

**Gender Dynamics of Elderly Welfare and Semi-Formal Protection in Cameroon
(NW and SW Provinces)**

University of Kent

School of Social Policy, Sociology and Social Research

Doctor of Philosophy in Social Policy

**Gender Dynamics of Elderly Welfare and Semi-Formal Protection in Cameroon
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The words of wisdom from the elderly remain great pointers to our trajectory. Even without material wealth, their presence is enough insurance and re-assurance. They deserve our respect and special care in return (Che Charles Fonchingong).

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Abstract

Amidst the complexity of social security provision for the elderly in Cameroon, this gender-focused research engages with individual and collective agency by the elderly in fashioning support schemes in rural and urban areas. This challenges predominant development thinking that perceives the elderly as a burden and drain on the state, household and community. Drawing on social capital theory and economics of resource mobilization in poverty reduction, the role of informal institutions in elderly welfare support is assessed.

Based on in-depth interviews, participant observation and focus group discussion in selected study sites in Cameroon, a needs assessment portfolio in evaluating daily needs (care, food, clothing, medication, firewood, water, assistance with farm work, remittances) was employed. Interviewees were also controlled for varying access to pensions, housing, residential patterns, forms of care available, livelihood strategies, household sizes, traditional support schemes, micro-insurance schemes, and benefits of social networking.

The results are presented qualitatively showing significant demographic, socio-economic variables and analysed through a typology of recurrent themes. A mixed picture of the elderly as key pillars in securing livelihoods, engineering community development initiatives, while others are in hardship requiring support is evident. The traditional forms of support are fragmenting and the elderly are walking the tight rope through a gamut of informal sector activities. Children, grand children and hired

helpers are also playing a greater role in assisting the elderly. Drawing from accounts and scenarios, old men and women are affected unevenly due to differing coping mechanisms, adjustment patterns and inequalities in levels of support. Those in rural areas seem to be coping better than their counterparts in urban areas as a result of greater access to land, other accrued assets and still strong community relations. What stands out is the hard fact that *njangis*, mutual societies, faith-based organizations and village development associations, referred to in the research as semi-formal (at the interface of formal and informal care), are struggling to fill the gaps. These networks can barely provide psychological support, particularly funeral arrangements. Reversing the decline in elderly welfare hinges on partnerships mediated through the voluntary sector.

Key words: Ageing, Africa, Cameroon, Elderly, Social Security, Social Capital, Pensions, Welfare, Gender, NGOs, Semi-formal, Njangis (ROSCAs).

Chapter one: Introduction, Context and Background

1.0 Introduction, Context and Background

There are compelling arguments making the case for a viable social security system as Africa's population is ageing rapidly. Literature reviewed here captures the various perspectives and strands. Amongst the compelling arguments and factors adduced are the demographic, economic malaise and deepening poverty, spiralling unemployment reversing societal expectation of young looking after the old; ravaging effects of HIV/AIDS pandemic; fragmentation within erstwhile traditional mechanisms of support; pension systems in crisis, formal social security systems with limited coverage, often for public servants, a burgeoning informal economy with workers, particularly women who are non-covered, soaring outward migration and urbanization with attendant effects on welfare of the elderly.

Social security and the problem of ageing has become a thorny problem, warranting serious inquiry. This is buttressed by the divergent array of research to find workable options in less income countries. Declining income, material welfare and support for old people results in the fact that in years to come many ageing people will be engaged in an occupation until late in their lives, so as to be able to survive old age (Saad 2002). The scenario in most developing countries warrants a redefinition of policy directions as the vast majority of non-covered (those without any access to social security and social insurance) and poor workers are employed in the informal economy (Okojie 1988, Bailey 1994; Jutting 1999; van Ginneken 1999, 2002; Beales 2000; Estes 2001; Lloyd-Sherlock 1999; 2002; Apt 2005). The review of literature in Chapters Three, Four, and Five explores the global trends in population ageing and social security; forms of formal and informal social protection and the impact of these

changes on elderly welfare with focus on developing countries in Africa and Cameroon in particular.

With hindsight, the World Bank report *Averting the old Age Crisis* served as a catalyst for debate over social security provision and pension reform, which has now become a global issue (World Bank, 1994). Of special interest for the sociology of ageing and social policy are the implications of demographic change for the division of labour between the family, the welfare state and the voluntary sector in the provision of help and support for older people – and hence on the creation of quality of life in old age. Population ageing is now widely recognized as one of the most salient long-term demographic developments, which has profound economic and social implications, and poses unique policy challenges (Nikolai 1999). As stated at the World Summit on Social Development in 1995, access to social security lays the foundation for sustainable development and is one of the prerequisites for eradicating poverty (United Nations, 1995). Poverty is usually viewed as lack of income, expenditure or consumption; lack of capabilities and freedoms – both intrinsic and instrumental that permit people to achieve what they want to do and what they want to experience, (e.g. income, education, health, human rights, civil rights, etc.) and a form of absolute or relative deprivation (Hulme, et al; 2001). For many, old age is a period of chronic poverty and powerlessness. In developing countries, the problem is made worse, given that large numbers of people of all ages endure extreme poverty, which affects all aspects of their material and social existence. The cumulative effect of marginalisation and poverty throughout the life span is absolute poverty in old age (Beales 2000). Old age is characterized by lower incomes, which mainly stem from labour market exclusion. Other factors which operate to reduce incomes include lack

of individual insurance policies; lack of private savings that mature in later years as is the case in Cameroon; and rapid depletion of the small savings made during the working years, mainly because the incomes earned themselves are small and the impact of inflation on the savings which reduces their real value. The spiralling rate of unemployment is not helping matters as old people 'dip into their small reserves', as one elderly informant put it, to provide for their jobless children. In the absence of quantitative data in Cameroon that combines old age and various forms of welfare particularly income, qualitative information would shed more light on various survival strategies and coping mechanisms of older men and women.

However, older people often make important economic contributions, pooling pension income or wages, performing tasks such as child care which releases other household members for salaried employment (Gorman 1999). Another consequence of social and economic change is that growing numbers of older people are living alone or in small household units. It is usually assumed that this increases their economic vulnerability (Dreze, 1990; Grieco and Apt, 1996, van Der Geest 1998, 2002, 2004).

Demographic structures in Africa are transforming in a unique way. Conflicts and HIV/AIDS have increased the probability of death among prime age adults, generating apparent perversities in life expectancies at different ages (Disney 2003). One of the consequences of AIDS pandemic has been that the elderly, especially grandparents, have returned to being caregivers of children in many countries. In Uganda, Malawi and Zambia close to one out of five children now live with the elderly (Subbarao and Coury 2004). The Joint United Nations Programme on HIV/AIDS and the World Health Organization estimate that more than 60 percent of all people living with HIV are in sub-Saharan Africa—some 25.8 million in 2005

(Joint United Nations Programme on HIV/AIDS, 2006). The lives of older people may be affected by their own illness, but it is more likely, given the age structure of the pandemic, that they are affected by sickness and death of their adult children. Not only do these older people face the loss of a child or children who may well have been a vital source of support and care giving, but many are faced with additional obligations and responsibilities for grandchildren and other members of their extended families. These dramatic changes are occurring against a backdrop of persistent poverty and deprivation (Lloyd-Sherlock 2000).

Sub-Saharan Africa remains the least developed and least urbanized region in the world. Approximately two-thirds of the population of sub-Saharan Africa still live in rural areas and rely largely on near subsistence agriculture or traditional pastoralism for their livelihoods. In such settings, families have to be very self-reliant. Chronic poverty becomes a critical risk factor for older people, and more than two of every five of the continent's inhabitants remain trapped in debilitating poverty (United Nations, 2006). In addition, while the continent has witnessed a decline in the number of armed conflicts since the early 1990s, persistent violence and in some cases seemingly intractable conflicts compound the region's problems and present critical obstacles to development in some countries (Marshall and Gurr, 2005; Porter et al., 2005).

The next few decades will see exponential increases in the absolute size of Africa's older population: the number of those 60 and above is projected to rise four-fold from 45.7 million to 183 million in 2050 while the proportion of older people will rise from currently 5 to 10% (United Nations Population Division 2004). An even sharper surge

in population ageing, moreover, can be expected if the AIDS epidemic—and the disproportionate death of younger and middle aged adults continues. Indeed, it is predicted that over the next 30 years the most rapid increase in the elderly population will take place in the less developed countries, trapped in poverty (The Ageing and Development Report 1999, WHO 2002a, Schwarz, 2003; Meydani et al. 2005). Nearly two-thirds live in the developing world where formal arrangements for old age support are few and far between, and the traditional arrangements, for reasons outlined below, seem to be on the decline. Ageing diminishes the capacity to work and earn. In much of Africa, the traditional safety net for the elderly is the extended family, especially their own children but recent developments have led to older persons emerging as an increasingly visible vulnerable group (Apt 2002, 2005; Apt and Grieco 1994; Help Age International 2002; Schwarz 2003; Hoskins 2004).

Apart from the pressures imposed by the AIDS pandemic, changing patterns of urbanization and globalization have further exposed older persons to the risk of poverty. In some countries, the elderly have become the prime breadwinners and/or caregivers (Apt 2004). As poverty deepens in the developing world, there is growing interest in the role that social protection measures can play in enhancing poor people's capacity to manage risks and promote their own development capacities to lift themselves out of poverty (Stiglitz 2002).

Extending social security coverage to the excluded in sub Saharan Africa is urgent. 50 percent of Africans are living on less than \$1 a day, less than 10 percent are covered and the continent has the least developed social security programs. About 90 percent are not covered by social security programs and most countries do not have

functioning social security programs (van Ginneken 1999, 2003; Bailey 2004; Bailey and Turner 2002). Notably, social security programs that exist in Africa are influenced by colonial heritage, with the programs in English-speaking Africa differing from those in French-speaking Africa. The majority of those surviving to old age already face a longer life of economic deprivation, with little, if any, social support. This is despite the fact that the elderly often make a significant contribution to family welfare and income, both through their involvement in tasks such as child care and through continuing income-generating labour well into old age (Meydani et al 2005).

Statutory programs cover a small percentage of the population (that is, wage earners) who tend to be concentrated in urban areas or public sector institutions. Unskilled wage earners, agricultural and domestic workers, the unemployed, people with disabilities, and the elderly are excluded. The issue of developing viable social protection programs can no longer be delayed given the emerging demographic profiles of the populations in the continent, and implications for health policy (Gruat, 1990; Darkwa, 1997a; van Ginneken 1999; Kalasa 2001; Lloyd-Sherlock 2005; Darkwa and Mazibuko 2002). With the declining importance of family-based and other traditional, often informal, institutions and support networks of care for the elderly, the ageing of the population has increasingly become a matter of public policy (Wenger 1994a, Mahmood 1999, Lloyd-Sherlock 2004a). Traditional risk-pooling institutions, such as the extended family and village community, are on the decline. At the same time the demand for security is on the increase, since industrialisation and accompanying urbanisation increase many social risks (Overbye 2005). Such inadequacies warrant greater attention to the extension of social security coverage and social assistance that targets poorer groups.

Urbanization and migration have led to the deterioration of the traditional family support system, resulting in the abuse and neglect of older people by family members (Help Age International 2002). Concerns over social security programme expenditure and administration, and structural adjustment programmes have added urgency and purpose to social security reforms. Rapid population ageing poses immense challenges to health and social services. The absence of social security systems in many countries means that there are no cushions for older people when they are longer able to support themselves (Barrientos 1998, 2002; Mackellar and McGreevey 1999; Help Age International 1999; Mahmood 1999; ILO 2000; van Ginneken 1999, 2003; Apt 2002; Hoskins 2002; Yeates 2003; Llyod-Sherlock, 2002). Development paradigms are being proposed to remedy the situation. Two major paradigms in contention are that of the World Bank and the ILO. While the World Bank's approach is more development oriented, the ILO's epistemological basis for action involves a specific conception of the social-individual, the state, civil society, the economy, and the role of welfare policy (Merrien 2001: 538). The merits and demerits of social security provision especially pension reform, its impact on poverty and alternative forms of social support for the elderly are receiving increasing attention amongst researchers and other organisations (Barrientos 1998; Mahmood 1999, Dixon 1999; The Courier 1999; Help Age International 1999; ILO 2001; Bonoli 2000; Bolle 2000; Gillion, 2000; Jutting 2000; Charlton and McKinnon 2001; Lloyd-Sherlock 2000, 2002; Maes 2003; van Ginneken 2003; World Bank 2001; Kakwani and Subbarao 2005).

Over the past decade awareness about population ageing in developing countries has heightened. In Cameroon, the ageing crisis is worsened by the absence of concrete state policy on social protection for self-employed workers and farmers. The situation is even worse for women, who continue to find subsistence by negotiating livelihoods in the informal economy (Fonchingong 2005). One of the key global problems facing social security today is the fact that those affected work largely in the informal economy, and hence are outside the scope of contribution-based social insurance schemes or tax-financed social benefits (Arber and Ginn 1990, 1994; ILO 2001, van Ginneken 1999). In low income countries, for example, sub-Saharan Africa and South Asia, more than 90 percent of the population is not covered, while in middle-income developing countries this percentage ranges between 20 and 60 percent. It is estimated that, worldwide, only 20 percent of populations enjoy adequate social security (van Ginneken 2003).

In the context of globalization, structural adjustment and chronic poverty, it is relevant to examine these factors, in conjunction with gender dimension of social protection policies. Labour market conditions are critical in shaping access to social security benefits. Women's entitlement to long-term social security is in many respects different from that of men on account of the assumptions which pervade the system about gender roles, labour market conditions, and outcomes (Arun and Arun 2001). Feminist scholarship in western countries has dealt extensively with women and social policy, pointing out the gender inequalities in the public provision of welfare, and documented the centrality of the male breadwinner ideology and economic dependency of women (Hernes, 1984; Lewis, 1983; Browne, 1998; Esping-Andersen, 1990; Sainsbury, 1999; Ginn and Arber, 1991, 1996a, 2001; Calasanti and

Slevin 2001). Increasing attention is paid to the basis of entitlement for women as mothers, workers or citizens and the gender assumptions of the welfare state in different countries (Sainsbury 1996, Friedman et al; 2003). However, it is apparent that there are important gender differences in terms of the economic opportunities and constraints facing older people. New directions in feminist gerontology and scholarship that emerged in the late 1990s have begun to catalogue the intersections of gender inequality in social security provision, although the theoretical and methodological frameworks are still in short supply (Calasanti 2004). The degree of relative deprivation of older women is noticeable in a wide range of respects. According to Chen (1998) and Ewing (1999) this includes reduced entitlements to social policies, increased burdens of care and domestic responsibility, greater likelihood of living alone, and, in some cultures, entrenched discrimination against widows. Consequently, the degree to which social provision for elders influences gender exclusion is a key consideration (Lloyd-Sherlock 2002).

The year 1999 was designated by the United Nations as 'The International Year for the Older Person'. The invisibility of older people from development debates is a grave mistake in economic and social terms: the contribution that these groups make to human welfare and development is huge, and could be even greater. The labour of old people is obscured by social norms which treat them as dependants (Sweetman 2000:5-8). The Secretary-General of the United Nations, Kofi Annan in a message on the occasion of 'The International Day of Older Persons', (1 October 2005) stressed the need to integrate gender and age perspectives into poverty eradication efforts¹.

¹ Message by Secretary General of the United Nations, in day of older persons on 26/09/2005, United Nations, Department of Public Information.

Echoing the plight of elderly women especially, the Secretary General stated further that:

‘Women make up a clear majority of the world’s older persons. The theme for this year’s observance of the International Day of Older Persons, “Ageing in the New Millennium: Focus on poverty, older women and development”, underscores the need to recognize the different impact of ageing on women and men, to ensure full equality between them, and to integrate both a gender perspective and an age perspective into legislation, policies, programmes and efforts to eradicate poverty. At last month’s World Summit, world leaders reaffirmed their determination to realize the development goals and objectives agreed in the major United Nations conferences and summits, including the Millennium Development Goals. An important part of this effort will involve the Madrid International Plan of Action on Ageing, by which Governments pledged not only to work for the security of older persons, but also to empower them, so that they can participate fully in the economic, political and social lives of their societies. As the number of older persons increases over the next generation, more of the people living in poverty will be older than 60 years of age. But they will also be ever more involved in efforts to eradicate poverty. Older persons have already shown their commitment, their determination and their drive to meet this challenge. Too often, however, they and their potential contributions are overlooked. Yet we will not eradicate poverty, or achieve our other goals, without understanding how older persons - and women in

particular - experience poverty, and unless we promote the active participation of older people in the design and implementation of appropriate programmes and activities. On this International Day of Older Persons, I call upon Governments and all concerned actors to promote a society for people of all ages, to redouble efforts to implement the provisions of the Madrid International Plan of Action on Ageing, and to work towards changing attitudes, policies and practices so that, in the twenty-first century, the enormous potential of older persons may be fulfilled’.

Undeniably, the ensuing debate points to the sombre fact that older women are more vulnerable than men. This reflects processes occurring throughout the life cycle (less access to salaried employment, and fewer opportunities to develop workplace skills and accumulate assets for later life, etc) as well as processes occurring once they reach old age (they are more likely to be living alone and are less likely to have pension rights) (Lloyd-Sherlock 1999: 49), with greatly reduced socio-economic support (Gorman 1995), and in persistent poverty in old age, as the opportunities available to the old to escape from poverty decline with age (Heslop and Gorman, 2000). The feminist appreciation of gender relations compels us to see women and men, and femininities and masculinities, as inextricably linked (Calasanti 2004). The pressures from structural adjustment policies, persistent poverty and slow economic growth rate have affected the implementation of reform of formal social security system that is in a fragmented state. Since the 1980s, the policy focus on efficiency and cost-saving advocated by donor agencies such as the World Bank in many developing countries has drastically reduced investment in public health and welfare

provision. The reduction of social spending under structural adjustment programmes has shifted the burden of care back onto the family, and particularly onto older women (The Ageing and Development Report 1999, Fonchingong 1999).

There are 100 older women for every 86 older men in Africa now (Help Age International 2002). Even though both older men and women continue to work well beyond the official retirement age of 60 years (Apt 1997), older men tend to have more opportunities to earn income than elderly women. Women's economic status in old age is negatively affected. Getting old tends to have more negative implications for the economic situation of women than men, because of the deep-seated gender inequalities in ownership of assets, employment history, and control over family income and assets. In many cases, both demographic (longer life expectancy of women) and social factors (the age difference at marriage, higher remarriage rate for men, social security privatization, women's dependency on the state) lead to precarious living conditions for older women (Mahmood 1999, Ginn and Arber 1998; Estes 2004). Feminization of the aged and gender differences in social and economic status present a challenging trend for Africa. Gender-specific policies and programs will have to be enacted to address issues confronting elderly Africans on the continent (Darkwa and Mazibuko 2002).

In spite of the advent of the modern welfare state in some African countries, non-statutory welfare programs continue to be the only source of security to a sizable percentage of the African population (Darkwa and Mazibuko 2002). Cultural and religious societies, rotating credit societies, funeral societies, and informal saving societies abound throughout the continent (Ardener and Burman 1995; Midgley, 1994;

Molyneux, 2004). Concern has also arisen over the traditional systems of social security, increasingly under strain. This is triggered by other factors such as urbanisation, poverty, unemployment and slow economic growth, which have all led to a gradual disintegration of the extended family system, rendering it ineffective as a social security institution (Kaseke 1999). The demographic transition and its impact on the welfare of the elderly in Africa is telling (Darkwa and Mazibuko 2002). In countries exposed to the AIDS pandemic, the breakdown of the family as a risk-pooling agent is particularly dramatic. AIDS tends to hit adults in their prime, when they are otherwise the security providers in extended family networks (Overbye 2005). Traditionally, however, the collective solidarity of the extended family, clan and ethnic group was the mainstay of income and social security for the majority of Africans (Kayongo-Male and Onyango 1984:80–82; Kaseke 1997:42). Family ties are eroding and the pressures on family cohesion are tremendous and increasing, owing particularly to the devastating consequences of the HIV/AIDS pandemic in many African countries.

Elsewhere, it is argued that informal social security complements the formal system and there is need to document what still obtains and what has been eroded. Within the different forms of informal social security, Olivier et al (2002) distinguish two major groups: the household-based system (fashioned within family settings and community) and organization-based systems (membership-based). As many developing countries face chronic economic crises and hence the share of the national budget devoted to social security services is shrinking rather than increasing (Maes 2003), it is important to assess the coping mechanisms and adjustment patterns of the vast majority of the population threatened with exclusion. These excluded categories are mostly informal

sector workers, although they represent 75 to 80 percent of the working population. Though the numbers of organization-based systems are on the rise, many workers in the informal sector are unable or unwilling to contribute a relatively high percentage of their incomes to financing social security benefits that do not meet their priority needs (Olivier et al; 2002; Willmore 2001; Maes 2003).

In summary, as most of the studies undertaken in many African countries have shown, three key arguments are highlighted. Firstly, there is an increase in mortality rates of prime age adults due to the HIV/AIDS pandemic and from regional conflicts. Second, the traditional safety net of the extended family is fragmenting. Third, in a few countries, such as Cameroon, unemployment has soared leading to greater neglect and inability to provide support for the elderly. Evidently, most old persons are shouldering the responsibility of family maintenance as they become principal breadwinners through pension income or wages and a vast majority on informal sector activities. While a number of studies have examined the consequences of pension reforms and inadequacies, few studies have systematically analyzed the welfare situation among the elderly (relative to other groups) in low income countries in Africa. The important role played by old persons in securing livelihoods is often overlooked. This research aims to fill this gap by delineating the welfare arrangements, coping mechanisms and alternative survival strategies of old persons in Cameroon.

This thesis is structured along the following lines. This Chapter presents the introduction and background. It situates the contemporary debates on population ageing and elderly wellbeing with focus on Africa. It critically reviews the landmark

studies, different viewpoints and approaches on social security by identifying the areas explored and unexplored by previous research. Chapter two engages with the theoretical strands underpinning the research. It discusses the high points and failings of frameworks like the Marxist, dependency, neo-liberal; welfare and modernization approaches, alongside feminist critiques on the welfare state and subordination. The central concern is whether social capital theory constitutes a workable approach to understanding the welfare and adjustment patterns of the elderly.

In this research, I also evaluate the possibilities and options of a sector-based approach to social protection encompassing the voluntary sector and organisations in civil society. Chapter Three situates the provision of social security by mapping out the social security institutions in Africa with emphasis on regional specificities, strengths and weaknesses. In Chapter Four, I turn to social security and the Cameroonian perspective. This Chapter engages with the pitfalls of Cameroon's social security system and its impact on elderly welfare based on available literature I have pieced together. It concentrates on the alternative forms of reciprocity and mutual support. By tackling the controversy raging on the subject of gender and social security, Chapter Five presents the fault lines identified in attempts to theorise on gender concerns and its implications in social protection. In Chapter Six, the research methods and field procedures are outlined. The remaining four chapters (Seven to Ten) present the field findings of my own research, drawn upon analysis of the entire sample studied. The objective here is to uncover the dimensions of elderly welfare by unlocking the adjustment patterns and coping mechanisms employed by elderly men and women. Dedicated to case analysis and drawing on scenarios, Chapters Seven to Nine details the accounts from respondents based on their roles, contribution, survival

strategies; the problems affecting their livelihoods. In Chapter Seven, significant trends emphasizing socio-demographic, economic variables and coping mechanisms of the elderly are presented, while in Chapter Eight, thematic discussions based on a typology of recurrent themes are discussed. In assessing the extent to which social capital is being re-shaped and mobilised by old people, in Chapter Nine, the research presents the semi-formal protection mechanisms that are adhered to. It examines the schemes that are being fashioned to provide social protection. The aim here is to provide further insights into semi-formal welfare provision. The concluding Chapter (Ten) summarises the findings of my research, addresses its social policy implications and the way forward. It discusses the limitations of the research and raises questions for further research.

With the use of a gender analytical framework and indices of continuity and change, this study draws from mutual societies, female *njangi* groups, male *njangi* groups, faith-based organizations and village development associations. I designed these indices specifically for the purpose of this study, occasioned by the current perspective of the way forward for social security in Cameroon, given what I consider, either to be the demise of the welfare state or a non-existent and inconsequential one in relation to social security coverage and elderly welfare support. By broadening the social security concept to include the family and individual households, mutual societies, the role of organizations in civil society and village-based support networks, this lead study moves into an area unexplored by previous research on social security in Cameroon.

1.1 Inadequacies of Current Literature and New Dimension of the Research

The ageing of individuals and populations and the changing position and well-being of older people in sub-Saharan Africa present a set of key challenges for African nations to begin to address. Yet evidence and a strong knowledge base of information on the nature and dynamics of poverty, health, social support networks, and the changing roles and responsibilities of older people and their implications are lacking. To fill this gap and provide information vital to the development of appropriate policies and programs, there is urgent need for an enhanced research effort on ageing in sub-Saharan Africa, pursuing a variety of data collection strategies and analytic approaches (National Research Council 2006). Research must illuminate the social and cultural reality of local context and ageing environments, and the real needs of older people and their families within these settings (Sokolovsky 1997; Ferreira 1999; Apt 2005).

Many authors have pointed out the social security schemes were adopted from the colonial powers and were really intended to cover the small body of employees working in the colonial administration plus a few mining workers. This has meant that more than 90 percent of the population who made their living from subsistence farming were not covered. The International Social Security Review (2003) with its caption "Social Security in Africa: Inherited Burdens and Future Priorities" paints a grim picture of the exclusive and inadequate social security coverage of the needs of the continent's people. In many countries, the contingencies which are covered, the rate of coverage and the real value of average benefits have changed very little over the past 40 years. Instead more than half of the world's population are excluded from any type of statutory social security protection (Jenkins 1993; Midgley 1984a, 1984b;

Midgley and Kaseke 1996; van Ginneken 1999, 2003; Dixon 1999; SSA 1997; ILO 2000, 2001; World Bank 2001; Butare and Kaseke 2003).

Current literature on the elderly has not taken sufficient account of the economic contribution of the old and of positive externalities in old age support. The conventional view that all older people are financially dependent and make no contributions to the economic welfare of others is being questioned (Lloyd-Sherlock 1999, Barrientos 2002). The immense contribution of older persons to social and economic development needs to be acknowledged. The key policy question facing development policy-makers today is addressing the question of the elderly as a burden or an asset. Further, development literature cannot afford to ignore any longer the key social and economic role played by senior citizens in a context of soaring unemployment and economic recession in developing countries. Policy makers must recognize that investment in the productive and social capacities of older women and men is likely to yield far-reaching results in terms of community welfare and economic return (Beales 2000). It is also argued that poor older people are a highly heterogeneous group for whom western notions of old age often do not apply; the context in which they live are varied and highly dynamic. Also, the needs of older people are interlinked and should elicit intersectoral policy responses (Lloyd-Sherlock 2000). Older people are seen as marginal to economic activity and development, and are excluded from labour force statistics, yet empirical research from around the world challenges this view (Kaiser 1994; Gorman 1999).

Worse still, gender as a significant social category, has been not sufficiently accounted for in the literature on 'feminization of poverty' in responses to economic

globalization (Pearson 2003). In claims to theorise about women's lives, there have been distortions of the challenging context in which they operate (Marchand 2003). Walby (1997) argues that in the separation of the 'public' from 'private' social worlds, men have become the people of action in the public realm, while women are subordinated to the private realm of the family and their status determined accordingly. For feminists, perspectives on social life have either reflected this phenomenon or attempted to justify it as a natural state of affairs.

Research on ageing has focused narrowly on pension reform and the formulation of an appropriate social security package. The existing literature often is caught up in generalizations and the lack of empirical data on the situation of old people in Africa. Existing research has not probed into the welfare, adjustment patterns and needs of a vast majority of old people especially in developing countries, disconnected from paid employment and public service benefits. It is difficult to find truly ethnographic data on the specific historical, cultural, economic and social conditions of old people and the growing types of support networks they are yearning for in the face of declining conditions of living and diminished social services.

My study takes a step further from these narratives in three respects: a) it problematizes social security in Cameroon by directly probing into the 'worlds' and social welfare condition of old people in the North West and South West Provinces, b) it evaluates the gender implications of an ageing population and its impact on livelihoods, c) it analyses head on, government policy on the elderly, formal and informal social welfare provision for old persons. This permits a better appraisal of prevailing conditions, needs and the dislocations associated with family care and other

informal networks of support. My concept of semi-formal protection is novel in that it attempts to explore the overlap between the formal and the informal forms of social security coverage represented by social/cultural networks of mutual support, solidarity and reciprocity that the elderly are clinging to. These networks are captured in the research with reference to *njangi* groups, village development associations and mutual societies that are increasingly being either revitalised or newly fashioned to provide social support for members including the elderly. Essentially, this study maps welfare patterns, targeting older persons in urban and rural communities. The approach enabled a deeper understanding of the hidden contribution of the elderly, often obscured and masked in the literature on ageing.

Some central concepts used in this research need to be defined. Firstly, social security is conceptualised as the range of safeguards relating to the provision of some form of formal and informal insurance in old age. Such needs include: access to pension, food, daily care, access to health care and a direct source of income. The inability to secure these needs increases the threshold of vulnerability. Pensions are not automatic as it is incumbent on employers to contribute towards employee pension entitlements to the National Social Insurance Fund. Non-covered typifies the situation of self-employed and especially farmers and petty traders, the vast majority who do not benefit from either social insurance or social assistance schemes as stipulated in ILO convention 102. Secondly, old persons are those who range from 60 years and above, considered to be of pensionable age, the age ceiling for retirement from the public service. When these public servants retire, they are entitled to a pension based on monthly deductions from their salaries during the period of servitude. The age 60 is used even though on the contrary, private sector workers, out of the realm of the public service,

retire depending on the nature of contracts. Thirdly, gender dynamics conjures up the peculiarities associated with access to social security provision, patterns of care and support received by the elderly. It seeks to unravel the roles, opportunities and constraints effecting elderly men and women.

1.2 Statement of the Research Problem

Statutory pension programs cover only a small percentage of the population. The vast majority of the elderly, who do not have any connection with the public service in Cameroon, are excluded especially women. Developing viable social protection programs can no longer be delayed, given the ageing of the population. With the declining importance of family-based and other traditional, often informal forms of support, the care of the elderly is increasingly problematic. In an interview with Radio Netherlands, February 11, 2005 Nana Apt, a commentator on ageing in Africa contends: "People think that ageing is not an issue (in Africa) because, they say: 'The extended family will take care of the elderly - so it's not a problem at all!...the image of the extended family is no longer true: it's changing and the fact remains that in the modern world, when the young earn small salaries, they can no longer take care of themselves or their own immediate family..." Urbanization and family dispersal has had a negative effect on the pattern of balanced exchange between generations. Urban living means that the old and the young no longer inhabit the same dwelling and it increasingly results in the formation of nuclear families. The exodus of young people from rural areas to the cities in Africa has raised the rural proportion of older people. Also, traditional family support systems for the frail elderly is on the decline as younger family members living in urban areas may provide money but are less likely to be physically present to provide health care for ailing family members (Apt 2004).

The near absence of formal forms of social security has led to the springing up of alternative forms of social protection. Consequently, many of the elderly and those at the threshold of retirement are looking to age-old traditional and cultural mechanisms such as saving and rotating credit associations and schemes (*njangis*), faith-based organizations, village development associations and mutual societies as alternative forms of semi-formal protection. Given that women constitute more than 52 percent of the population and that about 94.6 percent are operating in the informal sector (Ministry of Women's Affairs 1996, 2002, ILO 1985; Acho-chi 2002), it is imperative to assess the coping strategies and adjustment patterns of this category of ageing women.

The point being hammered at is that Cameroon's social security system needs revamping. Cameroon's Minister of Labour and Social security makes the case for this overhaul. Recently (February 14, 2006), the Minister lamented the ailing social security system:

“only 10% of Cameroon's active population benefits from social security...Apart from covering just a small portion of the population, the present system of social security in the country does not address the burning issues of unemployment and health. 90% of the active population made up of workers in the informal sector, people in the rural world and self-employed have no social protection”.

The minister went further,

“...worse still, public servants who are covered do not receive their entitlements regularly. The families of deceased public servants face difficulties to get a simple coffin in order to bury them after these persons have served the state with total loyalty”² (see Cameroon tribune 14/02/06, Mutations Quotidien 14/02/06, 16/02/06; CRTV online news 14/02/06; Le Messenger 15/02/06; my translation).

Faced with the implementation of Structural Adjustment Programmes³ and economic restructuring introduced by the Bretton Woods institutions in the late-1980s in Cameroon (Fonchingong, 1999), the government was trapped in a crisis of insolvency. The ensuing cutbacks in public expenditure coupled with the decline in the purchasing power of most households have had adverse effects on families that are mired in poverty and household survival is severely compromised. With the upsurge in unemployment and the migration of youth in search of jobs, the situation of the aged is precarious. According to a report of the Cameroon National Institute of Statistics, unemployment figures represent 17% of the active population. The same report states that 90% of Cameroon workers secure livelihoods in the informal sector with 69.3% earning less than 23,500 CFA which is the minimum monthly wage. 53% of the population are involved in strictly agricultural activities with the minimum monthly

² The press coverage and captions reflect the magnitude of the problem of Social Security in Cameroon. See Mutations Quotidien ‘Cameroun: 90% des travailleurs sans Sécurité Sociale. Révélation faite hier au cours de la conférence des services centraux et extérieurs du Ministère du Travail’ ; ‘Non-assistance : Le Cameroun au sommet de L’insécurité Sociale’ ; Cameroon Tribune ‘Labour officials to reinforce Social Security’ ; Le Messenger ‘Sécurité Sociale : 90% de travailleurs ne sont pas assurés. Les travailleurs Camerounais vaguent dans l’insécurité’.

³ Structural Adjustment Programmes (SAP) was implemented in the late 1980s. This led to a loss in public services. In 1992/93, there were two drastic salary cuts (about 60%), followed by the devaluation of the CFA Franc in January 1994. This further eroded the purchasing power of most households (see Fonchingong 1999). SAP forced older people to pay for services that were previously free (HAI 2002). The SAP and devaluation raised new challenges and problems for social security coverage and extension (see ILO 1997 meeting in Yaoundé, Cameroon on the consequences of devaluation).

remuneration not exceeding 11,000 CFA (Le Messenger 21/11/2006). Against this backdrop, the lack of safety-nets in social welfare provision (healthcare, daily support and other social services) is affecting livelihoods and making life unbearable for the vast majority of the elderly without any form of formal support.

In the face of the steady growth in the informal sector and a surge of dependent and vulnerable groups, it is fundamental to address these scenarios. The mushrooming of organization-based forms of social security commonly referred to as mutual societies (*mutuelles*) within the public sector is proof of the near collapse and inadequacy of formal social security programs for the elderly. Along these lines, the greater reliance on saving and rotating schemes (*njangis*), village/cultural development associations and mutual societies by public servants and those caught within the vagaries of the informal sector alike is a pointer to the yearn for alternative forms of social security.

Even the traditional systems of support for the elderly anchored on immediate and extended family networks (historical, cultural, and social) are under severe strain. In the not too distant past, families deemed it a holy privilege to provide care and support to the elderly generation but today these norms are weakening. Addressing the fragmentation associated with social protection for the elderly brings to the fore the central question: 'How are the elderly coping, and what policies could increase their well-being?'

1.3 Research Questions and Specific Objectives

Other key questions of interest to the research are: Do the old constitute a burden or an asset to households and communities? What forms of care do old people receive

and what gender inequalities are associated with the provision of care and support for the elderly in rural and urban areas? How are highly disadvantaged and vulnerable groups like widows and widowers surviving? Can semi-formal forms of coverage provide adequate safety-nets for old persons? Can old persons still rely on traditional forms of reciprocity and other social networks for their care and material support?

In line with the research questions, the specific objectives of the study are to:

- a) Determine qualitatively the contribution of the elderly to households, communities and society.
- b) Examine the welfare, adjustment patterns and coping mechanisms of the elderly in rural and urban areas.
- c) Discuss the gender aspects of elderly care and support for highly disadvantaged groups- widows and widowers
- d) Examine the role of mutual societies, *njangi* groups, faith-based and village-based organizations as alternative forms of informal protection for the elderly.
- e) Evaluate traditional, kinship-based and other indigenous forms of social protection for the elderly in the face of structural adjustment, unemployment, urbanization, and migration.
- f) Make recommendations on a shared system of social support that takes cognizance of formal and informal care.

In line with the research questions which shed light on the problematic of ageing in Cameroon, the re-invention and search for alternative ways of providing social support for old persons, the research assumptions to guide the study are: Gender disparities and biases accompany the welfare and adjustment patterns of the elderly;

semi-formal networks are becoming prevalent vehicles for social security provision and mutual support; familial support and other traditional forms of elderly welfare support are under severe strain.

Chapter Two: Theoretical Considerations

2.0 Introduction

Drawing on diverse bodies of theories on ageing and development, this research unearths the theoretical strands and paradigms informing old age, social change and development. First, it analyses the shortfall associated with modernization, dependency, and neo-liberal economic (impact of structural programmes on livelihoods) theories through a critique of the building blocks integrated in the development literature. Subsequent analysis dwells on the discourse of colonialism and its downside, old age, poverty and livelihoods with an appraisal of the role of the state in social protection. Central to the analysis are the concepts of social security, social protection and feminist critiques on the welfare state and women's subordination. The final section engages with social capital theory and takes forward the task of sketching the norms, discourses and ideologies of social capital building through individual and collective agency. The theoretical framework is analysed within the context of resource constraints, diminishing livelihoods, and the high poverty profile of most households.

With reference to the demographic argument, improvements in health care mean more people survive to old age, which exacerbates the problems in developing countries. There is a strong argument for social policy formulation in favour of older people, especially those in rural areas who are the most affected, yet neglected category. The near absence of basic services, rural infrastructure in a state of near collapse coupled with the hard fact that a vast majority, particularly rural dwellers are not covered by any formal schemes of social security remains a bitter pill to swallow for most governments in low income countries including Cameroon. These country-specific

problems have not been adequately dealt with within the framework and typologies by modernization, dependency and welfare theorists. Of course, any theoretical analysis of welfare, social security and social policy has to be sensitive to the history of difference between sets of countries as determined by the era of colonial relations and the corresponding variance in the formation and purpose of public institutions in the colonial and post-colonialist era. Modernization theory which highlights the positive role played by the developed world in modernizing and facilitating sustainable development in underdeveloped nations, often contrasted with dependency theory. Its central tenet is the fact that third world countries have fallen behind with their social progress and need to be directed on their way to becoming advanced (Scott 1995). A theory antithetical to the modernization model is the Dependency theory. Its proponent, Wallerstein (1984) argued that 'the periphery' (both between and within countries) localities, are in fact, exploited and kept in a state of backwardness by a core; a core which profits from the peripheries' cheap, unskilled labour, and raw materials.

While modernization theory has been the most prominent theoretical framework used to explain the ongoing changes in family support to older people in Africa, some African gerontologists have criticized the theory, arguing that it is overly deterministic, simplistic, ethno-centric, one-sided and focused on the Western world and culture (see, for example, Ferreira, 1999, Aboderin 2004). The family values and respect for old people found in traditional societies are set against the 'modernising' values of individualism, the work ethic, and 'a cosmopolitan outlook which emphasizes efficiency and work' (Cowgill 1986). Others have blamed the ingrained structural inequalities experienced by most people in most developing countries in

earlier life. Impoverishment in old age and social inequality may be a common cross-cultural experience of the ageing process, rather than simply resulting from “modernisation” (Sandbrook 1982; Neysmith and Edward 1984; Sen 1993; Irwin 1999; Apt 2002) Lifelong poverty - caused by low wages and high unemployment, poor health services, gender discrimination and lack of access to education - leaves successive generations less able to help each other (The Ageing and Development Report 1999).

2.1 Downside of Colonialism and Alternative theoretical Frameworks

Most past and contemporary analysts on African development continue to highlight the role of colonialism in African development and underdevelopment. Macpherson (1982:34) avers that whether a country was incorporated into a colonial structure or not, penetration by expanding western capitalism in general was a profoundly important factor in determining the nature of welfare formulation in that country. Such analysis provides an important clue to the policies pursued by the colonial administration in respect of social welfare. Perhaps the most important legacies of the colonial administration which needs to be emphasized here are the establishment and maintenance of the state apparatus and second, co-option of local groups who would not only allow that apparatus to function but would provide crucial assistance to its functioning. The appropriation of particular groups, the down play of social welfare reform constitutes the social dilemma of Africa’s current underdevelopment and social policy failings (Hyden 1980; Howard 1990, Hardiman and Midgley 1982, Macpherson and Midgley 1987; Booth 1985; Brohman 1995; Livermore 1997, 1998; Sen 1999; Sheradden 1991). With the benefit of hindsight, a particular tenet of colonial administrative system that has been overtly criticised is its essentially

bureaucratic and clearly defined hierarchical authority structure. Such bureaucracies, as described by Macpherson (1982) produced highly centralised systems of administration; the nature of colonial administration was such that virtually all real power was vested in the bureaucracy.

Colonial policies targeted those who had retired after serving in the public service. Even post-colonial regimes found it impossible to break away from this inherited tradition. As uncovered in this research, the bureaucracy affecting pension administration in Cameroon and concentration of social protection within the public service has meant that those who do not pursue a career route with the public service are completely cut off from any formal social protection. Even more worrying is the fact that retirees and pensioners are compelled to undertake stressful and risky journeys to the national capital Yaoundé to follow up files for pension entitlements. One of the fundamental features of social welfare as developed by the colonial administration was rooted in the premise that welfare would drain rather than contribute to the economic resources of the country (Midgley 1981:52-3; Macpherson 1982).

Dependency and under-development with roots in colonialism (Mamdani 1996) are as important to a deeper understanding of contemporary social policy as they are to the economic plight of the third world and ageing populations in particular. The fundamental issue in the post-colonial context is the irrelevance of the state and the dilemmas of providing social services in the context of resource constraints and economic meltdown. Macpherson (1982) contends that prior to the penetration of colonialism; the majority of third world societies were small, scattered local

communities which were basically self-reliant and self-sufficient. Community solidarity and mutual aid was an unplanned and essentially unconscious feature of communities of people marked by a relatively high degree of equality and cohesiveness and with relatively few surviving to old age. At low levels of production, solidarity and services from people to people within communities has been seen as characteristic (Sullivan 1992), and it has been argued that in pre-colonial societies, people faced with common problems supported each other, though the nature of that support, the levels of tolerance and the degree of repressive control in traditional systems has been questioned (Goldthorpe 1975).

It is argued that for many poorer, partially capitalized societies, people's security relies informally upon various clientelist relationships and other informal arrangements. This is the institutional reality for many of the poorest parts of the world especially sub-Saharan Africa (Bevan 2004b). Considering the diminishing role of the state highly visible in rural development, the stakes are high for social security provision in developing countries. Lloyd-Sherlock (2002:754) contends that there is need to re-define the role of the state in 'welfarism' by emphasizing the changing economic, social and cultural contexts in which social policies for older people are enacted. African states share a generalized system of patronage, neo-patrimonialism and an acute degree of apparent disorder and paralysis, as evidenced by a high level of government and administrative inefficiency (see Bayart 1993, Chabal and Daloz 1999; Bayart et al.1999; van de Walle 2001, Fonchingong 2004).

Relationships between the state and citizens can be reciprocal within small-scale communities, but in the wider society, these relationships are more likely to be

hierarchical and thus clientelist, reflecting severe inequalities in the control over resources and institutions (UNDP 2002). These countries are trapped by economic recession, inept management; lack of accountability and poor governance which makes it even harder for the respective African governments to tackle the pressing problem of social protection for its senior citizens. Older persons are usually deemed to be those aged 60 and above and poverty studies have singled them out as one of the groups experiencing deprivation because of their stage in the lifecycle (World Bank, 2000).

Recently, contemporary African researchers have adopted alternative theoretical frameworks to better understand how ongoing economic and social changes affect older people. For example, some researchers have suggested an alternative explanation for a possible decline in material support for older persons: rising economic hardship (Aboderin, 2004; Nyambedha et al., 2003). Sub-Saharan Africa faces a greater set of development challenges than any other major region of the world, and, on average, income per capita is now lower than it was at the end of the 1960s (World Bank, 2006a, 2006b). Although the region's per capita gross national income has grown at a rate of around 3 per cent per year for the past two years, it still stands at only \$600 per year. An estimated 516 million people in the region are forced to survive on less than \$2 a day, and 303 million on less than \$1 a day (World Bank, 2006a, 2006b). In contrast to such countries as China and India, where substantial progress has been made over the past five years in combating poverty, the number of extremely poor people in sub-Saharan Africa has almost doubled since 1981 (Chambers 1995; Ellis 2000, World Bank 2005). Consequently, sub-Saharan Africa is home to a growing share of the world's absolute poor (United Nations, 2006). Thus,

rather than emphasizing weakening filial obligations, some researchers have argued that declines in support for older people may simply reflect a growing incapacity on the part of the younger generation (Ellis 1998, Aboderin, 2004). Increasingly, it appears that sub-Saharan African societies are being asked to cope with population ageing and a catastrophic health crisis with neither a comprehensive formal social security system nor a well-functioning traditional care system in place.

There is therefore a pressing need to address not only the coverage of social security schemes but also to integrate health care and poverty reduction schemes for the very poor and vulnerable. Qualitative studies, such as those sponsored by the World Bank and others in the late 1990s and early 2000s, provide a basic picture of household living standards, but they do not focus explicitly on the condition of older people. When investigations have included older people, they reveal that poverty in old age is associated with poor access to paid work, basic services, and social networks, and there is a close relationship between older people's ability to contribute to traditional roles and responsibilities and their ability to access support (Barrientos et al., 2003). The experience of poorer countries in the South, and now of transitional countries is a reminder of the central contribution of personal and family resources to the universal human need for security. It is more starkly observed precisely because the formal institutional frameworks for the provision of security are so precarious and fragile, if not altogether absent (Wood 2002). The legitimacy and governance of public institutions are too contested and personalized to guarantee long-term rights to those groups that are in greatest need. As a result, people have to engage in wider strategies of security provision, risk avoidance and uncertainty management. In more successful parts of the developing world, rapid capitalist development is eroding

absolute poverty, but frequently at the same time heightening insecurity and vulnerability.

In pursuit of this general argument, Wood and Gough (2004, 2006) provide a conceptual framework within which to consider a wider range of institutions than is normally acknowledged in social policy discourses. This entails a comparative understanding of different types of welfare regimes in the South. States in poor countries have problems of legitimacy and well-functioning labour and financial markets are not pervasive. They argue that the State may not be a privileged key institutional actor and most people remain peripheral to formal waged employment. However, welfare regimes are constructed in relation to existing structural divisions of societal power particular to them. They hold that there is no 'one-size-fits-all' policy approach for improving social policy outcomes. They suggest that future trajectories of welfare regimes in this context will be 'path dependent' driven by grass-roots public action.

Second, problematic conditions limit the capacity of the state to act in a compensatory way for the inequitable outcomes of the market in highly unequal societies (unequal in both a vertical and horizontal sense). Third, a comparative conception of social policy has to embrace non-state centred actors. This implies, fourthly, rights and entitlements may also be found (in some instances, securely) in the informal domains of social relationships and cultural expectations. Some of these domains are more formally organized (churches and mosques, charities, NGOs and philanthropy generally), while others are more personalized in a range of clientelist and reciprocal (perhaps kin) arrangements. Finally, attached to the notion of "regime" is the

assumption of path dependency, whereby outcomes from political economy and the deliberate interventions of state and non-state actors reproduce stratification, inequalities and power differences. Within this there is some variation: simple reproduction totally enshrines path dependency, whereas “extended reproduction” introduces possibilities of new mobilizations, identities and solidarities with the potential to alter the regime’s direction.

Theorising on welfare rights and social policy, Dean (2002) argues that the concept of welfare pluralism rests on the idea that, instead of the welfare goods and services, a significant level of provision should also come from the ‘informal’ sector (families and communities), the ‘voluntary’ sector (independent self-help or non-profit making organizations) and the ‘commercial’ sector (private enterprises). The suggestion is not that the state should no longer guarantee the welfare rights of the citizen but that guarantee should not necessarily be honoured through the direct provision of services by public sector organizations. The state, Dean (2002:15) contends, might instead fund the provision of services by other agencies, or it might do no more than regulate the standards of provision made by such agencies. The promotion of the informal sector lies at the heart of the development of policies of community care. In practice the greater part of everyday health and social care takes place within households (Rose 1988) and, for everyday needs, most people do tend in the first instance to look for help from members of their family (Beresford and Croft 1986). The implementation of a range of social policies that improve on welfare, livelihoods and functioning of families and communities is crucial in social security provision.

2.2 Old Age, Poverty and Re-appraising the Role of the State in Social Policy

Central to efforts at poverty alleviation amongst the elderly is tackling vulnerabilities resulting from abject poverty and lack of basic needs. Old age is one of the three periods in the life cycle when the old are at an increased risk of poverty (Alcock, 1997). Studies on old age and poverty strongly associate old age poverty with reduced capacity to work arising from the ageing process; a status which few if any can be expected to escape; and both a function and cause of inter-generational poverty (Heslop and Gorman, 2002).

Regardless of original economic status, a reduced capacity for income generation and a growing risk of serious illness are likely to increase vulnerability of elders to fall into poverty (Lloyd-Sherlock 2000). Qualitative studies conducted by Help Age International also indicate a strong existence of severe and long-term poverty among older people in the developing world. Conditions of absolute poverty are associated with an absence of income security, inadequate family or social support and poor health combined with inadequate health care (Heslop and Gorman, 2002). Despite the steadily weakening capacity of poorer households to provide long-term support for older persons, the family is the main source of support for poor old people.

Old persons survive better when they can either provide their basic needs or are close to family members who can be of assistance. Any such assistance should include income to meet the required expenditure needs and social support. That is why there is increasing evidence showing that older people without adult children and those who are widowed are more vulnerable to chronic poverty. In addition, widowed and childless women are especially vulnerable in societies where they lack rights of ownership and property is inherited through the male line (Gist and Velkoff, 1997). In

most countries of the developing world, health services are perceived by older people to be particularly difficult to access due to many factors including poor attitudes of health staff towards poor and older people, shortage of supplies, lack of information, lack of funds and poor implementation structures (Heslop and Gorman, 2002).

In Cameroon, there are almost no specialized geriatric services in the government health facilities. Negative attitudes of service providers and poverty notwithstanding, the poverty strategy paper for Cameroon reveals that distances to health facilities, lack of physical and financial capacity to reach the facility and the prohibitive cost incurred for treatment, especially drugs, are some of the factors that hinder older persons from accessing health care. There is also general institutional exclusion on the basis of age. Access to credit is almost universally denied to older people. Older people are unable to access micro-credit or low-interest loans from NGOs and government programs because of the explicit age barriers and lack of training, skills or confidence (Heslop and Gorman, 2002). Older people are more likely to spend much longer periods in poverty because of limited opportunities to work (Lloyd-Sherlock 2000). Whilst labour can provide a source of living for poor able-bodied people who lack other assets and income, a key factor of older people's poverty is their diminished capacity for labour, more especially in the informal sector, and their exclusion from formal labour markets. In the absence of social security and the failure of most schemes to reach the poorest, maintaining a livelihood or contributing to the household livelihood remain primary tasks.

Social policy, as Lloyd-Sherlock (2002:754) attests, has had to respond to a series of challenges. The first, and perhaps most significant, of these is a generalized

perception of a social policy 'crisis' and the need to reappraise the role of the state. This has been closely associated with an apparent paradigm shift away from state-centred welfarism that emphasized solidarity and aspired to universality. In its place, he argues, has come a neo-liberal model, which emphasizes individual agency and pluralism, while playing down the role of the public sector. This shift is reflected in international debates about social policies for older people, including pension reform and health care. It is admitted that the times in which we are living are making the management of welfare states much more difficult. The crisis has its roots in the economic process of globalisation (Glennerster 1999; Esping-Andersen 1996). A growing proportion of the population is almost permanently out of work and plays only a marginal role in society. In addition, welfare states have to cope with an ever-increasing demographic imbalance (as more persons get old) which is putting up the costs (Merrien 1998).

Few developed countries have profoundly reoriented their welfare policies in response to neo-liberal dictates with a strong ideological attachment to state welfarism, yet the paradigm shift has been strongly felt by many developing countries. In these countries including Cameroon, fiscal constraints and poverty remain acute and the influence of multilateral organizations such as the World Bank and International Monetary Fund is much larger. A number of African countries, such as Cameroon, Ghana, Tanzania and Tunisia, have implemented structural adjustment programmes. Unfortunately, these programmes have adversely affected the social security schemes because they have undermined their viability. This is despite the fact that structural adjustment programmes have led to 'an increase in social protection needs' (ILO, 1994), even though social assistance often remains underdeveloped (van Ginneken, 2003:56).

Buttressing the point, the ILO notes that the major consequence of structural adjustment programmes on social security has been the shrinkage of formal-sector employment. This has eroded the revenue base of social security schemes. In addition, the devaluation of local currencies has weakened the value of benefits.

The changing social, economic and cultural context in which social policies for older people are located constitutes another major challenge. Esping-Andersen's (1996:9) argument, though not directly relevant to Cameroon is instructive:

'The contemporary welfare state addresses a past social order ... The much greater occupational and life-cycle differentiation that characterises 'post-industrial' society implies also more heterogeneous needs and expectations ... Also the welfare state's erstwhile 'model family' is no longer pre-eminent'.

Added to this regrettable state of affairs and the rolling back of the state are catalogues of other concerns including the precarious situation of women, who in most cases are unemployed and constrained to adopt a range of survival strategies. This is noticeable in patterns of living arrangements and in the labour market participation with profound influences on the needs of older people (particularly women) and how these can be met. The standard modernization thesis posits that older people become increasingly isolated and vulnerable as the result of such changes (Cowgill 1976; Apt 1996).

Research from developing countries shows that 'traditional' social structures, such as extended families and communities are becoming less reliable sources of support for older people than may have been the case in the past (Aboderin

2004). This has led to increased needs for formal income support and care provision in such countries. The main challenge for low-income countries will be to factor older people into social policies for the first time. Lloyd-Sherlock (2002) notes that for many countries, this occurs against a backdrop of resource constraints and generalized social hardship. In these cases, a shift in the priorities of external donors and non-governmental organizations will also be required. For some countries, meeting the needs of elders will be almost entirely over-shadowed by the HIV/AIDS pandemic.

The introduction has provided insights into the problem of ageing in developing countries. However, the various accounts have not taken cognisance of the contribution of older people in spite of their limited access to social protection and inadequate coverage from any of the formal schemes. Moving on from this and similar discussions on ageing and elderly welfare, this thesis seeks to contribute to the debate by employing a broadly theoretical approach that is not pro-western. Engaging with the actualities surrounding the lives of elderly women and men, the research attempts to provide more impetus to the dynamics of social protection in Cameroon by exploring the role of older people in addressing their plight through individual and collective agency.

2.3 The Concept of Social Security and Social Protection

Social protection includes “not only public social security schemes but also private or non-statutory schemes with a similar objective...provided that the contributions to the schemes are not wholly determined by market forces” (ILO 2000:29-30). This definition according to Yeates (2003) includes, for example, mutual benefit societies

and occupational pension schemes, in addition to social security benefits. In developing countries, social protection must be concerned not only with reducing vulnerability, unacceptable levels of deprivation and other socio-economic adversities. Vulnerability to poverty in old age is best traced by drawing on the concept of livelihood. A livelihood comprises the capabilities, assets (resources, claims, access) and activities required for living. According to Chambers (1992), DFID (2005), a livelihood approach considers in particular the human, natural, physical, financial, social and political capital that people have at their disposal to pursue their aspirations, the structures that influence people's to-or ability to utilise such capital, and people's vulnerability to risks and shocks. Moreover, the role of social protection as averred by Guhan (1994), must be extended not only to that of a 'safety-net', but, more importantly, to 'prevention' against increases in deprivation and the 'promotion' of better chances of individual development. As argued elsewhere (Norton et al. 2001; Kabeer 2002; Killick 2002; Justino 2005) social protection not only addresses negative outcomes of development but also promotes more equal opportunities and choices amongst all population groups.

The entrenchment of social security within the global system stems from the fact that social security was accepted a human right under the 1948 Universal Declaration of Human Rights in articles 22, 23.3, 25.1 and 25.2 which states:

'Everyone, as a member of society, has the right to social security and is entitled to realization...of the economic, social and cultural rights indispensable for his dignity and the free development of his personality' (Article 22).

In article 23.3, it is stated

‘everyone who works has the right to just and favourable remuneration ensuring for himself and his family an existence worthy of human dignity, and supplemented, if necessary by other means of social protection’.

Article 25.1 states:

‘everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including ...the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control’

and Article 25.2 states:

‘motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection (United Nations, 1948 Universal Declaration of Human Rights).

Social security (as distinct from social protection) is defined by the International Labour Organisation (ILO) as

“the protection which society provides for its members through a series of public measures against the economic and social distress that otherwise would be caused by the stoppage or substantial reduction of earnings resulting from sickness, maternity, employment injury, invalidity and death; the provision of medical care; and the provision of subsidies for families with children” (International Labour Organisation, 1984:3).

This definition includes social insurance, social assistance, extra costs and universal benefits (Yeates 2003). The ILO definition is deficient in several respects. First, it places undue emphasis on the role of the state in social security provision. Social security is restricted to formal and state-regulated forms of social protection. This is, however, of limited relevance to developing countries where formal and state-regulated forms of social protection are poorly developed and cover only a small proportion of the population. The majority relies on non-formal and non-state regulated forms of social protection. Second, it presumes that the majority of the citizens have already reached a satisfactory living standard in a modern economy, which social security is designed to protect, hence, the need to protect them from a decline in their living standards (Jutting 1999). The referents are obviously Western societies which do not fit the contemporary African situation.

It has been also been argued that social security systems reflect the traditional male-breadwinner, female-dependent and nuclear family model (Folbre 1993), yet what obtains on the ground is a complex picture where the breadwinner is not necessarily the man, where the extended family is prominent, and with a growing trend of women-headed and child-headed households (Kasente 1997). Third, this definition does not capture non-state based initiatives and the mutual aid arrangements obtainable in most developing countries which are a response to the absence or inadequacy of formal social security and the growing problem of income security and absolute poverty (Kasente 1997, Kaseke 2001).

However, the forms of economic and social distress listed in the definition are prominent features of most developing countries that are battling with economic

meltdown. Added to the economic decline and inadequacy of social protection are structural economic, social and political features that restrict the implementation of the usual pension systems, unemployment benefits, maternity subsidies and so forth, that have become an intrinsic part of living standards in industrialised countries (Justino 2006). On the one hand, modern social security systems require sophisticated forms of targeting and monitoring that would be financially unfeasible in poorer economies. On the other hand, the extent of poverty and vulnerability in developing countries reach far beyond the social risks listed in the ILO definition. Due to these facts, recent research has argued that the notion of social security is too limited in the face of the social and economic needs of developing countries and a more extensive notion of social protection should be used as a large percentage of the population remains uncovered against basic risks (Ahmad et al; 1991; Schmidt 1995; van Ginneken 1999; Norton et al., Kabeer 2002; Lloyd-Sherlock and Barrientos 2002; Barrientos and Sherperd 2003). Because of large informal sectors, many workers are, *de facto*, not covered, either because their type of employment is not covered under the law or because employers (or the employees themselves) evade contributions (Gillion et al., 2000:534). The authors cited above share a view of social security that extends beyond the sudden loss of expected income, to include the prevention and alleviation of chronic poverty, the provision of minimum standards of living and the protection of individuals against economic and social risks. Exposure to risk is a major issue in the day-to-day life of people. Illness, disability, death, widowhood, riots and natural disasters are some examples of typical risks which lead to fluctuating incomes and thereby affect the quality of life (Jutting 2000).

While policy makers in sub-Saharan Africa are becoming increasingly aware of the needs of older people, there is general agreement that the types of social welfare programs in place in other parts of the world are too expensive to replicate in sub-Saharan Africa given the size of their economies (Kalasa, 2001). Thus there is a need to search for alternative approaches that might achieve a similar function but at lower cost. The concept of social protection is one that is gaining increasing attention in development circles as a useful policy framework for addressing issues of poverty and vulnerability (Garcia and Gruat 2003).

Traditionally in sub-Saharan Africa, social protection for older people is provided by both formal and informal programs and practices that have been developed to reduce poverty and vulnerability in old age. But with per capita income below a few hundred dollars in most sub-Saharan African countries, it is no surprise to find that formal social security systems across the region cover only a small fraction of the population. Except for Mauritius and the Seychelles and a few countries in Southern Africa, including South Africa, Botswana, Lesotho, and Namibia, all of which operate social pension schemes aimed at comprehensive coverage, most countries' formal social security programs never reach the urban or rural poor. Except for these few countries, the extended family unit remains the main source of support for the vast majority of older people in sub-Saharan Africa when they can no longer work (National Research Council 2006).

Statutory social assistance programmes have conventionally emphasized the notion of relatives' responsibility to require people to care for dependent relatives. However, the notion of relatives' responsibility, as Midgley (1994) argues, has relied on a

punitive rather incentive approach which fails to recognize that in many poor countries, relatives are themselves often too poor to assume additional responsibilities.

In its 2000 World Labour report, the ILO addresses the problem of income insecurity from two different perspectives. The first considers income security as meaning income that is sufficient for the purposes of meeting subsistence needs. This is the concern of millions in Africa who are struggling to meet their subsistence needs in old age. Thus income insecurity from a subsistence perspective means the lack of capacity to meet one's basic needs. The ILO (2000:24) identifies five different sources of income security: the family, civil society's institutions, enterprises, the commercial market and public institutions. Both the nuclear and extended family systems provide income security to their members. Family members according to Kaseke (2005) have an obligation to support one another and the family is seen as a channel through which individuals can fulfil their needs. This is particularly so in Africa where children are seen as a source of security or protection in old age. Civil society's institutions, such as mutual aid societies, also provide income security. These societies are voluntary arrangements based on the notions of solidarity and reciprocity. They respond to the specific needs of the members and their scope ranges from funeral assistance to promoting saving and providing credit.

With reference to developing countries, three functions of social security in a broad sense are often considered: amelioration, prevention, and development. First, the ameliorating function is evident in social assistance with a view to relieving acute stress, although it sometimes approaches semi-permanency. Social assistance is generally subject to means-testing. Second, the preventive function of social security

is exemplified by social insurance and employer liability programmes, designed to maintain income when regular earnings are interrupted or terminated due to various contingencies. Third, at a higher level of social security a developmental function materialises through the use of social security resources for both economic and human capital mobilisation, especially the deployment of provident or social insurance fund resources for investment purposes (Midgley 1993:136).

In criticising the ILO definition on social security, several authors have argued for a wider conception and see the objective of social security as the prevention, by social means, of very low standards of living, irrespective of whether these result from chronic deprivation or temporary adversity (Burgess and Stern 1991:43; Leliveld 1991; Guhan 1994:48). However, such comprehensive definitions are so wide that social security would then encompass virtually all sorts of programmes designed to alleviate or reduce chronic poverty. To exclude the temporary nature of distress from the definition of social security, ostensibly to make it more applicable to the situation of developing societies where chronic distress prevails, i.e. poverty, would render it meaningless. It would serve both analytical and policy-making purposes better to keep social security arrangements and poverty-reducing measures separate at the conceptual level, rather than lumping them together in an unwieldy blanket definition (Schmidt 1995:11–12).

Following the independence of African countries in the early 1960s, it was expected up until the late 1970s – that their economies would expand and continue to provide formal employment for a growing proportion of the population. Instead, the 1980s saw economic contraction and structural adjustment. The youthful age structure of the

populations produced an explosion of school-leavers seeking work and rural exodus continued. As a result, large numbers of labour market entrants sought refuge in the informal economy, predominantly in towns and cities. Recovery is still elusive for most African economies. These developments have left three-fourths of the labour force outside the formal economy, either in subsistence agriculture or in low-income informal activities such as small-scale manufacturing, domestic service or petty trading (Gillion et al. 2000:518). Since most social security arrangements cater only for the formal economy this means that, in terms of coverage, the overwhelming majority of Africans remain unprotected by formal means against the main risks.

In these circumstances, from what sources do Africans derive social security? As argued elsewhere, large segments of the African populations do not enjoy social security at all; they are at the mercy of nature and human forces beyond their control. Far fewer are covered by other forms of social security, such as welfare funds or social assistance. Since schemes are employment oriented, few are covered, range of benefits is limited, and inflation is always rising while benefits paid are not index linked (Msalangi 1998, Gillion et al., 2000:507). For most sub-Saharan African ministries of health, the challenges prior to old age are simply overwhelming. Despite efforts in a number of sub-Saharan African countries to decentralize their health care budgets and realign health care expenditures to emphasize prevention rather than care, most countries still spend a significant fraction of their total health care budgets treating adult illness (Poullier et al. 2003a; Tollman et al. 2006). The average sub-Saharan African country spends approximately 5.5 percent of gross domestic product on health care, of which perhaps half is spent on hospital care (Poullier et al., 2003b).

Today, four broad types of institution provide social security in the African context: the state; the private market; civil society; and the family. From an institutional perspective the principal difference between these sources of social security is found in their underlying incentive structure of co-operation and compliance. The state relies on legislation and compulsion, whereas the market depends on economic incentives. By contrast, civil society social security arrangements are predicated on mutual interest and peer pressure, while the family provides cohesion based on deep seated social norms and values (Jütting 2000:7). Informal or 'traditional' systems often operate at local level without any state recognition or support, although in some countries statutory and informal systems have been integrated as a means of supporting informal systems and/or extending statutory coverage (Midgley and Kaseke 1996).

In conceptual terms, a greater understanding of social capital theory can explain the processes associated with collective and individual agency. As drawn from mainstream studies, the survival strategies, coping and adjustment patterns of elderly men and women are contingent on their access to resources, resource rights, group and social networks, important processes within civil society. Such alternative forms of providing social security is conceptualised in this study as 'semi-formal protection'. The approach draws attention to the measurement of elderly welfare through participation in support networks and the qualities, merits and constraints that these actual networks of social and familial relationships mean for elderly men and women. Detailed case studies and field work undertaken in different geographic areas point to the aspects of continuity and change emanating from the social and traditional networks of support as they represent veritable forms of survival for older people.

2.4 Conceptualising Social Capital and Collective Agency

The notion of ‘social capital’ has gained enormous popularity during the last ten years in a broad range of fields. It exists in an attempt to capture the ‘intangibles’, or non-economic aspects of society, that promote economic growth or more widely positive development (Bryden and Hart 2004). Its popularity can be seen as part of a wider recognition that economic development models have failed to explain why some appear to have been able to develop while others have not (Lee et al. 2005). In its current use, there are two main strands regarding the definition of social capital. The first school is influenced by the seminal work of Robert Putnam. Putnam (1993:67) conceived of social capital as a community level resource and defined it as “features of social organisation such as networks, norms and social trust that facilitate coordination and cooperation for mutual benefit”. The second main school draws on the work of Bourdieu (1986:248) who defined social capital as “the aggregate of the actual or potential resources which are linked to possession of a durable network or less institutionalised relationships of mutual acquaintance and recognition”. This definition focuses on the resources that accrue to individuals as a result of their membership of social networks.

While Pierre Bourdieu (1980; 1984) is widely credited with coining the term ‘social capital’, it was Robert Putnam who was responsible for popularising the concept and introducing it to policy circles. With reference to groups and organisations, social capital is considered the ‘glue’ that binds people together (Putnam 1995; Portes 1998; Shucksmith 2000).

On the other hand, social capital according to Bourdieu (1980; 1984; 1991), is part of a larger theory of how the reproduction of class-divided societies manage to assume the appearance of a natural, that is apolitical, process. He argues that the reproduction of class relations occurs through social, symbolic and economic means and uses 'capital' to refer to the circulation and accumulation of the resources that are harnessed in and for these processes. Thus for Bourdieu, social capital is part of the resources available to members in a group in competition with each other or with other groups - the more elite the group, the greater the capital available to its members. The difference between these two theorists can be thrown into starker relief by observing that Putnam takes up Durkheim's notion of society as an independent, natural reality *sui generis*, as Durkheim would put it (see Giddens 1972) that exists over and above its individual members. Thus for Putnam, communities have an objective reality and are coherent entities. They have their own interests and their own resources, amongst them social capital, over and above the interests and the resources of the individuals that constitute them. For Bourdieu – contrastingly influenced by the work of the founding fathers of sociology, Max Weber and Karl Marx - society is not a coherent entity. Its most fundamental characteristic is not that of solidarity, but of division, particularly class divisions. To Bourdieu, then, communities as such do not have their own interests or their own resources. Groups and individuals can have conflicting interests and are characteristically in competition with each other over resources. For Bourdieu, no accumulation of capital is disinterested: social capital can be built as a source of personal power.

In their respective critiques of Robert Putnam's *Making Democracy Work* (1993), Levi and Tarrow (1996) call for a concept of social capital that better appreciates the

role of institutions in supporting the emergence of generalized trust and civic engagement in democratic states. The absence of effective institutions creates an environment where the overcoming collective action problem is more difficult. While institutions certainly have important roles to play in functioning democracies, Levi's observation raises an interesting problem: how do citizens in divided societies where there is politicisation of ethnicity regain confidence in governing institutions that they are compelled to seek recognition by registering their organizations?

With its emphasis on the various ties many community members have with each other, this research follows critiques of social capital that call for a better understanding of the complexity of social relations. Significant to mainstream ideas are the complementary roles of bonding, bridging and linking social capital (Woolcock 1998, 2000, Woolcock and Narayan 2000). According to such views, bonding capital based on strong ties between immediate family members, neighbours and close friends guards against the vulnerability of the poor (Cleaver 2005). Some critiques have dismissed these grand claims by focussing on the dark and down side of social capital in generating relations of clientelism and furthering pre-existing inequalities (Coleman 1988, Levi 1996, 1998; Portes 2000; Portes & Landolt 1996; Swain 2003; Mayoux 2005), shifting the onus of responsibility for "social inclusion" from economy to society and from government to individual (Edwards et al. 2003). Individuals can be seen as responsible for their own deficit of social capital and marginalization (Schuurman 2003). The level of collaboration between state officials and citizens creates an environment in which citizens actively distrust state institutions and vice versa. It is argued elsewhere that we cannot dissociate conflicting interests (Evans 1996b) and the instrumentality of the state in social capital formation.

Ben Fine (1999) in his article entitled 'The developmental state is dead - Long live Social capital' makes the point that the politics of bringing the state back in and the theory of the developmental state have become tied to the notion of social capital. Evans (1996b) argues that the nature and meaning of social capital becomes complicated if a community is riven by conflicting interests. The literature on trust and institution building rarely considers such contexts, even though they are common. By focusing on a case where institutions are implicated in efforts to alleviate poverty and build social security mechanisms, this research provides an opportunity to consider a realistic view of the difficulties citizens encounter in a climate of institutionalised disorder, patronage politics, endemic corruption and diminished state intervention in social service delivery.

In brief, my study intends to build on these critiques in two ways: Firstly, if individual and collective agency is shaped through social arrangements and social capital is built through association and institutional engagement, then there is a need to understand an individual's capacity to mobilize resources and the relations of trust that can foster inclusion or exclusion. Secondly, the context of associational life in Cameroon's North West Province is relevant in understanding how social relations can induce trust.

In its most general form, social capital emphasizes the resources embedded in relations among actors and social structure that can be utilized to increase the likelihood that a certain action will be successful (Lin 2001). The idea of social capital has been used to help explain success or failure at, among other things, economic advancement, employment, educational attainment and transitions from socialism to capitalism and authoritarian to democratizing societies. Within theories

of democratization and civil society, social capital is seen as a means of building democratic processes that supports the development of generalized trust, which in turn strengthens democratic participation and improves institutions (Knack 2002; Paxton 1999, 2002; Putnam 1993, 1995).

The literature on social capital carries an idealization of 'community' which is seen as the prime source of building social capital. The World Bank (2000) notes:

'the quantity, quality and persistence of social interactions among neighbours, friends and members of groups and associations, generate social capital and the ability to work together for common good. This is especially important for the poor. Social capital can be used by the poor as a substitute for human and physical capital. Social capital can have a positive impact on the well-being and prosperity of an entire community, not only the households with a lot of social capital. Social capital increases with use, making it a particularly worthwhile investment...A country's political environment, cultural factors and, increasingly, the global economic environment can make it easier for social capital to flourish or fail at the community level'.

Across many types of social capital, trust is an important component. The type of trust that contributes to social capital, however, differs among the various settings. Actors situated in social groups organized around relations of commerce or friendship, benefit from and contribute to interpersonal trust among group members. This subsequently helps strengthen the group and contributes further to its success (Bourdieu 1986; Bowles & Gintis 2002; Coleman 1988; Portes 1987; Waldinger 1995).

With respect to democratization, however, the kind of in-group personal trust that promotes success in an economic sphere may reinforce social inequalities or the clientelistic ties of patronage systems, and undermine democratization efforts. Instead, it seems that institutional confidence and generalized trust work best for supporting the kind of social goods that benefit larger communities (Gibson 2001; Norris 2000; Putnam 1993, 1995). Current work on social capital within democratization studies tells us that dynamic associational lives yield engagement with and confidence in government (Knack 2002; Paxton 1999, 2002; Putnam 1993, 1995). This observation links individuals' participation in local-level associations with perceptions of their confidence in local, regional or national level government. Researchers see trust between specific actors transforming into trust for generalized others. As actors cooperate within networks of civic engagement and obey norms of reciprocity in the public sphere, they deepen their trust of others, an outcome that promotes further cooperation and improves democratic institutions. In these models, trust of individuals induces trust in institutions. In cases where citizens cannot find a basis for trusting each other, state institutions are said to be effective third-party enforcers that reduce actors' personal risks and provide information and guarantees about potential exchange partners (Hardin 1991, 1998; Levi, 1996, 1998; Tarrow 1996).

Actors come to believe in the trustworthiness of institutions by trusting the individuals who work there. Making the strong case for institutions, Levi notes, "If the state is one of the institutions - and in many cases it is the most important one - for promoting generalized trust, it can play this role only if the recipients of its services consider the state itself to be trustworthy. Subjects and citizens must count on

the competence of the state to perform its trust-producing duty” (1998:86). Furthering the notion of context-specific trust, Mollering (2001) appreciates the vast number of interpretations actors may give to their environments and - counter to deterministic approaches - does not accept a direct relationship between interpretation and expectation, since actors themselves have their own notions about what kinds of uncertainty they can and cannot suspend.

In contrast to this context-specific approach, many studies of social capital see trust as a constant cognitive or behavioural characteristic of individuals. Putnam (1993, 1995), distinguishes between the type of “thick trust” found in close-knit groups and the more general social trust that is needed in modern, impersonal systems. This distinction, however, falls short of appreciating that actors are embedded in a multiplicity of networked relations, regardless of whether they exist as members of small, tight societies or large, impersonal ones. Action, for Putnam, has only one meaning: individuals engaged in civic associations enact a set of practices that encourage the build up of generalized trust. But actors have a range of motivations for engaging each other in civic associations, some of which produce system confidence while others reinforce personal trust. As Mollering (2001) cautions, determining which type prevails in any given exchange requires investigation into the meanings and identities the actors themselves invoke.

It is in the murkiness of role negotiation that we find the potential for relations of trust. In glossing over this negotiation, we lose the ability to examine whether citizens act on their confidence in institutions or whether it is trust that enables their cooperation in risky and uncertain environments. This is an important distinction for those

interested in state-building and democratization, since it bears heavily on whether an action reaffirms interpersonal trust that remains between actors or helps support more generalized trust through institutional and group confidence. Trust in individuals who work in institutions may have an inverse effect on the development of institutional confidence. Cameroonian older people seeking to escape the grip of poverty have consistently relied on trustful relations within village based organizations, family support networks and other solidarity networks, though such mechanisms are increasingly eroded. As these citizens approach poverty alleviation and welfare through their close social ties, they increase the interpersonal trust operating between them. Heightened interpersonal trust, however, has not translated into increased institutional confidence, since the basis on which the action is defined is the personal relationship between the two actors-citizens on the one hand and state institutions that should create a platform of collaboration and support.

In the most general sense, social capital is said to form out of repeated social interactions between individuals and groups which are said to develop trust, social norms, and strengthen co-operation and reciprocity (Coleman 1988; Fukuyama 1995; Warren 1999). It is furthermore argued that the amount of capital built depends on the quality and quantity of interactions (Falk and Kilpatrick). Close family ties are thus considered important as social glue and for guarding against vulnerability (Narayan 1997). It is been argued that a particularly serious shortcoming in current discussions of social capital from a gender perspective is the uncritical treatment of relations within households, families and kin groups (Mayoux 2001).

In the World Bank literature on social capital and elsewhere, the positive contribution of family and kinship ties to welfare and economic development are stressed with no discussion of intra household and kin group inequalities. The World Bank website (2000) under 'sources of social capital', states:

'As the main source of economic and social well being for its members, the family is the first building block in the generation of social capital for larger society... Relations within the family foster the development of trust; essential for the formation of all outside relationships... family dynamics also encourage reciprocity and exchange, in other important factors in social capital generation. The material and emotional support shared freely between family members generate an implicit willingness to return the support...kinship ties are consequently vital sources of social capital for welfare and development'.

The positive contributions of family and kinship ties to welfare and economic development are stressed with no discussion of intra household and kin group inequalities (Putzel 1997).

Following this discussion, my research goes along the path of Bourdieu. Consonant with his thesis, this study will argue that it is misleading to speak of 'society' or 'community' as an objective, coherent reality and entity that is not subject to change. We have to see society and community as being constructed through a process of political struggle in which social capital is mobilised, expended and accumulated and the relationship between citizens and politics is very important in social protection policies. The marginalisation of minority groups and vulnerability within some ethnic

groupings may disrupt the flow of vital resources from the state to citizens who feel left out of the equation. In conjunction with Bourdieu's claim, it is strikingly evident that social capital is unevenly distributed depending on the capacity of the society/community to mobilise available resources for the interests of members and the degree of mobilisation varies between communities and ethnic groups. Specifically, it is meaningless to speak of social capital unless it is conceptualised as a sum total of social relationships and networking directed at the welfare of individuals and collective members. The whole stock of social capital remains vital mechanisms of support for those trapped in poverty. For those living in deprivation in developing countries, reliance on social capital (converted in material and financial resources) as von Benda-Beckman and Marks (2000:22) observe, are very vital 'social security mechanisms'. They posit that a 'chain of conversions' is usually needed rather than one simple social security mechanism, and a multitude of different resources is successfully transformed into a state of security'.

The conceptualisation of social capital chosen for this study is, in my view, useful in three respects: firstly, while individuals or groups can boast of individual agency, which constitute aspects of social capital, it is only through the matrix of social relationships and fruitful networking that social capital can be mobilised and utilised for the benefit of members. Secondly, it offers a sound basis for operationalisation. The complexity of benefits derived by older men and women from the vast array of associational life and networks of support are assessed. Such benefits are secured through adherence to networks such as *njangis*, mutual aid societies, churches and village-based organisations. Lastly, it enables us to look beyond social

relationships by unravelling the links, disconnections and constraints. The gendered nature of access to resources and negotiation of membership into a particular group or association are key determinants in elderly livelihoods. These different networks play into the development arena in a number of diverse ways and the dialectic of continuity and change becomes relevant in the analysis of forms of social capital and its articulation.

2.5 Feminist Critiques on the Welfare state and Women's Subordination

Feminism's most recent 'wave' continues to challenge the underlying forms as well as the substance of women's subordination. Though there remains a liberal feminist strand whose concern is to promote equal opportunities legislation (Williams 1989: 44-49), the 1970s and 1980s witnessed the birth of socialist and radical strands of feminism whose resistance to women's oppression is founded in analysis of patriarchy. Patriarchy is regarded as a structural characteristic of human society, and, in spite of important differences between the newer strands of feminism, their central theoretical insight relates to the distinction that may be drawn between society's public and private spheres (Pascal 1997). The public sphere is where civil and political rights reside; it is the domain of the market and the state; it is the site of productive and administrative activity that is dominated by men. The private sphere, in contrast, is not inhabited by rights; it is the domestic domain of health, home and family; it is the site for the reproduction of social life, a process to which women are confined. The public/productive sphere is separated from, yet dominates the private/reproductive sphere (Sainsbury 1999:250). It is argued that the dimension of women's access to paid work determines women's earnings, increases their economic independence and fragmentation. Women in low-income countries rely heavily on

individual, household and community-level arrangements for risk management and protection from severe poverty (Sabates-Wheeler and Kabeer 2003, Kasente 2000).

Feminist theorizing is one of the most significant areas of theoretical development in critical approaches to social policy and ageing. Gender itself is a crucial organising principle in the economic and power relations of societal institutions as well as of social life throughout the life course, playing an important role in the distribution of resources to older men and women (Estes 1998; Calasanti 1993; Calasanti and Zajicek 1993; Ginn and Arber 1995; McMullin 1995; Adams and Padamsee 2001; Brush 2002; MacKinnon 1989; Shaver 2002; Estes et al. 2003). A critical feminist epistemology is consistent with Harding's (1996:34) proposition that 'enable one to appropriate and redefine objectivity'. Harding (1996:128) expresses the view that 'women's perspectives comes from everyday life... The perspective from women's everyday activity is scientifically preferable to the perspective available only from the "ruling" activities of men in the dominant groups'. Given that gender cannot be detached from the processes, practices, images, ideologies and distribution of power in various sectors of social life, Acker (1992: 566-7) observes that both the state and the economy, among other social institutions, have been developed and dominated by men; therefore, they have been 'symbolically interpreted from the standpoint of men [and] defined by the absence of women'.

Under industrialised capitalism, property rights and the ability to accumulate wealth are limited by the impaired ability of women to actively access paid employment as a result of their substantial care giving responsibilities and sexism in the workplace (Orloff 1993). Wiegersma (1991:174) sees patriarchy 'as more than a form of male-

dominated family structure. It is also an independent political-economic system of production'. A key component of the relationship between the labour market and the household as Ginn et al. (2001:20) observe is women's paid and unpaid work. Under capitalism, women's role historically has been in reproduction, which was dubbed the 'complement' or equivalent of man's role in production (Mitchell 1996). Esping-Andersen is criticised for the invisibility of gender in theories of ageing as there is profound resistance to incorporating feminist insights into theories of welfare states in particular (Arber and Ginn 1995a; Thistle 2000; Brush 2002).

An important development in the literature of welfare state regimes is the focus on the 'contradictory character of welfare states' (O'Connor et al. 1999:2-3) in which the two faces of the state are highlighted: first, the woman friendliness of the state (Hernes 1987) opening political participation, recognising and improving women's situation, and secondly, the other less woman friendly side of the state: the long-term care system, and pension systems that reward those engaging in paid labour at the expense of those in unpaid care giving; workplace policies that ignore worker's care giving work; laws that impede reproductive choice and provide little protection against male violence (Pateman 1989; O'Connor et al. 1999).

Feminist perspectives on the state and old age policy have addressed first, the concepts of the gendered wage and the family wage in producing the economic vulnerability of older women; second, how the fate of the older women in the welfare state is predicated upon her marital status and her husband's work history and how social policy is built around the model of the traditional autonomous nuclear family. Thirdly, the two tiers of United States social policy that divide women by race and

class: means-tested social assistance and social insurance (Harrington Meyer 1990, 1996). It is argued elsewhere (Pascal 1986, Estes et al. 2003) that old age income provisions are gendered in three ways: retirement income is linked to waged labour, which is itself gendered; non-waged reproductive labour, performed predominantly by women, is not recognised or counted under state policy as labour and retirement policy is based on a model of family status as married with male breadwinner (and with marital status as permanent rather than transient). In so far as benefits are higher for married than non-married persons and for dependent spouses than non-dependent spouses and single individuals (who are more likely to be women than men), state policy sustains the subordination of women by imposing a normative and preferential view of a particular family form with a male breadwinner and a dependent wife that is inherently disadvantageous to the majority of older women.

The degree of dependency of older women increases as they move through the life course (Arber and Ginn 1995), while feminist approaches view gender as a dynamic structural force with important consequences for the life chances of men and women (Calasanti 2004). Associated with widowhood, divorce, retirement and the decline in economic and health status, the potentially negative results of all these factors pose a serious threat for all women, the less educated and the very poor. Estes et al (2003) argue strongly that welfare reform has augmented the burdens of women's child bearing and care giving across the life cycle, extracting an enormous cost across all female generations (young and old), producing multiple deleterious ripple effects. But more research is needed on the health and socioeconomic status of elderly women, particularly those who are widowed and childless, who may be especially vulnerable to poverty (National Research Council 2006). Surely, all parts of sub-Saharan Africa

are still heavily patriarchal, and in such societies the status of women can be very low. Women may lack certain rights of ownership to property, and inheritance is often through the male side of the family (Toulmin 2006). Notably, matrilineal inheritance can still be patriarchal—a man inherits from his mother's brother. Descent type is independent of power system/hegemony/patriarchy. Consequently, upon their husband's death, widows are at risk of dispossession of their house and land by their dead husband's kin. Because women tend to marry men who are older and because they remarry less frequently upon divorce or the death of their spouse and because they live longer than men, the percentage of women widowed at any given age tends to be higher than corresponding statistic for men.

Old women's concerns and the issue of women's dependency have been ignored and rendered invisible in most mainstream analysis of social and welfare rights. Women's contribution in the care economy is unaccounted for; they occupy a marginal position in the employment arena as wage earners, therefore are short of capital and other resources, critical in livelihoods. Similarly, the systematic disadvantages faced by women in the public sphere and inequality in the labour market have been neglected by the state and social policy.

This chapter has highlighted the theoretical perspectives on ageing and development in low income countries. The deficits in modernization, dependency theories and the downside of colonialism brings to the fore social capital theory, which attempts to provide insights into individual and collective agency. Women's subordination is echoed through the vulnerability and shocks associated with deepening poverty,

declining incomes, and state failure in social security provision that excludes a vast majority of self-employed worker.

Chapter Three: Social Security and the African Perspective

3.0 Introduction

Sub-Saharan Africa (SSA) may be the region with the least well understood ageing trends given the paucity of demographic data. The absolute number of older people is growing and this is likely to have profound implications for families and kin networks. In 2006, 35 million people were aged 60 and older and this number is projected to increase to over 69 million by 2030. Still, in 2006, eight countries in Sub-Saharan Africa had over 1 million people aged 60 and over. Nigeria had by far the largest older population with 6.6 million people aged 60 and over, South Africa 3.5 million, Ethiopia 3.3 million, Congo(Kinshasa) 2.6 million, Tanzania 1.7 million, Sudan 1.6 million, Kenya 1.4 million and Ghana 1.2 million (U.S Census Bureau, International Data Base 2007). Five percent of SSA's population was aged 60 and over in 2006, 6.8 in North Africa. The proportion 60 and over is projected to increase in the future. In contrast to other regions of the world, Africa's elderly population will grow relatively slightly from 4.7 percent in 2006 to 5.6 percent by 2030. In terms of absolute numbers, the proportion of people aged 60 and over will nearly double from over 35 million in 2006 to over 69 million by 2030 and over 139 million between 2030 and 2050 (UNFPA 2007).

Population ageing trends (in thousands) of Africa's elderly population in 2007 is gender disaggregated. For the proportion aged 60-64, the total population is estimated at 50,056 (5.3%), 22,694 male (4.8%) against 27,382 (5.8%) female. As for the 65 plus category, the total population stood at 32,483(3.4%) with male accounting for 14,430 (3.1%) and 18,053 (3.8) for female. In the 80 and over category, the total population was 3834 (0.4%) with 1540 (0.3%) male and 2294 (0.5%) for female (United Nations Department of Economic and Social Affairs, Population Division,

2007). The distribution shows that the aged 60 and over is most numerous and the total number drops with advancing age. The female population is higher than the male in all categories

By 2006, Cameroon's population aged 60 and over was under a million (Ministry of Social Affairs 2006, United Nations 2002, UNFPA 2006). However, it is projected that Cameroon will add to the list of SSA countries with over 1 million aged 60 and over by 2030, alongside Cote D'Ivoire, Mozambique, Senegal, Burkina Faso and Niger (U.S Census Bureau International Data Base 2007). The proportion of the population aged 60 and over in 2006 accounted for 5 percent of Cameroon's total population of over 17 million (UNFPA 2007).

At the moment, traditional support systems, based on family and kinship ties, represent a way of life for most people in sub-Saharan Africa. Hence, a major question for policy makers is whether the traditional family in sub-Saharan Africa can cope successfully with the demographic, health, social, and economic changes that are taking place. The HIV/AIDS pandemic and other health concerns are putting a severe strain on available resources. Population ageing will pose serious challenges exacerbated by soaring unemployment and chronic poverty for those in old age. With limited access to pensions and other social assistance schemes, what sort of support can be provided to the elderly? This chapter examines the emerging trends, support systems in place and challenges of extending social security.

3.1 Social Protection and Traditional Support Mechanisms

Social protection is the natural outcome of commonly shared principles of solidarity, reciprocity, and redistribution in an extended family. The key question is whether this support mechanism is sustainable. Economically, active adults in the family or kinship network provide support to children, older people, and others who are unable to care for themselves. As discussed earlier in Chapter 2, economic development and modernization are also associated with a range of economic and social changes that combine to weaken social networks that traditionally provide care and support in later life. Migration of young people from the rural areas to the towns, for example, can leave older family members geographically and socially more isolated (National Research Council and Institute of Medicine 2005). In addition, the AIDS epidemic has placed enormous strains on traditional institutions.

To examine changes in societal arrangements for the support of older people, one starting point, albeit imperfect, that demographers have used extensively in other settings is trends in living arrangements (Mba 2004a). Such analyses can be particularly complex in sub-Saharan Africa due to the variety of household structures, including resident and non-resident household members and multiple household memberships (see van de Walle, 2006).

Economic security, health and disability, and living conditions in old age are policy concerns throughout the world, but the nature of the problems differs considerably from continent to continent and between and within countries. In industrialized countries, old age support comes to a great extent from large public or private pension and health systems. These systems are becoming increasingly strained as population

ageing has increased the proportion of older people. At the same time, in much of the industrialized world, the health of the older population is, at a minimum, remaining steady and, in many places, it is improving rapidly. Traditionally in sub-Saharan Africa, the main source of support has been the household and family, supplemented in many cases by other informal mechanisms, such as kinship networks and mutual aid societies.

Population ageing is only beginning and, because fertility is falling, it is occurring during a temporary phase of declining dependency burdens. In much of sub-Saharan Africa, gains in life expectancy that were achieved throughout the latter half of the 20th century have been eroded by the HIV/AIDS pandemic. The absence of pensions and other benefits and the trend toward urbanization and serious economic stress in the younger adult population, which may destroy the extended family network, are major threats to the growing elderly population (Habte-Gabr and Blum 1987).

Various social security arrangements are in place in sub-Saharan African countries to mitigate the contingencies of their citizens, with emphasis on the masses of poor people, including the ways in which the poor themselves try to tackle unexpected adversity (Tostensen 2004). Any understanding of the nature of social security programs in Africa must take cognizance of its trajectory dating from the colonial period. With the benefit of hindsight, colonial powers put in place social security schemes that covered only those who worked in the public service. This approach did not change with the exit of colonialism as most post colonial governments tended to implement existing systems fashioned along the lines of pension entitlements for civil servants. Notably, with the influence of the ILO convention 102, most African

countries implemented the provident funds which catered for pensions and provided some basic form of social protection. The international community is devoting increasing attention to social security issues in developing countries as part of its preoccupation with poverty reduction. It is argued by ILO (2000), that given the fragility of states in Africa to provide adequate safety nets for citizens and for any social security system to be feasible in the current circumstances of widespread economic crisis, formal and informal social protection mechanisms will have to be combined.

Given the vulnerability of most African households, the African poor are trapped in a vicious circle of endemic poverty. They continue to pursue a series of strategies on a daily basis to supplement their low incomes, to meet rising consumer prices, and to cope with inadequate or unreliable economic and social infrastructure. Being poor, however, means more than daily struggle to eke out a living. A defining aspect of poverty is vulnerability to shocks and contingencies. Vulnerability means defencelessness, insecurity and exposure to risk, shocks and stress. It is a reflection not only of low incomes but also of limited assets, such as human investments in health and education, productive assets including housing and domestic equipment, access to community infrastructure, stores of social capital and claims on other households and patrons. It may also stem from the lack of access to the government and to the international community for resources in times of need (Wratten 1995:17).

The shocks that threaten the well-being of individuals, households or communities take many forms. They include natural and ecological calamities (droughts, floods, earthquakes, epidemics, pests, etc.) or human-made disasters of economic, social or

political nature (e.g. wars and civil strife). Perhaps more difficult to redress than sudden dramatic shocks are the gradual long-term adverse trends or seasonal cycles that often produce crises, although the drama may be less evident.

To withstand economic shocks or economic crises, households must be able to survive such periods without irreversible damage to the productive capacity of their members and to their net asset position. The greater the risk and uncertainty, the more households are inclined to diversify their assets to prevent such erosion. When asset bases become so depleted that even an upturn in the economy cannot reverse the damage – when all ‘capital is cashed in’ – households are extremely vulnerable (Moser 1996:24). Poor people who live at the margin are particularly vulnerable to unexpected events and are less capable of coping with their consequences.

Enshrined in Article 22 of the Universal Declaration of Human Rights is the right to social security. For more details, see 1948 United Nations Universal Declaration of Human Rights and United Nations Principles for Older persons, resolution 46/91 adopted on 16 December 1991. It contains principles regarding independence, participation, care, self-fulfilment and dignity for older persons. Underscoring the basic elements inherent in a social security system, ILO Convention 102 of 1952 is far more detailed and specifies a series of minimum standards. These rights were subsequently reconfirmed in Article 9 of the International Covenant on Economic, Social and Cultural Rights from 1966 which recognises “the right of everyone to social security, including social insurance.” Thus, the normative foundation of social security is not in question, neither in society at large nor in international law. The predicament of sub-Saharan Africa is particularly egregious – perhaps with the

exception of South Africa (Olivier et al. 2001). In its General Comment no. 6 (para. 30) the Committee on Economic, Social and Cultural Rights recognises, however, that the full implementation of Article 9 can only be done “within the limits of available resources” but it does not specify what they are. Although the primary responsibility for social security provision rests on the state, the challenge is to determine what resources are available for social security purposes in different sub-Saharan African societies at particular points in time and what social security measures are affordable within those resource constraints.

Undeniably, and as stated earlier, traditional caring and social support mechanisms now appear to be under increasing strain (Platteau 1991, Apt 1996; Dhemba et al., 2002; Kasente et al., 2002; Mchomvu et al., 2002; Mukuka et al., 2002; Williams, 2003; Williams and Tumwekwase 2001). Reasons for this strain include a series of profound economic and social changes associated with development and modernization. In sub-Saharan Africa, older people have traditionally been viewed in a positive light, as repositories of information and wisdom. To date, sub-Saharan African families have shown a great deal of resilience and are generally still intact. Changes associated with development and modernization can, however, combine to weaken traditional social values and networks that stress the important role of older people in society and that reinforce traditions of intergenerational exchange and reciprocity. These changes include increasing formal education and the migration of young people from rural to urban areas, leaving older family members behind.

3.2 Mapping the social security institutions and protection policies in Africa

In most third world countries, social security only covers small population segments. Typically, government employees and urban full-time workers in stable employment belong to social security schemes, while coverage is rudimentary or non-existent for other groups (Overbye 2005:306, Gillion, Turner, Bailey and Latulippe 2000:520). In many Western countries, formal social security is an important policy instrument for governments to redistribute wealth, combat poverty, and reduce inequalities between various segments of society. But in sub-Saharan Africa, current social security schemes are extremely marginal both in terms of percentage of the labour force that is covered and the size of pensions that are received. In most sub-Saharan African settings, national social insurance schemes cover less than 5 percent of the labour force and expend less than 1.5 percent of their gross domestic product on pensions (Fox and Palmer, 2001). Consequently, in the majority of countries in sub-Saharan Africa, social protection programs have a very modest effect on poverty alleviation. The largest social protection programs for older people in sub-Saharan Africa are occupational pension schemes, but these typically cover only people who have worked in the public sector, in state enterprises, or in large private firms in the modern sector. Across the continent, older people report delays - often of many years - in processing pension funds (Help Age International 2002). The self-employed, workers in the informal sector, domestic workers, and the vast majority of the population living in rural areas are uncovered (Darkwa and Mazibuko 2002).

Bailey (2004) identifies several distinct patterns of social protection schemes that have developed in sub-Saharan Africa. At one end of the spectrum are countries, for example South Africa, that have introduced schemes aimed at near universal coverage.

Other countries currently provide no form of social security, either because nothing has been set up yet or because previously established schemes have been dismantled or disrupted for various reasons, including, not infrequently, armed conflict. Apart from government schemes, voluntary private pensions can also be found in many countries, although, again, their coverage tends to be restricted to formal sector workers. Most sub-Saharan African pension schemes are financed by contributions made by both employers and employees, with the contribution rate in most cases being higher for the employer. In the case of South Africa's social pension, the scheme is financed through general tax revenue. Given the structure of the schemes and the nature of the labour force in most sub-Saharan African countries, the vast majority of those actually covered by formal social security schemes are neither the poorest of the poor nor women. Even though most countries did not introduce programs until after their independence, most schemes have been strongly influenced by their countries' colonial heritage, with the types of programs in Anglophone Africa differing from those in Francophone Africa.

In West Africa, several Francophone countries established a voluntary plan during the colonial period for government employees: for example, the West African Retirement Pensions Fund was modelled on a program for French civil servants that linked benefits to length of service and average earnings. Even today, Senegal has a social security program that determines benefits through a formula that is quite similar to the system used in France. Cote d'Ivoire, Mali, and other countries in the region have similar defined-benefit programs, with workers contributing between 4 and 9 percent of their earnings to the schemes (Bailey and Turner 2002; Legido-Quigley 2003; Willmore 2005).

Social security programs in the countries that were former British colonies are generally more modest than those in Francophone Africa. In several former British colonies, provident funds, such as the Nigerian National Provident Fund, were established. These were seen as relatively easy to operate and amounted to compulsory interest-bearing individual savings accounts for workers that were financed from contributions from both employees and employers (Bailey, 2004). Unlike most social security programs, which typically offer survivor and disability benefits, most provident funds generally provide only a single lump sum amount at retirement. Generally the level of the lump-sum payment is extremely modest and cannot actually support anyone in retirement. In 1993-1994, for example, retirees enrolled in the Zambian National Provident Fund each received, on average, a lump sum payment of around US\$10 (Mukuka et al., 2002). In a number of countries, for example, Ghana, Nigeria, and Zambia, these early provident funds have now been converted to defined-benefit social security systems. In some countries, including Sierra Leone, Eritrea, and Somalia, efforts to introduce schemes have been stalled by armed conflicts. In other places, for example Liberia and the Democratic Republic of the Congo, whatever social security programs that once existed have been effectively dismantled and destroyed by armed conflicts. The South African pension scheme was introduced in 1928 as a measure to provide for the poorest retired white workers. The State Pension was extended to all South Africans in 1944, and the value was equalized for all segments of society in 1993 shortly before the first democratic elections in 1994.

In addition to various types of occupational pension schemes that are contributory, some sub-Saharan African countries administer minimal public assistance or social welfare assistance programs to the needy. For instance, in Zambia, the Public Welfare Assistance Scheme provides benefits to vulnerable groups such as older persons, widows, and the unemployed. These schemes are far less well documented than contributory pension schemes or provident funds: the amount of assistance provided is typically very small and the coverage of these programs is generally extremely low. In other cases, the bureaucratic machinery to administer these programs is so unwieldy that it severely hampers the effectiveness of the program. In Uganda and Zimbabwe, for example, the manual processing of claims, combined with the many stages that a claim needs to go through before payment is dispersed, leads to long delays for legitimate recipients waiting to receive their benefits (Dhembe et al., 2002; Kasente et al., 2002). Significantly, as with most social security programmes, social assistance policies covered mostly public servants and administrative staff (van Ginneken 1999, Auerbach et al., 2005). For example, in Benin only salaried workers (5 percent of the actively employed population) are covered by public pensions.

Others have argued that social security provision in developing countries has evolved by default rather than by design. Most countries still find themselves in a transitional phase, however protracted. Traditional forms of social security co-exist with modern ones, supplemented by 'in-between' variants of an informal nature (Tostensen 2004). Workers in the informal sector, self-employed, domestic servants, apprentices and others have no protection. With few exceptions, African public and pension schemes and provident funds cover less than 10 percent of the labour force (Gillion et al., 2000:520).

Extending social security and fighting poverty constitutes a complex challenge to most developing countries in Africa. In 2001, the International Labour Conference defined some basic principles and approaches that should guide the process of extension of social security. It considered that there is no single best model of social security, and that priority should be given to policies and initiatives that can bring social security to those who are not covered by existing systems (ILO 2001). This is the case in some African countries as attempts are being made to broaden coverage for the rural population in particular.

For example, using a variety of initiatives, Tunisia succeeded in raising social security coverage - for health care, old age pensions, maternity and employment injury - from 60 to 84 percent of its workers and their families in just ten years. Nearly all Tunisians who work in the public and private non-agricultural sectors are covered. And, while coverage rates are still below 50 percent in the agricultural sector and among the self-employed, the government hopes that all workers will be covered in the years to come (Chaabane 2001).

On its part, Namibia introduced a universal pension scheme that has proven to be a major source of support to Namibia's impoverished communities. Thirteen years after its independence from South Africa's apartheid government, Namibia still faces enormous development challenges, including one of the World's highest rates of HIV infection and a poverty-rate that encompasses one-third of its population. However, Namibia also inherited an established social security system, which is now gradually being strengthened through social insurance schemes and improved governance

(Schleberger 2002). The backbone of Namibia's social security system consists of tax-financed benefits administered by the Ministry of Health and Social services and paid universally to people over age 60, as well as invalids and disabled people who are younger. Additionally, the ILO has worked with Namibia's Social Security Commission to create a national social insurance scheme, financed by contributions from employers and workers and providing income security in the event of sickness, maternity or death of a breadwinner. Within this system, a pension scheme is being planned to supplement the tax-financed universal pension (ILO 2002).

Interestingly, pensions and grants are paid on time and reliably and conveniently to eligible beneficiaries. To accomplish this aim, the Ministry issued "smart cards" with the beneficiary's photograph and a finger print that can be immediately verified by a machine. Crews headed by a paymaster travel regularly to thousands of "pay points" around the country, carrying with them automated teller machines similar to those found in many banks. Beneficiaries bring their smart cards, have their identification checked, and receive their benefits on the spot. These pensions, as Schleberger (2002) notes, are the only regular cash income in many rural households. Often, they provide the source of financing for basic items like school fees and medicines. Namibia's new method for distributing benefits, in addition to bolstering the security and credibility of the pension system, has also greatly improved access to pensions among many elderly Namibians, who, for many reasons, previously found it difficult to receive their payouts.

In sub-Saharan African countries, where up to 90 percent of working people are engaged in informal employment lacking even the most basic social protection,

communities of poor people have been banding together to create micro health insurance schemes to address basic needs for health security. In parts of West Africa, building health care coverage at the community level remains the most common schemes of social security. One example of this phenomenon is the “Wer Werle” micro-insurance plan, which was launched in Dakar, Senegal, in 1998 and offers health insurance services to more than 1,000 beneficiaries. Sponsored by an amalgamation of women-led anti-poverty organizations, Wer Werle collects the monthly equivalent of US\$ 0.25 from its members and, in cases of sickness, reimburses 100 percent of consultation and delivery costs and 50 percent of medical costs. The Plan has signed contracts with several health care providers, resulting in price reductions and better quality care for the group. In addition, it organises awareness raising campaigns on the prevention of hepatitis B, HIV/AIDS and malaria, and it has acquired a limited stock of generic drugs to make treatment more affordable for its members (see concertation.org).

3.2.1 State-based systems

With regard to the design of state-based social security schemes a distinction is normally made between social assistance and social insurance (Iyer 1993:189–192). The former is defined as benefits in cash or in kind financed by the state (at central or local level), as a rule provided on the basis of means-testing. Typical examples are so called safety nets for poor people in need. The concept also includes universal benefit schemes which are not means-tested, e.g. child and family support. Social assistance is non-contributory, i.e. the beneficiaries do not contribute in advance of drawing benefits. It is funded from general tax revenue. State-based social security systems are

modelled on European experiences and cater for people in the modern sector of the economy, i.e. only for those in organised public and private employment.

Another important distinction is drawn between defined-benefit and defined-contribution schemes. The former means that the benefits accruing to the beneficiaries are defined when the scheme is designed, which ensures the predictability of benefits. In the case of pension schemes the formulae used may be simple such as a flat rate per year of service or more complex such as a percentage of the average wage during a specified period of service (Barbone and Sanchez 2000:48–49). With regard to health plans the benefits are usually defined in terms of the treatment offered, including hospitalisation, and monetary ceilings or maximum duration of hospitalisation. Defined-benefit schemes can be public or private, compulsory or voluntary, contributory or non-contributory. In the case of public schemes, the benefits are often guaranteed by the state, in which case there is little incentive to improve performance.

By contrast, social insurance as a form of social security is financed by contributions and is based on the insurance principle. In this context, insurance is understood to mean the elimination of uncertainty associated with loss for the individual or the household. This is achieved by pooling the contributions of a large number of similarly risk-exposed individuals or households into a common fund that compensates the loss experienced by any member. In other words, resource-pooling and risk-sharing are defining characteristics of social insurance schemes which by nature are collective; as such they contain an element of redistribution. They may be administered either publicly by the state or privately by insurance companies. Social insurance schemes may be compulsory or voluntary.

On the other hand, in defined-contribution schemes – typically pension schemes – the benefits received depend on the contributions made previously. In principle, defined contribution systems are fully funded: the assets equal the liabilities (Barbone and Sanchez 2000:49). Provident funds are typical examples of such arrangements. The members pay individual contributions during their working life on the pay-as-you-go principle. Upon retirement they receive the accumulated contributions in a lump-sum payment plus accrued interest, less administrative costs. Alternatively, annuities may be set up. Individual accounts are kept for each member. A major weakness of such schemes is the effects of inflation and currency devaluation, which tends to erode the real value of the pension benefits received. With good financial management, however, the yield on the investment of fund reserves might compensate for the inflation loss. With defined-contribution systems, the beneficiaries have a strong incentive in improved management and would have sought to ensure that it happened if proper mechanisms were in place. Most often they are not, though.

Few countries in sub-Saharan Africa have defined-benefit pension schemes so far. But it is politically very tempting to convert provident funds to defined-benefit systems, partly due to the poor performance of the former and partly because the lump-sum payments to the beneficiaries are grossly inadequate. The short-term political and economic attraction of this conversion lies in the ability of the government to improve its outlays to beneficiaries without increasing its contributions. It may even be possible to increase the range of benefits. This apparent ‘miracle’ is possible because the scheme thus moves from a fully funded to an unfunded system. The long-term

consequences will not have to be faced until well into the future. If the fund is well managed and the returns on investments are competitive, the conversion may be sustainable for a considerable period of time. However, with a changing age structure of the population and the increasing life expectancy of pensioners, pressures will be mounting and eventually the reserves will be depleted. At some point contributions will have to be increased or the benefits reduced (Barbone and Sanchez 2000:51). Sustained economic growth and a broadening of the contributions base would, of course, postpone that eventuality, and politicians seem to bank on that.

Tanzania converted in 1998 its erstwhile National Provident Fund to a fully-fledged National Social Security Fund to be implemented in phases (Bandawe 2000). In the first phase, the new scheme provides a qualified member with at least 15 years' membership comparatively generous pension benefits from the age of 60, including monthly payments (Ejuba 2000:19). Four other African countries have done the same: the Seychelles (late 1970s), Ghana (1991), Nigeria (1994), and Zambia (1997). Kenya, Swaziland and Uganda plan to follow suit. Gambia administers both a social insurance pension scheme and a provident fund. Mauritius and the Seychelles operate both universal as well as employment-related benefit programmes. Botswana introduced a means-tested social programme in 1980 (Bar-On 2001) and provides a social pension scheme.

Of the types of social security benefits that the ILO and the International Social Security Association prioritise, two take precedence in sub-Saharan Africa: old-age and survivor benefits; sickness and injury benefits. Given the state of African economies and the very high rate of unemployment, it would definitely not be feasible

to introduce a tax-funded unemployment benefit scheme. International organisations have advised against it (Kaseke 1988:17). For much the same economic reasons, maternity benefits, child and family allowances have been left out; fertility rates are too high. The exception is social assistance for those close to destitution, which has been politically inevitable.

One of the main social protection problems in Africa is coverage. The normative and political imperatives of extending existing schemes are so strong that it seems unavoidable. On the other hand, the economic and fiscal situation is such that the prospects are bad in most sub-Saharan African countries for the introduction of tax based social assistance schemes either on a universal or means-tested basis. The number of poor is simply too large and the tax base too narrow. Contributory health insurance schemes suffer from similar problems, mainly because of the unpredictability of benefits and the adverse selection problem (Cichon and Gillion 1993).

The prospects are some what better with respect to contributory pension schemes. A convincing case can be made for the judicious extension of coverage in order to improve the financial base. More contributors mean greater revenue immediately while the payable benefits may be deferred into the future. Trust and governance are the main hurdles. Apart from the question of scope and coverage, existing public social security institutions face major problems of governance and management (Bailey 2000). The administration of social security systems is complex and many schemes have not been managed in the best interest of the contributors and

beneficiaries. There are deficiencies in record keeping and in the processing of benefit claims (Gillion et al. 2000:522).

In terms of financial management the greatest challenge is related to compliance. Failure by participants to fulfil their payment obligations threatens both the legitimacy and financial viability of the schemes. If evasion is widespread, governments may be compelled to cover the shortfall (McGillivray 2000:77). For employees, social security contributions are, as a rule, withheld from their wages by their employers who, in turn, are legally required to remit the contributions, along with their own, to the appropriate collection authority. Normally, this check-off system works well but sometimes employers fail to make the remittances within the specified time limits. An employee's evasion presupposes collusion with the employer, but more often the employers collude with the compliance officers of the collection authority. If schemes comprise self-employed and young, domestic, casual or part-time workers, the scope for evasion is even greater. Evasion is prevalent among employers in small-scale enterprises, in the informal economy and those in financial difficulties. Typical evasion techniques include failure to register eligible workers, under-reporting of earnings, and delay or failure to remit contributions (McGillivray 2000:78–82).

With economic meltdown, State-based systems are riddled with problems of corruption, mismanagement of provident funds, under-funding of social assistance schemes, lack of a clear-cut institutional framework for social insurance programmes, and evasion amongst employers to remit employee contributions.

3.2.2 Market-based systems

In the 1980s structural adjustment programmes emphasised liberalisation, deregulation and a reduced role for the state. These developments provided new opportunities for the private sector. Hence, complementary market-based social security schemes run by private insurance companies on a commercial basis were introduced alongside the state-based systems.

Although market-based systems are on the ascendancy they still play a marginal role in the total provision of social security. This is a reflection of the state of African economies and the low income level of the majority of the population.

While the efficiency and quality of commercial social insurance systems are recognised, their inaccessibility for the low-income strata renders them suitable instruments mainly for the affluent, urban-based parts of the population. Pressures to privatise social security have not really taken hold in Africa. Statist traditions are resilient and social security is considered such an essential service that the state prefers to retain it under its umbrella. Even so, since the investment performance of public social security funds has been so abysmal – in effect, funds have been appropriated by governments – a case can be built for privatising the particular investment function, if not the entire administration and management (McGillivray 1998:23).

3.2.3 Membership-based systems in civil society

Certainly, in many developing countries, and especially in sub-Saharan Africa, social organisations provide vital, material, moral, and other forms of support to members whose socio-economic conditions have been weakened by structural adjustment

(Acho-chi 2002). Among the dominant forms of social networking are the *njangis* popularly known as ‘merry-go-rounds’ (prevalent social networks, credit and rotational credit schemes for members on a weekly and monthly basis, crucial both in business development and survival in times of crisis) as conceptualised by Ardener and Burman (1995). Since the early 1950s, rotating savings and credit societies (ROSCAs), called *njangi* in Anglophone Cameroon and ‘tontine’ in Francophone areas, play an important role in mobilizing savings and building social capital. For insights into the dynamics of these credit societies in Cameroon, see for example, Ardener (1964), Delancey (1977); van den Brink and Chavas (1997); Ardener and Burman (1995); Niger-Thomas (1995); Rowlands (1995); Fonchingong (1999, 2005); and Mayoux (2001).

Owing to the limited coverage of state-based and market-based social security systems an array of membership-based schemes have emerged in civil society. They fill a gap left by the state and the market. The distinguishing criteria of these schemes are their internal homogeneity and limited size. Those who form such groups have something in common that bind them together in mutual interest: kinship or ethnicity; geographical origin, or friendship (Lourenco-Lindell 2001), and they are small enough to be manageable. These mutual-help societies take a multitude of forms. All over Africa, the best known are perhaps the informal rotating savings and credit associations-ROSCAs (see Ardener and Burman 1995).

The basic principle is the same everywhere: each member takes turn to collect all the contributions (everyone makes the same contribution). The pool may run for a short while, only a few months, or extend over several years; it may involve small sums of

money or considerable amounts; the members may be few or many; it may comprise a mixture of members, only women, only men, urban dwellers or rural peasants. The variants are legion but the basic principle remains the same. I have already discussed the dynamics of *njangis* earlier. Here, I focus on the membership forms of social networking that emphasize the specific needs of members who sign up. In Cameroon, some notable examples are teachers union, mutual cooperative societies representing various socio-professional groups, trade unions, market women and men's associations and other associations in civil society. Though the *njangi* component remains primordial, members also engage with other concerns specific to the profession or corps.

However, most ROSCAs are perhaps not primarily social security institutions. As a rule, the money pooled together within the society may be used for any purpose. Some members use it for investment, others for pure consumption items, and still others to withstand hardship in social security contingencies (illness, accident, death, unemployment, etc.). As such they constitute an important informal social security mechanism, which enables poor people to deal with contingencies.

A second, slightly more formalised type of social security arrangement is organised along co-operative lines. Savings and credit co-operatives (SACCOs) are often linked to the workplace or to ROSCAs. Small deductions are made regularly from the wage, and after a stipulated period the contributor is allowed to withdraw, say, three times his/her contribution. Repayment is also through a wage deduction. Again, there is generally no restriction on the use of the loan and many borrowers use the money to meet contingencies.

At present, social security arrangements hardly exist for the great majority of self-employed peasants in the rural areas. There is some scope, however, for crop-based schemes. To finance basic social protection levies could be imposed on cash crops delivered to co-operatives or other marketing organisations. The design of such schemes could be negotiated by the peasants in conjunction with the officers of their organisations, probably with technical assistance inputs from outside.

More or less formalised NGOs also perform social security functions but they appear to be less important than ROSCAs and SACCOs. Be that as it may, there seems to be scope for strengthening the role of NGOs in social security provision. Trade unions are particularly well placed in that regard, but their disadvantage from the point of view of coverage is that they are confined to the formal sector of the economy.

All the above civil society forms of social security have an untapped potential, and with concerted efforts their relative importance could grow. Some would argue that the state should leave them alone lest they become 'contaminated' and acquire the same problems that have beset the state schemes. On the other hand, judicious, unobtrusive technical assistance might be in order to improve management and enhance efficiency.

3.2.4 Kinship-Based and Religious Systems of Support

Two types of informal social security namely kinship-based support and community-based support have been identified (see Lloyd-Sherlock 1999; van Ginneken 2002; Dekker 2003). An exclusive emphasis on public arrangements and formal social security schemes for old persons largely neglects informal arrangements that are the

lifeblood of most old persons in developing countries that do not have comprehensive statutory social security systems. These arrangements include culturally determined obligations and practices emanating from kinship, neighbourhood and community ties and in many countries family members are expected to support one another (Midgley and Kaseke 1996). Such arrangements also include charitable donations arising from religious norms such as alms-giving in Christianity and Zakat⁴ in Islam and cooperative associations or mutual benefit societies, such as funeral, credit and informal savings societies providing assistance in cash and in kind (Midgley 1997).

The support system of the extended family is still alive in Africa, albeit now under severe pressure. Household expenditures are soaring with the introduction of cost sharing in education, health and other services due to high inflation rates. The dependency ratio is increasing due to unemployment, falling fertility rates, children orphaned by AIDS, and the destitution of relatives. All this constrains the ability of the households to contribute to informal social security networks, simply because there is little to spare. Instead, indebtedness results for an increasing number of households. The ratio of households forming the backbone of the informal social security system to those in need of support is falling. In the long run the feasibility of sub-Saharan social security systems will depend on sustained economic growth to create jobs and opportunities so as to improve the basis for both tax-based social assistance and a contributory social insurance. This will go a long way in increasing the assets and resources which indirectly affect the livelihoods of old people.

⁴ Zakat is an obligatory form of alms giving for Muslims, who are required to give a fraction of their wealth for the benefit of the poor in Muslim community. The Zakat is considered as a means of cleansing your wealth by washing away any dirt thereby preparing your way before death. Sadaka is geared towards meeting the needs of the poor based on the guiding principles of Allah.

Chapter Four: Social Security and Elderly Welfare Support in Cameroon

4.0 Introduction

This chapter situates social security in Cameroon by examining its ageing population, social insurance regime in place, obstacles facing the system commonality and difference of social protection to the rest of Sub Saharan Africa. Social protection in Cameroon resonates with the situation in the wider context of social security in Africa. Despite the colonial influence and legacies largely modeled upon the French and British Colonial policies, a number of conclusions can be drawn. The English model is built around a decentralized policy of provident funds hinged on the policy of indirect rule while the French model echoes the social insurance system and a more centralized bureaucracy, typical of French direct rule policy. Interestingly, informal welfare systems and community development initiatives are stronger in Anglophone Africa given the decentralized social policy options. Given its chequered colonial history, Cameroon is typical, being a medley of both colonial systems underpinned by different ideological and operational paradigms in social security provision. However, it is hard to discern a clear-cut demarcation as Gabon (former French colony), is an example where social assistance is selectively implemented to target informal sector workers. Whatever the policy options and colonial legacies, a vast majority of workers operating in the informal economy are excluded from social security. With few exceptions (South Africa, Botswana, Mauritius, Namibia), broad-based coverage of the population and access to pensions is problematic. In Cameroon as the rest of Africa, institutional governance, corruption, mismanagement and inept administration of pensions continue to impact negatively on social security regimes. This is undermined by a context of structurally weak growth, an expanding and largely

unregulated informal economy, soaring rates of unemployment, old age income security in short supply expose the population aged 60 and over to unbearable levels of risk, poverty and deprivation.

Given the lack of vital statistics on ageing in Cameroon, data from 1987 census, 1998 demographic health survey and data by United Nations population division on Cameroon are used to produce estimates. Few SSA countries including Cameroon do have credible data available from a recent census, and several countries have postponed their 2000 round census to 2006 or later (US Census Bureau 2006). With the support of the International Monetary Fund as a prerequisite for debt relief, Cameroon recently carried out a census in 2007 and whose results are yet to be published officially. According to a 2007 ranking by percent of population aged 60 and over, Cameroon's elderly population accounted for 5.7 percent and ranked 135 in the world, with an ageing index of 14.0 percent and ranked 139, indicating a movement from low to high (United Nations Population Division 2007). By selected age group, there was a net increase in the proportion of population aged 60 and over between 1990 and 2006. In 1990, the population aged 60-69 years was 348,000 increasing to 559,000 in 2006 and the population aged 70-79 accounted for 155,000 in 1990 moving upwards to 258,000 in 2006. The population aged 80 and over witnessed an increase from 36,000 (0.3%) in 1990 to 64,000 (0.4%) in 2006 (UNFPA 2006). The population aged 60 and over was (538,000) 4.5 % in 1990 and increased to (881,000) 5.0 in 2006. It is projected that this category of the population would increase slightly to (1,161,000) 5.4% by 2015 and to (1,809,000) 6.6% by 2030 (U.S Census Bureau, International Data Base 2007).

Though the demographic profile shows that Cameroon's population is relatively young, the population aged 60 and over is projected to grow fairly. In 2006, the

majority of countries in SSA had median ages of less than 20 years, indicating that these countries including Cameroon had very young populations with implications for resource allocation within a country. Many countries in SSA still have fairly high levels of fertility. Fertility rates in Cameroon accounted for 4.6 percent in 2006. The historically high levels of fertility in many SSA countries help explain the very low proportion of people at older ages in these countries. With life expectancy at birth of 52.3% for both sexes and male being 51.7% and female 53.0% (WHO 2006), population ageing and the impact of HIV/AIDS on mortality rates will continue to reshape the population structure and age distribution in Cameroon over the next several decades. The growing number of older people, though relatively stable will pose serious development challenges against the backdrop of soaring unemployment (17%), out-migration, chronic poverty, grossly inadequate formal social security coverage, pensions in short supply, social benefits largely unavailable, growing number of informal sector workers and farmers uncovered, limited infrastructure and traditional support mechanisms needed to help assist the older population is either non-existent or fragmenting. Added to this is the roll back of the state and unfavourable political conditions. These are jeopardizing the efforts of government at delivering social services and building in place a universal social security and social protection policy for Cameroon.

Given the abysmally low social protection provided mostly to civil servants, the available literature looks at alternative forms of social protection. The case of old persons (mostly self-employed farmers and traders) yearning for social support networks and traditional mechanisms such as *njangis* (tontines), mutual societies and village-based associations are reviewed. But, as yet, the literature on social security

and the regulatory framework has not been pieced together. This section considers the policies and implications on elderly welfare.

4.1 History, Economic Perspective and Political Conditions

Cameroon is situated in the Gulf of Guinea covering an area of 475,000 square kilometers with an estimated population of over 18 million inhabitants, distributed into ten administrative provinces with 52.7 % of the population resident in rural areas. The annual growth rate for 2001-2002 stood at 5.7% (World Bank 2002, U.S. Department of State and Bureau of African Affairs 2002). Between 1975 and 1985, Cameroon's economy grew annually over 10 percent in real terms. All this changed by the late 80s with a sharp decline in world market commodity prices for many of the country's primary exports – palm oil, cocoa, coffee, and cotton. The decline intensified in late 1980s and 1990s and the dismal economic performance was exacerbated by the implementation of structural adjustment programs from 1987, with attendant effects on household incomes and social services. Real per capita GDP fell by more than 60% from 1986 to 1994 (Konings 1996). Others have blamed the stalled economic growth on internal economic mismanagement, endemic corruption, shocks to the internal financial and trade system (Jua 1991, Van de Walle 1994). As van Ginneken (1999) contends, the successive waves of structural adjustment programs pursued in most developing countries led to wage cuts in the public and private sectors, thereby eroding the financial base of statutory social insurance schemes.

Economically, Cameroon is classified by the World Bank as a low income country and was recently (2006) considered under the Heavily Indebted Poor Countries Initiative (HIPC) initiated by the Bretton Woods Institutions (World Bank and IMF)

for debt service relief overtime worth \$2 billion. In December 2000, the IMF also approved a new 3-year program worth \$133.7 million aimed at reducing poverty and improving social services. By 2001, four of Cameroon's 11 state-owned enterprises earmarked for privatization were sold to the private sector under the aegis of the privatization program. The work force is agrarian with over 70% making a living in agriculture and 13% involved in industry and commerce (U.S. Bureau of African Affairs 2002). Cameroon is a member of the Economic and Monetary Community of Central Africa (CEMAC). According to World Bank statistics for 2003, Cameroon had a GDP per capita \$580, poverty head count of 60.9%, HIV prevalence rate in the age group 15-24 of 5.4% for males and 12.7% for females (World Bank 2003). The incidence of income poverty is more acute in rural areas of Cameroon. The International Monetary Fund (IMF) Country report puts it in rural areas at 49.9% and 22.1% in urban areas (IMF 2003).

With the support and prescriptions of the World Bank and International Monetary Fund (IMF), the government of Cameroon embarked on a series of economic reform programs in the late 1980s. Many of these measures were draconian; the government slashed civil service salaries by 65% in 1993. The CFA franc - the common currency of Cameroon and 13 other African states was devalued by 50% in January 1994. The economic restructuring was painful as it led to loss of public services, dealt a huge blow to the purchasing power of Cameroonian households was compounded by massive lay-offs in the public service (Fonchingong 1999). The darkest side of the structural adjustment programs was a drastic drop in living conditions. Increases in user fees especially for health, the snowballing of the informal sector occasioned by

redundancies and fragility of employment, worsened the situation of the most vulnerable (Epee Kotto 2004).

Cameroon is ethnically and religiously diverse with over 250 ethnic groups. The ethnic groups/tribes are represented as follows: Western highlanders/grass fielders 31%, Equatorial Bantu 19%, Kirdi 11%, Fulani 10%, and Northwestern Bantu 8% (World Language 2007). This makes political conditions complex as the politicization of ethnicity is commonplace. The dark side of ethnic politics resonates Bayarts' (1993) 'politics of the belly', a system of reciprocal assimilation with the political elites as a self-reproducing thieving ruling class. State clientelism and patronage is the order of the day occasioned by the plundering of vital state resources through ethno-client networks. There is entrenched corruption in which the political elite grow rich while the mass of the people remain poor (Fonchingong 2005). Christians make up 53%, Muslim 22% and indigenous African 25% of the religions.

With its chequered colonial history, Cameroon was colonized by the Germans, then, subsequently the French and British. Its independence dates back to January 1, 1960 for areas formerly ruled by France and October 1, 1961 for territory formerly ruled by Britain. Beginning in 1884, all of present-day Cameroon and parts of several of its neighbours became the German colony of Kamerun, with a capital first at Buea and later at Yaoundé. After World War I, this colony was partitioned between Britain and France under a League of Nations mandate (June 28, 1919). France gained the larger geographical share, transferred outlying regions to neighbouring French colonies, and ruled the rest from Yaoundé. Britain's territory - a strip bordering Nigeria from the sea to Lake Chad, with an equal population - was ruled from Lagos. Data presented

in this research is derived from fieldwork in the two English speaking provinces; formerly part of West-Cameroon, and ruled by the British as a province of Nigeria under the mandate of the League of Nations (later United Nations) from 1919 onwards (Van den Berg 1993: 5). After independence in 1960, both the Western and Eastern part of Cameroon was reunited, at first federatively in 1961 and after 1972 as a united state (Ngoh 1996). Some old persons had served with the West Cameroon government administered by the British Colonial authority in Eastern Nigeria and at re-unification, they were integrated in the public services of the then United Republic of Cameroon.

Cameroon is a country riven by politicization of ethnicity in which politics is driven by an alignment of regions to political parties. At the last three parliamentary elections since 1992 and until recently, the Centre, South and East Provinces are largely aligned to the ruling party the Cameroon's People Democratic Movement (CPDM); Northwest, West, Littoral and Southwest provinces to the Social Democratic Front opposition party; and North, Far North, and Adamawa to the National Union for Democracy and Progress, which is allied to the CPDM. Trends changed drastically in the 2002 and recently (July 2007) legislative and municipal elections as the CPDM made substantial progress in 're-possessing' these constituencies, hitherto aligned to opposition parties (see Fonchingong 2004, 2005).

4.2 Ageing and Social Security in Cameroon

Currently, Cameroon with its population of approximately 18,060,382 million inhabitants has 917,520 persons of 60 years and above. The age structure is represented as follows: 0-14 years, 42.1% with male estimated at 3,443,505 million

and female at 3,367,571. In the 15-64 years category, it stands at 54.5% with male estimated at 4,431,524 and female at 4,392,155 and in the 65 years and over, it stands at 3.4% with male estimated at 253,242 and female at 296,751 (Ministry of Economy and Finance 2002, World Language 2007, United States Bureau of African Affairs 2007).

The United Nations further estimates that the number of persons above 60 years will be four times the present number in 50 years time in developing countries. United Nations statistics (2002) reveal that the global number of persons above 60 shall move from about 600 million to nearly two billion in 2015, representing nearly 60 percent of the population of developing countries. Within this framework, the African regional office of Help Age International with the support of the Cameroon Ministry of Social Affairs began discussions in Yaoundé (11-13 September 2006) to fashion practical social protection policies for the elderly given their vulnerability in terms of material resources, financial, health and physical incapacity (see *Cameroon Tribune* 12/09/06, *Mutations Quotidien* 12/09/06).

Presenting the position paper for Cameroon, the Minister of Social Affairs (Catherine Bakang Mbock), said the government of Cameroon is mindful of the situation of old persons. The needs of the elderly receive scant attention every October 1st, recognised as International Day for Older Persons by the United Nations (see article in *Le Messager* of 13/10/06 entitled 'Des Personnes Âgées Pour Plus de Considération'). The government created in the Ministry of Social Affairs a department for social protection of the disabled and elderly, with a sub-department for the protection of old people. The new structure has the responsibility of elaborating a policy framework for the protection of old persons with the help of various partners. The Minister

reiterated that the seminar, which was the first of its type to be organized in Francophone Africa, would help mobilize the national and international community on issues of social welfare for old persons in Cameroon (see *Mutations Quotidien* and *Cameroon Tribune* 12/09/06). Speaking at this seminar, the Director of Programmes for Help Age International (HAI), Alex Bush said that few people think about the problems faced at old age. He explained that as people grow older earning an income becomes difficult and they are usually poor. He went further, elderly people face many different health problems and they are often excluded from their families and left to themselves. The cardinal objective of the seminar as stated by HAI was to:

‘sensitize the population to be better prepared for the challenges of caring for old persons, reinforce the institutional capacity of organizations that cater for old people, establish a framework for partnership between the state, civil society and international community to face the daunting task of addressing the problems associated with ageing’ (*Mutations Quotidien* 14/09/06⁵).

⁵ See *Mutations Quotidien* 14/09/06 ‘Abandon : le mal-être des vieillards, Une faible prise en charge médicale restreint l’accès aux soins des personnes âgées.

The data below (Table 2) adapted from the ILO Social Security Programs throughout the World: Africa (2005), summarizes the official position, social security profile and regulatory framework for Cameroon.

Table 2

Old Age, Disability, and Survivors
Regulatory Framework
First and current law: 1969 (pensions), implemented in 1974, with 1984 and 1990 amendments.
Type of program: Social insurance system.
Coverage: Employed persons.
Exclusions: The self-employed.
Voluntary coverage for previously covered workers (not yet implemented).
Special system for civil servants.
Source of Funds
Insured person: 2.8% of gross earnings.
The maximum monthly earnings for contribution and benefit purposes are 300,000 CFA francs.
Self-employed person: Not applicable.

Employer: 4.2% of gross payroll.
The maximum monthly earnings for contribution purposes are 300,000 CFA francs.
Government: None.
Qualifying Conditions
Old-age pension: Age 60 with 20 years of insurance coverage and 180 months of contributions, including 60 months in the last 10 years. Retirement from employment is necessary.
The pension is payable abroad only if there is a reciprocal agreement.
Early pension: Age 50 with 20 years of insurance coverage and 180 months of contributions, including 60 months in the last 10 years.
Old-age grant: Age 60 (age 50 for early retirement) and ineligible for the old-age pension, with at least 12 months of contributions.
Disability pension: A loss of 2/3 of earning capacity with 5 years of insurance coverage, including at least 6 months of contributions in the last year. No contributions are required if the disability is the result of a non work-related accident.
Survivor pension: The deceased was a pensioner or met the pension requirements at the time of death or had at least 180 months of insurance coverage.
Eligible survivors are a widow(er) of any age, children younger than age 14 (age 18 if an apprentice, age 21 if a student or disabled), and dependent parents.
Survivor grant: The deceased met the requirements for the old-age grant.
Old-Age Benefits

Old-age pension: The pension is equal to 30% of average monthly earnings in the last 3 or 5 years (whichever is higher), plus 1% for each 12-month period of contributions beyond 180 months.
The minimum pension is 50% of the legal minimum wage.
The maximum pension is 80% of the insured's average monthly earnings.
Constant-attendance supplement: Equal to 40% of the old-age pension.
Old-age grant: A lump sum equal to the insured's average monthly earnings times the number of 12-month periods of coverage.
Permanent Disability Benefits
Disability pension: The pension is equal to 30% of average monthly earnings in the last 3 or 5 years (whichever is higher), plus 1% for each 12-month period of contributions beyond 180 months. For each year that a claim is made before the insured reaches age 60, the insured is credited with a 6-month insurance period.
Constant-attendance supplement: Equal to 40% of the insured's disability pension.
Survivor Benefits
Survivor pension: 50% of the deceased's old-age pension is payable to the widow(er). If there is more than one widow, the pension is split equally among them.
The pension ceases on remarriage.
Orphan's pension: 15% of the deceased's old-age pension is payable to each orphan; 25% for each full orphan.
Dependent parent's pension: 10% of the deceased's old-age pensions each.
Other eligible survivors (in the absence of the above): The pension is split equally

among other relatives.
The total survivor pension must not exceed 100% of the deceased's old-age pension.
Survivor grant: A lump sum equal to 1 month's pension (based on 180 months of contributions) for each 6-month period of contributions.
Administrative Organization
Ministry of Employment, Labour, and Social Security provides general supervision.
Managed by a tripartite council and director general, the National Social Insurance Fund (http://www.cnps.com/) administers the program.

Sickness and Maternity
Regulatory Framework
First law: 1956.
Current law: 1967, with 1995 amendment.
Type of program: Social insurance system. Maternity benefits only.
Coverage

Employed Women.
Exclusions: Self-employed women.
Source of Funds
Insured person: None.
Self-employed person: Not applicable.
Employer: See source of funds under Family Allowances, below.
Government: None.
Qualifying Conditions
Cash sickness benefits: No statutory benefits are provided. (The Labour Code requires employers to provide some paid sick leave.)
Cash maternity benefits: Six months of consecutive employment and insured at the date of childbirth.
Sickness and Maternity Benefits
Sickness benefit: No statutory benefits are provided. (The Labour Code requires employers to provide some paid sick leave.)
Maternity benefit: 100% of the last monthly earnings. The benefit is payable 4 weeks before and 10 weeks after the expected date of childbirth; up to 16 weeks after childbirth in case of complications).
Workers' Medical Benefits
Insured women and the spouses of insured men receive 1,400 CFA francs toward expenses in connection with childbirth and 200 CFA francs for each prenatal

examination and for paediatric care examinations for up to 6 months.
Some free medical care is provided by government health facilities.
The labour code requires employers to provide certain medical services.
Dependents' Medical Benefits
No statutory benefits are provided.
Some child health care and welfare services are provided to mothers and children under Family Allowances, below.
Administrative Organization
Ministry of Employment, Labour, and Social Security provides general supervision.
National Social Insurance Fund (http://www.cnps.com/) administers the program.

Work Injury
Regulatory Framework
First law: 1944.
Current law: 1977 (work injury).
Type of program: Social insurance system.
Coverage
Employed persons, apprentices, seamen, technical students, and persons in training.
Exclusions: Civil servants.
Voluntary coverage for the self-employed (not yet implemented).
Source of Funds
Insured person: None.
Self-employed person: Not applicable.
Employer: 1.75%, 2.5%, or 5% of gross payroll, according to the assessed degree of risk.
Government: None.
Qualifying Conditions
Work injury benefits: There is no minimum qualifying period.

Temporary Disability Benefits
The benefit is equal to 2/3 of monthly earnings during the 3 months before the onset of disability. The benefit is payable from the day after the onset of disability until full recovery or certification of permanent disability.
The maximum daily earnings for benefit purposes are 17,933 CFA francs.
Permanent Disability Benefits
Permanent disability pension: If totally disabled, the pension is equal to 85% of average earnings during the 3 months before the onset of disability.
The minimum monthly earnings for benefit purposes are equal to the legal minimum wage (23,514 CFA francs per month).
The maximum monthly earnings for benefit purposes are 537,994 CFA francs.
Constant-attendance supplement: The annual benefit varies according to the value of the insured's salary and the sector of activity in which the insured is employed.
Partial disability: If the degree of disability is at least 20%, the pension is a percentage of the full pension according to the assessed degree of disability; if the assessed degree of disability is less than 20%, a lump sum equal to 10 years' partial disability pension is paid.
Workers' Medical Benefits
Benefits include medical and surgical care, hospitalization, medicines, appliances, X-rays, laboratory services, and rehabilitation.
Survivor Benefits

Survivor pension: The pension is equal to 85% of the deceased's average earnings in the last 3 months.

The pension is split among the eligible survivors according to the schedule in law. Eligible survivors are a surviving spouse, children younger than age 14 (age 18 if an apprentice, age 21 if a full-time student or disabled), and dependent parents.

Funeral grant: The cost of the burial.

Administrative Organization

Ministry of Employment, Labour, and Social Security provides general supervision.

National Social Insurance Fund (<http://www.cnps.com/>) administers the program.

Family Allowances
Regulatory Framework
First law: 1956.
Current law: 1967, with 1995 amendment.
Type of program: Employment-related system.
Coverage
Employed persons.
Exclusions: The self-employed.
Special system for apprentices with families.
Source of Funds
Insured person: None.
Self-employed person: Not applicable.
Employer: 7% of gross payroll; 5.65% (agriculture) and 3.7% (private schools).
The maximum monthly earnings for contribution purposes are 300,000 CFA francs.
The above contributions also finance maternity benefits under Sickness and Maternity, above.
Government: None.
Qualifying Conditions

<p>Family allowances: The child must be younger than age 14 (age 18 if an apprentice, age 21 if a full-time student or disabled). The parent must be working 18 days or 120 hours a month.</p>
<p>Benefits continue to be paid during periods of work-related disability, for a 6-month period of sick leave, for a 14-week period of maternity leave, for a 3-month period if involuntarily unemployed, and during statutory vacation periods.</p>
<p>Allowances are also payable to old-age pensioners who retire with dependent children and to eligible survivors with dependent children.</p>
<p>Prenatal allowance: Must undergo prescribed medical examinations.</p>
<p>Birth grant: Must undergo prescribed medical examinations.</p>
<p>Family Allowance Benefits</p>
<p>Family allowances: 1,800 CFA francs a month for each child. The allowance is paid every 3 months.</p>
<p>Prenatal allowance: 1,800 CFA francs a month for 9 months. The allowance is paid in two installments.</p>
<p>Birth grant: 21,600 CFA francs for each birth.</p>
<p>Some child health care and welfare services are also provided to mothers and children.</p>
<p>Administrative Organization</p>
<p>Ministry of Employment, Labour, and Social Security provides general supervision.</p>

The table above is instructive of the fact that Cameroon's social protection system has become obsolete. Modelled on the 1952 ILO convention, most of the social security benefits are not implemented because of systemic failure and institutional governance problems, inadequate coverage and a bungling bureaucracy. Only 10% of Cameroonians are covered, mostly civil servants and in most cases, they find it difficult to claim for other benefits such as accident and injury at work, sickness and hospitalisation costs, birth grants, maternity benefits and unemployment benefits for old people as well as minors. There are structural deficiencies and inequalities in the allocation of pension entitlements given Cameroon's dual pension regime for public and private sector workers. Pension entitlements and other social benefits (provident funds) are mostly conceived through men and those who have taken a public service route. Social benefits are conceived uncritically as family benefits (allowances) which does not consider the context of polygamous households, a prevalent feature in Cameroon. The assumption behind the provident funds seems to be that the benefits paid to the employee cover them and their dependents against specific contingencies.

4.3 Administration and Social Security Regime in Cameroon

Social policy in Cameroon is dictated by the Ministries of Labour and Social Security, erstwhile Ministry of Labour and Social Insurance, (formerly Ministry of Labour and Employment), Ministry of Social Affairs, Ministry of Public Service and Administrative Reform, Ministry of Public Health and Ministry of Economy and Finance. Each ministry is charged with overseeing in its own sphere the design and implementation of specific social policy and security policies as formulated by the government. Significantly, social security in Cameroon is a replica of ILO's Social Security (Minimum Standards) Convention, 1952 (No. 102) which emphasizes the

social insurance model rather than social assistance. The convention identifies nine areas for social insurance, i.e., medical care as well as benefits in case of sickness, unemployment, old age, employment injury, family circumstances, maternity, invalidity and widowhood. This is based on contributions from the active working population in the public and private sector. There co-exist two regimes for social security in Cameroon; one is managed by the Public Service covering civil servants and the other managed by the CNPS covering the social insurance schemes for private sector workers. For the public sector, civil servants who have served in the public service and who retire at the age of 60 and the ceiling of 65 as embedded in Public Service Code are entitled to pensions based on monthly deductions from their salary. Those who have served in the private sector rely on their employers to make the necessary contributions to the National Social Insurance Fund (CNPS), a French acronym which stands for 'Caisse Nationale de Prevoyance Sociale'. This oversees and manages the social insurance schemes of Cameroon that went operational in 1967.

Public service protection is offered to civil servants depending on the government regulations for pension and other entitlements based on the fulfilment of certain conditions as spelled out in the relevant public service text. According to government statistics, there are currently 160,000 civil servants and 84,000 pensioners⁶ according to the recent census of civil servants and pensioners, between May and August 2006. The statutes of the public service considers retirement as marking the end of a public service career of a public servant and open the doors for a pension entitlement paid through the public treasury. In the 1992 text, article 123, paragraph 2, states that retirement is contingent on two grounds: first, when the public servant has reached

⁶ See Mutations Quotidien No. 1921, Friday 8th June 2007, 'Fonction Publique: Le retour des avances sur solde et pensions. Révélation faite hier a Yaoundé au cours d'une conférence conjointe Minefi-Minfopra.

retirement age, which is subject to modification depending on the particular and specific circumstances and second, voluntary retirement (*retraite anticipée*). For voluntary retirement, there is a fixed categorisation for public servants as follows: 50 years for categories C & D; 55 years for categories A & B. However, depending and the nature and specificities, the President of the Republic can modify some of the dispositions of the text. The 1992 Labour Code spells out similar conditions for workers in the private sector⁷ (Cameroon Tribune 24/07/2002, pp.2-5).

For financing of the public service regime, 10% is deducted monthly for contributions towards old age pension from the salaries of civil servants and 2.8% for state agents (those recruited in the public service on contractual basis) as prescribed by the Labour Code (Tantoh 1999, Bowen 2004; Epee Kotto 2004; ILO social security profile for Cameroon, 2005).

4.4 Pitfalls of Cameroon's Social Security System

The social insurance scheme managed by the CNPS is run as a parallel scheme to the official social security system under the auspices of the Ministry of Finance and Public Service and Administrative Control. Both regimes contain policies covering 'sickness and maternity' especially for women but which have fallen short of implementation. Modernising Cameroon's social security system is imperative considering the inadequate safety nets for old people in both the public service and social insurance regimes. There is general consensus among policy makers and other stakeholders that the system of social protection needs reform. Though attempts have been made in the past by some government decrees to re-align social protection for

⁷ See *Cameroon Tribune* No. 7645/3934, 24 Juillet 2002, Le Dossier de la Rédaction 'Pourquoi la retraite est toujours amère'

the large segment of the population not covered, these policies have been mere rhetoric and lack of concrete action.

Epée Kotto (2004) describes the vicissitudes in government policy by observing that in the early 1980s, the government instructed the CNPS to consider extending the family allowance scheme to cover farmers and other agriculturalists grouped in cooperatives. The feasibility studies revealed that the budget of the CNPS at the time (20 billion) would need to be trebled (approximately 60 billion) and the office charged with the commercialisation of export crops could not provide its own share of the needed funds, leading to the collapse of the scheme. A second attempt to provide coverage for informal sector workers contained in decree No 84/007 of July 4 1984, a modification of certain dispositions of decree No 69LF18 of November 10 1969, instituted a regime for old age pension, invalidity and death, but this again was a fiasco. These failings in implementation dashed the hopes of many informal sector workers as the CNPS continues to offer protection only to private sector employees and their families. Tantoh (1999:5-6) in her paper entitled 'what social protection for the third Millennium', presented at the conference of officials of central and external services (25-27 August 1999) of the then Ministry of Employment, Labour and Social Insurance, stated:

'D'une manière générale, toutes les études faites ces dernières années au Cameroun s'accordent sur le fait que le système Camerounais de protection sociale est obsolète. Notre système est peu conforme aux normes de L'OIT qui, dans sa convention No. 102 énumère un certain nombre de prestations sociales à prendre en compte pour reconnaître l'existence de la sécurité sociale dans un pays. Le Cameroun ne couvre pas encore les risques maladie

(soins), maladie (indemnité journalière), et chômage. Notre système ne couvre que 10% à peine de la population dans un environnement socio-économique caractérisé par des besoins croissants en matière de protection sociale, cette couverture s'est limitée au secteur formel, laissant hors du champ de protection sociale 90% de la population active du Cameroun. Le système de pension de retraite commencer à poser des problèmes quant à sa pérennité à long terme. Le gel des recrutements dans la Fonction Publique et les fermetures d'entreprise dans le secteur privé avec des compressions d'effectifs ont pour conséquence un ratio de dépendance cotisants/pensionnés défavorables'.

'It is abundantly clear that Cameroon's social protection system has become obsolete. Our system is aligned to the standards of the ILO, convention 102 which spells out the nine areas for social insurance. But Cameroon is yet to provide protection against sickness, medical benefits and unemployment. Our system covers just 10% of the total population in a difficult socio-economic context of hardship and deprivation with many persons needing social protection, but coverage is limited to the formal sector, leaving uncovered 90% of the active population from any form of social protection. The pension system for retirees has proved its limits as to its sustainability in the long term. The freeze in public service recruitment and the closure of most companies in the private sector with serious underpinnings and redundancies have a resultant effect of reducing the number of potential contributors and would-be beneficiaries thereby creating an unbalanced equation' (My translation).

In addition, the discrepancy in various public service regime allocations and allowances for the different corps of the public service creates room for discretionary and arbitrary benefits. The

harmonisation of pension regulation in the public service is contingent on different or specific public service statutes and the pension regime for civil servants, regulated by different regulations. For instance, in the domain of old age pensions, invalidity and death, the state has put in place different allocations and regulatory texts based on the civil service status as follows: civil pensions, pensions for the military, pensions for auxiliary staff of administration, special regimes for former Presidents, Vice-Presidents, Prime Minister, former parliamentarians, state and contract agents of a certain category. Not all civil servants benefit from the allowances and other entitlements provided by the system. The discrepancy is also noticeable with family allowances. The legislation for family allowances provides for the reimbursement of medical costs incurred for prenatal consultations, during delivery and other medical costs incurred for the child up to 6 months. However, great delays in processing claims, the lack of an up-to-date database for employers and contributions by employees and the corrupt practices of some civil servants who make bogus and illegitimate claims has made the system unmanageable. The absence of a database coupled with the downside of corruption is captured by Tantoh (1999:10-11):

'la non maitrise du fichier employeur explique la perte des entrées des cotisations, tous les employeurs n'étant pas connus et recensés. Quant aux prestataires, la CNPS continue a payer les allocations familiales pour les enfants majeurs, décédés ou fictifs et cela sans limite ; elle paie le même accident du travail a la même personne dans plusieurs centres CNPS, elle paie les faux accidents du travail et maladies professionnelles montés de toutes pièces avec la complicité des agents de la CNPS. Elle calcule la pension de retraite sur la base des relèves de salaire que les retraités présentent (venant des employeurs) sans contrôler si effectivement ce dernier a gagné et cotisé pendant son activité sur cette base a la CNPS.

Nous disons que la CNPS a paye des sommes indues a certaines personnes qui ne sont pas seulement les assures sociaux, mais aussi a certains de ces derniers qui ont profite de cette situation, gonflant ainsi les dépenses du régime ces dernières années.

'The non-existence of a computer database for employers results in non-payment of employees contributions given that employers are not on a register. As for the CNPS, it continues to dole out family allowance payments for over-age children, those who have died or other fake persons without limits; CNPS pays the same accident and work injury claims to the same person in different CNPS centres, it pays for inflated claims for accident and work injury and professional sickness with the complicity of CNPS staff. It calculates retirement pension based on deductions on employees' salaries and endorsed by employers without effectively checking if this was the earnings and contributions of the employee to the CNPS. The CNPS has paid out unjustified and fabulous sums to unqualified persons who have exploited the lapses, thereby swelling the expenditure, running costs of the social insurance schemes under the tutelage of CNPS' (My translation).

The introduction of CNPS tax controllers in 2002 was meant to stem the tide of corruption and the lapses identified. Also worthy of mention is the fact that a census of pensioners and other service users of the CNPS was undertaken from March to June 2006, an exercise meant to weed out ghost beneficiaries. However, there is no autonomous institution to manage the social security system in the formal sector (covering civil servants), mostly managed by the Ministry of Finance and Public

Service while the CNPS manages the social insurance scheme covering private sector workers. For civil servants, deductions are made monthly from their salaries which builds up into pension benefits, which are drawn upon retirement from the public service. The Private sector scheme is mostly for non-civil servants and other workers who count on their employers to pay in their pension entitlements to the CNPS. On its part, the CNPS has been plagued with an insolvency crisis and debts that have become cumulative as a result of the economic crisis, unscrupulous employers who do not pay in social insurance contributions for employees, corruption and mismanagement of funds. As of October 2002, the CNPS had 40 billion of unpaid contributions from state owned corporations and other private sector companies. This is why the CNPS set up a tax recovery mechanism in partnership with the Taxation Department of the Ministry of Economy and Finance to collect outstanding contributions from employers and to oblige employers to pay in the benefits of employees regularly (see *Cameroon Tribune* 12/10/2002).

Accumulated debts and huge unpaid arrears have led to delays in the payment of social insurance dues in the running of the other social insurance schemes (maternity, sickness, accident and disability). These problems constitute a serious setback to the CNPS from fulfilling its mission of providing social insurance. Notably from 1995, with the appointment of a new Director (Louis Paul Motaze), there have been some significant changes and attempts at revamping the moribund CNPS. Through greater recovery efforts, 13 billion in arrears were paid out for various social insurance schemes: old age pension, invalidity and death allowance, family allowance, accident and injury in seven arranged periods beginning December 1999 (*La Nouvelle*

Expression 5/07/2002⁸). The new management embarked on the creation of periodic (temporary) payment centres (8 throughout the country) to decentralize the payment of entitlements and reduce the risk of travelling for long distances by pensioners and other old persons to payment centres, largely located in its 26 provincial and some divisional headquarters. The CNPS also revived its medical hospitals to provide greater care for patients as approximately 33,000 patients are consulted annually at National Social Insurance Fund Hospitals, though the hospitals are found only in major cities such as Yaoundé, Douala, Maroua and Garoua. Also, laudably is the social assistance component of periodic screening of old persons for major ailments like eye problems, back ache, diabetes and hypertension done at CNPS periodic pay and medical centres by specialist doctors and other para-medical personnel. However, the major problems remain: follow-up treatment after the screening and the complete absence of such services in rural areas where a vast majority of old persons reside. Speaking after the creation of a periodic centre in Akonolinga, in the outskirts of Yaoundé, the Director General of CNPS was unequivocal:

‘Nous savons qu’il y a parmi les bénéficiaires des personnes d’un age très avance et d’une sante précaire. C’est la raison pour laquelle nous jugeons préférable de nous rapprocher des pensionnés, en allant les payer sur place. Cette solution tient en effet compte aussi bien des contraintes des pensionnés, que de celles, d’une CNPS dont la situation financière, en dépit

⁸ *La Nouvelle Expression* No. 984 05/07/2002, ‘CNPS : a fonds la caisse, Outre la régularité retrouvée dans le paiement des prestations sociales, les arriérés de près de 13 milliards ont été apures, tandis qu’une politique de proximité et d’humanisation du service donne ses premiers résultats. A l’inverse, la restructuration et la modernisation de l’entreprise restent un chantier délicat’. Translated as : National Social Insurance : Leaving up to expectation, particularly the frequent payment of different social insurance schemes, 13 billion in arrears paid off and most importantly, a politics of decentralisation and greater rapprochement is yielding desired results. Admittedly, the restructuring and modernisation of the organisation remain priority projects’.

d'une embellie certaine, n'offre pas encore les marges nécessaire a l'implantation de centres permanents de prévoyance sociale' (*La nouvelle Expression*, No. 984, July 5, 2002)

'we are aware that amongst the beneficiaries are frail elderly whose health condition is precarious. It is for this reason that we thought it wise to decentralise by creating temporary payment centres. This approach takes cognisance of the constraints of pensioners and the position of CNPS, whose financial situation is deplorable and does not permit urgent action to implant permanent Social Insurance pay centres for its pensioners' (My translation).

Given that these periodic pay centres are open only during periods of payment, the CNPS collaborates with local services of the Ministry of Economy and Finance to make pensioners and other beneficiaries aware of payment dates and other arrangements for late comers. On the issue of delays in processing entitlements for old persons, the Director lamented:

'Il s'écoule trop de temps, parfois des années, avant que le retraite ne perçoive ses droits. Or dans notre philosophie, un retraite est quelqu'un qui a connu beaucoup de difficultés pendant sa vie active. De ce fait, il mérite un retraite paisible et débarrassé de tracas de toutes sortes. C'est pour cela que nous sommes en train de recevoir la procédure de prise en charge, pour l'expurger des contraintes inutiles' (*La Nouvelle Expression*, July 5, 2002)

It takes a long while, sometimes many years for pensioners to start receiving their entitlements. Meanwhile in our context, a pensioner is one who has had profound difficulties during the period of active service. On this score, they deserve a good rest and not to be entangled in all sorts of

bureaucracy. It is on these grounds that we are rethinking the approach of providing support by tackling all unwarranted constraints' (My translation).

Retired and old persons not covered by any of the two regimes are largely neglected in terms of care, support and social protection given the absence of any social assistance component. The disparity in living conditions of old people based on geographic location reflects Cameroon's public service policy whose administration and governance are largely centralised. Further, socio-economic strongly related to the wellbeing of old people in Cameroon. Those who have a long public service career, are resident in urban areas and have invested over time, especially in real estate and construction of houses, are better-off and can cope most easily with living conditions, while those resident in rural areas and without any access to pensions are worst off.

The quotes above paint a grim picture of social security in Cameroon. Bearing testimony, the Minister of Labour and Social Security at the conference of the central and external services of the Ministry of Labour and Social Security held in Yaoundé (13-15 February 2006) was unequivocal. Convened under the theme *La sécurité sociale au Cameroun: défis et perspectives*" (Social Security in Cameroon: Prospects and Challenges), the minister was categorical:

'seuls, 10% de la population active bénéficie de la sécurité sociale au Cameroun (7% dans le secteur public et 3% dans le secteur privé). 90% de cette population active constituée par les opérateurs du secteur informel, ceux de du monde rural et les indépendants ne sont pas couverts, étant encore exclus des différents prestations offertes aux employés directement par l'état, d'une part, et par le truchement de la Caisse Nationale de prévoyance sociale, d'autre part. Au demeurant, le lot des travailleurs

Camerounais qui ne goutent pas encore aux délices de la sécurité sociale est domine par les operateurs du secteur informel, qui participent, selon les statistiques officielles, a près de 50% dans le volume des activités économiques du Cameroun ; par les employés du monde rural. Pourtant, le premier pilier de la sécurité sociale est d'englober le maximum de la population d'un pays. Les familles des agents de l'état décèdes éprouvent souvent des difficultés pour disposer d'un simple cercueil après de bons et loyaux services rendu par ces derniers (see *Le Messager* 15/02/06, *Cameroun Tribune* 14/02/06 ; *Mutations Quotidien* 14/02/06 and 16/02/06).

The disparate allocations and calculations of pension entitlements for different corps of the public service could be interpreted by others as discriminatory and discretionary for particular corps of the civil service. This is captured by the Minister's intervention:

'La faible pénétration de la sécurité sociale au Cameroun, est également due aux régimes disparates qui se traduit par la multiplicité des statuts des personnels de l'etat, susceptible d'être interprétée comme des formes de discrimination envers certaines catégories d'agents. Face a ce tableau sombre a indique le ministre du Travail, le gouvernement a adopte une stratégie a deux volets visant à assurer la sécurité sociale a tous les Camerounais. Il s'agit d'une part, de la réhabilitation de la CNPS entamée depuis 1998, mais dont la finalisation reste attendue jusqu'ici, et de la reforme en profondeur du système de sécurité sociale au Cameroun, d'autre part' (*Mutations Quotidien* 15/02/06).

'The fragile social security system in Cameroon is attributable to the twin-track regime anchored on multiple statutes for public servants. This is usually interpreted as discriminatory for other categories of public servants.

Faced with this deep seated problem, the government has adopted a two-fold approach. The revitalization of the CNPS begun in 1998 with reforms ongoing and the vast extension of social security coverage are being pursued' (My translation).

Officials of the central and external services of the Ministry were unanimous on the need to revamp Cameroon's ailing social security system:

'Le système d'assistance sociale en vigueur au Cameroun est faible et revêt un caractère discriminatoire, même si, par ailleurs, il offre 7 des 9 types de prestations prescrites par la convention 102 de l'organisation Internationale du Travail (OIT), de manière générale, les textes relatifs a la prévoyance sociale sont maintenant obsolètes. D'ou impérieuse nécessité' de procéder a une reforme en profondeur du système de sécurité sociale du Cameroun. Le quel système exclu jusqu'ici des volets importants d'assistance tels que l'assurance maladie et l'assurance chômage, dans un contexte pourtant marqué par la faiblesse du pouvoir d'achat des Camerounais, la fin de la gratuite des soins médicaux et l'accès difficile a l'emploi'.

'The social assistance scheme in Cameroon is fragile and appears discriminatory, though it provides coverage for seven out of the nine aspects as prescribed by ILO convention 102. Admittedly, the regulatory framework of the CNPS has become obsolete, necessitating a critical rethink of our social security system. This system does not provide any basic social assistance particularly with regards to health insurance and unemployment benefits in a context of generalised hardship and the drop in the purchasing power of most Cameroonians, which is exacerbated by increasing health costs and soaring unemployment' (My translation).

Central to the statements and submission is the tacit acceptance of the problem of social security and grossly inadequate coverage for the vast majority of the rural population without access to formal social security. Any viable social security and social policy in favour of old persons in Cameroon merits greater discussion and depth in this thesis as 90% are without any form of assistance. Even for the 10% of the population (civil servants) that are presumably covered, health care and other daily needs of the elderly⁹ remains a major preoccupation. In spite of the existence of a government decree (Decree No 2000/692 Prime Minister of 13.09.2000, article 16) which provides for assistance with 60% of the health costs (consultation costs, medication, and hospitalisation) for civil servants, their families and legitimate children and 30% for informal sector workers, the decree is not applied because of corrupt practices, stifling bureaucracy and inefficient management. Despite some concrete steps taken in this direction with the creation of mutual health societies in some ministries, Cameroon's civil servants still do not benefit from the assistance with medical expenses as stipulated by the Prime Ministerial decree. Worst still, their pension entitlements are calculated on a fixed rate without due consideration for inflation, the living conditions and multiple, yet complex needs of retirees (*Cameroon Tribune*, July 24, 2002).

4.5 Alternative Forms of Reciprocity, Mutual Support and Social Security

Village based organisations, mutual societies and *njangis* are increasingly playing a paramount role in social security provision in Cameroon given the abysmally low social protection within the formal social security system. The surge of interest in participatory development within transnational development work has found a

⁹ *Le Messager* 12/02/2007 'Troisième âge : Etre vieillard, une vie a plusieurs vitesses, les quotidien des personnes âgées est rythme par certains besoins spécifiques'.

particular resonance in the North West Province where development initiatives based on community participation; self-help and self-reliance have a long history (Nkwi 1997, Acho-Chi 1998; Hickey 2002; Fonchingong and Fonjong 2002). Also, community cohesion is particularly strong in the Western highlands of Cameroon (West and North West Provinces). The North-West Province in particular (one of the study sites), unlike the acephalous societies of the other forest regions of Cameroon, has very strong and dynamic village development associations (VDAs). The creation of VDAs is spearheaded variously by concerned indigenes residing both within and outside the village, the elite, traditional rulers, and some retired and old persons of high standing in the community, often with institutional support from dynamic local administrators (senior Divisional or Divisional officers at the helm of state administration). Besides infrastructural provisioning, most VDAs are increasingly incorporating a social security component into their workings (Fonchingong 2005). The *njangis* are bedrock of VDA operational mechanism. Apart from the social networking (handling births, deaths, marriages, baptism, hospitalization) and building of social capital (through *njangi* schemes), these institutions operating on members' contributions constitute a linchpin in generating start-up capital for micro-enterprise development, small-scale trade, agriculture and livestock production and the mobilisation of vital resources for community development ventures (see Fonchingong and Fonjong 2002, Fonchingong 2005, 2006).

The history of *njangis* in Cameroon is traceable to the colonial era with the expansion of the credit union movement in Anglophone Cameroon, cooperative labour and other activities triggered by work on the plantations. They pooled savings together and interacted with one another, rekindling kith and kin relations as they were far-off from

'home' (see Delancey 1977, 1978, 1978a). In particular, since the 1950s rotating savings and credit activities (ROSCAs), called 'tontine' in Francophone areas and 'njangi' in Anglophone Cameroon have played an increasing role in mobilising savings at village level with the development of a cash economy (Mayoux 2001).

With the benefit of hindsight, Warnier (1993), in a biography of Bamileke entrepreneurs, distinguished several types based on their attitude to saving and investment. Of relevance in the classification is the group of older men, in their fifties or sixties. Referred to as self made men, they originally started saving through local *njangis* and investing their returns in market activities or trading and built up substantial, if diversified, businesses which as often as not collapsed with the death of the owner. Unarguably, economic activities depends heavily on participation in ROSCAs of a variety of forms and scale (Nzemen 1993, van den Brink and Chavas 1997, Ardener and Burman 1995, Niger-Thomas 1995, Rowlands 1995, Baham 1995, Tchente and Guileerme-Dieumegarde 1991). In providing important social and welfare resources, they constitute valuable social capital (Ardener and Burman 1995). Even in areas like the South West Province where traditional social ties have been broken by migration, ethnic cohesion is maintained within church-based networks called 'family meetings' which have women's wings (Mayoux 2001). In an article in *Le Messenger* Newspaper¹⁰ entitled: 'why Cameroonians prefer tontines and *njangi*', the reasons offered range from the lost of confidence in formal financial institutions, the hassles of opening and running accounts, cumbersome procedures and bureaucracy, high interest rates charged to the economic restructuring that ensued following the implementation of structural adjustment programmes in the late 1980s

¹⁰ See *Le Messenger* No. 2304, 05/02/2007 'Pourquoi les Camerounais préfèrent les Coopecs et les tontines. La perte de confiance et le formalisme bancaire sont les principales causes'

and the bankruptcy that rocked most banks in the 1990s, which created financial insecurity.

Many banks became insolvent and most account holders could not get back money they had saved. These developments led to a renaissance of tontines/*njangis* as those who had been excluded from formal financial institutions found solace in *njangis* given its diversity, flexibility and adaptability to the specific needs of members. A study carried out by François Colin Nkoa in 2002; found that only 18% of Cameroonians have bank accounts. Tontines and *njangis* are increasingly seen as alternative routes to formal financial institutions. More than 50% of the Cameroon population are engaged in various types of *njangis* which include the weekly, fortnightly, monthly, and bi-annually. The rate of contribution varies from 100 CFA to millions of Francs CFA per session (sitting), which is either weekly, fortnightly, monthly or annually.

Research elsewhere (Ardener and Burman 1995, Niger-Thomas 1995; Rowlands 1995; Fonchingong 1999, 2006; Mayoux 2001) has identified the forms of indigenous social capital in Cameroon. These include the work tontines/*njangi* (the same core women may work together in a named group on cash and/or in rotation on each others' land), money tontines (of different types but mostly involve persons of similar economic status), rotating funds (where members contribute regular amounts with each member taking turns to receive the lump sum from a series of small contributions); savings and loan fund (regular amounts are contributed into a savings fund which is then loaned out to others at interest); trouble fund (a portion of savings are often reserved in a sinking fund which members may access for serious health problems, births, deaths,

weddings); there are the family and ethnic meetings (for members of the immediate and extended family).

To discern a structure in all the possible variations of ROSCAs is not a straightforward task. De Villers (1992) and Rowlands (1995) distinguish between the *tontines mutuelles* (rotatory), *tontines commerciales* (ambulant) *tontine de solidarité* (symbolizes mutual aid and members use it to satisfy basic needs) and the business *njangi* or *tontines d'affaires/financières*. For ethnic meetings (made up of both men and women's groups, mixed groups) with formal structures, officers are appointed by the group and rules and regulations regarding the conduct and schemes covered are set up. It has been argued that the economic down turn in the late 1980s in Cameroon exacerbated the impoverishment of the masses and consequently, heightened the poverty situation of most households. Women were hardest hit since they had to cushion their families from the shocks, following the massive redundancies, cutbacks on social expenditure in key sectors like public health, education, agriculture and the loss of public services (Fonchingong 1999). Mayoux (2001) observes that the combined effects of structural adjustment, increasing pressure on land, male unemployment and the rising costs of living in all areas pushed more women (and men) into the increasingly competitive informal sector of food marketing, petty trade and micro-enterprise. Both men and women had to stem the tide by looking at different avenues for microfinance, hence the multiplicity of *njangis*, perceived as a means of securing livelihoods. Village-based and other self-reliant development efforts are being supplemented with handouts from local and international NGOs, which blossomed in the early 1990s against the backdrop of political and economic liberalisation in Cameroon (Fonjong 2001).

Effective participation in raising livelihoods and infrastructure provisioning is facilitated through men's and women's social networks and *njangis* (Fonchingong 2006). The common interest group insurance (caisse de solidarité) is based on the philosophy of *njangis*. It is a model based on high level of tribal affiliation. A common bond between members is founded on the basis of ethnicity; membership is restricted to the workers of a service or an enterprise or extended to the workers involved in the same sector. It is, as Develtere and Fonteneau (2003:28) observe, one of the most popular forms of group insurance in health in developing countries. These ethnic-based groups are prevalent in Cameroonian cities. Atim's (1999) study of the Babouantou Family Mutual Aid Association is a case in point. The Association was set up by individuals resident in Yaoundé (Cameroon) but who originated from Babounatou, a village 400km from Yaoundé. It was established in 1991 as a form of mutual self-help and solidarity with one another to provide financial cover against certain risks of life in a cosmopolitan environment. Social risks and events in life catered for include the costs associated with the birth of a new baby, deaths and funerals. A second objective was to assist its members by insuring them and their families against some of the costs of illness. 455 families and individuals were involved at the time Atim did his research into this group. The association holds regular weekly meetings at which over two-thirds of members regularly participate and the management is elected by the members. According to the rules and regulations of the association, every member must attend the funeral of a bereaved or deceased member (Atim 1999). Through community development initiatives, such meetings are convened in town or cultural halls (foyers) built by indigenes of the ethnic group resident in urban centres (see Fonchingong and Fonjong 2002).

From the available literature on Cameroon, one can surmise that little attempt has been made at fixing inherent problems and extending coverage. Though some efforts are being made by the government and the Ministry of Labour and Social Security to modernise and expand protection for old persons, such policies barely scratch the surface and have largely remained strong in rhetoric and weak in substance. Evidence culled from government regulations and newspaper reports point to this sombre picture. In the constitution of the Republic of Cameroon, the state forcefully declares its intention to improve the well-being of old persons, especially their health status. The preamble of the constitution proclaims the duty to protect old persons. Also, a presidential decree N°2005/160 of 25 May 2005 (First article) relating to the organisation of the Ministry of Social Affairs indicates the point of reference as:

‘Le ministère des Affaires Sociales est responsable de l’élaboration de la mise du gouvernement en matière de prévention et d’assistance sociales, ainsi que de la protection sociale de l’individu’

‘the Ministry of Social Affairs is charged with the putting in place government’s policy on social assistance and protection for old persons’.

First, this statement points to the extent of social assistance and not the quality of the policies. Second, the commitment by government and the complexity of providing social security involves a multi-faceted ministerial approach, which begs the question of the demarcation of roles between the Ministries of Labour and Social Security and Public Health and other ministries in guaranteeing welfare policies for old persons. Certainly, the duplication of functions, conflicting interests and lack of clear-cut boundaries between the ministries is a pointer to the politics of patronage and

clientelism that characterises political conditions in Cameroon (Fonchingong 2004). The Ministry of Social Affairs is charged not only with the protection of old persons but also children and handicapped persons. Providing aid and assistance to frail elderly is also part of its responsibility. Within the Ministry and according to decree No.2005/160 cited above, a directorate for handicapped and old persons was created and a sub-directorate in charge of the well-being of old persons was also fashioned but it is under resourced and unable to fulfil its assigned mission. The health care of old persons is a domain that warrants urgent attention as geriatric specialists and services are in short supply in Cameroon. Remarkably, for the entire country, it is only the Central Hospital in Yaoundé that runs a geriatric service with 8 beds for geriatric patients (see *Mutations Quotidien*, 14/09/06).

The literature paints a sombre picture of social security in Cameroon. In spite of government efforts to tackle the crisis; the problem remains deep seated marked by pointless re-organisation of ministries, tawdry promises on elderly welfare, patronage and clientelism. Given the state's disengagement, the elderly are fashioning new forms of coverage by taking recourse to mutual societies, village based associations and *njangis*.

Njangi operations are complex and while some hold money contributed in banks and other financial institutions, most *njangis* pass on the contributions in situ. The fundamental issue, yet unaddressed remains the fact that most rotating credit societies are not structured to handle money.

Chapter Five: Gender Dynamics of Population Ageing

5.0 Introduction

A number of studies (Sabates-Wheeler and Kabeer 2003; Knodel and Ofstedal 2003; Luttrell and Moser 2004) have catalogued the gender concerns related to population ageing and social protection. Others have pointed out that the benefits from social security are gendered, being affected by intra-household decision making about incomes and resource allocation (Lund 1993, Macdonald 1996). The tendency has been a simplification of the experiences of elderly men and a seeming aggregation of the problems of elderly women. Granted that the dilemmas of both women and men are different and that access to resources for survival in old age are unequal, this chapter attempts to capture the debates, analysis and discussions on gender relations, the relevance of gender-disaggregated data and the gender-differentiated impact of social protection programmes.

The demographic argument is often used as one common justification for emphasizing women over men when considering gender and ageing. The argument is that women dominate numerically at older ages. This argument is clear in both the Madrid and Cairo (ICPD) plans of action (United Nations 2002: paragraph 3; United Nations 1995: paragraph 6:16). Straightforward statements to this effect as Knodel and Ofstedal (2003) contend are included in a United Nations Population Fund (UNFPA) report produced in preparation for the Second World Assembly on Ageing: “In most countries, older women greatly outnumber older men. In many cases, the differences are so significant that the concerns of the older population should, in fact, be viewed primarily as a concern of older women” (UNFPA 2002a:11). The world of older people - in particular, the world of the ‘very old, aged 80 and over’- is

predominantly female as male life expectancy is lower than that for women. While social issues may be a factor in some context, there is also a biological cause.

Undertaking a gender analysis of the adjustment patterns and coping mechanisms of elderly men and women is imperative. It portrays the differential access to resources and its impact on elderly welfare. In their edited volume *Connecting Gender and Ageing, A Sociological Approach*, Arber and Ginn (1995:1) aver that gender and ageing are inextricably intertwined in social life; each can only be fully understood with reference to the other. They argue that as we age, we are influenced by the societal, cultural, economic and political context prevailing at different times in our life course. Thus the connectedness of gender and ageing stems both from social change over time and from age-related life course events; social history and personal biography are interwoven over time. They surmise that ageing and gender have not been integrated into mainstream sociological thought and have rarely been researched in terms of their combined influence. They argue further that at the macro level, we need to understand how age and gender are related to the distribution of power, privilege and well-being in society; and at the micro level, how age and gender contribute to identity, values, social networks and political and other affiliations.

Along these lines, McMullin (1995) states that studies on older people tend either to examine men and women separately or to include gender as a variable in the analysis. Indeed, old age is often viewed, at least demographically, as a women's issue and it is admitted that ageing generally affects men and women differently. Marital breakdown is likely to lead to material disadvantages particularly among women and hence a driver to chronic poverty. Heslop and Gorman (2002) also noted that chronic poverty

is a critical risk factor for older women, since the opportunities of re-marriage are very small, and the loss of their reproductive capacity means the loss of a major function in the eyes of society. Abandonment by husbands and loss of inheritance rights on the death of a spouse constitutes risk factors which thrust older women into chronic poverty (Beales 2000). Religion and culture can also conspire to isolate older women, as a woman's status in many societies is very dependent on having a husband, and divorce or widowhood can lead to a woman spending the rest of her lifetime in misery (Owen 1996).

While efforts are made by development policy-makers to integrate women and girls living in poverty into the labour market as a solution to poverty, this does not generally happen with older women. Older women are assumed either to be supported by their families, or; in all post-industrialised countries and in some developing countries to have a pension to fall back on. However, as Sweetman (2000:6) contends, neither of these is a guarantee of security in later life. In situations of extreme poverty, families often do not have adequate income to support an extra member, and need a pension to help with survival: in some situations, an older person's pension may ensure survival for their entire family. However, access to pensions depends on gender considerations.

5.1 An overview of Gender and Ageing in Africa

In developing countries, women dominate the group most likely to be without social security: unpaid family workers and home-based piece workers. Nevertheless, there has been an overall rise in female labour force participation over the past 20 years, including in the formal sector. However, this rise in the number of women in the

formal work force has occurred at a time when labour markets are being deregulated so that formal sector working and employment conditions have begun to increasingly resemble those of the more casualized segments of the labour market where women workers were previously to be found. In other words, there has been a dual “feminization” of work (Standing, 1999b): a feminization in terms of the gender composition of the workforce and a feminization in terms of the conditions of work and employment (van Ginneken 2002).

The World Bank (1994) notes: most women marry men older than themselves and are less likely than men to remarry after divorce or death of a spouse. Also, it is the case that women live longer than men and so a higher proportion of women end up living alone. According to a study conducted by Help Age International (1999) in collaboration with Help Age Ghana, it is observed that gender continues to influence older people’s participation in social and economic life. Older women, according to the study, are the bedrock of support for the family. In addition to providing childcare for the family, they also offer physical and financial assistance to older men. The report notes, that although older men appear to place a high value on this support, the contribution of older women is unlikely to be officially recognised. It is regarded as ‘domestic’ and therefore an extension of their normal responsibilities. The shift from dependence on economic sources of support (such as trading or wages) to dependence on social sources (such as provision by relatives) tends to be swifter for older men than older women because the social support is more likely to be available.

Still, according to research by Help Age International highlighted above, women are better able to diversify their activities at times of need: for example if older people

become homebound, the men are unlikely to remain economically active, whereas the women may still undertake petty trading activities. In principle, older men have the responsibility for household maintenance and the purchase of major assets such as land and livestock, while older women manage household income and daily expenditure. As a result women are more often able to economise in times of stress or to invest when they have small savings. It should be observed that the breadwinner ethic of men providing the household resources is increasingly contested given the lack of employment, loss of jobs and irresponsibility of some men in handling finances accruing to the household (Fonchingong 1999). The situation is even more complex in households managed by strictly women or men where the headship of the household has no bearing on intra-household resource allocation. Resources tend to be properly rationed and the risks associated with sharing are minimised. Grieco (1998) contends that a development management perspective on gender and ageing in Africa is needed. Such a perspective will draw attention to the differences in financial resources and differences in social organisation which make the situation of older women even more precarious in the developing world and particularly in Africa.

Stretching the problem further, Grieco argues that the financial insecurities and greater vulnerability experienced by older women is produced out of social structures which systematically favour males in earning and employment opportunities over the course of a lifetime. The cultural implications of growing old are rarely taken into consideration. Women who outlive their husbands experience a distinct drop in standard of living on the death of their husband because of much of their societal access to resources has been channelled through him (World Bank 1994, Help Age International 1995, Ageing and Development Report 1999). This situation, true of the

world's wealthiest societies, is exacerbated in African societies where widowhood practices frequently absorb the bulk of a wife/wives resources, property rights and customary laws continue to remove the roof over the woman's head and access to land, on her husband's death and where lifetime earning and saving potentials have been weak in any case given the structure of society (Grieco 1987).

5.2 Socio-Economic Perspectives on Gender and Ageing

The implementation of Structural Adjustment Programmes (SAPs) in most developing countries has exacerbated gender inequality and greater vulnerability of women. It is argued that social inequalities such as gender inequality have efficiency, equity and welfare costs which hamper growth (Palmer 1995, World Bank 1995). In Cameroon, household survival is contingent upon women's increasing presence in paid and unpaid employment, occasioned by the loss of public services (Fonchingong 1999). Structural Adjustment policies and other forms of neoliberalism (Moghadam, 1997b) are said to be a major factor behind the "feminization of poverty". The rolling back of the state and the resulting cuts in welfare services have an impact on women as providers and the consumers of health and social services (Cagatay 2003). Studies of privatization of public enterprises (ongoing) have shown that women are more likely to lose their jobs than men and that worsened conditions of work in the newly privatized enterprises also affect women disproportionately (Geldstein 1997).

Women are often in a disadvantaged position in the labour market. They may face direct discrimination and they are part of a gendered division of labour at home where they undertake a very large share of unpaid caring work. This division reflects certain biological factors (such as pregnancy, child birth, breastfeeding and sexuality),

socially-ascribed roles and responsibilities (care of children and family; 'secondary earner' status) and marital status. As a result, women are less able than men to take on or remain in full-time employment. This division affects the type of work women can undertake and the number of years they can stay in employment covered by social security. It often has an adverse effect (van Ginneken 2002:58) on their real earnings and earnings potential (due to gendered perceptions of employers), on their ability to attain and pursue training and on their prospects for professional advancement.

As the economic crises that often accompany SAPs continue to bite, employment and entrepreneurship opportunities in some sectors of the restructured economy often increase for some women, at the same time as levels of male employment have frequently declined (Waylen 2004). The rolling back of the state and resulting cutbacks in welfare services have a direct impact on women. The cuts in public services results in loss of paid employment while other women have to expend more time and effort in cushioning the shocks (Fonchingong 1999).

Currently the literature on globalisation situates the marginalisation of women in the face of global capitalism. Globalisation, defined here as the process whereby nation states are influenced (and sometimes undermined) by trans-national actors (Beck 2000a), has become a major force in shaping responses to population ageing. Epstein (2001) reports for example, that by the mid-1990s the African continent was transferring four times more in debt repayment than it spent on health or education.

Elderly people are also affected in different ways by inequalities in the global distribution of income. Estes et al. (2003) hold that income inequalities within and

between countries and regions may create a number of pressures upon older people, increasing the risk of poverty but also disrupting social networks as younger people abandon rural areas for cities, or attempt long distance migrations to wealthier regions or countries. It is also the case as expounded by Scholte (2000) that the neo-liberal consensus operating within globalization has undermined effective responses to many of the social and economic problems facing older people. Neo-liberalism echoing the development package formulated by dominant organisations, such as the World Bank and IMF have often intensified the difficulties facing elderly people. For example, with pressures to privatize core public services and reduce pensions as key elements in packages of economic restructuring (Stiglitz 2002, Estes and Phillipson 2003). Mittelman and Tambe (2000) demonstrate how globalization, marginalisation and gender form an interconnected matrix that 'shape[s] patterns of poverty [and] other distributional outcomes' that is particularly disadvantageous to women. They go on to argue: 'central to the chain of relationships are the varied ways in which economic globalization marginalizes large numbers of people by reducing public spending on social services and delinks economic reform from social policy. This type of marginalization manifests a gendered dimension in as much as women constitute those principally affected by it (Mittelman and Tambe 2000, 75).

From these accounts, there are justified economic reasons for maintaining social safety nets—including social security systems—that do not exacerbate situations of need and distress that may already exist. From the perspective of economic efficiency, it becomes imperative for social security research and policy planning to mainstream gender, in order to control for un-intended inequalities and gendered impacts (Kasente 1997). Concerns have also arisen over issues of access and equality. Many studies

have established that all household members do not have equal access to resources; neither do they share equally nor benefit equally from expenditures (Tinker 1990, Kabeer 1994). However, the assumptions behind many forms of social security, for example, pension and provident funds, social insurance schemes and other state financed schemes, seems to be that the benefits paid to the employee cover him/her and his/her dependents against specific contingencies. Kasente (1997) argues that gender inequalities ensure that this not the case. Apart from the well-known fact that sums paid out from such schemes are usually too low to meet the cost of living of the beneficiary, the issue of intra-household distributional equity has been largely ignored in policy.

A hallmark of current debates on ageing is the recognition that the current generation of older women in most developing countries is clearly disadvantaged compared to men in social and economic well-being and formal education in particular. On the basis of data for 105 developing countries, the United Nations Population Division (2002:31) estimates that among the population aged 60 and older in 2000, 69 percent of women and 41 percent of men were illiterate. Both the levels and size of the gender gap in illiteracy are projected to decline over subsequent decades through cohort succession, reflecting trends toward increased schooling and gender equality in school entry (Knodel and Ofstedal 2003, Hermalin 2002).

Women's lack of education is cited by the Second World Assembly on Ageing as contributing to their poverty in old age, presumably in comparison with men (United Nations 2002: paragraph 109). The UNFPA points out that lower literacy and lack of numeracy skills among older women make them particularly vulnerable to exploitation in financial and legal transactions (UNFPA 2002a:58). In the actions

recommended by the Second World Assembly on Ageing to improve access to knowledge, education, and training for older persons, women are singled out for special attention (United Nations 2002: paragraph 40).

Knodel and Ofstedal (2003) argue that the lower education of older women clearly contributes to gender differences in employment histories - particularly employment in the government and formal sectors that affects access to work - related pensions - and hence is potentially an important factor in gender differences in economic well-being. The nature of statutory social security available in many mainly low-income developing countries does not correspond - or very inadequately corresponds - to the needs of women workers. First of all, as Van Ginneken (2002) argues, there are the general (mainly gender-neutral) factors that exclude many workers from coverage, such as workers in agriculture, domestic workers and those outside the formal labour markets, where women are the majority. These factors relate to the legislation and governance as well as to benefit and contributions structures that are not suited to the needs and contributory capacity of the majority of the work force. But there is also the specific influence of the “male breadwinner” (a situation where men are considered as heads of households and likely to be favoured in employment and other statutory benefits) model that underlies part of the statutory social security regulations.

Central to the critique of putting emphasis on gender inequality is the pervasive manner in which justifications are made of special attention to older women in discussions of population ageing, where women are assumed to be economically disadvantaged compared to older men. Furthermore, it is held that well over half of the statements in the Madrid International Plan of Action that single out older women

for particular concern or actions relate wholly or in part to their assumed economic disadvantage. Knodel and Ofstedal (2003) contend that global generalizations to this effect are common. Their argument is supported by a UNFPA statement asserting that “older women’s need for support is deep as well as widespread in developing countries. They are more likely than men to be poor” (UNFPA 2002a:58). However, the Second World Assembly on Ageing (paragraph 25) clearly makes the point that women’s disadvantage is assumed to be the outcome of numerous forces operating over the life course: “Poverty and low income during women’s earning years can often lead to poverty in old age”; or “Factors affecting older women in the labour market deserve special attention, in particular those factors that affect women’s engagement in paid work, including lower salaries, lack of career development due to interrupted work histories, family care obligations and their ability to build pensions and other resources for their retirement”.

5.3 Women, Widowhood and Ageing

Recognition of the gendered nature of later life is fairly recent in gerontology; what might be tentatively termed a ‘feminist gerontology’ has begun to emerge (see Rienharz 1986, 1992, Arber and Ginn 1991, 1995, Bernard and Meade 1993a; Gibson 1996). This feminist perspective on later life widowhood offers the possibility of understanding the social reality of later life widowhood via the actresses involved (Chambers 2000:134). From the literature, we gather that the gender perspective on widowhood and widower hood is relevant in understanding the worlds of men and women. As Knodel and Ofstedal (2003) put it, whether losing a spouse leads to more adverse consequences for men or for women likely varies with the social, economic, and cultural setting.

However, they argue further, the fact that older women are far more likely to be widowed than men virtually everywhere predisposes them disproportionately to any associated disadvantages. Commonly mentioned in this connection is the increased chance of living alone as a result of widowhood, with the implication that this in turn leads to greater social and economic vulnerability. In this light, one UNFPA (2000b) report states that “large numbers of older women live alone either because they are unmarried or widowed”, and the next paragraph mentions that older “women without a partner are perceived to be economically and socially vulnerable” (UNFPA 2002b: 8-9).

Chambers (2000) observes that the review of literature on later life tells us that widowhood is a woman’s issue as a result of gender differences in mortality and the social norm that women marry men older than themselves. The pattern of women’s dependency is a function of role changes due not only to age but to family events, such as the death or remarriage of the household head. Women often lose land and property on being widowed. The death of a husband may therefore result in severe poverty for the widow. In a survey of older people in Zimbabwe, rural elderly widowed women were clearly identified as the most vulnerable group (Help Age 1999).

Population projections suggest that the number of older people over 75 is likely to double by the middle of the twenty-first century. In subsequent cohorts, therefore, if current mortality rates continue (Chambers 2000), we are likely to see even older widows. Widowhood is a major stressful life event. Nieboer et al. (1995) refer to the

loss of a spouse as the life event which requires most adjustment and can make life more difficult for an elderly person. Given that widowhood is such a major feature of later life, it is surprising to discover that research on the lives of older widows is so scarce. The vast quantity of literature on older widows in the West convincingly, according to Chambers (2000), portrays widowhood as an experience fraught with poverty, ill health, loneliness, grief and readjustment. In old age, as in earlier stages of life, gender stereotypes operate. Commonly, widows are not allowed to marry again but sometimes (as in parts of Africa) they are 'inherited' by the male relatives of the deceased husband (Chitsike 1995).

In the Cameroonian context, it is the woman who exploits the land most for farming and other agricultural activities. Most households in rural areas depend on agriculture as the basis of their income and survival. Yet female farming is shaky owing to women's tenuous access to land. Goheen (1996) observed that women lack access to land for they can only rent the land rather than own it. What they own on the land is the food crops while the males own the land. Inheritance laws that pass on possessions, including land, through the male line will by-pass widows, but customary practices obliging relatives to support them may have been eroded, while income generating activities may be hard to come by. There are relatively high levels of illiteracy among older women, and the education offered to generations born in the first third of the twentieth century tended to reinforce, rather than challenge, ideas of them as wives and mothers. In short, 'female poverty at the end of life is a consequence of all the inequalities a woman has endured since birth' (Owen 1996: 163).

Another body of research focuses on widowhood as a psychosocial transition in which widowhood is seen as a disruption to an accustomed way of life. Individuals will cope differently depending on personality, culture, education and social status (Kimmel 1990). In their research, Watanabe Greene and Field (1989) looked at the well-being of older widows linked to support, also found that too much support and lack of reciprocity had a negative effect on the women, perhaps because they felt they had less control. The array of approaches on the study of widowhood in its diversity shows that widowhood is an ongoing process which happens to a particular family and a particular community. In this light, Jones-Porter (1994:33) suggests a fresh perspective on the life world of older widows, one that is sensitive to the totality of older women's lives and is 'grounded in conversation with older widows'- such as this research.

It remains the fact that widowhood and widowerhood in later life are very different experiences - for example, older men who are widowed tend to remarry fairly quickly after the death of their spouse or they die, whereas older widows are much more likely to live alone for many years (Sheehy 1997). Older women also suffer the double jeopardy of ageism and sexism (Bernard and Meade 1993a). By focussing on the past as well as the present, it is possible to see widowhood as another passage in the lives of women and to explore the continuities and discontinuities that they bring to this time of their lives (Chambers 2000). Underpinning this quest is a feminist perspective and practice which aims to both understand and engage with the social reality experienced by older women of different ages, classes, races and disabilities (Reinharz 1992). Most researchers have admitted that for a woman, the loss of a partner through death involves a series of losses, which include companionship,

material support, a partner in a world which is couple orientated and someone to negotiate on the woman's behalf in a male-dominated society (Rienharz 1986, Watanabe and Field 1989; Chambers 2000).

In Africa, the loss of a partner creates a difficult situation for the woman and is tantamount to a double tragedy especially in a context where the woman assumes headship of the family with either no resources or a diminished resource base. According to the Ageing and Development Report 1999, older women are one of the poorest population groups yet they are often the primary carers for the other poorest group - children. In several African countries, rural grandmothers have taken on the responsibility of caring for children and grandchildren with HIV/AIDS and for bringing up children orphaned by the death of their parents from AIDS. Regrettably as the report notes, the unpaid work done by older women in support of household economies, such as caring for older or younger dependants, provides no guarantee of future material security. One of the interviewees featuring in the report from Tanzania and a woman of 80 who had been left with four orphans after the death of her daughter, said: 'I know I am very old to depend upon, but what I can I do except try to support them' (Ageing and Development Report 1999:11). Added to the worsening condition of widows are accusations of witchcraft which are common in parts of Africa. Based on empirical research conducted in Tanzania, an estimated 500 women are murdered every year after being accused of witchcraft. Many more are driven from their homes and communities, becoming destitute as a result. Poor older men or women can face the risk of abuse - for example due to witchcraft accusations (Daichman 2005). A recent study by Help Age International (1999:10) found that widowhood exposed many older women to the charge of witchcraft:

'This was typically related to their solitude: If she is not seen much around the village, an air of mystery may grow up around her, which contributes strongly to accusations of being a witch. Family and in-laws sometimes use such accusations to prevent a widowed woman from inheriting property and possessions. Defenceless older women have been hacked to death under the guise of ridding the village of a witch. Women are much more likely to be targeted than men as they often do not have a family or community network to defend them. The Tanzania study found that women were often seen as being 'cleverer, than men and therefore more capable of witchcraft'.

Following along these lines, a report of the synod minutes of the Presbyterian Church in Cameroon (PCC) of April 1985 and 1989 (Eneme 2000) notes the ill-treatment of widows, though unconnected to witchcraft accusations. Records hold that the PCC was faced with over 100 cases of widows of former faithful and loyal workers who could hardly sponsor the basic education of their children. Eneme observed that a majority of them were illiterate and had no financial support from anywhere.

5.4 Bringing Men into the Discourse on Ageing

Much research on gender in later life has taken a political economy perspective, emphasizing the disadvantaged position of older women in relation to their pensions, health status and access to care (Arber and Ginn 1991; Estes 1991). Less attention has been paid to the advantages faced by older women compared to some groups of older men. For example, older women have better social relationships with both friends (Allan 1985; Jerome 1996) and family members, with women often characterised as

the 'kin-keepers' (Finch and Mason 1993). Recent work has shown that for older women, widowhood may lead to a new found sense of freedom and autonomy, whereas widowers can see no advantages at all of being widowed compared to being married (Davidson 2001). Older women may be part of a network of widows which provides for mutually supportive relationships and other activities, but for widowed men there is rarely such equivalent network of widowers as a support network and buffer. Like older women, older men face difficulties rooted in social expectations of them connected with their gender. Many suffer from their inability to live up to the widespread stereotypes of them as family breadwinners. Ann Varley and Blasco (2000) in their study of old men and women in urban Mexico found that people pitied older men who were on their own, since they had lost their identity as breadwinners. Older men who are unable to contribute are marginalised and abused.

Arber et al. (2003) argue that there is therefore a need to rebalance existing dominant frameworks, which focus on the disadvantages, faced by older women, by also considering the disadvantages that some groups of older men may experience in later life. Why does this appear problematic, what is it about old women that makes them stronger in terms of longer life expectancies (Gibson 1996)? Even granted that older women in the developing world are more likely to live in solitary households than older men, the assumption that this is a clear marker of disadvantage is not as well established as much of the discourse would suggest. While some elderly women and men who live alone are isolated or even deserted, many others are not (Knodel and Ofstedal 2003).

Cross-cutting these various meanings of ageing are gender and other dimensions of difference, especially socio-economic status. One area where men's continued disadvantaged in ageing research has not been discounted is gender and health. One almost universal gender gap among older populations, found in nearly every country in the developing as well as developed world, is the mortality gap. As argued previously, older men die earlier than older women virtually everywhere. It remains the case that women who reach age 60 can expect to live 2.7 years longer than men. This is in line with UN projections that women's advantage in life expectancy at age 60 will increase for the developing world as a whole by almost a year over the next half century. Knodel and Ofstedal (2003) are preoccupied with the question: What gender gap could be more serious than this one, which is literally a matter of life and death? Yet, they also observe that nowhere in the Madrid or Cairo (ICPD) plans of action or in the various discussions of ageing in UNFPA reports is it suggested that particular attention be given to improving male survivorship. They argue that rather than being portrayed as a disadvantage for men, lower male life expectancy is presented instead as a disadvantage for women by stressing that older women must endure long periods as widows. The argument is even stretched further by the fact that the total lack of attention to reducing the male disadvantage in survival is remarkable since improving older-age survivorship among men would seem to be a logical way to reduce widowhood among older women.

While the biological component to the sex-differential in mortality is well established, the point remains that it is "natural" that women outlive men and that, to determine which sex is disadvantaged with respect to mortality, it would be necessary first to investigate men's "natural" disadvantage. There is no denying of biological influences

on the gender gap in life expectancy at birth and at later ages, but these necessarily interact with both environmentally, socially and culturally influenced behavioural factors that vary over time and setting (Waldron 1995, Doyal 2001).

In this connection, Knodel and Ofstedal (2003) are of the view that gender-specific influences that disadvantage men with respect to survival and health should be addressed just as those that operate to women's disadvantage deserve attention. Yet, when health issues are treated in relation to gender and ageing in WHO reports, typically only the health problems and needs of elderly women are emphasized (WHO 2001:1). The resolutions of the Second World Assembly on Ageing lend credence to the neglect of the concerns of elderly men. It states "Older women are particularly vulnerable to disability in old age due to, inter alia, gender differences in life expectancy and disease susceptibility and gender inequalities over the life course"(United Nations 2002: paragraph 87). THE ICPD recommends developing "systems of health care...paying special attention to women" (United Nations 1995: paragraph 6.17). Nowhere in all these reports are the special health needs of older men taken into account.

5.5 Situating the Debate on Gender and Formal Social Security.

Over time, the expansion of formal social security programmes tended to be vertical, providing more resources for a limited number of workers. Because of the well established gender-inequalities in the labour market, women's and men's relationship with formal social security has historically been gendered (Kasente 1997). This argument finds resonance in the research conducted by Ofstedal, Reidy and Knodel (2003) in seven Asian countries. They hold that a common finding in developing

countries is that older men are more likely than older women to receive income from work-related pensions. Nevertheless, as they also argue, although a particular person, such as a retired man, may be the one receiving the pension, other family members, and particularly his wife, may well benefit from it. Indeed it seems likely that for most elderly couples, income would be used jointly regardless of who receives a particular pension or allowance. Depending on survivorship benefits, however, a wife could lose much of the shared benefit if her husband predeceased her, which is commonly the situation.

Studies carried out in some low income countries show that male workers are more represented in the public service and more likely to be pension beneficiaries. For example, in Latin America, Folbre (1994) established that male workers were more likely to get health/maternity benefits for their wives, than women workers were to be covered in their own right. Additionally, even for eligible women workers, there were circumstances when they may be covered but still be vulnerable (Folbre 1993). Another study undertaken in India (Hirway 1986) indicated that women were under-utilising maternity benefits for fear of losing their jobs. Generally, these studies, though undertaken in different continents reflect the situation on the ground in most African countries. In summary, it points to the limited coverage that women receive in formal forms of social security, and may as a matter of fact serve to widen gender inequalities. In most African countries, Lachenmann (1994) notes that women have very limited access to formal security in their own right. Their entitlements to resources are established mostly through men and social benefits are conceived – uncritically as family benefits. This approach according to Kasente (1997) does not correspond to the reality on the ground in Africa, where polygamous marriages are

common place. The implications for women are telling as benefits for multiple wives are not factored into pension entitlements and other benefits. By civil law, the first wife is recognised. Women lose out in a polygamous settings as most marriages are contracted traditionally which are not legally binding when it comes to inheritance and succession issues. Worryingly though, the number of widows is also on the increase mainly due to HIV/AIDS as women usually lack the voice to influence sexual decisions. These issues, combined with the daunting weakness of formal schemes, generally, raise important questions about the relevance and sustainability of such provisions for women's welfare in Africa.

5.6 Gender Concerns and Informal Social Security arrangements

Consequent to social protection mechanisms highlighted in the other sections, women are often invisible and sparsely represented in social security provisions in the formal sector that largely covers civil servants. Given either the marginal or under-representation of women in the public service, there is no denying the fact that women need adequate safety-nets. As such, women's social security needs are more likely to be met through informal and other traditional and kinship based systems, themselves on the decline. Reliance on traditional and informal arrangements remains the way forward for a vast majority of women without access to formal social security. Such mechanisms are developed mainly from traditional ties, the nuclear and extended family, kinship-based systems anchored on solidarity and reciprocity (Schmidt 1995).

The exclusion of women from formal social schemes coupled with well documented market failures and shortcomings of the state in addressing social problems (Glagow 1989) draws attention to the importance of non-formal arrangements in fulfilling

women's and men's social security needs. Various trends, including urbanization, monetarizing of economies, HIV/AIDS, and decentralization measures have all contributed simultaneously to raising the profile and importance of informal and traditional approaches to social security, as well as undermining their strength. From a gender perspective, as argued by Kasente (1997), it is important to understand women's and men's respective relationships to these systems.

Regarding traditional mechanisms of social security provision, legal issues have an important bearing on gender equity. The fewer and weaker traditional legal rights of women in comparison with men's give the former less access to resources with which they could support themselves independently. Moreover, it is also noted that women's position after divorce or when widowed is particularly difficult because the traditional mechanisms that have been supporting are either weak or no longer legitimate. In fact, many cases of widow-inheritance in which women have succumbed to customary demands and other pressures from male relatives remains prevalent. It is a desperate way of ensuring such women receive male support in keeping whatever entitlements they had as wives (Kalunde 1995). In his book *Ageing in Developing Countries*, Ken Tout observes that the saddest individual experience tends to be that of the widowed aged man, particularly where incompetence in domestic matters aggravates his abandonment. But, en masse, it is elderly women who are more likely to suffer problems (Tout 1989:289). All traditional systems are likely to be gendered. Another contentious issue relates to the relative position of women as providers and beneficiaries of social security in traditional spheres. The traditional organisation of social security is breaking down based on complex social relations of which gender relations and female networks form an important part (Lachenmann 1990).

Along these lines, Lachenmann argues that traditional social networks do not appear eroded under current social and economic pressures, as is often argued; rather, women are assuming greater burdens as the traditional obligations of men are not fulfilled any more. The most accurate contradictory position for Cameroon is explained by limited access to pensions, thereby weakening men's position as breadwinners. More so, the dual pension regimes for public and private sector workers create different obstacles for pensioners. For instance, Lachenmann notes the fact that the conventional monetary income to provide for health expenditures for elderly people and for children is no longer there. On the contrary, women are increasingly providing security through their labour and through sharing their personal social security assets. The latter may include small animals and resources from the sale of some products they control including, unfortunately, essential household food provisions. Thus, in the context of trends including structural adjustment, decentralisation, and HIV/AIDS, women play a key, even perhaps primordial role as providers of social security in traditional spheres in ways which may ensure inequitable gender outcomes.

This raises important questions in the light of recommendations from some commentators (Schmidt 1995, Kaseke 2005) that social policy interventions should stabilize local customary practices by formalising communal law. Such interventions are likely to have important gender implications. By contrast with traditional mechanisms, informal social networks tend to emerge from the consequences of economic and social change and hardship as well as from pressures related to trends such as urbanization and monetarization. Also referred to as self-help organisations,

informal systems often offer the only chance of guaranteeing a minimum of social and economic security.

Informal social networks are perhaps the most significant and beneficial for women who largely are not covered by formal social security arrangements. As Kasente (1997) argues, they are also important for men, although men enjoy relatively greater alternative recourse to other resources, including formal social security and the advantages of traditional provisions. In informal social security systems, women have actively tried to build new social networks that suit their interests and remedy the deficiencies in other systems. Lachenmann (1994) indicates that women have formed food security institutions, welfare associations, saving and credit schemes for women only, to fight being marginalised. The criteria for membership is generally not established through kinship relations but what counts is the fulfilment of assistance services mutually agreed upon on the basis of personal relationships.

An analysis of informal security in southern Africa (GTZ 1995) identifies the lack of sustainability as the main threat to the informal systems of coping support that women are looking up to. Moreover, while kinship relationships constitute the basis of traditional social security, and impose a lifelong obligation to provide solidarity assistance; informal networks follow the principle of reciprocity. As such, there is a risk that when a member is no longer able to contribute as expected for whatever reason, then they may lose their access to social security resources provided by the informal organization or network. It is important to note that informal social security systems are likely to be subject to strong pressures to change in response to social and economic transformations. As organizations battle to build and maintain trust, the

demand for accounting and recording procedures to be improved with computer applications would become greater.

As discussed in this chapter, a gender analysis is a strong determinant in assessing the welfare needs and coping mechanisms of old women and men. It has explored the literature on gendered needs in terms of who does what with regards to resource allocation within households and communities, the constraints faced by both old men and women, women's greater vulnerability in terms of access to formal work; anachronistic traditions regarding widowhood, the problems associated with widowerhood, both underpinned by extreme poverty and social exclusion.

Chapter Six: Research Methods

6.0 Introduction

Given the characteristics of the study population data collection involved the use of a mixture of qualitative survey with ethnography. The mixing of methods permitted the researcher to gather both qualitative data, with some quantitative elements based on the cultural context and the activities that old people were involved in. Well-being was assessed in terms of daily living activities related to daily care, access to food and its preparation, provision of basic needs such as clothing, access to health care and medication, reliance on remittances, coping mechanisms related to fetching firewood, water and farm work, which represents the major economic activity of the vast majority of those who inhabit the rural world.

Data was collected based on a purposive sample of the elderly in selected rural, semi-urban and urban areas. The choice of a purposive sample ensured that respondents were recruited from disparate backgrounds in different geographic areas. Elderly people resident in urban areas (where formal care is relatively strong) were interviewed as well as those in semi-urban and rural areas¹¹ where formal support is near absent and informal care is perceived to be under severe strain. The sample reflects gender, ethnicity, work, welfare and adjustment patterns, socio-economic indicators, cultural specificities and environmental context of old people.

¹¹ The administrative geography of Cameroon carves out administrative jurisdictions into provinces, divisions, sub-divisions and districts. The provinces with high population density and concentration of government and social services are delineated as urban areas, while some divisions and sub-divisions with a scanty presence of government services are considered semi-urban. Administratively, they are under the jurisdiction of the provinces. The districts are the smallest administrative units with a near absence of government and other social services like health centres, roads, water and electricity, mostly in short supply. These are referred to as rural areas. However, because of the availability of land for agriculture and a higher degree of close community ties, compared to urban and semi-urban areas, the 'villages' mostly serve as a final place of residence for the elderly.

The sampling frame is skewed towards rural areas for two reasons: First, the interest of the research in informal support mechanisms as a result of differential access to welfare and basic services for the elderly in urban and rural areas. Second, the vast majority of very poor old people reside in rural areas and are involved in agriculture and other allied activities are coping through the main traditional pursuits of survival.

Focusing on the scenario of old men and women resident in rural areas, the sample population reflected the reality on the ground as about 90% of rural dwellers are without access to any form of formal social protection. The descriptive power of ethnographic perspective aided in unearthing the plight of elderly men and women from accounts of their activities of daily living and household welfare.

Proponents of social survey methods have argued that it relies on data collection employing a systematic and structured verbal questioning or written questioning (Sarantakos 2005), though others have argued that surveys cannot establish definite causal connections between two variables, because although the behaviour and attitudes of people are measured, often the context makes it difficult to correctly interpret results (de Vaus 1991: 7-8). The semi-structured interview guide used in this research gives room to respondents to air themselves on their livelihoods and means of coping. It enables the interviewer to have more latitude to probe beyond the answers and thus enter into a dialogue with the interviewee (May 2001:123). Perhaps, more significantly, the interviewee develops ideas and speaks more widely on issues raised by the researcher (Denscombe 2003:167). The interviewer, who can seek both clarification and elaboration on the answers given, can then record qualitative information about the topic, ensuring some degree of standardization and

comparability. It is argued that the defining features of qualitative and quantitative research can be combined at different stages of the research process: formulation of research questions, sampling; data collection; and data analysis ensuring triangulation and hence greater validity in the research results (Green et al. 1989, Niglas 2004; Bryman 2006). Based on interviews conducted, the survey generated qualitative data depicting socio-demographic variables and details on coping strategies, gleaned from respondents. This enabled cross-comparism and tabulation of key aspects embedded in the interview schedule.

Given the heterogeneous nature of the population, respondents were not treated as a homogenous group. On this basis, the qualitative and ethnographic approaches become relevant as it enabled the muted voices of the elderly to be unearthed. Allowing interviewees to 'speak their minds' is a better way of discovering things about complex issues (Denscombe 2003). Research methods, as Ginn and Arber (1995) argue, need to capture the rich diversity of ageing and provide a sociological understanding building on the perspectives of older women and men. They contend that it is vital that quantitative research on older people is balanced by research with older people in which their perspectives and concerns orient the research. In this direction, others hold that qualitative research in which older people are studied as active subjects rather than objects is desirable in data collection (Oakley 1981, Ribbens 1989; Ginn and Arber 1995:13, Collette-Browne 1998:269-70; Kaye 1999; Bernard et al. 2000). Ethnography has been referred to as 'a curious blending of methodological techniques' (Denzin 1981). It includes some amount of genuinely social interaction in the field with the subjects of the study, some direct observation of relevant events, some formal and a great deal of informal interviewing, and open-

endedness in the direction the study takes. The ethnographer records and makes sense of the experience often involving key informants, the analysis of documents and direct observation of events (Nigel 2001:148). However, there should be a good deal of reflection on the differences between the researcher's beliefs and those emanating from respondents (Fielding 1981).

Equally important are the living arrangements that old people are using to survive: membership of support networks like the *njangis*, village based organizations and mutual societies, cooperative ventures, credit unions and various religious organisations. The researcher was interested in assessing the tangible benefits of belonging to these various social and support networks. Thus, the concern is not only to find out membership into these networks, but some data relating to contributions and whether the financial returns translated into improvement of livelihoods of old people. The use of ethnographic methods enabled the researcher to get first hand information, to participate by observing respondents in context and to live some of their daily experiences. In addition, some pictures were taken with the consent of the respondents. These photos (see plates in appendix) depict the various activities of daily living and involvement in social and other support networks by selected respondents.

6.1 Period of Research

The research period spanned four months (from the 14th of April to the 15th of August 2006). This necessitated movements between the selected sites depending on the availability and schedule of selected respondents. Key urban and rural localities in the Anglophone speaking provinces of Cameroon (North West and South West) were

used for the study (see figures 1 and 2 for maps of Cameroon and some localities studied). Given the ethnic mix in the provincial capitals of Bamenda and Buea respectively, respondents were chosen to represent the ethnic diversity of Anglophone Cameroon as some of the respondents in both urban and rural areas hailed from different tribes. Some had worked in the public service and were fully settled in the Anglophone provinces. The findings reflect the heterogeneity of respondents across cultures and ethnic groups in Cameroon. I held seven pilot interviews involving three male and four female elderly interviewees to gauge their understanding of the questions in the semi-structured interview schedule. After the exercise, some modification was made on the interview schedule. In relation to the table assessing the needs of old people, assistance with farm work emerged as a vital need. Also, for those who mentioned that they had worked in the public service, it was relevant to find out if they were receiving their pension at all and the difficulties they faced in processing their entitlements.

The semi-formal forms of social protection selected for the study represent some of the most vibrant organizations in civil society in both provinces. However, the majority of these organizations are in the North West province because of its long history of associational life and credit, rotating credit societies, village-based organizations championing the course of community development and infrastructural provision, which in most cases spearheaded by old people (see Delancey 1977, Fonchingong 2005, 2006).

6.2 Location of the research

Given the ethnic diversity of Cameroon, the researcher was conscious in the selection of respondents residing in both urban and rural areas, with a bias towards respondents in rural areas. This is because the vast majority of rural dwellers, especially women who eke a living on subsistence agriculture and other allied activities are not covered by any forms of formal social security. It was therefore of interest, in terms of social policy implications, to evaluate the coping mechanisms of old people in rural areas. This was compared to the experiences of old people in urban areas.

The recruitment process was determined by a matrix of geographic location, site of business and other informal sector activity, place of residence. The researcher's prior interest in the pension crisis bedeviling Cameroon's social security system was very influential, particularly in the recruitment of pensioners, drawing pensions in urban and some rural areas. It was not very tasking to recruit pensioners in the survey as they were targeted at CNPS pay centres and Finance departments (pensioners receiving payments through the Treasury) in Buea (provincial capital of South West Province, Bamenda (provincial capital of North West Province) and Nkambe (divisional office). Other respondents were recruited at social and drinking clubs frequented by the elderly in urban and rural areas; rural and urban markets; church groups for men and women; women's and men's *njangi* groups; and village development meetings (held mostly on Sundays). For the lone Muslim woman in the sample, it was an accidental meeting during an interview session with the Coordinator of the Mbororo Development and Cultural Association (MBOSCUDA). It was not possible to recruit other Muslim women as they are bound by tight Islamic norms and Fulani code of conduct which emphasizes secrecy and non-interaction with 'strangers'.

Old people were purposively selected in the listed sites and an appointment made for an interview at a convenient venue. In some of the cases, the addresses of the respondents were taken and the interviews were held at their residence at an agreed date and time. In the hustle and bustle of the city centres, old people were approached and taken to a convenient location for interviews to be conducted if they agreed. For those who had turned up to collect their pension at pay centres, they were identified, their consent sought and approval obtained for the interviews to be held after they have collected their money. This was done to avoid the distraction of any concerns uppermost in the respondent's mind related to anxiety and uncertainty surrounding either the availability or non-availability of funds. For those involved in petty trading and other informal activities, they were interviewed at the end of the day's business. About 75% of the interviews were held at the homes of the old men and women selected for the study.

Through the use of local contacts, the researcher was able to locate the elderly in rural areas given the vast nature of the terrain and scattered settlement patterns. Having undertaken previous research (gender and community development aspects) in the two provinces (Fonchingong 2004, 2005, 2006) represented in my study, it enabled familiarity with the terrain. Identifying key local contacts was useful in the recruitment of respondents. The over-representation of older people with pension entitlements is explained by the ease of recruitment and their eagerness to participate in the research. Advertently or inadvertently, the research was conducted at a sensitive period when the Cameroon government was undertaking a major census (May-July 2006) of civil servants and pensioners, aimed at weeding out 'ghost' public servants and pensioners on the payroll. Most pensioners were very enthusiastic in volunteering information and in the process, venting their 'anger' and frustration.

Without being carried away, the researcher was able to conduct in-depth interviews that yielded qualitative data and some quantitative elements. The mixing of methods was very helpful in capturing the key socio-economic and demographic trends of the sampled population, followed by the narratives. The quantitative material, though not generalisable is useful for demonstrating the range of problems and strategies old people have. Mixed methods involved interviews, participant observation and photography. Interviews were beefed up with spontaneous conversations on daily survival strategies. Participant observation and some focus group discussions permitted the researcher to put some of the responses gleaned from interviews into context. The researcher was able to observe firsthand some of the activities of respondents during visits for interviews. Some interviews were held at the business sites permitting a closer scrutiny of activity profile. Photos were also taken depicting some activities undertaken by respondents. As the narratives portray, interviewees were given ample room to tell their stories in their own way and to ventilate any worries. In some situations, respondents justified claims by going into specific details, either presenting exhibits through 'signed' or 'unsigned' government dossiers in hand. It was possible in some cases to verify and/or triangulate some of the views raised particularly by pensioners with the literature on social protection in Cameroon, statements made by key government officials on pensions and other problems. This is buttressed through write-ups in both government-run and private newspaper tabloids like Cameroon Tribune, Le Messenger, the Post Newspaper, Le Messenger and Mutations Quotidien.

However, the tendency to be subjective sometimes was inevitable as the researcher oriented the research process, particularly in situations where the respondents were digressing. Perhaps, certain variables were emphasized at the detriment of others.

Triangulation was difficult to achieve as some responses were difficult to be verified. It would have been desirable to cross-check some responses through interviews with other categories of respondents like family relations, children, grand children and hired helpers, but it was not possible to do it within this survey. However, the researcher relied on the objectivity, trust and integrity of selected respondents given the rapport that was established prior to interviewing. Unavoidably, establishing rapport could well pose problems of keeping the distance between the researcher and informants. I was able to react to and interact with respondents, to ask further questions and to clear any ambiguities by exploring the intentions and meaning of assertions.

6.3 Sample and Sampling Frame

A total of 130 old men and women were interviewed. The respondents were purposively selected. The sample is broadly representative of old people in two English speaking provinces. Respondents purposively selected for the study were those who fall within the age group of 60 years and over based on the fact that 60 years is the compulsory retirement age for most civil servants as stipulated by Cameroonian Public Service and Labour Code. Those who were operating in the informal sector and who had not worked in the public service were also recruited on the basis of their age being 60 years or above. The sampling frame takes into account the geographic and regional specificities, the differing opportunities, constraints and challenges faced by the elderly in rural and urban areas. The sampling frame was distributed as follows:

Table 1 Major localities studied and distribution of interviewees

South West Province	
1. Buea Urban	15
2. Buea Rural including Muea, Bolifamba, Ekona	15
3. Mamfe rural	15
4. Kumba rural	15
Composition of interviewees	
1. Elderly men including widowers	20
2. Elderly women (including widows and 2 childless women)	40
North West Province	
1. Bamenda Urban and semi-urban localities (Chomba, Bambili)	15
2. Bafut, Awing and Mendakwe (semi-urban)	15
3. Nkambe Urban and surrounding rural localities	40
Composition of interviewees	
1. Elderly men including widowers	30
2. Muslim leaders and Fulani herdsmen	5
3. Elderly women including widows and a childless woman	40

The dominance of female respondents is explained by the life expectancy data for Cameroon, 58 years for women and 45 years for men (WHO 2005). Because of gender inequality in access to formal work, women make up the bulk of informal

sector workers and a vast majority eke a living on subsistence agriculture in rural areas. Remarkably, this is the category of the population without any direct access to formal social security system (pension and other entitlements).

6.4 Conduct of Interviews

Consent and approval of old people participating in the research was sought at the outset. This entailed detailing the purpose and rationale of the study, in order to establish rapport and win the trust and confidence of interviewees. The researcher also explained to interviewees that whatever information was gleaned from them would be used strictly for research purposes and their confidentiality would be protected as the data would be reported anonymously. Ethical issues and concerns were taken into consideration. The research method was cleared by the Ethics and Research Committee of the School of Social Policy, Sociology and Social Research, University of Kent. This was coupled with authorisation to undertake research from the Dean of the Faculty of Social and Management Sciences at the University of Buea, Cameroon (see appendix). As Nigel (2001) contends, the decision to use ethnographic methods must be ethical as well as practical. Some of the interviews were tape recorded and later transcribed. Most of the interviews with mutual societies, village-based organizations and *njangis* were tape recorded. In most cases, the executive members were interviewed and the researcher attended some of the village meetings and followed the functioning and proceedings of meetings (see pictures on Wimbun women's *njangi* in session). The researcher used an interpreter, a Hausa speaker when interviewing the Imam of the Central Mosque in Bamenda, knowledgeable in Islam and who could only speak in Hausa. Where there were any misunderstandings with any question, there was room for clarification as I adopted the approach of

summarising the key facts to get further confirmation from the Imam. The same approach was adopted for the three Fulani interviewees who could neither speak English nor Pidgin English.

Most respondents were very eager and enthusiastic to participate in the research given that it gave them the opportunity to air their problems and 'frustrations'. Most respondents (about 85%) disclosed their identities and some stated categorically that the research was very important as no one had ever bothered to find out how they were coping in the context of generalized hardship and penury old people were trapped in and the efforts they were making to stave off poverty. As one respondent put it:

'the problem of ageing and the plight of old people in Cameroon is a serious one that deserves greater attention. After having served the nation for a long time, we cannot receive our pensions and benefit from other social services. We are living as paupers and some persons end up dying on the way to Yaoundé to chase files, without reaping the fruits of their sweat. The case of our colleagues who have not worked in the public service is even more appalling. Our voices have never been heard on what constitutes the way forward for social security and old people in this country. I am very certain this research would be a welcome development in shedding light on the plight of old people' (R42, Male, 70, Bamenda).

Some of the respondents were sceptical as to the intentions of the researcher and really wanted to be certain that the research is not connected to one of those

'government white elephant political schemes' that are floated to make headlines and dissipate after a little while. This was occasioned by the fact that the research was being conducted against the backdrop of the census exercise for retired and currently serving civil servants that spanned July-August 2006 (mostly an anti-corruption drive meant to detect 'ghost' public servants and those who had falsified documents to get extra allowances). In these circumstances, respondents were reassured by the research clearance from the University of Kent and the authorization letter from the University of Buea (see appendix). Interviews were conducted in English and Pidgin English depending on the language the respondents felt freest to communicate with. Interviewees were encouraged to ask any questions or clarify any doubts at the beginning, during the course of the interviews and at the end. Notes were taken during the interviews. At the end of every interview, the researcher quickly glossed over the notes to clarify any doubts and to seek more information on issues that were considered to be unclear, or scantily addressed. Averagely, two interviews were conducted daily.

Given that some of old people were good narrators, it was necessary to pin down the interviews by refocusing on the questions. The face-to-face approach adopted during the interviews was very helpful in ensuring frankness and honesty of responses and the generation of quality data. This approach also allayed any fears regarding sensitive questions that concerned contributions in *njangis*, amount obtained from *njangis*, instances of elder abuse, amount from remittances or ownership of a house. Four of the respondents, a widower, two widows, a childless woman broke down in tears during the interview. This had to do with narratives on some harrowing experiences and difficulties they were encountering. The researcher had to pause to

find out if the interview was causing unwanted discomfort and distress and if the interviewee was willing to carry on with the research. In cases where they agreed to continue, there was a short period of respite and in two of the cases where the respondents could not proceed, the interview was rescheduled at a later date as agreed with the interviewee.

6.5 Participant observation

Participant observation was a very useful instrument in observing the gamut of activities that older persons were involved in on a daily basis. This entailed snapshots of their activity profile in rural and urban areas. Such activities were recorded as visualised during visits to undertake interviews and movements backwards and forwards from study sites. These observations are important as they add flavour and substance to the daily travails and involvement of old people in various endeavours within the community. It was noticeable that the very old who are involved in income generating activities in rural and urban areas perform such activities close to their homes and place of residence. This is captured in some of the pictorial representation (see appendix for pictures). However, some of the very 'old old people' could still travel to markets in rural and urban areas for their business and other ventures.

6.6 Focus Group Discussion

Focus group discussions were held with the *njangi* groups and mutual societies. This was the case because the president of the *njangi* group and management of mutual societies invited other members to participate at interviews. In this connection, a group discussion was held with the Wimbun women's *njangi*, the Provincial Delegation of Teachers of Secondary Education and the Cameroon Teachers Trade

Union. The group discussions enabled the researcher to fill in multiple responses from the participants on the modus operandi of the organisation and the problems they were encountering in providing social security for members. The face to face interaction also enabled the researcher to cross-check some responses, prompt the interaction; to follow some of the meeting sessions of the organization and to get a first hand feel of its workings.

6.7 Data Analysis

Qualitative data collected alongside the case studies gleaned from lengthy interviews and key conversations are presented through tables and content analysis and presented thematically in line with the research objectives and questions. The research notes and transcriptions were coded into categories based on emerging themes. Content analysis was performed using cross-case analysis and the constant-comparism method in which core themes are identified and compared, and analytical categories derived (Denzin 1989). This is followed by identification and coding of the core themes and categories generated based on those that resonate with other data (Turner 1981), dissecting text into text segments where meaningful and manageable chunks of text such as narratives, passages; quotations; single words are further refined and used in the analysis (Bryman and Burgess 1994, Miles and Huberman 1994; Attride-Stirling 2001). Findings and thematic analysis drawn from the survey are presented in Chapter Seven.

Chapter Seven: Data Analysis, Presentation of Findings and Field Results

7.0 Introduction

In this chapter, the socio-demographic and other significant trends and empirical evidence emanating from the study population are presented with particular reference to pension entitlements, religion, gender and tribe. As discussed in Chapter Four, over 5% of Cameroon's total population estimated at over 18 million are aged 60 and above. By 2006 there were 881,000 persons aged 60 and over which increased to about 980,000 by 2007. Pensioners as percentage of the population over 60 accounted for 13.7% of the total population (United Nations 2002, Ministry of Social Affairs 2006). It is not clear if the percentage of pensioners takes cognizance of the two pension regimes in place - public through the State Treasury and private via the National Social Insurance Fund (CNPS).

The population aged 60 and over is estimated at over 48,000 in the North West Province and over 33,000 in the South West Province (National statistics office (ONS) 2006). The provinces under study; North West province has a population of over 1.7 million and South West with about 1.2 million. Both provinces have an estimated population of over 2.9 million, representing about 14% of the general population of Cameroon. Statistics of pensioners from major National Social Insurance Fund (CNPS) payment centres in the localities under study are telling. In Buea (South West Province), there were over 2500 pensioners including widows, widowers and accident cases, in Nkambe (North West Province, 1,112 pensioners including widows, widowers and 37 accident cases while in Bamenda (Provincial capital of North West Province covering five divisions out of seven in the province), there are 2823 pensioners including widows and widowers (CNPS Archives, Buea, Nkambe, Bamenda 2006). Data is indicative of the small number of elderly drawing a pension.

Interestingly, there no claimants for unemployment benefits, sickness allowances and maternity benefits as spelled out in the social security regulatory framework for Cameroon in Chapter Four above.

The study population described through the quantitative material and narratives are not necessarily representative of a wider population. However, my sample and data remain significant as respondents represent a diverse profile cutting across socio-economic activity, tribe, gender, religion, pension beneficiaries and non-beneficiaries particularly farmers and other informal sector workers. A fuller picture is depicted through the purposive selection of elderly resident in urban and rural areas, widows and widowers, the inclusion of ethnically minority groups like Muslims and Mbororo-Fulani (pro-poor without any direct access to pensions and who rely heavily on religion and kin arrangements), mirroring the dilemma of older people in other parts of Cameroon. In a wider perspective, my data is representative of the plight of the elderly analysed in the literature on Cameroon in Chapter four. The pension crisis and shortfalls with formal social protection have severe impacts on livelihoods of the elderly. However, the coping mechanisms employed may differ within regions, religious circles and other ethnic groupings across Cameroon based on the stock of cultural and collective social capital that can be mobilised. Interestingly, North West Province under study with slightly greater respondents and semi-formal protection mechanisms has a long history of associational life traceable to the colonial era (Delancey 1979) and reflected through the transformative potential of credit unions, vibrant village development associations and gender-specific *njangi* groups that constitutes a panacea (Fonchingong and Fonjong 2002, Fonchingong 2005). Given that about 70% of Cameroonians survive in agriculture and other informal sector activities, 60% of my respondents are without access to pensions. In uncovering the

welfare, adjustment patterns and coping strategies, the situation of the pro-poor is instructive. A breakdown of the sample population and the defining characteristics of well-being are explained in the form of tables. The profiles of respondents are detailed with emphasis on their ages, educational attainment, religion, access to pensions, economic activity, building of social capital through membership in *njangis*, living arrangements, activities of daily living, sources of support and income (reliance on remittances), income generating activities and access to health care.

Gender and religion emerged as very important markers of elderly well-being. A very visible pastime activity for old people was church going. Most were active members of church groups, church elders overseeing the ritual of communion, congregational/parish committee members and were very regular at the Sunday worship and Morning Prayer sessions that are common with the mainstream churches in both urban and rural areas. The researcher noticed that it is mostly the old and retired persons that go to the early Morning Prayer sessions that run from 5.30-6.00 am in most of the mainstream churches: Catholic, Presbyterian and Baptist. Older Muslim men were seen teaching and coaching young Muslims on the Koran and aspects of Muslim life.

Economic survival and other forms of entrepreneurship was a noticeable activity. In urban and rural areas, a noticeable activity for old women was the sale of bitter-kola (a local aphrodisiac). Usually, accompanied by their grand sons/daughters, they set up temporary sale points at vantage positions and at varying periods of the day. Some would come in as early as 9 am while others would turn up in the evenings at strategic locations. Still others set up carved boxes selling assorted basic necessities like garri

(starchy food from cassava), rice, soap, detergents (omo), maggi cube (local seasoning) and cigarettes. In some localities of the North West Province, old people were involved in cattle (cows and goats) sales which usually take place at weekly cattle markets. Farm work was another very visible activity. Most of the old people interviewed were seen returning from their farms carrying wood and other food stuffs in traditional baskets. Most were carrying machetes and other farm tools like hoes and wheelbarrows depending on the nature of farm work and agricultural activity they were involved in. For old men, pruning of plantain, banana, cocoa, coffee and cutting/harvesting palm nuts was a noticeable activity while women were involved in weeding, harvesting and processing of foodstuffs.

Inevitably, the worsening economic crisis and dismal socio-economic changes in Cameroon during the last decade are in many ways affecting the traditional system of caring for the elderly. In urban areas, the extended family system is increasingly being eroded. Significantly, in most rural areas, though shaky, the system of collective cooperation still enables community members to come together to help their aged relations after their economic productivity has ceased. However, the situation is quite different in urban areas where modernization has weakened the traditional extended family ties, resulting in the neglect of some senior citizens.

From some older people's narratives, most mentioned that in many families in urban areas, old people are regarded as unwanted visitors especially if they contemplate living with or are intending to reside with their children or a family relation. In most cases, they have to notify their relation of impending visits and seek approval first. This was unheard of in the past as an old woman put it. There are reported cases

where the frail elderly especially childless women and men in urban areas have no one to look after them. As a result of the increase in the number of old people and the lack of care from families, attempts are being made by some voluntary institutions and NGOs to provide care for the elderly in some major urban centres like Douala and Yaoundé. Run by some churches and NGOs, they provide the main requirements for comfortable living such as food, clothing, recreational facilities and medical care. However, the bottom line is that ageing in Cameroon is still perceived as largely falling on the shoulders of the family. The Hospice Home that this researcher visited in Limbe, South West Province of Cameroon in July 2006 had only five old persons with accommodation facilities for fifty. This is explained by the fact that most old persons either do not have the means to pay for these services or they are not keen on living in these institutions.

In most cultures in Cameroon, care for old persons is still considered the responsibility of the family, in some regions it is seen as a taboo and social stigma to place an old person in old people's homes while in other ethnic groups, it is perceived as mark of failure and shame for a family that opts to provide care for its old in a home for the aged. This attitude is reflected in the lukewarm and nonchalant attitude of families despite the difficulties of providing the needed support. Perhaps, the rarity of care homes in Cameroon is explained by the stigma attached and the lack of finances to off-set the costs by most families.

As uncovered in this thesis, an alternative route is the recruitment of hired helpers to look after the frail elderly at home both in urban and rural areas. But times are changing and families would have to rethink their support for the elderly as indicated

by the authorities of the Hospice centre in Limbe. Another prominent private home for old people is run by the Dan and Sarah Foundation in Yaoundé. Only a few are functioning and most are still at an embryonic stage. Some recognised institutions either providing care for old persons or taking on board the concerns of old people like Le Centre Bethanie Viacam in Yaoundé and La Mutuelle des Personnes Âgées du Cameroun (MUPAC) based in Douala have received only about 1 million francs from the Ministry of Social Affairs to finance economic projects for old persons (*Mutations Quotidien* 14/09/06¹²). The MUPAC created on April 4, 2003 and with a current membership of over 5000 old persons (60 years and above) was created to draw the attention of the national and international community to the plight of old persons, their health condition and the intergenerational challenges related to ageing in Cameroon (*Le Messager* 22/02/2007)¹³. The budgetary allocation (approximately 4 billion annually) for the Ministry of Social Affairs remains inadequate given its added responsibility of providing social assistance to old persons and other vulnerable groups.

From the population dynamics and underlying trends, the plight of older people in the survey is presented. Based on the distribution of respondents by geographic location, age categorisation, gender, area of residence; marital status; religion; educational attainment; work roles; number of children; grandchildren and other dependents; household type; pension beneficiary and non-beneficiary; income generating activities, activities of daily living (daily care, food, clothing, medication, remittances, firewood,

¹² See *Mutations Quotidien* 14/09/06, 'Joseph Dingom : Le budget du ministère des Affaires Sociales est insignifiant. Le Fondateur de la Mutuelle des Personnes Âgées du Cameroun propose des pistes pour une meilleure prise en charge médicale'.

¹³ See *Le Messager* No. 2316, 22/02/07 '2 milliards de vieillards en 2050' et 'comment expliquer le paradoxe des personnes âgées ? Also, the President of MUPAC laments : 'les personnes âgées rencontrent des problèmes différents selon qu'elles vivent en milieu urbain ou en zone rurale. Mais dans un cas comme dans l'autre, elles doivent déployer d'énormes efforts pour survivre'.

water, farm work); membership in *njangis*; village development associations and mutual societies; form of treatment when ill; access to housing, access to landed property are considered as key indicators of welfare support. Well-being is characterised in terms of access to health care, income, food security, expenditure and consumption, wealth (assets and liabilities) and housing. While the quantitative material shed some light on the range of problems and coping strategies, the narrative data gleaned from transcripts depict individual circumstances which are essentially subjective. Trends from key variables like gender, religion and pension entitlements which characterise the study population are presented and the data describes my study population which is not necessarily representative of a wider population.

7.1 Socio-demographic variables

Table 7.1 Distribution of Respondents by Age group

Age Group	Female	%	Male	%
60-64	10	12.5	10	20
65-69	35	43.7	20	40
70-74	17	21.2	10	20
75-79	15	18.7	5	10
80 and above	3	3.7	5	10
Total	80	100	50	100

From the table, a majority of the respondents (both male and female) fall into the age group of 65-69 conceptualised in the study as the relatively young elderly. Age is a strong determinant of involvement in informal sector, agriculture and other allied

activities. The frail elderly, by virtue of their age are not very active. In most cases, they find it difficult to cope with basic activities such as cooking, fetching water, farming and trading. The scenario of those without pension is evident as they will require more support from spouse, children, grand children, hired helper and other family relations depending on specific circumstances.

Table 7.2 Distribution of respondents by area of residence

Area of Residence	Female	%	Male	%
Urban	29	36.2	19	38
Rural	51	63.7	31	62
Total	80	100	50	100

The majority of respondents are resident in rural areas representing 63.7% female and 62% for male. The pre-dominance of rural dwellers is explained by residential patterns and the fact that a vast majority of persons without access to formal social security, especially women, inhabit the rural world. My data is in support of the case that area of residence is a pointer of access to resources like land for agriculture, other

investments and traditional support mechanisms. While those in rural areas largely rely on availability of land for food crop cultivation, this is not the case in urban areas. On the other hand, the elderly in urban areas have greater access to social amenities and social services, though there are user fees charged and spiralling prices for utilities. In addition, traditional support mechanisms and respect for the elderly is more visible in rural than urban areas. The rural/urban divide indicates that there are problems in both places and these problems are specific to the context.

Table 7.3 Distribution of respondents by marital status

Marital Status	Female	%	Male	%
Married	49	61.2	36	72
Single/never married	5	6.2	3	6
Widowed	21	26.2	9	18
Divorced/Separated	5	6.2	2	4
Total	80	100	50	100

Marital status affects forms of mutual support and other family support mechanisms available. Couples tend to cope better as they share in the provision of basic needs. Though most female and male respondents are married, widowhood and widower

hood constitute a stumbling block for widows in particular. My data indicates that they are highly disadvantaged. Those who are entitled to receive the pensions of their deceased husbands find it difficult to compile documents required in order to claim pension. Even when they eventually succeed in doing so, entitlements are slashed and are worst still, payments are not received regularly due to funding and other administrative bottlenecks. Added to their plight is the cultural context where patriarchy is still strong and they are dispossessed in terms of inheritance and succession rights.

Table 7.4 Distribution of Respondents by religion

Religion	Female	%	Male	%
Christian	74	92.5	23	46
Islam	1	1.2	11	22
Traditionalist	4	5	5	10
Non-believers	1	1.2	6	12
Total	80	100	50	100

Religious affiliation and faith based groups are very instrumental in providing support for the elderly. As indicated by respondents, they draw additional support within church groups and other spiritual networks. The *njangis* are a fundamental feature of

financial support even in church and religious settings. No matter the place of residence, the churches and other religious networks provide vital psychological support for the elderly. Support sometimes takes the form of periodic financial assistance, provision of basic necessities such as food, clothing, bathing soap, blankets, and wood. Home visits are undertaken and prayers offered for spiritual support. More still, the elderly are assisted with their own funeral arrangements and burial rites. Within Islam, the Muslims rely on the *zakat* and *sadaka*, with alms appealed from wealthy Muslims to help the poor and needy. The traditionalists (rooted in cultural values, belief systems and ancestral worship) cling unto traditional support and those of high standing in traditional institutions as members of traditional councils and notables. In this setting, they benefit from the largesse of the local community.

Table 7.5 Distribution of respondents by educational attainment

Highest level of education attainment	Female	%	Male	%
No formal education	49	61.2	4	8
Vocational	7	8.7	11	22
Primary	18	22.5	14	28
Secondary/High School	5	6.2	16	32
University	1	1.2	5	10
Total	80	100	50	100

Regarding educational level, most female respondents have no formal education. This variable is relevant as most of the women with no formal education are without public service jobs; are constrained to eke a living in the informal sector and are rural

farmers. Being without a high level of education, they find it difficult to pursue pension entitlements as indirect beneficiaries when their husband dies. Of course, old men without the requisite education also face testing times putting documents together for pensions paid either through the Public Treasury or the National Social Insurance Fund. In addition, being unequipped educationally makes it difficult for women to be more pro-active in *njangis*, village based associations, mutual societies. In polygamous settings, the voices of women are muted in traditional marital arrangements contracted by customary law, which is not legally binding in the civil context.

Table 7.6 Distribution of respondents by work roles

Work Roles	Female	%	Male	%
Had worked in Public service	7	8.7	21	42
Self-employed (Informal sector)	63	78.7	17	34
Village Notable	2	2.5	9	18
Never worked	8	10	3	6
Total	80	100	50	100

The work roles indicate that a vast majority of female respondents are self-employed. Comparatively, most male respondents have worked in the public service and are therefore entitled to pensions. On the other hand, the vast majority of women are farmers and informal sector workers without any access to pensions. They have to fend for themselves and their families. This makes the case even stronger for a social security system designed to cater for the needs of this category of workers.

Table 7.7 Distribution of respondents based on number of children, grand children and other dependents.

Dependents	Female	%	Male	%
No Dependents	9	11.2	5	10
1-3	35	43.7	24	48
4-6	24	30	16	32
7-9	9	11.2	6	12
10 and above	6	7.5	3	6
Total	83	103.7	54	108

Data is indicative of the fact that old persons manage very large households of children, grand children and other dependents. From the household sizes, both female and male respondents run households of averagely 1-3 and 4-6 dependents. Interestingly, there is a trade-off as these children and grand children play a vital role in providing support for the elderly, for example with buying, cooking, farming, fetching water, providing firewood.

Table 7.8 Distribution of respondents based on household type

Household Type	Female	%	Male	%
Lives alone	17	21.2	14	28
With spouse only	10	12.5	12	24
With extended family	8	10	3	6
With hired helper	13	16.2	8	16
With son/daughter	5	6.2	3	6
With grand children	24	32.5	12	24
With other dependents	11	13.7	8	16
Total	93	112.5	60	120

The variations in household types and living arrangements presumably reflect the variations in, and changing character of the traditional family support system. Help from the extended family and other dependents accounts for a small proportion of support offered for female and male respectively. Though the household categories are not mutually exclusive (since the elderly can still live with one or all of the types of household members), it is clear that some older people are relying on grand children and hired helpers to provide care. Regarding household types, grand children play a key role in the living arrangements of old persons. The phenomenon of hired helpers is a clear pointer to the changing care pattern provided for the elderly.

Table 7.9 Distribution of respondents based on Pension beneficiary and Non-beneficiary

Pension Beneficiary	Female	%	Male	%
Direct beneficiary	9	11.2	23	46
Indirect beneficiary	17	21.2	00	00
Non-beneficiary	54	67.5	27	54
Total	80	100	50	100

A huge percentage of old women are without access to pension compared to male.

Indirect beneficiaries arise as a result of Cameroon's social security policy where the spouse receives a fraction of the entitlements of the deceased if he/she was a pensioner. In contrast, more men are pensioners while only a small number of female are direct beneficiaries. However, some female are indirect beneficiaries as they inherit the pension entitlements of their deceased husbands. Consequently, economic hardship is more severe on women with a very low income and depleted asset base.

7.10 Distribution of respondents based on income-generating activities

Income generation	Female	%	Male	%
Agriculture/Farming	45	33.3	15	20.6
Livestock raising	35	25.9	25	34.2
Small scale trading	40	29.6	5	6.9
Other business related	12	8.8	24	32.9
No activity	3	2.4	4	5.4
Total	135 ¹⁴	100	73	100

Agriculture/farming is the mainstay of female elderly income generation, followed by small scale trading (29.6%), livestock production (25.9%), and other business related occupations (8.8%). On the other hand, for the male elderly, livestock production is the dominant activity (34.2%), other business (32.9%), followed by agriculture/farming (20.6%) and small scale trading 6.9%. The gamut of activities under agriculture and farming includes palm wine tapping, oil palm, oil production, food crop cultivation, cash crop production, snail production, bee keeping. Livestock production involves the keeping of poultry, piggery, rabbits, goats, cattle. Other business-related activities include land, plot and building rental, rental of sand and stone pits for excavation, traditional herbalism and fortune telling and sale of firewood. This illustrates the range of coping mechanisms of old people as a response to problems associated with late payment of pension entitlements, lack of adequate coverage for informal sector workers and declining support from traditional and other

¹⁴ The total for some tables do not add up because some respondents reported engaging in more than one activity or drawing support from additional sources.

kinship based systems. Sources of income are discussed in greater detail under the thematic discussion in Chapter 8.

Table 7.11 Distribution of respondents based on daily care

Form of support	Provider and Frequency	Female	%	Male	%
Daily care	Myself	21	26.2	11	22
	Grand Children sometimes	17	21.2	7	14
	Spouse at times	11	13.7	10	20
	Extended family sometimes	5	6.2	5	10
	Helper sometimes	11	13.7	5	10
	Children sometimes	13	16.2	9	18
	No support	2	2.5	3	6
Total		80	100	50	100

In terms of daily care, respondents indicated that they more often did not need help with their daily care which relates to basic hygiene and sanitation activities like bathing, toileting. Children, grand children spouse, hired helpers and the extended family offered assistance in other cases. These categories are not mutually exclusive as the elderly may receive individual and collective support from others at varying times. What this table (and others on daily needs) assessment shows is the phenomenon of hired helpers that are recruited to take care of the elderly in both rural and urban areas, usually on some agreement. Although some helpers are paid in some cases, others mostly of schooling age are enrolled in schools that are in proximity to

the residence of the elderly, while for others, the arrangement is in return for learning a trade.

Table 7.12 Provision of Food

Form of support	Provider and Frequency	Female	%	Male	%
Food	Myself	21	26.2	9	18
	Grand Children sometimes	18	22.5	10	20
	Spouse sometimes	7	8.2	10	20
	Extended family sometimes	5	6.2	4	8
	Helper sometimes	14	17.5	9	18
	Children sometimes	15	18.7	8	16
Total		80	100	50	100

Averagely, food provisioning is handled by men and women themselves. Grand children, children, hired helpers and spouses also play a key role in food provision. It should be observed that the food needs of the elderly also depend on other arrangements put in place. Some respondents indicated that they had breakfast and lunch paid up at some eating houses, an arrangement made by either their children or grand children. Others relied on the largesse of community members and this was common in rural areas where community relations and care shown to the elderly usually takes the form of food provision.

Table 7.13 Provision of clothing

Form of support	Provider and Frequency	Female	%	Male	%
Clothing	Myself	40	50	20	40
	Children sometimes	25	31.2	15	30
	Extended family at times	10	12.5	10	20
	No support	5	6.2	5	10
Total		80	100	50	100

For clothing, 40% of men and 50% of women mentioned getting it. Respondents also receive the support of children sometimes and extended family at times. However, most respondents indicated that they got periodically the clothing they need themselves if they had the money in hand. Children sometimes provided warm clothing like sweaters and blankets.

Table 7.14 Medication

Form of support	Provider and Frequency	Female	%	Male	%
Paying for medication	Myself	40	50	20	40
	Children sometimes	25	31.2	15	30
	Extended family at times	5	6.2	10	20
	No support	5	6.2	5	10
Total		80	100	50	100

Most respondents paid for their medication needs themselves with 50% of females and 40% of males doing so. Children and the extended family also offered support sometimes. Data showed that respondents resident in urban areas were more likely to present at a hospital because of the greater availability of health centres in urban areas. Affording medication prescribed posed another challenge for urban residents. On the other hand, the elderly in rural areas relied mostly on herbs and would only contemplate going to hospital as a last resort. In rural cases, there are few chemists dispensing medication and the journey to health centre is very laborious.

Table 7.15 Distribution of respondents based on form of treatment when ill

Form of Treatment	Female	%	Male	%
Uses herbs	25	31.2	19	38
Visits traditional healer	35	43.7	25	50
Goes to hospital/clinic	22	27.5	14	28
Buys medication	12	15	9	36
Total	94	117.5	67	152

Most respondents mentioned using herbs and other medicinal plants in treating ailments like asthma, high blood pressure, backaches, malaria and typhoid fever. However, categories are not mutually exclusive as a person may be using herbs and visiting the traditional healer or seeking treatment in a hospital. 27.5% females and 28% of males go to hospital and 15% female against 36% males buy medication. As discussed earlier under medication needs, forms of treatment and health seeking behaviour are determined by the place of residence, access to health services, availability of money and knowledge of local herbs in the treatment of certain ailments. Most respondents resident in rural areas indicated that they relied on herbs in the treatment of illnesses like malaria, typhoid, back aches and joint pains, rheumatism and high blood pressure.

Table 7.16 Remittances

Form of support	Provider	Amount in thousands (000)						Female	%	Male	%
		At time of research 1000 CFA=£0.95									
		75-100		100-200		200 and above					
		F	M	F	M	F	M				
Remittances	Daughter twice a year	3	3	4	2	2	1	9	11.3	6	12
	Son twice a year	3	3	3	2	1	1	7	8.8	6	12
	Daughter quarterly	6	3	4	3	1	2	11	13.7	8	16
	Son quarterly	3	2	3	3	1	1	7	8.7	6	12
	Other family relations sometimes	2	1	1	1	-	1	3	3.8	3	6
	No remittances							43	53.8	21	42
	Total							80	100	50	100

Only a small number of respondents rely on remittances as a means of direct income support. This support could come from sons, daughters and other family relations residing in other cities and overseas. About 14% of elderly women rely on quarterly support from their daughter against 16% for old men. 11.3% receive financial support two times a year from their daughter, from the son and daughter sometimes and sons do provide for old men two times a year. Other family relations do offer some support. Though the number of beneficiaries is not very significant, such cash flows constitute vital income for old persons who rely on this source of support. From their accounts, respondents affirmed that remittances constituted a 'life-line' in their livelihoods and welfare.

Table 7.17 Firewood

Form of Support	Provider and Frequency	Female	%	Male	%
Firewood	Myself sometimes	16	20	11	22
	Grand Children most times	25	31.2	19	38
	Extended family at times	5	6.2	3	6
	Helper sometimes	13	16.2	8	16
	Children most times	19	23.7	7	14
	No support	2	2.5	2	4
Total		80	100	50	100

A small number of respondents are involved in fetching firewood. A noticeable activity in urban areas was the selling of firewood by the elderly. It involves felling

trees in rural areas, then transportation to urban areas where they are split into wood and arranged in small bundles for sale. However, in both rural and urban contexts, the elderly do require support with splitting and transportation of firewood. Grand children and children are also instrumental in providing firewood for the elderly through assistance with felling trees, transportation and splitting.

Table 7.18 Fetching water

Form of support	Provider and Frequency	Female	%	Male	%
Water	Myself sometimes	17	21.2	5	10
	Grand Children most times	21	26.2	14	28
	Children most times	18	22.5	9	18
	Spouse sometimes	7	8.7	6	12
	Extended family at times	3	3.7	2	4
	Helper always	13	16.2	9	18
	No support	1	1.2	5	10
Total		80	100	50	100

Grand children and children are very instrumental in fetching water for elderly men and women since most houses particularly in rural areas of Cameroon do not have running water. Most in rural areas collect water from streams and springs. In cases

where there is pipe borne water, mostly secured through self-reliant development initiatives, the stand pipes are far-off. Even in some urban areas where running water is available, its supply is sporadic and stand pipes are not located close to most homes. In addition, user fees for utilities are high and largely unaffordable, even for elderly pensioners. In either context, fetching water remains a daunting task mirroring the plight of the elderly.

Table 7.19 Assistance with Farm work

Form of support	Provider and Frequency	Female	%	Male	%
Farm work	Myself	12	15	5	10
	Children sometimes	11	13.7	7	14
	Grand children sometimes	10	12.5	11	22
	Spouse sometimes	11	13.7	11	22
	Extended family at times	4	5	2	4
	Hired labour when need arises	17	21.2	9	18
	Helper sometimes	11	13.7	4	8
	No support	4	5	1	2
Total		80	100	50	100

Farm work is a major life wire in the survival strategies of the elderly. As a female respondent put it ‘I cannot divorce with my farm because it a source of life. When I trek to the farm, do the farm work and trek back home, the day is burnt and I am sure of something to eat’. The significance of gender here is that mostly women are persistent farmers and rely mostly on cultivation of food crops for subsistence. Men

are mostly involved in livestock production and large scale agricultural production that involves hired labour and cash crop production like coffee, cocoa, kola nuts, oil palm production. It should be noted that most children and grand children who are in school usually assist with farm work during holidays.

In summary, based on the needs assessment presented here, elderly themselves play a vital role in securing their basic needs. However, the data points to substantial help being provided by grand children, children and hired helpers, particularly with the provision of food, firewood, fetching water and assistance with farm work. Worthy of note is the declining importance of assistance received from the extended family. Elderly women as well as men are struggling to provide some needs related to daily care, food provision and farm work. However, both gender wrestled with addressing needs around medication and clothing. Only a small number relied on remittances, of varying amounts from sons and daughters, mostly transmitted on a quarterly and bi-annual basis.

Table 7.20 Mode of Membership in *njangis* and Amount Contributed

Mode of Membership in Njangis	Amount Paid in thousands (000) At time of research 1000 CFA=£0.95								Female	%	Male	%
	500-1000		1000-2000		3000-4000		5000 and above					
	F	M	F	M	F	M	F	M				
Weekly	22	6	9	5	4	2	2	2	37	28.9	25	30.8
Fortnightly	9	5	7	3	2	3	3	4	21	16.4	15	18.5
Monthly	33	3	11	15	11	7	13	10	68	53.1	35	43.2
No membership									2	1.5	6	7.4
Total									128	99.9	81	99.9

Though most respondents hold multiple membership into the weekly and monthly *njangis*, the monthly *njangis* are the most popular attracting a high percentage of 68% female and 70% male followed by the weekly *njangis* with 46.3% for females and

50% for male. For the amounts contributed, most female fall into the category of 500-1000 CFA for the weekly and monthly amounts contributed. Contrarily, most elderly men fall into the monthly categories of 1000-2000 CFA and 5000 CFA and above. The columns do not sum to 100% because respondents hold single and multiple membership into weekly, fortnightly, and monthly *njangis*. Others within the *njangis* undertake the Christmas *njangi* which entails the contribution of a certain sum of money weekly/monthly which is kept aside strictly for Christmas festivities and the purchase of basic commodities like rice, washing soap, meat, salt, and vegetable oil. In some quarters, members pooled resources and basic commodities together which are distributed in a revolving manner on an annual basis. Though annual *njangis* are a prevalent feature of pooling savings, other resources and commodities depending on the nature and passed on to a member, in my sample it was not noticeable. Only 2.5% of females and 12% of males are not members of *njangis*, perhaps respondents from Muslim backgrounds where *njangis* are not a prevalent activity. Muslims usually count on internal mechanisms of mutual support and assistance (*zakat/sadaka*) to the poor and needy as prescribed by the Koran.

Table 7.21 Distribution of respondents based on who accompanies old people to receive treatment

Accompanies for treatment	Female	%	Male	%
Children	21	26.2	12	24
Grand children	17	21.2	9	18
Hired helper	12	15	7	14
Extended family	6	7.5	4	8
Spouse	12	15	11	22
Alone	12	15	7	14
Total	80	100	50	100

Accompanying the elderly to receive treatment is determined by the living arrangements and residential patterns of the elderly. In urban areas, and besides being escorted, the elderly themselves take a taxi to hospital while in rural areas; they rely on support from family and other members of the community (church groups and social support networks like *njangis*). When they fall ill, they may initially use herbs and are accompanied in critical cases. Children and grand children, hired helpers, spouses and extended family accompany the old to receive treatment, depending on individual circumstances.

Table 7.22 Distribution of respondents based on access to housing

Access to housing	Female	%	Male	%
Own a home	46	57.5	37	74
Is renting	29	36.2	10	20
Sharing with relations	5	6.2	3	6
Total	80	100	50	100

Regarding housing, most men own a home while most women survive through renting homes. A small number of both men and women share with relations. Ownership of a home is different in the urban and rural areas. It is cheaper to set up thatched, skeletal structures in rural areas where land is easily available, unlike in urban areas where land is very expensive. In addition, planning and building permits have to be ratified by the councils. This was not the case in the distant past. In rural areas dictated by traditional and customary system of inheritance and succession laws, most women find it difficult to own a home. They cannot inherit due to lack of land registration documents. Widows usually face difficulties re-registering and re-possessing the home and other property in the name of the deceased. Most interviewees resident in urban areas place a high importance on building a house in their village of origin which serves as retirement home.

7.2 Conclusion

It is apparent from the data analysed above that the support received by the elderly is multi-faceted. It is not very clear whether the influence of the extended family is fragmenting, since pockets of the elderly, particularly in rural areas, do draw assistance from various traditional support networks. The care received by old people is inextricably linked to the pressures of urbanization, migration and widespread poverty that is forcing through new patterns of welfare and support. There are new demands that undermine the care received by the elderly. Some hard questions are raised as to the vibrancy of kinship based and other traditional forms of support.

Data reveals the phenomenon of hired helpers, increasingly used as a means of providing care for old people in rural and urban areas. Also, grand children and children play a crucial role in guaranteeing the well-being of old people. They are involved in securing crucial needs such as provision of food, help with daily care (hygiene and sanitation); fetching water; assistance with farm work, accompanying the elderly struggling with ill health to various treatment centres, and protecting them from isolation, boredom and abandonment. Access to pensions starkly reveals the vulnerability of elderly women as they constitute a small number of pensioners. Over 60% are non-beneficiaries and about 20% are indirect pension beneficiaries, based on contributions made by their deceased husbands. About 50% of elderly men are entitled to pensions, very significant in shaping livelihoods and welfare. Elderly entitled to pensions and resident whether in either urban or rural areas are slightly better-off than those without pensions, though it is difficult sometimes to get hold of the money. Access to pensions represents a direct means of income. Though pension processing and administration has proved onerous in the past, it remains vital in

sustenance. On the other hand, the vast majority of elderly without pensions live in abject poverty as their income generated through individual initiatives are inadequate.

Residential patterns indicate that the elderly mostly inhabit the rural areas (over 60% for both female and male) with all the trappings of underdevelopment and dearth of social services. Survival is negotiated through a vast array of informal sector ventures, farming and other allied agricultural activities. The scenario of a vast majority of the elderly, living in rural areas, particularly women, is evident. Without access to pensions, they constitute the bulk of the elderly who rely on individual and collective agency. In this category are widows, widowers and childless women, highly disadvantaged groups and who carry a heavy burden of fending for themselves. Widows in particular are coping against the backdrop of anachronistic traditions that impede their socio-economic advancement.

Data also reveal the centrality of *njangis*, prevalent social networks in providing socio-economic support. The monthly *njangis* are the most popular and the amounts contributed vary from 500 to 1000 CFA. Not all respondents are members of *njangis*, particularly the Muslims and other groups like the Fulani, who rely on mechanisms of support as prescribed by the Koran and on cattle transactions respectively. However, the livelihood of old people, especially in rural areas, is damaged by lack of essential services like water, health centres, electricity and farm-to-market roads. Access to health care is a problem as evidenced by the proportions using herbs, visiting traditional healers, buying medication and going to the hospital as a last resort. Only a small number of the elderly survive through remittances from their children and other

relations abroad. Housing remains a major problem for elderly women, who are mostly having to pay rent rather than owning their home.

Chapter Eight: Older People's Narratives

8.0 Introduction

The bulk of this chapter is made up of narrative material based on a typology of recurrent themes pieced together from the field notes and drawn from the quotes and other information provided by respondents. Although older people's claims and perceptions are significant data, these should be seen as essentially subjective. As the narratives portray, interviewees were given ample room to tell their stories in their own way through in-depth interviews. The validity of the narratives was ensured through a rigorous interviewing which necessitated asking questions in different ways to increase the legitimacy of claims. Also, deviant cases, viewpoints and contradictory quotes were signalled to challenge any generalisations. Emphasizing minute details in the transcription of data which largely reflected the language and perspective of respondents was useful in drawing evidence and confirming assertions. In some situations, respondents justified claims by going into specific details, either presenting exhibits of 'signed' or 'unsigned' government dossiers in hand, evidence of tax and patent payments indicative of tax burden, a visible ailment and disability. In some context, it was daunting to verify certain claims made by respondents. Views reflecting the dilemma of particularly pensioners could be verified and/or triangulated with the literature on pension in Cameroon and statements made by key government officials on pension administration and the plight of the elderly, particularly those uncovered and who inhabit the rural world. By and large, through participant observation, the researcher was able to witness first hand some of the activities and coping strategies mentioned by respondents. Also, the researcher was able to scrutinize some 'exaggerated' claims by probing further and getting financial details regarding core issues like pension entitlement, nature and earnings from economic

activity, amount contributed in *njangis* and benefits of social networking and kin support.

However, the tendency to be subjective sometimes was inevitable as the researcher oriented the research process, particularly in situations where the respondents were digressing. Perhaps, certain variables were emphasized at the detriment of others. Triangulation was difficult to achieve as most responses were taken at face value. Some of the responses could have been cross-checked if other categories of respondents like family and other kin relations, children and hired helpers were drawn in the survey. However, the researcher relied on the objectivity, trust and integrity of selected respondents and the rapport that was established prior to interviewing. The challenges of interpreting narrative data are dependent on the degree of confidence and rapport between the researcher and the research subjects. In my research, I was able to deal with some of these challenges by emphasizing significant convergent and divergent viewpoints emanating from the narratives to ensure validity and reliability. Participant observation, ethnography and focus group discussions permitted the researcher to participate in group meetings, cross-check information provided and to witness, first-hand some of the daily survival strategies employed by respondents. While such narrative data can generate original qualitative data from the world and perspectives of interviewees, it can equally be problematic given the degree of subjectivity and difficulties of triangulation. From older people's narratives, emergent themes have been pieced together with emphasis on the interaction between gender, religion, tribe and particularly polygamy which are under-researched areas.

8.1 Debunking the Myth of Old people as a Burden

A fundamental question that underpinned the research is to find out whether old people are liabilities or assets. My findings paint a mixed picture and hard fact that there are those who are slightly better-off needing less support, those who need greater support and those who are worst-off. While some old people are able to guarantee household survival and foster community building initiatives, others are in a desperate situation requiring plenty of support. Evidently, there are problems for some, but not for others, depending on access to income, assets and resources, patterns and levels of care needed and support received. A retired person, on pensions and resident in an urban area, is slightly better-off than an elderly villager who survives by tending goats and keeping poultry. Yet, on the other hand, the rural elderly with massive investments in land, agricultural and business related ventures, are coping better than their counterparts without pensions in an urban setting. Whatever the levels of support, my data points to the pivotal role played by the elderly in the whole matrix of livelihoods. From individual accounts, about 75% of old people were involved in household activities that improved their livelihoods and that of their children. Others featured prominently in community development ventures to mitigate the shortfall in social services. As one elderly interviewee said:

‘if we go to sleep, we end up sleeping forever, because if we wait on the state to intervene, whatever they have to offer may not even reach some of us before we get to our graves’.

He went further:

‘look at the level of unemployment and the number of children without jobs. They still come back to us for food, clothes and pocket

money. What do we do with such a situation? We cannot go to sleep because we would not sleep well. We are forced to be on our toes to provide for them. After all, it is not their fault to have gone to school, graduate, yet they cannot find jobs and in the process are forced to hang unto our apron strings for survival' (R35, Male, 69, Bamenda).

On their galvanizing role in village-based organizations, an elder who holds an influential position in his village-based organization put it as:

'we are now retired but not tired, so we have plenty of time and wealth of experiences that our cultural and development associations can benefit from. Personally, I can now move forward and backward lobbying and presenting our development needs to our fellow compatriots, the local and national administration and by so doing enlisting the support and mobilising the vital resources needed to promote our development drives' (R101, Male, 72, Nkambe).

In spite the inequalities in levels of care and support provided or received by the elderly, most respondents see themselves as assets rather than liabilities to households and communities. In the face of shrinking state resources; economic hardship and declining material support for old people, they are still making a vital contribution to households and communities. They are involved in a myriad of economic activities that sustain livelihoods and are also playing a key role in caring for children and grand children, though they, in return, are providing care for the elderly. These activities undertaken in both rural and urban areas cut across the operation of drinking bars (off-licences), palm-wine parlours, buying and selling of essential commodities and food stuffs, snail production, palm oil trade, lettings and plot rentals for farming

of both food and cash crops, livestock production and marketing. Some of the input of the elderly in community building is captured by an interviewee:

‘we are seen as a source of wisdom because of the knowledge we hold based on our experiences in life. The saying that what an old man can see sitting down, even a young man climbing a tree cannot see, holds true with old people in our African context. This accumulated knowledge constitutes the wisdom which we have and we try to pass it on to our children and our kith and kin. The history of a household and community is in our hands as the old are history books themselves. I fought in the First World War (sic) alongside the other western troops. My experience in the world war is history that cannot be got elsewhere but which is useful in the education of the young. We are also custodians of culture and tradition and culture is like an identity card of a people. The way we talk, dress, what we eat and how to go about life in the community is all about culture. Some of us are judges in the traditional council. The knowledge obtained from our forefathers guides us in the arbitration of community problems like land disputes, divorce, marital problems, stealing, elder abuse and other social problems’ (R102, Male, 81, Bamenda).

An elderly woman saw her contribution as vital in assisting the daughter and son-in-law cope with the pressures of work in the urban area. She summed up her experience:

‘I travel from Bamenda to Buea each time my daughter delivers a baby. I have done that several times and each time I am out there, I look after the young children for about a year. It is very demanding

and time consuming to look after little children. I tell my daughter that my mother did it for me and I must do it for her and she will do it when her children are grown up. Nowadays, looking after children is very difficult because in our time, we were simply housewives and all our time was directed in raising children. Today, it is not the same as most women are in work and therefore need more support than in the past. I usually miss my village life a lot when I am in the city but I have no choice because my daughter really needs the assistance.'

(R47, Female, 69, Bamenda).

Old people are involved in various income generating activities at the level of households. From the interviews their input into the household economy is determined by the scale and returns from the activity. An old man married to three wives put his contribution this way:

'I have no formal education. I have survived all through life by buying and selling palm wine which I transport from Mankon rural to Bamenda town. At times, I tap the palm wine from my raffia bush and add to what I buy from others. Some days, I sell about three jugs of palm wine which come up to 60 litres. Other times when things are low, I sell only a jug. On a good day when I sell three jugs, I can make 3000 CFA and on a bad day 1000 CFA. As concerns farm work, I support my wives by buying seeds during the planting season. I also give them money to hire additional labour for clearing the farmlands. As a farming activity, I have planted plantains on a large piece of land. I work on the plantain farm to ensure a rich harvest which can help me in generating additional money to run the family

of twenty dependents. From the palm wine and sale of plantains, I am able to pay children school fees, buy school uniform and textbooks and other writing material, pay Parent Teachers Association development levy. Part of the plantain is used for feeding the family' (R82, Male, 70, Mankon)

Providing counselling and advice is the cornerstone of elderly support to children, grand children and other dependents. A widower situates the context of such support:

'I have a meeting with my children every three months. At the meeting, I offer words of advice to them on how they should carry on in life, their actions, respect they should show to their father and older persons both within and beyond the family because it is the respect that I show to others that earns greater respect in return, I tell them that I did not go to school but call on them to be married to their books and do the right. I tell them that HIV/AIDS is a major killer and they should be careful not to contract the disease. In the midst of others, they should avoid telling lies, should not be abusive, and treat every one as equal but trusting very few because times are difficult and many persons are not trustworthy. Also, I advise them on how to live a peaceful marital life and be of good manners at all times. For the female children, I caution them to respect the family of the husband, respect the brothers and sisters of the husband, the husband's mother, the father. In short, they should show respect to the family they are married to. Respect can only get greater respect in return and they would live happily. I tell them that 'make yi hear for e man and make yi man too understand yi...so dey go stay fine and

when they born their own pekin, they go pass on this fashion' of showing respect and understanding each other. For the male, I call on them to work together with their wives, show respect to their wives' family, to share whatever they have and live happily' (R67 Female, 70, Bafut).

The role of old people in community building cannot be overstated. Most recounted that their experiences and expertise in various fields of endeavours were channelled into community building initiatives. Some interviewees declared that they were at the frontlines, occupying strategic leadership positions in various community structures geared at promoting community development. From the quarter councils, traditional councils to community development committees, they play a key role in mobilising community members for development endeavours. The input of an old man in a rural community water scheme lends credence to this thesis:

'I am a member of the community water scheme and I act as the president of the water committee. We go round the village to sensitize the people on the importance of water and for levies to be paid. I assist the plumber in buying pipes and the committee supervises the digging of the connection trenches. We periodically call the quarter people to give them a statement of account and progress report on the construction work. For the levying scheme, each compound is levied 26,000 CFA on the initial budgetary estimate. We later on realised that we had underestimated the costing of some materials and the levy was increased to 50,000 CFA. We summon meetings to explain to community members why this was

the case. We also agreed that those who want connections directly to their house would pay 100,000 CFA' (R91, Male, 65, Nkwen).

Another respondent indicated his input thus:

'I contribute to peace in the community as I am a member of the Mankon traditional council where community disputes are handled. We ensure the implementation of injunction orders and impose fines on those who violate community laws. Our sole objective is for peace to reign so that development can take place. We impose fines depending on the gravity of the offence, especially those who violate injunction orders. For serious offences, some are fined five goats, five jugs of palm wine and for minor offences, three fowls, one or two jugs of palm wine' (R 82, Male, 70, Mankon).

Still, another respondent summed up his contribution:

'I hail from the Bangwa tribe and the president general of the Mmuock Ngih cultural and development Association in Alo Subdivision, Lebialem Division of the South West Province. Given that our village is enclaved, we have embarked on community development projects. These include road projects, building of bridges and culverts, classrooms for secondary school, health centre and occasionally the offer of scholarships to pupils and students. Currently, we are building a hall in the palace. It is estimated to cost 40 million CFA. Presently, the Association has 14 branches throughout the national territory. Recently, I was actively involved in the organisation of a national convention in Buea and we raised 2.5 million towards the palace hall project' (R32, Male, 68, Buea).

The scale and involvement of old people in community development varies within localities. This involvement ranges from holding key leadership positions, sourcing of funds, chairs of project implementation committees, technical support hinging on community mobilisation, members of village traditional council, settling community disputes to political lobbying for government support.

A respondent put his contribution thus:

‘I am a traditional councillor and quarter notable. As traditional councillor, I organise meetings in the quarter to settle disputes between neighbours related to land, drainage. I also oversee the implementation of clean-up campaigns which involve clearing and disposal of refuse, filling of pot holes, general hygiene and sanitation and the setting up of vigilante groups. At the level of the quarter council these concerns are handled and the ones we can’t tackle are referred to the traditional council in the palace. Men contribute 1000 CFA and women 500 CFA to enable the quarter council carry out the assigned tasks’ (R72, Male, 71, Mankon).

The vanguard position of old people is captured in the role of another respondent:

‘I am one of the senior advisers of the Chomba cultural and development Association (CHODECA) and quarter head of Afosi quarter in Chomba. As quarter head, I ensure that members pay their community levy of 2400 CFA for men and 1200 CFA for women. Also, I sensitize women and men to participate in community clean-ups. There is a cash prize donated by CHODECA for the cleanest

quarter in Chomba and I encourage my quarter residents to work hard to get the prize. My most important concern is with sanitation and I ensure that pit latrines are built following the prescribed format from CHODECA and if this is not followed, the resident is reported to the palace'(R 83, Male, 75, Chomba).

Cultural stereotypes that perceive the elderly as a burden are being debunked as some old people are making tremendous contribution in securing livelihoods through pensions and a gamut of informal sector activities. Some accounts also point to the vanguard role of the elderly in community development initiatives. Most community development ventures are being executed due to their input and expertise as most devoted their time and re-channelled their meagre resources in the mobilisation and galvanisation of community members.

Elderly men and particularly women in both urban and rural areas without access to pensions attempt to fill the gaps created by the retreat of the state by guaranteeing livelihoods through individual and collective agency. The survey data reveals a complex picture of some old people as important members of families and communities. While some constitute a burden, most are generating the much needed resources, through pensions and other income generating activities. Findings paint a complex picture of the slightly better-off (elderly with access to pensions and other investments), and those who are worst-off (elderly without pensions and particularly widows who are dispossessed). While the care received is in short supply in some context, others are coping better.

8.2 Cultural attributes connected to old people

Old people, men and women alike, who are successful in terms of educating their children, investing in land and other accrued property, and contributing to community advancement, are venerated within their families and the community. The attributes bestowed on old people are related to their christening in the tradition of the people. Such attributes carry much significance especially to the old in rural areas that are still closely knit communities, unlike in urban areas where the bonding is eroding. In some localities studied there is a name in the local dialect signifying respect for old men and women (see table).

Table 8: Titles ascribed to the elderly by some tribes/villages studied

Tribe/Village	Titles
Kom	Elderly women as Nawain and elderly men as Bobe, Chieh
Metta	Old men as Baba werikeng and old women as Abuu
Batibo	Elderly men as Neck
Ndop (Babungo)	Elderly men as Tah, wotah
Mankon	Elderly men as Tankang and women as Maah, Bemah
Bafut	Elderly men as Tah and women as Ndiy, Ndiga
Ngemba tribe	Tah for elderly men and Ndiga for

	women
Bali	Elderly men as Ni, Nini, and women as Mamoon
Bakweri	Elderly men as Mola and women as Mbamba
Mamfe	Elderly as Nsinsi in some villages. Amongst the Ejagham, elderly men as Eeta and women as Ma'a. In Bachuontai, elderly men as Njunmot and as Mukpa amongst the Anyang tribe of Akwaya.
Lebialem	Elderly men as Nghe Teh, Ndoh
Menchum	Elderly men as Ghong
Wimbum	Elderly men as Tادكوه and women as Maya

These attributes bestowed on the elderly carry with them some significance and recognition in the culture. Regarding urban/rural divide, the elderly in villages and rural areas still enjoy some degree of respect but this is dying out in urban areas.

An old man resident in a rural area summed up some of these attributes:

‘When you slaughter a fowl, the gizzard is eaten by the oldest person. When anything is being shared in social, family or community gathering, the old are first taken care of in a special way. When you drink in the midst of a ‘chieh’ you do not handle the cup with the left hand. You cannot cross your leg in his presence and you cannot greet him until he extends a hand. If he comes in any gathering and there is

no seat, someone has to give off his/her seat and if you happen to be sitting on a better seat, you have to give it off. Important libations and cleansing rituals can only be done by old people and they have special calabashes that they use for such occasion. As custodians of tradition, old people act as king makers and they play a crucial role in the enthronement of a Fon or Chief¹⁵. It is a taboo to throw insults at old people' (R77, Male, 75, Awing).

Using metaphors, another respondent situates the special role of old people:

'The old are likened to cores of oil palms. Though there are old, ageing and fall on, they remain oily and provide the support needed by the fronds of the palm' (R82, Male, 70, Mankon)

In other words, the young fronds are protected by the cores meaning that the young look up to the old for guidance and support. Still, another referred to the old as: 'old pair of shoes kept under the bed but that can still be dusted and re-used at anytime' echoing the availability of the old to pass on their acquired wisdom and knowledge.

Yet a respondent who valued the support of children and grand children hold:

'children are the walking stick of the old' and an old man stated: 'the firewood that we gather in our youth will warm our old age. I am surviving because of the help provided by my children' (R72, Male, 71, Bamenda)

This resonates in some forms of intergenerational support for the elderly. Elderly men and women thought it is their responsibility to put things right with the youth. An elderly informant stated:

¹⁵ Hereditary ruler at the helm of traditional authority in a village or community, who acts as a paragon of culture, tradition and in most jurisdictions, as auxiliaries of the state.

‘I hail from Bachuo’Ntai village and I am a member of the “Nyankpe” society. The society ensures that the youth pay respect to elders by sanctioning cases of abuse and disrespect for the elderly since the Nyankpe is the custodian of traditional values’(R36, Male, 70, Mamfe).

However, it is important to point out that although these attributes are still adhered to in rural areas this is probably not the case in urban areas, where the social ties are not as strong as there is a mix of different ethnic groups. Other narratives point to forms of disrespect and abuse which are analysed below.

8.3 Plight, Coping mechanisms and livelihood of old people in Rural, Semi-Urban and Urban areas

The rural/urban divide is a strong determinant of elderly well-being. The place of residence of old people is indicative of living conditions and the delivery of social services. Whatever the living arrangements and place of residence, there are advantages and disadvantages that underpin the welfare of old people. However, an old person who is coping better has typical indicators such as: ownership of a home/compound, relatively high number of educated children; sources of income such as pensions; other informal sector and income generating activities which are a source of greater security; land, farmlands and other accrued property; estate development and survival on rents from houses constructed in rural and urban areas; other assets like cattle, raffia palms, oil palm plantations, cocoa and coffee farms. Access to these resources and other assets by old people is vital in securing

livelihoods. Sjaak van der Geest (1997, 1998; 2002) also found that in Ghana ownership of a home and other accrued assets remains very instrumental in livelihoods, ensuring security, enhancing happiness and respect for the elderly. The proximity and access to essential services like water, electricity, health centres, roads is also crucial in the welfare of old people.

Unquestionably, the efforts of the old to provide for themselves and sustain their families are stymied by a hostile economic environment marred by inept management, teething troubles with processing of pension entitlements for public servants; non-existent and at times inadequate infrastructure like electricity, potable water and especially lack of roads for the marketing of produce. This is compounded by the lack of social welfare packages; health facilities and essential drugs, hampering the effective involvement of old people in the informal economy. It emerged from interviews with respondents who were pensioners that they had great difficulties processing files for pension entitlements. This was shattering for old people wherever they are resident. As one elderly informant put it:

‘getting a bulletin null’ (blank pay slip) at the end of the month without prior notification that you are retired from the service constitutes a death warrant. This is the beginning of your journey to the grave as you have to start putting together a long list of documents with the most important document (retirement decision) not yet in hand. Many of us are ill-prepared psychologically’ (R2, Male, 68, Buea).

Another respondent stated:

'I worked in the public service for 40 years and retired in 1990 as post master at Buea Post Office. I faced a lot of difficulties processing pension because I started working under the West Cameroon government that was controlled by the British colonial and local authority. When I later joined the Cameroon public service, my files were not transferred to the public service. I had a hell of time moving forward and backwards between Buea and Yaoundé to sort things out. The documents were rejected because the local administrative authority signed without fiscal stamps and it was not a common practice to find fiscal stamps on official documents prepared by the then local authority. Finally, someone explained my situation and the documents were eventually processed after seven years of toil' (R4, Male, 81, Buea).

From the accounts, it was clear that most retirees were ill-prepared psychologically as they were not duly informed of their retirement date. It was something that they could only anticipate. Therefore, the 'brutal stoppage' of salaries increased their level of stress as they had to make several trips to Yaoundé (the capital city), to commence the arduous task of piecing together the required documents. From the interviews, some retirees after long years without their pension, resorted to working through 'middlemen' who would process the documents on their behalf, usually entailing a contractual agreement of the beneficiary forfeiting a certain percentage of their money when the documents are eventually processed. Most stated that they had to forfeit 20 to 30%. Other respondents intimated that they had incurred debts to cater for transportation costs, feeding and bribing unscrupulous public service officials who

demanded sums of money to 'chase their files'. Worst still, when the entitlements are finally processed, payments are not regular and most pensioners are paid quarterly instead of monthly. These accounts recur with the elderly who had served with the civil service and speak volumes about the bureaucracy and red tape that is bedeviling Cameroon's public service, in the process, jeopardizing the welfare of old people. The bureaucratic system and public service in shambles is described by the utterances of a retiree:

'I went on retirement in 2004 after serving for 34 years in the public service. The hassle of re-constituting documents is always a nightmare. It is like a child who is born in the house. The child lives with the parents for 34 years, attains maturity and the child is asked by the same parents to identify himself again. You are expected to compile files and to apply to go on retirement. You compile documents again to declare when you were born, when you started work, declare if you are married, how many children you have got and how many are above twenty one years of age; where you reside and where you will spend your retirement. So, it is like a father asking the son about his credentials which is very well known to him. It is very frustrating and the reason is simple, they want to create mountains so that by the time you by-pass them, you need to pay your way through the obstacles. If you do not apply within two years of retirement, all your benefits are forfeited. When you want to query, you are told "c'est la loi" (it is the law). You compile documents and deposit in the public service and you have to follow up. At times you are told that the documents are either misplaced, incomplete, or lost

and at times you hear phrases like “rien a signaler” (nothing is happening). Someone might just pull out a document from the file and when you offer tips, it resurfaces. It is even more traumatic to us Anglophones who do not understand the French language so well...’(R9, Male, 69,Buea).

In spite of the obstacles, it should be noted that those who retired before the drastic salary cuts of 1993 and from the year 2000 upwards are slightly better-off, as indicated by some respondents:

‘I retired in 2002.The situation is slightly better now as you go on retirement and 1/3 of your salary is paid out to you directly as pension until your documents are processed. But the difficulties with processing are still there as you have to move forward and backwards which entail a lot of cost. Since 31st September 2002 that I finished compiling the dossier, they have not gone through. When the documents are eventually processed, the decision has to be signed by the Prime Minister before you take to Finance to do the calculations. I can say there are several ladders to climb’ (R 91, Male, 65, Bamenda).

Another respondent indicated:

‘I am doing okay compared to other people. I retired in 1991 and then, salaries were still good. That’s why my pension is okay to permit me look after myself and my family. It took me sometime to compile the dossiers and after the processing I am taking about 180,000 CFA every quarter. My only worry is that my entitlements are not paid regularly. Sometime you go to the Treasury and they tell you there is

no money, other times they tell us we have to wait for some months'(R 22, Male, 71, Buea).

These accounts from pensioners point to discrepancies and overlapping in pension entitlements. Those on the pension regime before the drastic salary cuts of 1993 are slightly better-off, those after 1993 are worst-off and those who retired after 2002 are relatively at some ease as they retire with 1/3 of their salary paid as basic pension while processing carries on. However, pension processing remains a horrendous experience for old people who are pensioners.

A respondent put his case thus:

'Upon retirement, I managed to get my documents and travelled to Yaoundé five times spending all money that I had borrowed. On the fifth trip, I realize that one of my documents had been removed from my file though I had a receipt which was issued indicating that the file is complete. Eventually, when I offered some tips the document was found and I had to take it to the next office. It became difficult for me to proceed because of shortage of finance. I ended up negotiating with the intermediaries/agents who help you to follow up your entitlements on an agreed percentage when the money is cashed'
(R4, Male, 68, Buea).

An old woman who had served with the public service for a long time recounted her ordeal:

'I started receiving my pension six years ago. I went through hell before I could get a kobo [penny] at the end. I retired about 15 years ago. Before then, I had been asked to put the documents together. I

presented several sets of documents and children allowance papers. It was later that my friend helped me before I realised that the documents were still in the office in Buea. We followed up from there and I had to offer bribes amounting to 150,000 CFA and a year later, I got the arrears. Presently, I am on a pension of 68,000CFA which is paid out quarterly' (R23, Female, 74, Buea).

However, those still awaiting their pension indicated that the government is shifting ground through efforts to tackle the red tape that has been very costly for most beneficiaries. A respondent put his story:

'Our hardship is fostered by the fact that we do not receive our entitlements on time. I know persons who have died and others who are in huge debts because of pension processing but things are slightly better. I retired four years back and my situation is different as the government is now paying 1/3 of your salary to permit us carry on while waiting for the final processing of the pension. I have constituted my file but I was delayed because of a ministerial decision. It is only last month that the decision was signed. I have added it and taken the file to deposit in Yaoundé. But the main trouble is bribes...bribes. They do not ask you directly but for your documents to keep moving, you have to keep paying for the file to move. I put in 18 years in the Cameroon Army but the lower your rank, the shorter the time you have to serve and consequently the pension. As Corporal in the army, my pension would not exceed 60,000 CFA' (R13, Male, 65, Buea).

Still, another respondent revealed:

'I retired in 1990 and had to wait for ten years before I could get my entitlement. I thought I was the only one in this situation until I met a colleague who told me he waited for fifteen years. I cannot imagine how such actions by unscrupulous officials has hastened the journey to the grave for many pensioners as many have died without receiving what they sweated for. The documents are what they already have but we are compelled to compile another set of unrelated documents. When these documents get to CNPS, they get hooked and you have to make them move by offering bribes. You can imagine that I was entitled to arrears of 415,000 CFA and I had to offer bribes of 100,000 CFA. Presently, I am receiving a quarterly payment of 49,500 CFA (R12, Male, 69, Kumba).

Retired persons who had served in the private sector (with some companies) that either went bankrupt or were liquidated were frustrated. Those whose pension contributions were not paid to the social insurance fund by their employers were even more vexed. An old person caught up in these circumstances recounted his ordeal:

'I retired in 1999 after serving as a night watch with a company for twenty-five years. Through out the period of service, they were deductions from my salary that had to be paid to social insurance but when I showed up at the Social Insurance in Bamenda, I was told that there is no file indicating that I had been an employee of that company. I went back to the company but the new management indicated that they had no records about me but that I should follow-up with the social insurance. I have been going forward and

backwards for the past years and there is still no solution in sight. I am becoming tired and would certainly give up because I have put in a lot of money, time and seem to be getting no where...' (R127, Male, 68, Bamenda).

Also, the living conditions of old people who served in the private sector are in shambles occasioned by non-payment of employee contributions to the National Social Insurance Fund (CNPS). This concern featured prominently in the accounts of respondents who had served with some defunct institutions like banks, the National Produce Marketing Board (one of the largest employers in the late 1970s). The account of one interviewee is revealing:

'I worked with Cameroon Bank for twenty five years and when it was liquidated, I was frustrated. We were hoping that our fortunes will change for the better as we would be paid off and later benefit from our entitlements from the National Insurance Fund as we were contributing. Unfortunately, we were told that we had to follow up the documents at the Social Insurance fund. I had no one to help me. When I showed up later at the Insurance fund, I was told that the Social Insurance does not have any data on Cameroon Bank. So, I lost all what I had toiled for years. It is thanks to my savings in some *njangis*, that I bought a cocoa and palm nuts farm in Muyuka which has become my best security. From the sale of palm and cocoa nuts, I am sure of making 1.5 million CFA annually after taking care of labour and other running costs. Currently, I am in a village *njangi* of 5,000 CFA a month, *Bokwango old Boys njangi* of 10,000CFA every month and *Nda Butah njangi* of 5,000 every month. Savings in the

njangi come up to 450,000 CFA a year and I am able to feed, clothe, pay hospital bills and school fess for 8 children and 4 grand children with three being my deceased brothers' children' (R11 Male, 73, Buea).

A widow resident in a rural area summed up her experience:

'My husband died in 1997 without getting his pension after he had started the processing in 1992. He was a labourer with the CDC banana plantation at Ekona and he was told to compile his files. He did everything and every year after, his name did not feature on the list. After his death, I took over and two years later, the name featured. However, the arrears and family allowance are pending. I am expected to go to Yaoundé to follow up the payment of the arrears. My health and age do not permit me to travel. The children and I are surviving on 300,000 CFA that was paid initially. I am still battling to get more money for the journey to Yaoundé to follow up the arrears and family allowance' (R37, Female 73, Buea).

Old people in rural areas struggle to cope with the exigencies of rural living through involvement in subsistence agriculture. Unlike their urban counterparts who are worst-off without pensions, the rural elderly rely on land mostly available. Their livelihoods are also contingent on a vast array of informal sector activities. The scenario in a rural area is captured in the accounts of a widow:

'I have been a farmer and buyam-sellam all my life. My deceased husband was also a farmer and we had a cocoa and oil palm plantation. When my husband died, I set up a provision store at home and I go to rural markets to buy foodstuffs which I resell in the store.

In fact, I bought an oil press that is diesel which I operate at Mbalangi. With the oil press, I process palm oil for the store and I also charge a fee for the processing of palm oil by other farmers. I am known at Mbalangi as Mami Diesel. My provision and store and palm oil trade give me about 60,000 CFA a month and I am able to manage the family. I am a member of the Fundong women's *njangi* of 5,000 CFA every month and a general village meeting of 2,000 CFA every month. I am also a member of the Muea traders' *njangi* of 10,000 CFA every week. The *njangis* come up to about 300,000 CFA annually. With this money, I have been able to construct a home in Fundong. I am also able to pay the fees of five children. My greatest worry is the bad roads. We buy and most of the foodstuffs rot on the way because the roads are very bad. Look at the mud in Muea market during the rainy season. If you are not strong, you cannot venture into buyam-sellam business' (R20, Female, 71, Muea).

Land is a vital resource and a strong determinant in the welfare for old people. The accounts of the old operating in rural areas point to its centrality. A couple aged 78 and 70 years situate the importance of their piece of farmland:

'We have been farmers all through since we were born. We cultivate plantains, palm oil and other food crops. We have 150 palm trees and we extract palm oil from the collected kernel every two months. We come up with a tin and half of palm oil. Usually, we share part of the palm oil to our children who are married and sell a tin for about 8,000 CFA. For the plantain, a bunch ranges from 500 to 1500 CFA. Part of the plantain is used for feeding the household. From the cassava farm,

we process the cassava into garri which is sold by my wife in the local market every week. With the proceeds from the sale of food crops, we are able to contribute towards our weekly njangi of 1000 CFA and monthly njangi of 2500 CFA. The money is used for children's school fees, feeding, hospital costs and to buy other basic necessities like soap, rice, and other ingredients (R81, R 82, Male, Female, 78, 70, Mankon Rural).

However, access to land and ownership remains a vital asset in guaranteeing livelihoods. Another respondent indicated:

'In fact, I am still alive today because of the landed property I inherited from my parents. The land is rented out to farmers on an annual rate. I am able to raise 45,000 CFA every year. Added to this, I am involved in food crop cultivation and snail domestication which generate about 35,000 CFA every month. My major worry is health care as I am asthmatic but thank God, I am familiar with the local herbs to treat it' (R35, Male, 68, Mamfe).

Lack of running water represented a major handicap in uplifting the well-being of old people. One elderly informant put his ordeal:

'we fetch water from a distant stream (about 10km away). Most often the water is not good for drinking as people bathe and use it for other chores. During the rainy season, we mostly collect rain water and store for usage. Of course, the water itself and the storage conditions expose us to illnesses' (R115, Female, 68, Nkambe).

A couple presented their troubling time:

‘Our major headache is lack of water. We had a borehole in the village which broke down and we are always ill with typhoid which entails us going to the hospital most times and the closest to us is the Baptist Hospital at Mbingo. When we have the means we have to go there and at times we rely on traditional herbs that we boil and drink’ (R81, R 82, Male, Female, 78, 70, Mankon rural).

With the lack of basic amenities, the plight of old people resident in rural areas is summed up in the account of a widow:

‘Life remains a constant struggle for us who are old and even worse for us widows because our backs are on the wall. Things would have been better if we had good roads to transport our produce to local and urban markets easily. We don’t have pipe borne water and this takes up much of our time as we and with the support of children and grand children trek for long distances to get water (R14, Female, 68, Mamfe).

On the lack of health services, another respondent declared:

‘I have been suffering with high blood pressure in the last six years. I have been to the hospital and was told that there is no specialist to handle my case. I am surviving thanks to my knowledge of herbs which helps me to suppress the disease. With the knowledge of herbs, I function as a traditional herbalist offering help on herbal medicine to other villagers for a token. This activity and cultivation of food crops keeps me going as I am able to generate some money that enables me to buy other basic necessities’ (R 56, Male, 67, Bamenda).

Another female elder was worried:

I am very scared if I am terribly ill and cannot rely on my herbs because the hospital is very far off and I do not have the means to go for consultation'(R14, Female, 68, Mamfe).

Widows who are dispossessed and disempowered as a result of customary traditions, which jeopardizes claims to succession and inheritance for themselves and their children find new ways of coping.

A widow recounted her survival approach:

'I am 77 years old and I have been a traditional birth attendant since the age of 21. I picked up the skills from my late mother who was naturally gifted with herbs. I have delivered about 100 children in remote villages around Mamfe. I also prepare herbs to ease the pain of labour for pregnant women and also to aid breast flow for nursing mothers. Though I do not charge any fees for this activity but I am highly respected and compensated by villagers with money, food crops, farming plots' (R25, Female, 77, Mamfe).

Still, another widow indirect beneficiary of her deceased husband's pension pointed out:

'I have been a farmer and petty trader and I grow food crops which are sold in rural and urban markets. I usually make about 15,000 CFA every month from the sales and I am into a weekly *njangi* of 1000 and a monthly *njangi* of 2000. My husband died five years back and I also relying on his pension benefits as next of kin and two houses which we constructed when he was still working. I get monthly rents for the two houses totalling 60,000 CFA and this is

very helpful in running a household of six' (R73, Female, 67, Bamenda).

In line with coping mechanisms, respondents were requested to indicate their preferred choice of residence and the reasons for such preference. About 65% indicated that they would prefer to reside in rural areas because of availability of land for farming and other agricultural activities including livestock rearing, animal husbandry and planting of eucalyptus trees which are eventually felled down for wood. A respondent put his reasons:

'I have been residing in this village since birth and my umbilical cord is buried somewhere around. I have plenty of natural attachment to this place because I survive on land I inherited from my grand father. I am able to rent some of the plots for farming and I can also cultivate food crops for sale and household consumption. When I am not physically strong, I can rally others to either clear, prepare the land or do harvesting for a token fee. Without this land, life would have been very difficult for me. I have also planted a 'raffia bush' which enables me to tap palm wine on a daily basis. It keeps me busy and I am able to generate from 1,500-2,500 CFA on a daily basis. If, I had to reside in an urban area, I would have to purchase land for building and farming. Land is scarce and if you are lucky find one a good piece of land, the price is throat-cutting' (R 74, Male, 68, Awing, Bamenda).

On the same lines, another respondent indicated:

'I prefer a rural area as I am surviving on a piece of land left behind by my late husband who was a polygamist and married to three wives.

Each of the wives is allocated pieces of farmlands for their agricultural activities. The land is a life-blood for me because it keeps the family going as we are able to farm on large farming plots and we can quickly sell our produce in the local market. We also plant plantains, palms which require plenty of space and these activities generate us some good income as we sell plantains and palm oil extracted from the palms almost every day. This would be impossible to carry out in an urban area' (R 91, Female, 71, Bafut).

Still, another respondent considered the issue of respect and close ties within rural communities:

'I think life in our rural areas takes us closer to nature. We still feel for one another, respect for the elderly is still visible and there are traditional institutions to enforce the respect of tradition and culture. I am a traditional title holder and secretary of the traditional council. I am highly respected in the village as we arbitrate on land disputes, boundary disputes, marital problems, traditional marriage, witchcraft and other problems like cry-die (funerals) issues that arise within the community. When I walk around the village, I am honoured. But in the urban area, we are losing the value of tradition and respect for the elderly which is on the decline' (R101, Male 68, Mankon).

Other respondents preferred residing in urban area because of investments in houses and other business, availability of social amenities like water, access to health facilities, electricity and roads. However, they complained about the lack of access to farmlands for cultivation and other agricultural activities. Access to land remains of high importance in elderly well-being in rural areas. An informant observed:

‘I was born here [this village-rural area] and would die here because of parcels of land that inherited from my forefathers. I cultivate, plant trees and fruits. In fact, I survive on the farming plots which I give out on rents annually. In other plots, I planted eucalyptus trees which are felled down and split as firewood. I am the major supplier of wood in this village and this activity sustains me and my family of six dependents’ (R103, Male, 69, Nkambe).

From the accounts, it can be surmised that old people in rural areas, although poorer than their urban counterparts because the incidence of poverty increases with geographic remoteness, are slightly better-off as a result of access to land for food crop cultivation and livestock production. Old women are highly disadvantaged because of their lack of vital resources and a diminished asset base. Given that the old in rural areas have less access to public sector pensions and since pension entitlements are based on income during a person’s working life, again, it is lower in rural areas as most men and especially women are not covered. The dependence of the rural elderly on traditional forms of social support, though weakening, is stronger in rural than urban areas. Increasing levels of poverty and unemployment are pushing many young people to leave their rural homelands to gain education, search for employment opportunities, thereby diminishing the care and support provided to old people. This is being mitigated by the phenomenon of hired helpers to provide this care and support, a notable trend in both urban and rural areas. Undeniably, old people in rural areas continue to grapple with lack of access to health care, and lack of essential services like water, electricity, poor rural infrastructure. They also lack other forms of care, housing and transportation, which are either non-existent or in a state of disrepair. The

rural infrastructure is so precarious that it has the result of creating insecurity and instability for old people. Poverty is especially acute for poor old people as they have to make hard choices and difficulties of coping with the absence of basic services.

8.4 Building social capital, forms of reciprocity and networking

Cultural and social organizations are very instrumental in helping both young and old to mobilise the necessary capital that can be ploughed back into various economic ventures. The returns from these economic ventures are ploughed back into *njangi* groups; others have taken up membership with credit unions in order to borrow at low interest rates. The savings obtained from these credit sources are used to manage households in terms of feeding, clothing, payment of utilities (water and electricity), footing of health costs, payment for children's schooling and support to other family relations.

The philosophy of *njangis* that is very strong in the Cameroon grasslands represents a veritable platform for pooling of financial resources. About 95% of the respondents hold single and multiple memberships in *njangis* where they were 'saving for rainy times'. The amount saved varies and depends on the economic and entrepreneurial activities and means of the individual. An old woman sees the importance of *njangis* as:

'I think the current development philosophy is based on the participatory approach meaning that many hands can help in tying a bundle better than one hand. In a group, we do enjoy not only the social interaction but there are tangible benefits for coming together.

The *njangi* goes round because today we are here and the next time

we are that way when it comes to moments of cry and laughter (R91, Female, 68, Bamenda).

Another respondent held:

‘many of us are able to live longer because the *njangi* has helped us in building houses, pay for children’s school fees, hospital bills, buy food and other basics. I bought this plot and built this house from money that I got from the *njangi*. As one hand cannot tie a bundle effectively, individuals contribute to capacity building within the group. There is also the trouble fund that members can benefit from when in problems. We have people of all walks of life-teachers, bankers, accountants, doctors, farmers, builders and others. Every one tries to emulate the example of hardworking and successful persons within the group. *Njangi* groups are becoming markets in different ecological zones as there is barter of food crops and other basic necessities. I think from an economic point of view there is rapid economic development that takes place. *Njangis* form a strong base of capital building as we contribute money, bless it and give to members on a rotational basis. You can also borrow money when in difficulty as far as you have a good surety. I am in two *njangis*- a weekly *njangi* of 1,000 CFA and a monthly *njangi* of 5,000 CFA’ (R73, Female, 69, Bafut).

Economic hardships are alleviated in several ways and one of such is the trouble fund, part of the sinking fund meant to rescue members when they have difficulties in meeting expenses, for example, in times of sickness or funerals (see Fonchingong 1999:78, Mayoux 2001:443).

Still, another elderly informant indicated:

'I am a member of the *njangi* group called age-mates association which is very popular in the village. Each member contributes 2,000 CFA every month and the bulk amount is handed to another member on a rotational basis. We also run a sinking fund from 1000 CFA annual contribution and we provide loans based on the difficulty of a member. We do *njangi* farming which involves taking turns to clear and prepare the farming plots of members before the start of the farming season' (R46, Female, 65, Kumba).

About 90% of old people indicated that they benefit from support with hospitalisation and funerals. The amount for these schemes ranges from 10,000 CFA to 200,000 CFA depending on the number of members and the on the spot contributions during deaths.

Unquestionably, old people are looking up to mutual societies, *njangis* and village-based organizations for social security though these are plagued by financial, organisational and other management problems. Their yearning for alternative arrangements echoes the demise of the state in social protection for the elderly and efforts by citizens to fill the void. Here, it is relevant to point out that these mechanisms are being re-invented to suit the difficult times. About 95% of the respondents in the North West Province hold single and multiple memberships of these support networks. In the South West Province where associational life is not as high, about 60% of respondents hold membership into these organizations, though the adherents are mostly those of North West extraction residing in the Province.

Residents of South West extraction tend to bond in tribal groups and village development associations as a marker of cultural identity.

These support networks provide means of generating and pooling social capital directed towards especially funeral rites, births, bolstering economic activities of members and engineering social cohesion. Their viability is put to test by grinding poverty which leads to exclusion of some members and efforts at providing health care for members are proving onerous. These shortfalls notwithstanding, should the Cameroon government forge partnerships with these semi-formal networks to permit them deliver more on social security provision? These partnerships can take the form of tax rebates, incentives and institutional support for mutual societies, the introduction of subsidies to off-set health costs and assistance for private and collective insurance schemes for individuals and groups.

Other minority groups like Hausa and Mbororo-Fulani whose representation in the public service is abysmally low survived on internal mechanisms of support fashioned along Koranic prescriptions and Fulani code of conduct respectively with regards to elderly welfare and support. The Imam of the central mosque, the coordinator of the Mbororo-Fulani nomadic population and three Peul Fulani herders that I interviewed raised these survival strategies. Given that Muslims and Fulanis do not participate in *njangis*, there are far-reaching implications for social policy. The kind of arrangements suitable for Muslims and Fulani herding populations are based on mutual support and cattle transfer by Fulani elders to younger herders. This represents potential safeguards for ageing Fulani who need younger Fulani to look after their cattle. An option to consider would be to encourage younger generation of Fulani

nomads to enrol in animal husbandry and veterinary courses. Another option a synergy between the state and voluntary organisations to provide occasional incentives and basic necessities for *Imams* and *Nyakos* to look after Muslim and Fulani disadvantaged groups, the creation of mobile clinics to boost access to health services, particularly for sedentarized Fulani. Social policy formulation in favour of old people should also target Muslim minority groups and nomadic population, largely excluded from any forms of social security as prescribed by ILO Convention 102.

8.5 Variations in levels of care for old people and Impact of remittances

From the interviews, ethnographic accounts and participant observation, it is observed that there are variations in levels of care and support for young old, middle old and very old (frail elderly). This categorisation based on age follows the degree of independent and dependent care available to the old. The very old (80 years and above) who have suffered from a vicious cycle of poverty and deprivation find it very difficult to cope. The worst off either have no investments in terms of land or other accrued property, have no children that can offer assistance and are currently physically weak which does not permit them to carry on with any income generating activity. Their deprivation is extreme. In the second category is the middle old (70-79 years), and those who have served in the public service as public servants and are currently on retirement. Also, those who have served or are currently serving in the informal/private sector and who prepared for their retirement period by investing in building a home, by obtaining landed property and hold other investments are slightly better-off. They are able to carry on with their activities of daily living with some assistance. However, civil servants, other informal sector workers who did not plan

for their retirement and are either renting or do not own any assets are suffering in terms of social, psychological and economic deprivation fight for survival with 'their backs against the wall because of squandered opportunities'. They have to take on a gamut of activities in order to meet with their basic needs and that of their families. In terms of attributes given to the elderly, this category of the elderly lacked the power of respect, mediation, autonomy and authority, values bestowed on the elderly who were successful.

The young old (60-69 years) are virtually 'at the doorstep of elder hood' as one interviewee put it. In this category are those who have just freshly retired from the public service and other informal/private sector workers who are either preparing their retirement or on the brink of making the transition into retirement depending on the scale of activities. This category of the old is the most vibrant and physically active. They are handling activities of daily living with limited support and are making a tremendous contribution to family upkeep and maintenance.

Out of these categorisations, some of the old and very old are traditional title holders. They survive through their traditional connections. In most cases, they rely on their traditional titles and drive in community affairs to negotiate livelihoods. Such persons are highly venerated within the cultural milieu as they are seen as custodians of the culture. They preside at traditional events, traditional marriages, death commemorations, settling land disputes in traditional councils, participate at community meetings. They survive on the largesse of the community as their interventions attract some degree of care and support from community members. This is also the case with old people who act as elders and congregational chairs within the

mainstream churches as well as the spiritual role of the *Imams* and *Nyakos* in Muslim and Fulani settings respectively.

Children, grand children and hired helpers are playing a crucial role in providing support for old people. Worthy of note is the fact that the welfare of the elderly is also determined by living arrangements and habitation patterns. Those residing closer to family relations, especially direct children and grand children benefited from care/support associated with feeding and health care. Others indicated that they relied on house helps hired by children and other relations to provide care and support. Some of the very old who are pensioners were seen accompanied to CNPS pay centres by their children, helper and grand children. The role of hired helpers also takes the form of children delegating someone, once a month to check on the situation of especially the frail elderly as indicated by some informants.

It is also the case that remittances are an important variable in stabilising most old persons who have families and children overseas particularly in Europe and the United States, though only a small fraction of the respondents are supported by remittances. Some respondents did state that they were receiving fixed amounts tri-annually ranging from 100,000 CFA to 250,000 CFA through Western Union money transfers and other service providers like moneygram, money line depending on the proximity of the beneficiary to these services. An informant who received some money from the daughter in the United States put it this way:

‘Daddy, I have sent some money for your ‘country groundnut and kola nut’. Though it represents a token contribution but very helpful for me to buy some basic needs’ (R16, Male, 68, Buea).

An old woman stated that she primarily survives by the money send by her first son who is in Malabo-Equatorial Guinea:

‘I am still alive thanks to my son who works with a welding company in Malabo. He sends about 150,000 CFA every three months. I am able to use the money to provide food for the younger ones in the house and to pay their school fees. Life would have been very difficult for us, if not for his regular support’ (R19, Female, 74, Buea).

8.6 Old People and the negotiation of livelihoods in the informal sector

Securing livelihoods is top on the agenda of old people as they engage in a gamut of income generating activities. Respondents mentioned house rental and operation of taxi cabs as a major income generating activity, especially in urban areas. Those who have invested in building houses see it as some long term and permanent investment that is revenue generating. Some examples are illustrative:

‘I live in Awing but I come to Buea often to collect rents from my two apartment houses and to oversee my palms project at Mbalangi. The houses in Buea fetch me about 70,000 CFA every month. I used part of the money to invest in my palms which will start yielding soon. I am able to run a family of nine with part of the money used for my weekly njangi of 2,000 CFA and monthly njangi of 5,000 CFA. I am looking forward to completing my family home in the village-Awing from the rents (R3, Female, 67, Buea)’.

A widow put her survival on rents:

‘I have a carabot (plank house) of six rooms that I inherited from my husband. This gives me about 30,000 CFA a month. I use part of the money to invest in my fish business. I sell smoked fish in Limbe and Buea which adds about 15,000 CFA to enable me run a household of six dependents’ (R43, Female, 69, Buea).

In rural and urban areas alike, old people are important circuits in marketing of various products. A man selling herbs in a rural market once a week put his experience:

‘I go to the local market every week to sell herbs. I am known as Pa doctor because my herbs are very good in treating diseases like typhoid, filarial, malaria, sexually transmitted diseases like syphilis, gonorrhoea. I also treat menstrual pains for young women and backaches for old people. I have been doing this activity for 35 years and at home I am consulted because I do fortune telling. From these activities, am able to generate income that enables me to buy basic necessities. When I go to the market every week, I get basic commodities like salt, soap, kerosene, rice, palm oil and other foodstuffs that keeps my large family going’(R129, Male, 70, Nkambe).

Another respondent resident in an urban area situated his survival thus:

‘I am a Christian and I belong to the Blue army and Charismatic group of the Catholic Church. I survive by selling Christian literature including prayer books, rosaries and bangles. I go to strategic places in town to sell and I also spread the good news of the word of God by

preaching to young and old people. Sales vary from 500 CFA to 10,000 CFA on a daily basis' (R74, Male, 68, Bamenda).

Other businesses run by old people range from the sale of second hand dresses *okrika*; sale of firewood, beer parlour operators, kola nut traders and especially a local stimulant called bitter kola, rearing of snails (predominant activity in Mamfe locality), cocoa and coffee traders, palm wine tapping and marketing, retail of traditional herbs, fortune tellers (common amongst muslim elderly), cattle rearing and shepherding (notable activity with Fulani nomadic population), petty traders, food crop entrepreneurs (predominant female activity), livestock production and marketing (raising of pigs, rabbits; rearing of goats, poultry keeping and other allied activities like gardening and home grown vegetables), land rentals for farming, rental of sand and stone pits for digging of sand and crushing of rocks, to eucalyptus exploitation for wood, were some of the activities listed. Interestingly, those who had invested heavily in housing and education stated that they were slightly better-off. Another respondent battling in a rural area put her account thus:

'I have worked with the Cameroon Development Corporation (CDC) and my husband married me and came to the Coast in 1956. After delivering my first three children the white man for whom my husband was a cook urged him to allow me to go to an adult school. There after, adding to the two years I spent in Ashing-Kom. I backed the first School Leaving certificate and started working with the Whiteman's wife who was a midwife. The CDC then absorbed me based on my experience. I worked there up to the age of sixty five. In fact I became big mama there when the second white lady Dr.

Holcroft told the CDC that she thinks I was ripe enough to handle the midwifery of Ekona Banana Estate. I was there as head of the Estate for a long time and my life centres on delivering children. Presently, I operate a maternity home in my premises and I help in training midwives professionally who pay a token because as trainees they do most of the work. The birth rate in Ekona is high. I am making quite some money but my efforts are handicapped by lack of water, electricity supply. The roads are very bad which makes it difficult for patients from neighbouring villages to get to my clinic, the only health facility in the area as there is no government hospital'(R30, Female, 78, Buea).

Yet, another respondent indicated:

'I survive by selling firewood. I am known in the neighbourhood as Pa Firewood. I go to rural areas and buy the mature eucalyptus trees and I get people to do the sawing and transportation. When I get to the town, I pay some boys to do the splitting of the wood which are arranged into bundles of 100 and 200 CFA. Some days I can sell about 2000 CFA and good days I sell up to 5000 CFA. With this I am able to buy food and take care of the other needs for a family of five dependents. I am also a bee farmer and I harvest honey that adds to my income' (R83, Male, 69, Bamenda).

Still, another respondent put his survival thus:

'I survive by selling second hand blankets and bed sheets in a local market where I am renting a stall from the local council. I also do stitching of dresses and some of the blankets that are torn. The

blankets and sheets are graded in terms of the quality, and sizes. The very good blankets range from 5,000-8,000 CFA and for the bed sheets from 500-1500. The business is largely seasonal as I can sell more at the start of the wet season and later the sales drop. What is really killing my business is the taxes. I pay FEICOM council tax-5,500 for a quarter, land tax-12,500 CFA annually, global tax-9,000 CFA for first and third quarter. Annually, global tax comes up to 15,000 CFA. I also pay the ground rent tax for the council-1500 CFA. So, you see that the little profit I am able to make is eaten up by taxes' (R 91, Male, 68 years, Nkambe).

Development agencies rarely take on board the plight of old people. Surprisingly, an old man in the Mamfe area of the South West province revealed that an NGO working in the area is transforming the lives of old people through training in snail domestication:

'Relying on a piece of land inherited from my parents, I am a subsistence farmer involved in the cultivation of food crops like cocoyam, plantain; cassava, beans; maize which I sell in the local market. I make about 20,000 CFA a month from the sale of agricultural produce. But my meagre income received an additional boost with support from the NGO called the Centre for the Environment and Human Development (CEHDEV). We receive support in farming groups in the form of training on snail domestication, snail seedlings and financial support to start up individual snail farms. Today, I own my own farm and I generate more than 30,000 CFA a month from the marketing of snails I am

also a member of the Bachuo'ntai development association that helps farmers with farm equipment like hoes, machetes and seedlings' (R36, Male, 68, Mamfe).

The agricultural activities undertaken by old people depend on the ecological zones and the food and cash crops that grow well in the zones. In the south west province and specifically Mamfe and Kumba areas, cocoa, coffee and palm oil are common cash crops that are grown. An old man, 70 years, who hails from Mamfe indicated:

'I survive through my cocoa and coffee farms. During the last cocoa season, I harvested about 10 bags of cocoa which generated 360,000 CFA' (R41, Male, 70, Mamfe).

Another respondent revealed:

'I rented a hectare of palms that I planted palms and other food crops. The sale of oil palms and extraction of palm oil generates about 200,000 CFA a year while the food crops is mostly used for sustenance of the household' (R68, Female, 68, Bamenda).

Palm wine tapping is a major income generating activity for the old in rural areas.

This farmer in Bachuontai village of Mamfe puts his survival on palm wine tapping:

'I am 68 years old and previously, I was working on my elder brothers' cocoa farm. My brother promised to compensate me by purchasing a piece of land for me to engage in cocoa farming. Unfortunately, things turned sour as my brother's wife frustrated the plan by accusing me of attempts to seduce her. This caused serious friction with between my brother and I and I was forced to quit. I engaged in tapping palm wine which I carry on with subsistence agriculture. I buy palms from farmers at the cost of 600 CFA per

palm and I make about 3000 CFA from each palm that is tapped. I sell a minimum of 20 litres a day. In a month, I am able to get about 40,000 CFA. I make a daily saving of 500 CFA with a local njangi and I am into a weekly njangi of 2000 CFA. This helps me to look after a family of four children and one dependent' (R31, Male, 69, Mamfe).

A widow in the rural area who has been a farmer all through puts his survival thus:

'I live in Bafut and my family made up of seven dependents all depend on me for sustenance. I have four farms that I am paying a rental of 10,000 CFA every year to the landlord. However, after five years, I was permitted to cultivate without the rental. I planted food crops like maize, cassava, yams, beans and 'country cocoyams and plantain'. In one of the piece of farming plot, I planted mostly fruits like pineapple, pears, paw-paw, and banana. At least, every month, I am sure of having 20,000 CFA when I sell these food crops and fruits in both rural and urban markets' (R89, Female, 68, Bafut).

Another female farmer aged 68 years indicated:

'I own a poultry and piggery farm. My only worry is that the prices of animal feed are very expensive and transportation poses a big problem. During the wet season, it is almost impossible to get the feed to the village because of bad roads. At times owners of four wheeled vehicles who can manage the bad roads charge very exorbitant fares. I am also worried by vaccines for the chicks and African swine fever that attacks the pigs. Last two years, I lost fifteen pigs. I also harvest wild honey and I have planted many plum

(African plum) trees. These activities generate about 20,000-30,000 CFA every month. Last year, I started buying palm nuts to extract palm oil. I buy nuts for 50,000 CFA and when the oil is extracted, I am able to sell for about 75,000 CFA. I save in a farming *njangi*, 3000 CFA monthly, neighbours' *njangi*, 1000 CFA and monthly cultural *njangi* of 5000 CFA' (R 97, Female, 68, Bamenda).

An elderly farmer narrated his survival:

I have an enclosure behind the home where I rear goats and I keep poultry. Currently, I have about 20 goats and I feed them with grass that I get from nearby bushes. I do the feeding two times a day and during the dry season when farming activities are low, I let some of the goats to wander. When the goats are mature, I take them to the village market and at times to the goat market where others come to buy in bulk. The prices of the goats range from 6,000 to 12,000 CFA. For the poultry, they range from 1,500 to 3,000 CFA. The money enables me to buy other basic necessities like palm-oil, salt, rice, soap (R94, Male, 69, Nkambe).

In rural areas, farming is the predominant activity that old people rely on. However, the non-availability of essential services like roads, telephone, water, electricity, and particularly health centres, is a major stumbling block for old people living in rural areas. Most old people who are unwell have to undertake long and tiring journeys to access such facilities in urban areas. The costs are very prohibitive and coping in a different environment becomes very difficult. Most resort to herbs to treat common ailments and with complicated cases, they first show up at the traditional doctor.

When thing cannot be handled at that level, that is when they contemplate going to urban areas. Even in urban areas, trained doctors specialising in geriatrics are not available. In most cases, palliative treatment is provided. Old people suffering from diseases like high blood pressure, diabetes, hypertension, stroke, arthritis, eye defects, back ache, asthma find it difficult to get expert attention as there are no trained doctors specialising in diseases common to old people.

8.7 Kinship-based and other traditional forms of support

Kinship based and other traditional forms of support relating to care offered by the immediate, extended family and community are under severe strain. It is interesting to note the aspects of continuity and change. Though most old people attest to the hard fact that the system is eroding, still others hold that it remains the last option of providing social protection for the old especially in rural areas where community relations and bonding are quite strong. Undoubtedly, it is evident from the responses that the traditional system of social support is weakening. There is compelling evidence from the accounts of the old that point to the decline in traditional forms of social support. Most respondents admitted that there was a break down in family ties and the extended family is now being perceived by the elderly themselves as a burden. This position was echoed by one of the respondents in the following assertion:

‘We are now counting our pennies and holding our immediate children and families very close to our chest. We are running away from internal family squabbles fuelled by some unscrupulous relatives and extended family members’ (R13, Male, 69, Buea).

Another put it this way:

‘given the hard times and weakening of ties within the extended family, we are now forced to look inwards. I educated three of the children of my deceased brother but today they do not recognize what I did for them. My guiding principle is any man for himself, God for us all’ (R89, Male, Bamenda).

Another informant placed the problem at the doorstep of migration, urbanization and industrialization:

‘the change in the economic structures is destroying our African cultures and ways of doing things. Social mobility and especially out-migration is weakening the hitherto solid ties that existed within the extended family. The whole concept of the extended family is put to ridicule. Most persons who went to school before were trained by uncles and aunts but today you can barely count such cases. Though with the limited means, the demands are too many nowadays. The pension money I receive is not enough for me to look beyond my immediate family. During pay day, my blood pressure is on the rise because of accumulated debts, utility, other bills to settle and planning food money and other needs for the household. I cannot send a tin of palm oil to my mother in the village as I used to do in the past’ (R65, Male, 64, Bamenda).

Yet another respondent lamented:

‘Our traditional norms *mbom-allah* (country fashion) dictates that the old should be catered for and it is considered a taboo to neglect the old. Today, our children scarcely pass around to find out how we are doing because of the pressures of urbanization that has dragged many

out of the villages. Also, the high rate of unemployment is having devastating effects on the younger generation to provide care for their parents' (R68, Female, 69, Mankon).

Unequivocally, the high rate of unemployment is worsening the plight of the elderly.

This concern is also borne out of the statement of an elderly in Nkwen-Bamenda:

'you educate your children with the hope that they will look back on you and carry you through in your later life but this is not the case nowadays. Presently, we eat from the same pot and at times share the same dresses and shoes. It is now difficult to meet the demands of the extended family because we cannot even meet the demands of our immediate family' (R71, Female, 71, Bamenda).

This decline is surmised from some telling accounts:

'In the recent past, the concept of the extended family was based on providing security for the whole clan and everybody saw himself as a member of a community. Children were seen as belonging to the community and not a particular family. There was no child without a home because children belong to the community. The old were highly respected and it was abominable not to care for an old person. The Fon or Chief's palace was the key institution in providing social security for disabled, mentally ill persons and old people who could not afford a living. The doors of the palace were flung open to all; food and accommodation was provided at the palace. But today the situation is different. Poverty has crept in and the bonds that tied us together are loosening. Most people are now looking inwards because times are hard and things are changing. People do not carry food to

the palace to support the Fon's activities any longer, some of the very old and handicapped without any means of survival are abandoned. The extended family system is not working effectively any longer as everyone is struggling to feed themselves' (R41, Male, 68, Buea rural).

Another respondent saw the weakening in social networking:

'In the past, social and group activities were more pronounced as people came together to support each other in times of sorrow and joy without necessarily joining njangi groups. When some one dies, the whole village consoles with the bereaved to overcome their grief. They bring food and drinks. Even the old were properly taken care of by the community and did not rely strictly on the immediate family. Sometimes, they displace themselves to live with their sons/daughters in the city without any prior notification. Today, when old parents, aunts and other relations are visiting without any notification, they are questioned. It hurts the old person and engenders conflict (R81, Female, 71, Bamenda).

A widow stressed the worry with traditional forms of support:

'not long ago, widows were kept back in the family compound and were taken care of by the family successor. They had their farms and houses reserved for them upon the passing away of the husband. Their social status was protected and they were honoured and respected for being good wives. But today, widows are sent packing by family relations when the husband dies. Those who have well-to-do children count themselves lucky as they may be resettled. Those who do not

have influential children begin the difficult task of sorting out their survival. My case was a difficult one as the house that we had constructed was seized and even the raffia bushes where my husband used to tap palm wine was seized and sold off by my husband's relations. The harmony that existed in the past is no longer there' (R83, Female, 67, Bamenda).

Another respondent was sceptical of the trumpeted *njangis* as a form of social support for old persons:

'The bonds in *njangis* are not what use to obtain in the past. People now join *njangis* purely for economic reasons and for those in urban areas, *njangis* are perceived as an insurance, at least to guarantee transportation and burial when some one dies. Those who default and cannot repay loans and *njangi* money are sanctioned or expelled from the group thereby engendering conflict. There is no more social bonding based on family and community relations' (R95, Female, 71, Bamenda).

An interviewee attributed the break down of the traditional system of social security to urbanization and unemployment:

'Children and other relations are forced to move from rural to urban areas in search of jobs and greener pastures. Most children who migrate get lost in the wild of the city and very few look back on their families. It is only the serious children that look back. Girl children are marrying in distant places and this has further weakened family ties. We cannot rely on the traditional system because it is not working. Let me give you a disturbing example. I have an extended

family relation in Kumba whom I sponsored throughout because his father died when he was very young. When I was ill, I asked someone to phone him and tell him that I am very sick. His response was 'I am not the doctor'. In the distant past, no son would utter such a statement even if he was not in employment' (R18, Female, 68, Buea).

Other respondents have linked the decline of traditional forms of support for the old to some irresponsible children both within the nuclear and extended family. A widow narrated her dilemma:

'I have been sick in the past six years. I had no money to go to the hospital and resorted to herbs. When I did not feel better, I consulted a traditional doctor who still used some herbs. I managed to send word to my son who works in a neighbouring country and there was no response. With the assistance of a friend, I went to hospital in a neighbouring village where I was diagnosed with hepatitis and referred as an emergency to a reference hospital in Douala. My son was phoned and he said he had heard and would look into the matter. He also mentioned it is expensive for him to look after me in a reference hospital. I was hospitalised and could not get the prescribed medication on time. I was almost at the point of dying when a Good Samaritan came to my rescue. I later told my son that I do not want to see him. If I had died, he would cough out huge sums of money for

my coffin¹⁶ and entertainment and that would be it' (R31, Female, 73, Buea).

Another respondent attributed the decline to family squabbles:

'How can I count on the extended family when I am in court for the past twelve years with my brothers and relations? In fact, they are Satan carrying horns because they wanted me dead. They ejected me from my father's compound and as if that was not enough they chased me several times with a machete in the raffia bush that I inherited from our late father who appointed me as the family successor 'chop-chair'. My relations were not comfortable with this decision. We do not have any contact and most often, we only meet in court' (R93, Male, 71, Bamenda).

Other respondents felt differently and still had faith in the traditional system of support. They saw the input of the extended family as very crucial:

'the extended family is part of our African culture and the philosophy is to be your brother's and neighbour's keeper and to carry the cross of others. That's why the extended family comes to your support during good and bad times. Admittedly, it is on the decline because if there is only one eye in the family, that person is highly pressed. It is also difficult to get aunties, uncles, relatives together these days because people are struggling to make ends meet. But the extended family can still be relied upon. Presently, I am being assisted by the children of my cousin who are residing with me. We cannot run

¹⁶ Sjaak van der Geest (1997:552) in his study of old people in rural Ghana observes that respect and reciprocity for the elderly is based on the foundations they laid during their lifetime. The ultimate proof of respect and the decisive act of reciprocity is to organise a worthy funeral for someone upon his/her death.

faster than our shadows. It boils down to a situation where we inherited the culture of using the eyes of others to sleep with. We see this when someone has a death commemoration. Generations and generations of children and other relations show up' (R96, Female, 69, Bamenda).

8.8 Faith-based support for old people

The mainline churches are not indifferent to the plight of old people. Old people who constitute the lifeline of most churches are supported based on the support schemes offered to old people. From the interviews, it is evident that most old men and women, apart from being pious Christians are members of congregational groups in church, are church elders carrying forward the evangelisation drive. The bottom line is that the mainstream churches like Catholic, Baptist and Presbyterian and Islam provide some support to old people in the form of basic necessities, some token amount to assist with their sustenance and the observance of church days dedicated towards contributions for the handicapped, orphans, widows and widowers. Though such support is infrequent, in most cases, the basic needs of elderly Christians are taken on board. This is based on an initial assessment by a church group that visits regularly to ascertain the needs. In other cases, old people present their concerns directly to the church Pastor or Priest. Based a congregational assessment, basic commodities like pans, cutlery, bathing and washing detergents like soap are purchased and in some cases food items such as rice, vegetable oil, palm oil and other ingredients are purchased and distributed. Some of the churches operate *njangis* within the fellowship groups. Most old people I interviewed mentioned the elders' *njangi* which ranges from 500-2000 CFA every month.

Within the fellowship groups, visits to the sick and old are usually organised regularly and a token contribution offered. This is the case with the Catholic Women's Association (CWA), Catholic Men's Association (CMA), Christian Women's Fellowship (CWF) and Christian Men's Fellowship (CMF) of the Catholic and Presbyterian Church respectively.

A widow stated:

'religion and participation in church activities is spiritually fulfilling and psychologically stabilising as one prepares for the transition to the other world. You need to rely on God, renew your connection with him and in return; you enjoy spiritual support and solace' (R76, Female, 78, Buea).

Support with bereavement is a major preoccupation of church groups. One elderly informant who belongs to a choir group that is largely composed of old people recounts:

'I belong to the Catholic Men's Fellowship. We contribute when a member is in trouble. If a member dies, we take part at the wake keeping and we carry the coffin and we sing at the burial site. We contribute something extra ranging from 500 to 1000 CFA to assist the family. When a member loses any of the immediate family such as wife, father, son, daughter, we contribute 3000 CFA. For the extended family, we condole with the member and contribute 500 CFA towards the 'mimbo' (strictly palm wine entertainment) of members who show up' (R111, Male, 70, Mankon).

As part of the churches' approach to provide support to the handicapped and old, there are 'support for the sick and old plank contribution boxes where funds are contributed and the box is split and the contents disclosed on a designated Sunday service. Based on the needs of the sick and old, allocations are made in sealed envelopes and visits are paid to beneficiaries on behalf of the church. An old woman aged 75 years indicated she benefited once when she was hospitalised. When she unveiled her envelope, she got 1500 CFA. In rural areas, old people (pastors, church elders) are periodically supported with food and firewood by the churches. A widow revealed:

'with the hardship scheme within the church drawn from alms collected on a designated Sunday for widows, I have been assisted with some basic needs like palm oil, soap, rice and firewood for cooking and heating'(R74, Female, 66, Bamenda).

The elderly are in the frontlines of a moral regeneration drive. A widower who is influential in building a rural Catholic Church revealed:

'As an elder, I work for the Justice and Peace Department in the Catholic Church. We educate old people and men especially on the fact that bride price is a hindrance to social development as it makes marriage contract for boys and girls very expensive, cumbersome and frightening given the hard times. This message is important because many young girls are forced into prostitution and eventually contract sexually transmitted diseases and HIV/AIDS because of prohibitive marriage demands. We also educate other old people on mutual

living and sharing between those who are better-off and those who are lacking' (R113, Male, 71, Nkambe).

Support for old people varies within the mainstream churches. An old man in the Baptist Church stated:

'Old people who do not have a means of livelihood are assisted sometimes by the Baptist Church. This comes from church contributions on designated worship days. The idea is a proposition of the Deacons Board of the church and what is contributed on these specified days are shared to disadvantaged old people' (R62, Male, 68, Nkwen).

Along these lines, a female Baptist Christian indicated:

'In Kom, the Baptist church carves a box which is brought to church at varying periods through out the month. At the end of the month, the box is split and whatever has been contributed is put together and based on the amount, old and other needy people within the community are assisted' (R74, Female, 66, Bamenda).

In the Presbyterian Church, old people seek support within church groups like the Christian Women's Fellowship, Christian Men's Fellowship, and Hallelujah Choir that are predominantly comprised of old people. One of the respondents made mention of the Presbyterian Self Help Fund (PESH) where every worker with the Presbyterian Church can save and obtain loans from the fund. There is also the Social Assistance Fund (SAF) mainly for retired pastors. Pastors are expected to save compulsorily and when they retire, the total amount of savings is handed to them. From the interview with the Imam and other Muslims, there is no equivalent in Islam.

8.9 Elder abuse and forms of Disrespect

The elderly I interviewed were at a loss and could not comprehend the high level of disrespect from the younger generation. They were reports of severe abuses ending in scuffles, fights and continual abuses. Some respondents attributed this to the changing times and irresponsibility amongst the younger generation 'usually paying a deaf ear to advice from parents' occasioned by pressures of modern life, negative fall-outs of urbanization and westernization. In polygamous homes where the man is married to more than one wife, incidences of elder abuse are rife especially if available resources are not judiciously rationed amongst the wives. A polygamist put this concern:

'my son threatened to beat me on the grounds that I did not enrol him in a good school like his brother in the other household. I explained to him that the other young man is brilliant and has been performing well in school. He saw some element of favouritism and unfortunately his mother took his side. He bullies me when he comes to ask for money and at times when I say I don't have; it becomes a problem. He will shout at me and reign abuses. What is worrying to me is not only the disrespect but his bad tongue which is common with most young people today' (R82, Male, 71 Bamenda).

This incident brings to the spotlight some of the forms of disrespect old people face and the concept of 'disguised households', a prevalent feature of polygamous homes, where social security is fragile as each household is an autonomous unit and members tend look more inwards. Disguised households refer to each household in a polygamous home becoming an autonomous unit of interaction and the tendency is for members in each unit to look inwards. This is the case as one elderly put it:

'children tend to build fences mostly around their respective households. It is dangerous because to build unity in the family, wealth has to be shared; else you open the door to witchcraft and other dehumanizing practices especially if resources and benefits are not evenly distributed. This concern was raised by a widow from a polygamous home:

'Our husband with whom I have lived and invested with for 30 years got married to a younger woman just three years before he passed on and had a child with the younger lady. In dying, he willed 60% of the investments to the younger lady. That notwithstanding, the bank account details and other financial transactions which were in her keeping, enabled her to get the letter of administration for the management of the estate and later on signed out monies from our deceased husband's account, without my knowledge. When I was hinted of this, I took her to court but this is causing serious tension within the family and I see it as some form of disrespect and betrayal...' (R103, Female, 69, Awing, Bamenda).

Elder abuse may also take the form of neglect, refusal to provide basic needs, assistance with health care and other needs as indicated by respondents. A widow put her case thus:

'I feel very terrible because I have toiled all my life to educate my children with the hope that they will care for me when I am old but the reverse is true. I was diagnosed with cataract and close to two years now, I have not been able to do the operation because of lack of money. I wear torn clothes to church and at times I am told by other Christians that my dress is worn the other way round. I feel

humiliated because my eyesight is bad. I have spoken to my son several times and in the last exchange, he said what do I need good eyes for at 78 years. I considered this as a betrayal and serious abuse and disrespect' (R 23, Female, 78, Buea).

8.10 Redressing the Plight of the Elderly: Viewpoints and Suggestions from interviewees themselves

As the following makes clear, most of my informants believe that the state should be more instrumental in improving the welfare of old people. This sounds idealistic and moreover, it is not feasible within the Cameroonian context because of duplicated bureaucracy as explained in chapter four. Any meaningful formulation of policies and welfare schemes should recognise the pressing needs of old people in rural and urban areas. A good starting point in terms of policy formulation is acknowledging the contribution of old people to households, communities and the nation at large as revealed by interviewees. Some of the suggestions that came on board centred on job creation and employment opportunities for the youth so that they, in turn, can provide care for their old parents. Elderly resident in rural areas indicated that since most young people have deserted rural areas because of lack of jobs, it is incumbent on government to create job opportunities in rural areas that can tap the energies of the young and hold them back from the often perilous journeys to the city in search of greener pastures.

A major worry of elderly drawing pensions is the administrative hurdles and bureaucracy that awaits them as they go through the arduous task of processing and chasing pension files between offices. Most respondents hold that they already have a

database set up when they joined the public service and at best this can only be updated when they go on retirement. So, the calculations of pension entitlements have to be automatic and based on the data held by the public service. This will fight corruption and kick backs that have engrossed the Cameroon public service.

Another concern was the amount paid out to pensioners. It was deemed as small and worst still was paid quarterly and not monthly. Most respondents felt that if the payments were monthly, it will have a multiplier effect on the economy as pensioners will buy from non-pensioners thereby boosting the economy.

Given the decline of family, kinship based and traditional forms of support for the elderly, it is necessary for incentives to be offered to hired helpers who are playing an important role in support for old people. Hired helpers are taken as a trade off for schooling, some are paid a token for living rural to urban areas and in extreme cases, those that are paid do not receive the stipulated wages as spelt out in the labour code. This is true of most employment in Cameroon - if it followed the code, most would not happen because it would be too expensive. It is imperative for the state through its relevant ministerial departments to regulate the support that is provided to old people by hired helpers. Such regulation would look at issues of compensation and remuneration, education and living conditions.

Respondents operating in the informal sector were also concerned about taxes imposed on their businesses. Most were of the opinion that it will be gainful to grow the economy by instituting tax rebate for businesses run by elderly people since they served the state in their own time and paid taxes. It will be another way of securing jobs for the youth if the businesses run by elderly people were expanding.

Building the rural infrastructure emerged as a major recommendation on improving the plight of old people who eke a living on subsistence agriculture in rural areas, yet do not have farm to market roads for the evacuation of farm produce. Pipe borne water schemes would also relieve them and their care givers of the extra strain in fetching water. Empowerment of old people can take place if roads, water schemes and health centres exist in rural areas. Most old people are involved in income generating activities and the surest way of revitalising these activities is to create an enabling environment. If the old have more money in hand, this leads to greater security of old people and their families. Electricity should be extended to rural areas and payment of utility bills for water, electricity should be subsidized for old people.

Medical care directed to old people is underdeveloped in the Cameroon health system. Most respondents were of the opinion that government should make health care affordable for old people by subsidising their medication and other health costs. Worst still, many doctors are not specialised in diseases affecting old people and the tendency is to offer therapeutic and palliative care when they show up with serious health conditions.

Considering that the state cannot single-handedly provide support for old people, some credible NGOs working in the domain of social welfare should be encouraged to create homes for old people especially to cater for frail elderly who are placing enormous burdens on the family and extended family. In this connection, basic necessities should be provided for frail elderly on an annual basis. This support could take the form of a bag of rice, palm oil, soap, blankets. A respondent made mention of the Prime Minister's Bounty fund in the days of West Cameroon, which should be

revived. It was a welfare scheme and package that entailed the provision of basic necessities like oil, blankets, rice and other food stuffs to old people. Though such government schemes were seen as supplementary assistance, others held that social welfare benefits can be given occasionally at Christmas and during the celebration of the United Nations International Day of Older Persons, every October 1st. This could include food items which should be shared to old persons. This would 'warm their hearts' as they will be consoled and seen to be 'enjoying the fruits of their labour' given that they were great pillars in their time and are still making a contribution in nation building. Recognising the role played by senior citizens can also take the form of organizing yearly excursions so that they can know the country and villages better and this would be adding one more day to the lives of older persons as an interviewee put it.

Project creation for old persons is vital in growing the economy and tackling poverty. In this connection, interviewees mentioned assisting old people particularly in rural areas with the creation of pig farms, fishing ponds, poultry keeping. These activities are not very draining physically and it keeps them busy and fights off isolation and boredom. They can use the money got from these activities to buy basic necessities like tobacco, palm oil, soap, salt, rice and other pressing needs.

In line with project creation, old persons stated that they should be encouraged through institutional support to set up socio-economic associations and cooperative societies where they can pool their produce together and find markets. Through such associations, they can quickly benefit from any handouts from government and other international organisations. An elderly informant said: 'the philosophy is to rally old persons through incentives with the potential of rekindling networking and mutual

support amongst senior citizens. It can work out simply by granting a goat, rabbit, chick to old people and those who multiply their lot are given a prize’.

8.11 Dilemma of Widows and Widowers

This section examines elderly women’s dispossession and greater vulnerability compared to their male counterparts. It is argued that women generally have lower incomes than men, and traditional and other cultural barriers discriminate against women, hampering their efforts to stave off poverty. Female headed households are more prone to poverty than male headed households. Widowed and childless women are particularly vulnerable because of their lack of assets. Highly vulnerable groups like widows, widowers and childless women were hard hit in terms of livelihoods. As a widow put it:

‘since my husband died, life has not been the same. My husband’s relations accused me of involvement in the death of my husband. His relations stepped in and seized whatever property and possessions he left behind. I could not fight back as I had no documents - land title, marriage certificate and will. The land we had acquired in the village and raffia bushes where he did his palm wine tapping was also seized. The children and I were forced to leave the village’ (R93 Female, 71, Mankon-Bamenda).

This concern appeared to be one of the great pointers to the weakening of kinship-based and traditional forms of support as the extended family is increasingly fractured, fragmented and perceived to be burdensome.

Widowers and older male with limited investments function under distressing conditions. For many women in Africa, losing a husband doesn't just mean the loss of a loved one, a father and a breadwinner. It can be very devastating for the widow as the loss can mean the loss of key possessions like cattle, chickens and other accrued property. The repercussions can be distressing, sending the wife and children into a spiral of hardship and poverty. This concern came out of the accounts of widows who participated in the interview. The repercussions of women's disinheritance constitute a harrowing experience for most widows. The situation is even worse for childless women who in most cases suffer from stigmatisation and in extreme cases the threat of being ostracised. A widow characterised her ordeal:

'Life has been very difficult for me since my husband died seven years back. I can liken my situation to a house with holes in the roof as I had to take over the management of the children with limited resources. The good thing is that my deceased husband was very hard working and had built a house in the city, bought two pieces of land in the village. I was lucky because I had a marriage certificate which enabled me to go through customary law procedures and eventually securing the letter of administration from the court as overseer. It is thanks to these investments that we are surviving. With the rents from the house in the city, sales from foodstuff cultivated on farming plots with assistance from my eldest children, we are surviving. I am also a buyam-sellam. I sell food items that I buy from local markets and take to town market. The money that comes in is used for feeding, payment of school fees, clothing, medical and other bills. My philosophy is that since the cock and head is gone, I am the mother

hen and it is my sole responsibility now to look after the chicks, providing them with food, shelter and shielding them from any trouble' (R99, Female, 68, Bafut, Bamenda).

Most widows I interviewed are involved in food crop cultivation, allied agricultural activities which involve the keeping of poultry, pigs, goats and rabbits and by extension; they carry on with small-scale trading for survival. These activities are carried out close to their area of residence and in rural and urban markets. Those who are physically not able usually hire labour to transport the produce to and from their business sites. An elderly widow in Bambili, put her survival thus:

'I am 70 years old and my husband died 10 years back. Since then, I am married to my farms on an increasing scale. I go to the farm in the morning during the peak farming season and I sell in the afternoon. Most villagers know my corner in the village as I bring in fresh vegetables from the farm. A bag of huckleberry vegetables fetches me about 2000 CFA. I also sell other vegetables like tomatoes, cabbage, pepper and dry fish. I am doing this activity to keep me busy and to avoid boredom as I live with my son who is married and the wife provides food and my other needs' (R117, Female, 70, Bambili).

Another said:

'I was evicted from the farmlands that my husband and I were cultivating on. His relations claimed that the farmland had been given to him for temporary cultivation. Given that it was our only means of survival, life became very difficult for me and the children. I was

forced to explain my ordeal to a *njangi* group. They lend me some money which I used in starting off some small food business. The restaurant I am operating is our source of livelihood and I have to be there from morning till evening selling assorted food. This business keeps the family of six going as I settle school fees, feed the household and take care of other needs. It is difficult but at least that the children can have something to eat' (R87, Female, 68, Bamenda).

Still another said:

'I am a vegetable farmer and I also buy and sell foodstuffs in local markets. Where I do the farming is far-off and I have to work on several farming plots and I pay annual rental of 3,000 CFA for each and food crops during the harvesting season. Since the farmlands are far-off, I trek for a long time and when I get back in the evening I have backaches and joint pains. If I had a large piece of farm land, it would have been better. I am not sure if the selling is profitable as I am more concerned with giving the children something to eat' (R101, Female, 70, Bafut).

Widowers are slightly better-off in terms of access to land and other valuable assets, the influence of patriarchy and traditional norms often work in their favour as most are able to re-marry, a short while after losing their spouse. In spite of these 'privileges', some widowers are highly vulnerable. A widower declared:

'The belief is that men are not vulnerable but this is a false belief because men die earlier than women. Women do not have much burden because they live on inherited property and possessions of their husbands. In the past, the next of kin used to inherit property but

nowadays women can inherit property and other possessions, vital for securing livelihoods. In my compound, all my uncles have died leaving behind their wives and children. In Africa, men take care of women. If both were to survive the later years of old age, women are more of a burden because they still have to be looked after by the men (R 111, Male, 70, Nkambe).

Still another widower stated:

‘Society falsely believes that all men can re-marry when the wife is death. My case is different as I have not been able to re-marry and I have to fend for myself. I worked with the National Produce Marketing Board for 45 years and my entitlements have not been paid in full. Since my wife died in 1991, I have been managing by myself on a pension of 40,000 CFA. I fetch water and do the cooking. You can see that I am just coming from the food market where I bought some food stuffs and I am on my way to the village. I have four children in secondary school and I have to pay school fees, pay their rents, buy uniforms and textbooks and pay hospital bills. The grand children who are living with me are still infants so they can offer very little assistance. I have no additional means to take on another wife’ (R 122, Male, 67, Bamenda).

Another widower said:

‘I am most unfortunate. I educated my children and some of the children of my brothers. Since my wife died, life has been hell. She was everything to me, providing the food and looking after the family. My life is completely shattered as even the children I thought would

support me are nowhere to be found. In fact, when I think of what I went through to give them education, it increases my malaise. I am currently suffering from high blood pressure because of all this problems. I have no one that I can shout to for help. Given my health condition, I can no longer work on the farm. Without some support from the village development association, I think my life would have been cut short' (R84, Male, 71, Nkwen).

Childless women bear a heavier brunt. A childless woman from the Wimbum ethnic group, North West Province testified that she was accused of being a witch, on two occasions when two young men died very close to her abode. She was at greater risk of stigmatization, blame and transferred aggression when things go wrong in the community. Her account goes thus:

'on a fateful day in May 1999, a young man who died in the Coast (South West Province, working on the plantations) were brought to the village for burial. The corpse was left at the entrance to my hut for a few hours. I gathered some courage to attend the burial to show concern as a neighbour. I was almost killed by the brother and family of the deceased who accused me of having 'eaten' their brother through my witchcraft practices. I was shocked and embarrassed when later, my hut was set ablaze at night and I was threatened with banishment from the village. I was summoned to the Fon's palace for certain traditional rituals to prove if I was innocent or the perpetrator. Luckily, after the rituals, I was cleared but my hut was gone and I had no where to turn to. In spite of my being declared innocent, I was threatened to leave the village by the family in question. I eventually

left as I became the talk of the village and I feared for my life...'

(R127, Female, 76, Nkambe).

Data from emergent themes point to the shifts in intergenerational support for the elderly. As a result of crippling unemployment, endemic poverty, out-migration, the elderly instead, are providing support for the younger generation through a gamut of entrepreneurial and other informal sector activities. In return, part of their well-being regarding physical care, food provisioning, water, clothing, medication, firewood and farm work is being supplemented by spousal support, children, grand children and hired helpers and some extended family members. An insignificant number of elderly survive on remittances. Equally, suitable housing remains a major challenge for the elderly as most do not own houses. Those without houses particularly women and widows suffer extreme deprivation as part of the returns from informal sector activities are gobbled up by rents.

Widows, widowers and childless women are finding difficult to cope because of diminished access to available forms of support depending on individual circumstances. Their situation is worsened by anachronistic traditions that debar women from owning land and other assets in some areas. The accounts point to age-old traditions like widowhood and wife inheritance which continue to affect the livelihood of widows, though such traditions can be an insurance which ensures that the widow is not thrown off the land and other conjugal rites enforced through traditional arrangements. Widows and childless women, most vulnerable look up to faith based groups and *njangis* for some form of support. This support is tailored to meet some basic needs in the short term but long term needs relating to ill health, other forms of material deprivation remain unaddressed. In sum, most elderly are

largely without access to pensions. They remain trapped and are battling to eke a living in the informal sector. The returns are ploughed back into *njangis* and other networks as a form of social and cultural capital.

Chapter Nine: Filling the gaps: Building social capital and Semi-Formal protection Schemes

9.0 Introduction

This study also sought to find out the other forms of social protection that people are clinging to in the face of limited coverage in the formal sector, which in most cases offers security only to former civil servants. The vast majority of the population, especially old persons without coverage and operating in the informal sector, are totally cut-off from social protection provided by the state apparatus. The overlap between the formal and informal mechanisms of providing alternative forms of social security has been coined in the present study as the semi-formal. It is argued that at the interface of the formal and informal are new mechanisms of social support, forms of reciprocity, and mutual support that are being fashioned. The aspects of continuity and change inherent in these organizations are detailed as old people straddle between the formal and informal mechanisms of social protection. The choice of organizations used in the study are determined by their activity profile, degree of solidarity, vitality in building social capital and entrenching trust and accountability. *Njangis*, credit unions represent a form of saving against 'rainy times' by old and young people, though they still do not reach the poorest that have no money at all. Through the rotating credit schemes, members can plough back their savings and credit obtained into income generating activities of some kind. About 90% of old people I interviewed are members of one or more *njangis* and about 60% were account holders with local credit unions. The teaching corps stands out as the major employer of English speaking Cameroonians in the public service, so it is interesting to find out how old people who are either currently in service or have worked as teachers are coping with retirement.

These forms of reciprocity point to the roll back of the state in social security coverage. Even those working in the public service are not sure of getting their entitlements on time when they retire. It is not uncommon to find civil servants bonding together to provide some form of insurance and reassurance to members of a particular professional corps. The burgeoning of mutual societies and cooperatives within government institutions and public corporations is a pointer to the inadequacy of social protection. In this connection, nine organizations drawn from mutual societies, faith-based organisations, *njangi* groups and village-based organizations listed below and operating outside the state arena were studied: Buea Police Savings and Loans Cooperative Credit Union Ltd; Police Wives' Social Group; Bamenda, Mbororo Cultural and Development Association (MBOSCUDA); Christian Women's Fellowship; Musang Congregation; Bamenda (Women's Church group); Cameroon Teachers Trade Union and The Provincial Delegation of Secondary Education Staff Socials; Wimbun Cultural and Development Organization; Wimbun Women's and Wimbun Men's Njangi. Interestingly, the associations cut across all walks of life and are made up of other organizations in civil society, especially cultural and development associations that tend to carry with them the professional life; identity; culture; tradition and religious inclination of members.

Table 9: Summary of Semi-formal Welfare activities, gender composition, membership, social protection and other welfare schemes provided

Name of Organization	Year of creation	Organisational Type	Gender composition	Current Membership	Social protection Schemes	Other Welfare Schemes/activities
1. Buea Police Savings and Loans Cooperative Credit Union Ltd	1967	Savings and loans cooperative society	Male and Female	1648	Savings, insurance policy based on nominal value of shares, solidarity fund, credit facilities and micro finance.	Deposit and current accounts, salary transfers, daily collection service.

2. Police Wives' Social Group Bamenda	1996	Mutual society and Njangi	Female	46	Trouble fund for hospitalization, deaths and bereavement. solidarity fund for marriages, births and send-offs/ promotion	Kitchen Njangi. ¹⁷ Weekly and monthly rotational savings. Talks/lectures especially on spousal support
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¹⁷ Njangi specifically meant to assist members with kitchen appliances like spoons, plates, cooking pots, eating dishes, food coolers, glasses, cups and other equipment like gas cookers, fridges. The money is either given to the member to purchase one or some of the listed items or the item is bought by the group and presented to the member.

<p>3.Mbororo Cultural and Development Association (MBOSCUDA)</p>	<p>1992</p>	<p>Cultural and ethnically focused association</p>	<p>Male and Fe-male</p>	<p>7,500 in North west Province and 30,000 nationwide</p>	<p>Livestock, cattle rearing, literacy programmes micro credit.</p>	<p>Fight against marginalisation of Mbororo-mostly nomadic herdsmen. Njangi within certain groups.</p>
<p>4.Christian Women's Fellowship Musang Congregation</p>	<p>1980s</p>	<p>Presbyterian Church group</p>	<p>Female</p>	<p>Over 600</p>	<p>Trouble fund for deaths and bereavement, sinking fund for births, marriages and hospitalization.</p>	<p>Educational talks on various subjects. Prayer sessions for those unwell. Husband's day celebration and presentation of gifts.</p>

5. Cameroon Teachers Trade Union	1996	Trade Union, mutual society and cooperative.	Male and female	Over 6000 nation wide and 2000 in Bamend a.	Annual dues, statutory contributions and donations towards burial and funeral rites.	HIV/AIDS and other health related talks, saving schemes for rainy days, cultural and sporting activities to mark Teachers' day.

<p>6.The Provincial Delegation of Secondary Education staff Socials</p>	<p>2005</p>	<p>Mutual society</p>	<p>Male and Female</p>	<p>106</p>	<p>Contribution towards death of a member and first degree relation, Hospitalisation, weddings, send off of members going on transfer or retirement, births.</p>	<p>Operation of a credit union/bank account, staff party.</p>
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<p>7. Wimbun Cultural and Development Organization, Bamenda.</p>	<p>1970s</p>	<p>Village and kinship based</p>	<p>Male and Female</p>	<p>Over 2000</p>	<p>Njangi for individual savings. Trouble fund for ill health, deaths, transportation of corpse. Solidarity fund to cater for financial hardship.</p>	<p>Insurance scheme within some sub groups where spouses contribute towards ill health and funeral rites. Sense of cultural identity through staging of dances and traditional dishes.</p>
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<p>7. Wimbun Cultural and Development Organization, Bamenda.</p>	<p>1970s</p>	<p>Village and kinship based</p>	<p>Male and Female</p>	<p>Over 2000</p>	<p>Njangi for individual savings. Trouble fund for ill health, deaths, transportation of corpse. Solidarity fund to cater for financial hardship.</p>	<p>Insurance scheme within some sub groups where spouses contribute towards ill health and funeral rites. Sense of cultural identity through staging of dances and traditional dishes.</p>
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8. Wimum Women's Njangi Bamenda	1975	Rotating credit and savings cultural group	Female	Over 600	Weekly and monthly savings, lending to members at minimal interest rates, contributions to cover deaths and bereavement. Kitchen Njangi, trouble fund for ill health. Sinking fund for marriages, births.	Palm-oil scheme, group farming, lectures and talks. Annual cultural jamboree with husbands and children. Participation in national and international fête like women's day.
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9.Wimbum Men's Njangi Bamenda	1990s	Individual savings, funds for village development association.	Male	20	Savings, trouble fund for deaths and bereavement.	Socialization forum. Follow-up of village development projects.
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Compiled from authors' fieldwork (2006)

9.1 Mutual Societies and Social protection

Based on the table just given, the case of the Buea Police Savings and Loans Cooperative credit union Ltd (BUPCCCUL) is examined. BUPCCCUL is a micro finance establishment which came into existence in 1967. The roots of its creation point to the desire to provide social protection for members. The current manager holds that the history of the cooperative is traceable to discussions about the formation of a mutual society for the police corps launched by late Commissioner of Police - Ntune Michael. He called on his colleagues to pool their meagre resources together in order to improve the welfare of colleagues. Most police officers were unable to provide the basic needs of family members and other dependents. His plea did not fall on deaf ears given the assurance that the cooperative would solve some, if not all the financial needs of the police officers and help policemen break the spiral of accumulated debts, thereby restoring the dented image of the corps in the eyes of the

public at the time. Some police officers showed interest and commenced monthly meetings at the headquarters of the West Cameroon Police Force in Buea. The Union's office remained at the Police Headquarters until 1983, then it was moved to the Mobile Intervention Unit, commonly referred to as the Police Mobile Wing. Presently, the offices of the union are housed in its new gigantic structure at Soppo, opposite Chief's Palace in Buea.

Things moved on pretty fast and the police officer in charge of finance at the time, made direct deductions from the salaries of the police force paid on a monthly basis at the Treasury Department, as agreed by the registered members. The deducted sums were put into the union's coffers and the balance of their salaries paid to them. This initial step set the ball rolling and in the first year, membership rose to 30. Savings generated in the course of the year stood at 2,500,000 CFA and loans stood at 1,235,000 CFA. At the time, the procedure of shares was not in place in Cameroon which represented a novelty in the functioning of the society.

From a modest membership of 30 in 1967, it has grown and currently stands at over 1600. According to the Manager, old people constitute about 30% of registered members. From inception, membership was strictly open to police officers but the cooperative was opened to members of the public in 1975. In 1971 the certificate of registration of the cooperative was handed over to the Board of Directors by the then Director of Cooperatives and in 1995, the union was re-registered following the new laws governing cooperative societies in Cameroon. Given the need to expand the cooperative, the annual General Assembly convened opted to recruit more members. This strategy led to a steady growth in membership as seen in the table 9 below.

Table 9.1: Annual Reports, Archives and Profile of BUPCCUL 2006

Date	1998	1999	2000	2001	2002
Membership	344	348	451	679	780
Loans	78,788,233	120,327,500	157,333,000	223,409,000	211,842,000
Share/savings	117,567,764	130,907,878	175,585,550	211,168,949	253,9991,078
Delinquency rate	29%	29%	34%	36%	23%

Source: (Author's Fieldwork 2006).

On the question of the sort of collaboration with the state, BUPCCUL subscribes to the Banking Commission for Central Africa (COBAC) operational guidelines on micro-financial enterprises in the Central African region. Based on the COBAC law of appropriation, certain reserves are kept to protect members' savings in case of liquidation. Given that the cooperative society is a member based organization, the solidarity fund was introduced by COBAC which stipulates that 20% be set aside annually. Such funds are converted and shared to members in the form of interest according to the strength of their shares. BUPCCUL also adheres to the regulatory framework as prescribed by the mother organization - the Cameroon Cooperative Credit Union League Ltd (CAMCCUL). This organization regulates and controls the activities of the other cooperative unions. Given the micro-financial framework of the

union that is aimed at alleviating poverty, the Cameroon fiscal policy does not impose taxes.

Social protection for union members is based on the solidarity fund. In other words, it is members' accumulated savings in the form of reserves which is ploughed back and shared to members. The manager and other executive members I interviewed indicate that these savings are meant to guard against 'rainy times'. These reserves are categorised as general reserve, compulsory reserve and education reserve. Other safety nets for members are provided through credit facilities such as the consumption credit, the building loan and education loan which all attract very minimal interest rates. If a member is bereaved, he/she applies for consumption credit. Such decisions are taken quickly and without bureaucracy to permit applicants meet up with commitments immediately. Members may also obtain such credit for funeral arrangements and health reasons. The second component is the productive credit for productive investment such as building a house, purchasing a plot or piece of land for agricultural production. The third component is the education credit geared towards schooling projects such as payment of tuition fees, buying of essential textbooks and school uniforms for children and grand children of members.

Members constitute the apex of decision making within the Union with the same voting rights as board members given that their shares are standard. Annually, members meet in a general assembly where reports are presented and decisions taken based on the votes of members. The second decision making organ is the Board of Directors elected by the General Assembly and the third organ is the supervisory committee. The committee reports directly to the general assembly, supervises the

manager and Board of Directors. The fourth organ is the women's committee with members elected directly by the General Assembly. Other committees are credit committee, education committee and youth committee. The fifth organ is the office of the manager who is answerable to the Board of Directors and office staffs are answerable to the Manager.

Opening a savings account with the union is contingent on the number of shares bought. The minimum is 15,000 CFA for shares, 3,000 CFA for registration, and 10,000 CFA for building levy. Each share has a nominal value of 1,000 CFA so a member starts with 15 shares. When registration is done with, a member can start saving according to his financial potential. However, if a member is unable to save anything for two years, the account is downgraded from active category to a dormant one. As intimated by the manager, the savings account is structured to help members save whatever they can afford. Civil servants who receive their salary through the Union are encouraged to get into a standing order facility involving direct deductions from their monthly salary. Such direct deductions of 2,000 CFA are paid directly into the savings account. Those who are not civil servants, especially informal sector workers use the field agents of the union who operate under the daily collection service. The service entails dropping in at the business premises of members on a daily basis to get whatever they want to save. Some of old people I interviewed found the drop-in service very useful in helping them to save whatever they had raised during the day from their small businesses. This approach is beneficial most especially to elderly market traders who cannot abandon their businesses in order to make the payments.

The savings of the member is directly related to the insurance policy of the union. As explained by management, when a member dies, the saving of the concerned is

multiplied by two and given to the next of kin or identified beneficiary. If any loans were incurred, the insurance policy pays off the loan on the some laid down conditions: Insurance cover on the saving should be less than or equal to 1 million CFA; insurance cover on the loan is not more than 2.5 million CFA and cover also depends on age. Quite apart from social protection, the union undertakes other activities. The products and services include: deposit and current accounts, money transfers and express credit.

Cases relating to member's default and recalcitrance are handled by the credit committee. All loans that are granted by the Board and Manager are ratified by the credit committee. In case of loan delinquency, first and second reminder letters are sent out by the credit officer. Subsequently, a member is visited and induced to pay by the credit committee. Given that loans are guaranteed by salaries, collateral security and a standing order, in extreme cases, defaulters are taken to court. Through the intervention of the Union's lawyer and following on from court proceedings, the collateral may be exchanged for cash. Since all unions are affiliated to Cameroon Cooperative Credit Union League (CAMCCUL), recovery at times may warrant the involvement of the network recovery agent from CAMCCUL. If they do not succeed in recovering the money, the matter is referred to the company lawyer for court action. Considering that the union is underpinned by the welfare of members, all reasonable avenues are exhausted and only when the results are not positive, that the defaulter is dragged to court.

Members can opt in and opt out at any time depending on their financial situation. There are reported cases where members have opted out because of inability to

continue with contributions as a result of inadequate means, drop in returns of business and heavier family burdens. Asked if there were members who terminated their membership on the grounds of inept management and lack of accountability, the manger and other executive members intimated that the transparent procedures put in place and the structure of the union permits members to be abreast with what is going on. Annual reports and committee reports are presented during the General Assembly meetings which permit members to keep track of union activities and state of finances. However, management decried the fact that most members are not informed of financial procedures and in most cases, would concentrate on doing the calculations based on the entries in their savings booklet. The lack of education and awareness of union products, services and functioning leads to either low or poor exploitation of available policies. Other problems encountered relates to Board and management conflicts. Most Board members are not versed with accounting and bank procedures. Their low financial expertise leads to unwise decisions and poor judgement of especially loan applications submitted by members. Also, the high delinquency rate leads to lengthy litigations, hampering recovery efforts and results in an atmosphere of distrust and acrimony amongst union members.

9.2 Police Wives Social Group-GMI/G Bamenda

Another case is that of the Police Wives Social Group, whose agenda centres around cooperation and mutual support. Membership is opened to women whose spouses are either serving with or have served with the police corps and who sign up by paying the registration fee of 200 CFA. The group holds the conviction that when people come together for a purpose, interact and share mutual worries and concerns, the bonds are stronger. The President of the Association underscored the essence of

mutual interaction which in itself was extra motivation for members to carry on. The overriding goal is to foster social interaction and build the blocks of unity and sense of family. This guiding principle is captured in the preamble of the association's constitution: 'Considering that once people come together for a purpose, interaction is bound to exist, considering that a get together of the Police wives should motivate mutual interaction; considering that social interaction makes them feel and behave as members of one family, we hereby undertake to show solidarity to one another'.

Solidarity and progress are the cardinal motivating force of the group and this is echoed in its article four which states that 'the group shall aim at fostering the spirit of solidarity and cooperation amongst the police wives with the aim of providing moral, material and financial assistance as deemed necessary'. Article four underpins the resolve of members to pool resources together for common interest, echoing the concept of social capital and reliance on mutual support and reciprocity. Drawing from the overall goal of the group puts into context the role of these organizations in providing the much needed social protection for members. Importantly, those women whose spouses are deceased seek for solace within the group. About 5% of its current membership of 46 is made up of widows. In 2006 3 (or 2) of its members were widowed.

Activities within the group commenced in 1996 but the constitution sanctioning its operation came in to force on 18th of December 1998. As stated in article 9 of the constitution, the group's general meeting holds every Friday at 3pm at the Mobile Police Bamenda canteen. Maintaining discipline and sanctioning members who contravene the rules and regulations of the group is embedded in the constitution. If a

member does not turn up at the wake keeping without informing and obtaining permission from the executive, a fine of 1,500 CFA is deducted directly from the members' savings. Failure to attend other occasions after being duly informed will attract a fine of 250 CFA and members who do not appear in the group regalia on such occasions pay a fine of 500 CFA. Other unruly behaviour that may attract fines include: bickering between members in and out of group circles, those who do not honour their day of lectures and talks; failure to host a meeting without justifiable reasons and uncontrolled noise making at meetings.

In line with the group's drive for collective social security as mentioned in its article 4, five key aspects are taken on board which include: hospitalization, delivery (born house), marriage (son or daughter), death of members, husband, child, parents/in-laws and send off/promotion. To improve on the livelihoods of members, the group also runs the kitchen *njangi* and three types of *njangi* on a weekly and monthly basis. In order to provide additional support to their spouses in active service, members take turns to give talks on the do's and don'ts of helping their spouses to become selfless professionals and to advance in their career. Probably, such concern by the women for their spouses is germane given the dented image of the police in the eyes of the Cameroonian public.

In the event where a member/spouse is hospitalised, the family is assisted with 2,000 CFA drawn from the group's sinking fund. A collective visit to the hospital is undertaken by members. As stated in the constitution, such assistance would not exceed more than once a year to any family. One wonders how much the contributed funds can be of help to the patient and what happens to a patient who has a long stay

in hospital, as the amount is low. Essentially, the driving motive behind the contribution and the visits is to extend the hand of solidarity and mutual support.

The death of members is taken seriously by the group. When a member dies, 2,000 CFA is contributed. It is compulsory for all members to participate at the vigil (wake) and in their group apparel. Those who do not turn up are fined 1,500 CFA, deducted directly from their savings. However, nursing mothers up to six months after birth and pregnant women are excused. Given the concerns surrounding the death of members and close relations, spouses and other close kin are covered within the bereavement support scheme. In this connection, when a spouse dies, members contribute 2,000 CFA and three members are delegated to accompany the corpse in a police lorry. To cater for any unforeseen problems, a contingency sum of 6,000 CFA is set aside as miscellaneous funds. This is directed at providing food and drinks for members in case of any shortages at the funeral. The children of members and their immediate family are also covered by the bereavement scheme. When a child of a member aged 1-2 years dies, members contribute 500 CFA and if the child is two years and above, they contribute 1,000 CFA. This assistance is directed at preparing the casket and the funds are handed to the family. Usually, the contribution of 1,000 CFA translates into 46,000 CFA; 6,000 CFA is deducted and kept aside to cater for the needs of the delegation. About 40,000 CFA is passed on to the family to assist either with the preparation of the casket or other funeral rites.

Building up financial resources is very crucial in securing the livelihoods of members and their families. As the president stated, wealth creation and economic regeneration can only be successful when members are encouraged to save the little resources they

have access to as a safeguard against rainy times. That is the first and surest way of enabling members to break the vicious cycle of poverty. Therefore, to match words with concrete action, the group helps to secure livelihoods through its weekly and two monthly *njangis*. As indicated by the President, the *njangis* are categorised as follows: 10,000 CFA every month and for this category, there are 12-13 members and the amount contributed adds up to about 130,000 CFA. From the contributed sum, 100,000 CFA is given to the beneficiary, 30,000 CFA is saved for four months which amounts to 120,000 CFA. This is given out to another member in order to shorten the period of rotation. In the second category is 2500 CFA every month. The amount raised is split between two members. The third category of 1000 CFA is the most popular given that it is mandatory for all members. The total contributed which sums up to 46,000 CFA is shared amongst two members on a weekly basis. Quite apart from the three types listed above, there is also the *kitchen njangi*. This entails the contribution of 200 CFA at the Friday meeting. The amount gathered sums up to about 5000 CFA. Two members are then chosen from the group to buy assorted kitchen utensils like dishes, food coolers, plates, drinking glasses. The items bought are then 'blessed' by the group and presented to individual members on a rotating basis.

In addition, talks on selected topics are on the agenda of the group. Members are briefed on law in the police camp, hygiene and sanitation, support to spouses by washing, pressing dresses and polishing shoes to enable their spouses remain at cutting edge in their jobs. Other issues taken on board include matrimonial harmony, tolerance, and anger management. The very old members counsel their young

counterparts on what is expected of them to keep the family stable thereby enabling their husbands to progress in their career.

In a nutshell, entrenching solidarity and building social capital are crucial to efforts in uplifting the welfare of members and other mechanisms to push further the fight to alleviate poverty.

9.3 *Njangis* and semi-formal coverage: Case of Wimbun Women's and Men's *Njangi*

Njangis have a long history in the Cameroon grasslands and are increasingly re-invented by members to suit the changing times and landscape marked by endemic poverty and limited social protection. They can be markers of identity and carry with them a cultural, ethnic and traditional symbolism especially in urban areas where members congregate to undertake different activities. In the urban milieu, the concern is always to identify and interact with kith and kin in order to pool scarce resources together for the interest of the group. The Wimbun women's and men's *njangis* constitute a veritable force in cultural identity and the building of social capital. It is on record as one of the largest ethnic group *njangi* in Bamenda - the provincial capital of the North West Province. As one respondent put it:

‘As we are far away from home, we strive to be our brother and sisters’ keeper and it is only under such a platform that we can meet and show concern for one another during good and bad times’.

The researcher attended the group meeting that holds every Sunday and held focus group discussion with some members on 14th of May 2006 at the meeting hall in Bamenda.

During the group meeting, questions were directed at the President, executive members and other group members. The President disclosed:

‘we come together for unity and development. This coming together (*bongabi*) fosters unity and development and enables us to undertake developmental projects here and at home. Most of us have been able to build houses in town and the village, are able to pay our hospital bills and other utilities, pay school fees for children; we are able to eat in our houses because of this meeting. All of us are proud because the *njangi* is like an umbrella that covers every member in the house except the problem is not brought to our attention. At the beginning of every meeting, we offer prayers and in the course of the meeting we sing some of our traditional songs. We do not only unite to carry out developmental projects but we also unite to socialize. This enables us to know ourselves better. We also unite to know our culture because children delivered out of home are different from those delivered at home. We teach our children the Wimbun language. As part of cultural promotion, we drink our *shah* (locally brewed beer from maize) and eat kola nuts (see plate 7 in appendix). From Bamenda to Yaoundé, a Wimbun woman is known because of our *shah* and we encourage our women to produce good quality *shah* which is our identity. We also maintain peace in our meetings and wherever we reside. The *njangi* acts as a shelter, we also share in times of sorrow. When a member is bereaved, it is the whole group that is bereaved. Money is raised instantly to ease the transportation

of the corpse to the village and a delegation sent for the funeral as well’.

The perspective of the Wimbum men’s *njangi* differs slightly from that expounded by the women. While the relevance of unity, development, sense of inclusion are largely the same guiding goals, the men see themselves as the ideological foundation and think tank especially on development projects as indicated by the President of the men’s *njangi* that I interviewed on the 29th of July in Nkambe. He stated further that while the women concentrate on the economic aspects, the fundamental concern of the men is to encourage group formation and solidarity by concentrating on the thinking on how development projects would be executed. He went further:

‘while our overriding goal is to meet and socialise, our group of 20 members has as task to foster greater unity and solidarity amongst the Wimbum people who are being divided because of clannish interests. Communal life is on the decline in urban areas and even in Wimbum land because the spirit of giving is lacking. Our concern in the Men’s *njangi* is to identify these barriers and chart the way forward by making sure we explain our projects are identified, executed, how contributed funds are utilized. It is also important to let members know how the group functions in order to rekindle participation and build greater trust. There has been trouble in the past with the management and utilization of group funds, so it is our responsibility to put the records straight and build the much needed confidence in Wimbum people. Regrettably, some people use such associations for personal ends. Some use it as a political platform to project

themselves thereby killing the general spirit of unity, solidarity and development’.

Savings and the improvement of livelihoods are primordial for the Wimbun women’s *njangi*. The president and other members stated that ‘they do not show up only to socialise, drink *shah* and eat kola nuts but to save the little they have against rainy times’. Savings rates are optional according to the individual members’ strength. However, members are encouraged to increase their saving threshold as much as possible to guard against unforeseen contingencies. The money saved at the weekly and monthly *njangis* is lent to members at minimal interest rates. As stressed by the President:

‘the *njangi* is not after compound interest. Money saved is borrowed to members and interest rates are determined by the length of time and the collective savings are shared to members after twelve months’.

Savings are done with stipulated amounts but rates can be increased progressively. Most members fall between the sums of 500-2,000 CFA in the weekly contributions. The tendency is that those who contribute smaller amounts end up with a smaller interest margin while those who contribute large amounts attract a handsome interest. For the Wimbun men’s *njangi* they have a fixed saving of 1,000 CFA every week. Following the political turbulence of the 90s when there was the clamour for multiparty politics, the state through the 1990 Law of Associations mandated all associations and *njangi* groups to be registered. The *njangi* is registered with the Divisional office Bamenda.

Considering that most of the members are housewives and petit traders, social security policies are taken seriously since most of the members are not covered through any of the formal protection schemes. The *kitchen njangi*, a notable scheme with the Police wives group and the Christian Women Fellowship is also pursued by the Wimbum women's *njangi*. As indicated by members I interviewed, there are three categories contributed monthly split into 50,000 CFA, 25,000 CFA and 10,000 CFA. The beneficiary may use the lump sum in buying a plot for eventual building and construction, purchase of land for agricultural purposes, payment of children school fees and the buying of kitchen equipment such as gas cookers, fridges, plates, cups and glasses. Currently, membership for the women's *njangi* stands at 104 members. Another *njangi* scheme to improve the livelihoods of members is the palm oil scheme. Each member contributes 10,000 CFA as a share of the cooperative venture. The 10,000 CFA is considered as seed money to enable the purchase of palm oil, bought in drums and shared to members in tins. The profit of 25 CFA or 50 CFA per tin is accumulated in the form of accrued interest which is shared to members annually. It should be noted that some members especially the 'buyam-sellams' and those who use it in frying 'puff-puff'¹⁸, collect palm oil every month so they pay the monthly interest. As explained by some women beneficiaries, if you collect 20 litres of palm oil, your interest sums up to 250-300 CFA every month and one litre translates into about 10 CFA. At any time, the 10,000 CFA seed money considered as starting share is refunded to those who want to quit the scheme.

Sequel to other social protection policies highlighted above, the women's Wimbum and Men's *njangi* have put in place safety nets for deaths and sickness of members

¹⁸ Very popular staple food (fried rolls) made from flour and mostly eaten at breakfast in combination with other foodstuff.

and close ones. It was noticeable that most inactive members do not flounder with their contributions for the sinking fund as this represents the key determining criteria for support towards the transportation of corpses to the village for members (and their close kin) who have died. When a member dies, the Wimbum women are quickly rallied and funds are collected. 1,000 CFA is contributed by every member and it adds up to 600,000 CFA given that there are 600 active members. Part of the contributed funds is kept in the sinking fund and part is given to the family of the bereaved. Some of the money is used in buying food and drinks for entertainment of members. For a member who dies in the village, a delegation is constituted and dispatched to take part at the funeral and to hand over the financial package. For the spouse of a member who dies, 500 CFA is contributed and if a member loses a child, 200 CFA is the levy. If a member is not married, a coffin is bought and the remnant is given to the family of the bereaved as support. Some members I interviewed raised concerns over the management of the share that is dropped in the sinking fund. These concerns were addressed by the response of the president and other executive members who indicated that the funds are used to buy basic necessities like salt, palm oil, soap, maggi (local seasoning) which is shared to members annually.

A common slogan that underpins the health and sickness scheme is 'health is wealth'. When a member is unwell, the spouse or child is admitted in hospital, he/she is assisted with 2,000 CFA. A delegation is sent comprising executive and other members from the neighbourhood where the ill person resides. The money is withdrawn from the trouble fund as every member is compelled to register with the sum of 1,400 CFA that goes directly into the trouble fund.

Socialization and solidarity constitute the cornerstone of the Wimbun women's and men's *njangi*. Sharing in good times and joyful moments like marriages and births attract the support of members. Based on withdrawals from the sinking fund, presents are bought and members turn up en masse to support the couple and members who have delivered. In addition, once a year the group organises a joint meeting with the men and together with children to interact with especially old members so that they can get attuned to Wimbun culture.

In line with the livelihood improvement options, the *njangi* group acquired a farming plot costing 350,000 CFA at Nkwen in Bamenda. The acquired land is used strictly for farming and members work on it collectively in turns as a means of providing basic foodstuffs and retention of their farming skills since they are operating in an urban milieu. Food crops such as beans, maize, cassava, sweet potatoes and cocoyam are grown. Given the diversity within the group and the disparity in the age composition of members, senior civil servants and other old women who have a wealth of expertise in various endeavours and who come from different professional walks of life are regularly drafted in to give talks and lectures on aspects ranging from health care, care for the old, agricultural innovation and farming techniques, business strategies to career orientation. The group has also been participating at international events like International women's day celebrated every March 8th and the Cameroon national day that holds on the 20th of May.

Loan default and financial recalcitrance is affecting the smooth functioning of the group. The President remarked that members either run away or shun the group when they cannot repay borrowed funds. It is normal regulation of the group to read out the names in situ of regular members who owe and cannot repay as a form of shaming.

Some members have reacted angrily creating enmity and discord. After a period of two/ three years, defaulters who still cannot honour their payments are reported to the police for prosecution. Such actions have led to total abdication of some members thereby creating a schism within the *njangi*.

Wimbum, the major ethnic group within Donga-Mantung Division of the North West Province has about 32 villages. Internal rivalry between the villages makes it difficult for the association to function smoothly. The President lamented the fact that communal life is on the decline though they have been able to embark on projects like renovation and extension of Nkambe palace, water schemes, scholarship schemes for Wimbum students and pupils and village halls in some localities. Most persons who show up are interested in the sinking/trouble fund that takes care of death celebrations and transportation of corpses to the village for those who die in urban areas. Some members paced the problem of the lack of interest in the association's activities at the doorstep of the leadership of WICUDA. There are complaints with the utilization of contributed funds and the identification of communal projects to be executed. Most villagers feel that their villages are not getting the right share in terms of projects from the contributed funds. The divisive tendencies within WICUDA are worsened by political jockeying;

'Some of our elderly members use WICUDA for their personal ends to plunge into politics. Some see as a political platform to project themselves thereby killing the general objective of the association. When they get the votes, they turn a blind eye and deaf ear to the problems of WICUDA. Some have even concentrated development

projects strictly in their clan thereby fostering clannish tendencies within WICUDA' (R116, Female, 67, Bamenda).

However, some old persons resident in urban areas that I interviewed and who are members of WICUDA stated that most of them look up to the association as a means of social security. When a member dies, money is removed from the trouble fund (1,000 CFA annual levy) and an on the spot contribution is made to assist with the coffin and transportation of the corpse. Also, the association shows solidarity to a member who is caught up in financial hardship and many young people running a business have benefited from the hardship scheme provided they have a surety. Though the association is strong as a building block for community relations, its weakest link is its insurance scheme to assist those who are ill. In most cases, the group goes into the trouble fund to support mostly dynamic members who have been contributing towards community development projects in Wimbum land. An old woman aged 71 mentioned that the insurance scheme within the Laye group of WICUDA is very strong as husband and wife contribute quarterly ranging from 1,000-5,000 CFA towards sickness and funeral rites that covers the immediate and extended family. An elderly woman saw the WICUDA as:

'It is a forum for me to interact with kith and kin every Sunday and when we have important cultural events. I am able to pass on some of our cultural norms to the younger generation especially with our traditional songs and dance like the *njuh*. I also teach young wives and newly married women how to prepare good corn fufu *ba*, our local beer *shah* which is our culture and identity. The young are also enlightened on respect for the elderly and the benefits of associating

and sharing the social and other benefits that are available within WICUDA' (R92, Female, 76, Bamenda).

9.4 Semi-Formal Protection within Professional Corps: Cameroon Teachers Trade Union and Secondary Education Teachers Socials

The teaching corps represents one of the largest pool of English speaking professionals in the Cameroon public service. Out of every three public servants, at least one has either served or is currently teaching at the primary and secondary tiers. Against this backdrop, it was important to find out what social protection measures are in place for this highly visible corps and the problems they are battling with. About 5% of the old persons I interviewed were retired teachers. The Cameroon Teachers Trade Union and the Provincial Delegation of Secondary Education Staff Socials abbreviated 'PDSE Staff Socials' were selected for the research. I conducted interviews with the President, some executive members and heads of social services on the 2nd of June 2006 for the PDSE staff socials and on the 6th of June 2006 with the Cameroon Teachers Trade Union (CATTU). Issues addressed during the interviews were: motivating factors for the creation of the association, membership and dues, relationship with the state, social protection schemes, handling default and recalcitrance, management problems, capacity to sustain social security measures floated and other misgivings associated with social protection for members.

While the PDSE saw the light in 2005, the CATTU was created in 1996. As per the motivating factors, the President of CATTU declared:

'after the barbaric salary cuts of 1993 where workers suffered slashes of almost 70%, the workers were frustrated because of the drastic cuts which made things extremely difficult for civil servants and their

families. Civil servants went on strike and you know teachers constitute the bulk of civil servants. After some months of strike, the other members of the civil service decided to resume work because they thought that they could take advantage of the fringe benefits at their job site by using unorthodox means to make up for the lost salaries. Corruption was rife and teachers found themselves isolated and unprotected. The government choose to hit hard on teachers for staying away from work and for championing the picketing. It is at this time that teachers decided to come together and to create a union of their own. The intention was to fight for our mutual welfare, improvement of welfare of members, greater commitment to improving the socio-economic and working conditions, providing some sort of security within the profession. The overriding goal is that together we would be stronger in bargaining and in discussing how to improve our falling living conditions and the other economic ventures the union could undertake to improve the situation of members'.

He stated further:

'we are not only interested in fighting the economic hardship that our corps has been thrown into but as a trade union, we are supposed to support the cradle and crusading of democracy. We need to stand behind democratic values, ideals and principles of respect for human rights, good governance, transparent management and accountability in public service delivery because it affects our pay package; an independent judiciary that gives every one a fair chance and a

legislature that puts the interest of citizens on centre stage. We should have an influence on the democratic environment though we remain non-partisan and apolitical. Our goal is to stand for a democratic society with greater chances for all. We fight for the betterment of working conditions for teachers, insecurity at the job site, punitive transfers, and shabby treatment from government. It is unacceptable for civil servants who have served in the public service and yet cannot receive their retirement benefits on time. It is only in unison that we can fight for workers rights and other entitlement from government. Therefore, members find themselves professionally bound and more protected when they come together and talk over issues of common interest. It is only when this happens that we can achieve our set goals.’ The head of social services of PDSE staff socials summed up their creation story ‘as the quest for mutual assistance, the promotion of love at service and understanding of each other and the individuals with whom we operate’.

He alluded to the constitution ‘considering the need to maintain and consolidate love, unity and solidarity among the staff, conscious of the fact that such love and solidarity can enhance output and efficiency in services we render to the public, aware that it is in a relaxed social milieu that there can be confident and frank interaction between the staff, they resolved to subscribe to laid down rules and regulation embedded in their constitution. As outlined by the head:

‘other factors that pushed the creation of the association are the delay in the provision of coffins by government, the groups’ new approach to management which is not vertical but horizontal and our African

cultural setting that prescribes mutual support, collaboration and sharing. Taking cognisance of this dictates, we needed broad based services, so we need a forum to meet and know each other by promoting, encouraging and strengthening love, unity and solidarity, providing a social forum for dialogue among the staff and sharing with members in happiness and in pain as the circumstances warrant it'.

For CATTU, membership is opened to all teachers in Cameroon while for the PDSE staff socials, membership is obligatory to all staff of the provincial delegation of secondary education including the following: staffs from the main delegation, inspectorate of bilingualism, inspectorate of human science, inspectorate of letters, arts and foreign languages, inspectorate of computer studies, inspectorate of sciences, Teachers resource centre, school health, inspectorate of technical education, inspectorate of technical industrial and inspectorate of technical teacher's training. By the time of interview, membership stands at 106 members and each member pays an annual due of 6,000 CFA which sum must be completed by 28th February and/or 31st March of the current year for staff and auxiliary staff respectively. As long as you are a professional teacher (after training and accepting teaching as a profession), you gain membership into CATTU. There are approximately 6,000 members throughout the national territory and in the Northwest Province where it has its headquarters, there are 2,000 registered members. Members pay dues of 200 CFA a month and 1,200 CFA annually. As indicated by the president, members are largely from the two English speaking provinces.

Social protection is top of the agenda as indicated by both presidents as the defining and motivating factors for the creation of both organizations. Deaths, hospitalisation, health talks and other social events like weddings, births send-off of members feature prominently in the social security schemes. The statement below by the head of social services for PDSE staff socials, speaks volumes to the yearning for social protection.

‘When a public servant dies by law, he/she is supposed to be provided with a coffin and the burial taken care of by the state but this is not the case. So, we thought that we should treat the issue of death and the provision of a coffin for our colleagues as important. We need to have a touch of each other, understanding pain and joy, so issues like deaths, births, marriages –coming together to give assistance to one another. Basically, the overriding motive is to provide some form of collective social security for members in the face of economic constraints and generalised hardship.’

On the death of a member, an on-the-spot contribution of 3,000 CFA is made and auxiliary staff pay 2,000 CFA. This is used for the coffin and the transportation of the corpse. Of the money contributed 100,000 CFA in cash or in kind is handed over to the bereaved family. The social committee works out modalities for spending what remains-transport of staff delegate (if burial is out of town), entertainment at wake keeping, burial and purchase of wreath. On the loss of a first degree relation-siblings, spouse, father, mother, the sum of 25,000 CFA is given to the member as a token of love and solidarity with the member. If the corpse is to be taken out of town for burial, an additional support of 15,000 CFA is made available. When a CATTU member dies, informal contributions are made and the teachers in the area participate at the burial.

The President declared that donations are raised to give the colleague and member a befitting burial. However, the CATTU is still in the process of working out a permanent structure on the scale of contributions for streamlined social security schemes and a cooperative and insurance scheme for members.

For hospitalisation and cases of prolonged illness, the executive committee meets to determine the gravity of the situation and on the strength of their recommendation contributions are requested from members. Usually, such contributions are a minimum of 500 CFA per member. Of the amount contributed 25,000 CFA is given to the sick member and the remnant is put into the social fund.

Social events like weddings, births, send-offs and staff parties provide the association room to intermingle and share in the moments of joy. An invitation to a wedding of a member attracts a present worth 25,000 CFA and for the birth of a baby, a gift of 10,000 CFA of which 5,000 CFA is used to buy soap for the child. For the send-off of a member, the association buys a gift worth 10,000 CFA for the member. The first meeting of the year is a form to send off old members going on transfer or retirement and the welcome of new members.

As part of efforts to improve teachers working conditions by guaranteeing their health, CATTU organizes health related talks to keep teachers healthy so that they can perform their assigned tasks excellently. Such health campaigns are focused on especially the prevention of HIV/AIDS. They are guided by the slogan 'we need more teachers in the classrooms than in the coffin'. By participating in celebrations to mark Teacher's Day, teachers are able to come together through the organisation of

sporting and cultural activities. The celebration brings to the spotlight the importance of the profession.

Capacity building of teachers is important for successful careers. In this connection, CATTU organizes seminars on professional ethics for members. Those who contravene professional ethics are denounced and shamed. The guiding maxim of the union as far as ethics is concerned remains 'Pedagogues as opposed to demagogues'. The names are published in a magazine run by teachers known as 'The Teachers Voice'. Publishing the names is an act of shaming which aims to dissuade and deter other members from flouting professional ethics.

Concerning relations with the state, both associations decried the neglect and abdication of responsibility by the Cameroonian state. Given the nature of their job, it is the responsibility of the state to provide free consultation and free medication for its civil servants as contained in the public service regulations. After all, the teachers were of the opinion that it is in the course of carrying out assigned tasks that they fall sick. When a civil servant dies, it is the place of the state to provide a coffin, means of transportation and a delegation to lay the servant to rest but this is happening on a selective basis given the politicised, polarised and ethnically divided system. The CATTU president intimated:

'the law on trade unionism in Cameroon is very repressive and the double standards exercised by the state is scaring away many people from forming unions to fight for workers' rights. Government selects organizations to give them recognition. However, we keep reminding the government that we are operating under the International convention 87 which the government of Cameroon ratified. The

convention states that workers can freely come together and constitute themselves without the necessary backing of their government’.

Identifying the fault lines in efforts to build social protection, members indicated that there was not enough disposition to handle the health care of members especially the very old who had retired. There was a semblance of agreement on the weak nature of assistance to those who are unwell and assistance with hospitalisation. Some members I interviewed consented that out of their freewill, they would pay regular visits to support those who were ill and they did not rely strictly on the delegation and money that is pooled together as stipulated by the association to cater for costs with hospitalisation. Most members were hopeful that in the future they should come with a monthly food stuff *njangi* where basic necessities such as meat, rice, oil and soap can be bought with the saved money at the end of the year and distributed to especially retired and old members, most in need. These ideas are in line with CATTU’s future cooperative and insurance scheme for staff to fill the gaps in health care and socio-economic uplift of very old members. The president put it bluntly:

‘with our low salaries, teachers are being exposed to ridicule. With a teacher’s cooperative and insurance scheme, we can provide basic commodities, greater access to essential drugs and a proper retirement and post retirement scheme particularly for our old members’,

echoing the quest for renewal and change in the direction of social protection for members.

Default in meeting up with dues hampers the smooth functioning of the organization. Given that members cannot honour their engagements, it is difficult for the union to improve on the welfare of members. The CATTU president remarked:

‘out of approximately 6,000 members, it is hard for us to collect dues for up to 1,000 members yearly. The inability of members to pay their dues makes things difficult for the union. We are rendered financially weak and often times are forced to scale back on certain earmarked projects because of lack of funds. Nonetheless, we are tackling financial recalcitrance by sensitizing and encouraging members to pay their dues. It is only with the contributed funds that we can build a strong union and make our voices heard at the appropriate time especially negotiating with government to bring the salaries of teachers to an acceptable level’.

Both organizations are well structured to handle their streamlined activities. The modus operandi and modus vivendi are clearly spelt out in the constitutions of the organizations that are binding on all members. The PDSE staff socials functions through the general assembly, the executive committee and the adhoc organising committee. The executive is elected by the general assembly of all members comprising the following: Honorary president, executive president, the vice president, a secretary, vice secretary, financial secretary, treasurer, two social/publicity secretaries and auditors, each saddled with defined tasks and responsibilities. All executive members with the exception of the Honorary President are elected for a two years term renewable once. For elections to be valid a 50% quorum of all registered members is required and if such a quorum is not constituted in the first round,

the elections shall stand in the second round with or without the quorum. CATTU functions through committees. The offices of CATTU are formed all over the national territory at sub-divisional, divisional and national levels. All the offices are registered at CATTU national secretariat with the executive secretary general of the union. Such offices are run by sub-divisional, divisional and provincial executives which are a facsimile of the national executive, with local changes where necessary. There are committees set up for specific issues and the national executive of CATTU comprise the following officials: the national executive; secretary general, the first vice secretary; the second vice secretary; the financial secretary; the assistant financial secretary ; the treasurer; the organizing and social secretary; the publicity secretary; two legal advisers; the technical advisers; the chief whip. Essentially, decisions arrived at in a democratic manner based on serious debates and deliberations. Notably, these formalised functioning structures are near inactive with some of the *njangis*.

9.5 Faith-based Organizations and Social Protection: Case of the Christian Women's Fellowship and Muslim Religion

Religious and church groups provide a sanctuary for the elderly especially disadvantaged groups like widows and widowers. A widow characterised her experience in a church group as:

‘a life-blood relationship. Without the church, I would have long accompanied my husband to the grave. When my husband died, I had no where to turn to but the church. When I attend prayer sessions every early morning, church service on Sundays and the weekly

meetings on Wednesday, my life is restored and my burden is lightened. The songs speak to me; the gospel pierces my heart; it gets to my soul and it's like I hear the voice of God telling me that he is keeping watch over his flock. Within the group, we also visit one another if someone falls sick. We sing together, pray together, study the bible together and show love and compassion for one another during sad and joyful moments'.

The above statements lend credence to the role of religion in psychological support and spiritual empowerment of the elderly. The Christian Women Fellowship (CWF) of the Presbyterian Church in Cameroon (PCC), Musang congregation, Bamenda and the Central mosque in Bamenda were selected for study. I carried out Interviews with ten CWF members; two followers of Islam and the Imam of the central mosque in Bamenda on the 3rd of August and 16th of May 2006 respectively.

The CWF is the most prominent and vibrant women's religious group of the Presbyterian Church. Most of the thirty female Pastors who make up the clergy of the PCC have gone through the route of the CWF. Apart from normal evangelisation activities of church attendance, praying, singing and bible study, participation at rallies and other church ceremonies, the group meets weekly, every Wednesday to reinforce its spiritual dimension and to carry on with its social interaction, mutual support and solidarity agenda. The group has a membership of 700 members with about 35% of the members made up of older women and widows. In this connection, the solidarity schemes involves evangelisation visits, visits and prayer sessions for members who are ill, the *njangi* component that involves annual contribution of 1,000

CFA into the trouble fund against unforeseen contingencies, born house, husband's day celebration, weddings and support with bereavement.

When a member dies with the next of kin unable to carry on with funeral arrangements, the district of the CWF in the locality assist with the burial dress and 50,000 CFA is given as assistance to the next of kin. Such funds are directed towards the payment of fees of one of the children of the deceased for at least two years. The CWF executive committee ensures that the funds are used for the purpose specified. With the passing away of other members, it is mandatory for the group to condole with bereaved. At the level of the neighbourhood where the member was resident, every CWF member resident in that neighbourhood contributes 100 CFA. The money is used as support with food and entertainment of guests at wakes.

Sickness and hospitalisation is a major preoccupation of the group. If a member is unwell and is receiving treatment at home, a delegation is constituted to visit the ill person to offer prayers and spiritual support. The name of the ill person is inserted into the Sunday services prayer slots for the sick during intercession. In case of hospitalisation, a delegation is constituted; milk is bought for 3,000 CFA from the annual sinking fund as solidarity for the member.

For assistance with births, members who have delivered babies are grouped following a period of two years. Every CWF member contributes 200 CFA and the sum total is used in the purchase of buckets and washing soap. As indicated by the President, for instance during in the year 2004-2005, the deliveries came up to approximately 30. The new born babies are accompanied to church by their parents and possibly god

parents, share assorted traditional dishes and drinks on an appointed day. The assistance with births is carried out in a near similar fashion with the husband's day celebration. Members buy a shirt and other garments. The items are parcelled and members hand over the wrapped parcels to all the spouses of CWF members who are invited in church on an appointed day.

Group support in connection to weddings cements the solidarity directed at members. When a members' son/daughter is getting married, the group withdraws 5,000 CFA from the sinking fund. The money is used for the purchase of a present that will be handed to the couple on the wedding day on behalf of the group by delegated members. However, individual members who receive invitations for the wedding are free to buy gifts for the couple based on their resources. Entertainment is seen as an occasion for members to fellowship together and whatever is given to the group is shared in communion amongst members.

Organising educative talks and short training programs is a notable activity of the CWF. Members are drilled in micro projects such as animal raising and livestock production, gardening, marketing skills, house craft, tie and dye of dresses, making of detergents for home and commercial purposes, tailoring through the Women's centre, basketry and weaving, knitting and stitching. Educational talks are held on topics such as building peace and harmony within families, responsible parenthood and household budgeting. Health talks are also organized on various aspects including good meal preparation, proper hygiene and sanitation, control of water-borne diseases, fight against HIV/AIDS and its de-stigmatization.

Social support within the Muslim faith follows a symmetrical structure with the Imam and chiefs of the Hausa and Mbororo communities determining the support and assistance to be given to the needy. The Imam of the central mosque in Bamenda, who I interviewed on the 16th of May, 2006 indicates that social security within Islam is at the discretion of the Imam based on interpretation of key texts from the Koran. Such passages call for assistance to disadvantaged groups based on the fundamental principle of *zakat*-the act of giving by the wealthy in order to cleanse their wealth. Given the centrality of *zakat*, the Imam declared:

‘Whoever denies giving to *zakat* is deemed as a non-believer and must repent, for giving to charity is like cleansing sins just as water extinguishes fire’.

The Imam stated that it is his responsibility and the chief of the Hausa people to meet with well-to-do Muslim faithful to solicit for funds to help the very old people and other needy- women, orphans. After every Friday prayer, the alms collected are later distributed to disadvantaged people based on their need as determined by the Imam and the chief of the Hausa community in Bamenda.

Islam prescribes the sharing of food and the system of open feeding undertaken in Muslim neighbourhoods relates to in-built mechanism of social protection especially for the elderly. As stated by the Imam, most old persons survive on this form of solidarity and benevolence. The motive behind the open feeding is inscribed in Islam as believers have to share with those who do not have. Muslim feasts like the celebration of Ramadan and ‘*barka sallah*’ gives room for the rich (haves) to share their wealth with the have-nots. The Imam also stated that using the Koran which he thinks has a lot of powers, enables him to undertake soothsaying, fortune telling and

other form of protection through prayers. These services attract a token appreciation and the payments received are re-directed to take care of the needy.

Based on the prescription of Islam, a good Muslim must follow the five pillars of Islam. These golden rules emphasize the point of doing what is right in the eyes of Allah and extending a hand to the poor and needy. As explained by the Imam, social security relies on the contributions received from *zakat* and *sadaka*, one of the five golden pillars of Islam. *Saraka* represents the commitment of funds to meet the needs of the poor while *zakat* raises the status of a Muslim as charitable ventures do not decrease one's wealth. *Saraka* addresses directly the needs of the poor including the old while payment of *zakat* is a direct offering to Allah; believed to raise the status of a Muslim. Rather, it is considered to bring about growth and expansion of wealth. *Zakat* is offered annually as stated in the Koran that a good Muslim must give sacrifices once a year. The offering constitutes the donation of a fraction/ percentage of your wealth to Allah. Substantiating the case, the Imam explained: 'if someone has 40 cows, he might sacrifice one cow every year as offering towards the *zakat*'. Alternatively, for a businessperson, for each 1000 that makes up ten million, he receives 25 CFA, so 25 CFA plus 10 million represents the percentage that is given as sacrifice. *Zakat* is also paid on gold annually with a percentage of 2.5. A particular *hadith* states that *zakat* is paid on jewellery which is worn or not. Businesses such as real estate and trading goods such as clothes, cattle and vehicles are considered in relinquishing a certain portion of wealth for the sacrifice. *Zakat/Saraka* is paid on the items listed and based on an initial property assessment based on the guiding principle of Allah. These sacrifices enabled the Imam to function and to provide for the poor and needy. Drawing from the Koran, the Imam stated:

‘if you wash your clothes, you throw the dirt away. A true Moslem believer washes his wealth and possessions as a blessing. The *zakat* is a means of sending your wealth before death. Beware of the fury of the poor and your neighbour. You have to prepare your way to paradise’.

As explained by the Imam, the *zakat* is broken down to cover eight categories of persons. In the first category are persons who have got a head start in business and therefore need all the encouragement and support to become firmly rooted. In the second category are the ‘miskin’, Muslim followers who do not have any means of living. Most of the old and very old are covered under this category. Thirdly, messengers mandated to collect sacrifices from rich people of the Muslim faith which goes into the pool of *zakat* funds. Fourthly, Non-Muslims who are interested in the Muslim faith benefit from the *zakat* funds and are encouraged to join the Muslim religion. In the fifth category are employees who work under an employer. They are expected to show respect and pledge their loyalty. In return they are compensated for good services rendered. Debtors occupy the sixth position. The *zakat* is given to them to enable them pay off or settle any debts they have incurred. In the penultimate category are evangelist and other missionaries of Islam. They preach and teach about the Koran and convert people to Islam. The old are often covered under this category when they are very knowledgeable in Islam and hold a wealth of experience. They also command respect within the community and therefore are very good crusaders and instructors of the Koran. Lastly, travellers no matter how rich they may be. They are considered as strangers because they have left their homeland and may be stranded on the way. The thinking is that once he/she leaves his place of abode, he/she may run out of money. The Muslims offer the *zakat* as a form of assistance for those

out of their base. The ideology behind the *zakat* as underscored by the Imam and three other believers I interviewed are surmised as:

‘if you do not wash or sacrifice your wealth, ill luck will pursue you and whatever you indulge in, because the poor and needy will not pray for you. When you die, the money you have amassed will return to you in the form of fire on judgement day interpreted as hell fire for the person’.

The researcher inquired to know if there is a laid down procedure for sharing the *zakat* and the Imam indicated:

‘there is no formula in distributing the sacrifice. As Central Imam, I summon other clerics and those eligible to receive what has been offered. This takes the form of prayers and thereafter, the beneficiaries are presented with their own quota’.

Commenting on the other forms of support available to old and frail persons, the Imam stated:

‘The Imam’s compound is a compound for all. In my compound are a multitude of wives whose husbands have died, orphans who have lost their parents. They are all my children and we belong to one family. As Imam, I swear by the Koran and I keep to its dictates. I spend about 10,000 CFA every day in running the compound and this money comes from the *zakat* sacrifice. Though there is an increase in the number of needy and poor persons and a decline in potential contributors, we are bound to share what we have as prescribed by the Koran. We must share our food no matter the number of persons. It is stated in the Koran that Muslim faithfuls should live as a

community, care for one another and show concern for the poor and needy' (R89, Male, 72, Bamenda).

9.6 Village-based Organizations and Social Protection: Mbororo Cultural and Development Association and Wimbun Cultural and Development Association

Social security activities are continuous within village-based and home town associations especially in urban areas where members see themselves as detached from their home town or villages of origin. These associations serve as a catalyst in re-uniting kith and kin by providing a platform for them to meet and undertake activities of common interest. Most of all, those caught in the web of activities within the city see these organizations as the only means of social insurance if they die in urban areas, at least they are sure that their corpses will be transported to the village for burial upon payment of the statutory dues for the trouble fund- a prerequisite for all members. In its quest for modernity, hometown associations are re-configuring their development drive with regards to burial and death celebrations. The centrality of funeral arrangements is borne out of Page's (2007) paper on the local mortuary project undertaken by the Bali-Nyonga Development and Cultural Association (BANDECA).

Even minority groups like the Fulani¹⁹ consider cultural associations as a life line in preserving their sense of identity and belonging among the young and old. The case of old nomadic Fulani is even more telling. The Mbororo Social and Cultural Association of Cameroon-MBOSCUDA, a minority nomadic group struggling for geographic space and to re-assert itself within the geo-politics of Cameroon was

¹⁹ On the identity and dented image of Fulani pastoralists, relevance of cattle, their cry of marginalization and farmer-grazier conflicts recurrent in the North West Province, (see Njeuma and Awasom 1990, Hickey 2002, Moritz 2006; Dafinger and Pelican 2006).

selected for the research. It is interesting to find out the social protection policies put in place by this group that is virtually cut off from the Cameroon public service occupational framework. As indicated by the Program coordinator of MBOSCUDA, the underlying factor for the creation of the association:

‘is the marginalisation faced by Mbororo²⁰ people, exploitation, oppression especially seizure of land and other property and all sorts of discrimination. The idea was nurtured by a few educated Mbororo at the time that felt that by coming together and speaking with one voice, their problems could be handled’.

In 1987, three grassroots organisations of Mbororo youth in Kumbo, Bamenda and Yaoundé merged to form the MBOSCUDA in 1992. Thereafter, under the Law of Association, the association was registered with the Divisional office-Mfoundi, Yaoundé on October 1st 1992. Presently, the association has branches in seven out of the ten provinces of Cameroon, with a membership of 7,500 in the North West province and approximately 30,000 nationwide. As disclosed by the Coordinator, elderly Mbororo population (about 40%) in the North West Province is growing.

Old Mbororo-Fulani remain the custodians of one of the largest nomadic groups in Africa. The group plays a crucial economic role as their herds of cattle and sheep are the major source of meat for hundreds of villagers, town and cities in Cameroon and beyond. Hickey (2002) notes that ethnicity, religion and to a lesser degree race, provides the key aspects of identity that define the Mbororo as a distinct group in Northwest province of Cameroon. The Fulani practice the Islamic religion which is

²⁰ Although some people make a distinction between the Fulani and Mbororo, within the wider Fulani, Mbororo is used as derogatory expression. In my study, both are used synonymously as coined by MBOSCUDA.

enforced by the cultural code of behaviour and ethos known as *Pulaaku*. The code provides both a moral framework and a code of conduct to the pastoral Fulani, and is also maintained by the Fulani operating in urban areas. This code of conduct is intimately bound up with nomadic pastoralism and with good animal husbandry. It is also bound up with the fulfilment of duties to elders, wives and the lineage group, and the proper arrangement of marriages. The four dominant strands of *Pulaaku* are identified as: fortitude in adversity and on ability to accept misfortune *munyal*; sound common sense and manners *hakkilo*; reserve and modesty in personal relations *semteende*; and dignity *neddaaku*. For the Mbororo Fulani themselves, *pulaaku* makes them unique and different. It is about dignity and hiding problems. The Mbororo Fulani equate their distinctive pastoral way of life with their ethnic origin, to the extent that there is strong attachment to the lineage. The coordinator stated that there is a continued tendency to marry within migratory groups, often with close cousins, as a means of preserving *pulaaku* and herds. The ethnic exclusiveness of the Mbororo culture is a factor that often sparks off conflict with their non-Fulani farming neighbours. The Coordinator stated:

‘the natives in town see the Mbororo Fulani as uneducated, primitive and having a wrong religion. The Mbororo-fulani in the rural areas looks down on the natives as *haabe*, meaning people who are poor, feeling racially superior even to a native who is rich’.

Elderly Fulani play an instrumental role in legitimating marriages, birth and family harmony, child upbringing. Before a woman’s first delivery, she left her home to stay with her parents and remained with them for at least one to two years after delivery. At delivery which happened in a secluded place (usually in the women’s hut), elderly women in the neighbourhood attended to her. Usually, these women would use herbs

that were particularly prepared for other women who had undergone a similar experience. As for old Fulani men, they teach male Fulani children between seven and twelve on cattle grazing and other skills such as rope making, horse riding and care of cattle. Girls in the same age range milked cows or helped to restrain calves from their mothers in order to milk. They were gradually taught how to cook, clean the hut and its surroundings and fetched water. They also assisted in washing the dresses of their fathers and brothers. So, the care extended to old men and women is tied to the dictates of the *pulaaku*.

Pastoralism in Mbororo families is managed at the level of the household, with cattle ownership concentrated in the male family head. Livelihood roles within compounds are allocated according to gender and age. Elderly men are responsible for all aspects of decision making and activities regarding the movement, health and sale of cattle. The wife or wives of the family head have milking rights, but lack the power to sell the cattle. An elder or old person in terms of age amongst the Mbororo is referred to as *Nyako* and they command a lot of respect as prescribed by the *Pulaaku*. The younger generation owe a *Nyako* a lot of respect and required to assist with basic needs like fetching water, washing of dresses, dispatching messages and looking after herds of cattle. Along the lines of the *Nyako* in seniority according to age is the *Ndotijo*-family head because it takes a person who has achieved in terms of managing a family with children and herds of cattle to get that status. The project coordinator of MBOSCUDA indicated that his organisation is still to factor in any projects for old Fulani men and women but explained:

‘if the old have children in school, they benefit from the sponsorship program for children especially if such old persons are not in good

financial standing. Also, if they reside in communities where some of our projects are undertaken, their wives can benefit from literacy programs and micro credit schemes, thereby relieving them of some of these burdens’.

He went further:

‘Providing social security for the Mbororo is a problem. The old have their egg in one basket since they rely strictly on their cattle for livelihood. If anything goes wrong, the old person becomes highly vulnerable and things might turn out to be very difficult for the old person. About 95% are involved in cattle rearing and the land used for cattle grazing is under serious threat. Again, a lot of cattle diseases are affecting cattle and veterinary services cannot contain all. Demographic pressure on land and perennial farmer-grazier problems are threatening the livelihoods of old Fulani cattle graziers. This has led to a significant reduction in the number of cattle in the North West Province’.

Very old Mbororo men and women are highly disempowered in terms of social protection. ‘Given that women are dependent on us the men, so if we the men are vulnerable, then the women are highly affected’ stated a Fulani elder. Other concerns include the difficulties of accessing basic social services. Health care facilities are largely out of the reach of the vast majority of Fulani who reside in rural remote villages as they are also constantly on the move in search of good pasture. Drinking

water and rural electrification²¹ are other social amenities that are far beyond the reach of the Fulani. Another Fulani elder put their worries this way:

‘we are constantly on the move because of the threat of being chased away from the land. We cannot enjoy a good sleep because we think about our families and our cattle, which we depend on as our only means of survival. How can our children even assist us when our social cohesion is not guaranteed? When we talk of social security, we think about our cattle first because we and our families eat from there. As old people, our cattle is the only form of support that we would hand down to the younger generation but our neighbouring farming communities are making things difficult for us as there are always problems with cattle trespass and destruction of food crops’ (R124, Male, 69, Nkambe).

Another Fulani elder stated:

‘we the Mbororos do not enjoy any support from the state²². Our children do not have public service jobs, we make a big contribution to the economy through our cattle activities, yet we do not have any social amenities like water, health centres and electricity within Fulani settlements even though we are heavily taxed. We are always duped by administrative authorities when there are farmer grazier problems as we are looked at as primitive minority people without access to land. We offer ransoms to these authorities and yet the problem resurfaces after a short while without any solutions. Even to

²¹ Some Fulani are semi-sedentarized and live in enclave settlements, so would value electricity and running water. Neither me nor my informants make an absolute distinction.

²² This is not strictly an accurate statement as some Fulanis can overstate how little support they get from the state. They benefit from veterinary, local hospitals and other administrative services though in most cases, such services are paid for.

get access to the judiciary to present our case is not possible as we are always considered as intruders. Cattle rearing is our everything: history, identity, social security, culture and mode of subsistence and still, we do not have any protection from the state' (R123, Male 71, Nkambe).

Village-based associations are increasingly providing some form of protection and acts as a unifying force for people from the same ethnic group or village residing in urban areas. The Wimbum Cultural and Development Association is one of such associations. As indicated by the President (a retired civil servant):

'Most people in Wimbum area have come together in what is popularly called *Bongabi* emblematic of unity is our strength. The inspiration certainly came from those who travelled to the C.D.C plantations in the South West province and since they were far off from home, the major concern was social security and the major question on the lips of all was 'if one of us dies out here, what happens next'. This certainly provoked the creation of the WICUDA which was replicated in other urban areas. Where Wimbum people congregate, they identify with the culture and it reminds them about their village of origin. They also interact and socialize and share in each other's good and bad moments collectively. This is the case with the men's and women's *njangi* that are off springs of the association'. We meet annually in a general assembly where development issues are discussed and each of the branches through

out the national territory including the youth wing are represented by delegates’.

9.7 Conclusion

While these semi-formal mechanisms of protection help to provide basic security for members, they are finding it hard to cover more important support related to health care and other crucial financial demands and contingencies. At best, the social function machinery and social networking fostered through *njangis* is commonplace, though absent within the Muslim religion and community. Such schemes which relate to births, deaths, marriages and funeral arrangements are met while more complex needs remain unaddressed. The crucial problem facing these organizations remain cash flows as resources are few and far between consequent on deepening poverty. While faith-based organizations offer more of psychological support and spiritual empowerment, the forms of support are mostly one-off and periodic as offerings and alms collection are largely infinitesimal. Help with funeral arrangements and modest assistance with medical costs; though insignificant remain vital schemes at the centre of support mechanisms within village-based organizations, mutual societies and faith-based organizations. In their diversity, the organizations are battling to build in place micro-insurance schemes targeting immediate material needs, availability of income support; health and other medical concerns of the elderly. These needs are largely unmet and the drive to provide social support is not made easy by a tinkering with institutional support and a dicey political terrain. Sadly, some elites use these organizations to legitimate themselves.

Chapter 10: Conclusion, Social Policy Implications and Recommendations

10.0 Introduction

This concluding chapter summarises the findings and limitations of my research, as well as addressing its social policy implications and suggestions for future research. This is underpinned by a snapshot of older people's narratives and the general situation of the elderly in the provinces studied and contemporary Cameroon. It rethinks the general policy options and possible solutions to improve the lot of old people based on different scenarios, while the conclusion focuses specifically on the findings drawn from selected respondents. The conclusion relates to literature reviewed and the findings to the wider context in Sub-Saharan Africa by considering the intersection between gender, old age and poverty.

10.1 Conclusion

From the socio-demographic data and narratives of respondents, it is discernible that welfare support systems for elderly men and women are varied depending on individual circumstances. My data plucks into various aspects of the wider literature on gender, poverty, old age and development by countering some misconceptions and assumptions. My focus on social capital theory highlights the importance of attention to individual and collective agency when considering elderly well-being in a context of chronic poverty. Patterns of care, forms of support, coping strategies and whole range of resources and assets, vital for livelihoods are different for elderly men and women echoing the changing nature and complexity of social protection. From a gendered perspective, it is observed that elderly women and men are walking a tight

rope in staving-off poverty by drawing on additional resources and other semi-formal support mechanisms that barely scratch the surface.

Unlike most data looming of the elderly as a homogenous group, my study considers a mix of gender and religion with differential impacts on elderly well-being. The emergent categorisation points to the heterogeneity of the study population and complicated nature of care and support. The elderly with pensions (40%) of male respondents are relatively better-off compared to 60% of women without access to pensions and any direct source of income. Though some widows rely on widowhood allowances and entitlements secured on behalf on their deceased husbands, such entitlements are more than halved and not paid out regularly. With declining incomes, diminished resources and a fragile asset base, elderly women, particularly widows and childless women are worst-off. However, it is observed that frail and incapacitated elderly men are equally trapped in extreme poverty and suffer from neglect and abandonment which is impacting on livelihoods and coping. The complexity of the situation is reflected by the high number elderly men (62%) surviving on pensions against 32% of women (mostly indirect beneficiaries) who function on pensions that are slashed and very meagre. Contrarily, a majority of elderly women (64%) compared to 38% of men eke out a living in rural areas without pensions and surviving on agriculture are equally in hardship. Despite their involvement in agriculture, the rural elderly are crippled by a dearth of social services and rural infrastructure either non-existent or in a state of disrepair. Even the proceeds from their agricultural and entrepreneurial activities remain inadequate as activities are seasonal in nature and income, often insecure. Those advancing in age and who cannot rely on their physical strength are finding it hard to cope. Generally, given the inadequacy of pensions and other support mechanisms, both elderly men and women

are plunged in misery, though some are relatively better-off, yet most are stressed and worried with daily survival.

Given the swing back in social protection, religion/faith-based and kin support emerged as crucial forms of semi-formal support for the elderly. Three main blocs are discernible- Christian, Muslims and traditionalist. Within Christian circles, elderly women featured prominently compared to elderly men who carried on Christianity with some belonging to Islam while others (mostly elderly men) were traditionalist and atheist. Within these religious circles, elderly women and men counted on some form of assistance from the church with most support provided through gendered Christian denominational groups. From the accounts, though some general support (basic commodities, firewood and small cash transfer) was provided on designated days in the church calendar, men looked up to strictly male groups like the Christian Men Fellowship, Catholic Men association, Baptist Men association and their female counterparts received support within strictly female enclaves like Christian Women Fellowship, Catholic Women Association, Baptist Women Association. Within the women's groups, the activities appeared dense with njangis and other forms of psychological support and spiritual empowerment more common. On their part, elderly Muslims relied on alms pooled together through the Zakat and Saraka. Hierarchically, the distribution of alms to the needy is determined by the Imam. As for elderly Fulani, they rely on kin arrangements and obligations in providing basic support related to daily needs like food, fetching water, dairy milking, doing laundry and serving tea. In this setting as prescribed by Islam and Fulani kin support, the women survive on the apron strings of the men (perceived as head of household). In this context, if the men are vulnerable, then the disempowerment level of women increases. My data showed that 10% elderly men were traditionalists-non-church

goers (mostly elderly men at the helm of village power structures) who rely on tradition-based and ancestral worship. In the context of social protection, they draw on the support within traditional society by enforcing customary law and respect of cultural norms. In return, they live off the fines, penalties and other forms of sanction that are meted out to defaulters.

Residential patterns which appeared gendered remain a strong determinant of welfare support. From the sample, though a majority of respondents reside in rural areas (64% women and 38% men), 62% of elderly men are resident in urban areas, perhaps consequent on their public service route and investments undertaken in the setting. Most elderly women who engage in farm work (a lifetime female activity) are based in rural areas occasioned by availability of land unlike their counterparts in urban areas.

Survival in the informal economy and other entrepreneurial activities are pursued by the elderly. Negotiating livelihoods through a gamut of informal sector activities depict a gendered pattern of activity. From the data and narratives, most elderly women (about 80%) are involved in the informal economy with agriculture and farming as the main activity(34%) and small-scale trading (30%), often continuous economic activities. Meanwhile activities undertaken by their male counterparts are more business related (33%). 21% of elderly men were involved in agriculture and farming while 7% took up small-scale trading. Activities undertaken by elderly men were wide-ranging, encompassing estate development and management, taxi operations, livestock production, wood supply, bee farming and distribution and other business ventures that require huge capital injection. In spite of some clear-cut

demarcation of activities, it is observed that these patterns are becoming blurred, particularly in the agricultural sector where both elderly men and women are involved in livestock raising and keeping of small ruminants like rabbits, chickens, goats, pigs and cattle. The broad spectrum of activities undertaken by elderly men and women to stave-off poverty challenges prevalent assumptions of the old as a liability and economic drain.

A greater understanding of the yearning for social protection is visible in the high membership in *njangis* and other forms of reciprocity that permeates households, families, faith-based organizations, village based associations and mutual societies. Evidently, *njangis* constitute a crucial social network in pooling savings and generating vital financial resources for sustenance, particularly for women, consonant with research elsewhere (Lachenmann 1994, Schmidt 1997, Kasente 1997). Support provided is more psychological than economic with issues like funeral arrangements, birth celebrations, micro-credit provision, spiritual empowerment and periodic assistance with medical and health costs. Such arrangements are undertaken through the sinking funds floated in most *njangis*. In attempts to mobilize resources and assets as a coping mechanism, elderly women who rely on the returns from various income earning activities are involved on a greater scale in *njangis* - considered a platform for social networking and generation of much needed capital. My data points to multiple membership in *njangis* which holds mostly on a weekly, fortnightly and monthly basis with the monthly *njangis* being the most popular (54% of men compared to 43% women). About 95% of the respondents indicated an affiliation to *njangis* and its tangible benefits in generating additional resources for their sustenance. From the narratives, elderly women comparatively, looked up to *njangis* as a vital support mechanism as they could interact and socialize with other members. The gains

emanating from *njangis* was tremendous ranging from raising needed capital at low interest rates, purchase of household utensils (kitchen *njangi*), bulk buying and re-distribution, skills in day-to-day survival (making of detergents, soap) and household upkeep. The social support dimension of *njangis* is equally very beneficial during major events like hospitalisation, births, deaths, marriages. Such a forum enabled elderly women particularly widows to ward-off feelings of isolation, neglect and abandonment. Contrarily, elderly men who held membership in *njangis* emphasized capital creation aspect more than social networking. They also used such a platform as a launching pad for community development initiatives. It emerged from my data that elderly men are also involved in pooling additional financial resources through the credit unions, charging very minimal interest rates and very accessible than the conventional banks. Given the heterogeneity of my sample, it is observed that *njangis* are not common with other groups of elderly like the Muslims and the Fulani, who rely on support provided within the lineage system, other forms of kin arrangements embedded in the Fulani code of conduct (*Pulaaku*) and the *Zakat* and *Saraka* for other Muslims.

The present study does not lay bogus claims in providing straightforward answers to the complexity of the problem of social protection. A limitation, to the research was that some respondents were cagey on questions warranting disclosure of sources of income support, forms of disrespect, contributions and gains from *njangis* and other support networks and returns from entrepreneurial activities. This researcher also faced the uphill task of rescheduling interviews to enable respondents' volunteer information at convenient periods. In line with suggestions for future research, a quantitative in depth study to measure survival and coping strategies is essential. Such a study would examine the decline in intergenerational support for the elderly by

younger generations. Nutritional deficiency and food provision remains crucial to daily survival of the elderly and warrants further investigation. More still, health profile of the elderly, use of herbal remedies and reliance on herbs for treatment of certain ailments needs to be explored further. The centrality of mutual societies, faith-based and village-based organizations in filling the gaps as a result of roll-back by the state necessitates further research. Such a study would look at the modality and viability of these organizations in floating micro-insurance schemes targeting micro-finance and health care. The degree of vulnerability of dispossessed and disempowered groups like frail elderly, widows, widowers and childless women needs closer scrutiny. Polygamy and the influence of patriarchy are under-researched in terms of its implications on the well-being of widows in particular. Kin arrangements, prevalent support mechanism amongst Muslims and Fulani that promote male hegemony, thereby subsuming women under male breadwinning ideology needs more research as per the survival options of widows occasioned by the death of a spouse. Equally, the situation of widowers bereft of vital assets and resources and who may be trapped in chronic poverty, suffering greater neglect and abandonment warrants further research. It may be tempting to assume that traditional support mechanisms, still viable in rural areas would be tenable in the foreseeable future. This assumption is unsafe given the loosening of family bonds, high levels of out-migration, soaring unemployment and reversals in intergenerational support. In formulating a viable social policy, the dynamics of extending coverage would require a stronger assessment of the traditional structures of support and the lessening role of the state in social security.

Pertaining to the question of elderly support in urban and rural areas, it emerged that community ties and solidarity appeared stronger in rural areas which impacts positively on the care provided for old people. This situation was more comforting for elderly men given the power wielded in village institutions. In urban areas, these forms of reciprocity and mutual support are on the decline and non-existent in most cases. From the narratives, land emerged as a vital resource in securing livelihoods as most men and women undertake agriculture and other informal sector activities. Elderly men in rural areas are more at ease as they had access to large pieces of farmland and plots that they could either cultivate on or engage in livestock production. In both rural and urban areas, access to landed property made a big difference in livelihoods for elderly men. For elderly women, particularly widows reliant on farming and other agricultural activities for survival, either the lack of ownership or tenuous access to land was jeopardising their efforts. However, from the narratives, one could surmise that well-being of the elderly in rural areas is hampered by dearth of social services and social amenities like drinkable water, health care, good roads, electricity and good housing. Interestingly, most informants indicated that they would prefer to reside in rural areas because of the ease of building a home and a volatile mix of community ties and respect for the elderly, key determinants in welfare support. As an informant surmised:

‘Someone’s problem in a rural setting is everybody’s problem. When you cry out, there will be persons to come to your rescue. When I am not in Church on Sunday and other important community meetings, members will call around to find out what the problem is. Well, though this support is on the decline, the situation in rural areas is still better. In the villages, old people are still respected and held in

high esteem but in urban areas, the elderly are lost in the wild of the city and nobody cares what is happening to them. Our major worry remains health care and access to good water' (R125, Female, 74, Nkambe).

The above scenario is dovetailed by inadequate safety nets for older people in both context but worse for those in rural areas who are suffering from the dearth of essential services. Worst still, based on my observations, housing in rural areas is in a derelict state and sanitation is problematic. Almost all rural elderly rely mostly on pit latrines and other traditional methods of toileting with negative outcomes on their health.

A key question of this research has been to gauge the welfare patterns and coping mechanisms of the elderly. The picture is not a rosy one as they battle on a daily basis to secure livelihoods. The abysmally low formal coverage for rural dwellers particularly farmers and self-employed is telling. Statutory insurance programs do not offer universal coverage. A snapshot of accounts point to a patchy picture of care received by old people through family and other kinship arrangements. The trend of hired helpers in both rural and urban areas, which are being fashioned to provide care for the elderly by some families, is instructive. Without access to health care and other essential services, the socio-demographic profile points to extreme conditions of poverty, deprivation and depleted resource base (especially for women). Both elderly men and women indicated fetching water from streams that are far-off, using herbs (32% women and 38% men), visiting traditional healers (44% women and 50% for men) when unwell to treat ailments like asthma, high blood pressure, hypertension, diabetes, arthritis. Still, many face troubling times against bad roads to get their

produce to rural and urban markets. These problems reflect the vulnerability of the elderly, particularly elderly women whose major life wire is subsistence agriculture and petty trading. However, through individual and collective agency, both men and women in rural and urban areas are battling to stave off poverty through involvement in a gamut of informal sector activities, in line with social capital theory.

For the elderly with access to pensions (about 40% of my sample), there is urgent need for reforms. Processing remains nightmarish as beneficiaries are locked in bureaucracy of chasing files back and forth between the Ministries of Public Service, Finance; Prime Ministry and CNPS respectively. Eventually, entitlements are not paid out regularly²³ and the amount received is not enough to cover living expenses. The shifts in social policy for the vast majority of citizens (about 90%) not covered by formal social protection is indicative of the predicament of old persons especially in rural areas.

Drawing from the rural/urban divide in terms of support mechanisms, findings also point to gains and down sides associated with residential patterns. Elderly in urban areas suffer more neglect and abandonment than their counterparts in rural areas. However, the major preoccupation of those in rural areas is lack of health services that often warrants long treks and labourious movements, several kilometres away to a hospital or health centre, mostly accompanied by children, grandchildren, hired helper and spouse depending on the circumstances. More often, they only receive

²³ The Ministry of Public Service and Administrative Reform recently organised a workshop to look at the crisis situation of treatment of files for retired persons. See Mutations Quotidien No. 1876 (Friday 30/03/07), 'Retraite: Les dossiers sortiront-ils des tiroirs? C'est l'objectif d'un séminaire atelier organise par le ministère de la Fonction Publique and Cameroon Tribune (Wednesday 04/04/07), 'Pensions de retraite : Le parcours du combattant'. These meetings and other policy options remain cosmetic, strong in language and weak in substance.

palliative treatment as a result of the absence of geriatric care. In some cases, some resorted to buying aspirin, paracetamol and other pain killers to alleviate pains and treat other ailments. Worthy of mention is the use of pit latrines at some distance from the house. The very old and frail elderly who are physically and psychologically drained find it difficult to respond to 'natures call', especially at night.

Widespread poverty and access to resources portray the differential needs of men and women resonating women's disadvantaged position and increasing marginality. A vast majority of elderly women are mostly self-employed and eke a living in subsistence agriculture, as petty traders, buyam-sellams²⁴ and farmers. In this category are widows (30%), who as my data and narratives point out are dispossessed and disempowered because of no formal education (62% for women against only 8% for men), elderly women have less access to housing (37% are renting).

Though some women are able to inherit their deceased husband's property as shown by my study, education is central in gender differences and economic well-being as observed by Knodel and Ofstedal (2003). Most widows are stripped of their deceased husband's property, other possessions and affected by customary traditions given the cultural context of anachronistic traditions and patriarchy, inimical to their socio-economic advancement. My data consonant with research in other context (Grieco 1987, Owen 1996, Apt 2002; UNFPA 2002; Beales 2000) on women's greater vulnerability equally highlight the dire straits of some widowers who are worst-off. While widows face deep-seated gender inequalities in ownership of assets, unstable

²⁴ In attempts to extend coverage by the Ministry of Labour and Social Security, providing social security for informal sector workers, particularly market women, farmers and self-employed remains central. See Cameroon Tribune, 06/10/06 and 19/10/06 'Sécurité sociale: Le secteur informel aussi' and 'Social Security: rural population mobilised'. The Minister of Labour and Social security Laments that social security provision in Cameroon is elitist and covers only about 1 million out of over 16 million people. In sensitization tours at Mokolo Market (Yaoundé) and Sa'a (Akonolinga), the minister made firm promises to address the situation.

work roles, lesser income and assets, equally, some widowers are trapped in debilitating poverty, neglect and not all are able to re-marry as often generalised (Ginn and Arber 1989). An informant mentioned lacking the means and resources to re-marry, had difficulties with daily care and food provision and shouldered the responsibility of looking after four children. Female elderly, who are childless are more marginalised and rendered highly vulnerable as a consequence of diminished asset base and support. Widows, who are indirect pension beneficiaries, survive on pensions that have been slashed and since most are illiterate (62%), they find it difficult to process widowhood allowances, follow up court procedures in order to reap the benefits as next of kin. The cultural context depicts a more complicated picture not accounted for by previous research (Owen 1996, Ginn and Arber 1989) as elderly women and widows in polygamous settings are more disempowered given the concept of 'disguised households'. Worst still, many do not have civil marriages and customary contractual arrangements are often flawed and disregarded. Arguably, some widows are able to secure their deceased husbands' assets and possessions by scaling through the cultural obstacles. As Knodel and Ofstedal (2003) contend, down sides associated with widowhood and widower hood varies with economic, social and cultural setting.

Children, grandchildren and hired helpers are very instrumental in providing care and support to the elderly, echoing some cracks within traditional support systems. Both gender indicated that they were counting on sibling support and in other cases, hired helpers to fill the gaps. Relatively, elderly women were receiving more such support ranging from assistance with farm work, cooking, cleaning, fetching water, firewood, being escorted to seek treatment and running errands. Interestingly, more men (24%)

relied on their spouse for daily care and provision of food. However, both elderly women and men relied on grand children and hired helpers (about 25%) with elderly women drawing more support. In the short and medium term, the well-being of the elderly is contingent on preserving these family welfare support systems. A limitation of my study is the fact that it did not probe into intergenerational exchanges and expected forms of support through interviewing children, grand children and other carers themselves. It would have been more elucidating if this category of persons were drawn in the sample to verify and triangulate some of the claims made by my respondents. Equally, it would have been informative to find out the gender dimension of care received and the gender most supported/affected by the short falls in social protection. Obviously, the phenomenon of hired helpers providing about 25% of care is symptomatic. This scenario uncovered in my study resurrects the debate on alternative forms of social protection being craved for.

These erstwhile traditional forms of support risk being further diluted due to the pressures of out-migration and urbanization as contained in the narratives. Accommodating the needs of minority ethnic groups like the Mbororo-Fulani nomadic population without any access to formal social security schemes pose a threat to Muslim and Fulani kin arrangements. Fulani perceive cattle as a marker of identity and a lifeline of social security. Elderly Fulani pass on herds of cattle to younger generation and count on kin obligations, often gendered, as insurance in old age. Targeting this group with greater access to veterinary services, literacy training and essential services for semi-sedentarized Fulani is crucial in strengthening kin support. From the accounts with this minority group, my study interrogates the fall-outs of modernization and other processes of change which appears overtly deterministic (Aboderin 2004) to the welfare and development of this group that relies

on kin and lineage support mechanisms. Trapped between westernization, urbanization and out-migration, younger Fulani are finding hard to provide obligated support for the kindred. More so, the dwindling number of adults and relatives who can provide care is a cause for concern. In this context, women appear on both sides of traditional and kin support mechanisms as disadvantaged receivers of care and contributors to care of others (spouses and other siblings). Further interviews with more Muslim women and Fulani widows would have revealed the degree of vulnerability experienced by this disadvantaged groups and especially the 'viability' of mutual support within Muslim religion and kin arrangements within Fulani lineage. Perhaps, vulnerability of the elderly and poverty in old age would have been better measured via spiralling youth unemployment, drop in purchasing power of households and the effects of HIV/AIDS pandemic, which are placing greater burdens on older people. As noted elsewhere (Van der Geest 1998), respect for the elderly is contingent on monetary contribution to households and standing (assets and resources) within the community.

My study challenges prevalent misconceptions of the old as liabilities rather than assets. It emerged that a vast majority of the elderly did not constitute a burden per se. Triggered by crippling poverty, soaring unemployment, out-migration and urbanization, there is a knock-on effect on the younger generation to provide care. Huge reversals in the intergenerational contract of young expected to look after the elderly and rapid social changes are undermining the support received by the elderly. Even monetary transfers (remittances), a direct form of income support remain very insignificant as 58% women and 48% men of my sample did not benefit from any form of monetary transfers. As a result of this grim state of affairs, the elderly,

particularly women with a depleted resource base are walking the tight rope through a gamut of livelihoods strategies in the informal economy. Equally, elderly men and women are key pillars in community development, faith-based and village-based organizations. The narratives point to a more pro-active role of elderly men in community development initiatives which spans key and strategic leadership position, community mobilisation, sourcing for funds and overseeing the execution of some community development projects like pipe-borne water, building of community halls and churches, organization of neighbourhood and village clean-up campaigns, participation in traditional council activities settling land disputes and other social concerns. Elderly women were more active in church activities and *njangis* with the implementation of some member-based and community projects, while in Muslim and Fulani communities, women seem to have muted voices with the men calling the shots as dictated by Islam and Fulani kin support and obligations.

A central question underpinning this research is the efficacy; viability and sustainability of semi-formal mechanisms of coverage the elderly are clinging onto. While these organizations are battling with rudimentary assistance related to funeral arrangements, social capital building and social networking, there are plagued by financial, organisational and governance concerns. The fragility is exemplified by the crippling poverty facing other members and lack of financial resources of the *njangis* themselves, limited service delivery, and a fractured institutional base. Members mostly draw psychological support and 'intangible' social benefits. However, state failure in social development makes the argument more compelling for these semi-formal organizations to wrestle with the provision of pressing needs and essential services. The context of welfare support for the elderly remains complex as different

scenarios pose different policy challenges. This thesis has explored the ways in which elderly men and women are coping against the shortfall in formal social security. The changing context of welfare support is evident through the diverse forms of support sought by the elderly, symptomatic of the complexity and heterogeneity of welfare support for old people (Lloyd-Sherlock 2006). Informed by empirical data and older people's narratives, this study points to the futuristic role of faith-based organizations, mutual societies and village development associations, as alternatives in filling the gaps in social protection as these organizations permeate most of the care and welfare arrangements of the elderly. In effect, the pivotal role of NGOs as a vital link in service delivery targeting the elderly remains crucial, more so, as the state is not in tune with the labyrinth of problems plaguing the social security sector. Improving support mechanisms for the elderly requires new direction in social policy that emphasizes greater involvement of NGOs, in collaboration with these semi-formal mechanisms of support, battling to address some of the material needs of elderly men and women.

10.2 Social Policy Implications and Recommendations

The starting process of a dignified ageing life begins with an acknowledgement of older persons' economic and social contribution and ways of enhancing their economic and social productivity. Government influence has been patchy, mostly driven by promises, lack of concrete action and a fractious collaboration²⁵ between key ministries charged with overseeing social security implementation and well-being of old persons. It is time for an effective platform of collaboration²⁶ between the state,

²⁵ See Mutations Quotidien, 20/10/06, 'sécurité sociale: comment se prépare le forum sur la réforme? Des partenaires sociaux et ministères dénoncent leur mise à l'écart des préparatifs, en dépit de leur participation annoncée aux travaux'.

²⁶ Facilitating partnership between all levels of government, civil society, the private sector, community-based organizations and older persons is contained in the International Strategy for Action on Ageing, 2nd World Assembly on Ageing, April 2002, available at:

village based associations; mutual societies; voluntary sector (NGOs); other organisations in civil society and other networks of support, and solidarity (mutual societies, faith-based and village development associations) in fashioning a new social security policy for Cameroon. This multi-faceted approach would give greater consideration to the needs of old persons in urban and particularly, rural areas. Most African rural economies are primarily agricultural, the majority of workers are self-employed and migrant, and jobs are seasonal and not waged-based (Tracy 1991). Worst still, women workers surviving on agriculture, domestic workers and those outside formal labour markets (Ginneken 2002) are in despair.

Arguably, the road ahead for social policy formulation is underpinned by the different scenarios and support mechanisms for the elderly: those with access and non-access to pensions, frail elderly, elderly farmers battling to survive in both urban and rural areas and cut off from any formal coverage and particularly widows, who are worst-off as a result of some traditional obstacles. Against this backdrop, there is need for a rethink of strategies in extending social protection for the vast majority who are not covered. Some cardinal questions for policy implications of this study are: How do the elderly survive in the midst of inadequate formal social protection and what alternative forms of social protection would benefit them? What needs to be done to make pension administration more people-oriented rather than bureaucratic and corrupt? What social policies can be pursued to improve elderly well-being? How can coverage be extended to the vast majority of self-employed traders and farmers? What regulatory framework can make semi-formal networks of social protection more viable? In extending social security coverage, can these networks (mutual societies, faith - based

<http://www.un.org/ageing/coverage/>. In turn, van Ginneken (1999) calls for a participatory and practical approach to social security extension for the vast majority without any formal coverage.

organisations, village development associations) constitute potential sources of building social capital, citizen participation in social protection? How can vulnerable groups like widows and widowers be assisted?

It is tricky to assign responsibilities to a state mired in corruption, poor governance and a bungling democracy. Based on the different scenarios, the questions just cited point to the complexity of social policy formulation considering the fault lines in state support. My policy recommendations are underpinned by an underlying problem that is extremely serious. In the face of these deep-seated problems, the premise of this study is to emphasize that any improvement is better. In this connection, a social policy rethink should involve partnerships with the voluntary sector and other organizations in civil society. A potential policy option would be the introduction of micro-insurance schemes within village-based organizations and mutual societies. Such micro-insurance schemes, based on individual contributions targeting hospitalisation, medical costs, and micro-credit schemes to support the entrepreneurial activities of elderly members. So far, these organizations are strong in social networking (*njangis*, births, deaths, marriages) and merely sporadic support with other contingencies. A possibility could be the incorporation of local NGOs in building a micro-insurance scheme emphasizing health care and community development initiatives. Local NGOs could engineer the creation of cooperative banks in rural areas. Working in partnership with success stories like Cameroon Cooperative Credit Union League and Azire Cooperative Credit Union, such a scheme would permit the elderly to sign up for minimal private pension and insurance schemes. This would entail making regular payments based on individual earnings.

Without pretending to be idealistic, it is clear as this research portrays, that there are elderly experiencing great hardship, those needing less support, and the policy options should be anchored on the specific needs and scenarios identified. Government can initiate moves toward providing some allowances for women and men aged 70 and over and frail elderly without pensions. The provision of some material support and cash transfers will go a long way in alleviating hardship and financial misery. Also, moderate mandatory contributions, pooled into a contingency fund set up by the organisation in which the elderly hold key membership can be another way out. However, there are serious concerns with building trust, accountability and transparency in managing contributed funds. Elderly of integrity and high repute should be drafted in given their status and expertise in running such a scheme in the short and medium term. For the long term, community banks can be set up with state institutional back up to take care of the contributions in an organised and sustainable fashion. Such local community or cooperative banks would cover the needs of self-employed, farmers and those involved in agriculture in rural areas, mostly uncovered by formal social security. Such a scheme would give elderly people greater agency in determining their choices.

Another potential policy option is improving health care delivery for the elderly. International agencies working in partnership with local NGOs could focus on frontline preventive treatment through early diagnosis. Tackling the problem head-on, before the disease becomes critical is imperative. The setting up of mobile clinic days in both rural and urban areas where medics and other paramedics carry out screening, diagnosis and prescription is not only cost-cutting but cost-effective and would save the elderly long exhaustive journeys in order to seek medical attention. Free medical,

help with diagnostic and laboratory tests can be small, yet very significant start of supporting the elderly with health costs. A vast majority of older people live in rural areas, where formal health care infrastructure is rudimentary. Poor older people often face both direct and indirect economic barriers to health services. User fees and co-payments for public health care are now common practice in most developing countries (Dinotshe Tou and Sandberg, 1994). The forms of economic livelihood pursued by poor older people are varied, reflecting their heterogeneity as a group and the contexts in which they live (Lloyd-Sherlock 2000). But the nature and scale of activity that older people engage in are often underrepresented in official surveys (UN 1991) and levels of activity are especially high for poor elders, who have to struggle extra hard to eke a living. An option to explore by government in partnership with international agencies is to offer discounts on transportation, medication, food and other basic necessities.

There are no straightforward answers given the specific needs of the elderly. With entrenched corruption in which the political elite grow rich while the mass of the people remain poor, it is daunting for any laudable initiatives by the state to turn around the grim situation of old people. A rethink of the development context with international and local NGOs calling the shots through concerted action may produce better results. The price of care would prove daunting in the near future and NGOs could empower the elderly to be more proactive in improving their lot.

An avenue for redressing the plight of the elderly can be mediated through village development associations, trade unions and NGOs to deal with material, geriatric care and other basic needs. Gorman (2002) argues that NGOs could play a leading role in

advocacy and dealing with disempowerment of poor elderly people. This could be done through community action schemes such as community banking and income generation activities but most local NGOs lack the necessary resources. Trade Unions like Mutuelles Des Personnes Âgées du Cameroun (MUPAC) and NGOs like the Centre for Human Resources Development (CEHDEV), uplifting the livelihoods of retirees and old persons through snail domestication in Mamfe of the South West Province should be supported with start-off funds, seedlings and technical assistance from international development agencies and NGOs. Other NGOs in the likes of the Community Development Volunteers for Technical Assistance (CDVTA), undertaking social development home care projects for the elderly in the North West Province exemplify the pivotal role of local NGOs. Presently, the CDVTA receives assistance from the Methodist Relief and Development Fund, the British Methodist Church's agency for international development. Also, the Regional Centre for the Welfare of Ageing Persons in Cameroon (RECEWAPEC), an affiliate of Help-the-Aged, which fights against elder abuse and violation of the rights of older persons pertaining to land dispossession should be strengthened through committed funding.

Alternatively, the creation of a Senior Citizens Bureau coordinating other grassroots associations and clubs (for instance widows, widowers and pensioners) would enable them to advocate for their rights through appropriate legislation in parliament, press for social services from local and urban councils and be involved in marketing and other community ventures. Associations for the elderly constituted by old people themselves would permit them to look for better ways of coping. Such associations come up with a databank of senior citizens, possibly by regions based on identification of appropriate anti-poverty projects. Certainly, this will create greater

awareness of the plight of old people; promote economic and other interests in collaboration with non-governmental organisations and other agencies. In rooting these associations, faith-based organizations and NGOs in the domain of Human Rights advocacy could set-up paralegal centres. At the centres, paralegal education can be dispensed to tackle ignorance, misinformation on basic rights, particularly affecting widows. Community paralegal associations would address the need of accessible justice by empowering powerless widows to uphold their social, economic, civic and political rights. Widows who face trying times over marriage laws, succession and inheritance issues and other anachronistic traditions can seek for legal redress.

Unarguably, as findings indicate, the route towards a viable social security system for the elderly hinges on a reconfiguration of social policy. The onus of responsibility rests on the practicalities of extending coverage particularly to the elderly in rural areas. Given the thorny problem of social security provision in Cameroon, worsened by economic meltdown and restructuring, the government finds it hard to extend coverage. Worst still, the provision of basic social services for deprived rural populations are proving extremely difficult if not impossible. The noticeable crack within familial and traditional society for old people calls for a closer scrutiny of other alternative forms of social support for the elderly.

The analysis of my data suggests that a re-alignment of social policy must start with a genuine assessment of the contours of social security and the well-being of old persons. Given the complex picture of care received by the elderly, social policy formulation must be driven by a mixture of formal and semi-formal arrangements.

Emergent trends indicate that the current socio-economic mutation marked by urbanization, out-migration, and unemployment is threatening the foundation of kinship and familial support that old people have relied on. Evidently, old people still count on grand children and children for support in terms of daily activities relating to care, food, clothing, medication, firewood, fetching water, farm work. The novel phenomenon of hired helpers indicates the gradual disintegration of traditional forms of support and the fashioning of alternative ways of providing care for old people. Though old men and women are battling to make ends meet, most of their basic needs remain unmet. The variations in levels of care paint a sombre picture for frail elderly. Being physically incapacitated and with little support, they are worst-off with cash in short supply.

The trajectory of social policy options for old people in Cameroon paint a bleak picture of the bankruptcy of the welfare state. Certainly, this is attributed to the abysmally low coverage offered; the red tape surrounding the processing of pensions, the dearth of social services like water, health centres, electricity and roads to cater for the economic interests of the population including old people, particularly in remote villages. The complexity of providing social protection for all in a context of resource constraints and economic downturn is further marred by endemic corruption, which is harming efforts. Bribery and corruption is rife within the Public Service. The follow-up of files by pensioners is a recurrent complaint that emerged in accounts of some interviewees, who had served as civil servants.

Interviewees recounted their ordeal in the compilation and processing, others reported that documents went missing after being submitted. Such documents would resurface

when the officials treating them are offered bribes. Centralization and duplicated bureaucracy was a nightmare for elderly pensioners. Many feared undertaking risky journeys to Yaoundé to chase files. Others who get frustrated because of the stifling bureaucracy resort to the hiring of agents and intermediaries that demand a huge ransom, in most cases an agreed percentage of the expected lump sum of the entitlements. Still, others attempted short-circuiting the process by grouping themselves and delegating one person to chase the files. All these accounts point to the side effects of corruption and mismanagement which is affecting the welfare of the elderly who depend on income from pensions. A possible option should be greater decentralization in the processing of files and payment of pension entitlements. The setting-up of mobile task force for checking dossiers in small towns by local administrative units of relevant Ministries like Public Service and Administrative Control, Labour and Social Security, Economy and Finance and Social Affairs, could save people long and exhaustive journeys in chasing of files. The CNPS should move further with its decentralized pay centres to reduce the plight of beneficiaries.

Tackling the deep seated problems rather than the symptoms is required as new generations of the elderly, operating in the private sector and who have to set up occupational pensions schemes are also trapped in bureaucracy. Sadly, this is the case of some crooked employers who do not do pay in employee contributions to the National Social Insurance Fund. That they prefer to offer bribes to Social Insurance officials is symptomatic of the malaise with social security administration in Cameroon. Though there is a regulatory framework between the Ministry of Economy and Finance and CNPS to collect dues from private sector employers by CNPS tax

recovery unit, such efforts are being stymied by corrupt practices and unscrupulous employers.

Given the key role played by *njangis*, mutual societies, faith-based and village-based organizations in building social capital and provision of some form of social security for farmers and other self-employed workers in urban and rural areas, it is vital for leadership and trust to be re-invigorated. Most *njangis*, particularly in rural areas do not have a written constitution. Admittedly, it is difficult for a written constitution to re-invigorate trust as there is the danger of replicating the state structure where everything is good on paper but nothing works. The real issue is how to build trust and involving people who are honest, have the right reputation and character. In this connection, the active involvement of the elderly with the listed qualities may make some of these institutions more trustworthy and viable.

With the 1990 Law of Associations, *njangis* are expected to register with the Divisional office in the locality. This is not the case in rural areas. There most *njangis* are not registered with the state. Members rely on the trust and accountability of their leaders with some significant failings: there are reports of some unscrupulous leaders manipulating groups on issues like savings, interest allocations and default charges. Also, the name and shame policy and the sanctioning of defaulters through the police, bailiffs and eventually the court engender conflict and create schism. Though some *njangis* have Executive structures set up, the active description and devolution of responsibilities is not fully implemented. These leaves room for some Presidents to become too powerful and 'sole proprietors of the *njangi*'. A fundamental, yet unaddressed issue is the fact that rotating credit societies are not structured to handle

money. Members usually count on the honesty, goodwill, accountability and transparency of the President. There are no in-built mechanisms for checks and balances. Though most *njangis* have auditors, they function rarely and may become active when the finances are already in the red. In some *njangis*, there are no veritable deliberations and decisions are most often not democratically arrived at. Though the social component (births, deaths, marriages) of *njangis* appears strong, the economic component (contributions against ill health, unemployment) is weaker. The amount contributed to defray hospitalisation costs is inadequate and support remains mostly supplementary, psychological and not financial. Given the fault lines, there is need for training by key government ministries drawing expertise from government Departments, voluntary sector and organisations in civil society to strengthen both the social, economic and familial components of *njangis* and other support networks. Supporting *njangis* through training programmes on leadership, record keeping, governance, and accountability will build greater trust within *njangis*. Also, these training schemes should put in place specific measures to try to ease the hardship of different categories of the elderly. These include helping people to shape retirement and post-retirement life plans and promoting small-trade initiatives among the elderly.

Tackling the concerns of the elderly has proved daunting because of other ancillary problems stemming from inadequate inter-ministerial linkages and collaboration. Though Cameroon sticks to ILO convention 102 in its policy formulation and implementation of social security, there is a huge gap between formulation and implementation in respect of the well-being of old persons as government action is marked by a strong language and less substance. There has been no commitment of vital resources, proper planning and coordination between key government

departments. Line ministries in the frontlines of social welfare (e.g. Social Affairs, and Women's Affairs) are not adequately funded and personnel, mostly untrained in providing key services for old persons. The apparent dysfunction within the state is underlined by lack of clear cut policies, delineation of responsibilities, demarcation of boundaries for inter-ministerial linkages and no coordination/collaboration between rival ministries.

Generalised penury and increasing levels of urban/rural poverty makes life hard for old people. Unemployment is on the rise; living standards of citizenry on the decline given the implementation of Structural Adjustment policies with cutbacks on social services and introduction of user fees. Access to income, essential services like water, roads, health care, electricity are in short supply. This is worsened by the plundering of vital resources through economic mismanagement and endemic corruption. Most old people I interviewed stated that they pay excessive user fees for essential services in urban areas. Worst still, most interviewees were not familiar with the role of the Ministry of Social Affairs and the existence of a Department for the Protection of Old Persons.

Certainly, elderly men fare better than women in terms of coping mechanisms occasioned by access to pensions (though not regularly paid), economic assets and a resource base, greater involvement in the rural economy because of ownership to land and counting on investments during the period of servitude in the public service. Women's tenuous access to land jeopardises their efforts at securing livelihoods as they have to strain more. Both male and female elderly are leaning on networks of support and reciprocity though it is difficult to measure the tangible benefits in terms

of welfare and real income generating potential. Most old persons are carried along by the social networking within *njangis* and other groups without being aware of its palpable returns.

Mutual societies are cropping up, re-invented and revived within the civil service to suit the changing times. As discussed earlier, the case is being made for mutual societies and village based organisations, operating in rural and urban areas (conceptualised in the research as semi-formal) to build in strong micro insurance schemes that target health insurance schemes for members. This proposition is in alignment with the thinking of the ILO and key commentators like van Ginneken (1999) Jutting (2000), Lloyd-Sherlock (2000) on the role of member based organisations in social protection and poverty reduction for pro-poor. Others have underscored the need for greater collaboration between these actors and the state. As a corollary, findings project mutual societies, faith-based organizations and other village-based associations as instrumental in devising social protection schemes. Faith groups in particular are not only involved in moral regeneration but are providing safety nets, though such assistance remains a pittance. International development agencies and other local NGOs can target these groups in providing material support for the elderly. Social protection is also delivered in a specific context, where people have something in common and reflects the principle of solidarity like the case of Ubuntu in South Africa (see Dekker 2003).

Greater recognition should be given to the role of old persons in community development. Development policy planning should take cognizance of this (Beales 2000 and Sweetman 2000). Old people in Africa and Cameroon in particular, are

unsung heroes considering their input in a context of soaring unemployment and general penury. Their efforts should be acknowledged through social assistance schemes. This could take the form of reductions in consultation and health costs. Making the case for rural development that targets the welfare of old people in rural areas is mandatory considering the dearth of social services. Midgley (1997) contends that the poor can be reached using other policy measures than social transfers. Subsidies for certain foodstuffs, housing and education subsidies, and regional development projects are possible strategies. These strategies can be implemented in various ways, and raise problems of their own. Granting discounts or subsidising utilities like electricity, water for households run by the elderly. Also, lowering consultation fees and other health costs, reduction in taxes for activities/businesses run by old people should be priority areas for government intervention, though tricky because it is so easy to exploit/defraud. There is a deficit of social development planning and particularly rural development which is in short supply. Most rural areas do not have health centres and those that are fortunate to have, are short of qualified medical personnel and essential drugs. Lloyd-Sherlock (2004b) makes the point that the strengthening of primary health care within the framework of preventive care for old people in developing countries has been largely a forgotten issue by most governments. Primary health care must be developed in collaboration with major stakeholders. Close relationships between health workers, social services and NGOs underpins targeted support for older people. The logical goal would be to develop targeted systems of integrated community care (Adrian 1999:47). At best, these health centres and clinics offer mostly very basic and rudimentary health care. The total absence of doctors and other allied health personnel specialising in geriatric care is telling. Most elderly suffering from chronic diseases like diabetes, stroke,

hypertension, high blood pressure, and cancer indicated that they resort to using herbs initially. When it becomes untreatable, they move to urban areas and still cannot find the expert doctors with specialty in diseases that are prevalent with the elderly. Rural areas are neglected and not getting their fair share of development. Connecting old people with rural areas would require improvements in health care, housing, roads, provision of water, employment and other social facilities.

A possibility is the creation of drop-in services at the Ministries of Public Service, Health, Women's and Social Affairs; Labour and social security and CNPS Provincial centres to offer advice and counselling. The psychological preparation of civil servants and informal sector workers either preparing to go on retirement or already retired is crucial. Those already retired can be assisted with the constitution of files in order to avoid delays that have proved fatal for some pensioners. Reconfiguring the whole concept of retirement and working on the mindset of retirees is important. The Public Service in Cameroon emasculates civil servants as they find it a traumatic experience and a shock when they are approaching retirement age. Based on some accounts, most old persons are ill prepared for retirement and there are reported cases of persons altering their date of births in order to continue working. The service would certainly help in stabilising psychologically would-be retirees and receive complaints related to neglect and other concerns from old persons particularly in rural areas. The drop-in service is especially crucial for most informal sector workers who are not sure if their retirement contributions were paid into the CNPS. Such services could chase the files of claimants, advice on liquidation and bankruptcy cases for private sector pensions and also offer assistance to old persons particularly in rural areas, who require support with economic and other income generating activities.

Training of Social Assistants, undertaken by the Ministry of Social Affairs should lay more emphasis on the situation of old persons without access and services should be re-aligned to address their specific needs. This should involve food and nutrition training, environmental and personal hygiene programmes, elderly and adolescent interaction programmes to foster mutual respect. This can be strengthened through Geriatric and Social Gerontology short courses and training programmes.

Recognizing and supporting the creation of associations for old persons, and pensioners by institutions working with old persons would be welcome. Elderly farm clubs, civic groups; marketing groups and associations would enhance solidarity amongst the elderly, fight boredom and isolation. Also, the creation of community centres for older people to enforce exchanges on communal life, welfare support, non-formal education, youth counselling and mentoring on aspects like community relations, ethnicity and national integration, marriage, HIV/AIDS, building a career. These centres can be active during summer holidays where the youth can visit and tap from the repertoire of wisdom and experience of the elderly.

As shown by my data, most of the elderly eke a living through a raft of entrepreneurial activities. Consequently, there is urgent need to harness the potential contribution of the elderly. This is crucial to the evolution of any viable social protection policy that takes cognizance of the specific circumstances of old people. Solidarity schemes run by voluntary organisations and village development associations should provide basic needs like food, warm clothing, blankets, lanterns, training in food and hygiene, improvements in housing and out-reach health clinics directed at frail elderly. A whole range of support services needed by old people is

either non-existent or in a state of disrepair. In attempts to bridge the poverty gap, the role of NGOs in improving access to health care, nutritional intake, and micro-insurance schemes constitute avenues for direct service delivery.

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Semi-structured Interview Schedule

Demographic and Socio-economic Characteristics

1. Gender (Male /Female) _____

2. What is your ethnicity? _____

3. Can you estimate your age range? 60-65, 65-75, 75-85, 85 plus _____

4. Marital status a) Currently married _____ b) Single/Never married
_____ c) widow/widower _____ d) Divorced/Separated
_____ e) Other (specify) _____

5. Religion a) Christian _____ b) Islam _____ c)
Traditionalist _____ Other _____

6. What form of social security is provided within your faith/religious denomination?

7. Educational attainment a) Primary _____ b) Secondary and High
School _____ c) University _____ d) Vocational _____ e) No formal
education _____

8. What is your previous occupation?
9. Have you worked in the public service? a) Yes _____ b) No _____
10. If answer is yes, have you been receiving your entitlements and did you encounter any difficulties in processing the pension _____
11. What other activities do you undertake as a retired person e.g. farming, trading etc
12. What is your present occupation if you have not served in the public service?
13. Are you physically healthy and able to carry on with your daily activities?

14. Do you still undertake paid or unpaid work and what sort of work?

15. How many children do you have (both immediate and grand children)? a)
Children _____ b) Grand children _____
16. How many are male _____ and Female _____

17. Please, indicate the number of dependents in your household who still rely on your support_____

18. What form of support do you provide to them_____

19. Are you a member of any mutual society and Village development association?

20. If yes, what form of social security is provided?

21. Do you hold membership within a Njangi group(s)(rotating credit association) and are you into weekly, monthly or annual meetings?

Elderly welfare, Adjustment Patterns and Ways of Coping

22. Are you an elder (use local word) and how is an elderly person viewed in your culture?

23. Where do you reside? a) Rural area (Village of origin) _____ b) Peri-urban area (slightly more developed than rural area)_____ c) Urban area_____

24. Do you prefer to reside in the rural area (village) or urban area and why?

25. Indicate the time spent in area of residence _____

26. Please, state if you are residing alone, with married son, married daughter, spouse or with your children, grand children and other close kin relations _____

27. Do you receive any form of support from your family, children and grand children? a) What form of support do you receive b) Mention the assistance that has been most helpful in your daily life as a granny (grand mama/grand papa)?

Form of Support	Provider	Frequency of Support
Care		
Food		
Clothing		
Medication		
Remittances		
Firewood		
Water		
Assistance with farm work		

28. Do you receive more support from your male or female children?

29. What sort of treatment did you get for your last illness and where was it treated?

30. What are some of the diseases, ailments that you have suffered from for a long time? _____

31. When you are unwell, who accompanies you to get treatment?
32. How do you cope with your activities of daily living, in terms of preparing food, bathing, buying/selling in the market etc?
33. How do you communicate to close ones when in need?
34. Do you own a mobile phone? If yes, how often are you contacted by family and other relations _____
35. How often do you receive visits and contacts from your
(a) children (b) grandchildren (c) other family relations (d) friends (e) neighbours
and what form of support do they offer you? _____
36. Do you receive more support from your female or male children?
37. Have you ever had the feeling of loneliness, isolation, abandonment and neglect by your children, grand children and family relations?
38. Are you consulted by your children, community and close kin for advice on important decisions? _____

39. What are some of the issues you have been consulted on and what was your advice? _____
40. Have you ever visited your sons, daughters and grandchildren in the city? If yes, please indicate and the number of visits paid _____
41. Have you received any support from your village development association, traditional kinship arrangements, social services, charities and other community social support networks? _____
42. In your own opinion, what are the attributes of a respected elderly person and what makes an elder to command respect within the household and community?
43. Have you been a victim of any form of disrespect, elder abuse, and violence within your household and community? If yes, what sort of abuse and how did you feel about it?
44. What social or community pass time activities do you participate in?
45. Are you are a member of any association that caters for the welfare and interest of the elderly? What are some of the issues of mutual interest handled within the association?

46. In your opinion, do you think the traditional system of social security (based on family and extended family support) can still be relied upon?

Gender Dynamics of Elderly Welfare

47. What are the social services that are accessible to you within your locality or community?

48. Are you the head of the household and is your partner/spouse still surviving?

49. If a single person, how are you coping with daily life? Since your partner died, are there any cultural practices that have affected your livelihood?

50. What are the new roles you are forced to play with the absence of your spouse?

51. What are the specific problems you are confronted with as an elderly man or woman?

52. Do you own a home, are sharing with a relation or renting?

53. Are you comfortable with your living conditions?

54. In your opinion, do men or women find it difficult to cope with ageing?

55. Are you affected by the halt in (formal/informal) employment on your daily routine?

56. Do you rely on accrued assets/possessions (e.g. landed property, cattle), pension benefits of your spouse for survival? If no, what economic activities are you engaged in for livelihood?

57. a) In the face of the processes of economic restructuring, structural adjustment, and diminished state intervention in welfare provision, how are you affected as a male or female?

b) Do you think the state should provide care for the elderly?

Village Development Associations (VDAs), Mutual Societies (MS) and Njangi Groups (NG)

1. What is the name of your VDA, MS and NG?

2. Does the name bear any meaning or symbolism?

3. When was your association, society or group created and what were the motivating factors?

4. Does your Association, Mutual Society or Group have any collaboration with the local administration?
5. Are members recruited into the group on the basis of ethnicity, geographic location, income, age, socio-economic background and class?
6. Has the changing socio-economic and political context since the early-1990s affected the functioning of the association, group and society?
7. What type(s) of social security and elderly support is provided by your organisation?
8. What factors pushed your VDA, MS and Group to embark on social security provision?
9. How is your organisation structured to handle the social security and welfare needs of members?
10. How much contribution (in-cash) is expected from members.
11. Are dues paid by members statutory or they vary depending on the project?
12. Do men and women in rural, semi-urban and urban areas pay the same amount of contribution? Are there any disparities in terms of class (i.e. elite women and elite men) and are the elites obliged to contribute differently?

13. Quite apart from social protection, what other activities are undertaken by your organisation.
14. How does your organisation handle cases of members' default and recalcitrance (i.e. unwillingness to participate, failure to honour financial engagements and utter disregard of the organisation)?
15. Are there cases where members have opted out because of poverty, poor management, lack of accountability and corruption?
16. What problems have you encountered in the functioning of your organisation?
17. Do you hold the opinion that your organisation can provide social protection for members independent of the state?
18. Suggest ways of improving social protection for members.

Information for Informed Consent

Research entitled: ‘Gender Dynamics of Elderly Welfare and Semi-formal Protection in Cameroon’.

I am Charles Fonchingong Che and currently undertaking a Doctorate by research at the University of Kent at Canterbury. The purpose of this study is to ascertain how the elderly (men and women) are coping in the face of limited social protection, declining incomes and generalised hardship. Also, the novel ways of providing support for the elderly in the context of the shortfall would be examined. Arguably, new forms of citizen organising and other traditional/indigenous forms of solidarity, reciprocity and support are being re-invented to suit the changing times. The present study looks at alternative arrangements the elderly are clinging onto and how that is affecting livelihoods. The research will contribute to current debates in social policy formulation on the role of informal institutions in social welfare, the place of the elderly in livelihoods improvement and community building. These alternative ways of providing social protection in Cameroon are referred to in the study as semi-formal mechanisms.

In-depth interviews will be held with elderly men and women purposively selected in the study sites. Interviews will last for about one and half hour and would be recorded. Please, rest assured that if for whatever reason, you do not wish to continue with the interviewing, you may withdraw at any time. All tape recordings and your responses will remain strictly confidential and will be used for the purpose of research only. Questions embedded in the interview schedule would be explained to interviewees who are not literate and their consent sought.

Thank you for participating in this research, which hopefully, would generate useful data on the way forward for social protection in Cameroon. Should you require further information, please do not hesitate to contact me by phone or email.

Yours sincerely,



Charles Fonchingong Che
cfonchingong@yahoo.com

22 February 2006

LETTER OF CONFIRMATION OF STUDENT STATUS

TO WHOM IT MAY CONCERN:

I hereby confirm that Mr. Charles Fonchingong Che is a student registered for the degree of PhD in Social Policy at the School of Social Policy, Sociology and Social Research at the University of Kent, Canterbury, England.

As part of his studies, Mr. Fonchingong is carrying out research on welfare of the elderly and semi-formal protection in Cameroon (NW and SW Provinces).

The research has been approved by an ethics committee of the University of Kent. The information Mr. Fonchingong collects will be regarded as confidential and he will ensure that it is not possible to identify any individual in the reports he write of his research.

I should be grateful if you could co-operate with his research.

Yours Sincerely



DR LAVINIA MITTON

Lecturer in Social Policy and Charles Fonchingong Che's supervisor, University of Kent.





FACULTY OF SOCIAL AND MANAGEMENT SCIENCES

Dean: Dr. Martha TUMNDE Née Njikam S
Vice Dean/PAA: Dr. Enoh Tanjong
Vice Dean/SAR: Dr. Joyce Bayande Endeley

Our Ref: 10388/UB/D/FSMS

Your Ref: _____


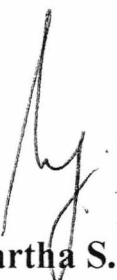
Date 26 AVR. 2006

TO WHOM IT MAY CONCERN

This is to certify that Mr. Charles Fonchingong Che is a lecturer in the Department of Women and Gender Studies and currently studying for a Ph.D in Social Policy at the school of Social Policy, Sociology and Social Research at the University of Kent, Canterbury, England.

As part of his studies, Mr. Fonchingong is carrying out research on welfare of the elderly and semi-formal protection in Cameroon (North West and South West Provinces). He will be collecting data from selected respondents, mutual societies and village based organizations.

I should be very grateful if you cooperate with his research.



Dr. Martha S. Tumnde

Dean, Faculty of Social and Management Sciences.

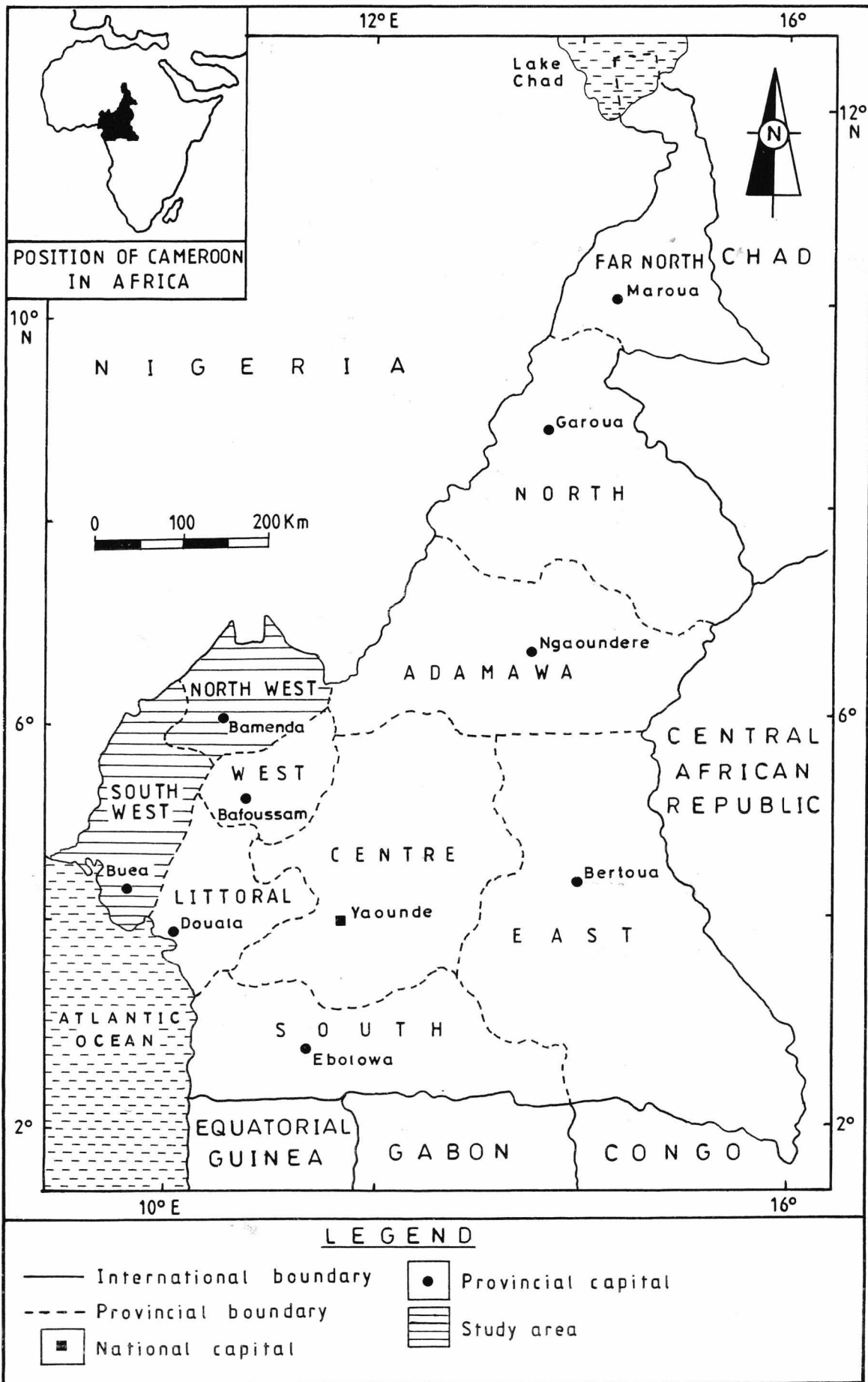


Fig.1: Map of Cameroon showing the study area (North West and South West Provinces).

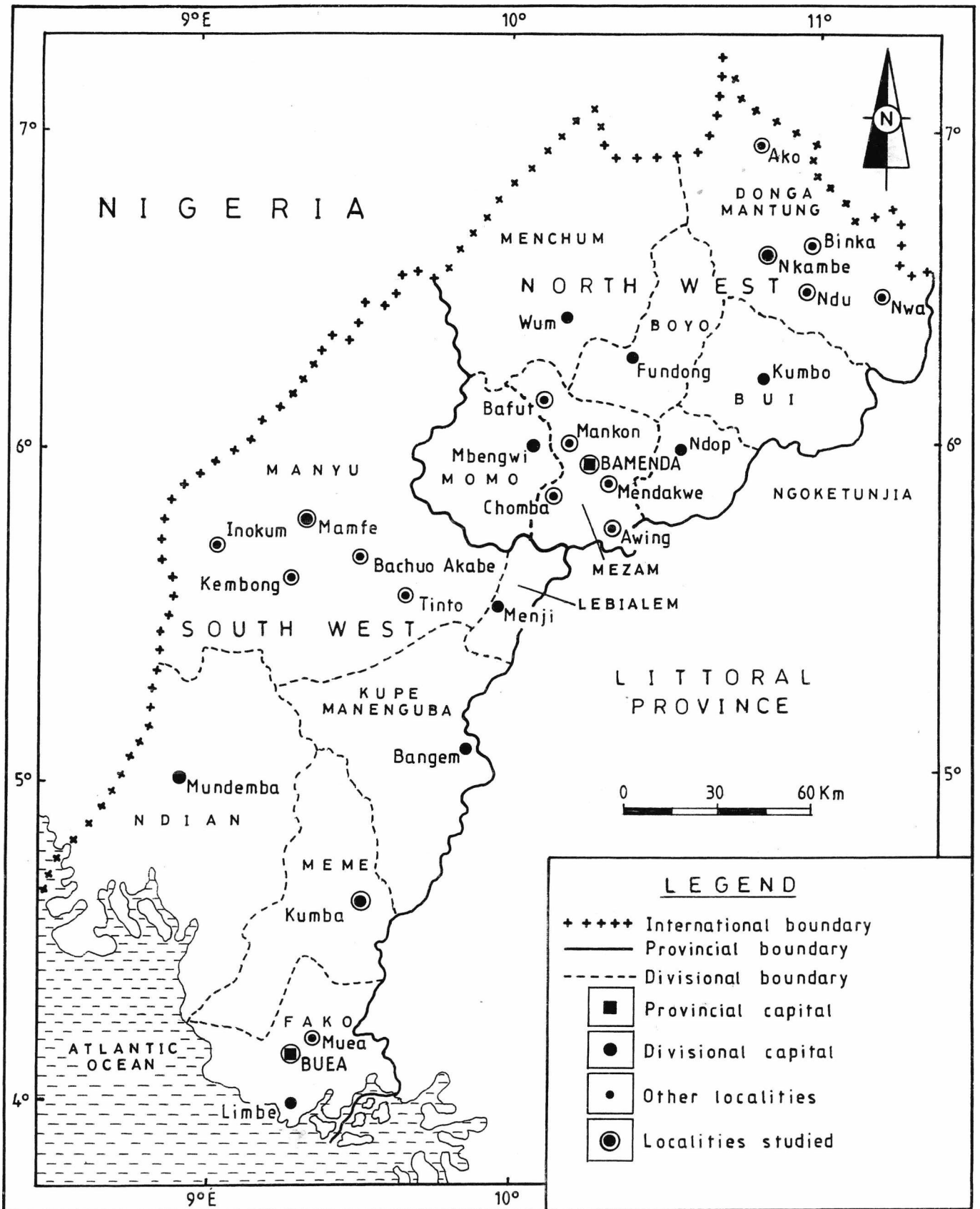


Fig. 2: Map of the study area showing major localities studied.

Plate 1: Frail elderly with grand children in a rural area.



Plate 2: Widow with grand child in an urban area.



Plate 3: Widow selling assorted food items in a rural market.



Plate 4: *Njangis* and social capital building: Case of Wimbum Women's *njangi* in session.

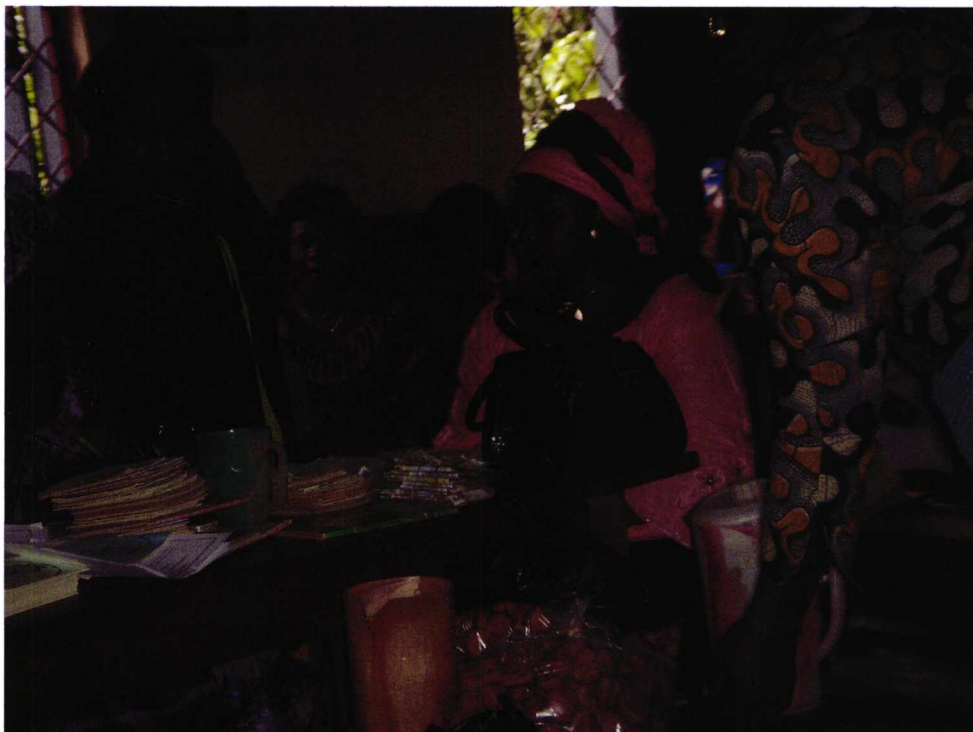


Plate 5: Elderly male selling used blankets and bed spreads.



Plate 6: Elderly, traditional herbalist selling local herbs in a rural market.



Plate 7: Kola nuts and *shah* (local beer), symbols of cultural identity used in entertaining members at meetings.

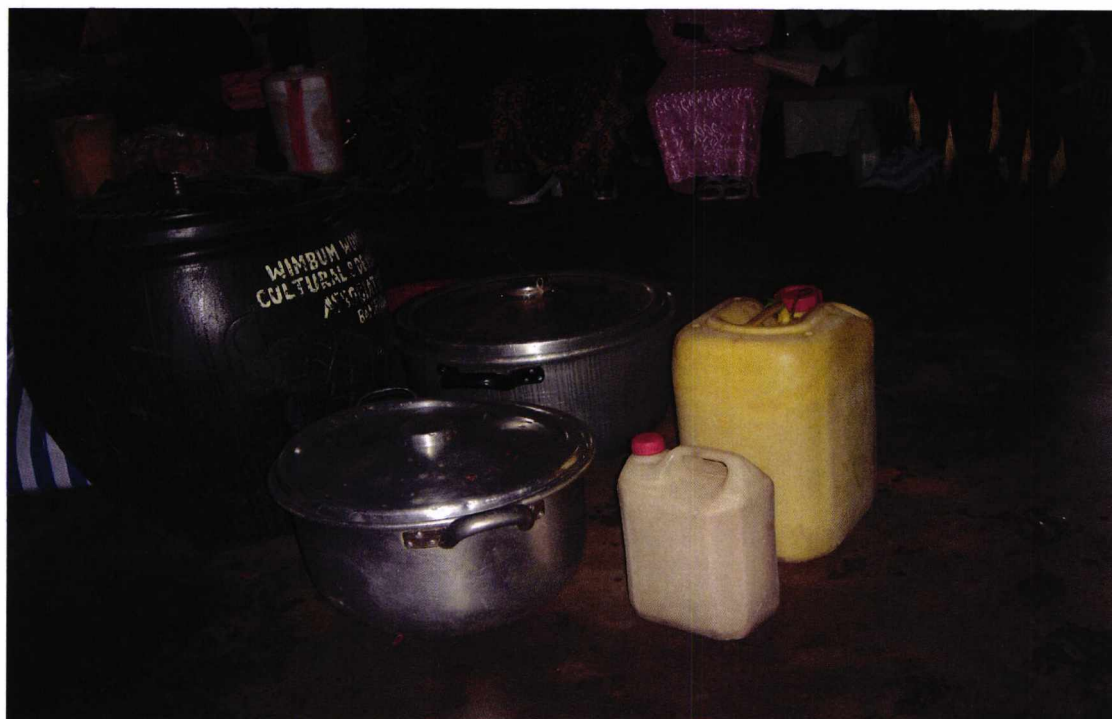


Plate 8: Enclosure for rearing goats attached to the home of an elderly in a rural area.



Plate 9: Counting on leadership and trust in *njangis* : President and executive members of Wimbum women's *njangi*.



Plate 10: Elderly taking charge of household provisioning.

