

INCLUSION OF THOSE
MOST LEFT OUT

Hands-on

Learning from our implementing partners

South Africa's vulnerable ageing population

South Africa has a rapidly ageing population. The birth rate is falling and many people are living to a greater age. Family structures are changing and older persons can no longer rely on their children for care and support. Older persons in South Africa, although a vulnerable group, are not regarded as a priority. According to the report submitted to the UN Secretary on the situation of older persons in South Africa (April 2011), the present generation of older persons are those most affected by the countries troubled past.

In 2006 the Older Persons Act was passed as a result of considerable effort on the part the government and civil society. The central themes of this Act were the clear obligations placed on all spheres of government to promote:

- 'Active aging in the community'
- Quality of life, the dignity and well-being of older persons
- Prevention of abuse of older persons.

The role of STTOP

In October 2009, STTOP (Sector Task Team for Older Persons) was created by a group of sector organisations who recognised that unless they came together to collectively address the manifold issues that faced them, the older persons' sector in the Western Cape, would continue to remain a poorly resourced and neglected backwater largely ignored by funding agencies (local and international) and the wider South African public. Since then, STTOP has met regularly on a monthly

basis to discuss how best to address key sector issues.

One of the obligations included in the Older Persons Act is promoting 'Active Ageing' in the community. Depending on who is consulted, opinions vary as to what are the key building blocks that are needed to promote active aging in the community. It is the view of STTOP that there are three fundamental building blocks, namely access to:

- A state pension
- Safe and affordable housing
- Appropriate health care.

For the purposes of improving the services delivered to older people, STTOP has developed a picture of the issues faced by service providers and recommendations on how these issues can be addressed in an effective, feasible and systematic manner, both by government, civil society and donors, in order to achieve these fundamental building blocks. This learning brief will focus on our recommendations for safe and affordable housing.

Access to safe and affordable housing

There are approximately 230,000 social pensioners living in the Western Cape. Of that, the Provincial Government provides funding to organisations to help house only 10,000 of these social pensioners, principally in residential care settings. Although



there is no definitive evidence on the financial reality of living on the state pension, STTOP raises questions on how it is possible for the remaining pensioners to live decently on R1 140 a month (the current state pension) without requiring support in accessing safe and affordable housing.

Issues with housing provision: Current government housing policy only caters for individuals and families with a minimum monthly income of at least R3 000 a month, which effectively excludes all social pensioners from benefiting from such housing. Also in order to qualify for funding, they need to provide, as a minimum, discrete housing units. Each unit, however small, needs to have its own bathroom and kitchen. Thus existing policy makes no provision for the notion of communal living where bathrooms and kitchens are shared amenities.

There are further issues with the residential care itself. Once pensioners require professional care and support, this care and support is provided at assisted living and residential care facilities. The responsibility for the care of mentally and or physically frail older persons (those with or without a social pension) has historically been delegated by the State to registered NGOs.

The services provided by NGOs are subsidised by the State and subject to NGOs meeting specified performance levels. Failure to achieve these performance levels carries financial and other penalties. The fundamental problem of the current subsidy arrangement is that it only covers a small part of the actual costs of providing frail care.

For instance, linked to this subsidy arrangement, are regulations that lay down minimum staffing levels as well as the requirement to employ certain numbers of nursing and care staff. Yet the full costs of employing staff are carried by the organisations concerned. The average 'subsidy gap' for a residential facility providing care for 50 persons is R 1 746 per person per month, which adds up to a

yearly deficit of R 1 047 600.

In the same vein there are regulations covering minimum standards for the building of frail care facilities – organisations are expected to build such facilities without any financial support from the State. The consequence of this regulatory environment is to place organisations in the invidious position of being required by law to assume a range of staffing, building and on-going maintenance costs without sufficient financial support from the State to meet these costs. From time to time incidences of inadequate care, neglect and abuse are reported.

The public narrative around such incidences is to assign most blame to the organisations concerned, with little attempt to recognise that the regulatory environment and the subsidy framework are complicit in the occurrence of these incidents. This complicity of the state in these incidents is further underscored by the decision of the Provincial Department of Health to refuse to provide or subsidise the costs of incontinence products for mentally frail and incontinent older persons.

There needs to be the recognition that residential care for poor frail older persons is under real financial threat within the Province and as a consequence vulnerable older persons are potentially at severe risk of negligence and abuse. Given the enormity of the need for safe and cost-effective housing for social pensioners, it is critically important that the Western Cape provincial government undertakes a thorough review of its social housing policy and the funding allocations supporting this policy. STTOP endorses the exploration of other models for social housing provision, and one such viable alternative that STTOP endorses is community housing, as delivered by NGOs NOAH and Abbeyfield.

Community housing as a solution: NOAH and Abbeyfield are two well established housing models in the Western Cape, that enable social pensioners to obtain safe and affordable



housing. They provide an alternative and viable housing programme that charges pensioners only 30% of their pension income to live in secure accommodation. These modest charges for rent and utilities are achieved they provide houses for fit older persons who live in ordinary houses in their communities. These community homes run independently, with residents sharing rooms, costs and daily household chores.

In essence, these community housing models eliminate the need for costly staff structures to run and support them. These two community housing models give concrete expression to the notion of “active aging in the community” and are in effect a poverty elimination measure, for once an individual enters such housing they are enabled to live with dignity and financial security on their state pension.

Challenges in providing community housing: Unfortunately because of their shared amenities and smaller budgets, in terms of government policy, community-based housing models such as those developed by Abbeyfield South Africa and NOAH, would not qualify for financial assistance, despite the fact they are cost effective responses to the social housing needs of economically vulnerable older persons.

A further structural constraint that prevents the expansion of these two community-housing models is the limited stock of houses, and the difficulty in procuring more - either by buying an existing property or securing land to build on. Existing NGOs don't have the 'collective muscle' to persuade large institutions and individual donors to provide the necessary seed capital to establish more community-based houses. Consequently the housing stock of such 'community homes' in the Province is very small.

Improving access to housing

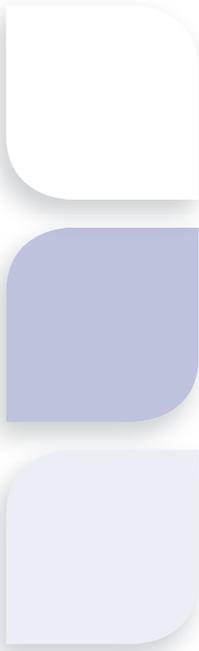
In STTOP's Briefing Paper, submitted to the

Executive Leadership of the Provincial Government of the Western Cape, we advocate for a number of actions that would address the issues of access to safe and affordable housing. These recommendations were developed to provide the Executive Leadership of the Departments of Health and Social Development with a picture of the issues faced by service providers and recommendations on how these issues can be addressed in an effective, feasible and systematic manner. Many of these are focused on changes to policy and procedure and a few are detailed below:

Support community based housing as a solution: Community based housing is a viable and cost effective alternative to providing social housing. To support the provision of this, the province needs to develop a per capita subsidy for community based housing for fit social pensioners (both for existing providers and new providers). It also needs to look at changing its housing policy around housing with shared amenities.

Increase stock of community based housing: Changing the policy on housing would assist in increasing housing stock. STTOP also identifies a few other government actions that could increase the stock of these houses such as: putting a legal obligation on developers when tendering for ownership of public land, to include 8% of social housing; assisting NGOs to secure tenure for land in order to build (and granting plots of land in urban and rural communities for this); and identifying and converting vacant public buildings into social housing (however there are issues with this in terms of the significant capital expense, unclear leaseholds and municipal rates costs).

Improve the subsidies for residential care: It needs to be acknowledged that residential care is essential to maintaining the dignity and wellbeing of those frail and vulnerable older persons who cannot be cared for by their families and communities. Therefore a comprehensive 'costing



exercise' of residential care within the Province using the minimum 'Norms and Standards' (as per the Older Persons ACT of 2006 and associated regulations) needs to be completed to benchmark these costs and to use the results of the costing exercise to start to address the funding gap for residential care. The Provincial Department of Health then needs to commit to setting aside adequate funding for assisted living and residential care facilities to help meet the costs associated with providing medical and nursing care in residential facilities.

This learning brief tells of the hands-on experience of:



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