

The aged in a typical South African township: creating a liveable and supportive environment

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INTRODUCTION

The 21st century is witnessing a rapid demographic change due to a worldwide increase in the number of people aged 60 and above. The improved quality of life contributes to this longevity. (WHO, 2004). The world's older population is growing in numbers, relative to the younger population. This trend, known as population ageing (Kaneda, 2006), is evident in both developed and developing countries for different reasons.

General challenges of an ageing population

- Strain on informal support systems
- Pressure on healthcare systems
- Shrinking productivity
- Increasing demand for pensions
- Increasingly feminised older populations
- Cycle of poverty.

Human settlement challenges and the aged

The main focus of this research is to determine the most enabling environment for the elderly in their challenging context. The traditional family systems in South Africa are crumbling due to a number of factors, such as migration and the impacts of the HIV/AIDS pandemic, which has left many children orphaned and families without bread winners.

In the South African township context the aged carry the responsibility of caring for children and the frail. However, the space they occupy was specifically designed to segregate, in impoverished dwelling environments that conflicted with the culture and practices of local/black people. (Low, 2005)

A large number of the aged are faced with non-communicable and communicable, chronic diseases, which lead to disability and fatality. Furthermore, the presence of HIV/AIDS and TB in households impacts negatively on the livelihood of the aged. Poverty, poor living conditions and disabling human spaces exacerbate the situation.

Environmental challenges

South Africa's apartheid history has left a legacy of inadequate, spatially fragmented, racially divided and underdeveloped human settlement for the majority of the people. (Smith, 2007)

As a result there are key challenges in township settlements affecting the aged:

- Inadequate housing
- Lack of access to social and economic infrastructure
- Lack of access to efficient and safe transport systems
- Social segregation and inequality
- Urban sprawl
- Inadequate access to services
- Overcrowding
- Crime.

Human settlements

The focus of this research is on three types of human settlements:

- Formal settlements
- Informal settlements
- Greenfield settlements ("RDP housing").



The three types of human settlements, especially informal settlements, feature many of the socio-economic and socio-physical characteristics that tend to foster the spread of diseases such as HIV/AIDS and TB. They also promote other health conditions, which the most poor and vulnerable people typically live with and are least equipped to cope with the socio-economic impacts of HIV/AIDS. (Smith, 2007)

HIV/AIDS and TB

HIV/AIDS and TB ultimately affect all of us due to the impact of these diseases in terms of illness and death among the economically productive segment of the population. HIV/AIDS has skewed the demographic profile of the country. Part of the middle-age group of the potentially productive stratum of society has already succumbed to the disease, thereby creating more orphans and a greater proportion of older people. (Smith, 2007)

In South Africa there are clear patterns in terms of the groups who tend to be at highest risk of infection – young people (20-34 years) in the economic prime of their lives, women, people living in poverty, and urban dwellers (particularly people living in urban informal settlements). (Shisana, et al. 2005). Poor people and women in particular tend to experience the most direct negative socio-economic consequences of the epidemic.

Empirical evidence shows that African households are an important safety net for AIDS orphans and the ill; it is clear from research that HIV/AIDS and TB are putting stress on existing household systems. (Cohen, Menken, 2006). This indicates the importance of the built environment and the crucial role it plays in the control of spread disease, infection control and creating enabling environment for all households.

Sustainable human settlements for the aged, people with HIV/AIDS and TB

The following are recommendations for effectively integrating the aged, people living with HIV/AIDS and TB into sustainable human settlements planning and development:

1. Involvement of people living with HIV/AIDS, marginalised social groups, households and communities that are affected in the design and development of sustainable human settlements.
2. Recognise and support livelihood strategies and social support systems.
3. Take cognisance of the aged, HIV/AIDS and TB infected and affected people in urban planning settlement design and housing unit design. (van Donk, 2007)

FURTHER RESEARCH

A large number of the aged in formal settlements still occupy National Building Research Institute designed low-cost dwellings, namely the (Non-European) NE 51/6 or NE 51/9 and similar building types in townships, hence, further research will focus on:

- Assessment of design impacts of existing housing and pass interventions to create safer environments for home-based care envisaged in the new decentralisation policy for drug-resistant TB
- Investigating housing typologies and risk of disease transmission, especially airborne diseases such as TB.

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Design is a tool that can be used to create enabling and supportive environments, social equity and a means to embrace the diversity of the global environment.

