Ageism and age discrimination in africa

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**1 Background**

Ageism, is stereotyping or discrimination against individuals or groups on the basis of their age.[[1]](#footnote-1) The term was coined in 1969 by Robert Neil Butler to describe discrimination against seniors, and patterned on sexism and racism.[[2]](#footnote-2) Ageism was identified chiefly towards older people, old age, and the aging process; discriminatory practices against older people; and institutional practices and policies that perpetuate stereotypes about elderly people. Butler indicated ageism is shown at both the individual and institutional level.[[3]](#footnote-3) Ageism includes stereotypes, myths, outright disdain and dislike, avoidance of contact, and discrimination in housing and employment.[[4]](#footnote-4)

Ageism is mainly reflected in the cultural negativism of sex and romance in the geriatric set. Sexuality is thought of as something only the young possess.[[5]](#footnote-5) The assumption is that with aging comes a dramatic drop in sexual desires and behaviours, however, aging does not diminish the desire for intimacy, physical pleasuring, sexual interest or the sexual responsiveness if one's general health is good.[[6]](#footnote-6) However, the senior years must come with the freedom to do more of what pleases and satisfies self, the simplifying and de-cluttering of life, slowing down and letting go of excessive obligations, expressing thoughts and feel.[[7]](#footnote-7)

The ageist sees older people in stereotypes: rigid, boring, talkative, senile, old-fashioned in morality and lacking in skills, useless and with little redeeming social.[[8]](#footnote-8) In most African countries, sexuality is an element of the life course that is often regarded as a taboo for older women especially. First, society tends to consider sexuality as a man’s domain, rather than as a woman's issue or a societal issue.[[9]](#footnote-9) Even though sexuality has no age limit, race, nor sexual orientation, to date, studies of sexuality have focused primarily on young and middle aged persons.[[10]](#footnote-10) This has exposed older persons to many diseases including HIV/AIDS.

In Africa older people are never given a fair chance in terms of employment opportunities. In many countries in the continent, for instance Nigeria, it is rare for anyone to get employment in the public service at age 45 or above as a new entrant.[[11]](#footnote-11) A random sample of advertisements placed in the two main newspapers in Kenya between January and December 2005 showed huge levels of age discrimination. Out of a total of 4600 advertisements specifying age, 4587 or 99.7% required people below the age of 40.[[12]](#footnote-12) In the event of retrenchments, and there have been many occasioned by the implementation of the World Bank driven Economic Structural Adjustment Programmes in most of Eastern, Southern African countries and Ghana, those above the age of 55 were the first to be retrenched.[[13]](#footnote-13)

HelpAge International’s (HAI) work in Ethiopia, Tanzania, Rwanda, Democratic Republic of Congo, Mozambique, Zimbabwe and Sierra Leone, found that older people are the last to receive assistance at the place where the disaster has occurred and are the last to be considered for assistance at the new place of settlement.[[14]](#footnote-14) Disasters such as earthquakes, droughts, and other natural calamities heavily disrupt the existing survival patterns of any community group, but older people are always hardest hit.[[15]](#footnote-15) Regardless of which calamity hits communities, older people are affected at the time of occurrence of the disaster, the point of rescue, resettlement and repatriation.[[16]](#footnote-16) Their situation becomes worse than any other population group because of the discrimination that they face. In a programme supporting older refugees in Zimbabwe (1988), it was found that in the refugee camps older people were not provided with food and shelter as did other population groups[[17]](#footnote-17). Because of a shortage of shelter at one of the refugee camps (Nyangombe, near the town of Nyanga), an older woman was forced to leave with four men in one tent, thereby exposing her to possible abuse. [[18]](#footnote-18)

Older people tend to be more vulnerable because they are less socially integrated and more likely to be under stress.[[19]](#footnote-19) “Social isolation” commonly occurs among older people because of poor health, retirement, and loss of a spouse and friends. The African family structure has changed and as such, fewer younger people are willing to care for the older family members. This has led to an alarming number of older persons being abandoned in hospitals without any family member responsible. This has serious healthcare implications for older persons given that they (or their families) are expected to pay for healthcare before it is provided. It was found that about 30% of older people are abandoned at the health institutions.[[20]](#footnote-20) They are dumped and their guardians then disappear without paying for the fees or making arrangements for the older people to go back home.

Moreover, land acquisition and resettlement programmes that took place in countries such as Zimbabwe and South Africa did not take into account the needs of older people. In the resettlement programme implemented in the mid 80’s in Zimbabwe, those above 60 years would not qualify for resettlement.[[21]](#footnote-21) Hence they resorted to using their children or their younger wives to qualify. [[22]](#footnote-22)

In most African countries, older people are typically the poorest members of society and live far below the poverty line.[[23]](#footnote-23) They usually do not have a regular source of income and do not enjoy any social security provisions.[[24]](#footnote-24) They are the poorest in every country. Poverty rates in older people’s households are 29% higher than in other households.[[25]](#footnote-25) In sub-Saharan African countries, only South Africa, Namibia, Botswana, Lesotho and Mauritius pay a universal pension of varying amounts to their older citizens.[[26]](#footnote-26)

In most of Africa, older people do not have a regular source of income as has been demonstrated under employment above.[[27]](#footnote-27) The right to own property, [Article 17 of UDHR], is one set of rights which is massively violated.[[28]](#footnote-28) Additionally, according to the research conducted by HAI in various parts of Africa, it revealed cases where older people have lost their lifelong acquisitions through cheating, victimization and civil strife.[[29]](#footnote-29)

The biggest problem older people face in the area of health is the cost and access to health services.[[30]](#footnote-30) This ranges from knowledge regarding prevention and management of common diseases to very difficult access to curative services. By and large, the attitude of health personnel is so negative that older people prefer to die rather than go to the nearest clinics.[[31]](#footnote-31) Case studies collected since 1996 (Nhongo, 2001) and studies carried out by HAI, World Health Organisation WHO and other bodies (HAI, 2001) reveal deep rooted age discrimination within the health delivery sector. This ranged from the denial of medication, rebuke, slapping, isolation, abandonment, neglect, lack of bedding and linen, unsuitable food and negative attitudes by health personnel towards older people.[[32]](#footnote-32)

It was noted that in some instances, people with urgent medical needs deteriorated tremendously or died while they waited for admission into the hospital.[[33]](#footnote-33) One case in point is that of an older woman at Misyani hospital (Kenya) who waited 6 hours for medical attention because she did not have the medical fees required.[[34]](#footnote-34) A kind hearted person intervened and paid the requisite fees, the illness and the stress had taken its toll on her and she succumbed and died 30 minutes later. In Nanyuki hospital (Kenya), the Chief Nursing Officer observed that 90% of abandoned older people go into depression.[[35]](#footnote-35) In another example at Kenyatta national hospital, the matron revealed that the depression makes older persons uncooperative in the treatment process. The medicines are thus rendered ineffective and they often refuse to sign for necessary procedures that require their permission.[[36]](#footnote-36)

**2 International legal and policy frameworks related to ageism and age-discrimination**

* United Nations Universal Declaration of Human Rights
  + International Covenant on Civil and Political Rights
  + International Covenant on Economic, Social and Cultural Rights
  + United Nations Declaration on the Right to Development
  + The Convention on the Elimination of all forms of Discrimination against Women
  + The Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment
* African Charter on Human and Peoples’ Rights
* AU Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Older Persons
* Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa
  + International Labour Organisation Conventions (Various)
  + UN Plan of Action on Ageing – 1981
  + UN Principles for older Persons – 1991
  + UN Proclamation on Ageing – 1992
  + AU Policy Framework and Plan of Action on Ageing n- 2002
  + Madrid Plan of Action on Ageing – 2002

**3 Case study: South Africa**

The Constitution of the Republic of South Africa (1996) is the supreme law of the country and it protects the rights of all peoples in South Africa. Human rights are applicable to all people, by virtue of being human and everyone is born with these rights. Chapter 2 of the Constitution contains 27 rights that are collectively called the Bill of Rights and are inherent to all human beings, including older persons.[[37]](#footnote-37) The Constitution provides that everyone is equal before the law and has the right to equal protection and benefit of the law. Section 9 provides that no person (including the state and private companies) may unfairly discriminate directly or indirectly against any person on a number of listed grounds including race, gender, religion, social origin, and age.[[38]](#footnote-38)

The South African Plan of Action on Ageing was formulated in 2004. It focusses on the three key priority areas as outlined in the Madrid Plan of Action on Ageing namely; Older Persons and Development; Advancing Health and well-being into old age; and Ensuring an enabling and supportive environment. It has also incorporated the fourth priority area that is based on the recommendations of the investigation committee on abuse, ill-treatment and neglect of older person. These priorities have also been incorporated into the Older Persons Act, Act 13 of 2006, that has been passed by parliament in June 2006. The Older Persons Act 13 of 2006 provides that an older person is a person who is 60 years old or older. The act protects, promote and maintain the status, rights, well-being and security of older persons[[39]](#footnote-39). It also aims at combating the abuse of older persons.

The South African government formulated the South African Plan of Action on Ageing which intersects oral collaboration amongst government departments.[[40]](#footnote-40) It defines roles and responsibilities of government departments and civil society in the provision of services to older persons. This plan is used as a mechanism to strengthen partnership between government and civil society.[[41]](#footnote-41) The plan indicates that the protection, care, support and development of older persons is a joint responsibility between government, civil society and the corporate sector.

**Recommendations**

* African Union member states need to ratify the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons (Older Persons Protocol) that was adopted in 2016, to ensure the protection of older persons in the continent. However, five years later, merely 14 countries have signed (Benin, Central African Republic, Chad, Comoros, Gabon, Ghana, Guinea, Lesotho, Mali, Mozambique, Rwanda, Sierra Leone, Togo and Zambia), and as of February 2021 only three states Benin, Ethiopia and Lesotho[[42]](#footnote-42) have ratified it. The Protocol provides an opportune moment to ensure that older persons enjoy their full rights and freedoms on equal basis with other population groups. When older persons’ rights and entitlements related to social, economic, political and cultural spheres are protected, families and society are able to benefit from the potential and talents of older persons. Therefore, it enables the continent to fully realise its demographic dividends. The Older Persons Protocol will only come into force as a legal instrument when 15 of the 55 AU Member States have ratified it.[[43]](#footnote-43) When this happens, it will be mandatory for states that would have ratified it to design and implement action plans, policies, programmes and services that address the needs and vulnerabilities of older persons, and report on progress made in the implementation of the Protocol.
* The Protocol helps hold governments to account for their actions towards the protection of the rights of older people and to bring all countries to a similar level and standard of protection of older persons.
* There is need to foster a multigenerational culture that recognizes ability regardless of age and rejects age stereotypes, just as it would reject stereotypes involving race, disability, national origin, religion or sex.
* School curriculums should include older people’s rights**.** School children should be taught to reach out to an older person and help them feel seen and connected.
* Older people should be empowered by telling them their rights and how these can protect them against abuse.
* Older persons need to have medical facilities that meet their needs in both private and public hospitals as many healthcare workers in Africa lack training in geriatric issues.

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