Introduction

In recent decades, population ageing has become a global area of concern, culminating in two World Assemblies on Ageing: the 1982 Vienna and 2002 Madrid conventions (UN, 1982, 2002). In Africa, ageing has become recognised as a focal issue at continental and national levels only in the last few years (AU/HAI, 2003; Republic of Kenya, 2003; Rahim, 2004; Wambua, 2004).

Ageing in Africa is occurring against a background of social and economic hardship, widespread poverty, the HIV/AIDS pandemic, and the rapid transformation of the traditional extended family structure. At the 2002 Madrid World Assembly, United Nations Secretary General Kofi Annan summarized these problems as follows:

The increasing risk of marginalization as older adults lose traditional family support and social networks as people move to the cities; the HIV/AIDS crisis that is forcing many older adults to care for orphaned children; and the possible deterioration of the social security and health systems in support of older adults.

This is in contrast to the developed countries of Europe and North America, where the ageing of populations occurred under an already well-developed socio-economic and political environment.

Although sub-Saharan Africa’s older population is presently not as large in size (currently around 5 percent of the world total) as in other regions of the world (United Nations, 2003), population ageing is of concern mainly for two key reasons. First, the fast rate at which the number of elder persons is increasing: the older population (60 years and over) will double to 10 per cent by 2050, presenting a great challenge to an unprepared continent.

Second, older people, in particular in rural areas, widely lack access to public social and health care support structures. At the same time the care, support and protection traditionally provided by the family system has eroded, leaving older people vulnerable and in need (Apt, 1997; Rahim, 2004).

Yet, older people often make vital contributions to the welfare of the younger generations in their families and communities (most notably in the context of HIV/AIDS where they commonly act as sole carers of children and grandchildren affected or orphaned by AIDS). Enhancing older people’s capacity, therefore, needs to be seen as an integral part of efforts to promote overall societal development (UN, 2002).

These concerns highlight the urgent need to develop gerontological knowledge in and about Africa.

As an academic discipline, gerontology is so new in most African universities that many students and their lecturers might have difficulties in defining the term. Some universities do not have a single course on ageing in any discipline. However, topics touching on older persons are sometimes covered in anthropology, folklore, sociology, nutrition, health, geography, biology, and psychology, and have been part of the curriculum of many institutions of higher education.

In order to enhance the development of gerontology in Africa, information and data based on extensive and intensive field investigations and research need to be generated to complement what is already known about ageing in the continent. This paper attempts to answer three key questions on how African capacity to conduct research on ageing can be built and supported.

Key questions to consider

What limitations currently exist in African capacity to carry out high quality, relevant research on ageing?

1. A first limitation is the low priority that ageing research has been given in African countries and universities because population ageing itself has not been an explicit issue of concern either at the academic- or the government policy level. For example, in many African countries where regular population censuses are conducted, there has been little interest in analyzing populations over the age of sixty, because the populations are mainly young, and younger age-groups are deemed to be of greatest importance in relation to health, education and employment needs and implications. Essentially, issues of ageing are not taken into account seriously in
most African population research to date.

2. African universities, furthermore, have very few people who have been trained in gerontology and who could provide leadership on research on ageing. This is compounded by the fact that many African gerontologists, just as social science researchers in general, lack sufficient general training and know-how in social science methods and methodology, both qualitative and quantitative.

3. University libraries have very limited literature on ageing. The journals and books that may be available on the subject are usually out-of-date donations from developed countries and are often on ageing issues in the countries of origin of the donors. This makes teaching ageing sometimes seem alien to the young students who have never been to the countries from where examples are given. Conducting on-line research through the Internet, moreover, has been problematic due to a shortage of computers, relevant software and Internet accessibility.

4. In some African countries, conducting research is hindered by other factors including a lack of financial and material resources and bureaucratic requirements for obtaining research permits. Delays in getting permission to conduct research may result in additional costs and time and may result in some dishonesty on the part of the researchers. Some researchers refuse to fully comply with the requirements or have hidden research agendas that are not disclosed to the authorities. Such situations create difficulties for future researchers and other investigations.

5. Research, especially larger-scale research, is often further constrained by the necessity of timing: there are periods such as the rainy seasons, planting and harvesting seasons when people, including older persons, are busy in the field or with their animals and unable to participate in interviews or tests.

6. On a broader level, the current widespread and large-scale poverty in Africa has meant that the establishment and development of university and research programmes is crippled by a lack of resources. Essential tools such as computers, adequate working space, communication infrastructure and access to the internet are often not available, as are funds to enable academics to participate in international conferences — and this leaves many African scholars isolated.

7. Lastly, there exist very few academic or professional African fora at which African researchers on ageing can meet, debate and exchange ideas and research findings. Moreover, African scholars are often dependent on overseas publications for reporting their research, most of which, however, are not available or accessible locally. Publishing locally is largely deemed too expensive to be tenable.

What specific inputs can UK or developed country researchers provide?

The United Kingdom, as other developed countries, has well known and long established institutions of excellence in gerontology that could assist Africa’s developing gerontology research and training centres in the following ways:

- Establishing strong, professional partnerships with African centres;
- Planning and jointly carrying out research projects both in Africa and in the United Kingdom;
- Seconding experienced researchers to emerging centres in Africa;
- Inviting scholars from African countries to spend their sabbaticals and or shorter study periods at research centres on ageing;
- Offering scholarships to enable postgraduate students from Africa to study in their centre;
- Helping research centres in Africa to establish and/or maintain infrastructures necessary to undertake research in ageing, such as journals, reference materials;
- Acting as a bridge, or provide platforms to link African researchers to other scholars and practitioners in the field of ageing.

Individual UK-based researchers, moreover, can support the African ageing research endeavour by:

- Providing inputs into the quality, timeliness and relevance of African ageing research by working in partnership with their African colleagues and serving as peer reviewers;
- Sharing information and helping to disseminate findings from research done by African scholars in their universities and institutions.

What inputs are needed to help build the African ageing research capacity?

To build research capacity in gerontology requires, above all, a long-term commitment and the political good will of both African and overseas governments and universities.

Within African universities, there is a need to establish and fund training programs in gerontology and social science methods, as well as centres for the study of gerontology where local, regional and international scholars can go to pursue doctoral and postdoctoral research.

Grants to postgraduate students interested in pursuing gerontological research should be provided by universities, and donors should be encouraged to fund such schemes, as it is the surest way of increasing the numbers of researchers available in the African continent.

In addition, there is a need for African gerontology initiatives to form strong professional linkages with each other, as with centres of excellence in other parts of the world, where African researchers can be part of multidisciplinary teams and gain first hand experience. Similarly, African researchers should undertake joint studies in Africa with their counterparts from developed countries. Planning and programming for such collaborative activities, however, needs to be conceived together, rather than being dictated by developed world perspectives and interests.

Finally, there is a need for dedicated fora in which African researchers can exchange ideas and insights and forge common initiative.
Concluding remarks

Taken together, the quest to build Africa’s research capacity on ageing requires inputs and collaboration to enable the training of high level researchers; to strengthen existing research institutions and programs and establish new ones as needed; to support these institutions in identifying research that accurately meets or anticipates policy-related information needs; and, finally, to enable the effective storage and dissemination of generated data.

Once disseminated, reliable information on Africa’s older population and ageing environments will provide a major contribution to our global understanding of ageing issues as they affect the African continent and other regions of the world.

Notes

1 Between 2003 and 2004 Kenyatta University in Nairobi Kenya tried to obtain information on gerontology training programs in African universities. According to most respondents, no gerontology departments or programmes existed, although students at graduate level could access some courses.

2 Africa is said to have two gerontological associations, namely, the African Gerontological Society, headquartered in Nigeria, and the South African Gerontological Association in Cape Town. However, the activities of these professional organizations, including membership, are not very widely disseminated or known in many parts of Africa.

References


