The vulnerability and living conditions of older people in Addis Ababa

September 2010
Addis Ababa, Ethiopia

HelpAge International
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IOM International Organization for Migration

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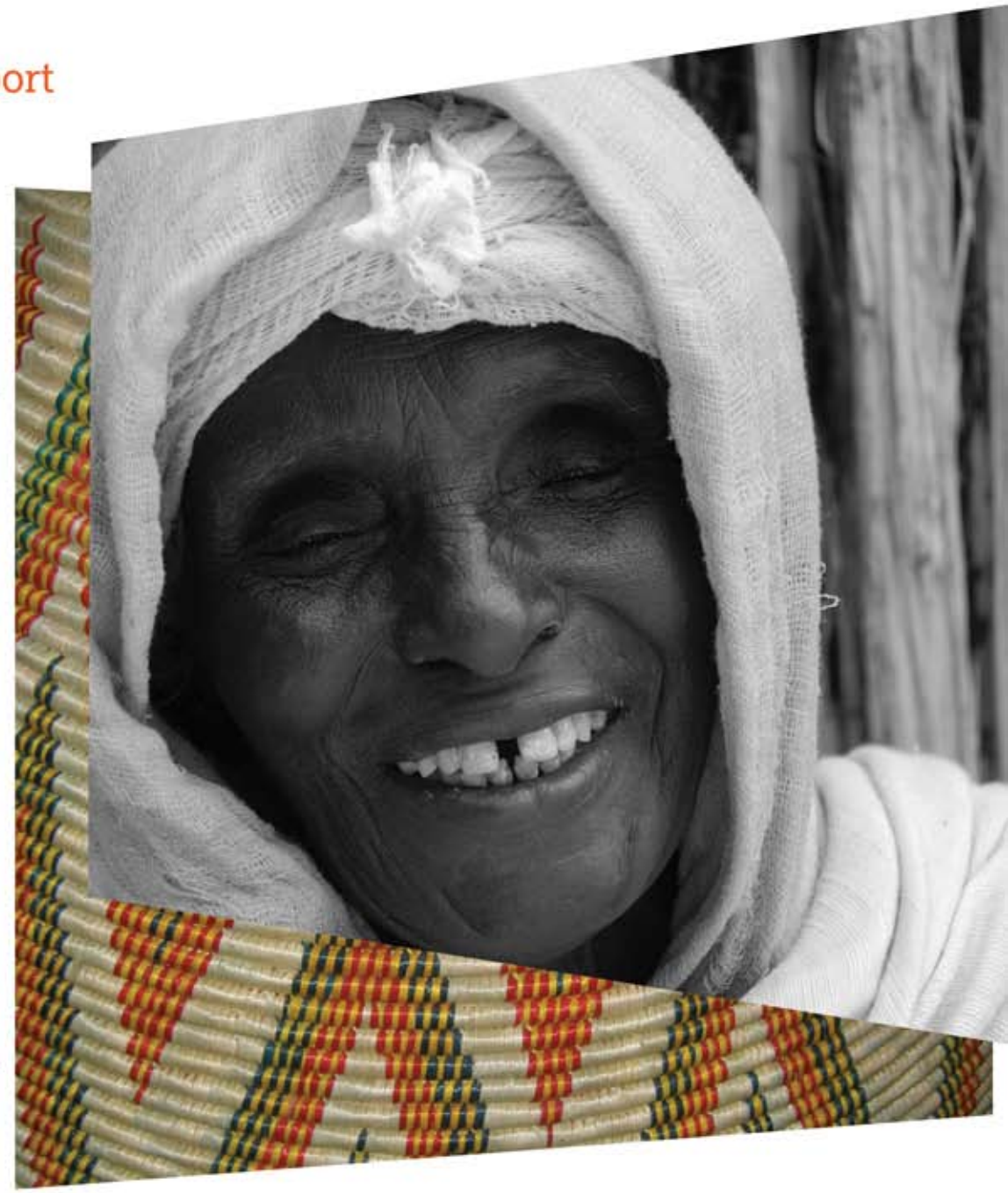
Summary

The vulnerability and living conditions of older people in Addis Ababa

Assessment report (March 2010) Addis Ababa



As a result of factors such as increasing urbanisation, chronic food insecurity, rising prices and the erosion of traditional coping mechanisms and traditional safety nets the lifestyles of poor urban older people are dramatically worsening in Ethiopia. Thus, a city-wide assessment was carried out with the support of HRF[1] and United Nations Office for the Coordination of Humanitarian Affairs, coordinated by IOM[2] and HelpAge International and five local non governmental organisations (see fact boxes) that support older people in the city with the overall aim of:

- providing comprehensive information on the vulnerabilities and coping mechanisms of poor urban older people, and

1 Humanitarian Relief Fund 2 International organisation for migration

- exploring options for linkages to existing service and assistance programmes.

The study is intended as a background and guide to government agencies, donors, international agencies and international and national NGOs[3] in order to better target assistance programmes and projects.
The study methods included:

- a survey of 1,070 older men (51 per cent) and women (49 per cent) in three groups - living at home, homeless and living in an institution,
- focus group discussions with 294 older men and women,
- interviews with key institutional informants including relevant government agencies, international agencies, NGOs and CBOs4, and
- literature reviews.

The study was carried out in collaboration with the Ministry of Labour and Social Affairs and the Addis Ababa Bureau of Labour and Social Affairs, with financial support from the United Nations Office for the Coordination of Humanitarian Affairs. It covered a broad range of issues including food and income security, shelter, water and sanitation, health, HIV and AIDS, training, and family and community care.

Key findings brought forward by the study included:

Food security

- More than 88 per cent of homeless older people and 66 per cent of those living at home do not have enough to eat.
- 79 per cent of all older people surveyed eat only once or twice a day.

Water, hygiene and sanitation

- 79 per cent of homeless older people get water by begging.
- 93 per cent of all older people surveyed have no bath or shower.
- 71 per cent of homeless older people use rivers or drains for washing and 29 per cent do not wash.

Shelter

- 82 per cent of homeless older people sleep around churches and mosques and the rest in the streets.
- 68 per cent of home-based older people live in rented houses.

Health

- 78 per cent of all older people surveyed have a chronic health problem.
- 36 per cent of all older people surveyed do not know about the free government health service for poor people.

HIV and AIDS

- 81 per cent of all older people surveyed have heard about HIV and AIDS but 68 per cent do not think older people can be infected with HIV.

Education and training

- About 87 per cent of all older people surveyed have had no training opportunity and 28 per cent said they would participate in training if they had the opportunity.

Family and community support

- 51 per cent of all older people surveyed receive no family support.
- About half of all older people surveyed take part in household activities such as housekeeping and caring for grandchildren, and nearly a quarter have a role in the community.

The report makes recommendations for improving older people's food and income security, access to healthcare and living environment. It calls for older women to be given special emphasis.

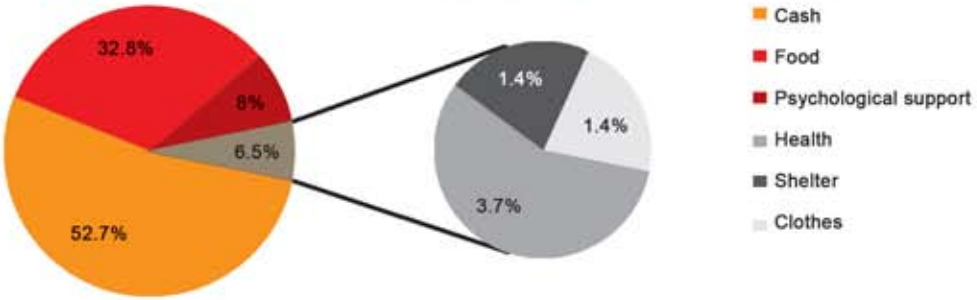
3 Non-governmental organisation 4 Community-based organisation

Priority concerns of older people in Addis Ababa

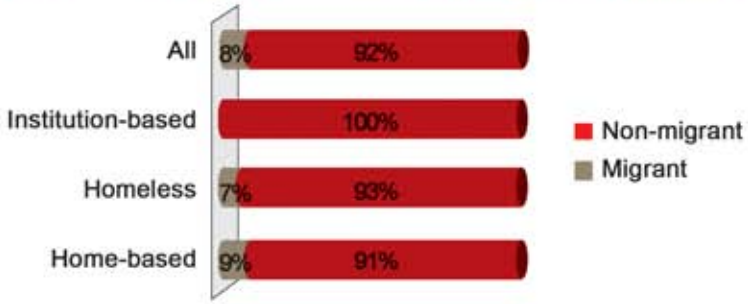
According to the study, the priority concerns for poor older people in Addis Ababa are:

1. food for 57 per cent,
2. shelter for 23 per cent of older people , especially homeless people (45 per cent),
3. health for 15 per cent,
4. clothing for two per cent,
5. psychological support for two per cent and
6. other concerns for one per cent.

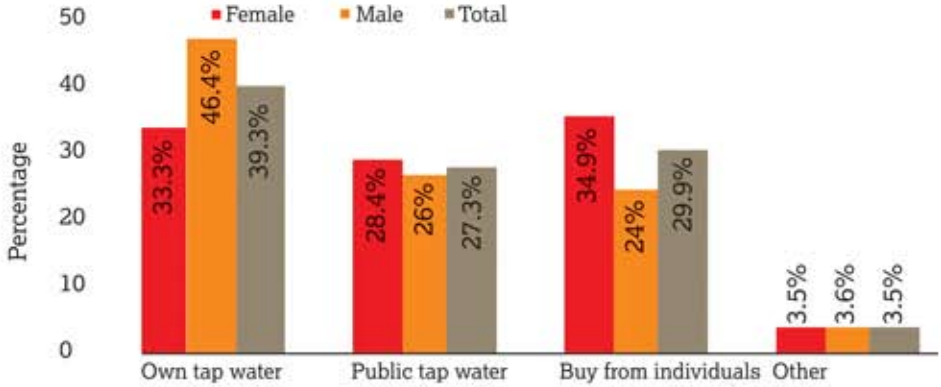
Types of support home-based older people get from family/relatives



Migration status of respondents by place of residence



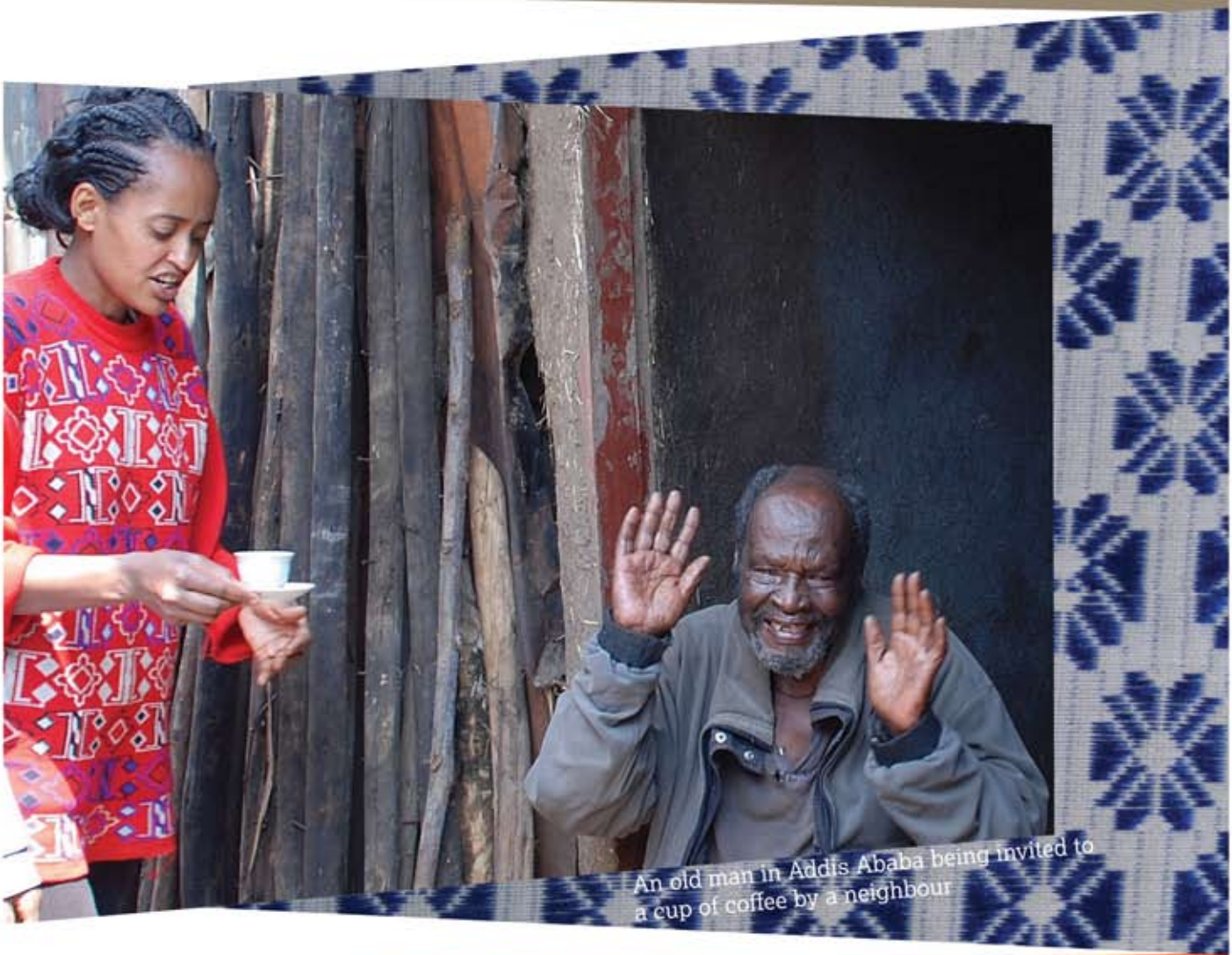
Main sources of water for home-based sample older people



Most affected groups of older people in Addis Ababa

Based on the survey, the most affected groups of older people due to of their relatively high level of poverty and vulnerability - particularly internal susceptibility and defencelessness to cope with crisis include:

- women
- those without children/family support
- the poorest and destitute - especially homeless people
- oldest of the old - people aged 70 and above
- people who are sick, bed-ridden, impaired and with disabilities
- those without a source of income - those who cannot work, and
- those supporting dependent children and grandchildren.



An old man in Addis Ababa being invited to a cup of coffee by a neighbour

Fact box

Kebre Aregawuyan Megbare Senay Dirijit (Local non-governmental participant of study)

- Founded in 2007
- Local organisation committed to providing for financial, material psyco-logical and spritual needs of older people

Services provided to older people:

- 12 older people get three meals per day, medical care, clothing, shoes at an institution which also has a recreational facility offering age-appropriate activities.
- 200 older people in the community receive financial, material and psycho-social support (70 of these older people have had their houses renovated and another 90 are involved in income generating activities)
- 30 older people, whose capacity to live in society has been reduced, get support and treatment at two centres until they are ready for reintegration into the community.

Coping strategies of older people in Addis Ababa

Key problems	Cause	Coping Strategy
Food	· Rising food prices · Lack of adequate incomes · Lack of security and support in old age	In relation to food insecurity: 1. Eating less preferred foods 2. Skipping meals 3. Eating fewer meals per day 4. Reducing the quantity of food per meal 5. Borrowing cash 6. Selling productive assets 7. Eating food not normally eaten In relation to increasing prices: 1. Buying cheaper food items 2. Substituting with poorer quality food 3. Reducing consumption of food 4. Begging 5. Sending children to live with others 6. Eating not preferred/unusual food items
Ill-health / sickness	· Aging · Poverty e.g. lack of income, malnutrition/hunger · Poor health care services	· Accessing government's free health care service · Using traditional medicine and holy water
Shelter (shortage of houses to rent and poor condition of existing ones)	· Inadequate income to pay rent · Inability to compete for condo-minium units · Lack of policy that gives priority to older people in house renting · No repair/rehabilitation of existing dilapidated houses	· Cohabiting thus paying cheaper rent · Asking individuals to live on charity · Living in the street, church or make-shift shelter
Clothes	· Lack of adequate income · Lack of care and support	· Keeping up old clothes (mending repeatedly) · Asking support from relatives, community and NGOs
Unemployment/ lack of income generating opportunities	· Physical weakness · Health problem · Lack of policy that promotes job or self-employment opportunities for older people · Lack of training, finance/credit and working space	· Begging · Selling assets like jewels · Working as daily labourer, petty trade at road side, making and selling food items like Kollo (fried grain) and Injera (Ethiopian staple bread), and local drinks, handicrafts like spinning and weaving
Lack of care and support centres	· Lack of attention	· Begging · Reducing consumption and expenditure, more economical spending of income. · Sending children for work. · Diversifying income sources, for example, by engaging in petty trade, casual labour, letting in cohabitants for rent and the like.

Existing programmes for older people in Addis Ababa

Government programmes

There are three major government-run care and support giving centres for older people in Addis Ababa under the direction of the Bureau of Labour and Social Affairs. The centres are currently assisting about 94 older people (44 men and 50 women). The government provides free medical care services to poor people, including older persons.

The centres are:

1. Care and support centre for disabled persons: Six older men are currently getting care.
2. Temporary care and support centre for older people: Shelter and feeding services are provided to 67 older people (24 men and 43 women).
3. Temporary care and support for disabled persons: Shelter and feeding services are made available to 21 older people (7 men and 14 women).

Non-governmental organisations (NGOs) and community-based organisations (CBOs)

Four local NGOs (namely Agar Ethiopia, Hospice Ethiopia, Integrated Holistic Approach -Urban Development Programme and St. George's Megbare Senai Association) focusing on older people in Addis Ababa are presently supporting about 469 older people (329 women and 140 men).

They provide older people with essential necessities such as cash, food, clothing, health care, psychological and other support. Another 278 older people are being supported by other NGOs/CBOs such as Eneredada Yaregaweyan Maheber, Kebre Aregawuyan Megbare Senay Dirijit, Yewedeken Aansue Yekomen Erdu and so on.

Fact box

Hospice Ethiopia (Local non-governmental participant of study)

- Founded in 2003
- Palliative care is given to people with AIDS and cancer and support to their families

Services provided to older people:

- Healthcare to 350 older people
- House renovations
- Temporary shelter to 20 older people
- Food support to 300 older people
- Permanent shelter provided to five older people

Fact box

St. George's Megbare Senai Association (Local non-governmental participant of study)

- Founded in 1990 and run by Guenette Tsige St. George Church
- Assists 100 older people in the surrounding area of St. George Church located around Piassa

Services provided to older people:

- Cash transfers
- Food support
- Shelter repair
- Healthcare (home visits and clinic)
- Counseling

Wzo Tewabech Yimmam, 70, Addis Ababa, carer

Tewabech, 70, is from Wollo in the Amhara region. She migrated to Addis Ababa many years ago to leave her unhappy marriage behind and start a new life living with her brothers in the capital. Tewabech has only one surviving daughter. This daughter deserted her and left behind three children aged between 8 and 13 years for the 70- year-old to care for. Income generation is a struggle for Tewabech. She used to brew and sell Tella (a traditional Ethiopian drink) for a living but the income she makes is not sufficient for taking care of four people. "I am getting weaker but I continue battling to survive as best as I can for as long as my strength allows me to." For her dilapidated house with a leaky roof so low that she was not able to stand up straight, Tewabech pays two Birr (US$ 0.25) rent per month. During rain the house would flood which has caused her to contract an Asthmatic condition. Tewabech fetches water from the nearby well but there are some kind neighbours who fetch it for her. She pays them 10 cents (US$ 0.007) per bucket for water. Tewabech's life has improved since Agar Ethiopia – one of the local NGOs that participated in the study - stepped in. Tewabech is one of the older people benefiting from Agar's provisions.

"I get food support – for the past six months, they have brought food to my home and I have received rations including oil, spaghetti, lentils, coffee, wheat and sugar. And I get a contribution of 50 Birr (US$ 3.67) per month, and they also renovated my house. Life is so much better."

Photo by Tezeta Meshesha

Fact box

Agar Ethiopia Yaregawian Erdata Mescha Mahiber
(Local non-governmental participant of study)

- Founded in October 2009
- Local NGO working with 100 vulnerable and destitute older people in the Nefas Silk sub-city

Services provided to older beneficiaries:

- One meal per day through community feeding programme
- Renovation of dilapidated houses
- Medical treatment and psycho-social support
- Organization of older women into income generating activities of their choice
- Cash transfers
- Provision of bed and matresses