The Effects of Diminishing Family and Community Ties on the Elderly in Ghana

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ABSTRACT

Over the years, family and community ties in Ghana have been a major guarantor of support provision for older persons, especially those who reside in rural areas. While the support provided by family and community members has proved to be vital in enhancing the well-being of older persons, it is also clear that the ties that exist between these sources of support and older persons are gradually diminishing. This paper highlights some implications that come with the gradual decline of communal and familial bonds for older adults.

Keywords: Aging, Older persons, Elderly, Family support, Family ties, Diminishing and Rural Ghana

Introduction

The steady rise in the number of older persons is a worldwide issue that presents certain implications for all spheres of society. It is anticipated that in 2050, persons who are aged 60 years or above will constitute about 22% of the global population (World Health Organization, 2018). In Ghana, the proportion of older persons to the entire population significantly rose to 6.34% in 2020, from the 4.92% that was recorded in 1960 (Atakro, 2021; Ghana Statistical Service, 2014). While population ageing may connote that a successful effort has been made to preserve human life for a longer period (Awuviry-Newton et al., 2017), many older persons are likely to lose their functional status as old age could be characterized by frailty, impairment, and ailment (Newton et al., 2021). Consequently, people who lose their functional prowess to old age may require some care and support to maintain an appreciable quality of life (Awuviry-Newton et al., 2022). While many advanced geographical settings have made efforts to popularize the patronage of formal systems of care for older people, several older adults in third world countries, including Ghana, primarily depend on kinship care and other communal forms of support to fulfil their needs.
Extant research indicates that the provision of care and support by family members, close friends, and even neighbours to vulnerable persons constitutes a vital support system in Ghanaian society (Abdullah et al., 2020). According to Kumado and Gockel (2003), the traditional extended family practice, which has been the main source of support for older persons since the pre-colonial period, “transcended socioeconomic protection to offering psychological stability and moral upliftment” (p. 1). The main premise for the domination of kinship support for older persons in many Ghanaian societies is reciprocity, which implies that family members are supporting their older relatives because they once supported them when they were young (Awuviry-Newton et al., 2021; Doh et al., 2014).

Family and the community provide salient support to older people to enable them to maintain an acceptable quality of life. A qualitative study that was conducted by Arkoful (2015) to explore the sources of support for older persons in Teshie, Ghana, found that adult children, spouses, members of the extended family, as well as religious bodies in the community were vital sources of accommodation, financial, and daily living support for older people.

Furthermore, a study that was conducted in Ghana to identify the cradles of support for older persons during the COVID-19 pandemic revealed that some older persons received support from their children, friends, spouses, and neighbours (Awuviry-Newton et al., 2021). Frimpong et al. (2022) also found in their research that older person benefited from financial assistance provided by persons in their families and/or in the larger community. While this empirical evidence affirms the relevance of family and community ties for older persons, it is also important to acknowledge that these ties gradually diminish due to a host of factors (Dovie, 2019).

COMMUNITY VALUES

Most countries in sub-Saharan Africa do not have formal social service programmes for the elderly except for informal services which are enshrined in cultural respect and acceptability of older persons and as such, some basic care services for older persons such as the provision of food, clothing, shelter and health, were provided by the extended family as well as the clan systems. Traditional societies in most African countries have their older persons as leaders and heads of families, whether nuclear or extended. In the Ghanaian culture, for instance, older persons usually had the final say over issues of importance to the family and community.

Ghanaians were seen as very respectful and responsible people who took care and are still taking care of their older persons whether they are related biologically or not. According to (Agyemang, 2014, Dimkpa, 2015), it is usually the custom and tradition that older people are esteemed and also attract a great deal of respect, reverence and acceptability, especially from the younger members of the family and community due to the important roles they assumed in the family and community. Such roles are usually evident in preserving cultural values, transmitting knowledge and skills, settling disputes and educating the young.

REASONS FOR THE DIMINISHING FAMILY AND COMMUNITY TIES

Care for older persons by family and community is shaped by shifting expectations as individuals adjust to modern political, social and economic circumstances (Coe, 2017). Available evidence indicates the phenomenon of rural-urban migration is a factor that has contributed to the diminishing family ties for older persons. A qualitative study that was
conducted to gain insight into the living circumstances of older persons in the Upper West and Greater Accra regions of Ghana revealed that some older adults who lived in rural communities attribute their inadequate access to social support to the migration of adult children from the rural communities to urban areas (Briamah & Rosenberg, 2021).

Another study that explored the survival strategies adopted by older persons in rural Ghana found that the proliferation of rural-urban migration among the youth left older persons with no relevant form of support (Agyemang, 2014).

The family system's gradual nucleation in Ghana is another phenomenon that cannot be overlooked when discussing reasons accounting for the diminishing family and community ties for older persons. A study that utilized data from Ghana Demographic and Health Surveys (from 1993 to 2008) to assess household nucleation and dependency in Ghana found that families in Ghana are gradually becoming nuclear in nature (Annim et al., 2014). This factor has been further underpinned by the limited financial resources of the youth, which compels them to mainly reserve their resources to cater for their spouses and children at the expense of their older relatives (Aboderin, 2004).

Some socio-cultural beliefs have also weakened the family and community ties for older persons. For instance, the act of accusing older persons of witchcraft appears to be a common feature in some Ghanaian settings, especially in some communities in the Northern Territory (Kpessa-Whyte, 2018). Older persons, particularly females, who are accused of being witches are usually stigmatized and ostracized from their localities, and family members of such persons feel vindicated for being absolved from caring for their older relatives (Tawiah, 2011).

**IMPLICATIONS OF THE DIMINISHING FAMILY AND COMMUNITY TIES ON OLDER PERSONS**

The importance of family and community connections in the lives of older persons in rural areas cannot be overemphasized. Consequently, the non-existence of such ties in society could impact older persons' livelihoods. The diminishing family and community ties in rural areas have a propensity to intensify isolation among older persons. Findings from Briamah and Rosenberg's (2021) study suggest that the experience of loneliness is likely to be prevalent among older persons who live in vicinities where social cohesion seems to be poor.

The study also corroborates the findings of research conducted in Malaysia to explore family support and loneliness among older people (Teh et al., 2014). The research found that older persons who had contact with and even lived with their adult children were less likely to experience loneliness compared with those who did not live with their children (The et al., 2014). Since the fulfilment of social needs is integral to the well-being of individuals, including older persons (Bruggencate et al., 2018; Gyasi et al., 2019), any feeling of social isolation and loneliness could present some adverse implications for them.

Furthermore, the diminishing family and community ties have resulted in the decline of older persons' material, financial and emotional support. This incidence is quite disturbing, especially when research has shown that intergenerational support has the tendency to improve the physical, psychological, and functional capacities of older persons living in rural areas (Shu et al., 2021). Available evidence on older persons in Ghana has revealed that this vulnerable population have some social, economic, psychological, and health concerns that are yet to be addressed (Awuviry-Newton et al., 2022; Arkoful, 2015; Briamah & Rosenberg, 2021). For a
country like Ghana that is yet to introduce an adequate formal support system to supplement the declining traditional support system, this development only suggests that older persons residing in the country's rural communities might continue to experience unwholesome circumstances that could deteriorate their wellbeing.

As a result of diminishing family ties and relationships, older people suffer loneliness. Family serves as a source of comfort and an avenue for socialization among the elderly. Diminishing family ties has deprived many older people of family love, care, interaction and socialization. The resultant effect of loneliness is that it has the potential to trigger other mental health problems such as depression, dementia and the like.

The gradual decline of family and community ties in rural Ghana also presents some implications for policy formulation. It would be useful if the state took a cue from advanced countries and made efforts to establish formal care systems to help ensure the continuity of care for older persons in the country. Additionally, some family members still maintain ties with their older relatives and provide them with care. However, their work is sometimes impeded by some economic, emotional and physical distresses ((McGhan et al., 2013; Sanuade & Boatemaa, 2015). Nonetheless, the state could establish relief interventions for family caregivers that would aim at providing them with some cash grants and subsidized healthcare. The implementation of such interventions could encourage the sustainability of family and community ties for older persons in the country.

WAY FORWARD

1. Through regular family gatherings and meetings, the ties are strengthened. Family members should make time out of their busy schedules and meet as one people, discuss family matters and address pertinent issues. This meeting should always include the elderly in the family, as this will put a smile on their faces.
2. Families should be encouraged to support their vulnerable individuals, including the elderly. Some families may have resources, but when they don’t distribute them evenly to benefit everyone family member, the family ties will remain weak.
3. Families should learn to accept ageing as a natural part of life and the fact that the elderly are not evil or do not possess any evil spiritual powers. One reason for weakening family ties is the accusation and branding of the elderly (especially elderly women) as witches and wizards. This discourages the younger ones from socializing with the elderly, gradually resulting in the breakdown of family ties.
4. Families must teach children the family values that we as Ghanaians upheld in the past, including respect for the elderly, the importance of dignity and proper social conduct. This will go a long way to strengthen the family and community ties to accommodate and care for the elderly in our society.
REFERENCES


