

**LIVELIHOODS OF THE ELDERLY IN ZIMBABWE: A
COMPARATIVE ANALYSIS OF MARONDERA URBAN AND CHIVHU
RURAL AREAS**

BY

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DEDICATION

I would like to dedicate this research to my big brother, Mr. B. Makumbe for providing me with emotional and financial support during my studies

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I would like to thank my supervisor, Dr. I. Gutsa, for guiding me throughout the conduct of this research. I would also like to thank the Department of Social Welfare for granting me the authorisation to conduct this research. A special acknowledgement goes to all the participants who took part in this research, for without their input, this study would not have been completed.

ABSTRACT

This study sought to examine the livelihood strategies and challenges faced by the elderly with a particular focus on Marondera urban and Chivhu rural areas in Mashonaland East Province. The research was motivated by the fact that most of the elderly members of the Zimbabwean society are failing to meet the basic needs. There were four specific research objective in this study, the first one being to establish the meaning of sustainable livelihoods according to the perceptions of the elderly in Marondera urban and Chivhu rural areas. The other objectives were to compare the livelihood strategies employed by the elderly in Marondera urban and Chivhu rural areas, assess the challenges faced by the elderly in Marondera urban and Chivhu rural when securing their livelihoods, and to propose alternatives for ensuring that older persons attain the desired livelihood outcomes. This study was guided by the Sustainable Livelihoods Framework (SLF), the Rights-Based Approach to Development, and the FANTASTIC Life Inventory (FLI). The study used mixed methods because of the need for both objectivity and detailed analysis. Given that communities are diverse in terms of assets, ‘blue-print’ or ‘straight jacket’ approaches, which have roots in quantitative research, were not suitable in this research. The FLI was used to provide ‘an objective assessment’ of the livelihoods situation of the elderly in urban and rural settings. There was use of quota, purposive, and convenience sampling techniques in this research. The study found out that the elderly persons in urban areas were better off in terms of their lifestyles as compared to those in the rural areas. The elderly persons in the urban areas were more nutritious conscious, and more positive in terms of health behaviour. The elderly in the urban areas had positive personalities than those who reside in rural areas. It was also pointed out that the elderly, in both the urban and rural area face a myriad of challenges, including lack of access to adequate food, shelter, and clothing. The options for enhancing realisation of desired livelihood outcomes included increased national budgetary support for the social safety nets, creating a positive attitude and humanity (Ubuntu) among the Zimbabweans, and sound implementation of policies relating to the social safety. The older persons need to be assisted to implement livelihood projects, which include beekeeping, fish farming, market gardening, and keeping of small livestock.

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LIST OF ABBREVIATIONS

AFDB:	African Development Bank
AIDS:	Acquired Immune Deficiency Syndrome
DSW:	Department of Social Welfare
FGDs:	Focus Group Discussions
FLI:	The FANTASTIC Life Inventory
HIV:	Human Immunodeficiency Virus
NCDs:	Non-Communicable Diseases
NGOs:	Non-Governmental Organisations
SDGs:	Sustainable Development Goals
SLF:	Sustainable Livelihoods Framework
SPSS:	Statistical Package for Social Sciences
UDHR:	The Universal Declaration of Human Rights
UN:	United Nations
UNDP:	United Nations Development Programme
UNESCO:	United Nations Education, Scientific and Cultural Organisation
UNICEF:	United Nations Children's Fund

CHAPTER I

INTRODUCTION

1.1 Introduction and Background to the Study

This study sought to examine the livelihood strategies and challenges faced by the elderly persons with a particular focus on Marondera urban and Chivhu rural areas in Mashonaland East Province. Ageing societies are an emerging global challenge. Technological, and medical developments have resulted in reduction of the risk of premature death, thereby increasing the global ageing population. As a consequence, the proportion of the world's population over 60 years is increasing more rapidly than in any previous era (Deluga et al. 2018). Amid the increase in life expectancy and the ageing population are challenges in providing for the needs of the elderly persons.

The elderly ought to realise their desired livelihood outcomes, in line with international, regional, and national commitments. It is essential to note that the Universal Declaration of Human Rights (UDHR), 1948, and the International Covenant on Economic, Social and Cultural Rights affirm the universal right to adequate food and to pursue economic development (HelpAge Tanzania 2010). The UDHR states in Article 25 that 'everyone has the right to a standard of living adequate for the health and wellbeing of himself and his family'. Furthermore, the UDHR lists at least five rights that specifically address older people's inclusion in emergency food security and livelihoods programmes. In a similar vein, Deluga et al. (2018) states that, on 16 December 1991, the United Nations General Assembly adopted resolution 46/91, which among other issues state the need to ensure that the elderly have access to basic needs. Moreover, the Sphere Humanitarian Charter and Minimum Standards in Disaster Response calls for participation and targeting of the most vulnerable groups, including older people (Peltzer et al. 2019). Just like the international legal framework, The Constitution of Zimbabwe (Amendment Number 20 of 2013), particularly Section 21, states that the elderly have the right to receive reasonable health care and assistance from their families and the state as well as financial support through social security and welfare. The State also has to make sure that there are laws that make sure that the rights of the elderly are achieved with time.

Despite the presence of a cocktail of the legal framework, in Zimbabwe, the majority of older people, especially in rural areas, belong to the poorest and most vulnerable groups (Dhemba 2013; and Muruviwa et al. 2013). Economic hardships and poverty have worsened the vulnerability index of the elderly persons in Zimbabwe. In the rural areas, the situation is worse because the urbanisation and industrialisation of Zimbabwean society, with its concomitant emphasis on the nuclear family, has resulted in a loss of security and prestige for the growing population of the nation's elderly persons (Dhemba 2013).

The institutionalisation of the colonial economy, however, eroded the economic position of the elderly. For those people who had been employed in mines, industry, and agriculture and in domestic service, no financial security in the form of pensions was provided. They were expected to return to the rural villages when they retired (Umukoro 2013). This was particularly difficult for migrant workers from neighbouring countries like Malawi, Mozambique and Zambia as they did not have rural homes and land rights in Zimbabwe. Most had lost ties with relatives in their country of origin. Muruviwa et al. (2013) argues that the economic challenges forced Zimbabwe to reduce expenditure on social safety nets and most of the elderly are failing to realise their desired livelihood outcomes. Many others had no one to look after them and that they slept in the open. Most of these studies have not specifically looked at different sources of income for elderly people, how they cope in emergencies and the general satisfaction they have with their income (Dhemba 2013; and Muruviwa et al. 2013). This study sought to address these issues and proposes options for sustaining livelihoods of the elderly in Zimbabwe.

1.2 Statement of the Problem

Most of the elderly members of the Zimbabwean society are failing to meet the basic needs, with the UNDP (2017) pointing out that more than 60% of them are highly vulnerable. The economic challenges bedevilling Zimbabwe have it difficult for the elderly people in both the urban and rural areas to realise their desired livelihood outcomes. Most of the economically active individuals in Zimbabwe are living in absolute poverty and failing to sustain their families, and not able to adequately look after their old parents. Some of the elderly members of society are pensioners, however, the monthly pay-outs are highly adequate to allow them to lead to good life. In addition to that, the spread of HIV/AIDS have also increased economic and social dependence on the elderly, as they are often left to care for orphaned grandchildren (Nyamukapa et al. 2008; Watts et al. 2007) because the most infected are the

economically active members of the population (UNDP 2017). As a result of the above, the livelihoods of the elderly in Zimbabwe have been threatened leading to adverse effect on both rural and urban livelihoods of the elderly people. In this study, the researcher identified a gap that there is scarcity of information which compares the livelihoods of older people from rural areas and those from urban areas. Therefore, this study investigated the livelihoods of the elderly in Zimbabwe by comparing rural and urban areas with particular focus on Marondera urban and Chivhu rural.

1.3 Research Objectives

This study sought to compare the livelihoods of the elderly in Marondera Urban and Chivhu Rural, and proposes options for ensuring that desired outcomes are met. The specific research objectives were to:

- Establish the meaning of sustainable livelihoods according to the perceptions of the elderly in Marondera urban and Chivhu rural areas.
- Compare the livelihood strategies employed by the elderly in Marondera urban and Chivhu rural areas; and
- Assess the challenges faced by the elderly in Marondera urban and Chivhu rural when securing their livelihoods

1.4 Research Questions

The overall question that this research sought to answer was, ‘how does the livelihood situation of the elderly in Marondera Urban compares with Chivhu Rural, and what are the options for ensuring that desired outcomes are meet’? The specific research questions were:

- What is the meaning of sustainable livelihoods according to the perceptions of the elderly in Marondera urban and Chivhu rural areas?
- What are the similarities and differences between livelihood strategies of the elderly in Marondera urban and Chivhu rural areas?
- What are the challenges faced by the elderly in Marondera Urban and Chivhu Rural in securing their livelihoods?

1.5 Research Proposition

This study presupposed that the elderly persons are failing to meet their desired livelihood outcomes and those in rural areas are worse off than the urbanites.

1.6 Significance of the Study

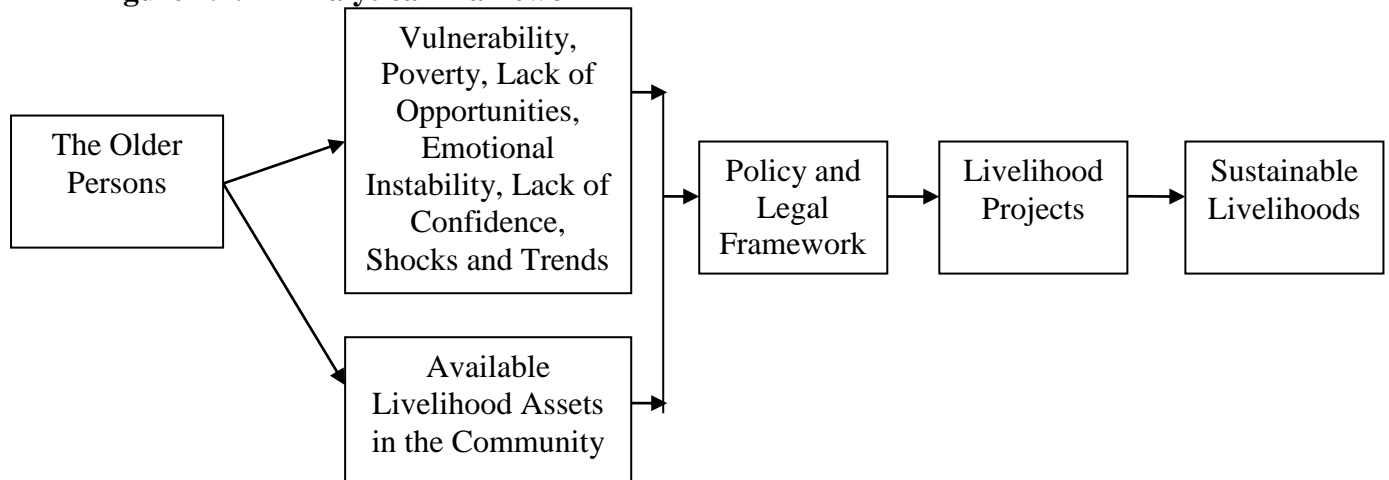
The present study was significant in that it built upon previous studies, like Dhemba (2013), Muriviwa et al. (2013), Deluga et al. (2018), and Peltzer et al. (2019), which were all focused on the older persons but did not particularly focus on comparing the livelihoods in rural and urban areas. Accordingly, the research adds to the body of knowledge. In practice, the study seeks to propose alternatives for assisting the elderly overcome barriers to sustainable living by exploring their livelihood strategies and identifying barriers to livelihood construction. Data on the challenges to the livelihood strategies of the elderly will enhance the design of effective policies on how old age poverty can be tackled and the livelihoods of this group of people enhanced.

This study also helped in enriching the researcher's understanding of sociological issues, with particular focus on the elderly. The conduct of this research was also motivated by the researcher's desire to provide for the needs of the vulnerable groups. Before mobilising and committing resources, an investigation of the situation on the ground was essential. Accordingly, this study was an 'eye opening' exercise. This research led to a better understanding of the livelihoods situation of the elderly persons, and of the community. There was enlightenment pertaining to the societal needs, which could be taken advantage of to improve the sustainability of the livelihoods of the vulnerable groups. The researcher is now in a better position to advocate, and respond to the plight of the elderly persons. If given an opportunity, the researcher is able to provide adequate representation pertaining the plight of the elderly persons and formulate feasible interventions. The successful completion of this research entails that the researcher moves closer towards self-actualisation, and fulfilment of his ambition of empowering the poor, upgrading their standards of living, and quality of life.

1.7 Analytical Framework

This study sought to ensure that the desired livelihood outcomes of the older persons are attainable. Particular focus was on defining the meaning of sustainable livelihoods, examining the livelihood strategies, exploring the challenges, and proposing an alternative policy and institutional framework for ensuring the realisation of desired livelihood outcomes of the older persons in Zimbabwe. Possible livelihood projects, for ensuring that the elderly in Zimbabwe realise the desired livelihood outcomes were proposed. Figure 1.1 shows the Analytical Framework, which is adopted from the SLF.

Figure 1.1: Analytical Framework



Source: Adopted from Khatiwada et al. (2017)

1.8 Delimitation of the Study

This research was restricted towards the comparing of the livelihoods of the elderly in Marondera Urban and Chivhu Rural. The challenges faced by the elderly as they try to achieve livelihoods in Marondera urban and Chivhu rural areas. The research also sought to propose the options for ensuring that desired outcomes are met. Data collection was restricted to the key stakeholders, who include the officials in the Department of Social Welfare (Provincial, and District Levels), Councillors (Marondera and Chivhu), non-governmental organisations, for example, HelpAge Zimbabwe, and the older persons in Chivhu and Marondera.

1.9 Definition of Key Terms

- **Livelihoods:** Livelihoods are understood as the collective set of capabilities, assets, and activities that are required to make a living (Chambers and Conway 1992; Ellis et al. 2003). They depend on access to natural, human, physical, financial, social, and cultural capital (assets); the social relations people draw on to combine, transform, and expand their assets; and the ways people deploy and enhance their capabilities to act and make lives meaningful. Livelihoods are dynamic and people adapt and change their livelihoods with internal and external stressors. Ultimately, successful livelihoods transform assets into income, dignity, and agency, to improve living conditions, a prerequisite for poverty alleviation. Livelihoods are universal, this means that the poor and rich people both pursue livelihoods to make a living.

- **Older Persons:** The United Nations defines older people as those who are above 60 years. However, the definition should be adapted to local contexts. For example, in many developing countries, people 50 years old are considered old, owing to cultural and social factors that contribute to the perception of someone as being “old”.

1.10 Research Limitations

The researcher faced some challenges during the course of the study. Firstly, the elderly persons are a vulnerable group and extracting data from them was not an easy exercise because of the legal provisions pertaining to their protection. To overcome this limitation, ethical protocol, in terms of obtaining research authorisation, explaining the purpose, benefits, risks of the study, and seeking of informed consent was done. The various stakeholder groups were informed that the research is an academic exercise and all the data is to be treated as confidential. Another limitation was that some of the targeted participants were not readily available due to work commitments. Accordingly, appointments were made in advance so that the data is collected when the respondents have confirmed availability. Because of the travel restrictions as a result of the Covid 19 pandemic, some of the data were collected through electronic mail.

1.11 Organisation of the Study

This study has six chapters. This introductory Chapter presented the problem and its setting. Chapter II covers conceptual literature review. The theoretical framework is covered in Chapter III. Chapter IV outlines the research methodology. The data is presented, analysed, and discussed in Chapter V. Chapter VII winds up the research and presents summary, conclusions, and recommendations.

CHAPTER II

LITERATURE REVIEW

2.1 Introduction

This chapter seeks to review literature pertaining to the livelihoods of the elderly persons. The chapter beginning by presenting an overview on the trends in terms of the ageing population. Review of literature also focuses on unpacking of the concept of livelihoods, in general, and as it relates to the older persons, in particular. There is also an analysis of the framework for the sustenance of the livelihoods of the elderly persons. The challenges faced by the elderly in sustaining their livelihoods are also reviewed. The Chapter winds up by presenting empirical literature on the sustenance of the livelihoods of the older persons.

2.2 Trends in Ageing Population

Worldwide, there were 901 million people aged 60 years and above in 2015. This number is projected to grow to 1.4 billion in 2030, the target date for the Sustainable Development Goals (SDGs), and to 2.1 billion by 2050 (United Nations 2015). This growth in the number of older persons is a global phenomenon and the report holds that almost every country in the world will experience a substantial increase in the size of the population aged 60 years or over between 2015 and 2030, worse still the increase is projected to be especially significant in the less developed regions (Pelzer et al. 2019). Between 2015 and 2030, the number of older persons, those aged 60 years or over in the world is projected to grow by 56%, from 901 million to more than 1.4 billion. By the year 2030, older persons will outnumber children aged 0-9 years (1.4 billion vs. 1.3 billion), and by 2050, there will be more people aged 60 or over than adolescents and youth aged 10-24 years (2.1 billion vs. 2.0 billion) (United Nations 2015). The number of people at very advanced ages is increasing too, the global population aged 80 years or over is projected to grow from 125 million in 2015 to 202 million in 2030 and to 434 million in 2050 (United Nations 2015).

According to the estimates by the United Nations (2017), Zimbabwe had the following population age distribution at the beginning of 2017, that is, 6,747,580 (41.9%) young people under 15 years old; 8,751,553 (54.3%) persons between 15 and 64 years old and 612,567(3.8%) persons above 64 years old. The United Nations Statistics Division (2017) has shown that the total dependency ratio of population in Zimbabwe is (84.1 %) and of this ratio,

the elderly dependency ratio in Zimbabwe is (7%) (UN, 2017). Elderly dependency ratio is a ratio of people above working age 65 years and above to workforce of a country (UNESCO, 2016). Dependency ratio of population is a ratio of people who are generally not in the labour force (the dependents) to workforce of a country (the productive part of population) (UNESCO, 2016). The dependent part includes the population under 15 years old and people elderly 65 and over, and this ratio shows the pressure on productive population produced by the dependent part of population (UN, 2017).

2.3 Implications of the Global Ageing Population

The increase in the number of elderly persons has curtailed the ability of many African countries to curb the challenges posed by the rise in aging population (Umukoro 2013). In Zimbabwe the economic indicators for the elderly show that households headed by older persons are among the poorest (AFDB, 2011), Some researchers show that in Kenya and Tanzania, households headed by older people have a poverty rate that is over (20%) higher than the national average (Alice and Mulle 2011). In Sierra Leone and Uganda, the poverty rate of the elderly households is (8%) and (5%) higher than the national average (Kawani and Subbarao 2005; HelpAge 2011). Poverty in old age often reflects poorer economic status earlier in life and has the potential to be transmitted to the next generations if effective interventions are not applied (United Nations 2015). Like any other developing country, Zimbabwe is not well prepared for a major increase in its aging population. For example, contributory pension schemes cover very few people due to the informality of most livelihood activities and unemployment. Most societies are predominantly rural and much of the population operates outside the security of formal sector, wage dependent markets. In the present study, the researcher identified a gap that there is paucity of comparative information on the survival strategies and livelihoods of older people, in the rural and urban areas. Therefore, it is the quest of this study to investigate the livelihoods of the elderly in Zimbabwe, a comparative analysis of rural and urban areas with particular focus on Marondera urban and Chivhu rural.

Most of the elderly persons are failing to realise their desired livelihood outcomes (Dhemba 2013). Livelihoods are understood as the collective set of capabilities, assets, and activities that are required to make a living (Chambers and Conway 1992; Ellis et al. 2003). They depend on access to natural, human, physical, financial, social, and cultural capital (assets); the social relations people draw on to combine, transform, and expand their assets; and the

ways people deploy and enhance their capabilities to act and make lives meaningful (Scoones 1998; Bebbington 1999). Livelihoods are dynamic and people adapt and change their livelihoods with internal and external stressors. Ultimately, successful livelihoods transform assets into income, dignity, and agency, to improve living conditions, a prerequisite for poverty alleviation (Sen 1981). Livelihoods are universal, this means that the poor and rich people both pursue livelihoods to make a living. However, adverse economic conditions, droughts, climate change and poverty increasingly threaten and erode basic needs, capabilities, and rights, particularly among poor and marginalised people, in turn reshaping their livelihoods (UNDP 2007; Adger 2010; Quinn et al. 2011).

Rennie and Singh (1996) opined that livelihood is a more tangible concept than 'development' because it is easier to discuss, observe, describe and even quantify. Livelihoods involve people's means of gaining access to adequate stocks and flows of resources (food, cash, and opportunities) to meet their basic needs while sustainable livelihood as an integrated concept means enhancement of resources and productivity on a long-term basis (Rennie and Singh 1996). Sustainability of livelihood entails how assets and capabilities are utilised, enhanced, and maintained over time so as to preserve livelihoods. This is because livelihoods and survival mechanisms of the elderly are vulnerable to stresses and shocks, which affect their ability to avoid, withstand, resist, and/or recover from such stresses and shocks. In other words, sustainability of livelihood is the ability of livelihoods to be resilient and bounce back after shocks and stresses. Livelihood security is therefore a basic Initiatives component of livelihood sustainability. Hence, development agents attempt to reduce livelihood vulnerability by restraining external stresses, minimising shocks, and providing safety nets so that people living in poverty do not necessarily become poorer. This is because assets and capabilities can be vulnerable to destruction or deterioration which can comprise the resilience of retirement livelihoods (Carney 1998). In essence, livelihoods comprise how the elderly seek access to both tangible and intangible resources through which they gain assets to offset stresses, ease shocks, and meet contingencies in retirement.

2.4 Livelihoods and the Elderly

According to Deluga et al. (2018), the populations in all parts of the world are ageing. Older persons play a key role in contributing to the social and economic fabric of the families. However, their ability to provide consistent support is challenged through exclusion and discrimination (Sidloyia and Bomelab 2016). According to Deluga et al. (2018) the

urban/rural divide in access to services and activities is the consequence, putting older rural populations at a disadvantage across a number of dimensions. It is essential that there are sustainable frameworks for ensuring that the elderly persons realised the desired livelihood outcomes. This study shall examine the options that could be used to ensure that the livelihoods of the elderly in both rural and urban areas is sustainable.

Mustapha (1991) proposed a Multiple Modes of Livelihood Approach meant to explain micro-economic condition as it is today in most countries. The multiple modes of livelihood refer to survival strategies and activities people engage in to alleviate financial insufficiency, pressure and hardship (Mustapha 1991). They are means employed by people to gain additional earnings through getting involved in additional jobs or ventures. The basic tenets of this approach states that the multiple modes of livelihoods include means of generating additional earnings to augment for inadequate income. These modes may not all be legal; it could include criminal and quasi-illegal practices (Mustapha 1991). Examples include, prostitution, drug trafficking, smuggling of goods, avoidance of taxation by business owners and others. He argued that the pervasiveness of technological changes and economic crunch around the world has intensified the need for multiple modes of earning as people struggle for relevance and survival. In this approach every avenue available to individuals and groups are harnessed to gain more earnings. Some of the examples available for elderly and retirees include farming, establishment of schools, consultancy services, investment in landed property services and others (Gruber and David 1999). However, this approach is difficult to domesticate in Zimbabwe, due to the economic hardships currently facing the country.

2.5 Social Support Services for Sustaining the Livelihoods of the Elderly

The governments through social services are mandated to provide monthly grants to the elderly. According to Help Age Zimbabwe (2017) the state of elderly in the Zimbabwe is very bad, older people feel neglected by their families, community and the government. There is need for the government to create a levy meant for the elderly and to have a specific budget allocation for the care of the elderly. This will go a long way in improving the lives of the elderly (Help Age Zimbabwe 2017). Most elderly people are taking care of orphans who lost their parents to one cause or the other, what is more disturbing is that these elderly have no means of surviving, some are not covered by the social security and protection schemes, even those that are covered their pension is close to nothing making it difficult to sustain their lives. It is noted with concern that, due to the weakening of the social fabric, older persons

are no longer recognized as important and equal members in society. A 1997 Poverty Assessment Survey revealed that (78.5%) of the elderly in Zimbabwe were classified as poor or very poor. However, there have been little efforts by the government to allocate budget for the plight of the elderly probably due to the fiscal constraints faced by the country. This means the elderly need constant assistance to get through life from their families, support organisations and the government. In addition to fragile livelihood, elders face a weak social security support from the government despite their contribution to nation building.

Zimbabwe has already guaranteed free health care for those aged 65 years and above, but most elderly Zimbabweans are still disadvantaged (Harare News, 2016). However, this has not been the case, leading to the shortage of basic necessities (HelpAge Zimbabwe, 2017). Although there is a provision that people over the age of 65 can consult at a public hospital for free, they still have to pay for medication which is sometimes unavailable in these institutions (HelpAge, 2011). There is need for an increase in geriatric wards and beds in the country or a complete shift to exclusively geriatric hospitals. Although senior citizens can see doctors free of charge, the challenge comes when they are diagnosed and they have to get drugs (HelpAge Zimbabwe, 2017) they cannot afford to buy drugs and this makes them helpless.

2.6 Dynamic Livelihoods and Trajectories

A livelihood lens is a grounded and multidimensional perspective that recognizes the flexibility and constraints with which people construct their complex lives and adapt their livelihoods in dynamic ways. By paying attention to the wider institutional, cultural, and policy contexts as well as shocks, seasonality, and trends, this lens reveals processes that push people onto undesirable trajectories or toward enhanced wellbeing. Better infrastructure and technology as well as diversification of assets, activities, and social support capabilities can boost livelihoods, spreading risks and broadening opportunities (Clot and Carter 2009; Carr 2013; Reed et al. 2013). The sustainable livelihoods framework (Chambers and Conway 1992) is widely used for identifying how specific strategies may lead to cycles of livelihood improvements or critical thresholds beyond which certain livelihoods are no longer sustainable (Sabates-Wheeler et al. 2008). It emerged as a reaction to the predominantly structural views of poverty and ‘underdevelopment’ in the 1970s and became adopted by many researchers and development agencies (Ellis and Biggs 2001). With the neoliberal turn in the late 1980s, the livelihoods approach became associated with a more individualistic

development agenda, stressing various forms of capital (Scoones 2009). Consequently, it has been criticised for its analytical limitations, such as measuring capitals or assets, especially social capital, and for not sufficiently explaining wider structural processes and ecological impacts of livelihood decisions (Small 2007; Scoones 2009). An overemphasis on capitals also eclipses power dynamics and the position of households in class, race, and other dimensions of inequality (Van Dijk 2011).

2.7 Framework for the Sustenance Livelihoods of the Elderly Persons

The Universal Declaration of Human Rights (UDHR), 1948, and the International Covenant on Economic, Social and Cultural Rights affirm the universal right to adequate food and to pursue economic development. The UDHR states in Article 25 that ‘everyone has the right to a standard of living adequate for the health and wellbeing of himself and his family’. Furthermore, the UDHR (8) lists at least five rights that specifically address older people’s inclusion in emergency food security and livelihoods programmes. That older people have, the right to employment with just and favourable working conditions (Article 23), the right to the highest attainable standard of physical and mental health (Article 25), the right to adequate food, housing and social security (Article 25), the right to education (Article 26) and the right to freely pursue economic, social and cultural development (Article 27).

Furthermore, it is important to note that this message of inclusion is reinforced in a number of other conventions. The UN Principles for Older Persons (UN General Assembly Resolution 46/91) calls for ensuring the independence, participation, care, self-fulfilment and dignity of older people. It states that older people should have access to basic services, including the right to adequate food and the right to pursue economic development. Older people do not forfeit their basic human rights when they turn 55, 60 or 65. Consequently any exclusion of older people from livelihoods programmes (irrespective of whether these are implemented by the state, by NGOs or by the private sector) is an infringement of their basic human rights and the principles of humanitarian action. The Sphere Humanitarian Charter and Minimum Standards in Disaster Response calls for participation and targeting of the most vulnerable groups, including older people. The Humanitarian Charter states that humanitarian agencies offer their services based on the principle of humanity and the humanitarian imperative, recognising the rights of all people affected by disaster or conflict. The charter summarises these rights as, the right to life with dignity, the right to receive humanitarian assistance (includes food, water, clothing, shelter and the requirements for good health) and the right to

protection and security. When cash- or food-for-work programmes have age limitations or older people are refused admittance to these programmes, humanitarians inadvertently infringe the rights of older people. Finally, the 2002 Madrid International Plan of Action on Ageing states that in emergency situations, older persons are especially vulnerable and should be identified as such because they may be isolated from family and friends and less able to find food and shelter. The above section on rights and commitments to equitable humanitarian support is the foundation of a humanitarian intervention. When designing a food security and livelihood intervention, it is crucial that any response should be inclusive and correctly target the most vulnerable and invisible groups of people.

In Zimbabwe, the Bill of Rights and Freedoms of the Zimbabwe Constitution Chapter Four stipulates that the elderly have the right to receive reasonable health care and assistance from their families and the state as well as financial support through social security and welfare. The State also has to make sure that there are laws that make sure that the rights of the elderly are achieved with time. Human rights are inherent rights of a person and belong equally to all people, irrespective of their race, colour, sex, age, language, religion, political, origin, property, birth or other status. Rights address freedom from fear and want, and call for respect, protection, promotion and fulfilment from duty bearers.

The care of the elderly persons in Zimbabwe is a combined effort of the families of the elderly, their communities, NGOs, well-wishers and government. It is important to note that all non-state actors are not obliged to provide care and assistance to the elderly. They do so at their benevolence and when they have resources to do so. Government of Zimbabwe has a public assistance programme administered by the Department of Social Welfare to cater for the elderly; runs a Pensions and Other Benefits Scheme under the auspices of the National Social Security Authority of Zimbabwe; runs a cash transfer programme under the National Action Plan for Orphans and Vulnerable Children (OVC); and entitles the elderly to free primary health care services through public health services (Zimbabwe Human Rights NGO Forum 2016). Fulfilment of rights of the elderly depends on the policy and regulatory framework; political will and resource availability for the government; NGOs and families of the elderly persons. Although the rights of elderly persons are enshrined in the constitution and under international human rights law, they are rarely justiciable (HelpAge Zimbabwe 2017). Severe limitations hinder the fulfilment of rights of the elderly. Social solidarity and the family, expected to cater for the elderly face threats of individualism, family breakdowns,

deaths and a poor economy. NGOs facing viability challenges and corruption struggle to close the gap. This leaves the elderly at the mercy of government.

Furthermore, existing government measures to assist the elderly are compromised by selective distribution, inaccessibility, limited awareness among potential beneficiaries and the insignificance of the benefits (Zimbabwe Human Rights NGO Forum 2016). The underfunded, non-contributory public assistance scheme, with erratic disbursements, offers between \$10 and \$25 a month. It is unavailable to individuals assumed to have extended families capable of assisting them. The Pension and Other Benefits Scheme, offering paltry monthly payments of \$40-\$60 monthly way below the poverty datum line is based on membership and contributions (AFDB 2011). It exempts the unemployed, informal sector workers, domestic workers and rural peasant farmers. The cash transfer scheme is donor funded and hence not sustainable. Specialized geriatric medical services are not free while the existing general health care system is inadequate for medical needs of the elderly (Zimbabwe Human Rights NGO Forum 2016).

2.8 Challenges Faced by the Elderly When Sustaining Livelihoods

Hoof et al. (2018) argue that the ageing of society is a positive yet challenging phenomenon. Najjumba-Mulindwa (2013) states that there are variations in the livelihood strategies in the urban and rural areas. Despite the variations in the livelihood strategies, Dhembwa (2013) notes that the older people often face difficulties specific to their places of residence. Peltzer et al. (2019) argues that the elderly persons have challenges in terms of accessing basic necessities of life like shelter, food, clothing, and health. According to Deluga et al. (2018) one area where older persons are most vulnerable is in sustainable livelihoods, including access to formal and informal savings and loans institutions. The succeeding sub-sections present some of the challenges that the elderly face.

2.8.1 Living Conditions

Hoof et al. (2018) opine that one out of 7, or 90 million older people, live alone worldwide and this ratio has increased in the majority of countries over the past decades. Along similar arguments, Peltzer et al. (2019) state that some older persons live alone, and this can have important social consequences, especially for older women. Solitary living, which may result in increasing isolation, makes caregiving by family members more difficult to arrange, and it also increases the need for additional support services so as to enable older persons to remain

in their own home. According to Dhemba (2013), developing countries may face difficulties in providing such services. In developing countries where older people have limited access to formal mechanisms of social protection, they will need to rely on the family and the local community. However, these informal protection mechanisms have been under increasing stress recently, owing to the process of population ageing itself (Muruviwa et al. 2013).

2.8.2 Neglect and Abuse

Peltzer et al. (2019) argue that the growing number of older persons and the changes in living arrangements also increase the risk of abuse and neglect. Although abusive behaviour is difficult to measure, existing reports of neglect and abuse of older persons should be reasons for concern. The abuse of older persons and age-based discrimination are problems signalled in many countries. The abuse of older persons has been signalled within the family, in community contexts, and in centres for institutional care for older persons, in developed and developing countries alike. Risk factors often relate to a lack of resources for care, poor training, and education of caregivers, job-related stress in institutional care facilities, existence of negative stereotypes of older persons in society, and conditions of poverty, in general (Umukoro 2013).

2.8.3 Health Challenges

Aging is often associated with decline in health status characterised by limited physical functioning, increase in chronic diseases as well as decrease in cognitive functioning (Muruviwa et al. 2013). It is also essential to note that non-communicable diseases (NCDs) have become one of the world's biggest public health problems, and they largely affect the older persons. The social determinants of non-communicable diseases include socio-economic factors (poverty, inequality, and rural-urban differences), and risky health behavioural repertoire. In a similar vein, Deluga et al. (2018) point out that the ageing and old age period is characterised by the intensification of changes to the person's physical state, largely manifested in troublesome ailments and multiple simultaneous diseases. Najjumba-Mulindwa (2013) argues that old age to be characterised by ill-health, dependency, low incomes and depreciated asset bases, changed body features and physiological state. Their definition of chronic poverty embraces inter-generational and durational dimensions of chronic poverty. They singled out the widowed, disabled, women and those living alone as the ones most prone to chronic poverty (Najjumba-Mulindwa 2013).

It is evident from the current situation in Zimbabwe that the living conditions as well as the health status of the people have declined due to the economic despair that is confronting the country (Gomba, 2018). According to the Ministry of Health and Child Welfare, in its Zimbabwe National Health Strategy 2009-2013 report, the challenges facing the health sector continue getting worse because of the economic challenges. The economic challenges in Zimbabwe resulted in the decrease in funding for 'social services' and ultimately caused the deterioration of the health building blocks, quality of health services and drug shortages (Kurebwa and Kurebwa, 2014).

2.9 Addressing the Challenges Faced by the Elderly Persons

There are number of strategies for addressing the challenges faced by the elderly. These include provision of adequate national budgetary support to the social safety nets. There are social protection programmes that seek to reduce the vulnerability of poor and people at risk in a society (Munodawafa, 2017), and these ought to be adequately financed. Zimbabwe has a range of social protection programmes, many that were instituted before the macro-economic crisis. Masuka et al. (2012) loosely define social protection as protection that a society provides for its vulnerable members and Manjengwa (2008) defines it as mechanisms to protect citizens against livelihood risks while promoting livelihoods and capabilities of the vulnerable and enhancing the social status and rights of the marginalised. Social protection mechanisms can be categorised into three groups: social insurance, labour market regulation and social assistance. Under the auspices of the Ministry of Labour and Social Services, the government of Zimbabwe employs the social assistance approach, providing support to deprived citizens (Gomba, 2018).

According to Munodawafa (2017), in Zimbabwe, there are a number of social protection schemes administered by the department of Social Services as mandated by the Social Welfare Assistance Act, 1998. The Schemes include elderly and disability grants, provision of health assistance, pauper burials, grain loan schemes, free food distribution, and drought relief. The schemes target deprived and destitute households and citizens. However, arising from economic challenges, many Zimbabweans are currently vulnerable and large numbers fit in the 'destitute' category, qualifying them for public assistance according to the programme's broad parameter. The Health assistance scheme provides free medical treatment to citizens unable to afford health services, while the drought relief provides food parcels to deprived households in drought and times of food scarcity (Gomba, 2018).

Sidloyia and Bomelab (2016) point out that efforts to help the elderly get out the chronic poverty trap need to create avenues for employment among the elderly persons; mobilise poor elderly into organised community groups through which they can be targeted for support including skills development; provide free and specialised geriatric services; support the changing role of older persons in relation to orphan care; increase capacity of families to provide care and support to older persons through public awareness raising campaigns; and devise innovative approaches of embracing all categories in the national social welfare system order to avoid old age destitution and poverty (Najjumba-Mulindwa 2013).

2.10 Chapter Summary

The literature revealed that globally the elderly population is increasing and is characterized by various social and economic challenges. The elderly persons engage in various unsustainable livelihood strategies to sustain their lives and those of their dependents. Therefore, it is a collective responsibility of government, NGOs and citizens to protect the rights of elderly people. Government should provide financial support to families caring for the elderly as part of social protection measures. Non-contributory or universal pensions should be availed to those over the age of 65 years. Therefore, one may be inclined to comment that later life is celebrated in Africa and in Zimbabwe in particular because it is seen as a blessing from God. Older people are generally treated with dignity. But with modernization, Zimbabwean senior citizens suffer diverse challenges and experience difficulty in meeting their basic needs. Hence, the need for sustainable livelihoods that will address life deprivations and improve the quality of life of the Zimbabwean elders. This study examines the livelihoods of the elderly in Zimbabwe, their sustainability and its impact on quality of life of elderly in Zimbabwe. It argues that beyond the conventional survival mechanisms, the elderly in Zimbabwe require resilient and sustainable livelihoods in order to enhance their quality of life. The article concludes with the need to strengthen both urban and rural elderly social supports in order to improve the livelihoods and promote quality of life of the elderly in Zimbabwe. The next chapter presents the theoretical framework.

CHAPTER III

THEORETICAL FRAMEWORK

3.1 Introduction

This study applied the Sustainable Livelihoods Framework (SLF). The other theory is the Human Rights-Based Approach to Development. The FANTASTIC model, a tool used to assess the livelihoods of the elderly, was also applied in this study.

3.2 The Sustainable Livelihoods Framework

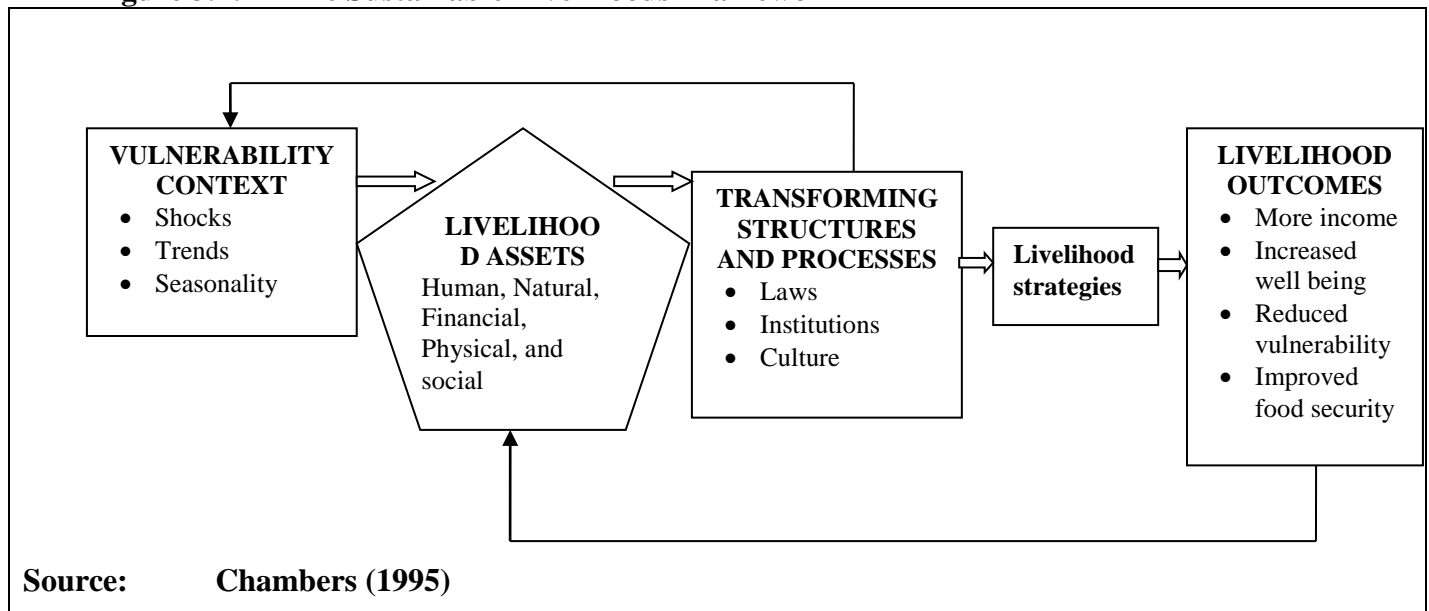
The enjoyment of rights is meant to ensure that livelihoods are sustainable. Accordingly, this study applies the sustainable livelihoods framework (SLF), whose main proponents were Chambers and Gordon (1992), and Chambers (1995). According to Khatiwada et al. (2017), sustainability aims at expanding the traditional definitions of poverty alleviation. There is a need to pay attention to the various factors and processes, which either constrain or enhance ability of vulnerable members of society to enjoy an acceptable standard of living. According to Chambers and Gordon (1992), the SLF attempts to put the vulnerable community members at the centre of developmental interventions.

According to the SLF, communities are operating in a vulnerability context (Diriwari 2016). The vulnerability context frames the external environment in which people exist. Critical trends as well as shocks and seasonality, over which people have limited or no control, have a great influence on people's livelihoods and on the wider availability of assets. Every community have assets (livelihood assets), namely human capital, social capital, natural capital, physical capital, and financial capital (Braitstein 2015). In order for the communities to realise their livelihood outcomes, there are policies, institutions, and processes. The importance of policies, institutions, and processes cannot be overemphasised, because they operate at all levels, from the household to the international arena, and in all spheres, from the most private to the most public (James and Prout 2015). The policies, institutions, and processes effectively determine access (to various types of capital, to livelihood strategies and to decision-making bodies and source of influence), terms of exchange between different types of capitals, and returns to any given livelihood strategy (Thwala 2018). Because culture is included in this area, they also count for other 'unexplained' differences in the 'way things

are done’ in different societies. The policies, institutions, and processes can determine access to assets and influence decision-making processes (Serrat 2017).

To attain the desired livelihood outcomes, there are strategies that the communities implement. The livelihood strategies comprise the range and combination of activities and choices that people make/undertake in order to achieve their livelihood goals (Gomba 2018). Livelihood outcomes are the achievements or outputs of livelihood strategies, such as more income, increased well-being, reduce vulnerability, improved food security and a more sustainable use of natural resources. When thinking about livelihood outcomes, the aims of a particular group as well as the extent to which these are already being achieved has to be understood (Serrat 2017). Figure 3.1 shows the sustainable livelihoods framework.

Figure 3.1: The Sustainable Livelihoods Framework



The SLF views the vulnerable members of the society (in this study the elderly) to be operating in a context of vulnerability. In the vulnerability context, people have access to livelihood assets (human, natural, financial, physical, and social), which gain their meaning and value through the obtaining social, institutional, and organisational environment. The environment influences the livelihood strategies that people can use to sustain their lives. Strategies are ways of combining and using assets that are open to people in pursuit of the beneficial livelihood outcomes (Khatiwada et al. 2017).

3.3 The Rights-Based Approach to Development

The human rights-based approach seeks to ensure that all human being enjoy the basic rights as enshrined in the Universal Declaration of Human Rights. Broberg and Sano (2018) argues that a human rights-based approach to development is a way (or a ‘method’) of implementing human rights in a development context. The indicator of development in this study is the extent to which livelihoods are sustained and extent to which some of the desired livelihood outcomes, for example, access to shelter, food, water, sanitation, and health, are realised. The rights-based approach is applicable in this study because of the fact that the elderly ought to must enjoy their rights. No older person must be excluded from attaining the desired livelihood outcomes and realising the basic rights like food, shelter, and health (Green 2014).

According to Tolander (2013), when implementing the human rights-based approach, a number of questions are raised, for example, what are the rights involved in this situation? Whose rights are being violated? Will the intervention strengthen their exercise? Accordingly, the approach keeps focus on the most marginalised people and thus forces us to constantly think how work can reach those who otherwise would lose out on its benefits (UNDP 2017). The human rights-based approach also puts emphasis on actors: it provides clarity on who has to deliver what in the ‘social contract’ (though admittedly lines can get blurry) and pushes you to analyse what holds them back from fulfilling their responsibilities. It provides a clear and accepted basis for discussion and a leverage point for debates on improvements. There is no ‘would be nice to have’ in rights as they are legally protected entitlements (Serrat 2017). As a standard setting exercise and advocacy strategy, the human rights-based approach has powerful value (Broberg and Sano 2018). However, as argued by Tolander (2013), as an operational tool, there could be danger the rights-based approach could be used as a blunt instrument, fails to take account of the constraints many governments face and sets an unrealistically high bar that many duty bearers are unable to reach (even if the political will is there). The common retort is that the focus should be on progressive realisation of rights, however the human rights-based approach narrative rarely contains such nuance (Valdés-Rodríguez and Pérez-Vázquez 2011). The University of Toronto also raised a further issue, what is the link between rights and systems thinking? If one views the world as made up of complex systems, does a rights-based approach help or hinder one’s interventions? (Broberg and Sano 2018).

3.4 The FANTASTIC Life Inventory (FLI)

The FANTASTIC Life Inventory (FLI) was designed by Wilson et al. (1984). According to Deluga et al. (2018), although the tool was initially used in research on the lifestyle of young people, it could be applied to assess livelihoods of the elderly. FLI uses a checklist that was developed by Wilson et al. (1984), which comprises 25 closed-end questions that explore nine domains with the acronym FANTASTIC, as follows:

- F: Family and Friends;
- A: Physical Activity;
- N: Nutrition;
- T: Tobacco;
- A: Alcohol and Other Drugs;
- S: Sleep/Stress;
- T: Type of Personality;
- I: Insight; and
- C: Career.

Each question in the FLI questionnaire has three options as answers, with numeric values ranging from 0-2. The scores from all domains are added together to produce a global score, which ranges from 0-50 points, stratifying the individual into five levels. According to Deluga et al. (2018), the implications of the score is as hereunder:

- 0-19: Needs Improvement;
- 20-29: Regular;
- 30-34: Good;
- 35-41: Very Good; and
- 42-50: Excellent.

In this study, the FLI tool is used to make objective comparisons of the livelihoods situations of the elderly in Marondera Urban and Chivhu Rural. After the comparisons, options for ensuring that the desired livelihood outcomes are met shall be proposed.

It is also essential to note that the ageing and old age period is characterised by the intensification of changes to the person's physical state, largely manifested in troublesome ailments and multiple simultaneous diseases. Therefore, as part of the process of examining the livelihoods situation, there is a need to establish if there elderly are exhibiting the desirable behaviours.

3.5 Chapter Summary

This chapter presented a three-fold theoretical framework. The SLF provides that the vulnerable members of the society (in this study the elderly) to be operating in a context of vulnerability, yet there are livelihood assets (human, natural, financial, physical, and social), which could be exploited (through transforming institutions and structures) to ensure that the desired livelihood outcomes are realised. The rights-based approach provides that it essential that all human being enjoy the basic rights as enshrined in the Universal Declaration of Human Rights. Finally, the FANTASTIC Life Inventory (FLI) is a tool that seeks to provide an objective assessment of the livelihoods of a particular group of people.

CHAPTER IV

RESEARCH METHODOLOGY

4.1 Introduction

The focus of this Chapter is to interrogate the way in which this study was conducted. According to Taylor et al. (2016), research methodology is a way in which a researcher approaches problems and seeks answers. In this section, there is a description of the way of conducting this study. Specific focus is on the research paradigm, research design, data collection procedures, data analysis and presentation procedures, validity and reliability, and ethical considerations.

4.2 The Research Paradigm

The focus of this study was to compare the situation of the elderly in urban and rural areas, and then come up with alternatives that could be implemented in order to ensure that the older persons attain their desired livelihood outcomes. As indicated in one of the theories guiding this study (the Sustainable Livelihoods Framework), the choice of the livelihood strategies is depended on the livelihood assets in a particular community and the transforming structures in place. Given that communities are diverse in terms of assets, ‘blue-print’ or ‘straight jacket’ approaches, which have roots in quantitative research, are not suitable in this research. It is also essential to note that no study can be purely qualitative because there could be objective aspects (Saunders et al. 2015), for example the income levels of the elderly. The FANTASTIC model was used to provide ‘an objective assessment’ of the livelihoods situation of the elderly in urban and rural settings. Accordingly, this study applied a pragmatic approach, which entails a mixture of both quantitative and qualitative methods.

4.3 The Research Design

This study was a comparative case study and it sought to establish the livelihood situation of the elderly in Marondera Urban and Chivhu Rural. Conducting a case study made it possible for a detailed comparative analysis to be made.

4.4 Population

Any research is based on a population. Studies are not conducted in a vacuum, but the data is collected from the elements of the population. Saunders et al. (2015) describe the term study

population as the list of elements from which a sample is drawn. Furthermore, the population can be described as an element of the universe. The population is the exhaustive list of all the elements or items or objects under study or investigation. The population for this study comprised the all the elderly persons 60 years and above in Marondera urban and Chivhu rural areas. There are other stakeholders who deal with the elderly persons in Zimbabwe, and were also part of the population. They included the Department of Social Welfare (DSW), Councillors, and NGOs (HelpAge Zimbabwe).

4.5 Sample and Sampling Procedures

It was not possible for a researcher to collect data from all the elements of the population. Therefore, a section of the population was studied. Sampling refers to a set of techniques for achieving representation. The primary purpose of sampling was to economise on the resources that are needed to collect and analyse statistical data. Instead of using information from all members of the population, the researcher receives it from only a part of the population (Creswell 2014). There was use of quota and purposive sampling techniques in this research. The study used quota sampling technique to ensure that there is representation from all the categories of stakeholders. Purposive sampling was in use to ensure that data is collected from knowledgeable participants. The elderly persons in Marondera and Chivhu were selected using convenience sampling. The estimate sample size is in Table 4.1.

Table 4.1: Sample Size

Category of Participants	Target Sample
Department of Social Welfare (Provincial, and District Levels)	3
Councillors (Marondera and Chivhu)	6
HelpAge Zimbabwe	2
Older Persons in Chivhu and Marondera	70
Total	81

4.6 Research Instruments

This study used questionnaires, interviews, focus group discussions (FGDs), and observation as research instruments. The succeeding sub-sections elaborate on the data collection tools.

4.6.1 Questionnaire

A questionnaire is a list of carefully structured questions chosen for considerable testing with a view to elicit reliable responses from a chosen sample (Simon 2011). There was use of a

researcher-administered questionnaire was directed to the elderly persons and the FANTASTIC Life Inventory (FLI) tool guided its design.

The researcher uses questionnaires because they afforded an opportunity to collect large volume of data, as more participants could be covered. The questions in the researcher-administered questionnaire were closed ended. Closed questions made it easier for participants to complete questionnaires. In addition, closed questions facilitate easy analysis of data. The questionnaires were unable to solicit detailed information and explanations about the real life experiences of the elderly persons, hence they were complimented by key informant interviews and focus group discussions.

4.6.2 Key Informant Interviews

Interviews were conducted with the key informants in the Department of Social Welfare, HelpAge Zimbabwe, and with Councillors. Interviews provided a multi-perspective understanding of the issues under investigation and they were able to reveal multiple, and sometimes conflicting, attitudes about the livelihoods of the elderly. The advantages of using an interview technique were that the respondents provide detailed explanations. The researcher had the ability to seek further clarification (through probing), thus generating more data. There was use of telephone interviews because of the restrictions imposed by the Covid 19 pandemic.

4.6.3 Focus Group Discussions

There were FGDs with the elderly persons in Chivhu and Marondera. Focus group discussions helped the participants to share information on their experiences. The focus group discussions with the participants also allowed the collection of a diversity of views pertaining to the livelihoods situation of elderly within a short space of time. When listening to the views of the other participants, there was an opportunity for the focus group attendees to provide more details, as they shared ideas.

4.6.4 Observation

The study also used observation method. During the visits to administer the questionnaire and conduct focus group discussions, the researcher conducted observations. Focus was on the quality of the homesteads that the older persons live in, as well as the observations of the livelihood assets that are present in the districts, especially the physical (infrastructure) and

natural resources (forests, and water bodies). The rationale for conducting observation was that the proposed project interventions should be in line with the available livelihood assets in the communities. Accordingly, it was paramount for the researcher to observe the major assets that could be sustainably exploited for ensuring that the older persons meet some of their desired livelihood outcomes.

4.7 Data Collection Procedures

The first step in data collection was to design the data collection instruments, test them, and get approval by the supervisor. After the supervisor's approval, authority was sought from the Ministry of Labour and Social Welfare (DSW) head office in Harare, and at the Provincial and District Offices. Authority was also sought from the other relevant stakeholders. After authority was granted, the following steps were followed:

1. Making appointments with the participants;
2. Conducting interviews with DSW, Councillors, and NGO representatives; and
3. Administering questionnaires, and conducting FGDs with elderly persons in Marondera and Chivhu. Observations are made during administration of questionnaires and conduct of FGDs.

4.8 Data Analysis and Presentation Procedures

Quantitative data was captured using the Statistical Package for Social Sciences (SPSS). Descriptive statistics, mean, standard deviation and cross tabulations were employed to examine the livelihood lifestyles of the urban and rural elderly people. In addition, Chi-Square for independence was the inferential statistics employed to test for independence in livelihood lifestyles between the rural and urban elders. Qualitative data was analysed using thematic analysis. Thematic analysis is a qualitative data analysis technique, which collects data from various sources and classifies it into themes (Creswell 2014). The method is a qualitative analytical method for identifying, analysing, and reporting patterns (themes) within the data. Thematic analysis organises and describes the data into sets. A theme captures something important about the data in relation to the research question and represents some level of patterned response or meaning within the data set (Taylor et al. 2016).

4.9 Validity and Reliability

Validity is about the truthfulness of a research or the extent to which the idea fits reality (Creswell 2014). The researcher notes that it is hard to attain 100% validity and reliability and this stance is supported by Creswell (2014) and Taylor *et al.* (2016). Nevertheless, researchers use several methods to enhance validity and reliability. Firstly, to ensure that the research results are credible, there was quality control, that is, peer review, clear audit trail, and ensuring that the sample is representative. Data was collected from knowledgeable participants and respecting the research ethics. Adequate time was allocated towards data collection. The ways of enhancing validity used also entailed use are the multiple methods of data collection (questionnaires, interviews, and FGDs). In cases where questionable responses were provided, there was member checking (verification of exceptional cases).

Reliability was tested using Cronbach's Alpha. Table 4.2 shows the results of the reliability testing.

Table 4.2: Reliability Testing

Cronbach's Alpha	Number of Items
.966	24

Table 4.2 shows the reliability of the questionnaire. A Cronbach Alpha value of 0.966 indicate that the questionnaire is a reliable instrument that can be repeatedly be used over time and produce the same numeric value under the same conditions. The minimum acceptable reliability coefficient is 0.7 for a questionnaire to be said to be internally consistent and be unacceptable instrument for any study (Taylor et al., 2016).

4.10 Ethical Considerations

The first ethical principle that was respected is that of informed consent. Participants were informed about the nature of the study, its objectives, benefits, risks (political, economic, psychological, and social), and consent was sought. The privacy of participants was respected. When conducting interviews, no intruders were allowed. In the focus group discussions, the privacy of participants is compromised. Nevertheless, focus group participants were informed that the issue of livelihoods is of paramount importance and should feel free to contribute to the worthy cause. In addition, there was assurance that only the participating individuals will have the details of the discussions. The names of the participants were not divulged in any part of the research report. The participants were not

asked to provide their names and contact details. Raw data was not shared with anyone not involved in the research process. The participants were informed about their rights to withdraw from the research should they feel uncomfortable.

4.11 Chapter Summary

This chapter outlined the research methodology used in the study. The main focus was on issues, among others, research philosophy, the research approach, research design, population and sample sizes. The research instruments, validity and reliability, data analysis and presentation procedures, and ethical considerations were part of the chapter. The next chapter focuses on the study findings, analysis, and discussion.

CHAPTER V

PRESENTATION OF FINDINGS

5.1 Introduction

This chapter presents the findings of the study, which are in line with the research objectives. There were four specific research objective in this study, the first one being to establish the meaning of sustainable livelihoods according to the perceptions of the elderly in Marondera urban and Chivhu rural areas. The second research objective was to compare the livelihood strategies employed by the elderly in Marondera urban and Chivhu rural areas. Attention was also on assessing the challenges faced by the elderly in Marondera urban and Chivhu rural when securing their livelihoods. The fourth research objective was to propose alternatives for ensuring that older persons in Marondera urban and Chivhu rural areas attain the desired livelihood outcomes. Before presenting the findings of the study, focus is on the response rate and the demographic characteristics of the respondents.

5.2 Response Rate and Demographic Characteristics of Respondents

5.2.1 Response Rate

There was a remarkable response from the elderly persons. Table 5.1 shows the questionnaire response rate.

Table 5.1: Response Rate

Number of questionnaire distributed	Number administered, returned and analysed	Response rate (%)
70	63	90%

Table 5.1 shows the response rate of the study. A total of 70 questionnaires were distributed and 63 were returned and analysed representing 90% response rate. A response rate of this magnitude is enough to justify sample population representativeness and instil confidence in the validity of the findings and their possible generalisation.

In addition, to the administration of questionnaires, there were three telephonic interviews with the key informants from the Department of Social Welfare (Provincial, and District Levels). Interviews were also conducted with six Councillors (three from Marondera and

Chivhu), and with an official from HelpAge Zimbabwe. Two focus groups discussion were also held with the elderly persons (one in Marondera and the other one in Chivhu).

5.2.2 Characteristics of the Elderly Persons Who Took Part in the Study

There was collection of data relating to the demographic characteristics of the elderly person who took part in the study. Figure 5.1 shows the gender of the elderly persons.

Figure 5.1: Gender of the Elderly Persons in the Study

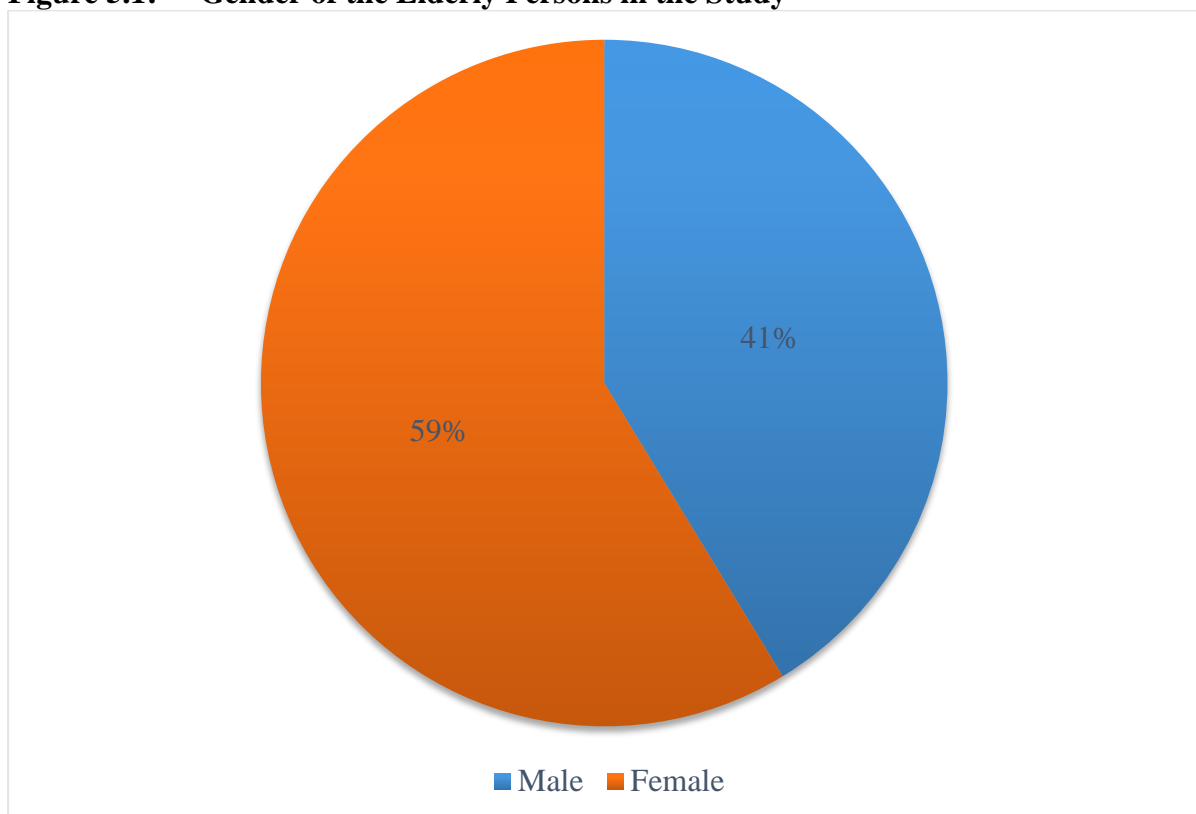


Figure 5.1 shows that more females, 59% than males (41%) participated in the study. More females than males were in the study, an indicator that the population of the elderly is largely comprising the females. Data appertaining to the location of the respondents was collected and it is shows in Figure 5.2.

Figure 5.2: Location of the Respondents

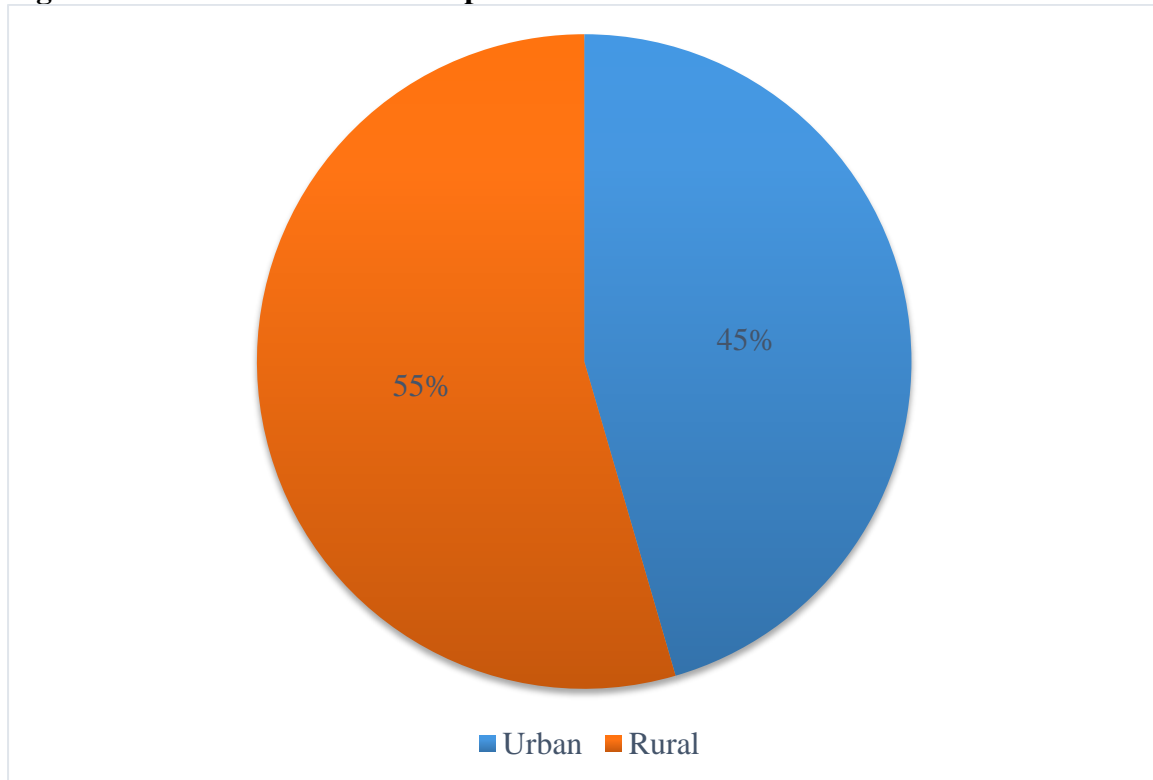


Figure 5.2 above depicts that more elderly people (59%) who took part in this study lived in rural areas than those who lived in urban areas (41%). Accordingly, the findings of this study largely reflects the livelihoods situation in the rural areas.

5.3 Livelihoods of the Elderly in Marondera Urban and Chivhu Rural

The FANTASTIC Model was used to establish the livelihood situation of the elderly in Marondera Urban and Chivhu Rural. Figure 52 shows the results in relation to family and friends.

Table 5.2: Responses on Nature of Family and Friends

Aspects of Family and Friends	Location	Responses		
		Lowest	Intermediate	Highest
I am able to communicate with others in an open, honest, and clear manner	Urban	38.7%	35.5%	25.8%
	Rural	59.4%	40.6%	0.0%
	Total	49.2%	38.1%	12.7%
I give and receive affection	Urban	38.7%	54.8%	6.5%
	Rural	59.4%	40.6%	-
	Total	49.2%	47.6%	3.2%
I get the emotional support that I need	Urban	58.1%	35.5%	6.5%
	Rural	59.4%	37.5%	3.1%
	Total	58.7%	36.5%	4.8%

Table 5.2 shows the distribution of elders according to use of family friends as coping strategies. As can be seen from the table few members of the elderly (12.7%) communicate with others in an open, honest, and clear manner as a way of improving their lifestyle. Nearly half (47.6%) moderately give and receive affection from family friends, while the majority, 58.7% rarely receive or get the emotional support they need. The responses on physical activity are shown in Table 5.3.

Table 5.3: Responses on Physical Activity

Aspects of Physical Activity	Location	Responses		
		Lowest	Intermediate	Highest
Active exercise, about 30 minutes, twice a week (running, cycling, fast walk)	Urban	58.1%	35.5%	6.5%
	Rural	59.4%	40.6%	-
	Total	58.7%	38.1%	3.2%
Relaxation and enjoyment of leisure time	Urban	38.7%	54.8%	6.5%
	Rural	59.4%	37.5%	3.1%
	Total	49.2%	46.0%	4.8%

In terms of physical activity, the old people who live in towns indulge in physical activities more highly than those who live in the rural areas. Elders residing in towns, in 6.5% of the cases highly involve themselves in physical activity than none of their counterparts in the rural areas.

Table 5.4: Responses on Nutrition

Aspects of Nutrition	Location	Responses		
		Lowest	Intermediate	Highest
Balanced meals	Urban	38.7%	54.8%	6.5%
	Rural	59.4%	40.6%	-
	Total	49.2%	47.6%	3.2%
Breakfast every day	Urban	38.7%	35.5%	25.8%
	Rural	62.5%	37.5%	-
	Total	50.8%	36.5%	12.7%
I do not consume excess sugar, salt, animal fats, or junk foods	Urban	38.7%	58.1%	3.2%
	Rural	59.4%	40.6%	-
	Total	49.2%	49.2%	1.6%
I have ideal weight	Urban	38.7%	35.5%	25.8%
	Rural	59.4%	40.6%	-
	Total	49.2%	38.1%	12.7%

Table 5.3 shows that the urban elders are more nutritious conscious than rural elders are. About 25.8% of the urban elders have ideal weight compared to none of the rural elders and

whose majority (59.4%) have lowest weight. There were also questions pertaining to the usage of drugs, the results of which are in Table 5.5.

Table 5.5: Tobacco/Drugs

Aspects of Tobacco/Drugs	Location	Responses		
		Lowest	Intermediate	Highest
I have never smoked tobacco in the past year	Urban	38.7%	54.8%	6.5%
	Rural	59.4%	40.6%	-
	Total	49.2%	47.6%	3.2%
I do not abuse of drugs, prescribed and non-prescribed	Urban	-	16.1%	83.9%
	Rural	28.1%	6.3%	65.6%
	Total	14.3%	11.1%	74.6%
I do not consume excessive coffee, tea, or fizzy drinks	Urban	-	16.1%	83.9%
	Rural	28.1%	6.3%	65.6%
	Total	14.3%	11.1%	74.6%
I do not exceed the recommended intake of alcohol/drugs/fizzy drinks	Urban	-	16.1%	83.9%
	Rural	28.1%	6.3%	65.6%
	Total	14.3%	11.1%	74.6%
I do not like driving when one has consumed alcohol or drugs (medicals)	Urban	-	16.1%	83.9%
	Rural	28.1%	6.3%	65.6%
	Total	14.3%	11.1%	74.6%

The findings in Table 5.5 indicate that in terms of drugs usage most urban elders are more positive. The majority 83.9% of the urban elders have never smoked tobacco in the past year, do not abuse of drugs, prescribed and non-prescribed, do not consume excessive coffee, tea, or fizzy drinks, do not exceed the recommended intake of alcohol/drugs/fizzy drinks or do not like driving when one has consumed alcohol or drugs (medicals) compared to 65% of the rural forks who highly adhered to occupational health recommendation. Furthermore, 6.5% have highly, in 6.5%, urban elders have never smoked tobacco in the past year compared to none of the rural elders.

The study also assessed the personality traits and behaviours of the elderly persons. The specific questions were on sleeping hours, experiences in terms of stress, patience, anger, and aggressiveness. Table 5.6 shows the findings in this regard.

Table 5.6: Responses on Personality

Aspects of Personality	Location	Responses		
		Lowest	Intermediate	Highest
I am able to sleep between 7 and 9 hours per night	Urban	58.1%	35.5%	6.5%
	Rural	59.4%	40.6%	-
	Total	58.7%	38.1%	3.2%
I never experienced any major stressful event in the past year	Urban	74.2%	19.4%	6.5%
	Rural	59.4%	40.6%	-
	Total	68.3%	28.6%	3.2%
I always use a seat belt when in vehicle	Urban	38.7%	19.4%	41.9%
	Rural	59.4%	40.6%	-
	Total	49.2%	30.2%	20.6%
I am a patient person	Urban	19.4%	54.8%	25.8%
	Rural	59.4%	40.6%	-
	Total	39.7%	47.6%	12.7%
I rarely exhibit aggressive behaviour	Urban	19.4%	38.7%	41.9%
	Rural	59.4%	40.6%	-
	Total	39.7%	39.7%	20.6%
I rarely have feelings of anger and hostility	Urban	19.4%	54.8%	25.8%
	Rural	59.4%	40.6%	-
	Total	39.7%	47.6%	12.7%
I rarely have anxiety and worry	Urban	19.4%	58.1%	22.6%
	Rural	59.4%	40.6%	-
	Total	39.7%	49.2%	11.1%
I have never suffer from depression	Urban	19.4%	54.8%	25.8%
	Rural	59.4%	40.6%	-
	Total	39.7%	47.6%	12.7%

The findings in Table 5.6 indicate that urban elderly people have stronger personalities than those who reside in rural areas. In 25.8%, 12.8%, 25.8%, 41.9% and 25.8%, older people residing in urban areas have respectively highly: never suffered from depression, rarely have anxiety and worry, rarely have feelings of anger and hostility, rarely exhibit aggressive behaviour and are more patient compared to their rural counterparts. In addition, urban elders are highly likely to be able to have sound sleep of between 7 and 9 hours per night, never experience any major stressful event in the past year and also always use a seat belt when in vehicle than the rural counterparts.

The study examined the level of insight among the elderly. The aspects of insight included extent of positive thinking, satisfaction with roles, and relations with others. Figure 5.7 shows the results.

Table 5.7: Responses on Insight

Aspects of Insight	Location	Responses		
		Lowest	Intermediate	Highest
I am a positive thinker	Urban	38.7%	58.1%	3.2%
	Rural	59.4%	40.6%	-
	Total	49.2%	47.6%	3.2%
I am satisfied in the role that I have in my family or community	Urban	38.7%	58.1%	3.2%
	Rural	59.4%	40.6%	-
	Total	49.2%	49.2%	1.6%
I always want to have good relations with those around me	Urban	38.7%	58.1%	3.2%
	Rural	59.4%	40.6%	-
	Total	49.2%	49.2%	1.6%

The results in Table 5.7 indicate that with regards to insight, elderly people residing in urban areas have greater insight than rural elderly people. In 3.2% of the responses elderly people living in urban areas were highly positive thinkers, satisfied in the role that I have in my family or community and always want to have good relations with those around me, compared to none of their counterparts living in rural areas.

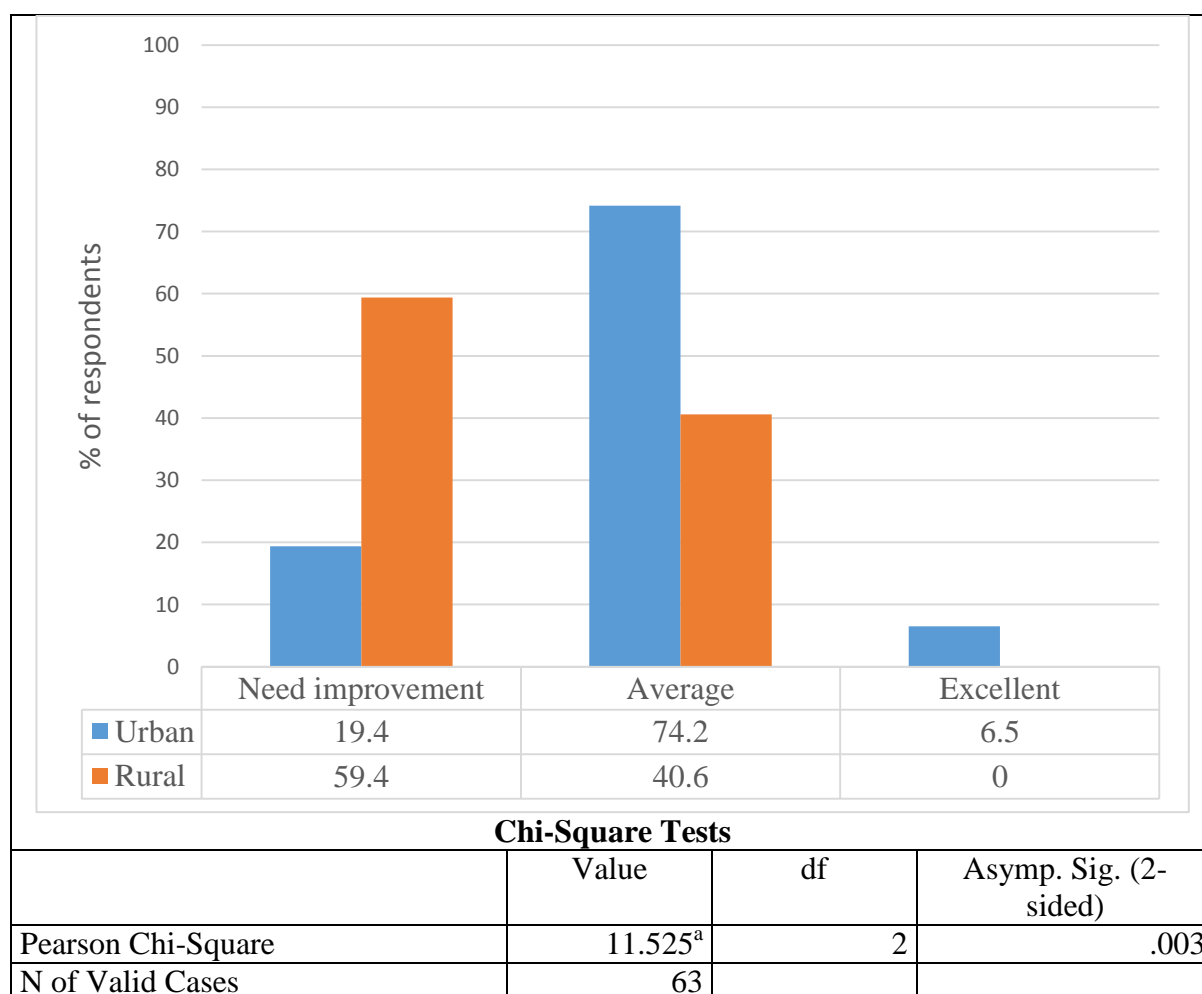
The participants were asked to comment on the extent to which the livelihood strategies of the elderly persons in Marondera Urban and Chivhu Rural were sustainable. Most of the participants pointed out that the elderly largely relied on external support and were not self-reliant. These findings agree with literature and Mutetwa and Muchara (2013) argue that there were social protection programmes that seek to reduce the vulnerability of poor and people at risk in a society (Mutetwa and Muchacha, 2013). Zimbabwe has a range of social protection programmes, many that were instituted before the macro-economic crisis. Khatiwada et al. (2017) loosely define social protection as protection that a society provides for its vulnerable members and include the mechanisms to protect citizens against livelihood risks while promoting livelihoods and capabilities of the vulnerable and enhancing the social status and rights of the marginalised. Social protection mechanisms can be categorised into three groups: social insurance, labour market regulation and social assistance. Under the auspices of the Ministry of Labour and Social Services, the government of Zimbabwe employs the social assistance approach, providing support to deprived citizens (UNDP. 2017). The Schemes include elderly and disability grants, provision of health assistance, pauper burials, grain loan schemes, free food distribution, and drought relief. The schemes target deprived and destitute households and citizens. However, arising from economic challenges, many Zimbabweans are currently vulnerable and large numbers fit in the

‘destitute’ category, qualifying them for public assistance according to the programme’s broad parameter. The Health assistance scheme provides free medical treatment to citizens unable to afford health services, while the drought relief provides food parcels to deprived households in drought and times of food scarcity (UNDP, 2017).

5.4 Comparative Analysis of Livelihoods of the Elderly in Marondera Urban and Chivhu Rural

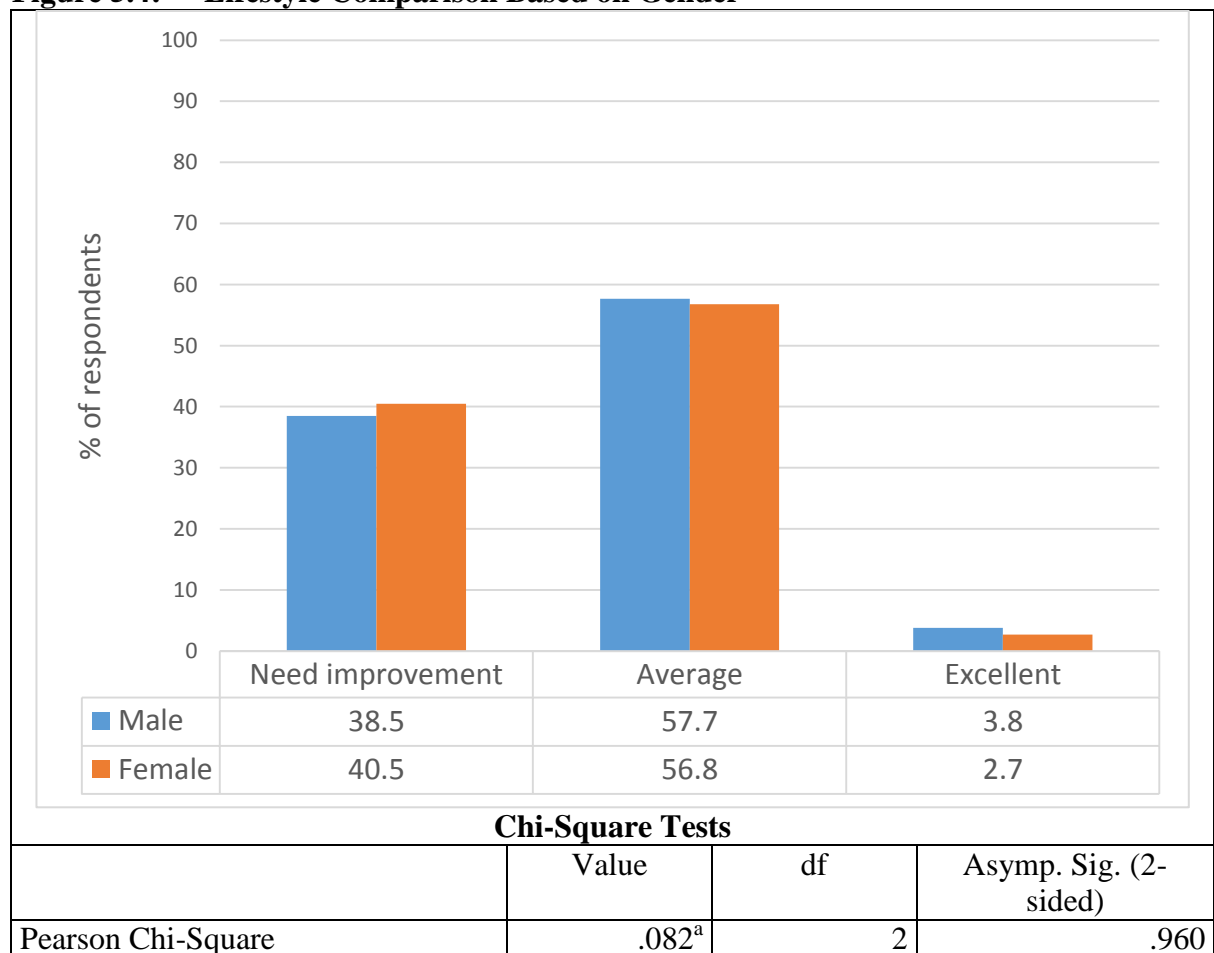
This section examines and presents findings about whether there are differences in livelihood lifestyles between the urban and rural elderly people. The Chi-Square for Independence is the test statistics employed to test if any differences exist. The Chi-square test works on the assumption that rural and urban elderly livelihood styles are independent of each other, that is their life styles is the same. Figure 5.3 illustrates the results of the findings.

Figure 5.3: Comparison of Urban and Rural Lifestyles



As can be observed from the Chi-Square Tests statistics results (Figure 5.3), livelihood life style of the elderly depends on location, that is either rural or urban: $X^2(2)=11.525$, $p=0.003$. Since $p<0.05$, results suggest that there is a significant difference in lifestyles between the two groups, since there is less than 5% evidence that the differences could be due to chance. The bar graph shows that the majority of the rural elderly people, 59.4% need improvement compared to only 19.4% of their counterparts living in urban areas. The majority of the urban elderly population, 74.2% indicated having an average livelihood lifestyle compared to only 40.6% of those in rural areas. None of the elderly living in rural areas had excellent livelihood lifestyles compared to 6.5% of the urban dwellers with such life styles.

Figure 5.4: Lifestyle Comparison Based on Gender



As can be observed from the Chi-Square Tests statistics results in Figure 5.4, livelihood life style of the elderly is independent of gender: $X^2(2)=0.082$, $p=0.960$. Since $p>0.05$, results suggest that there is insignificant difference in lifestyles between the two groups, as there is more than 5% evidence that the results could be attributed to chance. The implications of the

findings suggest that livelihood lifestyles of elders living in urban and rural areas is not different.

5.5 The Challenges Faced by the Elderly in Marondera Urban and Chivhu Rural

The study showed that the elderly, in both Marondera Urban and Chivhu Rural experience multiple deprivations, largely because of poverty. The poverty pool has appreciated an increase in its bulk as a great many have lost their jobs. Many companies both in the public sector and private sector were forced to downsize and opt for retrenchment of workers with some companies liquidating. Using logical reasoning, if well embodied adults are suffering this much in Zimbabwe, what more are the elderly persons?

The elderly persons lack access to adequate food, clothing, shelter, suffer psychological distress, have poor housing, and sanitation with limited access to health care services. One of the interviewees had this to say: *“The elderly persons lack the basic necessities like food, shelter, clothing, and health. It is very difficult to sustain their livelihoods.”* Most of the participants argued that, like any other developing country, Zimbabwe is not well prepared for a major increase in its aging population. For example, contributory pension schemes cover very few people due to the informality of most livelihood activities and unemployment. The vulnerability index of the elderly persons is very high as they are highly exposed to a myriad of challenge and have low adaptive capacity. The elderly persons are much more vulnerable and at risk because they do not have the material and personal resources to cope with the problems that they encounter on a daily basis.

The elderly persons also have psychological challenges. Some are seen as a burden by their children, and are neglected. Another participant argued: *“Some of the elderly persons are labelled as witches/wizards”. Wrongly accused of practising witchcraft by the younger generations”*. This had a significant negative effect on their mental capacity and gradually become psychologically traumatised by the experience.

The elderly persons said that they face many challenges, which include lack of access to adequate and nutritious food, clothing, and shelter. One of the participants said:

“Things are difficult for everyone and it is worse for us the elderly persons. Sometimes the ‘good Samaritans’ do not have adequate resources to support us. We no longer have the energy to look after ourselves. The situation is made worse

by the fact that we lost our children, largely due to the HIV/AIDS pandemic. More so, our savings were eroded by inflation.”

Most elderly people are taking care of orphans who lost their parents to one cause or the other, what is more disturbing is that these elderly have no means of surviving, some are not covered by the social security and protection schemes, even those that are covered their pension is close to nothing making it difficult to sustain their lives. It is noted with concern that, due to the weakening of the social fabric, older persons are no longer recognised as important and equal members in society.

In light of the preceding findings of this study, the living conditions of the elderly persons are very poor. The situation was made worse by the lack of sufficient social support programmes, largely driven by poverty and worsening economic conditions. Almost all the key informant interviewees and the traditional leaders said that the family members not able to give the required assistance because of economic hardships. In one of the focus group discussions with the elderly persons, one of the participants said: *“Some of our children are living in the houses that we built, but they are not sending us money for upkeep. We may not blame them because things are also very difficult for them.”*

One of the Councillors interviewed said that there is abuse and lack of sufficient social support for the elderly persons emerged as a critical issue influencing their quality of life. Access to health services was also another challenge. Observations of the infrastructure and amenities were made during the visits to conduct interviews and focus group discussions. The observations showed that most of the roads were dusty and poor. Only the main road is tarred and well maintained. In most of the communities, the social service centers are very far. Some locations are blessed to have nearby clinics, but these are very few, and often poorly equipped and staffed. Most of the people travel long distances to access the essential services. Usually, the minimum average distances are 5 km. Accordingly, while Zimbabwe has already guaranteed free health care for those aged 65 years and above, but most elderly Zimbabweans are still disadvantaged (Harare News, 2016). However, this has not been the case, leading to the shortage of basic necessities (HelpAge Zimbabwe, 2017). The governments through social services are mandated to provide monthly grants to the elderly. According to Help Age Zimbabwe (2017) the state of elderly in the Zimbabwe is very bad, older people feel neglected by their families, community and the government.

5.6 Alternatives Ensuring Older Persons in Marondera Urban and Chivhu Rural Attain Desired Livelihood Outcomes

The participants proposed a number of options for ensuring that the livelihoods of the elderly are sustainable. A number of policy proposals were prescribed by the interviewees, and the elderly persons. One of the main issues of concern was the need for mechanisms for enhancing the success of policy implementation. Equally essential is the need to take note of the context in which policies are implemented. Understanding the nature of policy implementation is important because international experience shows that policies, once adopted, are not always implemented as envisioned and do not necessarily achieve intended results.

Increasing of the allocations to the social safety nets was also proposed as an option. There is need for the government to create a levy meant for the elderly and to have a specific budget allocation for the care of the elderly. This will go a long way in improving the lives of the elderly. There is also a need to guard against the ‘roadside’ elites, who hijack and abuse social safety nets. One of the interviewees had this to say: *“There ought to be interaction between the multiple stakeholders, with the Department of Social Welfare playing a central coordinating role. Government alone cannot adequately address the plight of elderly persons.”*

One of the key informants highlighted that Zimbabweans ought to be guided by the concept of ‘Ubuntu’, that is, valuing humanity. Ubuntu can be described as the capacity in an African culture to express compassion, reciprocity, dignity, humanity, and mutuality in the interests of building and maintaining communities with justice and mutual caring. One of the Councillors interviewed argued that *“Ubuntu expresses our interconnectedness, our common humanity and the responsibility to each other that deeply flows from our deeply felt connection.”* Ubuntu makes a fundamental contribution to indigenous ‘ways of knowing and being’ because it is ‘based on the primary values of intense humanness, caring, sharing, respect, compassion and associated values, ensuring a happy and qualitative human community in the spirit of the family. Upholding of the core values of Ubuntu entails that those who are responsible for implementing social safety nets and livelihood projects must be honest. Equally essential is for every stakeholder to work hard so that equitable development can be realised. Respecting the rights of everyone, including the vulnerable groups, and being fair, are the other fundamental pillars of Ubuntu. Through upholding the values of Ubuntu,

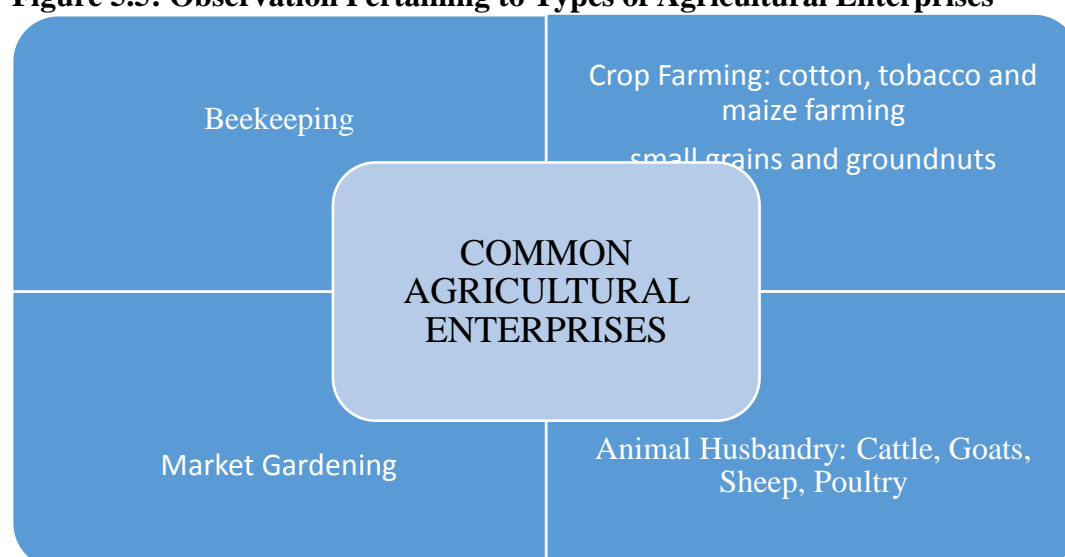
especially hard work, the rural communities' adaptive capacity to respond to shocks is enhanced, and they will also be in a better position to assist the elderly persons.

Observations showed that there were abundant livelihood assets that would ensure implementation of projects. These natural resources included agricultural land, water bodies, and forests. One of the interviewees said:

“There are forests that could be used for beekeeping. There are dams and rivers for irrigation projects. There is a lot of underground water, which can be explored for gardening projects, which will in-turn be used to support the elderly persons. It is also essential to plant trees and maintain agro-biodiversity. The forests can then be exploited for the benefit of the elderly persons.”

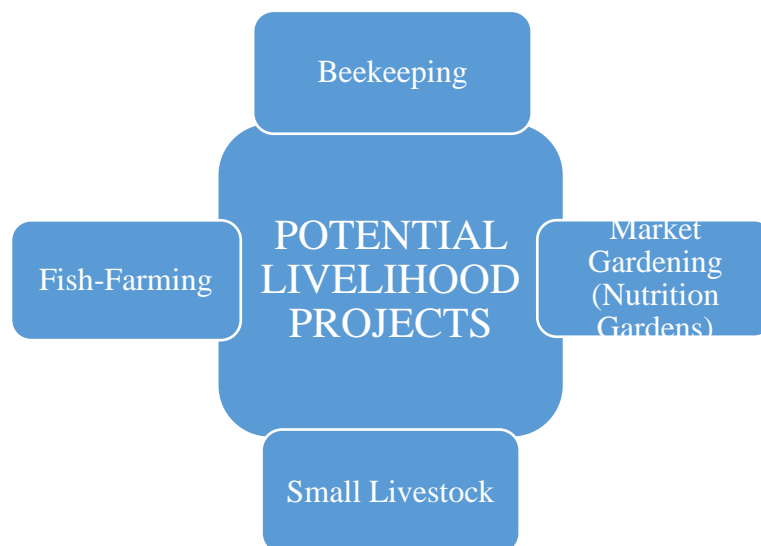
Moreover, people can be the most valued resources of any community. If people work together and assist one another, there is social capital. According to one of the key informants, the community members always assist one another. However, economic challenges were eroding the capacity of the community to assist the vulnerable groups, especially the elderly persons. In addition, a variety of types of livestock. These include cattle, goats, sheep, donkeys, poultry, and rabbits. The projects that the elderly persons can be assisted to implement could be in the area of agriculture, that is, crop and animal husbandry, beekeeping, and fish farming. Livelihoods projects ought to be familiar with what is being practiced in the area. Innovations or new ideas can, however, be introduced. There were observations of the common types of agricultural enterprises, and these are summarised in Figure 5.5.

Figure 5.5: Observation Pertaining to Types of Agricultural Enterprises



According to Figure 5.5, the common types of agricultural enterprises are cotton, tobacco and maize farming. There are also small grains and groundnuts. In some locations with underground water or dams, there is market gardening. Beekeeping is also practiced. These agricultural projects can provide an idea of the possible livelihood projects. Most of the key informants said that the projects that the elderly persons could be assisted (financed) to establish include beekeeping, small livestock (goats, sheep, rabbits, and poultry), and fish farming. One of the interviewees said: *“Projects in agriculture that do not require much physical strength, for example, beekeeping, small-livestock, and fish farming, are recommended. Currently, there are few livelihood projects.”* Figure 5.6 shows the potential livelihood projects that can be implemented.

Figure 5.6: Potential Livelihood Projects



According to Figure 5.6, one of the possible projects is beekeeping projects. Beekeeping is a positive programme that can help in enhancing biodiversity conservation in a way increasing the environmental value while providing alternative secondary livelihood sources to family farmers and ultimately contributing to protecting our planet earth. Beekeeping could also be a drought mitigation strategy. Due to climate change induced droughts, there is failure of other farming activities and beekeeping can be the only thriving economic activity in a community. Even during droughts, bees may be able to forage in the wild vegetation and make enough honey and beeswax. Fish farming is another option that the elderly persons could explore. There are some water bodies in Mashonaland East Province, some of which are used for

irrigation purposes, and it would be advisable if they were to make multiple uses of the water. It is also paramount to embark on value addition and beneficiation of the local products. The projects require sound implementation so that they are successful. There is also a need for the involvement of multiple stakeholders. Table 5.8 shows the implementation matrix.

Table 5.8: Implementation Matrix for Livelihood Projects

INPUTS		
Requirements	Potential Source of Financing	Possible Financing Arrangement
Land, Infrastructure, and Equipment	Development partners, NGOs, Private Sector, and Government, Local Community	The Development Partners, Private Sector, NGOs, and Government can provide grants for the development of the required infrastructure. The Local community members can also assist through providing labour
Knowledge and Information	Technical Partners (NGOs, and Ministry of Agriculture), Financial Institutions	Capacity building activities are provided for free
Seed Stock, Stock Feed, seed, fertilizers, crop protection chemicals, vaccines, working capital etc.	Private Sector (Value Chain Players), Financial Institutions	Donations, Contract Farming Arrangements, and Proceeds from Project Outputs, and Direct Sales.
PROJECT PROCESSES		
Activity	Responsible Stakeholders	Expected Results
Selection of participating members from the elderly persons	Traditional Leaders, Government Entities, NGOs (multiple actors)	The elderly persons to participate in the projects are identified
Capacity Building	Technical Partners (NGOs, and Ministry of Agriculture), Financial Institutions	Knowledge about the livelihood projects, as well as financial literacy.
Crop and Animal Husbandry Activities, Other Income Generating Projects, Value Addition and Beneficiation	Elderly Persons, Traditional Leaders, Technical Partners	Effective and efficient implementation of projects
OUTPUTS		
Specific Produce/Output	Target Market/Usage	Implication on Livelihoods of the Elderly Persons

Meat and Hides, Fresh Fruits and Vegetables, Fish, Honey and Honey Products, Other Products	Abattoirs, Food Processing Companies, Local Community Vegetable Markets, Supermarkets, Export	Income, ability to meet some of the basic needs, reduced vulnerability, Access to additional inputs
Organic Fertilizers	Local Community, Usage in the projects	

The livelihood projects need to be actively implemented, which entails the need for sound planning, stakeholder management, use of project management techniques, and monitoring and evaluation. Finally, multi-stakeholder collaborations are critical for ensuring that there is sound project implementation, and realisation of the livelihoods outcomes. The various programme and projects designed to assist the elderly persons in meeting their desired livelihood outcomes ought to be effectively planned and implemented. The common lingo in the project planning and management literature is that, ‘failing to plan is planning to fail’. Therefore, astute project planning and management is a ‘sine qua non’ (very important or critical aspect) to the successful achievement of policy and project objectives. Planning entails being aware of the project stakeholders, and how to manage them.

5.7 Chapter Summary

This study presented the findings of the study, which were presented in line with the research objectives. It was pointed out that the elderly persons in urban areas were better off in terms of their lifestyles as compared to those in the rural areas. The elderly persons in the urban areas were more nutritious conscious, and more positive in terms of health behaviour. The findings indicated that the elderly in the urban areas had positive personalities than those who reside in rural areas. The majority (74.2%) of the elderly persons in the urban areas have an average livelihood lifestyle compared to only 40.6% of those in the rural areas. The elderly, in both the urban and rural area face a myriad of challenges, including lack of access to adequate food, shelter, and clothing. The possible options for ensuring that the elderly persons realise their desired livelihoods outcomes include increasing budgetary support for the social safety nets, creating a positive attitude and humanity (Ubuntu) among the Zimbabweans, and sound implementation of policies relating to the social safety nets. The study showed that there was a need to ensure that the elderly persons are assisted to implement livelihood projects, which include beekeeping, fish farming, market gardening, and keeping of small livestock. The next chapter winds up the study and presents discussion of findings, conclusions, and recommendations.

CHAPTER V

DISCUSSION OF FINDINGS AND CONCLUSIONS

6.1 Introduction

This chapter winds up the study and presents the discussion of findings, conclusions (overall summary of the study, which include the reasons for conducting this research, the research objectives, literature reviewed, methodology, and the major findings). The recommendations and suggestions for further study are also part of this chapter.

6.2 Discussion of Findings

This section presents the discussion of the findings, which are in line with the research objectives. The discussion also align with the findings presented in Chapter Five.

6.2.1 Discussion on Livelihoods of Elderly in Marondera Urban and Chivhu Rural

This study showed that the elderly in urban areas have better lifestyles as compared to those in the rural areas. However, most of the elderly persons, both in the urban and rural areas, were finding it difficult to sustain their livelihoods. The elderly largely relied on external support and were not self-reliant. These findings agree with literature and Mutetwa and Muchara (2013) argue that there were social protection programmes that seek to reduce the vulnerability of poor and people at risk in a society (Mutetwa and Muchacha, 2013). Zimbabwe has a range of social protection programmes, many that were instituted before the macro-economic crisis. Khatiwada et al. (2017) loosely define social protection as protection that a society provides for its vulnerable members and include the mechanisms to protect citizens against livelihood risks while promoting livelihoods and capabilities of the vulnerable and enhancing the social status and rights of the marginalised. Social protection mechanisms can be categorised into three groups: social insurance, labour market regulation and social assistance. Under the auspices of the Ministry of Labour and Social Services, the government of Zimbabwe employs the social assistance approach, providing support to deprived citizens (UNDP. 2017).

6.2.2 Comparative Analysis of Livelihoods in Marondera Urban and Chivhu Rural

This research showed that majority of the urban elderly population, 74.2% indicated having an average livelihood lifestyle compared to only 40.6% of those in rural areas. None of the

elderly living in rural areas had excellent livelihood lifestyles compared to 6.5% of the urban dwellers with such lifestyles. Most of the elderly in the urban areas resides in their houses and tend to have a steady (though low) income supply from their tenants. Most of the elderly persons without houses in the urban areas had to ‘retire’ to their rural areas, and largely rely on external support. The support schemes include elderly and disability grants, provision of health assistance, pauper burials, grain loan schemes, free food distribution, and drought relief. The schemes target deprived and destitute households and citizens. However, arising from economic challenges, many Zimbabweans are currently vulnerable and large numbers fit in the ‘destitute’ category, qualifying them for public assistance according to the programme’s broad parameter. The Health assistance scheme provides free medical treatment to citizens unable to afford health services, while the drought relief provides food parcels to deprived households in drought and times of food scarcity (UNDP, 2017).

6.2.3 The Challenges Faced by the Elderly in Marondera Urban and Chivhu Rural

The study showed that the elderly, in both Marondera Urban and Chivhu Rural experience multiple deprivations, largely because of poverty. Literature agrees with this study, and, in Zimbabwe the economic indicators for the elderly show that households headed by older persons are among the poorest (AFDB, 2011). The elderly persons are much more vulnerable and at risk because they do not have the material and personal resources to cope with the problems that they encounter on a daily basis. These findings are in line with literature and, according to the Sustainable Livelihoods Framework (SLF), communities are operating in a vulnerability context (Diriwari, 2016). The vulnerability context frames the external environment in which people exist. Critical trends as well as shocks and seasonality, over which people have limited or no control, have a great influence on people’s livelihoods and on the wider availability of assets. Moreover, the elderly persons, just like other human beings, are affected by natural disasters like droughts, and the outbreak of diseases like the Covid 19 pandemic.

The situation was made worse by the lack of sufficient social support programmes, largely driven by poverty and worsening economic conditions. Literature corroborates these findings and UNICEF (2016) argues that the social support network consists of relatives, friends, peers, neighbours and community members. This being the case, the question lays on understanding how families living in these conditions are surviving. The poverty pool has appreciated an increase in its bulk as a great many have lost their jobs. Many companies both

in the public sector and private sector were forced to downsize and opt for retrenchment of workers with some companies liquidating. It is evident from the current situation in Zimbabwe that the living conditions as well as the health status of the people have declined due to the economic despair that is confronting the country (UNDP, 2017). According to the Ministry of Health and Child Welfare, in its Zimbabwe National Health Strategy 2009-2013 report, the challenges facing the health sector continue getting worse because of the economic challenges. The economic challenges in Zimbabwe resulted in the decrease in funding for ‘social services’ and ultimately caused the deterioration of the health building blocks, quality of health services and drug shortages (UNICEF, 2016). Peltzer et al. (2019) also argue that the elderly persons are prone to abuse, although abusive behaviour is difficult to measure, existing reports of neglect and abuse of older persons should be reasons for concern.

6.2.4 Alternatives Ensuring Older Persons in Marondera Urban and Chivhu Rural Attain Desired Livelihood Outcomes

The research showed that sound policy implementation was essential if the livelihoods of the elderly are to become sustainable. Yet, there is usually an implementation gap, and the classic works of Pressman and Wildavsky (1973), in the publication; ‘*Policy Implementation: How High Hopes in Washington are Dashed in Auckland and Texas*’, showed that policies are modified during the implementation stage and the intended objectives may not be attained. In addition, various factors influence policy implementation, including the content of the policy, the nature of the policy process, the actors involved in the process, and the context in which the policy is designed and must be implemented. Implementation is an ongoing process of decision making by key actors who work in complex policy and institutional contexts and face pressures from interested as well as opposing parties. As such, the motivation, flow of information, and balance of power and resources among stakeholders’ influences policy implementation processes. Moreover, the manner in which a policy is implemented is not linear and may change over time for a variety of reasons, some of which are only controlled by policymakers.

There is need for vibrant policy implementation so that the assets in the communities would benefits the elderly. Every community have assets (livelihood assets) and sustainable projects ought to be anchored on these assets. This argument was adopted from the SLF, and Serrat (2017) points out that the livelihoods approach is concerned primarily with people, it seeks to gain an accurate and realistic understanding of people’s strengths (here called ‘assets’ or

‘capitals’). It is crucial to analyse how people endeavour to convert these strengths into positive livelihood outcomes.

Upholding of the core values of Ubuntu is essential and it entails that those who are responsible for implementing social safety nets and livelihood projects must be honest. Equally essential is for every stakeholder to work hard so that equitable development can be realised. Respecting the rights of everyone, including the vulnerable groups, and being fair, are the other fundamental pillars of Ubuntu. Through upholding the values of Ubuntu, especially hard work, the rural communities’ adaptive capacity to respond to shocks is enhanced, and they will also be in a better position to assist the elderly persons.

Finally, multi-stakeholder collaborations are critical for ensuring that there is sound project implementation, and realisation of the livelihoods outcomes. The various programme and projects designed to assist the elderly persons in meeting their desired livelihood outcomes ought to be effectively planned and implemented. The common lingo in the project planning and management literature is that, ‘failing to plan is planning to fail’. Therefore, astute project planning and management is a ‘sine qua non’ (very important or critical aspect) to the successful achievement of policy and project objectives. Planning entails being aware of the project stakeholders, and how to manage them.

6.3 Conclusions

This study sought to examine the livelihood strategies and challenges faced by the elderly shall be examined with a particular focus on Marondera urban and Chivhu rural areas in Mashonaland East Province. The research was motivated by the fact that most of the elderly members of the Zimbabwean society were failing to meet the basic needs. The economic challenges bedevilling Zimbabwe made it difficult for the elderly people in both the urban and rural areas to realise their desired livelihood outcomes. There were four specific research objective in this study, the first one being to establish the meaning of sustainable livelihoods according to the perceptions of the elderly in Marondera urban and Chivhu rural areas. The second research objective was to compare the livelihood strategies employed by the elderly in Marondera urban and Chivhu rural areas. Attention was also on assessing the challenges faced by the elderly in Marondera urban and Chivhu rural when securing their livelihoods. The fourth research objective was to propose alternatives for ensuring that older persons in Marondera urban and Chivhu rural areas attain the desired livelihood outcomes.

Review of literature showed that the global population of the elderly is increasing and is characterised by various social and economic challenges. The elderly persons engage in various unsustainable livelihood strategies to sustain their lives and those of their dependents. It was pointed out that multiple stakeholders, including the central governments, NGOs, the private sector, and the economically active citizens have a collective responsibility to protect the rights of elderly people. Government should provide financial support to families caring for the elderly as part of social protection measures. Non-contributory or universal pensions should be availed to those over the age of 65 years. Therefore, one may be inclined to comment that later life is celebrated in Africa and in Zimbabwe in particular because it is seen as a blessing from God. Older people are generally treated with dignity. But with modernisation, Zimbabwean senior citizens suffer diverse challenges and experience difficulty in meeting their basic needs. Hence, the need for sustainable livelihoods that will address life deprivations and improve the quality of life of the Zimbabwean elders. This study examines the livelihoods of the elderly in Zimbabwe, their sustainability and its impact on quality of life of elderly in Zimbabwe. It argues that beyond the conventional survival mechanisms, the elderly in Zimbabwe require resilient and sustainable livelihoods in order to enhance their quality of life. The SLF provides that the vulnerable members of the society (in this study the elderly) to be operating in a context of vulnerability, yet there are livelihood assets (human, natural, financial, physical, and social), which could be exploited (through transforming institutions and structures) to ensure that the desired livelihood outcomes are realised. The rights-based approach provides that it essential that all human being enjoy the basic rights as enshrined in the Universal Declaration of Human Rights. Finally, the FANTASTIC Life Inventory (FLI) is a tool that seeks to provide an objective assessment of the livelihoods of a particular group of people.

The study used mixed methods because of the need for both objectivity and detailed analysis. Given that communities are diverse in terms of assets, ‘blue-print’ or ‘straight jacket’ approaches, which have roots in quantitative research, are not suitable in this research. The FANTASTIC model was used to provide ‘an objective assessment’ of the livelihoods situation of the elderly in urban and rural settings. This study was a comparative case study and it sought to establish the livelihood situation of the elderly in Marondera Urban and Chivhu Rural. Conducting a case study made it possible for a detailed comparative analysis to be made. The population for this study comprised the all the elderly persons 60 years and above in Marondera urban and Chivhu rural areas. There are other stakeholders who deal

with the elderly persons in Zimbabwe, and were also part of the population. They included the Department of Social Welfare (DSW), Councillors, and NGOs (HelpAge Zimbabwe).

There was use of quota, purposive, and convenience sampling techniques in this research. The study used quota sampling technique to ensure that there is representation from all the categories of stakeholders. Purposive sampling was in use to ensure that data is collected from knowledgeable participants. The elderly persons in Marondera and Chivhu were selected using convenience sampling. This study used questionnaires, interviews, focus group discussions (FGDs), and observation as research instruments. Quantitative data was captured using the Statistical Package for Social Sciences (SPSS). Descriptive statistics, mean, standard deviation and cross tabulations were employed to examine the livelihood lifestyles of the urban and rural elderly people. In addition, Chi-Square for independence was the inferential statistics employed to test for independence in livelihood lifestyles between the rural and urban elders. Qualitative data was analysed using thematic analysis.

This study found out that the livelihoods of the majority of the elderly members of society were not sustainable because they largely relied in external support. The elderly persons experience multiple deprivations, including inadequate food, clothing, shelter, and access to health services. The vulnerability index of the elderly persons is very high as they are highly exposed to a myriad of challenge and have low adaptive capacity. Moreover, the elderly persons, just like other human beings, are affected by natural disasters like droughts, and the outbreak of diseases like the Covid 19 pandemic. More so, the research found out that the elderly persons in urban areas were better off in terms of their lifestyles as compared to those in the rural areas. The elderly persons in the urban areas were more nutritious conscious, and more positive in terms of health behaviour. The elderly in the urban areas had positive personalities than those who reside in rural areas. The elderly, in both the urban and rural area face a myriad of challenges, including lack of access to adequate food, shelter, and clothing. The possible options for ensuring that the older persons (in Marondera Urban and Chivhu Rural) realise their desired livelihoods outcomes included increasing national budgetary support to the social safety nets. The government could create a levy meant for the elderly and to have a specific budget allocation for the care of the elderly. More so, Zimbabweans ought to be guided by the concept of 'Ubuntu', that is, valuing humanity. Some livelihood projects, which the elderly persons could be assisted (financed) to establish include beekeeping, small livestock (goats, sheep, rabbits, and poultry), and fish farming.

6.4 Recommendations

In light of the findings of this study, the following recommendations were made:

- a. It is necessary to ensure that the basic needs, most of which are basic rights are enjoyed by the elderly persons. Accordingly, the central government, which has the constitutional obligation of ensuring that every Zimbabwean enjoys his/her rights, must put in place measures that guarantee access to food, shelter, and health services.
- b. This study also pointed out that most of the elderly persons suffer from psychological distress. It is important that counselling services be conducted. Various organisations, including the schools, NGOs, and religious groups, can provide the counselling services.
- c. In Zimbabwe, a myriad of options is available to ensure that the elderly persons attain the desired livelihood outcomes. However, despite their multiplicity, these options seem to be inadequate. The central government should increase the national budgetary allocations to the social safety nets that are directed towards the elderly persons. The missing link could be the manner in which the programmes are implemented. Therefore, sound implementation of support programmes is necessary. Equally important is the need to ensure that the central government, local institutions, and traditional leaders institute measures for preventing the abuse of support programmes (there is need for a strong ethics infrastructure).
- d. This research pointed out that there is a very high level of dependence on external support by the elderly persons. Accordingly, the implementation of livelihood projects by the elderly, while being supported by the community, is necessary. Some degree of independence and self-reliance will enhance resilience and reduce vulnerability.
- e. Mashonaland East Province is largely an agro-based region. Accordingly, it makes sense that most of the livelihood projects be in the agricultural sector. Projects that do not require much stamina and time like beekeeping, fish-farming, goat rearing, piggery, rabbit rearing, and poultry can be implemented. Partnerships with various stakeholders, including the Ministry of Lands, Agriculture, Water, Climate and Rural Resettlement are essential. In particular, the Agricultural and Technical Extension Officers (who are readily available in the communities) would be useful conduits for

ensuring effective implement the livelihood projects. The development partners, NGOs, and private sector also need to be engaged so that they provide financing as well as market for the outputs from the projects.

- f. In order to increase the income levels for the elderly persons who will be embarking on projects, value addition and beneficiation will be essential. For example, those engaged in beekeeping can produce a variety of products like candles (from the wax), wine, and lotions.

6.5 Suggestions for Further Study

This study was an individually financed academic investigation that was restricted to Mashonaland East Province (Marondera Urban and Chivhu Rural), and Data were collected from a sample of participants and there was a limitation of coverage. The reason was that this investigation was done by an individual. Accordingly, a more encompassing study, that is, a survey of a number of Provinces and Districts in Zimbabwe may be necessary. Moreover, the research did not properly examine the implication of the Covid 19 pandemic on the elderly persons as the global pandemic occurred when the study was about to be completed and no primary data on this aspect was collected. Therefore, further research may be necessary, especially pertaining to complexities arising from the Covid 19 pandemic.

References

Books

Creswell, J.W. 2014. *Research Design, Quantitative, Qualitative, and Mixed Methods Approaches, Fourth Edition*, Thousand Oaks, California: Sage.

Pressman, J.L. and Wildavsky, A. (1973). *How Great Expectation in Washington are Dashed in Oakland*, Berkeley: University of California Press.

Saunders, M., Lewis, P., and Thornhill, A. 2015. *Research Methods for Business Students, Seventh Edition*, London: Prentice-Hall.

Taylor, S.J., Bogdan, R., and DeVault, M.L. 2016. *Introduction to Qualitative Research Methods, a Guidebook and Resource*, Hoboken, New Jersey: Wiley.

Journals, Discussion Papers, and Statutes

Broberg, M. and Sano, H. 2018. Strengths and Weaknesses in a Human Rights-Based Approach to International Development: An Analysis of a Rights-Based Approach to Development Assistance Based on Practical Experiences, *The International Journal of Human Rights*, 22(5), 664-680.

Chambers, R. 1995. *Poverty and Livelihoods: Whose Reality Counts?* Brighton; Institute for Development Studies Discussion Paper 347.

Chambers, R. and Gordon, C. 1992. *Sustainable Rural Livelihoods: Practical Concepts for the 21st Century*, Brighton: Institute for Development Studies Discussion Paper 296.

Deluga, A., Kosicka, B., Dobrowolska, B., Chrzan-Rodak., Jurek, K., Wrońska, I., Ksykiewicz-Dorota, A., Jędrych, M., and Drop, B. Lifestyle of the Elderly Living in Rural and Urban Areas Measured by the FANTASTIC Life Inventory, *Annals of Agricultural and Environmental Medicine*, 25(3), 562-567.

Dhemba, J. 2013. Social Protection for the Elderly in Zimbabwe: Issues, Challenges, and Prospects, *African Journal of Social Work*, 3(1), 1-22.

Food and Agricultural Organisation of the United Nations (FAO). 2013. *Impacts of the Harmonised Social Cash Transfer on Community Dynamics in Zimbabwe, From Protection to Production*, Harare: FAO.

Government of Zimbabwe 2013. *Constitution of Zimbabwe Amendment Number 20*, Harare: Fidelity Printers.

HelpAge International Tanzania. 2010. *The Rationale and Feasibility for a Universal Pension in Tanzania*, Dar es Salaam: HelpAge International Tanzania.

Khatriwada, S.P., Deng, W., Paudel, B., Khatriwada, J.R., Zhang, J., and Yi Su. 2017. Household Livelihood Strategies and Implication for Poverty Reduction in Rural Areas of Central Nepal, *Sustainability*, 9(612), 1-20.

Muruviwa, A.T., Nekhwevha, F.H., and Ige, K.D. 2013. Critical Challenges to the Livelihood Options of the Elderly persons in Rural Zimbabwe: Evidence from Mubaira, *Journal of Social Sciences*, 36(1), 87-97.

Mutetwa, E. and Muchacha, M. 2013. Towards a National Social Protection Policy: Knowledge and Lessons from Comparative Analysis of the Design and Implementation of Public Assistance and Harmonised Social Cash Transfer in Zimbabwe, *IOSR Journal of Humanities and Social Science*, 11(3), 18-24.

Najjumba-Mulindwa, I. 2013. *Chronic Poverty Among the Elderly in Uganda: Perceptions, Experiences and Policy Issues*, Kampala: Makerere University, Institute of Statistics and Applied Economics.

Oyowe, O.A. 2014. An African Conception of Human Rights? Comments on the Challenges of Relativism, *Human Rights Review*, 329, 47-60.

Peltzer, K., Phaswana-Mafuya, N., and Pengpid, S. 2019. *Rural-Urban Health Disparities among Older Adults in South Africa*, Expert Group Meeting: Measuring Population Ageing, Bangkok, 25-26 February 2019.

Serrat, O. 2017. The Sustainable Livelihoods Approach, *Knowledge Solutions*, 9(5), 21-26.

Sidloyia, S.S. and Bomelab, N.J. 2016. Survival Strategies of Elderly Women in Ngangelizwe Township, Mthatha, South Africa, *Livelihoods, Social Networks and Income*, 62, 43-52.

Simon, M.K. 2011. *Dissertation and Scholarly Research: Recipes for Success*, Washington D.C.: Seattle.

Tolander, L. 2013. *A Human Rights-Based Approach to Development: from Policy to Practice: A Comparative Study between Action Aid and SIDA*, Lund University: Department of Political Science Spring.

Umukoro, N. 2013. Poverty and Social Protection in Nigeria, *Journal of Developing Societies*, 305, 322-340.

UNDP. 2017. *Strengthening Livelihoods in Environmental Action: Sustainable Livelihoods Approach: A Contribution to Agenda 2030*. Discussion Paper. Panama City.

UNICEF. 2016. *Zimbabwe Humanitarian Situation Report*, New York; UNICEF.

Valdés-Rodríguez, O.A. and Pérez-Vázquez, O. 2011. Sustainable Livelihoods: An Analysis of the Methodology, *Tropical and Subtropical Agro-Ecosystems*, 14 (2011), 91-99.

Wilson, D.M.C., Nielsen, G., and Ciliska D. 1984. Lifestyle Assessment: Development and Use of the FANTASTIC Checklist, *Canadian Family Physician*, 30, 1527-1532.

Internet Source

Green, D. 2014. What are the Strengths and Weaknesses of a Human Rights Approach to Development? www.oxfamblogs.org/fp2p/what-are-the-limitations-to-a-human-rights-based-approach-to-development [Accessed 21 March 2019].

APPENDIX I:

QUESTIONNAIRE FOR THE ELDERLY

My name is Tinashe Makumbe, a student studying towards the attainment of the Master of Science in Sociology and Social Anthropology Degree at the University of Zimbabwe. As a partial fulfilment of the requirements of the degree programme, I am conducting a study titled: 'Livelihoods of the elderly: A comparative analysis of rural and urban areas with particular focus on Marondera Urban and Chivhu Rural. There are three specific research objectives in this study, which are to:

- Establish the meaning of sustainable livelihoods according to the perceptions of the elderly in Marondera urban and Chivhu rural areas.
- Compare the livelihood strategies employed by the elderly in Marondera urban and Chivhu rural areas;
- Assess the challenges faced by the elderly in Marondera urban and Chivhu rural when securing their livelihoods; and
- Propose alternatives for ensuring that older persons in Marondera urban and Chivhu rural areas attain the desired livelihood outcomes.

To attain the stated objectives, I am kindly requesting your input in terms of providing me with answers to the questions that I have. This study is a purely academic exercise and all the data that you shall provide shall be treated as confidential. Your participation in this research is voluntary, and you are free to withdraw any time should you feel uncomfortable. However, it is important if you are able to partake and finish answering my questions as they could help in ensuring that the elderly persons are able to realise their desired livelihood outcomes. I would like to ask you 25 questions pertaining to your lifestyle, zero is the lowest score while two is the highest score.

Aspects of Lifestyle

Score

- | | |
|----------------------|---|
| 1. Family | I am able to communicate with others in an open, honest, and clear manner |
| 2. and | I give and receive affection |
| 3. Friends | I get the emotional support that I need |
| 4. Physical Activity | Active exercise, about 30 minutes, twice a week (running, cycling, fast walk) |
| 5. | Relaxation and enjoyment of leisure time |
| 6. Nutrition | Balanced meals |
| 7. | Breakfast every day |
| 8. | I do not consume excess sugar, salt, animal fats, or junk foods |
| 9. | I have ideal weight |
| 10. Tobacco | I have never smoked tobacco in the past year |
| 11. Alcohol | I do not abuse of drugs, prescribed and non-prescribed |
| 12. and Other | I do not consume excessive coffee, tea, or fizzy drinks |
| 13. Drugs | I do not exceed the recommended intake of alcohol/drugs/fizzy drinks |
| 14. | I do not like driving when one has consumed alcohol or drugs (medicals) |
| 15. Sleep or | I am able to sleep between 7 and 9 hours per night |
| 16. Stress | I never experienced any major stressful event in the past year |
| 17. Type of | I always use a seat belt when in vehicle |
| 18. Personality | I am a patient person |
| 19. | I rarely exhibit aggressive behaviour |
| 20. | I rarely have feelings of anger and hostility |
| 21. | I rarely have anxiety and worry |
| 22. | I have never suffer from depression |
| 23. Insight | I am a positive thinker |
| 24. | I am satisfied in the role that I have in my family or community |
| 25. | I always want to have good relations with those around me |

Total Score

Assessment of Total Score

- 0-19: Needs Improvement;
- 20-29: Average;
- 30-34: Good;
- 35-41: Very Good; and
- 42-50: Excellent.

Thank you for your time and effort

APPENDIX II

KEY INFORMANT INTERVIEW GUIDE

My name is Tinashe Makumbe, at student studying towards the attainment of the Master of Science in Sociology and Social Anthropology Degree at the University of Zimbabwe. As a partial fulfilment of the requirements of the degree programme, I am conducting a study titled: ‘Livelihoods of the elderly: A comparative analysis of rural and urban areas with particular focus on Marondera Urban and Chivhu Rural. There are three specific research objectives in this study, which are to:

- Establish the meaning of sustainable livelihoods according to the perceptions of the elderly in Marondera urban and Chivhu rural areas.
- Compare the livelihood strategies employed by the elderly in Marondera urban and Chivhu rural areas;
- Assess the challenges faced by the elderly in Marondera urban and Chivhu rural when securing their livelihoods; and
- Propose alternatives for ensuring that older persons in Marondera urban and Chivhu rural areas attain the desired livelihood outcomes.

To attain the stated objectives, I am kindly requesting your input in terms of providing me with answers to the questions that I have. This study is a purely academic exercise and all the data that you shall provide shall be treated as confidential. Your participation in this research is voluntary, and you are free with withdraw any time should you feel uncomfortable. However, it is important if you are able to partake and finish answering my questions as they could help in ensuring that the elderly persons are able to realise their desired livelihood outcomes.

1. In your own view, what is the definition of the elderly persons?
2. What are the livelihood strategies of the elderly persons in Marondera Urban and Chivhu Rural?
3. What is your comment pertaining to the sustainability of the livelihood strategies of the elderly in Marondera Urban and Chivhu Rural?

4. What is the extent to which the livelihoods strategies of the elderly (in Marondera Urban and Chivhu Rural) consider the available livelihood assets?
5. How does the livelihoods strategies of the elderly in Marondera Urban compare with those in Chivhu Rural?
6. What is your comment pertaining to the view that the elderly in Marondera Urban are better-off than those in Chivhu Rural?
7. What challenges are faced by the older persons (in Marondera Urban and Chivhu Rural) in meeting their desired livelihoods outcomes?
8. What do you think are the possible options for ensuring that the older persons (in Marondera Urban and Chivhu Rural) realise their desired livelihoods outcomes?
9. Do you have any other information to share pertaining to the livelihood strategies of the older persons in Marondera Urban and Chivhu Rural?

Thank you for your time and effort

APPENDIX III

FOCUS GROUP DISCUSSION GUIDE

My name is Tinashe Makumbe, a student studying towards the attainment of the Master of Science in Sociology and Social Anthropology Degree at the University of Zimbabwe. As a partial fulfilment of the requirements of the degree programme, I am conducting a study titled: 'Livelihoods of the elderly: A comparative analysis of rural and urban areas with particular focus on Marondera Urban and Chivhu Rural. There are three specific research objectives in this study, which are to:

- Establish the meaning of sustainable livelihoods according to the perceptions of the elderly in Marondera urban and Chivhu rural areas.
- Compare the livelihood strategies employed by the elderly in Marondera urban and Chivhu rural areas;
- Assess the challenges faced by the elderly in Marondera urban and Chivhu rural when securing their livelihoods; and
- Propose alternatives for ensuring that older persons in Marondera urban and Chivhu rural areas attain the desired livelihood outcomes.

To attain the stated objectives, I am kindly requesting your input in terms of providing me with answers to the questions that I have. This study is a purely academic exercise and all the data that you shall provide shall be treated as confidential. Your participation in this research is voluntary, and you are free to withdraw any time should you feel uncomfortable. However, it is important if you are able to partake and finish answering my questions as they could help in ensuring that the elderly persons are able to realise their desired livelihood outcomes.

1. What are the livelihood strategies that you employ, as the elderly persons?
2. What is your comment pertaining to the sustainability of the livelihood strategies that you employ?
3. What is the extent to which your livelihoods strategies consider the available livelihood assets?

4. Can you present an account of the difference in livelihoods between the elderly in Marondera Urban and those in Chivhu Rural?
5. What is your comment pertaining to the view that the elderly in Marondera Urban are better-off than those in Chivhu Rural?
6. What challenges do you face in meeting your desired livelihoods outcomes?
7. What do you think are the possible options for ensuring that you are able to realise your desired livelihoods outcomes?
8. Do you have any other information to share pertaining to the livelihood strategies of the older persons in Marondera Urban and Chivhu Rural?

Thank you for your time and effort

APPENDIX IV

LETTER OF AUTHORITY TO CONDUCT THE RESEARCH