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L'Afrique et les défis du XXIème siècle
Africa and the Challenges of the Twenty First Century
A África e os desafios do Século XXI

إفريقيا وتحديات القرن الواحد والعشرين

**The demographics of ageing in Africa: policy responses
to increased demands for social protection**

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Abstract

The paper provides an insightful examination of the implications of population ageing for responsive social protection instruments in Africa. For a long time seen as a feature of more developed countries, ageing is one of the major metamorphoses affecting the populations on the continent of Africa. Over the past years, countries have at varying degree recorded a substantial growth of population aged 60 years and over. Contrary to developed countries, demographic ageing will take place within a shorter period of time on the continent. The projected trends suggest a doubling of the population over 60 in the next two or three decades to come. Population statistics from most sources show proportions of elderly ranging from 6 to 13 percent, with marked variations between rural and urban areas. A predominance of women is observed in this age group. Demographic factors that contribute to the ageing have to do with falling fertility rates, increase in life expectancy (in some countries) and drastic reduction of individuals in the adult age groups due to the middle generation wiping-out effect of HIV/AIDS. The ageing of the population comes at a time when most countries have gone through an urban transition, reflecting in more people living in urban areas than in rural areas. In a large proportion, the elderly have become urban dwellers confronted to service-dependent lifestyles. Combined with the effects of malfunctioning pensions systems and the weakening of traditional forms of solidarities, old people are increasingly exposed to social exclusion, poverty and deprivation. Regardless of the percentage they represent within the population, most countries are ill prepared in accommodating the demands imposed by this demographic process. The majority of the elderly are not covered by the existing contributory pension schemes. Among the covered ones, access to the entitled monies is not guaranteed in many countries despite some substantial reforms in the schemes. The demands for protection against vulnerability to exclusion and social deprivation are gender and age group specific within the elderly. For example, women and old people in the age groups 70 years old and over require greater caring than others because they are the most exposed to income and health vulnerability. Looking into the conventional policy instruments in place across the countries, the data reviewed in the paper show three major regional groupings in terms of intervention. Some countries have pursued measures aimed at reforming the contributory pension systems and supporting a variety of institutions to ensure the welfare of old people. Other countries have privileged targeted forms of either non-contributory benefits in cash and kind, or a mix with contributory pension schemes. In between there are those countries which have no well-defined mechanisms in place to care for this growing population either because they lack

resources or they do not prioritise in the social development agenda the challenges imposed by ageing .

Even in situations where some forms of interventions are in place, the evidence show that they are not sufficiently responsive to the current challenges. The differing experiences of countries have shortcomings in reducing the deteriorating conditions under which old people live. The proposed approach under the European Union to linking social protection into the international assistance instruments may not be effective as is not anchored in the realities of Africa. Following this analysis, it is proposed in the paper a perspective that incorporates three critical dimensions in the protection of the elderly. The first dimension gives prominence to the traditional role of the family that has proven to be an efficient supportive institution. Data show that most old people either live with their partners in households headed by them or co-habit with other members inter-generational family units. They contribute through various forms to the wellness of younger generations. For example, their responsibility for raising orphans has increased with the AIDS effect mentioned above. The urban transition, with its changes in family structures, also raises the issue of access to housing and transportation to accommodate the elderly. The second dimension is that of income generation. Studies (include mine) reveal an increasing number of old people delaying their withdrawal from the labour market, and continuing to work because of insufficient income to meet survival needs in old age. This necessitates the adaption of current labour market regimes in order to accommodate this prolonged involvement in labour. In countries where old age pension does not compete with continued work (like in South Africa, Swaziland and Lesotho), the option of linking old age benefits with self-employment or decent work is a viable route to go. In some countries, the rising up of official retirement has imposed itself as a way of delaying withdrawal. The third dimension is the support to come from the public, private and voluntary sector in regard to social protection for the elderly. While all have they have merits, the current forms of support from each of these sectors may also aggravate the inequalities that already exist between rich and poor social strata. Although the question of affordability is unavoidable, new forms of solidarities that extend welfare benefits, health and pension, to a larger elderly population are at the top of the most effective social protection ones. The few national experiences reviewed in the paper reveal some promising results in that direction. In a few countries, the role of associations and interests groups in old age welfare has been critical in voicing the rights of the elderly to better life. This is the case in most parts of Southern Africa.