

While Africa has a high youth population, elderly people are also increasing in numbers, especially in South Africa. Care for the elderly is in dire need of review, especially for poor and isolated older adults

Ageing has profound consequences on a broad range of economic, political, and social processes, and so the "elderly models of care" practiced in Gauteng in particular, should be integrated into a holistic "service package", because none of the care models are sufficient alone.

The three care models – residential, family, and community – operate independently. Residential care services are typically oldage homes, across the public and privately-run spectrum. Private old age homes are common in Gauteng, and therefore out of reach for the majority of elderly people in the province. Family care practices are usually found in multigenerational homes, where a member of the extended family is in a position to help the elderly person. But many older people are isolated from family members and so this is not an option for them.

Community-based care emerged in South Africa partly as a solution to the lack of suitable institutions for the majority of older persons and partly as an intervention to mitigate against abuse emanating from some of the institutions meant for older persons. CoE-HUMAN grantee, Professor Monde Makiwane, suggests in his seminal study that despite the three models, older persons across Gauteng remain more or less "like a flock of sheep without a Shepard." Makiwane's study says that an integrated approach of the three care models, informed by the Convoy Model, should be implemented.

The Convoy Model lays a framework for the integration of formal and informal care of older persons. Although these two models have always been in existence in South Africa, this framework lays a foundation on how these could systematically complement each other.



This research was produced by Monde Makiwane & Mathias Fubah Alubafi & Ntombizonke A. Gumede.

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