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**A comparative study of survival strategies used by the aged in rural and urban areas: A case of Chongwe and Lusaka Districts.**

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**ABSTRACT**

*For many years, studies to do with the aged and how they survive 'economically,' were enshrined in mystery and stereotype. As a result of that, many old people in Zambia have been subjected to abuse and destitution; which is partially attributed to lack of systematic studies that would elucidate facts about the aged. It is for this reason that this study was instituted. The study comprised of 97 senior citizens who were purposively selected from Chongwe and Lusaka Districts. 84 senior citizens were subjected to a structured interview, while 13 participated in the two focus group discussions. Therefore, structured interview guides and two focus group discussions were used to collect data in Chongwe and Lusaka Districts. The study established that several types of survival strategies were used by the aged in rural and urban areas. The findings revealed that senior citizens in Chongwe and Lusaka Districts were involved in trade men and women. Others depended on their extended family members for support and care. This was the case for majority of the respondents from Chongwe District compared to their counterparts in Lusaka. There were a number of senior citizens who were also assisted financially and materially by local churches, charitable organizations and well wishers within and outside their communities. Although majority senior citizens were business men and women, their businesses, according to the findings, were not capital intensive, hence less lucrative. Consequently, majority senior citizens in the two Districts resorted to eating once or twice in a day in order to conserve food for subsequent days. The situation was exacerbated further in Lusaka, as opposed to Chongwe, because senior citizens there had a lot of dependents. As a result and except for a few, most of the aged scraped a living on less than a dollar per day in the two districts*

## **INTRODUCTION**

One of the most important aspects about the aged in Zambia is the rapid increase in the absolute numbers of the elderly population from the age of 60 years and above in rural and urban areas. In 1990 there were 216, 196 aged people in the country. Almost 1 in every 25 people was aged. Recent demographic projections indicate that the number was expected to increase to 290, 168 in the year 2010; 598,687 in 2030; 1045,247 in 2040 and 1,452,706 in the year 2050 (Kamwengo, 2001: 24).

The increase is absolutely dramatic and is attributed to a number of factors. Foremost, there has been a moderate decline in mortality rates. More and more people are surviving to enter old age than was not the case in the past. Another factor contributing to the increase in the elderly population is the decline in birth rates. The decline was attributed to the volume and intensity of family planning activities conducted in the 1980's and 1990's.

The lowered birth rates have resulted in a smaller number of infants entering the population. This has allowed the aged to constitute a large portion of the population.

The third factor responsible for escalating number of the elderly is the improvements in primary health care provision which emphasizes health education programmes, control of communicable diseases and hygiene. This factor has been playing and continues to play a vital role in prolonging life (Kamwengo, 2004).

Suzman and Manton (1992:53) point out that the population is ageing, with changes in the living arrangements of the elderly occurring in most countries, as a result of lower fertility, higher mobility, changing attitudes about family structure and function, and increasing life expectancy, especially mortality declines in late life. There are important interactions between population ageing, changes in the living arrangements of the elderly and the need for long-term-care service. Such interactions are directly related to community and family support systems and public policies.

## **Statement of the problem**

There has been a marked increase of the aged in rural and urban areas. It is alleged that for every 25 youths, there is one elderly person in Zambia. There are more senior citizens in rural areas as compared to urban areas (Kamwengo 2001:23). Unfortunately, little comparative research has been done on how the aged survive in rural and urban areas. At a time when the extended family values are eroding and the land which used to be a source of living for the aged being sold to investors. The question is, how have the aged managed to survive and source for a living in the rural and urban areas amidst rapid cultural, social and economic changes in Zambia?

For many years, studies to do with old age and how they survive 'economically' were enshrined in mystery and stereotype. As a result of that, many old people in Zambia have been subjected to abuse and destitution; which is partially attributed to lack of systematic studies that would elucidate facts about the aged. Hence, this study was intended to fill that gap.

## **Purpose of the study**

This study set out to investigate and to compare survival strategies and sources of living for the aged, both in the rural and urban areas. At the same time, the study was further destined to find out if there were any similarities and/or differences in the way the aged sourced for a living.

## **Objectives of the study**

The following were the objectives of the study:

- i. to identify types of survival strategies the aged used to sustain their lives in rural and urban areas;
- ii. to determine whether or not the survival strategies the aged used addressed their financial and material needs;
- iii. to investigate similarities and differences in survival strategies the aged used in rural and urban areas; and
- iv. to find out whether or not extended families played a role in supporting and taking care of the aged in rural and urban areas.

## Research Questions

The study attempted to answer the following questions:

- i. what types of survival strategies did the aged use to sustain their lives in rural and urban areas?
- ii. did survival strategies used by the aged address their financial and material needs?
- iii. were there similarities and differences in survival strategies used by the aged in rural and urban areas? And
- iv. did extended families play a role in supporting and taking care of the aged in rural and urban areas?

## LITERATURE REVIEW

The literature review of this study covers the concept of old age, world demographics on ageing, and the socio-economic environment of aging in Africa.

### Concept of old age

The boundary between middle age and old age cannot be defined exactly because it does not have the same meaning in all societies. People can be considered old because of certain changes in their activities or social roles. For instance, people may be considered old when they become grandparents, or when they begin to do less or different work after retirement. In the United States and the United Kingdom, the age of 65 can be considered the beginning of old age because, until recently, people in the United States and Britain became eligible for retirement at that age with full social security benefits. In contrast, in Zambia the retirement age was set at 60 for men and 55 for women. In 1986, an act of parliament number 11 reduced the statutory age of retirement to 55 years for men and 50 for women (Cavaye, 2006; Kamwengo.2004:56; Wikipedia.org/elderly;http://www.britanica.com).

Rather than lumping everyone past a certain age as old, some social gerontologists (see: Fiske, 1972; Fuller 1972) make a distinction between the young old (ages 55 to 74) and the old-old (ages 75 and older). Still other gerontologists (see Zeng, 1989; Martin 1989) add a middle-old category between the young-old and the old-old

categories. However, Chronological age may differ considerably from a person's functional age, and age related changes that occur at different rates for different persons. Changes as we age are normal and occur in all five senses (Ohio State University web site).

In his argument, Cart (1990:9) states that age-related changes within any individual can differ greatly. Further, age related changes differ greatly from one individual to another in the same manner as each person differs from the other while moving from infancy to maturity. Therefore, no sharp differences occur either physically or psychologically when a person reaches 65 years of age. Absolutely no clinical evidence exists for selecting this chronological age as a retirement age in the Western World and 55 years in Zambia. In any case, whatever changes come with aging, most older adults are in relatively good health. Physiological, sensory, emotional and physical changes do occur, but the human body and a person's ingenious method of compensation often allow the older person to successfully function in today's complex world.

Ageing therefore is not a disease. It is actually a series of processes that begin with life and continue throughout the life cycle. As individuals move through the processes, they become more and more different from everyone else. Thus, it is noted that the aging population is a very heterogeneous population. Because of the burgeoning size and heterogeneous nature of the aging population in Zambia and other nations, there is a rapidly increasing need to understand both the normal aging processes and the consequences of aging on the population (Morgan and Kunkel, 2001:22).

Chaney (1991) argues that in developing countries like Zambia, the vociferous demands of younger population cohorts for education, health services, jobs, food, and shelter deflects attention from problems faced by the burgeoning numbers of older persons, particularly where elders are isolated and unorganized.

## World Demographics on ageing

In 1950, according to UN (2007) estimates, there were approximately 200 million persons aged 60 and above. By 1975 the number had increased to 350 million. By 2005 there were about 625 million of them. The number is expected to be in the range of 2 billion in 2025. Furthermore, projections are that by 2050, the population of older people will, for the first time in the history of mankind, be more than that of children under the age of 14 years. Africa alone is projected to register a phenomenal increase from the current estimate of slightly over 40 million to 212 million in 2050 (Ageing with Dignity, 2001 :2)

Unlike Africa and other developing countries, in Europe the ageing transition has spread over one century or more. In China, however, this change will take place within a few decades and will reach more or less the same level of population ageing as most of the developed countries by the middle of the 21 century. It will take about 20 years for the elderly population to increase from 10 to 20 per cent in China. Japan is regarded as a country with a very rapid ageing population, but the ageing process of the Chinese population will be even faster than that for Japan and the rest of the world (United Nations, 1999; Ogawa,1988; Zeng, 1989).

### The socio-economic environment of aging in Africa

According to the United Nations (2007), more than 300 million people in Sub-Saharan Africa live on less than 1 dollar per day. In the similar vein, the HelpAge Economic Report for Africa (2003:4) purports that close to half the population on the continent lives on less than a dollar per day. The poverty levels are increasing steadily and are much higher in rural than urban areas. Older persons are most affected by the impact of poverty. They are the poorest of the poor and receive little support from family members who themselves are struggling to survive the harsh prevailing economic situation on the continent (Ageing in Africa, 2006:5; and Action on Ageing Annual Review 2000/2002:7).

The African Union Policy Framework and Plan of Action on Ageing up acknowledge that the increase in the number of older persons provides a challenge for the continent as

whole, as well as for individual countries. This is due to the fact that the number of older people in Africa is increasing in the context of poor socio-economic development (Ageing in Africa, 2007:6).

Poverty is inherited from one generation to the next into old age. Although data on the actual poverty levels among older people in the region is hard to find, there is evidence that they are most affected by poverty. Most of them hardly generate enough income with which to meet their basic needs. Some have no sources of income at all and the result is physical weakness, isolation, exclusion and low self esteem (Ageing in Africa, 2003:7).

Against this background, the African Union Extraordinary Summit held in Burkina Faso in 2004 adopted a declaration on poverty alleviation and employment promotion in Africa. According to the Age Ways Report (2004:7), the Heads of State and Government in Africa committed themselves to the placement of employment creation as a central objective of their economic and social policies at national and continental levels. This was believed would boost sustainable poverty alleviation strategies. The declaration further called for the employment of the poor and vulnerable, particularly in the rural areas and older people fell in this category. But from the time the summit was held in 2004, little has been done to implement the policies which were agreed upon by all the heads of state in Africa.

Although there has been increased global attention on poverty reduction programmes, older people largely remain excluded. Action on Ageing (2000/2001:3) and Ageing in Africa Report (2005:6) note that, where poverty was endemic, persons who survived a lifetime of want often faced their old age in extreme poverty.

In Zambia, while almost everyone is busy championing women and children's rights, no one seems to be talking about the senior citizens. In fact, so much is being said on the need to have 30 percent representation of women in all decision making positions yet, little if anything at all, is happening for the country's veterans. The youth even have the distinction of having a ministry looking after their affairs while the women folk find delight in the Ministry of Gender which has persuaded the government to promulgate a gender policy.

The extent to which senior citizens are ignored is actually more evident during campaigns or indeed in manifestos of political parties'. It is common to see politicians articulating issues to do with the youth and women during campaigns in an effort to canvass for votes from those sections of society. In fact, it is the youth that are normally seen as crucial to ones winning an election. There is great emphasis put on youths today at the exclusion of the aged who are perceived as a curse.

In the view of HelpAge (2007:4), majority older people live and work in rural areas especially in the informal sector. Their work and contribution to the families and communities is unrecognized and unrewarded in most cases. This statement is true in the case of Zambia, considering the fact that majority of the aged in both rural and urban areas cannot easily find employment in the formal sector due to the fact that they are considered too old to work. In the same vein, the private sector cannot employ them due to the fact that this sector is more interested in the young people whom they consider to be vibrant and energetic to handle the pressure which the sector is accustomed to.

Human conditions in Zambia have worsened since the mid 1980s. People have become poorer and most government services have further declined including those under the ministry of Community Development and Social Services. Among the government ministries, this ministry is the least funded and yet it is one of the most important ministries when it concerns looking after the affairs of the poor and the senior citizens. Therefore, in the state in which the economy is, the government is overwhelmed and flooded with a lot of poor people who need a share of the limited national cake. Because of high levels of poverty, most Zambians have had to adopt coping strategies in order to survive.

The phenomenon of ageing in Zambia and other nations around the world, has over the past decades been posing serious challenges to the families, government and many other institutions that are concerned with issues of the aged. We are witnessing a global population growth on the scale unparalleled in human history. The increase is more pronounced in the developing world where the rates of population growth are much higher than the capabilities of those countries in terms of health, nutrition and other basic amenities for a reasonable standard of living. The present demographic

transformation calls for new policy measures at the level of families, non-governmental organizations, churches, hospitals and Government as its repercussion will leave no sector unscathed. This will inevitably exert additional pressure on sectors like health, housing, employment, social safety nets and welfare, to name but a few (Ageing with Dignity,2001: 9; Ageing and Development 2003:4; Todaro and Smith, 2003: 37).

## RESULTS AND DISCUSSION

### Types of survival strategies used by the aged to sustain their lives in the rural and urban areas

The first objective in the study sought to investigate the types of strategies the aged used to sustain their lives in the rural and urban areas. Majority senior citizens (ie25=59.52%) in Lusaka and 22(52.38%) in Chongwe generated their own income. Income generating activities ranged from selling groceries, vegetables, carpentry products, bricks and beer. However, some senior citizens in Lusaka as opposed to their counterparts in Chongwe also generated income from renting out their houses. It was discovered that most senior citizens in Lusaka owned houses which they rented out.

The other type of strategy the aged used to sustain their lives was dependence on the members of the extended family. In Chongwe, 18(42.86%) respondents said they depended on members of their extended family for their survival, while 12(28.57%) in Lusaka said the same. Therefore, majority senior citizens in Chongwe district depended largely on members of the extended family than was the case with their counterparts in Lusaka. There was a small segment of senior citizens in Lusaka (ie 3=7.14%) who survived wholly by soliciting for money and other material goods from charitable organizations, while in Chongwe none of the aged used that kind of strategy.

The survival of the aged did not only depend on their efforts alone, the church, well wishers and charitable organizations played a vital role in the welfare of senior citizens in the two districts. In Lusaka, 18(52.9%) and in Chongwe 14(42.4%) said they received assistance from various church denominations on regular basis. The church voluntarily assisted senior citizens with spiritual, financial and other material support.

Some senior citizens in the two districts were also assisted financially and materially by individuals who were not related to them. For instance, in Chongwe 13 (39.4%) elderly people said that they received moral, financial and material help from individuals they did not even socialize with. Similarly, 5(14.7%) senior citizens in Lusaka admitted to receiving help from

Added to the above, charitable organizations also played a role in assisting vulnerable senior citizens in the two districts. However, most of their work was concentrated in Lusaka District as opposed to Chongwe. In Lusaka, for instance, 11 (32.2%) respondents said they were assisted financially and materially by charitable organizations as compared to 6(18.2%) in Chongwe. The differences were that, senior citizens in Lusaka received assistance from charitable organizations on regular basis unlike their counterparts in Chongwe.

**To determine whether or not survival strategies the aged used were sufficient to address their financial and material needs.**

Majority senior citizens in Lusaka realized an income of less than K100 000 per month followed by those who made an income of K300 000 to K800 000. A few senior citizens realized an income above K800 000. A similar situation obtained in Chongwe District. Three quarters of senior citizens in Lusaka and Chongwe Districts survived on less than a dollar per day.

In general, the financial and material support the aged received per month were not adequate to address all their financial and material needs. Majority senior citizens in Chongwe (ieI9=45.2%) made less than K100 000 per month as compared to 16(38.1%) in Lusaka. The situation was exacerbated by the fact that 17(40.5%) of the aged in Lusaka and 16(38.1%) in Chongwe had dependents. Therefore, majority senior citizens in Chongwe and Lusaka lived below the poverty datum line. Only 16(38.1%) of the respondents in Lusaka received money between K300 000 and K800 000 per month as opposed to 5(11.9%) in Chongwe.

Judging by the high cost of living in Zambia, K300 000 to K800 000 per month for senior citizens with dependents could hardly meet their needs. To make the situation worse, only a small segment of senior citizens in the study realized between K800 000 and K1 200 000 per month. In Lusaka, only 4(9.5%) senior citizens said they were able to source money up to that much in a month as opposed to 1(2.4%) in Chongwe.

Although senior citizens realized little money from their various sources in Chongwe, majority of them managed to have two main meals in a day than their counterparts in Lusaka. There were more senior citizens who had more than two meals in a day in Lusaka (ieI0=24%) as opposed to 4(17%) in Chongwe. Nonetheless, a large number of the aged in Lusaka (ie9=21%) had meals once per day as opposed to 2(4.8%) in Chongwe.

Majority senior citizens in the two districts had two meals in a day. In Chongwe 36(85.7%) confirmed to have had two meals in a day compared to 23(55%) in Lusaka. Therefore, if the standard of living was measured by the intake of meals per day, then the aged in Chongwe District would be said to have had a higher standard of living as opposed to their counterparts in Lusaka District.

According to the findings, survival strategies that were used by the respondents did not adequately address the financial and material needs of the elderly in the two districts. This can be ascertained by the fact that 80 percent respondents did not manage to realize or make more than K800 000 per month. The problem did not lie in the strategies that the aged used to sustain their lives, but rather the society at large. Most of the respondents in Lusaka and Chongwe said that society treated them differently and badly from the rest of the people. For instance, some of them complained that they were unable to access loans from lending institutions because they lacked collateral. Others complained of lack of concern and care from the immediate and extended family members. Therefore, there is need for the government and other stakeholders to systematically analyze the sources of income and living conditions of the aged in rural and urban areas so as to devise lasting solutions to their concerns.

### **To investigate similarities and differences in survival strategies the aged used in rural and urban areas**

Majority of the aged in Lusaka district were involved in income generating businesses. A large proportion of those businesses were at the level of small scale industries. For instance, most of them traded from the streets, bars, markets and from some makeshift stores called 'Tuntembas' in the local language. The products they sold ranged from vegetables, groceries, meat and beer. The situation was similar to their counterparts in Chongwe. Business ventures strategies used in both Chongwe and Lusaka bore very similar resemblance.

The differences were that, women, more than men, traded from market areas and the streets while most men senior citizens preferred to trade from their homes and from bars. Some of the aged in Chongwe owned small farm plots where they grew crops for consumption and sale. On the other hand, majority senior citizens in Lusaka depended mostly on trade but not on farming. The other difference was that, some senior citizens in Lusaka rented out their houses as a means of generating income as opposed to their counterparts in Chongwe who depended mostly on farming. Others worked in low paying jobs such as security firms. Meanwhile, some men senior citizen in Chongwe as opposed to their women counterparts depended on farming, carpentry and block making.

Dependence upon extended family members was the most prominent survival strategy amongst the aged in Chongwe as opposed to their counterparts in Lusaka. Some of the aged depended entirely on their extended family members for financial and other forms of assistance. There were some senior citizens in Chongwe and Lusaka who said they had no other means of survival apart from depending on their sons, daughters and other family members. That strategy worked very well amongst the aged in Chongwe as opposed to their counterparts in Lusaka. That strategy worked very well in Chongwe because most of the relatives lived in close proximity to each other. This made it easier for the aged in Chongwe to receive familial attention as opposed to their counterparts in Lusaka.

On the other hand, a number of the aged in Lusaka utilized another strategy for their survival which was uncommon amongst the aged in Chongwe. Some of the aged in Lusaka went to the extent of soliciting for money and other material needs from charitable

organizations. Interviewees from Lusaka said they personally knew charitable organizations through other senior citizens. There were a number of them who said they were registered members of those charitable organizations and, in the process benefited from the donations which the organizations gave out. Contrary to that view, most of the senior citizens in Chongwe knew a little about charitable organizations. Despite that, a few of them said they had received some money and material things from some organizations in the distant past. That was an indication that most of the senior citizens in Chongwe did not have enough information about charitable organizations.

Arising from above, it can be assumed that charitable organizations that had interest in addressing the concerns of the aged in Chongwe district in the past had become inactive. Nevertheless, the vacuum created by the absence of organizations was quickly filled by assistance given by well wishers and the church. However, the aged in Lusaka district received more assistance from the church than those in Chongwe district.

### **To find out whether or not extended families played a role in supporting and taking care of the aged**

The responses to the objective above varied. For instance, in Lusaka, 19(45.24%) said extended family members were doing enough in taking care of their needs and concerns. Similarly, 22(52.38%) in Chongwe said the same thing as their counterparts in Lusaka. Although majority senior citizens in Lusaka were satisfied with assistance given by members of the extended family, about 14(33.3%) of them did not share that viewpoint. In Chongwe, 5(12%) disagreed that members of the extended family system were of any help to them.

It can thus be deduced from the findings that, majority senior citizens in Chongwe district were satisfied with the help that was coming from members of their extended family as opposed to those in Lusaka District. The views of the aged in Lusaka over members of the extended family assistance towards them were conflicting. Additionally, the aged in Lusaka expressed conflicting views regarding assistance rendered by members of the extended families. Majority of them were satisfied with help they received but they were closely followed by those who were not satisfied with the services from the extended members of the family. Therefore, there is need for extended family members in the urban areas to realize that, the older members in their families desperately need their help for them to

fully live humane lives.

Despite of conflicting views reflected above from the respondents, 84(100%) of them preferred to live with their extended families in their old age and not in the homes for the aged. According to them, it was against their tradition to live in homes for the aged as if they had no children or other family members to live with. Others said it was wrong to keep the aged in the homes for the aged as they were able to contribute to the well being of their families. Therefore, they considered it inappropriate for family members to isolate elderly people by placing them in the homes for the aged.

Although all the elderly people preferred to live within the comfort of their extended families, most of them in both Lusaka and Chongwe acknowledged that extended families were disintegrating due to the on slaughter on society by modernization and other forms of foreign culture. Thus, if things continued in the manner alluded to by senior citizens, then most of the aged in the near future would be destitutes. Poverty and lack of care from members of the extended family might force senior citizens to start living in the homes for the aged.

Most of the aged in Lusaka felt that extended families as a social security system had already disintegrated. That concern was mostly expressed by senior citizens who sourced income on their own and had dependents. For instance, Mrs. Mwansa, a 69 years old widow from Bauleni in Lusaka district narrated that, she was going through a lot of pressure due to the fact that she had dependents; to make things worse, she was a widow. She regretted ever having irresponsible and uncaring family members. She complained that she was not being assisted financially and materially and it was difficult for her to make ends meet. In the process, it was discovered that she was the one who was supporting and taking care of other family members. For Mrs. Mwansa, extended families were no longer the haven where the aged would seek refuge as was the case in the past. The researcher encountered such bitter complaints from a lot of senior citizens in Lusaka as opposed to those in Chongwe.

In the same vein, Mrs. Banda, an 87 years old widow from Chikwela village in Chongwe, also complained bitterly about the lack of concern exhibited by members of the extended family towards the aged. She said that most of the time, she does a lot of things on her own

such as buying of food and fetching water from the stream near Chongwe high school without the assistance from young members of the family. The distance from the stream to where she lives is about a kilometer. She reiterated to the researcher that a long time ago when young members of the extended families were sent on errands by the elderly, they never used to refuse. According to her, it was not lack of money among the extended families that made them to neglect the elderly people but rather the broken moral system among the people in this era and age. She added by saying that, unless the situation was reversed, extended families would completely cease taking care of the elderly.

## CONCLUSION

The study revealed that a lot of survival strategies were being used by the aged in rural and urban areas. Comparatively, there were no major differences in the survival strategies that were employed by senior citizens in Lusaka and Chongwe districts. The differences were mostly in quantity and not in the types of survival strategies. For instance, some strategies were more used in the rural areas than in the urban areas and vice versa.

Majority senior citizens in Lusaka and Chongwe survived by engaging in various income generating activities such as selling groceries, vegetables, charcoal and beer to mention but a selection. Others were engaged in farming at a small scale in Chongwe as opposed to their counterparts in Lusaka who derived income from house rentals. It is important to mention that most of the businesses run by the aged in the two districts are not capital intensive, meaning that they are less lucrative. As a result, majority senior citizens in Chongwe were unable to realize income of more than K300 000 per month as compared to their counterparts in Lusaka. On the other hand, majority of them in Lusaka were unable to realize income of more than K800 000 per month. From those findings it can be deduced that majority senior citizens in the two districts lived on less than K5000 per day and hence lived below the poverty datum line.

The extended family was another aspect that generated interest in the study. The study has shown that the extended family network was going through a lot of changes especially in the urban areas. A lot has changed to the extent that the extended family is slowly losing the value that it was accorded sometime back of being the social safety net for family members and especially the aged. Changes are taking place in the African ways of caring



for the elderly people due to globalization and Westernization. Most of the families, due to financial crisis and Westernization are resorting to nuclear types of families as opposed to extended family types. Those changes will have a lot of negative effect in the long run, especially on the aged who depended on other family members for their survival. The rural areas, where most of the aged depend on the extended families for their survival are not spared from the influence of globalization and Westernization.

The senior citizens in this study did not only depend on the income generated by themselves and members of the extended family for their survival, some of them, to a great extent, depended on the help that was given to them by well wishers and the church. In terms of assistance towards the aged, charitable organizations played a minor role in Chongwe district compared to Lusaka. The government in this study did not play a major role either towards alleviating poverty which is prevalent among the aged in rural and urban areas. Thus, partially, the problem can be attributed to lack of a public policy on issues that affect senior citizens in Zambia.

To a greater extent, survival strategies that the aged used in the rural and urban areas for their survival were the same; they only differed in degree or quantity and not in quality.

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## Effect of incarceration on children's cognitive development

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### ABSTRACT

*Imprisonment of parents causes many hardships for children. Children of incarcerated mothers usually experience disruptions in their home environments and child care arrangements and usually also experience social stigmatization. Children who accompany their mothers into prison are exposed to conditions that in all probability affect their cognitive development. This study investigated the possible effects that growing up in prison has on the cognitive development of children incarcerated together with their mothers. 34 children ranging in age between 2 and 4 years participated in this study together with their mothers. 17 of the children (10 girls and 7 boys) were incarcerated with their mothers and the other 17 children (9 girls and 8 boys) were not incarcerated and lived with their mothers in their homes. The incarcerated children were matched in demographic characteristics with non incarcerated children. The SON-R 2.5-7, an individual intelligence test for general application which does not require the use of spoken or written language was administered to measure the cognitive ability of the children. Qualitative data was also collected through informal discussions with the mothers and the prison warders on their perceptions on the cognitive ability of the children. A one way Analysis of Variance (ANOVA) was computed to find out if there was a significant difference between the means of the two groups i.e the incarcerated and the non-incarcerated children. The results indicated a significant difference in performance between the two groups, with the incarcerated children performing worse than the non incarcerated children. Implications of the findings are discussed in relation to the cognitive development of 'incarcerated' and non 'incarcerated' children.*