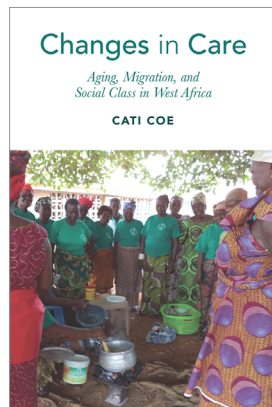


**BOOK TITLE:**

Changes in care: Aging, migration, and social class in West Africa

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ISBN:

9781978823242
(paperback, 248 pp, USD39.95)
9781978823259
(hardcover, 248 pp, USD120.00)
9781978823266
(epub, 248 pp, USD39.95)
9781978823280
(pdf, 248 pp, USD39.95)

PUBLISHER:

Rutgers University Press, New Brunswick, NJ, USA

PUBLISHED:

2021

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HOW TO CITE:

Gie L, Hoffman J. Changing long-term care realities and futures for older persons in (West) Africa. *S Afr J Sci*. 2022;118(3/4), Art. #12759. <https://doi.org/10.17159/sajs.2022/12759>

ARTICLE INCLUDES:

- ☐ Peer review
- ☐ Supplementary material

PUBLISHED:

29 March 2022

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Changing long-term care realities and futures for older persons in (West) Africa

The provision of and need for long-term care (LTC) for older persons in sub-Saharan Africa are already extensive¹ and predicted to rise further given demographic² and epidemiological trends³. There is, however, a scarcity of publications on this topic.¹ We thus find *Changes in Care* to be an influential volume of sound scholarship because it contributes towards filling this gap by comprehensively examining the LTC practices that are emerging in southern Ghana to address the growing demand for LTC. It explains, through the lens of ageing, how social change is occurring within and beyond kin groups. Indeed, it is an exciting and excellent contribution to the small corpus of work on care for older persons in sub-Saharan Africa. What makes this monograph particularly noteworthy is that these themes are approached as processes that are complex, quiet, organic and sporadic, rather than simplistically linear as is still often proposed by exponents of ageing and modernisation theory.

The introduction presents a background to ageing in Ghana. It is fascinating how the author uses her own experiences to explain relevant theories, such as the concept of inscriptions. Inscriptions are some people's responses to problems (caused by conflicting norms), which lie within the continuum between shared norms and individual actions. In terms of norms related to ageing and care in Ghana, the orthodox position of families caring for older persons (kin care) may be challenged by alternative solutions (heterodoxies) when it no longer provides a desirable result and forces people to explore other options. Similarly, some care inscriptions (alterodoxies) emerge, in quieter, less visible ways, as extensions of kin care. The processes by which social change occurs regarding age and care inscriptions and the actors that drive these processes are well covered.

Chapter 1 discusses the orthodoxy of kin care as illustrated in policy architecture and popular discourse in Ghana, and which LTC practices it ignores. The author explains how history helps with understanding the patterns of kin work, ranging from domestic slavery in the 1860s to the move by daughters back to their hometowns in the 1990s to care for their elderly parents. This chapter reveals the dynamism of kin care arrangements in Ghana.

Part I (Chapters 2–4) lays out how social changes related to ageing and care take place in the rural towns in Ghana's eastern region. Chapters 2 and 3 focus on the fears and realities of familial neglect that have forced older persons to consider alternative practices. Chapter 2 largely explores heterodox residential facilities that rural older persons in Ghana are attracted to, despite this still being a relatively unfamiliar Western concept. Alterodox solutions, examined in Chapter 3, include: adult children paying for and managing their parents' LTC provided by domestic workers and foster children; older women moving into the homes of their migrant daughters; and kin care being supplemented by neighbours. Understandably, these approaches seem likely to become more widely accepted than residential facilities, as they are more closely aligned with Ghanaian social norms. Chapter 4 outlines the role of the church in providing beyond-kin care options for mobile and relatively healthy older persons.

Chapters 5–7, which form Part II, cover emerging commercial LTC initiatives in the urban area of Accra-Tema that are available for the small number of middle-class and elite older persons who can afford them. These consist mainly of private agencies providing home care to older persons and a few small, struggling residential care facilities. Chapter 5 insightfully illustrates how commercial LTC services associated with Western societies are 'assembled' and modified, by the uncoordinated actions of various actors, as heterodoxies or alterodoxies. Focusing on the experiences of owners, consumers, and employees of LTC services, this chapter describes how transnational migration has assisted in creating and sustaining the LTC market. The education and training of home carers, elaborated in Chapter 6, includes the complex relations between the private and public healthcare sectors in the context of neoliberalism and the ways in which home carers sought and were denied cultural capital. Chapter 7 examines the new inscription of the home carer, highlighting emergent forms of social inequality between and within households. It discusses how home carers position themselves as nurses, despite being viewed as domestic workers by most of their employers. This chapter candidly describes the difficulties experienced by young, mainly female, home carers in Ghana when they look for employment with status, respect, and a salary that can support themselves and their families.

Finally, the conclusion presents recommendations to address issues examined in the previous chapters in order to improve the LTC sector in Ghana for all actors. It discusses the possibility that older Ghanaians could become a political force through their critique of the neglect they face by other social groups.

Changes in Care is a well-conceptualised and well-structured book, whose tone neither patronises Africa nor apologises for problematising issues and concepts. It is elegantly written in a manner that is both scholarly and accessible to wider audiences, including academics, practitioners, and policymakers. Professor Coe draws the reader into the intimacy of her personal research journey, critically but sensitively exploring the complex concept of social change without falling into tired binaries. She understands LTC, ageing, and social change in Africa, as well as the diversity of social change in the context of the broader globalised world. Hers is a voice and approach that are much needed in African scholarship.

In addition, even though this book focuses predominately on middle-class and elite older persons (a limitation that the author acknowledges), it supplements existing literature and contributes towards a scientific understanding of LTC systems in Africa.⁴ The practices presented in it can be applied to drive the expansion of innovative, culturally appropriate, affordable, and accessible LTC services and, ultimately, to influence policy and practice.

Changes in Care is a relevant and significant piece of work from Ghana for Africa and beyond. It offers value to everyone – from those unfamiliar with LTC and social change to subject experts who seek better understanding of LTC, social change, and ageing in the African context.

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