Impact of Housing Location on Older Persons' Perceptions of Safety, Privacy and Psychosocial Wellbeing in Alexander, North of Johannesburg

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ABSTRACT In their old age, senior citizens require adequate housing that promotes their wellbeing, and this study seeks to examine the impact of housing location on older adults' safety, security and psychosocial wellbeing. This qualitative study utilised semi-structured interviews to collect data from nine older persons residing in Alexander, North of Johannesburg in South Africa. Data were transcribed and analysed based on emergent themes. Among other factors, the study found out that housing quality and the level of crime in their neighbourhood determine the wellbeing of older persons. While participants who lived with their grandchildren felt safer, some expressed a lower sense of privacy due to overcrowding. One participant who lived alone but in formal housing expressed a higher sense of safety and security. As most older persons were direct victims of colonial and apartheid exclusion, thoughtful integrated social policies are imperative in leveraging their housing needs and overall wellbeing.

INTRODUCTION

Improvements in nutrition and health care have resulted in longer life expectancy as evidenced by the growing global population of older adults. In 2018, the United States (US) Census Bureau (2018) projected that by 2035, the US population of people aged 65 years and older will outstrip that of children under 18 years old. A similar trend of elderly population spike was reported by the United Nations Department of Economics and Social Affairs (DESA) (2020) which estimated it at 727 million, projecting it to be over 1.5 billion by 2050. Sub-Saharan Africa is said to have recorded a huge increase in older adults due to remarkable improvements in life expectancy (DESA 2020). These are unprecedented demographic shifts that demand governments to quickly cater to the needs and the wellbeing of the growing number of older adults in their respective countries. One area of such needs is housing especially as the Sustainable Development Goals stress housing as a basic need that fosters inclusion and promote the socio-economic rights for older adults.

Housing is critical for older adults, some of whom are frail, have limited mobility due to old age-related comorbidities and disabilities. Housing is more than just brick and mortar; it forms part of complex discourses which incorporate shelter, the community, the personal and a nexus of relations that yield either negative or supportive meanings to the occupants. Housing and its location matter in social policy as part of a transformational agenda to build inclusive societies notably for older adults, vulnerable and marginalised groups in South Africa (Noyoo and Sobantu 2019). South Africa has deeply fragmented urban spaces due to the legacy of forceful relocation of black people through the 1913 Native Land Act to overcrowded and poorly resource townships (Davenport 1991; Parnell 1991). The locational disadvantage has locked many black people into these perilous and squalid living arrangements. Thus, most houses and neighbourhoods are not adapted to the needs

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of poor older persons, making it impossible for this vulnerable population age group to engage in their activities of daily living activities (ADLs) (Howden-Chapman et al. 1999; DESA 2020).

Howden-Chapman et al. (2011) underline that older adults with dementia and other mental health illnesses need housing and enabling locations that proffer understanding, care, and patience for them to enjoy life in their old age. In their later years of life, it is fundamental that the housing environment aids their independence, affirms their belonging while also enabling them to bond with the larger society (Howden et al. 2011). Thus, adequate housing in well located neighbourhoods is critical for the psycho-emotional well-being of older adults (Okoye 2012; Henilane 2016). It is disappointing to note that the housing and neighbourhood environment for many older adults in South Africa excludes them from access to electricity, in-house toilets, sanitation and running water among other socio-economic rights.

The availability of services and amenities in older persons' homes in the US and other developed countries plays a role in determining whether older adults age in place or opt for institutional care. Davey et al. (2004:133) define ageing in place as "remaining living in the community, with some level of independence, rather than in residential care." In the US, New Zealand and Canada, ageing in place is lauded for promoting independence and maintaining a sense of identity for older adults (Williams et al. 2009; Wiles et al. 2011; Lee et al. 2014). The concept of ageing in place is based on the premise that older adults have developed positive emotional and symbolic meanings attached to their homes and locations. Thus, institutionalisation is regarded as disruptive and disorienting the elderly from their routine, culture, and traditions. The World Health Organisation (WHO) (2017) also supports ageing in place as a less costly option compared to residential care. Despite inadequate housing in the developing world, many older adults age in place as compared to the US and Europe (DESA 2020). For example, 10 percent of older adults in the Dominican Republic, Haiti and Honduras remain in their poorly resource homes and locations. Similarly, huge proportions of this population group in Lesotho, Rwanda, Malawi and Uganda resort to spending the later years of their lives with their grandchildren in their homes (DESA 2020).

According to the South African 2006 Older Persons' Act (hereafter referred to as the Act), a person who is 65 years of age or older in the case of men and 60 years or older for women is classified as an older person (Republic of South Africa [RSA] 2006). Worth noting is that older adults' housing rights in South Africa are guaranteed in the country's 1996 Constitution and its Bill of Rights (RSA 1996) and the Act. Even though the Act prioritizes ageing in place, residential care facilities (RCFs) are also common in the country owing to the strong financial and legislative government support (Lombard and Kruger 2009). Inevitably, private RCFs in the country are expensive and inaccessible to most applicants (World Health Organisation [WHO] 2017). Concerning is that government funded RCFs are characterized by long waiting lists and are few in rural settings (Ashwell et al. 2020). While RCFs have been commended for providing safe and secure housing along with psychosocial support, there have been recent incidents of abuse in these facilities (Baloyi 2014; Kang'ethe 2017; South African Human Rights Commission [SAHRC] 2016). The majority of older adults in the country are forced to stay in their homes, most of which are insecure, unsafe and are in locations that are known for unabated incidents of rape and violent crimes against older adults (Sobantu 2021; Statistics South Africa [Stats SA] 2018).

As of 2020, South Africa had over 5,43 million of its 59,62 million people aged 60 years and above (Stats SA 2020). Inadequate housing and psychosocial wellbeing for most older persons in the country are a relic of the country's socio-historical past of locational disadvantage. The obvious consequences of such segregation are dilapidated housing and neglected neighbourhoods for poor families and their generations (Noyoo and Sobantu 2019). South Africa is one of the most unequal societies in the world (World Bank 2021) contending with the challenges of poverty, unemployment, inequality, and currently the Covid-19 pandemic. The ongoing pandemic further deepens the social exclusion of older adults because of their high risk to Covid-19 and the underlying comorbidities that predispose them to the diseases. United Nations (2020) cites neglect, isolation and weakened social networks, mistreatment, poor sanitation, and digi-

tal exclusion as some of the elements that impinge on the wellbeing of older persons.

Most older adults remain neglected and excluded, despite their indelible contributions towards the social and economic development of their respective societies (Baloyi 2014). It is a paradox that many older adults in most developing countries occupy poor housing in unsafe locations (Kang'ethe 2017). Some of those who live alone in their houses are often accused of witchcraft in most African communities, posing a lot of stigma against senior citizens (Baloyi 2014). Ugargol et al. (2016) also report of stigmatisation and multilevel exclusion of older adults with disabilities in India. Research on older adults' housing experiences in both their houses and their communities is therefore crucial if governments and stakeholders are serious about creating socially and economically inclusive societies for senior citizens.

Although access to formal housing connected with electricity, clean water, sanitation and refuse collection by older persons has improved post-1994 in South Africa however Stats SA (2015) reported that black seniors of African origin were behind in terms of access to housing with basic services. There were also notable gender differences with males having an advantage in accessing housing compared to their female counterparts. Income is a key housing variable that determines access, satisfaction, physical and psychosocial wellbeing mainly for older adults who require special care (Kang'ethe 2017). More than 70 percent of older adults in South Africa receive old age grants, with most living below the poverty line and hence barely afford essential food and non-food items in their homes (Stas SA 2015). Further straining their incomes and access to basic services is a trend of older adults being forced to take care of their grandchildren (Lombard and Kruger 2009) and the phenomenon of drug abuse by youth who demand money from the elderly (Kang'ethe 2017). Drug abuse by the youth is associated with crime and both these social issues undermine the safety of the neighbourhood. Stats SA (2015: 18) reported that older adults feel "less safe when walking around…are likely to be the victims of a home robbery." Their constitutional rights to movement, association, and physical exercise are undermined, inflicting severe emotional pain in their lives.

Due to the high-risk gradient to Covid-19, crime, rape, and violence for older adults, this group deserves priority attention to integrated, accessible, and old age-sensitive housing services and caring neighbourhoods. Their exclusion from housing policy is therefore ironic because older adults are confined in their poor housing, and in effect discriminated from social life in the communities (Okoye et al. 2017; Sobantu 2021). Instead of mobilising and directing requisite support to older adults, their classification as a vulnerable group marginalises them from social and economic participation (Nankwanga and Phillips 2009). Governments need to mobilise and deploy resources to provide them with the necessary public goods so that they are not left behind in terms of health care, food and other basic needs. Also, chronic illnesses such as cancer, diabetes, hypertension, rheumatism, and arthritis among others deter older adults from interacting with their age mates as well as the younger generation and maintaining their attachment with their neighbourhoods. Such multilevel forms of exclusion undermine the dignity and freedoms of older adults which are articulated in the country's Constitution and the Bill of Rights (RSA 1996).

Objectives

The objective of this paper is to explore the impact of housing location on older persons' health and wellbeing. Using the exploratory descriptive qualitative approach, the paper seeks to establish how housing location impacts the older persons' perceptions of safety, privacy and their psychosocial wellbeing.

Social Exclusion as a Theoretical Lens

Widely used as a lens in social research, social exclusion is important in analyzing and understanding the systemic disenfranchisement of older adults from mainstream society (Moffat and Glasgow 2009). Generally, social exclusion is mostly synonymous with discrimination of certain groups from the labor market and the denial of citizenship to some population categories or individuals (Sommerville 1998). Also, Commins (2004) and Moffat and Glasgow (2009) view social exclusion as relating to individuals and

groups being hindered from taking part in mainstream social life. This paper will hinge on Sommerville's (1998: 762) views that "meanings of social exclusion are produced by combinations of economic, social and political processes." Housing is a key resource that determines social care for older adults, and thus it is germane to continue analyzing its exchange with other intersecting factors and outcomes in a bid to avoid old-age exclusion. In effect, social exclusion breeds inequality in choice both at home and in communities for older persons (Walsh et al. 2018). Colonialism and apartheid in pre-1994 South Africa created poorly resourced communities and locations for black people, excluding them from decent housing and services (Noyoo and Sobantu 2019; Sobantu 2021). Thus, social exclusion as a theoretical construct is thus central to understanding the enduring housing and locational challenges of older adults in post-1994 South Africa.

Social work in South Africa and sub-Saharan Africa pays less attention to housing issues related to older adults (Okoye et al. 2017). In most urban setups, housing location determines whether occupants are privileged to basic services or are neglected in poor low-income housing such as shacks. Social workers in Canada play a central role in housing advocacy for vulnerable groups; they link homeless people to housing opportunities through an integrated system with the government (Wideman 2010) while the Australian Association of Social Workers (AASW) (2019) has a clear mandate to fight for access to housing by all and agitates against housing inadequacy and homelessness. There is a serious lack of empirical insight into the elderly housing circumstances in South Africa currently, although Matshoba (1980: 177) had earlier reported that many older adults "liv[ed] in hell" in their apartheid living arrangements. Social work in South Africa needs to appreciate the centrality of adequate housing and integrated neighbourhoods in contributing positively to the post-1994 agenda of inclusiveness, human rights, and nation-building. Especially for older persons, the quality of housing has a correlation with safety, security, privacy, and the psychosocial wellbeing of the occupants. Therefore, this paper seeks to answer the following question; how do older adults' housing experi-

ences impact their perceptions of safety, privacy and psychosocial wellbeing in Alexander, North of Johannesburg?

MATERIAL AND METHODS

Design

In order to gain an in-depth understanding of the impact of housing location on older adults' perceptions of safety, privacy, and psychological wellbeing, this study adopted a qualitative approach and an exploratory design. The chosen approach and design assisted in tapping into the participants' housing experiences and perceptions, and further analysing the findings on a social exclusion framework (Creswell 2014). Ormston et al. (2014) underline that the qualitative approach's stance of exploring phenomena from the participants' perspective yields rich data for analysis and interpretation.

Study Area

The study was conducted in Alexander, a low-income community located North-East of Johannesburg adjacent to a wealthy suburb called Sandton. With an estimated population of 500 000 people, Alexander, popularly known as Alex is characterised by largely informal dwellings, 60 percent unemployment, violent crime, and a high prevalence of HIV and AIDS (Nyapokoto 2014). The socio-economic exclusion of this old location is contrasted by the opulence that characterises the adjacent commercial capital, Sandton. In the 17th century, the Dutch colonisers erected a wall in the Cape of Good Hope to protect themselves against the natives (Mentzel 1921). Both the wall and the road which currently divides Alex and Sandton are symbols that perpetuate exclusionary and fragmented urban space "that classifies in the interests of a class" (Lefebvre and Nicholson-Smith 1991: 375). The foregoing historical context of fragmented urban spaces in South Africa is important in understanding the importance of location and the psychosocial pain that poor citizens face in the country.

Procedure

The population of this study were older adults who resided in Alex. After obtaining

permission from the ward councillor to collect data in his constituency, the study selected 9 participants using snowball sampling. This type of sampling is a process where participants inform the researcher about other individuals who meet the selection criteria (Engel and Schutt 2005). In that fashion, the first participant informed the researcher about other older adults who fit the criteria and might be interested until the targeted 9 participants were interviewed. Snowball sampling was very useful since the researchers did not know the older adults in Alex. The inclusion criteria were, participants had to be: 60 years or older, both males and females, residing in Alex either alone or with their families for the past five years. Coincidentally all the willing participants were females.

A semi-structured interview was administered in English to each participant, with all discussions tape-recorded to capture the accurate detail of the conversations (Creswell 2014). Semi-structured interviews allowed for "more flexibility around the sequence of questions to be asked...the participant to speak more broadly" (Monette et al. 2011: 44) about their housing experiences and their perceptions of safety, security, and psychological wellbeing in Alex. Data were adapted to the social exclusion lens and analysed through emergent themes.

Ethical Clearance

The study was granted ethical clearance by the Research Ethics Committee of the Faculty of Humanities in the University of Johannesburg.

The participant information sheet (PIS) was written in simple English language and was further explained verbally in vernacular to the participants. Participation was voluntary, and participants were requested to sign consent forms prior to partaking in the study and having the interviews tape-recorded. Simple language was used in the interviews and the researchers exercised patience and respect in their conversation with the participants. Even though none of the participants were frail and had dementia, the researchers ensured that from time to time, they checked that the participants understood their participation in the study and if they recalled receiving the PIS and could describe their involvement in the process. The researchers treated with confidence all participants' information (Bless et al. 2006) by using pseudonyms instead of their real names to protect their privacy.

RESULTS

This paper reports on the findings of the older persons' housing experiences which dovetail best with the social exclusion framework. Table 1 shows the sociodemographic details of the nine female participants. The details display deep seated and generational exclusion of women which results in perpetual feminization of poverty. The mean age of the participants is 70.3 years. Mam' Majola, a widow has been in Alex since she was born 76 years ago and stays with her two grandchildren. Depending on the state old age pension grant locks them to this poorly resourced location for their entire lives. Eight of

Table 1: Socio-demographics of the participants

Pseudonym	Age	Marital status	No. of years in	Alex Lives with	Source of income	Home type
Mam' Radebe	66	Single	33 years	Younger sister & 3 daughters	OAP & CSG	Formal
Mam' Majola	76	Widow	76 years	Granddaughter & grandson	OAP & CSG	Formal
Mam' Joyce	67	Single	28 years	Parents & 3 siblings	OAP	Formal
Mam' Mntambo	74	Single	30 years	Alone	OAP	Formal
Mam' Ndlovu	67	Single	32 years	Granddaughter	OAP & CSG	Informal
Mam' Mbhele	81	Widow	61 years	Daughter & 2 grandchildren	OAP & CSG	Informal
Mam' Jane	66	Single	30 years	Two daughters	OAP	Formal
Mam' Ngwenya	62	Married	33 years	Husband	OAP	Informal
Mam' Omakie	74	Single	74 years	Son & granddaughter	OAP	Informal

Note: OAP - refers to the old age pension government pays to each older person monthly
SCG - Refers to the child support grant that each qualifying receives from government monthly
Source: The table developed by the authors

the participants are either widowed or single, and they use their pension payouts to support their family members. A combination of these factors negatively affects their physical and emotional wellbeing. Living with their parents in informal housing, siblings and grandchildren further poses strain from overcrowding.

Only three themes are the focus of this paper. Pseudonyms are used instead of the participants' real names. All the participants' names have the prefix 'Mam' (from Mama – meaning 'mother') in respecting them as older persons.

Security and Safety

In terms of security and safety, this study found three interrelated factors that impacted on the participants' housing experiences and perspectives of security and safety. According to the participants, rampant crime in Alex, type of dwelling and whom they lived with directly impacted on their physical and psychosocial wellbeing. Even though all the participants indicated that they had not experienced burglary and break-ins into their houses, they expressed a deep sense of insecurity because of incessant crime and violence in their community. Below are some of the excerpts that define their perceptions based on crime:

"These crimes are a lot here in Alex, you hear people crying and see that you are not safe because you live in a shack. Sometimes I fear that what happens to the people who are crying will also happen to me one day. I would say there is a lot of crime, robberies and the rape of children and older persons. It's a lot that is happening here in Alex" (Mam' Ndlovu, who stays with her grandchild).

"It is sad, because one day it's going to be me who is raped and murdered. We always lock our doors here in Alex because criminals can come in any time. Alex isn't safe for old people" (Mam' Jane, who lives with her two children).

"Yes, I feel a lot safe during the day because everyone is around. You see just like now, let's say I am by myself; my door is closed and locked, and I go and sleep, but still, I do not trust that I am safe. Even if they were to break into my house, I am by myself, I don't know what I would do" (Mam' Mntambo, who stays alone).

In addition to unabated crime in Alex, poor dilapidated housing occupied by some of the older persons exerted additional distress to the occupants. Participants in this study shared feelings of hopelessness, despair and despondency made worse by their expectation that their living conditions would improve post-1994 with the new democratic government in power. Located adjacent to the upper-class suburb of Sandton, Alex is a poor community with formal houses and informal units known as shacks called *imikhukhu* (Nyapokoto 2014). Mam' Ndlovu who stayed in a shack with her grandchild shared that:

"A shack can be dangerous, you end up using candles, but you will be scared that you will fall asleep and burn the shack…These are the challenges at the moment. We can't use our toilets outside at night because it's dangerous. We use buckets and empty them in the morning. Older people are suffering here in Alexander."

The above response is different from those shared by other participants in formal housing. Mam' Radebe stated that "*I do have a security gate but its old*" and Mam' Mntambo pointed out that her house also "*has security, and the windows have burglar bars. I do not have a problem; I just lock at night and sleep but still, this is Alex.*"

The third factor which impacted on the participants' housing experiences of safety and security was whether they stayed alone or with other family members. Seven of the eight participants lived in their housing with their family members such as a husband, child/children, and their grandchildren. Even those who lived with family members felt very insecure and unsafe, living in fear that their houses would be broken into. In the response below, Mam' Ndlovu was most concerned about her grandchild:

"I can sleep with my grandchild but staying in a shack is hard because even when sleeping someone may hit the shack while passing. It's very insecure here in Alex, I'm just afraid that thugs can come to rape my granddaughter. She can't fetch water from the tape outside at night or use the toilet."

Privacy

What stood out in the findings was that participants who shared their dwellings with others

especially those in informal housing had negative experiences of privacy. For example, Mam' Joyce who was 65 years old, staying in formal housing with her parents and siblings shared that:

"And there is little space in the bedroom, I do not have any privacy. When people are bathing, I will be on the bed and I see everything, things like that. And it's not a good place for someone like me to live in. I need a proper house where people like me can live not this one… It does not sit well with me because I do not like seeing people bathing."

Similarly, Mam' Majola who lived with her grandchildren shared her displeasure over the lack of privacy in her house because she:

"sleep[s] with my grandchild, staying in a shack is hard because even when sleeping someone may hit the shack while passing through and I'm always afraid that thugs will even come in…This uncertainty affects my sense of privacy."

On the contrary, Mam' Mntambo who stayed alone shared her contentment in that *"I'm able to sleep on my bed and rest without any noise and watch TV and sleep."*

Psychosocial and Emotional Experiences

Findings from this empirical study reveal that dilapidated housing and poor surroundings relegate older persons to despondency, depression and perpetual emotional pain. Such pain is reflected in the below responses:

"It is sad that the place we grew up in has turned violent and our housing is a shame. The bedroom leaks when it rains, and so water comes in. Nothing has improved and it hurts me to think I'll die in such neglect" (Mam' Majola).

"There is nothing that I can say is good because there is no one who cares about my poor house and my grandchild who was abandoned by my daughter. I don't have enough food because my grant isn't enough. I cry every day. These are the things that worry my soul, I am just praying for the child to finish school and I go" (Mam' Ndlovu).

"It is [the grant] not enough because by the time you get the next payout there will be nothing left. I have needs, sometimes I need to catch a taxi to the doctor, and I use that same money. Had it not been for the social workers

who help with food, medication and cleaning our places, maybe I would have died"" (Mam' Mntambo).

More implicit in the above responses is the reality that housing arrangements cannot be isolated from planning for food, health care, neighbourly relations, water and electricity to mention a few.

DISCUSSION

The aim of this study was to explore the impact of housing location on older adults' perceptions of safety, privacy and how these impacted their psychosocial wellbeing. The findings resonate with existing literature which points out that the type of housing determines whether older adults will be excluded or embraced as valuable members of the communities. Furthermore, the study revealed of housing location and the number of occupants in the house and how these influence older participants' housing experiences and quality of life. Older adults expressed fear, frustration, and despondency and attributed these feelings to crime in the area, which was exacerbated by poor insecure housing. The latter emotions and experiences exclude senior citizens in many ways. According to Evans et al. (2002), such exclusion diminishes their sense of place attachment, feelings of security, safety and belonging and this affects their mental wellbeing. In essence, such exclusion of older persons from the society's daily rhythms and activities equals violating their rights. This violence runs deeper in Alex and other low-income communities, as Berkman (2007: 3) explains that in marginalised communities, "violence… however affect the lives of the majority of excluded people" Older adults are human beings too, and their housing and neighbourhoods need to be thoughtfully integrated to meet their specific needs. Currently, many older persons in Alex have their rights to "companionship, happiness, depression, morale and ability to cope with life" (Faulkner et al. 2002: 1) neglected. The author concurs with Baqutayan et al. (2015) that there is a paucity of research that establishes the link between housing and the psychosocial impact it has on the occupants in their later years of life.

These findings reflect the multiple ways through which older persons are excluded from

the mainstream social life and economic life due to non-supportive neighbourhoods. From a broader perspective, Alex remains a reminder of the apartheid architecture of race-based exclusion in urban spaces which undermines the housing and related social rights of black people in the country (Brett 2006). Most of the participants are familiar to Sandton only as domestic workers and the contrasting housing and neighbourhoods between the latter and Alex serve as a reminder of the deliberate exclusion of black people.

Even though sampling was gender-inclusive, it should be noted that all participants were women, and the findings reflect the impact of feminisation of poverty (FoP) as another structural factor that excludes women from quality housing, affecting their health and wellbeing. Studies such as Kang'ethe (2017) have examined older persons abuse in institutionalised care. This study has established how a nexus of systemic drivers such as location, FoP, and crime modulate the physical and psychosocial wellbeing of older adults.

Very interesting in the findings was an older person who stayed alone but indicated that she felt safe because her house had security fitments. Streimikiene (2015: 140) posits that quality housing determines the "quality of life...tightly related with such issues as freedom, human rights, and happiness." Quality housing is a function of maintenance, housing location, and the nature of the surrounding environment. Thus, community partnerships involving all stakeholders need to collaboratively work together in finding lasting solutions to the older adults' housing challenges. Issues of overcrowding, dilapidated shacks, unsafe neighbourhoods, inadequate food and nutrition and crime all demand urgent social policy attention by relevant stakeholders. Sobantu and Nel (2019) reiterate that liveable, viable, inclusive and integrated settlements for vulnerable populations can be achieved by revitalising these partnerships as articulated in the 1997 White Paper for Social Welfare (Ministry of Welfare and Population Development 1997).

Safety, privacy, human, peace, psychosocial wellbeing and dignity are widely recognised as dividends that accrue from home ownership. In addition, they influence older adults to age in place (Davey et al. 2004; Evans et al. 2002). Owned homes are known to be better maintained to keep them in good quality, providing optimum security and safety as well as proffering a healthy mind. In addition, Sobantu (2021) posits that beyond providing the immediate needs for shelter, a house may serve as a form of equity in being presented as collateral for access to finance. The diminished functional and financial value of housing for many older adults in Alex and South Africa is a source of lasting distress and anxiety because they expect their houses to boost their incomes, safety, security and peace in their old age. The multilevel forms of exclusion and discrimination of older adults from adequate housing are in direct contravention with the International Covenant on Economic, Social and Cultural Rights (United Nations 1966) which stresses that housing delivery especially for vulnerable such as older persons should be done with considerations for food, clothing, maintenance, healthcare and safety.

CONCLUSION

This paper contributes to growing discourses of old age exclusion ageing and ageing in place. Old age exclusion is a growing crisis in the country and internationally. The article has shown that location affects older adults' housing experiences and further impacts on their perceptions of safety, security, privacy and psychological wellbeing. Low-income communities are normally associated with unemployment, crime, violence and unsafe communities for older adults. The foregoing serves as a marker of exclusion of older adults both in their houses and in the communities. Older adults' psychosocial unwellness is not supposed to be viewed and analysed in isolation from the challenges of overcrowding, lack of safety, privacy and security. Furthermore, when analysing and making decisions on older persons' housing, it is critical not only to consider location but also the intersection of gender, food, health care and social and community support. Perhaps future studies may focus specifically on the interface of housing, gender and exclusion as a step towards gaining a more coherent understanding of exclusion of older adults.

RECOMMENDATIONS

The authors urgently recommend joint awareness and educational campaigns in the communities on ageing and older persons. It is envisaged that this process will strengthen families and institutions in the communities to respect older persons, protect them and promote their rights. Such campaigns could remind communities that senior citizens are not a burden, but individuals who contributed to socio-economic growth of the society in the early days of their lives. Intergenerational activities between older persons and the youth in the country are also recommended to promote not only engagement but also for the youth learn and appreciate the value of senior citizens. Older persons could teach the youth about traditions and culture, as well as do storytelling in these intergenerational engagements. It is also recommended that government gives more financial and policy support to both existing and new community-based organisations and care institutions that cater for older persons. This is because RCFs are unevenly spread geographically across the country, with some rural areas having none of these institutions. At the same time, a huge proportion of seniors age in their communities because RCFs are unable to accommodate all the applicants in the urban areas. All these efforts should be imbedded in social policy, which is filtered through different spheres of government.

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CONFLICT OF INTEREST

The authors declare no potential conflict of interest regarding the research, authorship and publication of this article.

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