Informal care for the elderly people at Family level in Mauritius

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ABSTRACT

Introduction: According to the World Population Ageing 1950-2050 Report (2002), it is estimated that by 2050 the world population will stand at about nine billion and three hundred and twenty two million, out of which the aged 60 and above will account for 21.1 % of the total population. Regarding Mauritius, the proportion of aged 60 and over is around 10 % of the total population currently will reach nearly 26.1 % in 2050. Mauritius is already an ageing society.

Purpose: In this paper, we shall address mainly the informal roles played by the family for the caring of the elderly population. The main aim of the study is, therefore, to take stock of the family care for the elderly population.

Methodology: For the purpose of this study, use of both primary and secondary data has been made. Secondary data have been obtained mainly from the central statistical office (CSO), government documents, internet search and books. Moreover, to complete this study, it was of utmost importance to have some primary data, in the form of qualitative data, which were collected through unstructured interviews.

Findings: The main finding of the study reveals the importance attached to the elderly population, who contribute much financially, culturally and physically to support the household members. Although, the senior citizens are viewed as an asset in most of the Mauritian families yet the study shows that a few number of the elderly population are concerned about their living arrangements.

Originality/Value: There are quite a few studies done on the economic and budgetary implications of population ageing in Mauritius. Regarding the social impact of ageing at the family level, there is a scarcity of knowledge as not much work has been done. Therefore, this study fills in this gap.

Keywords: elderly, population ageing, Mauritius, Living arrangement, informal care, family.

INTRODUCTION

The world population reached seven billion in October 2011. According to the World Population Ageing 1950-2050 Report (2002), it is estimated that by 2050 the world population will stand at about nine billion and three hundred and twenty two million, out of which the aged 60 and above will account for 21.1 % of the total population. Regarding Mauritius, the proportion of aged 60 and over is around 10 % of the total population currently will reach nearly 26.1 % in 2050. Suntoo (2012) states that Mauritius has successfully completed its demographic transition in a short period of about five decades. The result has been a considerable fall in the rates of both fertility and mortality from a relatively higher level in the 1950s. On the other hand, the life expectancy at birth which was 58.7 years for male and 61.9 for female in 1962 has reached 69.3 years for male and 76.5 for female in 2010 (Central Statistical Office, 2005 & 2010). The fall in fertility rates and the rise in life expectancy have led to the process of ageing of the Mauritian population.

Ageing is already a major issue in the island. Besides, the proportion of elderly in the total population is expected to increase quite dramatically in the future. This process of ageing is bound to have serious social and economic repercussions. ‘Social’ because the society, family and the government have to double their efforts regarding the provision of welfare to the elderly and ‘economic’ because of the budgetary implications in the provision of services for the old people. In this paper, we shall address mainly the informal roles played by the family for the caring of the elderly population. The main aim of the study is, therefore, to take stock of the family care for the elderly population.

In the first part of the paper, the rationale behind this study will be stated. Then, there will be a review of the literature on family care regarding the elderly population. The second part of the paper explains the methodology used to carry out this study. The data collected will then be analysed and discussed. Finally, a conclusion based on the study will be stated.

Rationale behind the study

There are quite a few studies done on the economic and budgetary implications of population ageing in Mauritius. Regarding the social impact of ageing at the family level, there is a scarcity of knowledge as not much work has been done. Therefore, this study fills in this gap. In this sense, the results and findings of the present study will shed some in depth light on family care for the elderly population.

LITERATURE REVIEW

For Murdock (1949) the family refers to a social group characterised by common residence, economic cooperation and reproduction. The family members live together in the
same residence. Normally members have kinship relationships. With modernisation and development, it is noticed that there are many households where family members live together but the kinship ties have been broken. Consequently, there is either a lack of communication or no community at all among parents and children, particularly when the latter are married. Nevertheless, the family is still considered as the basic institution for providing informal health care and welfare facilities to its members, including the dependent elderly people. However, the growth of older people may become a burden for the family. The latter will have to devote much financial resources, time and effort to look after the aged.

Functions of the family regarding the elderly

The old people rely much on the family support for survival. The family has a number of responsibilities. One among them is caring for the old. Browne (1998) stated that the family provided most of the help and care for the young, the old, the sick and the poor during periods of illness, unemployment and other crisis.

In Mauritius, families usually provide practical, emotional and financial support to the elderly. Practical support means families are involved in those activities of care that help the aged to manage their daily lives better. Such a support compensates for functional disabilities, improving the ability of the aged to attend the self-care activities of daily living like eating, dressing, bathing, housework and shopping. Family members do also provide emotional support to the old who usually feel social isolation, despair and loneliness. Lastly, financial support is also provided to the elderly as the latter’s old age pensions are sometimes insufficient for their decent living.

Changing family pattern

Mauritius is a fast developing society. With modernisation, the structure of the family is changing quite rapidly, the traditional extended family is declining and more nuclear and modified extended families can be noticed. A nuclear family consists of a father, mother and their child or children living together in the same household (P. Wilson and A. Kidd, 1999). The modified extended family is one where related nuclear families, although they may be living far apart geographically, nevertheless maintain regular contact and mutual support through visiting, the phone and letters: continuing close relations made possible by modern communication (Ken Browne, 1998).

In the 1960’s, many households, particularly in the villages and countryside, were the basic units within which employment, consumption and saving decisions were taken. It was not uncommon to find extended families headed by the oldest male persons. Today, under the nuclear and modified extended types of family structures which are becoming more common, the older persons have little or no authority over the younger members of the family. As from 1980s, the industrialization process, with the taking off of the Export Processing Zone (EPZ) sector, has caused the shift in the economy from the family enterprise to wage employment. As a consequence, the authority that elderly members of the family had over younger members declined gradually such that today the elderly population do not have much say in the decision making or decision taking. The fact that younger generations are becoming more independent may result in care and support for elderly being less consistent and less organized in future.

Ageing as a burden or an asset

With increased life expectancy, a higher proportion of individuals are likely to enter old age, meaning that health problems of the ageing are likely to grow as well. In addition, the care that would be required for those who are weak, disabled and sick will call for greater physical attention and time commitment. The ageing family members, particularly those suffering from chronic illness, will therefore impose an additional burden on the family. It may be necessary for some family members to stay at home to devote themselves fully to caring for their aged relatives. For those who are fortunate to live in a family structure where there is more than one generation of ageing persons, the healthier ones may care for those who are not so able (Population Growth Demographic Structure, 1999, United Nations Publication). Another major problem faced by the families is that domestic care provided to the elderly is not given due recognition and devoted care is taken for granted. Some of these carers have sacrificed much for the sake of their elderly parents. Both males and females have in some cases postponed marriages and a few do not marry as they have to look after their elderly parents.

For Healy (2004), an ageing population does not necessarily mean a sicker population burdening the society. Old people are relatively better citizens rarely involved in crimes. Fortunately, ageing is still considered as an asset in quite a large number of families. The young older people, who are aged 60 to 70, are important resources for many families. Besides the government of Mauritius has increase the retirement age from 60 years of age to 65 years of age. Consequently old people will continue to work and make effective contribution to the family.

Ageing and working women

According to the central Statistical Office (2005 &2010), old age dependency will gradually increase. This means that the working age women will be called upon to provide support for a larger proportion of the aged as, traditionally, care of the elderly falls within their responsibilities. The increasing economic involvement of women leaves them much less time to care for the elderly. Working women will be faced with an important opportunity cost as they will have to either stay at home to care for the elderly and giving up paid employment or continue working while leaving the elderly to their own fate. Women, in general, are already facing the emotional and psychological stress of having to combine work and care of the family.
Living arrangements of elderly people

The term living arrangement refers to the household structure of the elderly according to Palloni (www.un.org/esa/population/publications/bulletin42_43/palloni.pdf). For Bond (1993) the most influential factor on the lives of people, more particularly for the elderly, is the environment in which they live. At present there are many elderly people who live with their families. Some are sent to homes where care is provided to them. With the growing number of elderly and increasing number of women being employed, people may find some difficulties where to keep their elderly population in the future.

The 1990 census showed that there were 38,700 men and 48,810 women, 60 years and above, of whom 95 percent and 90 percent respectively were living with their families. On the other hand, 5 percent of elderly male and 10 percent of elderly women were living alone. This would imply about 1,935 old men and 4881 old women were living alone in 1990. Similarly, in 2038, there would be an estimated 7400 elderly men and 17100 elderly women living alone (Pochun, Situation of old people in Mauritius, 1998). These figures show that more concrete actions need to be taken by the authority regarding living arrangement of the elderly in the years to come.

METHODOLOGY

Methodology is simply the planning or designing of strategies for the collection and analysis of data (Parahoo, 2000). For the purpose of this study, use of both primary and secondary data has been made. Secondary data have been obtained mainly from the central statistical office (CSO), government documents, internet search and books. Secondary data are sometimes regarded as unreliable or misleading as the information may be unrepresentative. However, data from the C.S.O and the government documents are, to a large extent, regarded as reliable. Moreover, to complete this study, it was of utmost importance to have some primary data, in the form of qualitative data, which were collected through unstructured interviews.

Survey population, sample size and sampling method

The survey population would include all people aged 60 and above and their families in the island of Mauritius. As the survey population is very large, it is nearly impossible to question everyone, because of high cost involved and time constraint. Therefore, the survey has been limited to studying a sample of the survey population.

A sample is simply a small group drawn from the survey population. All care has been taken for the sample to be representative of the survey population. Consequently, the results obtained from the sample could be used, to some extent, to make generalizations about the whole population. For the purpose of this survey, due to time and money constraints, only 20 elderly people (10 men and 10 women of age 60 and above) and their main care providers have been questioned.

A sampling method is a process by which the researchers select representative individuals from the sampling frame to question. For the purpose of this survey, the Quota sampling method and snowballing have been used.

Research method used

The unstructured interview method has been used to gather data. The main reasons for using such a data collection tool were firstly it allows respondents to voice out their opinions, views and feelings freely and secondly the researcher has the possibility to probe further while carrying out the interview. The survey had a very high level of response as I personally carried out the interviews given the small sample size. Although, I had to devote nearly 15 days, mostly during evenings and week-ends, to carry out the survey, I felt very much satisfied by the response level and also by the experience acquired.

Limitation of the study

With a limited sample of 20 elderly people and their main care providers, the findings of the study cannot be generalised. Nevertheless, the findings and results of the study at least give a hint about the ways of living of the elderly population and their families and also certain constraints and difficulties faced by the caregiver respondents are revealed. Further studies need to be carried out with a larger sample size, involving different research methods, so that a good generalisation can be made about the survey population.

DATA ANALYSIS AND DISCUSSIONS

After the collection of the data, there is the need to analyse them. Interpreting and evaluating data from unstructured interviews require researchers to look for themes and patterns. Both caregivers and the elderly people were interviewed. It is important noting that it was a rather complex task. The field work turned out to be really different from what was thought. In some cases, the participants were also the main care providers of both themselves and their spouses. For only three widower males, the care givers were their daughter-in-laws. In one case, the elderly respondent was bed-ridden and he could barely express himself. He was looked after by his unmarried sister, who participated in the study as a caregiver respondent. In two cases, the female elderly were in hospitals and the main care providers accepted to answer my questions. In all, 20 old people, 10 males and 10 females, participated in the survey. Regarding the caregivers, out of the 16 participants who took part in the study, 4 old women were widows who looked after themselves, 4 were the main care providers of the elderly males, 2 were looking after their sick mothers who were hospitalised. The remaining 6 participants were themselves aged 60 and above acted both as caregivers to themselves and to their old husbands. Therefore, they were interviewed as both caregivers and as elderly respondents.

Both the caregivers and the old people were asked three to four questions and also in certain instances, I had to probe
Further to get better insights or clarifications. Questions addressed to the old respondents related to their age, marital and family statuses, their living arrangements, the attitudes and behaviour of the members of their family towards them and the treatment received at home. The care givers were asked about the reasons and motives behind elderly care and also whether looking after the old people were a burden for them.

The age of the senior citizens varied from 61 years of age to 80 years of age. Out of the 10 male respondents, 6 were married, 3 were widower and 1 was bachelor. Regarding the female respondents, 6 were married and 4 were widows. They were between 64 years of age and 89 years of age. The majority of the elderly males and females were still in good health. Most of them were in employment either on their own or in certain informal sectors. Nearly all of male participants regarded themselves as productive with the exception of three of them, one of whom was bed-ridden and two were partly physically handicapped.

The majority of the elderly people owned the houses they were living in. Only three elderly people were living in rented houses. In one case, an elderly male respondent stated that he left the household for nearly six months to stay at one of his daughter’s residence before coming back to his son’s place. However, in two cases, the old couples had already donated their houses and other assets to their children. When I asked them as to whether they were happy having done so or they have any regret, one female respondent answered that it was better for her not to say anything over the issue. While observing her, it seemed to me that she had much regret for having transferred her property. When questioned about their views of living in a home or a separate residence, although the majority of the respondents answered negatively, yet many of them stated that they would prefer to stay far from their married children if they had no other alternatives. Therefore, some kinds of additional living arrangements like more homes and day care centres might become necessary in the years to come, to look after the elderly people, particularly for those living alone.

When questioned about the treatment received from the children and the attitudes and behaviour of the latter towards them, a variety of answers were received. Most elderly males find that their children and daughter- in-laws treat them with regard because they act as carers for their grand-children. Some elderly males think that they get good treatment because they are a source of income for the household as they contribute money for the monthly household budget. It is extremely important to note that one respondent said that he had brought up his children in such a way that now it becomes their duty to love and respect him. On the other hand, most of the elderly females think that they are sources of income for the household, as they get government pensions, and as a consequence of which they are treated with regard. Some female respondents attend to the household chores and therefore they are treated with respect. Nearly all the respondents were of the view that they are financially independent and consequently they command respect from their children. The information gathered from this question reveals that most of the elderly people believe that they are an asset and not a burden for the family, as revealed by the literature review on family care for the elderly. Therefore, we find that the elderly people also contribute a lot for the welfare of the family.

From the interview carried out with the 16 caregivers, it was found the all of them were females. Their age varied from 30 years old to 76 years old. On the question about reasons and motives behind elderly care, all the 6 old ladies, who also perform caring duties, stated that they liked to see their husbands living longer. The majority of the remaining caregivers looked after their elderly parents because they said that they too would grow old one day and would need their children to look after them. Thus, carers act as role models for their children believing that the latter would be socialised to respect the aged and to learn caring behaviour. Some carers care for the elderly people as they believe to get a blessing in return. It is important to note that many of the respondents considered it as their duties to care for the elderly people. One of the daughter-in- laws stated that her father- in- law usually looked after her children when they were young and as such she had an obligation to care for him now.

When queried on their views as to whether caring for the elderly people was a burden for them, the answers received varied. Only two respondents considered caring for the elderly parent as a burden for the family. They both stated that elderly parents caused family budget to increase as they often fell ill and required specialised medical treatment. On the other hand, for a big majority of carers, the experience of the old parents was helpful. This might be because the old parents played a very important role in preserving the family culture and in the socialisation process of the grand children. Surprisingly, many respondents were of the view that elderly people acted as the financial support for the household. Therefore, elderly people were still considered as financially productive during old age. It was quite interesting, above all, to hear from the majority of carers that elderly people were an important additional labour for domestic purposes, particularly the female elderly. From the answers received, it could be deduced that the older people are regarded as an asset to most of the households.

**CONCLUSION**

This study has shown the extent to which the family, as the most basic institution of the society, plays an important role in looking after the dependent members, particularly the older people. The use and analysis of both the primary and secondary data has helped to get better insights on the informal elderly care at family level in the Mauritian society. The main findings of the study reveals the importance attached to the elderly population, who contribute much financially, culturally and physically to support the household members. Although, the senior citizens are viewed as an asset in most of the Mauritian families yet the study shows that a few number of the elderly population are concerned about their living arrangements. Thus, such an important information might be of use to policy makers in view of improving further the
lives of both the current older population and also the elderly generation to come.

REFERENCES


(4) K. Browne, An Introduction to Sociology, Blackwell Publisher, USA, 1998.


