women continue with their living in later years where their work capacity is reduced.

Access to basic services

The concept access in this study means the ability of the old women to reach or get the basic services they need. A basic service here is that service whose consumption promotes widespread positive changes in the living conditions of the consumers because it includes certain minimum requirements of a family for private consumption like adequate food, shelter, clothing and household equipments. It also includes essential services such as safe drinking water, sanitation, public transport, health, education and cultural facilities.

It is important to note here that, there is no universal definition of basic services due to the convergent needs or demands people have.This means the definition of what a basic service is, is placed within the context of the users. Although something basic could be a foundation, a starting point, a base, an essential, a vital or an integral part to make a complete whole.

UNDP et al, (1996) defined basic social services to comprise basic education, primary health care, family planning services, low-cost water and sanitation, nutrition and social protection. Of importance from this definition and in relation to the study's research issues is social protection which means prioritising livelihood security by providing the mentioned services to increase people's resistance and resilience to challenges of meeting daily demands now and in the future. Therefore access is the only one measure of availability, affordability, proximity, quantity and quality of these services that support livelihood.

In the same view, access to basic services could also be looked upon as a means to enhance equity in terms of service availability and provision in Uganda. This is because the non-poor have significantly better services than the poor who have continuously faced numerous challenges in accessing vital services for their households. For instance access to water and sanitation may have an impact on the livelihood of old women through improved sanitation,

hygiene and water supply.This reduces incidence of getting water borne related infections allowing them to stay healthy and can engage in income generating activities which in turn enables them to provide for their household needs.

From the chain of stages that has to be followed, am saying that this phenomenon may not be absolute because it is difficult to determine the direct casual relationship between water and sanitation improvements and improved livelihood because there is interplay of many factors that bring about better livelihood. Therefore attempts to understand how the old women secure access to basic services such as food, adequate shelter, good health, education, clean water supply and sanitation, transport, electricity, security and leisure form the basis of this study.

Networks of relationships.

This is an umbrella concept and refers to relations within and outside the family. This can include spouse, older children, grand children, uncles, aunts, friends, neighbours, well wishers etc. In these networks of relationships, the family structure is important because it is human kind's most basic, vital, and influential institution. It is the foundation of society, the moulder of character and personality and mentor of cultural values. Ideally, it is a group where people care about and support one another in times of triumph or failures.

In Uganda the two major structures of family are rural extended family and the nuclear family systems. The extended family here is the most flexible unit which demonstrates a pattern of almost continual adaptation to changing social and economic circumstances for the old women. This stems back to the historical African traditional living arrangements where elders provided care to the children who in turn provided care to them in their old age. This is because the family members knew that they could depend upon each other not only for economic needs but for other forms of assistance as well. However, today such arrangements are changing and values that used to ensure that old people are cared for and protected are crumbling.Whereas the developing processes that are supposed to meet the needs of all, and especially the most vulnerable, routinely exclude the old people. In this case, the old women have to *walk a tight rope* between survival and starvation were it not for the family; which has and is still essentially the primary provider of welfare services. Friends and neighbours come in to give support since there is insufficient assistance provided by the state to the old women.

Institutional arrangement.

This refers to organisations which deal with major interests and problems of social concern and this is livelihood of the old women.

Institutional arrangement is seen as a government organisation through which essential social services are organized to meet the needs of the old women. This arrangement can be in form of policy statements issued by government to direct the responsible ministry, development partners or local community to provide services to the old elderly.

In Uganda, two main documents spell out government's "supposed support" for the older persons.The Constitution of the Republic of Uganda (1995), Objective V11 under Protection and Promotion of Fundamental and other Human Rights and Freedom states that *the state shall make reasonable provision for the welfare and maintenance of the aged* [5] and the Draft National Policy for Older Persons under Ministry of Gender, Labour and Social Development (MGLSD) also reaffirms government's obligation to protect the aged in its provisions.It is hoped that Parliament's approval of the draft policy will provide a framework on how to include older persons in the development processes ; although institutional support from government and partners in development to old people generally is still very minimal if any. The family remains the traditional supporting unit for the elderly people and where assistance is insufficient they remain vulnerable.

Having attempted to analyse the concepts used and relate them to the theories, I did not find much theory discussing livelihood of the elderly in Uganda. I based my analysis by borrowing the welfare state theory by Esping-Andersen and the social development approach embraced by United Nations in the 1960s.Esping- Andersen catergorizes the welfare typologies into three;that is the conservative regime,which reflects a strongly corporatist tradition,the liberal model which emphasizes the market and the social democratic regime which promotes universalism in welfare provision. These entire regimes *base on both qualitative and quantitative measures of social policy*[6] and aims at distributing and redistribution of society's resources.But the link between the individual's access to the market to access social services makes it distinct and therefore not able to accommodate everyone.Hence these welfare state

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[5] *Uganda,(1995).schedule(11)*
[6] Hardiman,(1991) p.99

regimes mainly work best in the western, industrial and capitalist society morethan developing countries like Uganda.

However with the changes of modernisation and Structural Adjustment Policies(SAPs) that have taken place in most sub-Saharan African countries,we see these regimes;the state,market and civil society interact to provide social services to the people.Although in Uganda like many developing countries, the capacity of the majority rural population to compete in the market is still very low. Many people depend on the civil society which emphasises on the extended family, kins, clans to meet their basic requirements.So if the extended family disappears, what then remains is the state and market to meet the needs of the people where distribution of resources is based on the principle of labor.The result will be exclusion of many people especially the elderly whose ability to work has diminished and can not rely on the market but depend on their families for support and care.

In support of the above analysis, is David Cheal's buttressing description of and argument for the family *as an adaptive unit which mediates between the individuals and society. It is held to meet the needs of individuals and for personal growth, development, physical and emotional integrity*[7]and Gidden's argument *that the family performs important tasks which contributes to society's basic needs and help to perpetuate social order*[8] further shows the importance of the family as the basis upon which exchange takes place among the members. It offers a network of support that is not available elsewhere and this is being threatened by the universal quest for living wage where men,women,children are forced to migrate far from their homes where existing support network may not be available leaving behind the very young and very old who can not provide for their needs.

In support of this and to summarise the argument, am saying that these changes have brought both significant progressive and retrogressive changes to rural family life in Uganda over the decades.This is summed up in Durkheim's argument *that rapid social change creates a vaccum in norms in which old cultural rules no longer apply... leads to disorientation of people as they search for new guidelines to govern their lives*[9].

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[7] Cheal(1991) p.4
[8] Giddens(2001) p.174
[9] Newman (2004) p.507

Furthermore,much as modernization theory urges governments to mobilize all available resources for investments in industry and other modern sectors enterprises inorder to stimulate economic growth, create jobs and through employment creation the income pof the population will rise,this has not been very much acheived in the development processes in Uganda. In the event of this,a social development approach embraced by United Nations since the 1960s up till now that takes the residualist-institutionalist approach by linking social development to economic development policies and programmes would be a better option.

The argument is that this approach offers *a comprehensive macro-perspective that focuses on communities and societies, emphasizes planned intervention, promotes a dynamic change oriented approach which is inclusive and universalistic and above all seeks to harmonize social interventions with economic development efforts.*[10] In contrast to this is World Bank(WB) and International Monetary Fund's(IMF) Structural Adjustment Programme (SAPs) that was implemented by many developing countries in the early 1980s with the hope to promote economic stability.These programmes were done hurriedly seen in policies such as liberalisation of the economies to open markets, decentralising by devolving power to the local people and restructuring of public services by down sizing on the number of civil servants to promote efficiency and effectiveness in service delivery to state afew.But the effects of these new policy changes enforced by SAPs has been and still remains hitting many both urban and grass root dwellers in these developing countries.

In Uganda for instance many people were retrenchment from their jobs and this had a trickle down effect on the family members they supported.It was therefore no surprise that such victims of abrupt changes could not reintegrate themselves into ordinary living situations since many were caught unprepared to leave work with no prior income set aside to live on . Programmes such as Programme for Alleviation of Poverty and Social Costs of Adjustment (PAPSCA) drawn alongside SAPs economic measures by government in form of micro-credit schemes never helped the rural poor because it was introduced belatedly and besides many lacked collateral.

Apart from retrechment which left unhealing scars on the lives of many ordinary Ugandans up till now, SAPs' liberalisation policy has not benefited the common man who has nothing to

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[10] Deacon(2002) p.8

compete with in the market as compared to the average middle classed individuals who have the purchasing power and can interact with the market. So rather than achieving the "good intention" of narrowing the poverty level among the population, SAPs and it is policies has "successfully" managed to widen the income inequalities and disparities between those "who have" and those "who do not have"..Those who do not have especially the elderly have to continue relying on the extended family for support.

In view of the above, communitarian approach in social development takes precedence here.This is because people have the capacity to organize themselves to ensure that their basic needs are met, their problems are solved and opportunities for advancement are created.This demands cooperation with each other and sharing a common purpose. In Uganda community development approach is organized along this line where people are urged to collaborate with each other to promote their own interests within their settings.This in a way forsters the idea of reciprocity reflecting the fact that individuals are not autonomous selves but are socially embedded in communities.Although the community development approach has not always realized its goals fully, it still remains an effective means of promoting social development of its members. It further enhances community identity, strengthening participation and self determination.

As a way of conclusion, the concept of social development used today contrasts the old notion of development which focused on economic growth and changes.Social development suggests changes in the well-being of the weakest in society through mobilising local resources inorder to facilitate their access to the basic services.

This idea and task of securing access to basic services lies within the social networks among the communities in society which the western society have moved away from to the exchange in the market.Although developing countries have tried to move too,there is still much dependence on the family.The state does not work this way in Uganda and the market does not work as well.The old can not buy services from the market and this is true even in modern societies ,the state comes in to enable people secure access to basic services.For example European countries like the Scandinavia,Switzerland etc have the highest standards of living not only because of economic achievements,but because of their systematic efforts to promote human and social development.The states have invested extensively in human and social capital such as extensive health and social services,education,and effective forms of social protection(pensions).

The Principle of reciprocity works on the basis of "help me and I will help you" and communitarianism are within the school of social development where responsibilities arise from social involvements or commitments. The World Summit on Social Development (WSSD, 1995) stressed on enhancing the quality of life for all citizens as a means to respond to the problems of distorted development.UNDP today works towards achieveing this goal through extensions of micro-credit, health, education facilities as well and organizing the civil society to allow as many people as possible to participate in the governance of their communities and nation, although the civil society in Uganda is still not very strong.

CHAPTER FOUR: METHOD

4.0 Introduction

Method refers to selection of cases, selection of data and methods of data collection. The research issues and concepts mentioned in the introduction have influenced my choice of method. Given the theme; the livelihood of old women: that is how they perceive their livelihood and how they secure access to basic requirements, I compare two groups of women; those who live alone and those who live with spouse(s) and aimed at operationalizing the concepts used and analyze data required in finding out:

- Whether there are any variations in the old women's perception of livelihood depending on the family structure, or
- Whether access to basic requirements varies depending on whether they live alone or with spouse.

I chose a comparative method which rests upon qualitative data because it satisfied the demand of selecting sources of data, how to collect data and how to analyze data. To this end I made use of in-depth interviews with 10 elderly women and some key informants that allowed me to compare the cases that is women living alone and those living with spouse.

4.1 Methodological Discussion

Why comparative research?

Ragin, in agreement with Swanson, says that *Thinking without comparison is unthinkable"....,and continues that "virtually all empirical social research involves comparison of some sort meaning that all research are comparative because researchers compare cases to each other in order to assess covariation*[11] He defined comparative research *as research that uses comparable data from at least two societies*[12] meaning that data of comparative social science are cross- societal hence needful to identify, analyse and explain the similarities comparatively because it delves into complexities. This refers to intersocial comparison which can either be case oriented or variable oriented. This study compares two cases within a society.

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[11] Ragin (1987)p1
[12] ibid. pp3

However, comparative study may be conducted within a society. Ragin's argument that *comparative research is research that systematically studies similar or related phenomenon in different national or societal settings* [13] augmented my choice of method because this allowed me study a smaller system (access to basic requirements) within a larger system (livelihood) among the entire elderly population in Uganda.

Comparative method produces explanations that account for every instance of a phenomenon in a study. This means it provides an interpretive account that highlights the processes chosen for study that enables operationalizing concepts, data generated and analysed. Hence the researcher *understands the way participants interpret their experience and construct reality or social life in general.* [14]He/she becomes familiar with the case and concepts of study unlike the variable oriented approach which is more concerned with broader theoretically based images of macro social phenomenon with less concern in understanding specific categories of outcomes. Comparative method is concerned with identifying invariant patterns common to relatively small sets of cases. My case study, how the elderly women meet their daily livelihood is an investigation of inter-relationships and causal connections of various social phenomenon that takes a particular pattern as discussed further below.

4.2 Why Case Study?

Case study is a classic comparative method because it is oriented toward comprehensive examination of historically defined cases and phenomenon. I will make a brief study of how family structures have changed in Uganda and what it is today. This will require a historical interpretation and analysis of the diverse experiences of the livelihood of the elderly women.

Kennet too argues that *the element of comparison forms a key part in any research whether it takes place in one country or many…and continues that comparative cross-national methodology is an approach to knowing social reality through the examination for similarities and differences between data gathered from more than one nation*[15]

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[13] ibidpp34
[14]Ragin ,pp3
[15] Kennet(200)p41

Ragin's argument that *comparativists seek to formulate historical categories of empirical phenomenon as cases*[16],and Yin's definition of case study *as an empirical inquiry that investigates a contemporary phenomenon within its real life*[17] and Schwandt's definition of case study *as a strategy for doing social inquiry that serves the interest of the investigator in understanding and interpreting the phenomenon of study*[18] concurs with my interest to understand the social processes and their variations influencing the elderly women's livelihood in this study.

The boundary of comparative research is set by the investigator. This is because the researcher clarifies the theme of study, conceptual framework, the level of observation and analysis. The strategy normally is case study.

In case oriented comparative research, researchers use combinatorial variables which helps in treating cases as whole entities. Here researchers are concerned with "how" questions which provide answers to the social processes being studied. *Thus seeks knowledge of cases that is sufficiently in-depth*[19] in order to place events and processes in context.

Case studies are a preferred strategy when "how or why" questions are posed and the investigator has little knowledge of events focusing on real life social phenomenon.

However much as the comparative-case research is placed as a distinct form of inquiry; many researchers have criticized it saying;

- The number of relevant cases is too small to allow the investigator establish statistical control over the conditions and causes of variation in social phenomenon.

- Comparative research bases on specific historical sequences or outcomes and their causes across a set of similar cases. This often requires complex combinatorial explanations which are difficult to prove consistently with the norms of mainstream quantitative social science.

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[16] Ragin,pp34
[17] Yin(1994)p13
[18] Schwandt(1997)p12

[19] ibid.pp295

- Its holistic nature limits it because it attends to configurations of conditions based on logical methods of inductive inquiry which does not work with samples or populations.

- It's a less desirable form of inquiry than either experiments or surveys because case study investigators have biased views towards verification to influence the direction of the findings and conclusions. However, this bias is brought by people confusing case study teaching with case study research and can be solved by every case investigator working hard to report all evidence fairly.

- It provides little basis for scientific generalizations because one can not generalize on the basis of an individual case, therefore can not contribute to scientific development.

- A single case can not be regarded as a complete study because the case can turn out not to be what it was thought of at the onset. This is because of shift in the entire nature of the case study. However this is not so because case studies like experiments are generalizable to theoretical propositions not to populations. Thus a case study does not represent a sample since the investigator's goal is to expand and generalize data and not carry out a particularizing analysis.

- Case studies take too long and may result into massive unreadable documents. This is because confusion has been made with data collection methods such as ethnography or participant observation. But case studies do not depend solely on these methods since its aim is to illuminate on complex issues by asking and finding out why or how a study was taken and what result came out?

However these limitations do not undermine the advantages comparative– case research has over other forms of scientific inquiry. But case study is not aimed at showing cause and effect relationship, but outcomes of causal connection. Comparative case study is interested in uniqueness of a case, not hypothesis testing. Hantrais Linda argues that for researchers adopting a normative perspective, comparisons have served as a tool for developing classifications of social phenomenon and for establishing whether shared phenomenon can be

explained by the same causes. She continues to argue that for many sociologists comparisons provided analytical framework for examining and explaining social and cultural differences and specificity. This is because *emphasis is placed on contextualisation in cross-national comparison in order to understand better different societal structures and institutions*[20] in this globalisation era.

4.3 Why qualitative method?

The qualitative method satisfied the demands for my comparative study better than quantitative method. This is because it situated me in the world of these elderly women. Denzin argues *that it consists of interpretive material that makes the world visible...they turn the world into a series of representation, including field notes, interviews, conversations, recordings and memos to the self*[21]. This means my study involved interpreting data collected to get the reality of the women's livelihood and not rely on experiments and processes that are not socially constructed.

The argument that small qualitative studies can potentially contribute valuable knowledge to the community since it studies things in their natural settings and attempts to make sense of or interpret phenomenon in terms of the meanings people attach to them supports my choice of this method. This is because my study is directed toward gathering information that has practical and functional use to the participants and may be used for intervention whenever required as opposed to using large samples often anonymous to participants as in quantitative research.

This study required understanding how the old women perceive their needs in terms of accessing basic requirements. This is in agreement with the qualitative argument that qualitative research is concerned with meanings people attach to their lives.

My case required me to collect data face-face from the elderly women. In this process I acquainted myself more with their success and failures in securing basic requirements as well as capturing their everyday life situations of the case under study.

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[20] http://www.soc.survey.ac.uk./sru13.html
[21] Norman, Yvonna.eds. (2000) p3

Qualitative research is engaged with the task of analysing dynamic social actions by seeking to explore the "how and why" happenings in day to day real world ,as opposed to quantitative methodology which emphasizes reliability and replicability by testing hypothesis derived from theory.

My interest was to understand the processes of how the old women of Akitenino village meet their livelihood.

In short, qualitative method enabled me to understand better the experiences of the old women in my study.

4.4 Selection of respondents

Like any method of research, qualitative approach involves selection of sources of data, and method for gathering data. My main source of data were the old women were the key respondents and three local officers from the district authority namely ;the Chief Administrative officer, Probation and Welfare officer and Community Development officer as key informants.

The criterion, or way of selection of respondents based on my knowledge, and experience of both the conditions of the old women and of this area. This area has a population with a very poor resource base with wide spread poverty experienced by majority households.This is a major constraint to their conditions of living. The main occupation and source of livelihood is peasant farming with very few others engaged in small scale businesses to generate some income to support their families.

The main concern of the population here is to survive by ensuring that they access the daily basic services needed. This is because services especially water; health and food in this area have not received much focus from the district resource allocation budget. Yet with the decentralized system of governance in Uganda, power, resources and functions that were previously held by central government have been devolved to local governments (districts) to enable to manage their local affairs. By decentralizing management and administration of resources, good yields were expected interms of improved social services provision since the local community have the mandate to plan for their needs according to their priorities. But this has not been so because of very many setbacks of decentralization which won't be

discussed since it is not the focus of the study. The over riding setback decried by these local authorities is inadequate resources provided (funds and personnel) which are not commensurate to the servcies to be provided to the community.

The result of this is that service delivery has not substantially improved leaving many in wanton need and the old women are no exception. They are left to depend on their families, friends and neighbours for support since they can no longer work and meet their needs.

Secondly in Africa and Uganda in particular, the gender division of labour (gender ascribed roles) where women's roles and activities tend to be home and community bound while those of men tend to be located in the public sphere put alot of strains on the women. The women are expected to continue providing for the family.For instance services related to water, health, and foods are generally deemed to be women's roles. This unfair division of roles sees women returning to traditional domestic roles.This puts them at a disadvantage because their labor is not paid for and when they get old,they have nothing as income saved from previous employments like the men who in most cases get employed and benefit from their past savings.This "employment" of the women into domestic chores partly explains why they are among the poorest members of society in old age when they can't work anymore, and also explains why women age faster than men because of the multiple domestic strains put on them.

Thirdly, I chose the district local officers as key respondents because they work directly with the local population in this area.They would provide me with more information on what kind of services they provide the community with ,and how much has been achieved interms of availability and easy accessibility of the services by the community.

The chief administrative officer is the head of public service in the district .He oversees and ensures the implementation of government and district policies through the various programmes in the district inorder to have services delivered "efficiently" to the commuinty.

The Probation and Welfare, and Community Development officers handle welfare of the people in the district. Their departments deal directly with people right from the grass root to the upper community level on family related matters. They coordinate with other departments such as health, education, agriculture, environment etc to prepare the community for actions

regardind their welfare through sensitization programmes. The irony here is that, whereas these departments are supposed to specifically target disadvantaged groups like the elderly, children, women and disabled to access services provided by the district, they instead pay much attention on the youth who are much more able to work than old people who in most cases are helpless. The less attention given to the elderly is unfortunate in that, being the rightful beneficiaries they are missed out of the services offered by the departments. The need to have programmes that focus on the elderly is necessary to save them living in conditions of desperation.

In a nutshell, I opted to interview ten (10) old women in-depth so as to get detailed information on their livelihood experience. From the ten respondents I had five old women who live alone and five old women who live with their spouses. I did this in order to compare their perceptions and experiences on how they secure access to basic services to meet their daily needs either through their families (spouse, older children and grand children etc) or through friends and neighbours for those who live alone. The intention was not about how many respondents to have but concentrate on a few selected numbers and have in-depth interviews with them, a reason why I limited the number of both key respondents and informants.

4.5 Data collection

The type of data required for this study determined my method of collecting data.

An in-depth interview was one method used to gather data. This was carried out with both the key respondents and informants. Khan & Camell (1957) describe interview as "conversation with a purpose" and the purpose was to describe and understand how these old women interact with the social setting to meet their daily demands.

The questions that guided the interview process were semi-structured and covered information relating to the old women's livelihood (perception and securing access to basic services).A range of questions set the pattern of discussion during the interviews with respondents. Some of the very pertinent ones asked were:

- What is the marital status of the old women?
- What is their perception or understanding of livelihood in terms of provision of basic services (water, food, health, transport, housing etc)?

- If they fell sick for instance, do they go to see a doctor?
- If they go what means of transport do they use?
- Do their spouses help them?
- Who pays the bills?
- Which of the services are available?
- Which ones are not available?
- Do they think availability of these services can make a difference in their lives?
- How have they been coping up with these challenges of living?

Did they know of any plans by government, NGOs or their local leaders to put these services in place?

4.6 Strengths and Weakness of data

These questions were open and simple because the old women understood clearly and answered without any difficulty. I was able to hear in person their life experiences over past years. They talked and expressed out feelings about their living situations without any reservations.

I got sufficient information from them much as they decried lack of enough resources (funds and personnel) to work, and lack of policy to guide them on providing services to the elderly people as being major constraints to their work.

I was able to gain access to the area and respondents without any difficulty partly because of my knowledge and experience of the area.The interest in the topic also earned me good reception and audience from both respondents and informants .The atmosphere was therefore conducive for me to ask them questions which they willingly answered.This enabled me to delve in-depth during the discussions and got a variety and large amount of data which I would not if I administered questionnaires.

Relatedly is the material expectation the old women had in mind.These old women expected me to give them some token of appreciation after the interviews, but this was not possible because I had nothing material to give them.The reason for this is that many people get information from them, then use this information to solict for funds in the name of helping them.When they get the funds, they never return back to us. With such impression the old

women had in mind, I found it difficult to convince them to believe that the information am gathering is for academic purpose and not for any other hidden agenda.I felt challenged because I made an elaborate introduction of myself and why am carrying out the study. But this did not make alot of sense to my respondents since they thought I would by all means give them some token of appreciation in kind.The conclusions I drew from their expectations shows how much needy these old women are and this needs to be addressed. However even if I had some token, I would not give because this could be taken for a bribe and this would contravene with my research ethics.Caught in this cross road of research ethics and respondents expectation,I had to act very tactfully while asking questions to maintain the interest to respond and got the information I needed.

Observation, not participatory, was another method used to gather data. It was an open method that did not require asking questions because I could see what the respondents had such as type of house, household facilities, transport facility and clothes they were wearing etc.The information I got from observation useful in writing my memo which helped as a reminder while writing this report. Although my fear was that observing from outside would not give me a true picture of the respondents' conditions since I did not enter inside their houses.I thought they could borrow for instance chairs or utensils to cover up for fear of being embarrassed that they have nothing. But am glad to report that my respondents were very sincere in expressing out their living conditions which I could see from their facial expressions, language they used, tone in which they spoke etc.This enabled me to get first hand information in addition to what I physically saw was lacking such as health centre, no means of transport, no dry food stock in their granaries and no nearby water source.Although some few were not willing to reveal out the living conditions because of the allegation that people extort information from them for personal gains.

However, despite all these achievements, I encountered some difficulties which I regard as the weakness of my data. The time scheduled for data generation was limited that could not allow me make the observation participatory of which I believe would have given me better insights in the livelihood of these old women.The information I gathered within the short time may not be adequate to fully understand the conditions of the old women. But this does not undermine the data generated from in-depth interviews with the old women who gave their true life experiences over the years.

The key informants found it rather difficult to comment on government's plans toward provision of basic services in this area. This had, to a certain extent, restricted me from getting in-depth, comprehensive information from them. I related this to fear of undermining themselves if they made a lot of criticisms on the poor service delivery since it is their responsibility to ensure that the community get these services.

Whereas the key informants were hesistant to comment on delivery of basic services in this area, some key respondents talked too much on things that were not necessary to my study.This consumed my time but had no option than to listen to the stories! One common issue was accusations of being witches. This featured among all the old women who live alone I talked to .They complained that their daughters' in-law alleged that they (old women) wanted to kill them because they (in-laws) hated them for reason they did not know. They lamented that such allegations did not only tarnish their images within the community but made the daughters' in-law not allow their grand children to stay with them yet they would be of great help to them.This however was not a very serious problem that would have a big weakening effect on my data.

Apart from interviews and observations made to generate data, I have reviewed related literatures to my study ranging from government's policy on the elderly, World Bank/UNDP reports on the status of social services provision in Uganda, correspondences on the web net, articles on the aged from the country's local newspapers and the community's drawn plan on social services by the district to state a few.

4.6 Summary

In concluding this chapter, I want to say that the methodological discussion in this study leans towards comparative case study based upon qualitative data. I have argued for the methods I used in conducting my study. I am aware of the challenges of such method, however, given my existing knowledge and initial ideas about the cases under study, the challenges were at their minimum.

A short note on data analysis is in its place here. Data was analysed continuously during the study by organizing it in order to generate categories, themes and patterns, recurring ideas and coding .Coding data allowed me categorise and collect more data needed to describe the situation of the old women.

CHAPTER FIVE: PERCEPTION OF BASIC NEEDS

4.0 Introduction

Although reference has already been made to the types of basic needs/services required by the old women in Uganda, no account of them has been undertaken. To provide some insights into the nature of basic needs required for their livelihood, two of these old women have been selected as cases.These are old women who live with spouse or family members and old women who live alone.Although they have certain similar features in their perception of needs, the difference is on how they secure access to these services/needs.

However, perception of needs varies due to social positions, economy which depends on age, gender, family relations and support, means of livelihood and availability of basic services. This is because perception and needs among the old women regarding their livelihood remains diverse since their social and economic fabrics have been broken down by the war.

In the same view, the perception of these old women is influenced by their material conditions and situations resulting from the desire to have what they lack. This is due to how other people perceive their conditions of not having basic needs and what others in the neighbourhood own. These perceptions are very strong among old women especially those who live alone and depend on support from friends and neighbours to meet their daily demands.

Furthermore, their gender, age and social status in the community dictated moreless by culture and tradition partly explains this.This is more experienced among old women who live alone compared to old women whose spouses are still alive and enjoy relative safety from harassment, suffered by those who live alone at the hands of society. For example *when a husband dies in Uganda, his relatives claim the household properties, often evicting the widow and her children from their home. In some areas widows are part of the property inherited by the brothers-in-law* [22].This shows further how much most old women are susceptible to the harsh cultural norms which denies them not only the rights to own property, they suffer from various abuses and recriminations making them more powerless and

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[22] A World Bank Policy Report.(1994)p 31

voiceless. In practice women are entitled to own property, but in reality property is grabbed away from them. The reason is that they are usually illiterate, and neither know their rights nor the channel to follow to seek redress when these are trampled on.

This analysis shows that inheritence and property in this community is viewed from gender a perspective and not age. Data generated indicates that, this perspective held by the community is the major cause of poverty among the old women since they lose everything to the clan and are left with virtually nothing to continue with after their spouse's death.

5.1 Major Patterns of the old women's perception of livelihood

The pattern that comes is drawn from their perceptions of needs and how they get access to basic services which do vary a lot as indicated in the beginning of this chapter. The services that are perceived to be the most basic are housing, food, water and sanitation, income and health care.

To start from the list of basic needs, housing which is one important dimension of life style and quality of life remains a big problem for the old women in Uganda. Majority of old women live in semi permanent houses usually grass thatched with mud walls,with only few having corrugated roofs over their heads.Data generated indicates that some of these semi-permanent structures presented high likelihood of collapsing on the occupants incase any strong wind blew or heavy rains fell. A case of reference is one old woman who is 70 years old and lives alone, expressed her worries and fears about how she can repair her house during the interview.She said that:

> *"Am so worried about the coming rains in March because it will blow my*
> *house down because I can't get grass and money to pay some one to reth-*
> *atch the roof.The grass I need to make up the roof would cost about*
> *20,000/= (twenty thousand Uganda shillings; equivalent to $12) but I don't*
> *have.I do not have anywhere or anything to sell and raise this amount of money.*
> *When I was young and strong, I would cut a lot of grass and sell some to get*
> *money to pay the person to thatch the roof.But now am weak and unable to do*
> *This and the rains will not "think" of my age."*

This old woman's story shows the high need of support if she is to fix her house.The condition of the house puts her life at risk.One would wonder if this old woman sees life to

have any meaning to her because she is both physically and financially unable to cope with repair and maintainence of her house. Traditionally among the Langi people , repair works has been seen as male preserve.This means she can not do it because she lacks the skills neither does she have the energy or older children to help her.**Does she have any where to get help from?,or does she have any alternative place to go and live in?**

These questions shows out the plight of not only this old woman but many others who have no hands to help them.She is a representative victim of old age and gender which are salient factors affecting the livelihood of old women in Uganda. Although traditionally in Africa, old people lived with their older children in extended families. Here all members of the family contributed in one way or the other towards the well-being of the members.For example old women cared for the grand children and the other family groups covered needs of all members. But today, this informal social network of the extended family may not work well due to many reasons such as increased living costs giving preference to the nuclear family system.Similarily, this informal system may also not work in favour of old women who never had children, those whose children have died or moved away, and those whose children do not earn enough to support them as in the case presented above. This requires that such old women have to be supported to fulfil their daily needs.Such support may not be limited to acquiring accommodation only,but may include economic(income),social and psychological support to enable these old women live relatively well.

Contrary to this case, is the housing policy and housing scheme put in place by government of Uganda.This scheme has had no positive effect on the elderly people in general because it targets only the urban rich and not the rural poor.There has been little or no responses from the responsible authorities in regards to the difficulties the elderly people face to have roofs over their heads. The elderly especially the women who live alone are forced to live in makeshift, dilapidated structures that put their lives more at risks, rather than protecting them.

In this context, housing for elderly people should not be looked at only as shelter but as both physical and financial demands.This is because repairs and maintenance is a requirement to make the houses fairly habituable.Hence it is necessary that examining the housing needs of elderly people be included in the draft policy on older persons, otherwise the old people and women in particular will remain a neglected group by the policy.

From the deplorable conditions of housing the elderly live in presented in the case above,I am obliged to say that although housing constitutes only one element of the wider living requirements of the old women, it is a factor of considerable importance given that ,even in very old age,the majority of people live in their homes within   the community.Besides the home is seen as an embodiment of family life and the idea that "a woman's place is in the home" has been and remains a very powerful belief within my society.Hence shelter remains a basic human need which should be comfortable and suitable for individual requirements from which to conduct livelihood.

Related to housing needs are food and nutrition requirements for the old women. Very scanty information exists on this because limited research has been done on this area in Uganda.Lack of policy for the elderly, poor representation of Older Persons organisations; socio-cultural barriers, civil strife, diseases and poverty have in different ways affected both food accessibility and security by the old people. The research going on in most countries in Sub-Saharan Africa (W/S Report on Nutrition of Older People 2001, HAI) continues to show that most old people live on one meal a day or none in situations when they are not given. It is not only lack of enough food that is a challenge, but the poor statuses of meals the old women eat.

A case of reference presenting this situation is one old woman aged 70 years old and lives not with her spouse but with family members during the interview expressed the wish to have more varieties of food to eat. She reported that:

> *"I always have only one meal a day because I can't have morethan this since it's not there.This food(cassava and beans) I get when my daughter- in-law gives me and sometimes I don't eat because I have no appetite.I would prefer to have tea,vegetables,meat,rice,posho (maize meal) but can't have because it's not there".*

From the mentioned report, the discrepancy in the number of meals per day may not seem a major concern, but the lack of a balanced diet significantly affects the old women's nutrition statuses which has an impact on their health.Many are left emaciated due to low calorie intake resulting to low body immunity and this is not safe in case of any disease attack. To this effect therefore, reducing the vulnerable conditions of these old women would not mean creating special services for them, but rather ensuring that they have equal access to basic services along with other vulnerable groups like children, mothers and the disabled.This would give a better impression of them and not to be looked at as economically dependent and passive

group of people. Another need which compliments food and nutrition in the livelihood of the old women is health.This remains a big challenge for the old women especially those living alone.A more detailed discussion on this is made below.

Health services among other basic needs remains a myth than a reality among the elderly in Uganda especially old women living alone.This is because most health centres are distantly located at about 5kms and they can not manage to walk this distance .The distance plus their age limits them to access the health services. Findings from the study indicates that many old women suffer from age related diseases such as hypertension, stroke, diabetes, heart disease, cataracts, Trachoma, tuberculosis, malaria, joint pains, hearing and visual impairments etc. These conditions,unattended to force them to withdraw from productive life and social interactions.This renders them dependent and disabled because they are unable to cope up with the illnesses.This is evident from the two cases where the old women reported their poor health conditions and the poor medical attentions they received.One respondent aged 75years old reported that;

> *"The hospital is far about 5kms away .I go once in awhile to get treatment which in most cases is hard to get because I have to walk this distance since I don't have any other means of transport. I sometimes reach early and get medication sbut when I reach late I don't get medication.But because I want my ears to get better I still go because now I can not go to church as I used to whem my ears were okay. I stopped going because I can't hear what is being said.Even the market in town I do not go to because I fear being knocked down by a car sinceI can't hear when the car is coming.I stay at home and send people but in most cases they don't bring what I really wanted."*

Another respondent (77 years old) reported her experience that;

> *"I went to the main hospital with my knee problem.As I waited on the queue the nurse asked me what my problem was, then I explained to her.She later told me that there was no medicine for my sickness and advised me to go back home and come another day .I couldn't tell which day it would be and if I came back would I get medication? So I gave up and never went back to the hospital for fear of a similar situation. There were also other old women with different sicknesses and some were told to go back and come another time".*

From the respondents' testimonies, it appears that despite the distance of the health units, the general tendency to give preferential treatment to children, lactating mothers, pregnant women while sidelining old people whom they view as waste of medicine and their time.This attitude narrows the chances of the old women to get treatment. This is clearly indicated in the old woman's contemplation to either go back to the hospital or not. She was disappointed by the nurse's response showing that the existing health services are too insensitive to the needs of the old people. It is not only the medical personel who harbour this negative attitude towards old people, there are many others as well although they may not show it out rightly.

To further show such negative attitudes generally harboured against old persons, Beveridge remarked *that it's dangerous to be in any way lavish to old age, until adequate provision has been assured for all other needs such as the prevention of disease and the adequate nutrition of the very young..., the old consume without producing therefore reducing the overall standard of living.*[23]

This remark indicates that old people are regarded as a burden and social problem.This to me is both inappropriate and an unneccessary view because it hieghtens the negative attititude harboured against the old .It devalues not only their past contributions but also their existing capabilities and potential.With such attitudes in mind as presented in the cases, old women are become invisible victims of unequal treatment and the result is that they are unable to provide for their daily needs,hence more vulnerable.

It therefore becomes of need that inorder to appreciate the conditions of the old people, we should make the elderly be seen as a group "deserving" of support without discrminative attitudes. This follows the multiple needs they have as argued by Lewis that "old women fall more sick and commonly suffer ill health than old men.They are likely to have *multiple disabilities because of the biological and physiological factors, social environment and women's roles through their life course, and their social acceptability* [24].This argument shows that health multifaceted phenomenon. Provide better health services for the elderly people demands integration of more knowledge, skills and attention from policy makers, implementers, the local community and the elders as well.

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[23]Victor(1994) p28

[24]Bernard,&Kathy(1985)p73

In attempt to reduce such problems affecting the old women and the rest of the population of Uganda, government has come up with a National Health Policy focusing on Primary Health Care.This programe is being implemented through the *Uganda National Minimum Health Care Package (UNMHCP) with aims to tackle health problems such as malaria,STI/HIV/AIDS, tuberclosis ,sexual and reproductive health,immunisation etc*[25].But the provisions in this policy has no specific focus on older persons.To this effect, coupled with unfriendly health services mentioned, and lack of focus on the elderly in the policy gives a green light to discriminate old people from accessing health services.So the "good" intent of the policy to a small extent maynot be realised because a group of people in the population have been left out. It is no surprise that, the health of old people in Uganda still remains at stake.

Apart from health, a basic need required by the old women, their poor economic situation makes them more disadvantaged because they can not meet their needs.This is because they are unable to meet the physical demands of farming which is the main source of food and income.Their increased life expectancy offers no better opportunities for them, but rather adds on the hurdles to jump in order to live because there is no old age security guaranteed.The only gurantee they have to income and capital resources is their marital status.But this is not the case when they lose their spouses.Findings from the study which have been discussed already indicates that old women have no gurantee to inherit or own any property after the death of their spouses.This is because culture dictates inheritance to be a male's rights and not female.This puts them in awkward situations to tussle out survival yet they have no savings from past work to depend on.This is because most women engage in domestic labor which is not paid, and does not entitle them to any paid pension or benefits.**How do they make "ends" meet to earn a living?**

This question throws in suggestions for a "helping hand" in form of a pension scheme to support the old women who have no source from which to earn income but have to live!

The existing form of social welfare programmes currently offered in Uganda; National Social Security Fund covers only old people who have been in formal or public sectors (salaried employment).This makes the situation of the old women not any better and calls for a redress. The policy makers still harbour the optimistic thinking that family systems have the capacity

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[25] Minstry of Health(1999) p10-15

to provide for the well-being of old people. But this is not so because the change in family structures and relationships has increased more due to the wide spread impacts of urbanisation making many people prefer having smaller families than the extended type. The result is increased poverty levels and economic exclusion experienced by the old women. Government has not addressed this gap of income insecurity among the old women.Hence the need to design structures with programmes that will provide support to the old women would enable them get their needs.It will also bring them to the lime light to interact with others within the communities they live than be isolated.

It is not only income insecurity that is a problem and challenge to the old women, the state and availability of clean drinking water remains precarious. "Water is life" a common slogan known everywhere in Uganda is a big myth than a reality across the entire rural and sub-urban population. This is because the clean and safe water sources are not within reach with the nearest at most being 1km.Very often old women have to walk the long distance to collect water which they can not manage. The findings of this study indicate that most old women can not access water because of the distance and can not harvest rain water since majority live in grass thatched roofs. The old women with grand children get water from the springs by fetched by the children and those living alone " fight" it hard to get water for daily use.

A study conducted by the Ministry of Gender, Labour and Social Development (MGLSD) in Uganda (2002) indicates that *41.8% of older persons use bore holes and the majority of 59.2% use water from other sources.*[26]The concern am raising is that if 41.8% of old people use borehole water which is relatively clean and safe,**why is the number of old people suffering from water borne related diseases such as dysentery, diahorrea, cough etc still on the increase?**

The answer to this question is not definite.This is because there are so many other interlocking factors that explain the continued increase of water borne related diseases among the old people, and will not be discussed here since it is not the focus of concern.But lack of sanitation facilities such as pit latrines, bathrooms with running water etc in the dwellings of these old women make both their personal hygiene poor and the houses unfit for human occupation.So having water as indicated in the Ministry's study above is one aspect, but its

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[26] Ministry of Finance, Planning &Economic Development. (2002)

accessibility and availability determines a lot how much of it is used by the old women to meet their daily requirements.

From this analysis,my humble conclusion is that as long as water sources are still far from these old women,especially those who live alone,their living conditions will remain poor.This is because they need water for domestic use such as cooking,drinking,washing clothes,bathing etc.Water is therefore a prerequisite for them to live clean, safe and free from contracting water borne related diseases although there are also air borne diseases that they can contract as well.All in all, water is a very basic requirement for them to have a clean and healthy living.This follows the ascribed roles for women such as providing food, water, health care for the family and rearing children which put a lot of strain on them.

However, it is important to note that old people are not a homogenous group. Hence *ageing is not a homogeneous experience which affects every individual within the society in exactly the same way* [27].This means people age in unique ways depending largely on a variety of factors which include their gender, ethnic and cultural backgrounds, and whether they live in urban or rural settings. Hence defining old age as a stage in the life cycle implies that "old age" would mean decline, deterioration in health, vitality, social usefulness and independence. For instance the roles ascribed for women mentioned above subjects them to work through out their life time with very little if any time for leisure. These causes a lot of ware and tear on them which is not repaired, thus age faster than men.They are typified as worn-out and unproductive. While men in their later life are taken to be more distinguished, wise and experienced. This makes growing old quite different and more troubling for women than men. Therefore the extent to which these factors impact on the lives of older people varies according to individuals, household chores, and or community circumstances.

5.2 Summary

To sum up this chapter, the description of life situations of the old women in the district can be reduced to two major patterns; gender and age discrimination. This is because their social status and social networks do have influence on their perception of needs and how they secure access to these needs.

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[27] Victor(1994) p.2

Lack of social security for old peoplewho have not been in formal empolyment in Uganda leaves old women with no guarantee for improved livelihood. Ken Tout's observation that *demographically and socially, women are the majority in many ageing factors and could often be found to be the major sufferers from negative aspects of ageing* [28]augments my idea that old women need more care and support to enable them live fulfilled lives.Meanwhile the traditional extended family which has been the natural carer and safe haven for the elderly is on the brink of disappearing and nothing has been put in as a replacement.

On this same note, we see that roles have not been shifted.This because old women have to take care of themselves and not as expected to be cared for by their older children.The reasons for this are numerous, but in Uganda, HIV/AIDS has claimed and is still claiming the young working age group who could help the old people, but instead have to care for themselves and the orphans left behind.This adds more strains on these old women whose participation at both community and household levels have declined.

Gender discrimination in this community put women at disadvantageous positions.They suffer stigmatisation, harrassment and cruelty because they are women. Although government has come up affirmative action to protect women, some cultural and traditional practices still undermine women's rights to property such as land, or inheritance in situations where a spouse is lost.The Domestic Relations Bill (DRB), which is yet to be approved by Parliament is another initiative to protect women from these unfair cultural dictates especially the rural woman whose rights are always abused because they are women.

Until recently, Uganda lacked an explicit and comprehensive National Policy for older persons to guide and ensure their sustainable protection and care.It is hoped that when this draft policy is approved by Parliament, the interests and concerns of older people will be included into the national development processes.,welfare and inclusion in the national development process.This will also change the perception that attempts to *deal with issues,problems and needs of old persons is essentially the role and function of the extended family.*[29]Although the family will still continue to be the means through which older persons define their livelihood. It is from the family that the old women do not only perceive their

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[28] Tout(1993)p289

[29] Ministry of Gender, Labour and Social Development(2005) p.2

needs but secure access to these needs.However there are cases of old women who do not have families but have to depend on friends and neighbours for support.

Despite the support the old women secure from these networks of relationships, the challenge still lie in ensuring that they enjoy fulfilled lives by having access basic needs.This is because the livelihood of many old women is still characterised by ill health,low income, poor food and nutrition statuses, poor housing etc.Efforts to provide these services perhaps will erase the thinking that age is a "leveller" in promoting social inequality among old people following the descriptions of the life situations of the old women in this study.

However, I do not draw conclusions at this stage. Further analysis of how the old women get and secure access to livelihood is required. The next chapter raises this issue. Looking at how the old women secure access of basic needs for their livelihood.

CHAPTER SIX: ACCESS TO BASIC NEEDS

6.0 INTRODUCTION

One main concern in this chapter is examining how the old women in Uganda secure access to services to satisfy their basic needs. These old women secure basic needs mainly from their networks of relationships which include the families, friends and neighbours.The community and state support to the old women is very minimal.

The services the old women need are household basics that respond to their perceived needs. These services are food, water, housing, health care.Transport is a required and necessary service but their income limits them from travelling to visit their other relatives.

Given the living conditions of the old women discussed already in the previous chapters, finding out how they secure their needs is neccessary.Their increased life expectancy adds on this of knowing where support is got. Giddens argues that *ageing is a gendered phenomenon and that women tend to live longer than men making old age highly female*[30], supports this research issue because most often women are more in need and care than men in later ages.

Secondly,this need arose because findings in the study indicated that the old women have people to take care of.This was found in families with HIV/AIDS orphans.

From these perspectives, the family is the first primary source of support and care turned to then friends and neighbours follow. Family support springs from personal ties within the networks of relationships.A detailed analysis on this is made below.

6.1 Sources of support and services needed

Networks of relationships.

As mentioned in the beginning of this chapter, in Uganda, the two major types of family structures are the extended and nuclear much as there are varieties of others. The extended family here is a normal pattern of family organisation and support normally composing of

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[30] Giddens(2001)p165

spouse, older children, grand children and other relatives like aunts, uncles, cousins, nieces, and nephews etc.

Family support is the means through which the old women secure their basic needs.During the interview, one respondent aged 75 years gave her testified that she meets her daily needs from her grand children.This is what she said;

> *"I live here alone with my grand children. My husband died 15 years ago and my older children have all died of HIV/AIDS. It is these children who provide everything we need in this home. They cultivate, fetch water, firewood, buy medications for me and go to the market once in a while to buy soap and salt. Without them I would be dead, but I feel so sorry for them because they are young but do a lot of work. I can not help them because am sick and have no strength. The only job I do is to give them some advice when necessary but always they do everything. "*

This testimony is clear evidence that the family role remains significant in the lives of the old women. Leo Smith (1945a) maintains that throughout *human history, the family has been the safest haven for the aged. Its ties have been most intimate and long lasting, and on them the aged have relied for greatest security.*[31] This supports the evidence in my data from the respondent's testimony showing the family as the irreplaceable source of support and care for the old women .This testimony shows the flow of help among the family members as seen from the old woman and the grand children.These contributions within the family recognises the old woman's roles; giving a better portrayal of her not to be taken as only a "receiver" and the grand children the "provider" hence an interdependency relationship is realised.

Another role of the family is seen in providing emotional support and companionship to the old women.Emotional support is very important for the old women who live alone. They suffer from depression and isolation which in most cases results into ill health.This can be attributed to the impression created in them, that they have been abandoned, rejected and denied by the society and have no belonging. Dorothy Jerome argues that *the family represents an area of major emotional investment to the old women because it provides a bridge to loneliness*[32].This argument supports earlier commendations made of the family regarding its roles to the old women.Intimacy and companionship are needs that the old get from the social kinship network.

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[31]Holmes(1995)p177
[32]Bernard & Kathy(1993) p85

It is also from the family that old people receive respect. I am saying this basing on my experience of being born and raised up in an extended family where my grand parents lived together with us.Respecting the elderly was nurtured in me by my parents and this makes me say that respect for the aged tends to be greater in societies in which the extended family is intact. This is when the elderly live in the same dwelling with the rest of the family. They are cared for by the family and remain respected members of the kin network.In this type of family arrangement, children and other adults develop positive attitude towards the old people. But where the family is disintegrated as is the case of nuclear family, this may not be realised.

Although this seems to be true, it is not the case with every family in Uganda.The younger generation who may not have lived with old people together and whose education curricula do not include issues of ageing and the aged may not understand the need to relate with old people. They are unable to appreciate that ageing is a natural process and so the aged are useful members of the community. It is not surprising that people now grow old under the stigma of negative stereotypes in which ageing is seen as a "condition", a "problem" and even a "disease" .This undermines the past invaluable contributions of elders in society. It is important to make the younger generation know that old people are useful counsellors to them because of their long lived experiences.Failure to do this means this inter-generational gap will remain unbridged and the likely result is that the elderly will be isolated and neglected by society.

However, despite all these, the family remains the natural caring unit for old women in Uganda. Although this is being affected by movements of young men and women to urban areas in search for wage labour.These movements create some distance in the frequency of contacts between the older children and their old parents.But this geographical distance,as expressed during the interview by some old women whose older siblings work in far away towns does not imply neglect,rather it is because their children do not earn enough money to enable them travel frequently to visit or extend regular assistance to them.With such impression in mind,it is unthinkable for old women in rural areas, with no source of income to lose support from the family.This would mean "a life sentence of extreme poverty" or "an early death sentence" although those who live alone fall out of this network of family support but get some support from friends and neighbours.This is discussed more in detail below.

Friends and neighbours' support

As part of the networks of relationships,friends and neighbours offer invaluable mutual support to old women living alone.Findings in the study indicates that ,the community in which these old women live have some people who feel obligated intrinsically to help each other.This is especially where the others can not cope with their problematic situations.Such obligations is seen when one respondent aged 80 years and lives alone during the interview narrated how she earns her living from her neighbour's support.She said that;

> *"I am sick and don not have money to buy medication from the local drug shop or go to see a Doctor at the main hospital; which is far.But my neighbour who is a "mother" to me sends her garnd daughter to fetch water for me.When she cooks food am given some.She also gives me some of her medications sent to her, by her son who is a Doctor in South Africa.Whenever I do notcome out in the yard ,she comes to my house to see me.Without her I would not be living.Am really grateful that she is nearby and helps me because I do not get any help from my relatives and my older son lives far away.My other children died and left no grand children to stay with me so am alone here".*

From this revelation, we learn that the mutual assistance given by friends and neighbours goes beyond companionship.It is comprehensive in its coverage, consisting of both emotional and material support as mentioned above.This shows how the traditional social security system in this community works in covering contigencies.However, the effectiveness of this system to protect the members varies from contingency to contingency.This is because living today is dependent on an individual's ability to buy from the market .This has a "say" on the kind of support the community can offer.

To briefly wrap up on this discussion, the roles played by networks of relationships in supporting the livelihood of the old women remains irreplaceable.This is because at present,majority of old people in Uganda still rely on this traditional social security system as a means through which they can secure their basic needs.Indeed,this system can also be described as "networks of mutual support through families and communities who share their risks and resources".Whereas family protection work through large families ,with many children and marriages through out in rural and urban areas,communities protection system work to support old people without families.We also see that, this traditional form of social security practiced through networks of relationships have closer links to social traditions and

binds members together on the basis of common custom.This differs from the modern social security system of paid benefits in form of pension which does not include old people who have not been in formal employment in Uganda.Government's task is to initiate measures geared to increasing income security of older persons regardless of whether one has been in formal employment or not.

In response to the above discussions on how the elderly women secure their needs, health, food, water and sanitation provisions and housing are basic services required to enhance their livelihood.Other essential services and infrastructure such as income security, transportation and communication are essential additions to the above basic social services.A detailed discussion on these services is made below.

Health

This is one of the basic human rights.According to World Health Organization's (WHO) full definition, health does not imply a person's state of being free from diseases, but also the state of being well physically and mentally, hence the ability to participate fully in the community development process.It is therefore a very vital and inevitable need of the old womenand providing it is multifaceted because it draws support from individuals, family, society and professionals. The available sources of health services in Uganda are hospitals, health centres, private clinics, drug shops and traditional herbalists. With all these sources available, securing health services should not be difficult for the old women.But this is not the case because of many reasons such as distance to the health sources, lack of focus on health needs of the elderly and their poor income statuses, to state a few.These factors are discussed in detail below.

The findings in the study indicates that, the distant location of these health service centres is one, among the many barriers to the old women to access the services.This is because the centres are far from where they live, with the nearest being about five kilometres which they can not walk and do not have proper means of transport.

Besides this, lack of focus on their health requirements and needs adds more the disadvantages they have.In the National Health Policy provisions,the main focus is on children, lactating mothers and pregnant women with some little attention on disabled persons.Discrimination rated as one of the worst "disease" follows suit in the absence of any

strong directive to ensure that old people are treated equally with others.In the event of this, preferential treatment to those considered more useful is the order of the day while the elderly are sidelined.This is because they are viewed as people who have out lived their usefulness.Attending to them is as waste of medication and time.Meanwhile,the other available health sources where the old women could get services from are private clinics and drug shops.But their low income status incapacitates them from getting these private services.

So, given these factors that work in disfavour of the old women, accessing health care and services remains a challenge.The result is that, they only come to hospitals when they can not get well at home under their own treatment.As discussed already in the previous chapters,the health conditions of these old women remain precarious because they continue suffering from diseases they could have had during their childhood, diseases related to old age and diseases contracted from the unhealthy physical environments in which they live characterised by lack of clean and safe water and poor sanitation facilities in their dwellings.

The challenge also remains for government because the National Health Policy put in place with intention to *provide a minimum package of public health and clinical services to all its population with emphasis on the poor, women and children* [33] , in reality does not cover all sections of the population.The implied meaning is that, this policy offers "fertile" grounds to exclude some section of the population particularly old people from enjoying the "health services" provided by government because the services provided do not respond to their needs and problems. Hence, to have healthy minds, in healthy bodies among the elderly, health services tailored to their needs ratherthan them being made to fit the services becomes a necessary requirement. Likewise among other contributors of good health is food and nutrition.A detailed discussion on this is made below.

Food and nutrition

It is recognized world wide that there is a relationship between food, nutrition and human development. Malnutrition constitutes the most serious risk factor in causing ill health.Like most other developing countires, food and nutrition is a big concern among old women in Uganda.This is because they can not meet their daily food needs although there is no proper

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[33] Uganda(1999)p10

information to show how the old women feed themselves.Besides it is considered to be women's obligation to provide food for the family making them be affected more by food shortage than men.

The most common foods eaten are beans, cassava, sweet potatoes, vegetables, garden peas and other cereals like finger millet, maize, sorghum and rice.It is from farming that the family get these foods and some of which are sold to raise money to buy other items required to supplement their diets such as meat, fish and milk .These diet supplements are eaten occassionally during festivities such as Christmas, Easter, New Year's Day and Independnce day because they can not afford regularly.

From these consumption packages, the likelihood of malnutrition and poor health among the old women remains high because of inadequate supply and availability of good quality foods eaten throughout the year.This is clearly evident from the types of foods indicated above, which have high contents of carbohydrates with little protien contents.Deliberate efforts should be made to reduce this unsatisfactory nutrition state among the elderly.

Interestingly to know also is the cultural demarcation of food preferences based on gender.In this community women are not allowed to eat chicken because it is taken to be a taboo. It is men's food so they say and women who eat are called "icoo angole" meaning "pseudo women or tom boys" which is very derogatory. I take this to be extreme greed because chicken is a delicacy and besides it would supplement their diets but they have been made to believe that it is not nice.But with the spread of modernisation, there has been changes in these male chauvinist thinking and this belief is gradually dying.This has been highly boosted by the rise of women's emancipation although these old women still find it difficult to eat chicken.

To this end, these analyses show that other causes of food problems are related to food insecurity, poor economic situations, unequal distribution of food among family member, traditions, customs and practices which affect negatively the state of nutrition particularly of women and children.

In the Poverty Eradication Action Plan (PEAP), agriculture among the rural communities takes centre stage because it is the sector that employs over 80% of Uganda's peasant

population.This is being implemented through Plan for modernisation of agriculture (PMA) which is to promote crop diversification among the farmers.This is aimed at improving the chances of farmers to have varieties to put on the market and remain with enough for home consumption. It is hoped, this will improve on food security among the peasant population. But this plan does not indicate how the elderly whose ability to participate in food production (agriculture)has diminished will secure their food needs.This will not put the elderly in any better position as far as their food requirements are concerned.

Secondly, despite these substantial efforts to ensure that food is available, accessible and adequate to all, lack of food and nutrition policy in place will still see many people and not only the elderly facing food problems as is the case now.This is because many people do not have adequate knowledge on what, how, why to consume the foods which they have.This places them at much greater risk of sickness due to impaired immune systems and diminished working capacity.

On this basis therefore, dealing with food problems among the elderly requires strengthening and protecting good traditions, customs and practices which emphasize care for the elderly and an income support to the elderly would enable them meet basic daily needs.This argument is based on the fact that elderly people in Uganda often lack adequate care and / or are abandoned and abused ,although findings in the study indicated none but implicitly,this is seen among old women living alone and can hardly provide for themselves but have to depend on friends and neighbours.Therefore,nutrition and food are cross-cutting problems hence requires multisectoral actions through cooperation and collaboration among sectors concerned with socio-ecomomic development in the country as well as good governance, political will and commitment .Related to food and nutrition is water which takes a big proportion in the hierarchy of needs required by old women in Uganda.This is discussed more below.

Water and Sanitation

Water is basic to the survival of human beings.Human beings need water for domestic and economic use.Water is also part of food and a main source of some minerals required by the human body.There is a relationship between water and nutritional status.Lack of sufficient, clean and safe water is among the cause of ill health among people.Accessing water which is

available and adequate is a big challenge among many people in Uganda.A case of reference is the old women who are unable to walk the long distances to collect water with the nearest sources being 2-3 kilometres . The common sources of water available are open wells, protected spring wells, boreholes, tap water, gravity water and rain water.

Data gathered indicates that the most hit group of old people are women because fetching water is a domestic chore which is their responsiblity.The distant sources increases the work load for women besides taking care of the children, farming, cooking and hardly have time for personal care.

Tap water which is clean and apparently within their reach is sold.This means they can not access the water because they are not able to afford, the fact that they have no source of daily income. This means that privatisation will provide water only to the rich and those who can not afford private clean water should be provided with alternatives because we can not put a price to life! Water from these other sources that require no payments such as open wells is not clean because sometimes herdsmen take their cows to drink from this same source.Rain water which is clean can not be relied upon because of the prolonged dry spells and drought experienced over the years due to climatic changes attributed to global warming.Left with no source since they seem "disabled" in all ways, **What alternative (s) do they old women have to get clean water?**

This challenge and task goes to the family members, friends and neighbours who take up the responsibility to collect water needed from the distant sources.Friends and neighbours always come in to support old women who live alone but this does not fill up the gap of water problem experienced by the old women.

Government has put in place mechanisms of providing water to the communities through construction of boreholes, protected springs, water gravity schemes etc but the long distances to these water sources still put bars to old people.This has often resulted in poor personal hygiene because they can not wash clothes and beddings frequently,bad adour(smell) etc.This unsanitary conditions in which the old women lack bathrooms and toilets in their homes and long distances to sanitary points have continued to affect their usage.Hence poor sanitation and poor personal hygiene easily facilitate the spread of infectious diseases .The need to have community based water supply programmes aimed at supplying people with sufficient, clean

and safe water close to their residences and strengthening public education on proper use of water and protection of water sources could help reduce the continous "war" over water among both urban and rural dwellers in Uganda.

Housing

People lacking good shelter are subjected to poor health conditions and are vulnerable to disease infections.Households which do not have good shelter,will fail to sleep, store,prepare and serve food in hygienic conditions.Old women's housing arrangements constitute a key component of their livelihood. This is because majority of old people in Uganda live in rural areas where they spend more time in their own homes than in the community. Data gathered indicates that the old women live in traditional huts which are not permanent structures.These huts have grass thatched roofs with mud walls, uncemented floors but smeared with cow dung. The huts have no electricity, with designs that give no provision for windows, bedrooms, living room, kitchen and other amenities. This one room serves all purposes with exception of bathing and washing which is done outside.

This prompts me to ask this question "**does the accommodation available meet the needs of the old women**"?

I put this question because the housing conditions are related to the key issue of access to financial resources to maintain the accommodations or have alternatives to move elsewhere.

This "self contained house" tells the kind of disadvantages regarding housing these old women have. Their nature automatically sends the message of need for regular repairs to maintain them.The grass on the roofs gets soaked up by the continous heavy rains and subsequently begins to rot. This in most cases results into leakages experienced. At most the life span of the roofs is two years then it has to be overhauled and build a new roof. But overhauling and fixing a new roof for instance is no gurantee that the roof will last longer because it is so susceptible to be burnt by fire.This is because cooking is done inside using wood fuel.The red ants and termites are another set of destroyers that ravage the grass on the roof and eat up the wooden poles and reeds giving way for any strong wind to blow off the roofs easily.Repairs and maintenance is the only way that can gurantee the occupants of these huts safety. **How can the old women be helped to repair and maintain the huts to avoid the high risks of collapsing on them?**

This question brings out the challenge old women face with regards to housing.This challenge could be best addressed through government's policy on housing and housing scheme.For instance building low cost houses for the elderly and paying them salary (pension) to enable them pay their rents, establishing institutions for the elderly or supporting families taking care of old people.But this policy offers no considerations on the housing needs of the elderly and government has not addressed this gap. Majority of old people live in dilapidated, makeshift temporary structures which are not only unacceptable according to the minimum living standard, but endanger their lives. These situations are worse among old women in rural areas where ownership of property like land or house.Ownership or inheritence are governed by customary laws although my data does not indicate cases of homelessness experienced by the old women.

The laws put in place by government on property ownership still do not offer sufficient protection to women although this varies in different parts of the country. This does not rule out the need to support them to maintain their dwellings and livelihood.

Besides this, most buildings country wide are designed in manners that make them inaccessible to old people.For instance very few public buildings such as offices, recreation centres, schools etc with exception of hospital buildings which have user friendly facilities such as walk ways, ramps that old people can pass through without any barrier disabled or not. These buildings have steep stairs with no elevators making them "practically out of bounds" to old people.The irony here is that most offices are found in these buildings and because they are inaccessible, old people can not meet the concerned authorities to address their interests and concerns. Hence it is necessary to make buildings accessible to all people be it personal dwellings, offices, schools or recreation centres so that no one is excluded on such grounds.

Income insecurity

*The Provisional Population and Housing Census results 2002[34], indicates that women on average have longer life expectancy of 45 years and men 40 years.*The implications of this for women in terms of income and poverty is great because they are left to either survive alone or depend on the family. The reason is that majority of them live below the poverty line with the family standing as their "pension security" although the increased rural urban migration of the youth and HIV/AIDS is claiming away the working groups from the families.This does not reduce on family's ability to support the old women, it instead gives them the task to look after the orphans whose parents have died of the disease.

Uganda Participatory Poverty Assessment Programme (UPPAP) studies singled out *the elderly as one groups worst hit by poverty and who are therefore chronically poor, others being disabled, widowed, orphans, unskilled labourers etc* [35]and ,World Bank Poverty Report 2000 have singled out old women (60years+) as one of the groups experiencing deprivation because of their stage in the life cycle. **Where do the old women get income (money) to buy their daily requirements?**

From these reports above, significant improvement in the lives of elderly people should be prioritised to erase off this construction that poverty is part and parcel of "normal ageing". This wiered thinking is because old people earn low or no income which makes them unable to meet their requirements.This situation forces them to view this greying period as time of financial hardships because the available retirement and pension scheme does not cover them except those who have in government service.It also forces them to withdraw from active community life and consequently live in isolation.

Data collected during the study indicates that many old women did not have any cash at hand to buy essential consumer goods such as salt, cooking oil, kerosene, sugar and soap. They are not only unable to buy essential household requirements but also unable to seek medical care for themselves either because of lack of cash for transport or their inability to cover involved expenses. This affects them several other ways, calling for attention to provide a means through which they can secure income to enable them buy the goods and services

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[34] http://www.ubos.org/2002census.html
[35] Chronic Poverty among the elderly inUganda:Perceptions,Experience & Policy
Issues.http://www.idpm.man.ac.uk/cprc/conference/conferencepapers/mulindwa.pdf

needed.Bearing in mind their advanced ages, lack of proper means of transport as well as cash may limit them from accessing their needsTransport does not only provide accessibility to the market but also enables these old women to keep link with their other kins living elsewhere.This is discussed more below.

Transport

In addition to challenges old women face in attempts to secure basic needs, transport is very essential to enable them reach the services and also to maintain contact with others.Bicycles are the most available means of transport they can secure.But because of their advanced ages, and suffer from joint pains, visual and hearing impairments etc, they are unable to ride themselves.In the event of such barriers, a family member usually teenage boys do carry them mainly to the hospital.This works for those whose family members own a bicycle.Those who live alone and own no bicycle have to hire the service depending on their ability to pay the fee charged.

Vehicles which are apparently a better and faster means of transport is not frequently used by these old women.This is because public service vehicles (*PSV*) is not popular to them since they are most found in urban areas.The high fares charged by the operators, and the designs of these vehicles are not user friendly for the old women especially those with infirmities.

Apart from public transport, the major form of transport for the old women is walking.Walking sounds simple but this is a problem because of the long distance and their physical weaknesses. The challenge then is **how do they reach an inevitable service like health where the hospital is distantly located?**

6.2 Summary

In summarising this chapter,mention will be made again of the invaluable roles the family, friends and neighbours play in enabling the old womem secure access to basic services to meet their range of needs.Among the services needed, the most basic include health care,housing,food and nutrition, water,income and transport.These services are the most basic because ageing is having important impacts on the them (services) such that these services will have to be designed to accomodate the demands of the ageing population in Uganda.This

is because public assistance given to Women in Uganda is meager and normally end up in extreme poverty in old age.

Also to note is the negative attitude harboured against old people by a cross section in this society .The result is both discrimination and prejudice against the old in accessing public services.The elderly are seen as causes of economic strains on the resources especailly the "modern nuclear family of today" since they are unproductive therefore dependent. This deliberately denies the fact that these are very useful members of society to benefit from; the fact that they are endowed with wealth of knowledge and experiences of our past.Similarily, the number of people ageing is on high increase requiring the future generation not to ditch away the old to the margins of society but to forge common interests between the two generations which can promote interdependency.

CHAPTER SEVEN: CONCLUSION

In this study, I have examined issues on the livelihood of the elderly under going a radical change in Uganda. This followed the investigation, descriptions and analysis of life situations of the old women of Akitenino village in Lira district.The life situations carried two patterns; gender and age discrimination with regards to their perception of needs and how they secure access to these needs.These patterns are compounded by their lack of support, which traditionally were provided by family members.

Gender and age, play big roles in determining the livelihood of the old women.Their marital status was one important aspect through which they secured social position in this society.This was in regards to old women living with spouse and those living alone.Those with spouses got help to access their basic needs from the spouses, and those living alone had to depended on friends and neighbours for support.

Apart from securing basic needs,marital status was important in determining the old women's position to own property especially after the death of their spouses.The logical reason for this was that the property acquired was a result of efforts from both the husband and wife, and incase the man died,then the woman or older children inherited the property.This was not the case for these old women because culture dictated that inheritence and ownership of property was for men and not women.In such situations, childless old women inherited nothing as well as those with older children.The question of survival without any past savings from their labour to rely becomes a challenge.This challenge is translated in their inability to secure basic needs since they were engaged in domestic work where they earned no payment. This is one of the many challenges faced by old women in Uganda.It also partly explains the discrimination and prejudices they suffer in accessing public services.

Furthermore, division of work and responsibilities in the rural countryside in Uganda is to a large extent based on gender.Women's responsibilities are mainly domestic such as bringing up children and looking after the sick,preparing food,fetching water,doing a larger part of agricultural work on the family fields and marketing the produce etc, while men are incharge of preparing the fields for cultivation, building, repairing of houses and hold reserved position to the family's income and property. A woman is also theoretically allowed to accumulate personal income from sales of farm produce but this must not interfere with her

obligations.This puts the women while in their old age to have no personal wealth because what they accumulate is for the family ratherthan their personal demands.From this analyses,we see that gender in its entirety significantly influences women's worlds of living.This is seen in the division of roles and responsibilities,right to own or inherit property and attaining social position in society plus many others which may not have been mentioned here. Gender and age have had a lot in shaping the perceptions of the community towards old people.Similarily the role of elders have changed from being advisors to the youth to independent life,where they are forced to make money inorder to survive or support their grand children. All these aspects put pressure on the old women's livelihood in as far as their perception of needs and how they secure access to these needs for daily use is concerned.

The networks of relationships, the means through which the old women secure basic needs remains invaluable in its roles. This relates to the subsistence livelihood linked more to self employment and social networks for support. But as societies are becoming more industrialized; although Uganda is more of an agro-based society, more people are becoming dependent on wage employment. Can family support be guranteed for this livelihood in transition which could otherwise be explained using the deprivation trap characterised by poverty, isolation, powerlessness, vulnerability and physical weaknesses since it is no longer very possible to rely upon the informal system of relatives, friends and neighbours for support in times of need as is the case of the old women?.

In view of the above,and inorder to extend coverage to people who have been left out of the social security schemes,there is need at the local level to establish community based basic scheme inorder to have an effective social protection for all citizens. In these schemes, community members would contribute as well as central and local government.The schemes should have a collective measure of activities designed to ensure that the people meet their basic needs such as adequate nutrition, shelter, health care and clean water supply to enable them maintain a standard of living.This done, would be a step towards establishing community based social protection for the elderly,children,disabled people and vulnerable women (single headed households).

Providing social security through such a scheme to members of the society concurs with social development approach of promoting people's welfare in conjunction with the dynamic process of economic development. Article 22 of the Universal Declaration of Human Rights

(Dec.10.1948), states that everyone as a member of the society has the right to social security.Therefore the state has the obligation of ensuring a minimum standard of material welfare to all its citizens on a basis wide enough to cover all main contigencies of life.

From the above perspective, I see that social protection is a human right issue.Social policy developed along the basis of welfare models would be appropriate for Uganda to meet the current social needs of the population.This will provide a better understanding of the political,economic,demographic and cultural factors in social development.Hence,social development goes beyond satisfaction of basic needs, but embraces values that guide society to allocate material resources and redistribute opportunities equitably.

It also emphasizes communitarian and reciprocity which are dominant approaches used in promoting social development in Uganda.The social development strategy urges people to collaborate with one another to bring about community development .This is seen from the many community development organisations (CDOs) formed by the local communities in the rural countryside.It is through these CDOs that development assistance from both the state and NGOs is channelled to the most needy in the communities. This strategy is not only used to attract development but it brings people with common problems and interests together and seeks to address it.

The methods used in this qualitative case- study to generate data was in-depth interviews with respondents and observation, not participatory.This was done inorder not to neglect the joined-up experiences of the old women's accounts of their lives.These accounts illustrates how the market, state, voluntary systems (friends and neighbours) intertwine in many ways within the old women's lived experiences in providing support for their livelihood.

The interview questions linked old age to social changes especially the importance of anchoring on the family for support and care where the elderly can not secure access to their needs from the market and the state.I am aware of some weakness of the complex nature of the methods used in this study.Despite the weaknesses, I think the method fitted the requirements for the study's aims to investigate on the livelihood in transition. Although at a broader level, there was no comparison made for instance between Uganda and Norway or South Africa but this single case study has the potential to be used beyond the study area.This is because generalizations made on concepts and theories used can be tested elsewhere.Being a

comparative study,the ultimate aim is not only to compare but to explain the phenomenon under study. Further research can be done in any developing country such as Kenya,Ethiopia or Tanzania where age and gender differences play significant roles in the livelihood of old people and know the social reality behind by examining similarities and differences between data gathered from these countries.

It is upon this context that, promoting social development in Uganda remains a challenge.Perhaps by redesigning policies that can realistically and sustainably address needs of the traditional poor, and those within the socio-economic sectors now excluded from the benefits of progress and modernisation particularly the elderly, will make them realise their worth of existence.While increase in the proportion of old people is happening when traditional social protection systems for the elderly are crumbling in Uganda and many other developing countries.Families in Uganda are in a rapid state of transition, from extended into a nuclear one;gradually eroding traditional protection systems of the elderly. This gives grounds to argue for the protection of the traditional social networks in the event of no proper support from the state.

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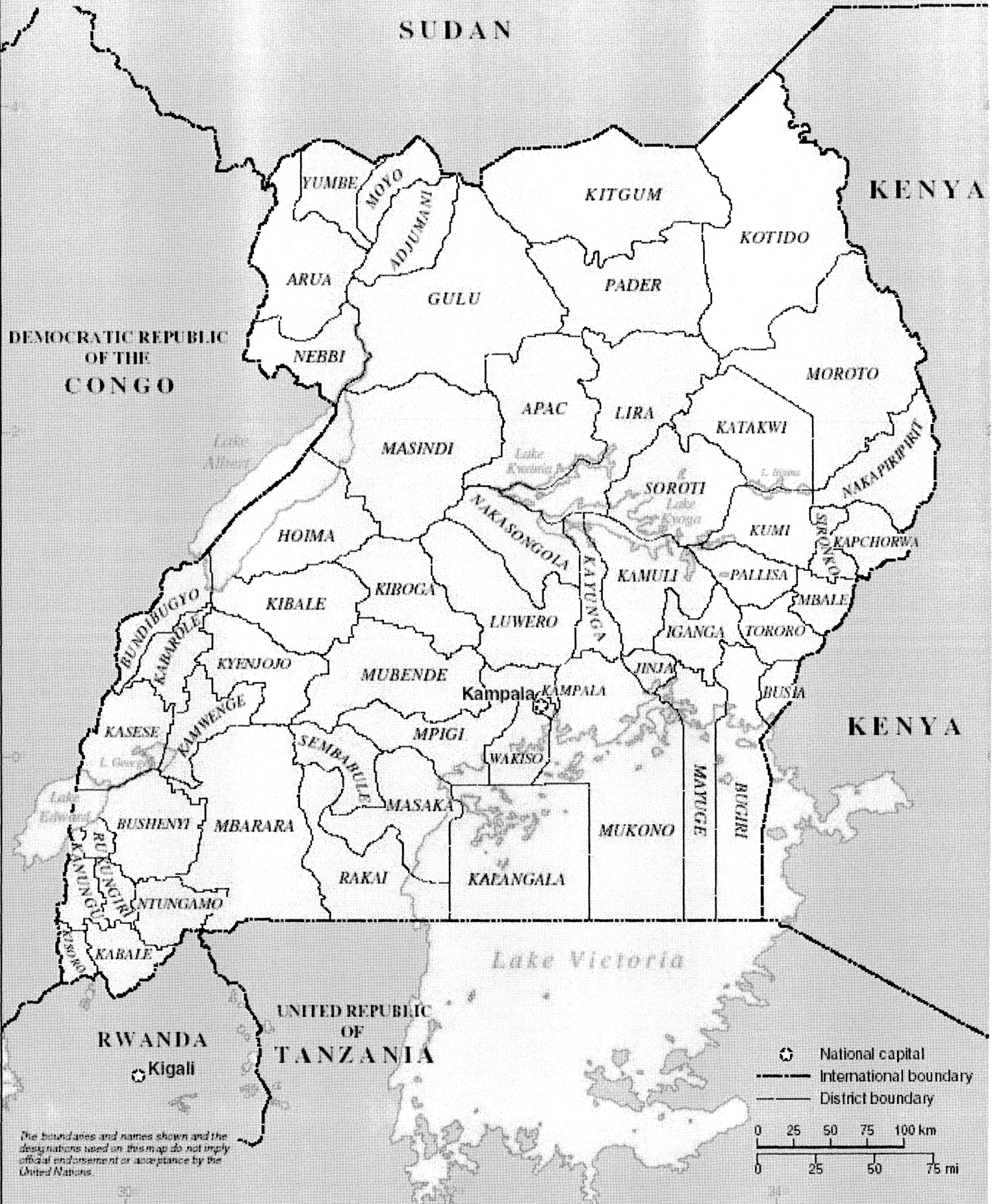Uganda, (2002), Lira District Population Office.www.udg.org/DIP/Lira/overview/dist_map.htm

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UGANDA

SUDAN

KENYA

DEMOCRATIC REPUBLIC
OF THE
CONGO

YUMBE

MOYO

ADJUMANI

ARUA

NEBBI

GULU

KITGUM

KOTIDO

PADER

MOROTO

APAC

LIRA

KATAKWI

NAKAPIRIPIRIT

MASINDI

SOROTI

HOIMA

NAKASONGOLA

KUMI

KAPCHORWA

SIRONKO

KAMULI

PALLISA

MBALE

KIBALE

KIBOGA

LUWERO

KAYUNGA

IGANGA

TORORO

BUNDIBUGYO

KABAROLE

KYENJOJO

MUBENDE

Kampala

KAMPALA

JINJA

BUSIA

KAMWENGE

MPIGI

WAKISO

KASESE

SEMBABULE

MASAKA

MUKONO

MAYUGE

BUGIRI

KENYA

BUSHENYI

MBARARA

RUKUNGIRI

KANUNGU

NTUNGAMO

RAKAI

KALANGALA

KISORO

KABALE
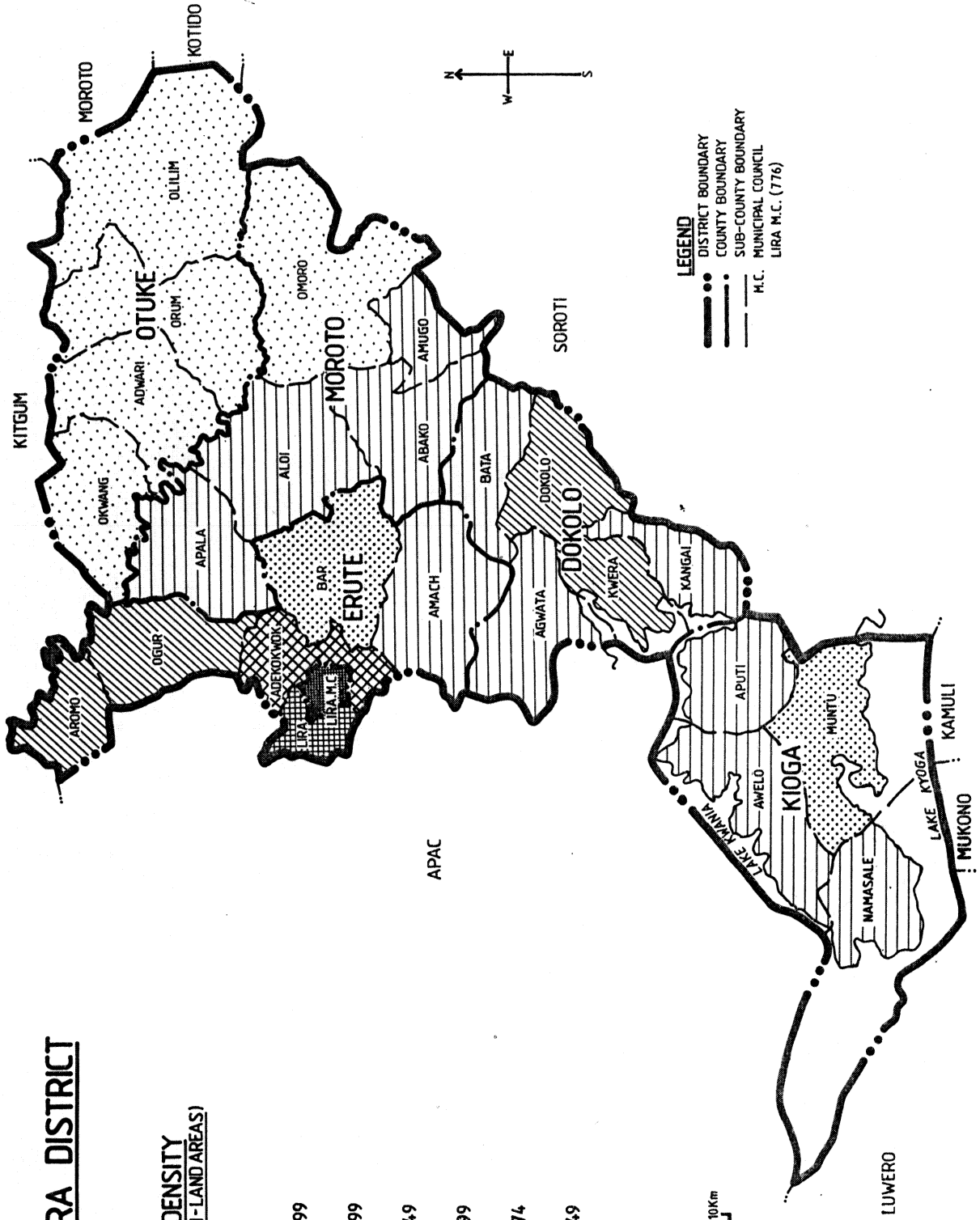
Lake Victoria

RWANDA

Kigali

UNITED REPUBLIC
OF
TANZANIA

The boundaries and names shown and the
designations used on this map do not imply
official endorsement or acceptance by the
United Nations.

○ National capital
— ∙ — International boundary
—— District boundary

0   25   50   75   100 km

0   25   50   75 mi

LIRA DISTRICT

POPULATION DENSITY
(PERSONS PER SQ.KM - LAND AREAS)

	500 +
	300 - 499
	150 - 299
	100 - 149
	75 - 99
	50 - 74
	0 - 49

0 5 10Km
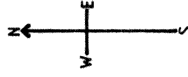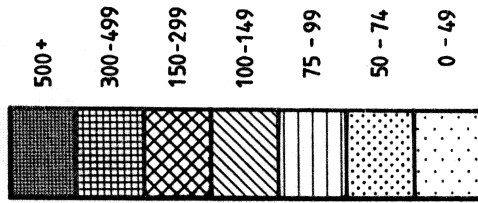
LEGEND

DISTRICT BOUNDARY
COUNTY BOUNDARY
SUB-COUNTY BOUNDARY
M.C.   MUNICIPAL COUNCIL
LIRA M.C. (776)

MOROTO

KOTIDO

OTUKE

OLILIM

ORUM

ADWARI

OKWANG

KITGUM

OMORO

MOROTO

AMUGO

ABAKO

BATA

AMACH

ALOI

APALA

BAR

ERUTE

ADEKOKWOK

LIRA M.C.

OGUR

AROMO

AGWATA

DOKOLO

DOKOLO

KWERA

KANGAI

SOROTI

APAC

APUTI

AWELO

KIOGA

MUNTU

NAMASALE

LAKE KWANIA

LAKE KYOGA

KAMULI

MUKONO

LUWERO

INTERVIEW GUIDE

1. Ask respondents to give their personal information (age, marital status and role they play in the family).

2. Ask respondents what they understand/perceive of their livelihood. This is an umbrella concept which should be understood in relation to access to basic services such as clean water, food, medical care, housing etc.

3. Ask respondents how they meet these requirements for instance if they fall sick, do they go to see the doctor? , what means of transport do they use?, who pays the bill?; do their spouses help them? , Or friends and neighbors for those living alone?

4. Which of these services are available? (Clean water, food, medical services etc and how often do they get them?).

5. Which of these services are not available, and why?

6. Ask respondents what and how they think basic services can enhance their livelihood. (Put your feet in their shoes and find out their feelings towards their living situations.

7. How have they been coping with the challenges (clarify on the word coping to them).

8. Ask respondents if they know of any plans or programs to improve on provision of these services by government, NGOs or local initiatives by their leaders?