

Evaluation of community based care and support services for older persons in Motheo district, Free State Province

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Dissertation submitted in partial fulfillment of the
requirements for the degree *Master Artium in Social Work*
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DECLARATION

I, MPHO YVONNE TSHESBE, declare herewith that the dissertation entitled

**Evaluation of community based care and support services for older Persons
in Motheo district, Free State Province**

which I herewith submit to the North- West University, Potchefstroom Campus, in compliance with the requirements set for the Magister Artium in Social Work degree is my own work and that all the sources that I have used are acknowledged. The dissertation has been language edited (see annexure 9) and has not already been submitted to any other university.

MY TSHESBE

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I would like to thank the almighty God, the maker of heaven and earth who gave me strength, wisdom and courage to complete my studies.

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DEDICATION

I DEDICATE THIS STUDY TO MY PARENTS, MY LOVING FIANCÉ, FATHER OF MY TWO BEAUTIFUL SONS, KARABELO AND ORATILWE. BROTHERS, MOLEFI AND ONTHUSITSE, COUSIN ONNEILE AND MY AUNT OMPILEDITSE. YOUR SUPPORT AND LOVE HAVE MADE A MARK IN MY LIFE GUYS.

SUMMARY

Title: Evaluation of community based care and support services for older persons in Motheo district, Free State Province.

Keywords: Evaluation, community-based care, older persons, supports services.

The focus of this study is on the evaluation of community based care and support service for older persons in the community. The government of South Africa and other African Countries held several discussions with the intention of addressing the needs and challenges of older persons in the community. As a follow up to the discussion, the new developmental approach, that is the South African Policy for Older Persons of 2005 and the Older Persons Act, 13 of 2006, promulgated in line with the recommendation of the Madrid International Plan of Action on ageing which was drafted and adopted at the World Assembly on Ageing that was convened by the United Nations in 2002.

Older Persons Act 13 of 2006 was developed with the intention of addressing the needs of older persons in the community as the Aged Act no 100 of 1967 as amended in 1998, was focusing more on the residential care service. The Older Persons Act 13 of 2006 recognizes the importance of community-based care and support services and this means that the service delivery to older persons has been broadened and services have become more inclusive and accessible. Older persons will be able to remain in their communities within their families for as long as possible. According to the Older Persons Act 13 of 2006, the community-based care and support services means any programmes that are rendered to older persons to enable them to remain independent in their communities for as long as possible. These programmes are preventing the unnecessary admission of older persons in the residential care facilities. According to the Older Persons Act 13 of 2006, the Community-based care and support services are categorized into, namely, prevention and promotion programmes and the home-based care services. These two categories will be discussed in details in this study.

In this study the researcher used the older persons (recipients of services), representatives of management committees for the Non-profit organizations rendering services to older persons in the community and the officials of the Department of Social Development as participants.

The aim of this study is to discuss and evaluate the community-based care and support services strategy as used by the Department of Social Development in rendering services to older persons within communities in Motheo District (Free State Province) and to raise the viewpoints of direct service providers (management committees) officials of the Department of Social Development and older persons that receive these services, in order to enhance the delivery of this programme.

The research methodology that was utilized in this study includes the empirical research and the literature review. A literature review was conducted by the researcher for a clear understanding of the nature and meaning of the problem that has been identified. The questionnaires and interview tools were used by the researcher as methods of data collection. This study consists of two articles, article 1: Background and nature of community-based care and support services and article 2: Evaluation of community-based care and support services

The findings from the study indicated that the community based care and support services can be the best and important programme for older persons in the community if it can be well implemented.

OPSOMMING

Titel: Evaluering van gemeenskapsgebaseerde sorg en ondersteuningsdienste vir ouer persone in die Motheo distrik, Vrystaat Provinsie.

Sleutelwoorde: Evaluering, gemeenskapsgebaseerde sorg, ouer persone, ondersteuningsdienste.

Die studie fokus op die evaluering van gemeenskapsgebaseerde sorg- en ondersteuningsdienste vir ouer persone in die gemeenskap. Die regering van Suid Afrika en ander Afrika Lande het verskeie samesprekings gehou met die doel om die behoeftes en uitdagings van ouer persone in die gemeenskap te bespreek. In opvolging van die gesprek, het 'n nuwe ontwikkelingsbenadering gevolg, en is die Suid Afrikaanse Beleid vir Ouer Persone van 2005 en die Wet op Ouer Persone, Wet 13 van 2006, gepromulgeer in lyn met die aanbeveling van die "International Plan of Action on Ageing" wat geskryf en aanvaar is by die World Assembly on Ageing wat deur die Verenigde Nasies byeengeroep is in 2002.

Die Wet op Ouer Persone, Wet 13 van 2006 is ontwikkel met die bedoeling om die behoeftes van ouer persone in die gemeenskap aan te spreek, aangesien die Wet op Bejaardes, Wet 100 van 1967, soos gewysig in 1998, meer gefokus het op huishoudelike sorgdienste. Die Wet op Ouer Persone, Wet 13 van 2006 erken die belangrikheid van gemeenskapsgebaseerde sorg- en ondersteuningsdienste en dit beteken dat die dienslewering aan ouer persone uitgebrei is en dienste het meer inklusief en toeganklik geword. Ouer persone sal in staat wees om solank as moontlik in hul gemeenskappe te bly saam met hul families. Ingevolge die Wet op Ouer Persone, Wet 13 van 2006, beteken gemeenskapsgebaseerde sorg- en ondersteuningsdienste enige programme wat aan ouer persone gelewer word ten einde hulle in staat te stel om solank as moontlik onafhanklik te bly in gemeenskappe. Hierdie programme voorkom die onnodige toelating van ouer persone tot huishoudelike sorgfasiliteite. Volgens die Wet op Ouer Persone, Wet 13 of 2006, word gemeenskapsgebaseerde sorg- en ondersteuningsdienste

gekategoriseer in voorkoming en promosie programme en tuisgebaseerde sorgdienste. Hierdie twee kategorieë sal volledig in hierdie studie bespreek word.

In hierdie studie het die navorser oer persone (ontvangers van die dienste), verteenwoordigers van die bestuurskomitees van nie-winsgewende organisasies wat dienste lewer aan die oer persone in die gemeenskap, en amptenare van die Departement van Maatskaplike Ontwikkeling as deelnemers gebruik.

Die oogmerk van die studie is om die gemeenskapgebaseerde sorg- en ondersteuningsdienste strategie, soos toegepas deur die Departement van Maatskaplike Ontwikkeling op die lewering van dienste aan die oer persone in die gemeenskappe in die Motheo Distrik (Vrystaat Provinsie) en om standpunte van direkte diensverskaffers (bestuurskomitees), amptenare van die Departement van Maatskaplike Ontwikkeling en oer persone wat die dienste ontvang, te verkry, ten einde lewering van die program te bevorder.

Die navorsingsmetodologie wat gebruik is in die studie, sluit in 'n empiriese studie en 'n literatuur oorsig. 'n Literatuur oorsig is deur die navorser gedoen om 'n duidelike begrip van die aard en betekenis van die probleem wat geïdentifiseer is, te kry. Die vraelyste en onderhoudsmetodes is deur die navorser gebruik om data te versamel. Hierdie studie bestaan uit twee artikels, naamlik: artikel 1: Agtergrond en aard van gemeenskapsgebaseerde sorg- en ondersteuningsdienste en artikel 2: Evaluering van gemeenskapsgebaseerde sorg- en ondersteuningsdienste.

Die bevindinge van die studie het daarop gedui dat gemeenskapsgebaseerde sorg- en ondersteuningsdienste die beste en belangrikste program vir oer persone in die gemeenskap is indien dit behoorlik geïmplementeer word.

FOREWORD

The manuscript is presented in article format in accordance with rules A.11.5.3 and A.11.5.4 that are set out in the calendar (2013) of the University of North West.

The article will comply with the requirements of the South African Journal titled Social Work/ Maatskaplike Werk.

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SECTION A:

ORIENTATION TO THE STUDY

1 ORIENTATION TO THE STUDY

According to Department of Social Development (2002:2) after 1994, the government of South Africa and other African countries held several discussions with the intention to address the needs of older persons in the world. The Government of South Africa came up with a strategy to address the needs of all older persons in the country. The new developmental approach, that is Older Persons Act 13 of 2006 and the South African Policy for Older Persons (2005) promulgated in line with the recommendation of the Madrid International Plan of Action on ageing which was drafted and adopted at the World Assembly on Ageing that was convened by the United Nations in 2002. This plan sought to meet the challenges associated with ageing populations. South Africa like other countries in the world has an increasing ageing population. The Older Persons Act 13 of 2006, recognizes the wisdom and skills of older persons, encourages participation of older persons in the community, encourages older persons to live in their communities within their families for as long as possible and recognizes the changing roles of older persons.

The presence of older persons within families as well as in the communities helps in the preservation of cultural norms and values of the society. Chen and Berkonitz (2012:1) suggested that older adults may transit through difficult residential statuses as the various services meet their needs. Department of Social Development (2006:2) mandates the importance of Community Based Care and Support Services to Older Persons with the aim of shifting from institutional care. This shift requires government bodies to provide support services that enable older persons to live in their community rather than institutions.

2 PROBLEM STATEMENT

The role of older persons in South African households has changed significantly. The Department of Social Development (2005:6) pointed out that traditionally, older person's role was to advise, direct and lead their families and societies in those practices, rituals and ceremonies that not only ensured their own survival, existence and continuity, but that of the community as a whole. They were involved in the socialization of society and ensured the attainment and passing on society's knowledge, values and norms. According to the researcher's work experience as a district coordinator for the older person programme, advent of the church, education, urbanization and the modern way of life has brought about changes in these roles. The African way of living is abandoned, older persons are considered to be witches as a result they are killed and abused by the communities that are supposed to protect them. Their skills and knowledge and wisdom are down played by the younger generation.

Strydom (2008:105) highlighted that the status of older persons has been eroded as traditional systems and support networks have left older persons isolated and made them appear as a burden with little protection against abuse, neglect and abandonment. Dhurup and Surujlal (2009:16) add that many older persons in South Africa are faced with prospect of increased isolation and loneliness. The researcher view isolation of older persons as the cause for vulnerability and exposure to criminal activities and other social ills that affects their lives adversely. When children grow old and get married, they left their parents alone without any support system and forget them. In most cases older persons tend to see him or herself as being isolated from the people he or she loves, feeling lonely and neglected.

According to Makiwane et al. (2004:11) additional factors such as urbanization, the immigration and the chronic diseases have a devastating impact on the structure of the family. Older persons play this very difficult role within their families with not enough resources at their disposal and absolutely no recognition for their efforts. This situation has negative implications for the sustained livelihoods of the older persons. In their old age when they are expect to be cared for, the elderly people take on the responsibility of caring for their extended family.

Smith et al. (2013:1) pointed out that as you grow older you face significant life changes that can put you at risk for depression. The active involvement of older persons in issues that are affecting them would address their challenges as well as their needs in the communities in which they reside. According to the Department of Social Development (2010:5) the Community Based Care and Support Services are mostly developed by local community leaders assisted by professional persons. The researcher believes that older persons should be included in decision making about the issues that are affecting them. The professionals and community leaders should not do things for the older persons as this will create dependency.

In most households the older persons find themselves having to take over the role of being the primary caregivers of their own sick children and their grandchildren. May (2003:4) pointed out that the increasing number of young and middle-aged adults who die due to HIV and AIDS, often leaving behind orphans in the care of grandparents who become second time parents tend to increase the burden of care. The grandparents have to support them financially and give them proper care as well. Research has shown that unemployment and poverty have placed other responsibilities on older persons, causing them to care and support for their families. These as a result put a strain on older persons, psychologically as well as financially and it also contributed to the deterioration of their health status. According to Bungane et. al. (2012:45) practitioners in the health care and social services find themselves in the frontline with regard to dealing with the consequences of HIV and AIDS.

The researcher in her field as a social worker has observed that in Motheo District many households are headed by older persons as sole breadwinners where the social grant is used as the main source of income. Department of Social Development (2006:12) adds that pension sharing is a norm in South Africa especially in the black community. In some households existence of multigenerational households might imply existence of a burden on the social pensioner. This has the implication of having older persons being strained financially and physically and not being able to look after themselves and their health.

The community based care and support services programmes have been in existence for the past years. The Older Persons Act no 13 of 2006, has broaden the

programme so that it meet the needs of all older persons in the community who does not want to reside in a residential care. However these programmes have never been evaluated either by social worker or community developer in order to understand whether the needs and challenges of older persons in the community are met. This study therefore seeks to describe and evaluate the Community Based Care and Support Services strategy as used by the department of social development in rendering services to older persons in the communities in Motheo District.

3 RESEARCH QUESTIONS

This study attempts to provide answers to the following questions:

- What does the community based care and support services for older persons in the community entails?
- Can the evaluation of community-based care and support services from the viewpoint of older persons, officials of the Department of Social Development and the management committee of community-based organisations, benefit the older persons who receive the services from the Department of Social Development?
- How can the current programme be enhanced to deliver better services to older persons.

4 AIM AND OBJECTIVES

Aim

- To discuss and evaluate the community-based care and support services strategy as used by the Department of Social Development in rendering services to older persons within communities in Motheo District (Free State Province) and to raise the viewpoints of direct service providers, officials of the Department of Social Development and older persons that receive these services, in order to enhance the delivery of this programme.

Objectives

- To discuss the community-based care and support services of the Department of Social Development from the viewpoint of older persons that receive the

services, the officials of the Department of Social Development and the management committee of the community based organisations.

- To evaluate the community-based care and support services of the Department of Social Development from the viewpoint of the older persons that received the services, the officials of the Department of Social Development and the management committee of the community-based organisations.
- To triangulate the viewpoints of the three groups of participants in order to make recommendations for the proper delivery of this programme.

5 CENTRAL THEORETICAL STATEMENT

Through an evaluation of community-based care and support services of the Department of Social Development, services rendered by the Department's officials and other direct service providers can be enhanced in order to optimally benefit the older persons that avail themselves of these services.

6 DEMOGRAPHIC INFORMATION OF RESEARCH AREA

Motheo district is one of five districts in the Free State Province of South Africa. It is made up of three municipalities and they are Mangaung, Naledi and Mantsopa. Each municipality has three or six areas that falls under it. It is a district between Xhariep district and Lejweleputswa district of the Free State Province. Motheo District has rural, semi-rural, urban and semi urban area. The district has a mixed language population group, but the main languages are Sesotho and Setswana.

At present the structure of the District changed as the two municipalities, Naledi and Mantsopa were incorporated into two other different municipalities still in the Free State Province. The changes to the District structure were necessitated by the changed status of Mangaung which became a Metropolitan City (Annexure 8).

In Motheo District there are 34 community-based care and support services organizations funded by Department of Social Development, to render services to older persons in the community.

7 THEORETICAL FRAMEWORK

➤ Systems Theory

For the purpose of this study the researcher has used the system theory in order to give an understanding of how each system or subsystem is relating to each other and what impact they have on one another. Compton and Galaway (1994:124) define a system as a whole, a unit, composed of people and their interactions, including their relationship. People within a system are related to at least some others in the system in a more or less stable way within a particular period of time and space. In this study, service delivery to older persons is viewed as the larger system and the Department of Social Development, the Non-profit Organisations and other stakeholders are seen as subsystems.

In terms of service delivery to older persons, Department of Social Development is playing a leading role in partnership with the Non-profit Organisations and other stakeholders. Department of Social Development is expected to allocate funding to Non-profit Organisations for the purpose of rendering effective and efficient services to older persons in the community. Zimmerman-Lehman (2005:1) pointed out that having financial problems have always been the most likely place for Non-profit organisations get into trouble with the law. The researcher agrees that department's role is to provide capacity building and empowerment to the Non-profit organisation and also to monitor and evaluate the services rendered to older persons in terms of the objectives in the service specifications and the memorandum of understanding.

When the Department of Social Development fails to play their role as expected, the non-profit organisations will also fail to play their role which is to render effective and efficient services to older persons and as a result, the larger system that is the service delivery to older persons will suffer. This will have a negative impact on older persons as they will end up not receiving the services they needed most. The Department of Social Development also will appear as a failure in delivering of services to older persons. The Department of Social Development is supposed to account to the Provincial Treasury for every funding that is allocated to the Non-profit Organisation rendering services to older persons. The service delivery of Non-profit organisations are monitored and evaluated and if it is found that the

organisations are not rendering the services as expected and are unable to account for the funding allocated to them, the affairs of the organisation is investigated. Any misappropriation or deviation from the the memorandum of understanding, gives the department of Social development the right to terminate the service. The older persons, who are the beneficiaries of the services provided by those organisations, will then suffer the consequences.

8 DURATION OF THE RESEARCH STUDY

The study was initiated in 2010 and the researcher got the approval from the Department of Social Development to conduct a research in the Motheo District in the year 2011, using officials of the Department and funded Non-profit Organizations of the Department of Social Development as participants (Annexure 1). The researcher then requested the approval from the management of different Non Profit Organizations' around Motheo district, made up of three municipalities, namely Mangaung, Mantsopa and Naledi to conduct research using them as participants. Two Non-profit Organizations from each of the three municipalities participated in the research. The permission was also obtained from all the participants (Annexure 2).

9 RESEARCH METHODOLOGY

9.1 Literature review

According to Wikipedia (2013:1) a literature review is a text written by someone to consider the critical points of current knowledge including substantive findings, as well as theoretical and methodological contributions to a particular topic. Literature reviews are secondary sources and as such do not report any new or original experimental work. A literature review can be interpreted as a review of an abstract accomplishment. Fouche and Delpont, (2005:123) reported that a literature study is aimed "at contributing towards a clearer understanding of the nature and meaning of the problem that has been identified". Mitchell and Jolley` (2001:518) agrees that a literature study is necessary and important for the researcher to familiarize him/herself and gain more information concerning the research topic and also to determine what other researchers have done in this regard in order to avoid and prevent duplication. Through literature studies, one is able to discover where

information is most lacking. Babbie and Rubin (2010:83), add that a literature study will enhance empirical findings and vice versa and that researchers have no way of knowing whether the research question has already been adequately answered, nor of identifying the conceptual and practical obstacles others have already encountered in this line of research, unless we review the literature.

The researcher has realize that research has been conducted throughout the world about community based services for older persons, but none of them has done the evaluation part of the programme and see if the programme really meets the needs of older persons in the community. Therefore, the existing literature reveals that there was insufficient research and even less research pertaining to the evaluation of community-based care and support service of older persons.

Databases used : Nexus database system at Ferdinand Postma Library of North West University, Potchefstroom and Mafikeng Campus, South African and International journals, Government documents, University of the Free State Library (Bloemfontein Campus) and Google search.

9.2 Empirical research

9.2.1 Evaluation research

For the purposes of this study the evaluation research model was utilized. According to Yegids and Weinbach (2009:285) this model attempts to answer many different questions concerning programmes. Evaluation research seeks to build knowledge to improve the quality of social programmes, both proposed and existing. These programmes may be designed for social action, prevention or treatment. Evaluation research aims to test interventions to see how effective they are and what alterations can be suggested to the current programme (Royse et al., 2010:1). The findings of evaluation research are often only of interest to those associated with a programme or the people associated with it.

According to Babbie and Rubin (2007:200) evaluation research is used to assess the ultimate success of the programmes, as well as to assess problems concerning the way programs are being implemented and to obtain information needed in program planning and development. According to Royse et al (2010:12-13)

Evaluation research is the systematic application of social research procedures in assessing the conceptualization and design, implementation, and utility of social interventions and programmes. In other words it uses the social research methodologies to judge and to improve the planning, monitoring, effectiveness, efficiency of human service programme. It has more to do with purpose of research than with specific research methods. This research method was used by the researcher to evaluate the community-based care and support services as used by Department of Social Development in rendering service to older persons who are living with their families within their communities, that is, to assess its ultimate success and success or failure and to come up with the recommendations on how to enhance the programme.

9.2.2 Research designs

Research designs is a plan to provide answers to social questions and guidelines for investigative activity (Mitchell and Jolley; 2010:550; Monette et al, 2011:9; Neuman; 2006: 33). The design guides the researcher in planning and implementing the study in such a way as to achieve the intended goals (Maree, 2008:70). It begins with identifying and developing the problem based on theory or concepts, before examining the project, up to the final plans for data collection (Burns and Grove, 2001:223). For the purpose of this study, the researcher used both qualitative and quantitative design methods. In this study the three data sets from the three groups of participants were triangulated regarding the qualitative and the quantitative data. Delpont and Fouche (2011:442) explained that triangulation mixed methods designs are one-phase designs in which the researcher uses both quantitative and qualitative methods during the same timeframe and with equal weight to best understand the phenomenon of interest.

9.2.3 Research objectives

For purposes of this study, the researcher used all four research objectives, namely the exploratory, descriptive, explanatory and evaluative objectives. Babbie (2010:94) and Babbie and Mouton (2009:81) add that all these objectives can be used in a quantitative or qualitative designs. Engel and Schutt (2010:9), Pierson and Thomas (2010:440) and Rubin and Babbie (2005:123) mentioned that exploratory studies want to know more about a setting when the subject of study is new and

unstudied. Furthermore, exploratory studies serve as a mechanism to learn more about the meanings people attach to their actions and concerns, to test feasibility of undertaking a more careful study and to start familiarizing oneself with the topic and to gain understanding of the issues at hand. According to Fouche and De Vos (2011:95) explorative research is used when there is a lack of information on a specific topic. Hennik et al (2011:10) explained that the 'what' question is being asked in the case of exploratory studies. The existing literature reveals that there was insufficient research and even less research pertaining to the evaluation of community based care and support services of older persons.

Descriptive objectives offer a picture of the specific details of a situation, social context or relationship. In this objective the researcher starts with a clearly defined subject and does the research to describe it accurately. According to Aston and Bowles (2009:33) the questions that need to be answered in this type of research are the "how" and "what" questions. Yegids et al (2012:126) adds that the accumulation of findings derived from exploratory research makes it possible to design studies that allow us to gather descriptive knowledge. Burns and Groves (2001:44) explained that the descriptive research objectives provides a detailed description of what was explored and further will allow the researcher the opportunity to look with intense accuracy at the phenomenon.

According to Adler and Clark (2008:14) the explanatory objective endeavours to explain 'why' things are the way they are and to make statements about the influence of a program on a participants. Glicken (2004:267) describes explanatory research as attempts to provide meaningful and accurate conclusions from the possibly considerable amount of information gained or already available.

Royce et al (2010:1) pointed out that the evaluative design helps to determine whether the needs of people in a specific setting are met or the clients' goals attained. Babbie and Rubbin (2010:42) adds that the evaluative design aims at evaluating the effectiveness of a particular program and actually encompasses all three objectives, namely exploratory, descriptive and explanatory. Alston and Bowles (2009:141) agrees that evaluative design is a valuable tool for improving existing programmes in response to careful assessment of the delivery and

response to our service. Hence the topic of this study is to evaluate the community based care and support programme of older persons in Motheo District.

9.2.4 Sampling

According to Alston and Bowles (2009:80) sampling is about choosing who or what we wish to study in order to answer our research question. For the purposes of this study non-probability sampling was utilized and specifically the purposive sampling. Claire (2012:1) explained a non-random assignment of research participants as when they pick people with specific traits and do their research on them to see effects it has. The purposive sampling is based entirely on the judgement of the researcher "in that a sample is composed of elements that contains the most characteristic, representative or typical attributes of the population that serve the purpose of the study best" (Strydom,2011:232). Alston and Bowles (2009:90) add that in purposive sampling the sample is chosen for a particular purpose. The sample also gives insights into a particular issue related to the study area.

For the purposes of this study, a sample was drawn from six of the funded organizations. Reference dictionaries (2013:1) define sample as a much smaller, limited quantity of something that is a larger whole which is used to represent the whole in entirety. These six organizations were selected from the three municipalities which form the Motheo District. This was done with the purpose of including participants from all three municipalities. Two management committee members were selected from each organization to represent their organizations. Therefore there was a total number of 12 participants. Four beneficiaries (older persons) from each organization also participated in this study; making a total number of 24 older persons who can still function independently. Ten frail older persons who are receiving services in the comfort of their homes were also interviewed. Ten Social Workers, who are rendering services to older persons, were selected to participate in this study. In total there were 56 participants.

9.2.5 Measuring instrument

According to Kimberlin and Winterstein (2008:2276) measuring is the assigning of numbers to observations in order to quantify phenomena. Cozby (2009:90) described measurement as a process of determining or estimating the values of

variable for different individuals. Pretorius (2012:26) pointed out that to ensure the quality of data in quantitative research it is important to ensure the validity and reliability of the data. According to Burns and Grove (2005:374) reliability is referred to as the consistency and dependability demonstrated by a research instrument (questionnaire in this study) when it is used to measure the variable attribute that it was designed to measure. Validity refers to the degree to which the instruments measures what it was supposed to measure (Pietersen & Maree, 2007:147). Validity was assured by determining the appropriateness of the questionnaires and checking whether the questions corresponded with the objectives of the study. In qualitative research the data must be trustworthy. According to Botma et al. (2010:232) trustworthiness as was proposed by Lincoln and Guba has four epistemological standards namely: truth value, applicability, consistency and neutrality. For each of the four standards, there are specific strategies and criteria to adhere to and to ensure rigor in the research. These epistemological standards are now discussed in detail:

➤ **Truth-value**

This implies how true are the findings of the study in the context in which the research was undertaken. The researcher made sure that the results are true by checking the members in the sense of communication, validation of data and interpretations with members. The prolonged engagement with the respondents in the setting was undertaken to ensure sufficient time to build a trusting relationship, especially in the community hall where the interview was conducted in a form of group.

➤ **Applicability**

Applicability refers to the degree to which the findings are applicable or relevant to different context or other respondents. All three groups of respondents were chosen, because they have the responsibility of improving the service delivery in the field of older persons.

➤ **Consistency**

Consistency implies how repeatable the findings of the study are if the study should be repeated in the similar context with the same respondents. The research methodology was clearly and fully described. The three groups of respondents chosen in this study have the expertise and insight in the field of older persons and if the study can be repeated in the same manner with the same respondents, the results will be the same.

➤ **Neutrality**

This entails how it can be determined whether the findings of a study were influenced by the respondents and the circumstances of the study and not by the researcher's biases, motives interests or perspectives. There was no prior meetings or arrangements entered into by the researcher and the respondents. The researcher also subjected the study to critical evaluation from the beginning to the end. Hence the study was given to an expert researcher for the second opinion.

9.2.6 Research Procedure

- Permission was obtained from the Department of Social Development in Bloemfontein where the researcher is employed as a district coordinator for the Older Persons sub-directorate (Annexure 1)
- Written permission was obtained from the older persons and the management committee of Community Based Organization (Annexure 2).
- Written permission was also obtained from the ethical committee of the North-West University, Potchefstroom Campus (Annexure 3).
- All the people who participated in the study signed in the informed consent forms (Annexure 4).
- A questionnaire with open and closed-ended questions was used for both representatives of management committee for organizations of older persons (Annexure 5) and officials of the Department of Social Development (Annexure 6). The researcher's reasons to use questionnaire instead of the in-depth interview is because both officials and some members of the committee are employees and they always have busy schedule that makes it difficult for the researcher to get time with them until the researcher resorted to questionnaires.

They were also not willing to work on weekends and after hours as they believed that it is their family time. The use of questionnaires was also an advantaged to the researcher because people were very open, honest and clear when answering questions and this tool assisted the researcher to collect as much information as possible.

- The researched had to travel long distances in order to conduct research activities within limited time, as the district was big. Due to lack of enough time to conduct in-depth interviews, the researcher had to rely on the utilization of structured questionnaires (Annexure 7). The researcher had to grouped older persons in a hall and explained the questions to them and they were also asking for clarity where they do not understand. The older persons answered the questions in writing using the language that they were familiar with. The same questionnaire starting from question thirteen (13) was used to interview the frail older persons at home who are using home-based care services. The older persons were not in the position to write due to their health status and in-depth interview was conducted. The researcher here was asking questions and taking notes of the answers. Tape recorder was used for both interviews.

9.2.6 Ethical issues

According to Strydom (2005:57), ethics are a set of moral principles which are suggested by an individual or a group, are subsequently widely accepted, and which offers rules and behavioral expectations about the most correct conduct toward experimental subjects and respondents, employers, sponsors, other researchers, assistants and students.

(Monette et al., 2005:53-57, Neuman, 2006:132, Salkind, 2009:79-80) regard the following ethical principles as very important when conducting a research:

➤ Voluntary participation

The respondents were informed of the purpose of the study and the effects the study might have on them and they were also told that the participation in the study is voluntary and they are free to withdraw from the study or terminate their participation without any penalty incurred.

➤ Confidentiality

The importance of confidentiality was explained to the participants. They were also requested to keep all the private matters discussed in the study confidential to protect one another. Confidentiality within the context of this study referred to the management of private information from the respondents. The collected private information was used specifically for this study and not for any other purpose. The researcher is a registered social worker and bound to confidentiality by code of ethics as stipulated by South African Council for Social Service Professions (Babbie,2004:63-72; Van Zyl-Edeligh & Pretorius,2005:107-113).

The research was approved by the ethical committee of the North West University, Potchefstroom Campus (Ethical approval number: NWU-00140-11-S1) (See Annexure 3).

➤ Avoidance of harm to participants

The researcher ensured that the respondents were protected from all possible emotional discomfort and were not exposed to any harmful activities and circumstances. The researcher offered counselling services after the interviews where there was a need.

➤ Informed Consent

The respondents signed the informed consent form (see Annexure 4) to acknowledge that they know what the study is all about before participating. The respondents were also assured of their safety as all the data collected for the purpose of the research was safely locked in the lockable cupboards at the premises of the researcher. The researcher will also have a secret code in her computer.

9.2.7 Data analysis

According to Sullivan (2001:451) data analysis is in many ways an attempt to extract meaning from observations that have been made. For the purpose of this study data was analyzed both quantitatively and qualitatively. The qualitative data was done according to Tesch's approach (Poggenpoel, 1998:343-344). The quantitative data

was transformed into statistics. For the purpose of this study only the demographic part was analysed quantitatively because in the demographic part the respondent only tick what is applicable and were not expected to discuss or explain as in the qualitative method. De Vos (205:333) points out that data are interpreted by giving them meaning, translating them or making them understandable. McKendrick (1990:275) add that when analyzing qualitative data, the goal is to summarize what you have seen or heard in terms of common words, phrases, themes or patterns that would aid your understanding and interpretation of what is emerging. The purpose of the data analysis is to reduce data to a legible and interpretable form so that the relationship of the research problems could be studied and conclusions drawn. The aim is to interpret and make sense of what is in the data.

10 LIMITATION OF THE RESEARCH

Limitations regarding this study were as follows:

- The population from which the sample was drawn is the most vulnerable and sensitive group of people (older persons) where most of them are illiterate, meaning unable to read and write, others have health related issues where they cannot hear nor see and others have difficulties in trusting anyone to be open and be able to share the necessary information. It was really a time- consuming and difficult exercise.
- Even though the researcher was given permission by employer to conduct a study, there was limited time for the researcher to conduct the research during the day, due to busy work schedule and lack of support from the supervisors and in most cases the researcher were forced to work after hours and during weekends.
- Motheo District is composed of Mangaung, Naledi and Mantsopa. The structure of the District changed as the two municipalities were incorporated into other two different municipalities still at Free State Province. The changes to the District structure were necessitated by changed status of Mangaung into being a Metropolitan City. Due to these changes the researcher had to make necessary arrangements to continue travelling to the Naledi and Mantsopa Municipalities to finalize the research (Annexure 8).
- The employer (the Department of Social Development) took time to grant permission for the researcher to conduct the research in the district.

Management and supervisor were not supportive of the researcher as they believed that the whole research process will interfere with the researcher's day to day work performance. They also feared that the researcher will neglect her duties due to her studies.

- For the purposes of this study the researcher targeted the older persons who live in rural areas. The researcher had to travel long distances in order to conduct research activities within limited time. Due to lack of enough time to conduct in-depth interviews, the researcher had to rely on the utilization of structured questionnaires.

11 DEFINITION OF CONCEPTS

➤ Evaluation

According to Adirondack (1998:73) evaluation involves putting a value on the work. Babbie & Rubin (2007: 200) add that it is a systematic determination of a subject's merit, worth and significance, using criteria governed by a set of standards. Evaluation can assist an organization, programme, project or any other intervention or initiative to assess any aim, realizable concept/ proposal or any alternatives to help in decision-making or to ascertain the degree of achievement or value in regard to the aim and objectives and results of any such action that has been completed.

Alston and Bowles (2009:142) defined evaluation as the systematic study of the operation of social action, treatment and intervention programs and their impact. Further it is 'a collection of methods, skills and sensitivities necessary to determine whether a human service is needed and likely to be used, whether it is conducted as planned and whether the human service actually does help people in need.

➤ Community-based Care

According to Damron-Rodriguez et al. (2001:41) Community Based Care is defined as any aspect of care that takes place outside of hospital or nursing homes. It is the care that the consumer can access nearest to home, which encourages participation by people, responds to the needs of people, encourages traditional community life and creates responsibilities. The Department of Social Development (2005:27) pointed out that community-based care and support services mean development,

care and support services provided within a community, aimed at promoting and maintaining the independent functioning of older persons in a community.

➤ **Support Services**

For the purposes of this study support services refer to a professional assistance provided by social worker both in the government as well as in non-governmental organizations. According to Collins English dictionary (2003:1) "support" means to promote an interest or cause. Support Service implies supporting, reinforcing and strengthening the ability of a family to meet the responsibilities of their respective statuses (Kirst-Ashman, 2010:244). Social support comprises the idea of networks, supportive behaviours and subjective appraisal of support received (Drennan et al., 2008:235).

➤ **Older Person**

According to the Department of Social Development (2006:12) older person means a person who is 60 years of age and upwards. In other countries, like Europe, America and Austria, the term means any persons from 55years of age. Kirst-Ashman (2010:5) described older persons as persons from a diverse population, presenting a wide range of practice needs and social issues. Most developed world countries have accepted the chronological age of 65 years as the definition of older person, but the (UN) United Nations agreed cut-off is 60+ years with reference to the older population. In this context an older person will refer to a person who is 60 years of age or older.

12 STRUCTURE OF THE RESEARCH REPORT

SECTION A

In this study section A, gives a brief overview and orientation of the study which includes the problem formulation, aims and objectives, central theoretical argument as well as research methodology and procedures that were utilized during the research process.

SECTION B

This section contains two articles regarding the research study. The title of each article is as follow:

- Article 1: The background and nature of the community-based Care and Support Services
- Article 2: Evaluation of community-based care and support service of Older Persons in Motheo District

SECTION C

This section contains the summary, recommendations and conclusion regarding the community-based care and support services.

SECTION D

This section contains all annexures used within the study.

SECTION E

The last section contains the consolidated list of references used in this research study.

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SECTION B: THE JOURNAL ARTICLES

ARTICLE 1

BACKGROUND AND NATURE OF COMMUNITY-BASED CARE AND SUPPORT SERVICES

1 INTRODUCTION

Government through the Department of Social Development came up with a strategy of addressing the needs of the older persons within their communities. The Department of Social Development introduced the community based care and support services with the intension of shifting from the residential care into the community-based care. However this approach has not been proven to be most effective in addressing the challenges faced by the older persons within their families as well as within their communities. There is a need for more research to be done to evaluate the effectiveness and efficiency of the community-based care and support services for older persons.

Community-based care and support services strategy as used by the Department of Social Development is promoted by the older persons Act 13 of 2006. The Older Persons Act 13 of 2006 replaces the Aged Persons Act 81 of 1967 as amended in 1998. According to Department of Social Development (2006a: 1) the Aged Persons Act 81 of 1967 was outdated and not responsive to the needs of older persons in the community. The emphasis of the act was on the residential care service for certain debilitated older persons. This has waned over the years as social and economic changes have put into doubt the continued viability of traditional arrangements for older persons.

The Older Persons Act 13 of 2006 was the first act to recognize the importance of older persons in the community and the need for them to access the services within their families. According to the Constitution of the Republic of South Africa (1996:12) older persons have rights which include the right to participation, dignity, independence, self-fulfillment and care. The Department of Social Development (2006b:12) adds that an older persons receiving community based care and support services has the right to pursue opportunities for the full development of his or her potential, the right to benefit from family and community care and the right to

protection in accordance with society's cultural values. The majority of African older persons received informal support from their families, that is, their children and relatives. In Nigeria, like in South Africa, the care of older persons was within the extended family system as they were cared for by their children, son's wife and by their younger siblings (Asiyanbola, 2007:146). The new values and norms redefining the way families relate to one another have emerged.

The act, Act 13 of 2006, has outlined the rights of the older persons receiving community-based care and support services, but there seems to be a lack of enough capacity and resources to ensure that those rights are respected and promoted. Older persons who remain within their families and their communities still need to be educated about their rights and their responsibilities. This as a result necessitates a research for the evaluation of the effectiveness and efficiency of the community-based care and support services programme for older persons.

2 PROBLEM STATEMENT

The researcher observed that in the Motheo District, majority of older persons live alone in townships and rural areas with minimal support, if any, received from their adult children, relatives and neighbours. Dhurup and Surujlal (2009:18) pointed out that families and friends are no longer playing a role in determining the status and support of older persons especially within the context of the extended family. According to Lombard and Kruger (2009:124) the life circumstances of the older persons are diverse, depending on the community in which they live and their older person's approach to life. Families are no longer fulfilling the economic, cultural and social functions that they performed before colonization and industrialization.

The researcher view isolation of older persons as the cause for vulnerability and exposure to other social ills that affect their lives adversely. "Furthermore, older persons are at risk of criminal activities." South African Older Persons Forum News (2010:6) adds that those older people who are abandoned by their family members are at risk of criminal attacks. Older persons are viewed as "soft targets" by those who abuse drugs, hold distorted cultural beliefs, hatred and many more such attitudes. Violence against older African women is worsened by accusations of witchcraft especially in Provinces such as North West and Limpopo. Increased

cases of murder of older African women and other atrocities were reported on by print media especially from 2009- 2011.

Older persons also suffer financial and emotional abuse from their families/caregivers or the people that they respect and trust. As such many older persons are living in extreme poverty. This problem has been proven through cases reported by the concerned community members to the social workers in the Department of Social Development and to some Non-governmental organization in Motheo District. Community-based care and support services are meant to ensure that older persons receive full support from their families and communities and do not lose their support networks (Nancarrow et al, 2009:435).

Asiyanbola (2007:146) pointed out that new values and norms redefining the way the families members relate to one another have emerged. The status of older persons have been eroded as traditional systems and support networks have left older persons isolated and made them appear as a burden with little protection against abuse, neglect and abandonment. Dhurup and Surujlal (2009:16) add that many older persons in South Africa are faced with the prospect of increased isolation and loneliness. The social and economic trends affect the profile of older persons and the services they require, namely community based care and support services.

According to Miller (2005:2) many older persons prefer community based care and support services because they are against institutionalization of older persons. Nelms et al. (2009:507) add that this is the same reason why Australian government has also increasingly emphasized community options for older persons. Lombard and Kruger (2009:121) pointed out that in South Africa, older persons experience challenges which range from inadequate provision for retirement, social exclusion, and lack of access to basic services and health care, food security and lack of affordable accommodation.

According to Challis and Hughes (2002:126) community based care is a substitute for institutional care. Department of Social Development (2006:12) defined Community Based Care and Support Services as any programme designed within the community to enable older persons who do not wish to or do not need to go to

residential care to remain in their communities within their families for as long as possible. This programme is categorized into two components, namely firstly, prevention and promotion programmes and secondly, home-based care.

The Community Based Care and Support Services, however has not been evaluated since the implementation of the Act, either by developers or by social workers so as to assess its effectiveness in meeting the needs of older persons in the community. Challis and Hughes (2004:155) agrees that for the most appropriate, effective and efficient ways to care for vulnerable older people is an enduring one. Hence the importance of research which seeks to explore how to meet the needs of frail older people at the margin of care, whose care needs can therefore be appropriately met in more than one setting. Delpont and Fouche (2005:262) agrees that every inquiry is derived from the researcher's world of thinking and in most cases from the relationship of the researcher to what she intends studying.

The Department of Social Development is funding Non-Profit Organizations to render Community-Based Care and Support Services. There is not enough research done to assess whether services provided by the funded organizations meet the needs of older persons as well as the objectives of the Department of Social Development on Community-Based Care and Support Services for older persons. Therefore the main focus of the study is to evaluate the Community-Based Care and Support Services as used by the Department of Social Development in rendering services to older persons.

According to Strydom (2008:108) the Department of Social Development is advocating for the rights of older persons and as a results they are the leading Department in ensuring that any services that are provided to older persons are in an environment that promotes the prevention of exploitation of older persons and affords them respect and dignity. According to Department of Social Development (2006:14) anyone who is rendering service to older persons is encouraged to register in terms of section 13 of the Older Person Act 2006. The requirements of this Act bind Department of Social Development and other government departments to protect and prevent older persons from any harm.

3 RESEARCH QUESTION

For the purpose of this study the researcher, answered the following research questions:

- ❖ What is the nature of Community-Based Care and Support Services for older persons?

4 AIM

The aim of this article is:

- ❖ To give the background and nature of Community-Based Care and Support Services.
- ❖ To discuss the two categories of Community- Based Care and Support Services.

5 NATURE AND BACKGROUND OF THE COMMUNITY-BASED CARE AND SUPPORT SERVICES

The Community-Based Care and Support Services is the programmes that are rendered to older persons to enable them to remain independent in their communities for as long as possible. Miller (2005:3) agrees that these programmes aim at preventing unnecessary admission of older persons in the residential care facilities. There are older persons who prefer to stay with their families and therefore the intension of the Community-Based Care and Support Services is to promote and maintain the optimally independent and active ageing of older persons within their communities (Department of Social Development, 2005:23). Strydom (2008:109) agrees that older persons who are recipients of community-based care and support services has the right to remain in their home for as long as possible, pursue opportunities for the full development of his or her potential and benefit from family and community care and protection in accordance with society's system of central value.

According to Lombard and Kruger (2009:128) community-based care and support services for older persons are not something new in South Africa. The first community-based care and support service was established in the late 1960s and thereafter more community-based care and support services have mushroomed all over the country as a result of the subsidy system. Chen and Berkowitz (2012:1) pointed out that in the United States, the development of community-based care and

support services began in the 1970's and expanded in the 1980's. The purpose was to offer older persons support that allows them to age in their own communities.

The Older Person Act 13 of 2006 recognizes the importance of community-based care and support services and this means that the base of service delivery to older persons has been broadened and services have become more inclusive and accessible. Older persons will be able to remain in their communities within their families for as long as possible and care of older persons has become the responsibility of every citizen. Department of Social Development (2006:10) spells out that, all older persons have the right to participate in community activities.

5.1 Categories of community-based care and support services

According to Department of Social Development (2010:17) community based care and support services for older Persons are categorized into two components, namely prevention and promotion programmes and home-based care.

5.1.1 Prevention and promotion programmes

According to Pierson and Thomas (2010:440) these programmes ensure independent living of older persons in the community in which they reside. The Department of Social Development (2010:18) pointed out that these services include luncheon clubs, day care centers, economic empowerment, active ageing, dissemination of information, education and counseling, education and training, income generating projects, feeding schemes and information and awareness campaigns. Strydom (2008:107) adds that local facilities such as community halls, clinics, churches, multi-purpose centres, school halls and children's day care centres are used to render these services. Some old age homes render these services as an outreach programme to the community.

According to the Department of Social Development (2010:10) prevention and promotion programmes are programmes run by older persons themselves as the Older Persons Act 13 of 2006 is encouraging them to take charge of their own programmes in their own communities. Even though the Act is saying older persons should lead their own programmes, Scrutton (1999:91) is against the idea because he believes that it is not every older person who wants to be led by other older

persons. Some prefer inclusion of the younger generation in their groups so as to be able to emphasize their common experience and interest, regardless of age. Age-integration groups can lead to valuable exchange of feelings, knowledge and skills between the generations. The older person should be encouraged to take responsibility in planning and doing things for themselves. Participation can be encouraged by way of asking members to take responsibility for tasks such as welcoming other members at the door or being able to act as host or hostess for regular meetings or special gatherings to promote feelings of belonging. The following prevention and promotion programmes or services will be discussed.

❖ Luncheon clubs

According to Lombard and Kruger (2009:128) luncheon clubs was introduced by the South African Council for the Aged and the first Luncheon club for older persons that was formed in a township was established in 1981. Some people used to call the Luncheon club the service centres. When the Older Persons Act 13 of 2006 came into effect the word "luncheon club" became popular and it is stated in the act as one of the services in the prevention and promotion programmes. Other people in the country are still calling it "the Service Centre." Harper (1999:267) pointed out that a luncheon club service is primarily used by older persons sufficiently mobile to get out of the house and who become involved in social activities. In the luncheon clubs older persons meet 3-5 days per week and a meal is served twice a day. Many older persons attend the clubs to overcome loneliness and to be with their peer group. In a luncheon club for older persons, the following activities can be done: spiritual motivation, physical exercise, sports, health talks, group discussion, short and long term trips, and handwork such as knitting, needle work, arts and crafts, gardening, competitions, fundraising, concerts and balanced meals. Kaplan (1998:168) adds that home talent can be utilized at annual or semi-annual meetings given over to original productions by members of the club. At the anniversary of the first meeting a small paper can be published to include poems, stories and articles written by the members. Older persons have wisdom that younger generations can learn from. Poems may also be read and skills by the members may be presented. Solo dances and singing or instrumental presentations could be a part of such a home talented program.

The Department of Education is one of the stakeholders that provide services at luncheon clubs. As part of their contribution to the luncheon clubs activities at Motheo District, they provide the Khari Gude programme which was established with the intension to assist older persons to read and write. The intergenerational programmes which aim at creating enabling environments for older persons to share their knowledge, skills, wisdom and expertise with younger generations is also promoted in the club. Scrutton (1999:94) argues that even though there is an increasing trend towards age segregation which teaches older persons that they are different and separate to other age groups and that they are not valuable to society, nowadays older persons are becoming more assertive in demanding their independence and their social and political rights. If attitude towards facilities for and the quality of life of older persons are to be improved, this will only be achieved by older persons themselves in identifying the issue, organizing action and fighting for their own course. Lombard and Kruger (2009:130) agrees that older persons are encouraged to include children in their program, that is to visit the local schools or crèches and share their life experiences, wisdom and skills with children and this will bring back morality and discipline in children.

Older persons programmes can be fruitful if the members are kept active. According to Kaplan (1998:169) the celebration and interpretation of the cultures of various groups may help to provide satisfactory or learning from each other about how other culture are working. Makiwane et al. (2004:28) adds that, because of their poor living conditions, lack of information, illiteracy, lack of proper economic, psychological support and their vulnerability to chronic illnesses, older persons are more vulnerable to HIV and AIDS. Luncheon clubs aim at keeping older persons active, independent in both the mind and body for as long as possible. This is an important strategy for them not to succumb to disease and illness easily and too quickly. Lombard and Kruger (2009:130) pointed out that other measures are to prevent or control these illnesses through educational and medical programmes. Older persons are also encouraged to share their problems and as a result the luncheon clubs form an important base for peer support group and social support.

❖ Adult day care centres

According to Lombard and Kruger (2009:128-129) an adult day care centre can be regarded as a meeting place where older persons can attend to be with their peer group and engage in social activities. Rosenberg et al (2005:32) add that it is a structured comprehensive program that provides a variety of health, social and related support services in a protective setting during the day. One of the goals of the program is to assist its participants to remain in the community, enabling families and care givers to get a temporary relief from caring during the day. Department of Social Development (2010:18) describes a day care centre as providing services similar to crèches for children. The focus of adult day care is also on enriching the participants' lives, building upon their skills, knowledge and unique abilities and strengths.

Harper (1999: 269-270) highlighted that the history of adult day care centres evolved from the day hospitals for psychiatric patients, based on the idea that psychiatric day hospitals are important for the purpose of keeping the patient independent and maintaining usual activities of daily living. The staff in the adult day care facility is trained in such a way that they are able to promote and maintain the individual's maximum level of independence, preventing or delaying further deterioration. They can also restore and rehabilitate the individual to his or her highest possible level of functioning, provide support, education for families and other care-givers, socialization and peer interaction and serve as an integral part of the community. Kaplan (1998:171) adds that adult day care centre usually operates during normal business hours and it provides a safe, supportive and therapeutic setting for older persons. William (1991:93) adds that the persons who are attending are usually dependent on some form of care, particularly if she or he is alone during the day when family is at work or is unable to take care of him- or herself throughout the day. Transport is often provided for older persons to get to and from the centre.

According to Harper (1999:269) there are those who are dependent on a walker or cane, wheelchair bound or unable to transfer. This profile provides insight into the variety of needs these older persons individuals have when they come to the adult day care centres. Williams (1991:93) agrees that a planned recreational, educational and activities program suitable to the needs and wishes of older

persons is provided. An important feature of the day care programme is physical exercise which is seen as promoting social interaction and preventing physical deterioration. Hobbies can be catered for and there is an opportunity for mental stimulation games such as bingo, art and crafts work, musical entertainment and sing songs, group discussions (books, films, current news and events), storytelling, holiday and birthday celebrations and local outings.

Fradkin and Heath, (1992:57) points out that there are three models of day-care, although many centres combine them. The first is the medical model which emphasizes health and rehabilitative services such as nursing and occupational, speech and physical therapies. The second model is referred to as social and emphasis recreation, socialization and assistance with activities of daily living. This is the most popular model in the Free State Province. The final model, serves only individuals with cognitive impairments such as Alzheimer's disease patients

According to Robinson et al. (2012:1) adult day care centers alleviate isolation for impaired older persons and it allows them an opportunity to socialize with peers and participate in interesting activities. Many care-givers, particularly employed people, feel less stressed during the day when they know that their older person is in a supportive and supervised environment. There is an assessment that needs to be done to ensure that an individual is an appropriate candidate for the centre, before an older person is admitted in a programme. Some centres will not accept an older person who is incontinent, dangerous, extremely disruptive or unable to walk alone or without an assertive device. If an older person is admitted in a day care centre, there is a monthly fee that he or she has to pay.

Day care centres are different from the Luncheon clubs in the sense that most of the older persons who are day care members need constant supervision. The day care centres are like a crèche for older persons and they can keep an older person until the families arrived from work. Some centres can accept older persons who are incontinent, dangerous, extremely disruptive or unable to walk alone or without an assertive device. Luncheon club is only accommodating older persons who are still independent and able to participate in the activities at the centres and does not need any supervision as they can do things for themselves. The Luncheon club

members come to the centre for a certain period of time. They only need guidance, support and capacity building to do what is expected of them.

❖ Transportation services

In the Free State Province there are a few NGO's that are providing transportation service for an affordable fee. The service does not reach all the older persons and most of them use public transport. The Department of Social Development (2005:18) agrees that the public transport in the country has not reached the acceptable standard, however there are some sorts of system in place. This system usually does not take the needs of older persons into account. Older persons like other citizens in the country have to rely on buses and taxis which are not safe and accessible especially for those with disabilities. Makiwane et al. (2004:33) pointed out that public transport is a barrier for older persons to function independently in the community. The most common complaint is that it is not user friendly for older persons; the route neglects those who stay far from the route. Some young taxi drivers lack respect and the abuse of older person is common in public transport.

There are no policies in place like in other place such as United States of America and Canada which ensures that transport for older persons is subsidized and is affordable and accessible to all. Coughlin (2001:1) pointed out that transportation service has been described as the glue that holds together all the activities in life. Less attention however, has been given to how older persons will retain their mobility, because without such mobility many older persons have a sense of loss and feelings of isolation from the world of their younger years. Wacker and Roberto (2008:261) add that a transportation service plays a critical role in the physical, social and psychological wellbeing of older person. Transportation service is a basic need often taken for granted and overlooked. Moroney (1998:59) agrees that when transportation service is unavailable, the community-based care and support services tend to be used with negative results for the caregivers and the recipients of services.

According to Coughlin (2001:1) transportation services is crucial to ensure that older persons have access to essential services such as medical care, grocery shopping, church, and to visit friends and families. There are day care centres that provide

accessible, affordable and safe transport to their beneficiaries, with well trained and designated staff functioning as drivers. Makiwane et al (2004:33) adds that the availability of adequate transportation enables older persons to live independently in their communities, helps to prevent isolation and the possible need for long-term care placement. Many older persons who do not drive or do not have a car must rely on family and friends to transport them from one place to the other.

❖ Active ageing

Department of Social Development (2005:18) described active ageing as one of the services promoted by government to enable older persons to live a healthy and active life style within their communities. The central theme of active ageing is to improve the older persons' quality of life and to make them less dependent on the state; family and the community and this can be achieved by way of providing basic information, training and promoting a healthy lifestyle. Older persons have a right to access recreation facilities and programmes. Sports and recreational activities that are suitable to older persons should be organized so as to enrich their lives and encourage creative use of time. Older persons should be provided with easier physical access to cultural institutions. The Department of Health (2000:1) emphasizes that physical activity is an important component of health for all individuals. In older persons the physical activity is important for maintaining functional independence and mobility and will further slowdown the loss of muscle tissue and bone mineral density that occurs with ageing.

The activities under active ageing at Motheo District includes spiritual motivation, physical exercise, sports, health talks, group discussion, short and long term trips, handwork such as knitting, needle work, arts and crafts, gardening, competitions, fundraising, concert and balanced meals. These activities must be appropriate to the needs, cultural values and health status of an older person. There is also an activity under the active ageing called the "Golden Games", where activities in this regard focus more on sports and recreation whilst at the same time strengthen and advancing the service delivery to older persons. According to the Department of Sports, Arts, Culture and Receptions (2011:3) the target group is older persons, 60 years and above, who are still active and the games are for all older persons including those in rural areas, informal settlements and disadvantaged communities

who are active and willing to participate. Even though the focus of Golden Games is on sports and recreation led by the Department of Sports, Arts, Culture and Recreation, the Department of Social Development is still taking the leading role in the care and protection of older persons. The Department of Social Development has to make sure that any services that are provided to older persons should be provided in an environment that promotes the prevention of exploitation of older persons and afford them respect and dignity. Dangott et al. (2002:69) agrees that physical exercise increases the likelihood of good health and long life. Endurance exercises such as long walks, jogging, swimming and bicycle riding improves cardiovascular functioning, heartbeat, blood circulation and respiratory functioning.

According to the Department of Health (2000:1) regular activity in older persons has been shown to improve balance and postural stability, thus reducing the risk of falling and associated fractures. Finally physical activity has been associated with improved psychological function in older persons, including self-efficacy or one's belief in one's ability to complete a specific task or to control one's situation. Strydom (2008:107) adds that the service must recognize the social, cultural and economic contribution of older persons, seek to ensure their access to information, education and training and promote participation in decision-making processes at all levels. The Department of Social Development recognizes the multi-dimensional needs of older persons and therefore promotes inter-sectional collaboration in the development and basic care of older persons in rural and urban areas.

5.1.2 Home-based care

Uys and Cameron (2003:22) defines home- based care as a placement of informal and formal caregivers in the home to promote, restore and maintain a client's maximum level of comfort function and health including care towards dignified death. Lindsay et al. (2003:24) adds that home-based care is the care given to individuals in their own natural environment by their families and communities to meet spiritual, material and psychological needs. Rosenberg et al. (2005:30) agrees home-based care programmes share certain characteristics, for instance in providing services primarily in the home. It includes a focus on the family as the unit of service and the utilization of the family system and community resources in the mobilization of services. Keigher et al. (2000:3) describes the United Nations

principles for older persons and mentions specifically that older persons should benefit from family and community care and protection in accordance with each and every person's cultural values. Lymbery (2005:66) adds that community care also reduces the level of dependence on expensive institutional care which is a major benefit for society at large.

According to Du Plessis et al. (2005:10) home-based care programmes started in Europe and North America because hospital care became too expensive. Families and other care givers found it difficult to cope on their own with the demands of care for older persons who are chronically and terminally ill. The main point about home based care is that for it to be comprehensive and cost effective, it must be based as much as possible within the community. Van Dyk (2002:327) adds that home-based care is specifically aimed at developing a care system that is effective and sustainable. The services of the home based care are intended to provide the organizational structures and resources that will enable the family to look after their own older people.

According to the Department of Social Development (2006:14) the objectives of home-based care is to ensure that frail older persons who cannot function independently receive adequate care and support in their home so that they are able to continue to remain at home and in the community they are familiar with. Du Plessis et al (2005:12) explained the three types of home-based care which is: the informal home-based care where families care for older persons at home with the help of their own social networks. No one has specific training and there is no external support, this type of care is not ideal especially when care-givers do not have the necessary skill, knowledge and emotional support. The second type is single service home-based care, in here one service provider, for an example, hospital, clinic, NGO's or church organizes home based care by recruiting and training volunteers and linking them with sick people and their families at home. The final type is integrated home based care, it works by linking all the service providers, for example community care-givers, clinics, hospital, support groups, NGO's and CBO's with older persons and their families in a continuum of care. This approach makes sure that the family gets all help and support they need, throughout all

stages of their illness including death. It ensures that there is good quality care from different service providers and support for community care-giver.

Rosenberg et al. (2005:30) state that in South Africa the government has developed a national home-based care strategy because:

- ❖ People prefer to receive care and support in familiar environments close to their family members and friends.
- ❖ Effective home-based care has been shown to improve quality of life of older persons as well as their primary caregivers, for an example, families may be convenient and less expensive than hospital.

It is important that the rights of the older persons are recognized and promoted within families and communities. The Department of Social Development (2006:16) adds that the following rights of the older persons should be recognized:

- ❖ To remain in the community and residence of their own choice for as long as possible,
- ❖ To create opportunities for the full development of the special qualities and potential of older persons and
- ❖ To receive the necessary care and protection from his or her family and the community in accordance with society's system of cultural values.

When one is talking about cultural values, he or she is referring to set of beliefs, attitudes and behaviors entrenched in a specific family and culture. Recognition and respect for spiritual and culture values, beliefs and habits forms the backbone of the service delivery model. The following services that falls under the home-based care programme will be discussed:

❖ Respite care

The Department of Social Development (2006:10) defines respite care as any support services offered specifically to a frail older person and to a caregiver which aimed at the provision of temporary care and relief from care-giving responsibilities. According to Fradkin and Heath (1992:60) respite care allows care-givers time away from caregiving and to rest, participate in recreational activities, run errands or visit friends. Respite care can help to prevent care giver burnout and it also allows a caregiver to step away from a stressful situation for a short break. The caregivers

who uses respite care service is reported to have more physical and emotional stamina as a result. The residential care facilities that provide respite care services are providing it either on week-ends only, the entire week or one month depending on an individual need and the situation at home. Fees vary according to number of days an older person is admitted in an old age home or care facility.

It is important for care givers to maintain good health status so that they can be able to provide effective and efficient services to older persons. According to Wayne and White (2012:1), care-givers can use respite care for support and for maintenance of their own health. It is important for care givers to use respite care services before they become exhausted, isolated or overwhelmed. Caregiving is a very demanding job because it takes the freedom of the caregivers away and there are times where a care giver will need to take a short term break so as to be able to promote balance in her life. Finding the right balance requires persistence, patience and preparation. Respite care can take many forms but it boils down to two basic ideas that is sharing the responsibility for caregiving and getting support.

❖ Caregiver support group

A caregiver support group is another service that can be provided in the community. Uys and Cameron (2003:190) agree that these groups allow people caring for older person to share coping strategies and practical information. In support groups caregivers are able to express their emotions in a supportive and non-judgmental environment. The meetings are structured to allow participants the opportunity to express their concerns and learn about practical skills and resources from the community experts. Group leaders are professionals or care-givers. Support groups are valuable resource for caregivers. According to Fradkin and Heath (1992:59) people undergoing the same experience can frequently share feelings that are difficult to discuss with family members and friends. Participants know that other group members are dealing with similar feelings and difficulties and may have valuable solutions to offer.

Alzheimer association (2013:1) believes that once a care giver open up in a support group, they find that their problem are not so different from others, by sharing with others in the same situation, they feel less alone. Participation in the support group

will make the care givers to become better and feel less devastated from the care-giving experiences. Some caregivers are experiencing a tough time when their love one's health condition is deteriorating and they become sick. The support groups will assist the caregivers to find some hope from the other care givers who have been caring for a longer time and survive the care-giving stress and experiences. Uys and Cameroon (2003:191) adds that care-givers needs the freedom to express their emotions without feeling guilty and positive reinforcement that can be given by others who knows the hard work involved in providing care. A caregiver support group gives its members the chance to vent their frustrations, anger and disappointment as well as share their success in a safe, non-judgmental environment. In the process members take a first step in restructuring their lives by forming new relationship with each other.

❖ Meals on wheels

Meals on wheels are another service that is provided in the community. This service is of great benefit to those frail older persons who are abandoned by their families and relatives and also those living on their own. They are mostly identified by the community members as well as voluntary caregivers in the community. According to Wayne and White (2012:1) nutritionally balanced meals are delivered to older person's houses that are unable to purchase or prepare meals for themselves, in other words those who are frail and bedridden. Meals on wheel are often used generically to refer to home-delivered meals programs, of which the recipients are the older persons.

This type of service has its history in other countries as well. According to Hum, (2009:1) meals on wheels originated in Great Britain during the blitz in 1947, when many people lost their homes and the ability to cook their own meal. The Women's Volunteer Service for Civil Defense provided food for these people. The name "Meals on Wheels" derived from Women's Volunteer Service related activity of bringing meals to servicemen. The concept of delivering meals to those unable to prepare their own evolved into modern programmes that deliver mostly to the housebound older persons for free or with donations. The Women's Volunteer Service were using old prams to transport the meals, using straw bales and even old felt hats, to keep the meals warm in transit. This type of meal requires many

volunteers with adequate knowledge of basic cooking to prepare the meals by a set time each day. In Australia meals on wheels started in 1952 in South Melbourne. The meals were delivered by a lady on a tricycle and when it became too much for her to cope, the Red Cross took over. In the United States of America, it started in 1954 at the request of the Philadelphia Health and Welfare council and funded by a grant from the Henrietta Tower Wurtz Foundation. Ms. Toy, a social worker in Philadelphia's Lighthouse Community Centre, pioneered a program to provide nourishment that met the dietary needs of homebound older persons. As in the case today, many participants were people who did not require hospitalization but who simply needed a helping hand in order to maintain their independence.

Like in other countries the South African government is recognizing the importance of meals on wheels. Anon (2009:1) stated that in South Africa, the meals on wheels service was established in September 1964 in East London by MOWCS Non- profit Organization. The organization later opened another branch in Cape Town as a result of its success in East London. The programme was responding to the hunger, loneliness, poverty and fear being experienced by so many older persons in the area. The meals are usually prepared in specially equipped meals on wheels kitchens and are then delivered by way of a special delivery vehicle that is manned by a driver and a hopper. Hoppers not only present the meals to senior citizens, but they also lend a caring and listening ear to the lonely, offer guidance and advice wherever this is needed and refer older persons to various other services that can make their old age more enjoyable and more meaningful.

In the Motheo District a meal is transported three to five days a week, once a day to frail older person's house, at noon according to the needs of that specific frail older person. Some older persons are dependent on meals on wheels/foot because it is their only meal in a day as they do not have family to take care of themselves. In cases where the organization does not have transport the other older persons who are willing to volunteer, deliver meals on foot. Meals on wheels services are reasonably priced depending on the organizations providing the service, but some organizations do provide the service free of charge.

❖ Provision of support services to older persons in communities

For the purposes of this study the researcher seeks to highlight the support provided by the professional social workers as well as outreach services provided by old age homes. Services provided by social workers include counseling, referral services monitoring and evaluation as well as coordination of services provided by various stakeholders. Counseling is the most utilized service. Farlex (2013:1) defined counseling as something that provides direction or advice as to a decision or cause of action. Webster (2013: 1) adds that the counselor's goal is generally to orientate the individual towards opportunities that can best guarantee fulfillment of his personal needs and aspirations. Social worker has an important contribution to make in delivering service to older persons in partnership with families, communities and other stakeholders in a coordinated and inter-collaborated manner.

According to Kerr et al (2005:2) Social worker working with older persons should focus on intensive care management with those who have complex, fluctuating and rapidly changing needs. Pressure to manage budgets and establish eligibility must not reduce social workers' capacity to engage with older persons and use the full repertoire of their skills in a holistic way. Work with older persons requires of Social Workers an ability to engage sensitively and efficiently with people approaching the last years of their life and who may be near to death. According to the National Association of Social Workers (2005:1) Social Workers assist older persons to maintain or improve their quality of life through direct services and consultation, counseling and education. Social Workers appreciate and respect the great diversity and uniqueness of older persons. The social workers should assess the older person's strengths and needs and provide appropriate services for the broad array of ethnic, cultural, social, sexual, economic and spiritual diversity found amongst today's elders.

Old age causes wear and tear to body ligaments of the older persons. This then necessitates their referral for rehabilitation services. According to Department of Social Development (2010:21) the objectives of the rehabilitation services is to make older persons mobile within the home and thus less dependent, and prevents early admission to residential care. Outreach services provided by Old Age Homes include provision of hygienic and physical care of older persons which is important

for maintaining their good health. In the Motheo District, the old age homes are assisting by providing laundry services as part of their outreach programs. Wikipedia (2012:3) define laundry as the washing of clothing, linens and blankets and its process which includes washing usually with water containing detergents or other chemicals, rinsing, drying and pressing or ironing. The old age home also assist older persons with assistive devices such as walking sticks, pulpit and wheelchairs for affordable fees. According to the Department of Social Development (2010:21) the objective of hygienic and physical care of the older person is to ensure that older persons are not only physically adequately cared for, but are properly treated for bed sores and other minor ailments.

6 THE IMPORTANCE OF COMMUNITY-BASED CARE AND SUPPORT SERVICES

The benefits of home based care are that it is less expensive for the family because there are fewer costs involved. Care is more personal as the patient is closer to their family and friends. According to Kaplan (1998:169) older persons can visit the ill older persons and they may handle it through a sick committee which pays visits or sends cards, flowers or some other token of remembrance. For those cut off from the club by physical disability, the older persons club can establish a visitation program, takes movies and other forms of visual and audio recreation to them, hold prayer meetings with them and help them find new interests through vocational and physical therapy.

According to Scrutton (1999:167), it has been found that the most isolated older persons tended to be unmarried or childless with few surviving relatives. They often reinforce their isolation by refusing or being unable to participate in social activities by joining clubs or forming new friendships. Yet all people need company and stimulation of friends, loneliness lower morale and dim any hope that older persons might have in their lives. The horizons of life are reduced and a vicious cycle of loss, loneliness and depression tightens. For many older persons loneliness represent a double or mutual loss, it also means a reduction in companionship and their capacity to care for other people. Older persons feel better and able to face old age sickness and death when they are in familiar surroundings. It is less expensive for the country, because a person will spend less time at the public hospital and more

time at home with his or her family. The public hospitals will not be overcrowded (Du Plessis et al.2005:10-15)

The more people grow older the more they tend to narrow their contact with other people and withdraw from social interaction which implies a decline in active behavior towards passive behavior. They also tend to become more secluded, less socially active and too introspective (Kaplan, 1998:168). According to (Dangott et al, 2002) the life satisfaction of older adults is significantly related to the quality of time spent with friends or other older persons. According to the Department of Social Development (2002:10) the Madrid International Plan of Action on Ageing, recommended that older persons should be empowered to participate fully in the social life of their communities through voluntary work. It further states that older persons should be continually empowered and developed by providing them with access to life long, learning and participation in the community. The plan further states that a supportive environment should be created for older persons that will promote their wellbeing and recommend coping strategies such as psychosocial support, cognitive training programmes and training for caring staff.

According to Scrutton (1999:168) older persons feel good when providing care to the others. Introducing new members to other club members is an important device not only to put new members at ease, but also to involve club members in a function which the group recognizes as important. Setting up and putting away chairs and tables can be used in helping older persons to feel that they are part of the group (Kaplan, 1998:170). According to Van Dyk (2002:327) community-based care is less expensive for the family because problems such as transport to hospital, time and money spent on hospital visits and other costs are reduced. Care is more personalized and older persons feel less isolated from family and friends. Relatives and family can take care of their member while attending to other chores.

Uys and Cameron (2003:4) and Van Dyk (2002:328) see the importance of home-based care as allowing the older persons to be in a familiar environment and within the care and support of their families. Home-based care also allows the family and older persons time to come to terms with their illness and his or her impending death. Good basic care can be successfully provided in homes. Home-based care provides a holistic approach to care, families and the community are involved in the

care of their own family member. Family members benefits from the care giving experience by feeling secure in a strong kinship system

7 DISCUSSION

The Community-Based Care and Support Services is a very important programme for older persons that enable them to remain in their communities with their families for as long as possible. The programme also enables older persons to have access to services which are nearest to their home and which are specifically designed for their own needs. In the past older persons who are staying in the community were not given adequate preference by the government as a result there were no services for older persons in the community. The main focus of government by then was on older person's residing in residential care facilities. The Older Persons Act 13 of 2006 which came into effect in 2010 acknowledges that there are older persons who are staying in the community who needs government support and services.

There are older persons whose children are forced by circumstances to leave them alone during the day when they are at work and grandchildren are at school. Due to the level of crime in the country, the older person's safety is not guaranteed when they are alone at home during the day. Therefore the community-based care and support services were designed specifically for the needs of older persons that is to overcome loneliness, boredom, isolation and rejection of older person. The programme also assist in putting the mind of family at ease knowing that their older persons will be in an environment that is safe and secure whilst she or he is at work. It also aims at promoting independent living and active participation of older persons in the community.

According to Makiwane et al (2004:12) older persons have wisdom, skills and knowledge that they can share with the younger generation to restore moral regeneration. The youth of today does not generally respect and give older persons the dignity they deserve. It is through the implementation of intergenerational programmes in the prevention and promotion programmes that older persons will be able to pass their wisdom, skills and knowledge to younger generations and this will make our country a better place. In the past, tradition and culture used to recognize

the role of older persons in the community which was a very important role. Older person's role was to advise, direct and lead their families and communities in those practices, such as rituals and ceremonies that ensured their survival, existence and continuity. This gave them a central role in the community and younger generations during that time were looking at their older persons as their role model

Lack of enough funding is always blamed for poor service delivery by the service providers. Rossenberg et al. (2005:16-35) stated that it is difficult to provide care where there is high rate of poverty, where people do not have enough resources and do not have enough information on the availability and accessibility of resources or services. People need to be informed about basic services. A report done by the South African Older Persons Forum (2010:2-7) stated that Non-governmental organizations running the Community-Based Care and Support Services are under-funded. They are unable to provide excellent services to the beneficiaries due to the funding they receive. They also believe that for home-based care to be properly implemented as requested by the Older Persons Act, substantial budgetary increase is needed. The community-based care organizations are losing quality care-givers due to poor salaries and they opted for careers offering better remuneration.

According to the observations of the researcher, there is still a lack of integration and collaboration of services among stake holders. Even though the Department of Social Development has a leading role in implementing the Older Persons Act No 13 of 2006, the provision of services to older persons requires inter-collaboration of departments, private sector and civil partners in providing such services. According to Robinson and Drinkwater (2000:163) the present structure of health and social care services has separate lines of funding with different accountabilities and therefore presents an obstacle to achieving seamless care of older persons. Rossenberg et al. (2005:16) adds that there is a lack of coordination of programmes by the departments; community-based care and support organizations as well as faith-based organizations. The Department of Social Development (2004:11) specified the roles and responsibilities of each Department as well as non-profit organizations, business people, financial service providers and community based care and support organizations. This was done with the purpose of eliminating duplication of services provided to older persons in Motheo District.

All the organizations rendering services to older persons are expected to register in terms of the Older Persons Act (Act No, 13 of 2006) and also according to the Non-Profit Organizations Act (Act No, 71 of 1997) in order to qualify for funding from government or other sources. According to Strachan (2011:34 -35) managing a nonprofit organization in a very isolated rural community with low literacy levels has proven to be very difficult. Older persons in isolated rural communities are potentially the most vulnerable with little or no access to services. They have no essential training and capacity building to enable them to perform the required financial governance. These facilities or organizations are often not able to provide the required financial statements and reports as per funding agreements and as a result they end up not complying. Granting funding without the necessary training and capacity building creates expectations and set people up in an unrealistic way that leads to failure and disempowerment. South African older person's forum (2010:6) highlighted that the older persons in rural areas are not benefitting from the community-based care and support service as there are few services in some rural areas and in other areas the services are not available. Older persons also stated in their report that in rural area, older people are travelling long distances in order to access health care facilities and social services as a mobile clinic only comes once a month.

Prevention and promotion services that also include services such as day care centres and luncheon clubs seem to be less attractive and interesting to older male persons. According to the observations of the researcher there are few older male persons at the day care centers and luncheon clubs. The reason provided during meetings was that the activities in these centres do not attract older male persons. According to Davidson et al. (2004:93) there is a perception among the older men that the only activities at these centres involved sitting around, chatting or playing, the sort of things that older women rather enjoy doing. Few men, who attend these centres, tend to do so for a short period during the day, just bouncing in usually to take advantage of an inexpensive lunch and then go back home or elsewhere. The few men that were seen at the centres are usually older, frail and sick and tend to be more solitary, reading the newspaper or dozing in their chairs.

Transportation is a basic need often taken for granted and overlooked. Care recipients and service provider often need transportation to go not only to and from medical centers but also to day care facilities, shopping, therapy sessions, pay points, churches, delivery of meals on wheels to the home of older persons and care-givers to be able to provide home-based care services from one area to the other. Moroney (1998:59) agrees that when transportation is unavailable, the community-based care and support services tend to be used with negative results for the caregivers and the recipients of services.

8 RECOMMENDATIONS

- The government should empower the community based organizations with necessary management skills which will include the following skills:
 - General management skills which will enable them to function effectively and efficiently when providing care and support services to the older persons.
 - Financial management skills that will assist in drawing up budgets which will be enough for providing excellent services to older persons in line with the requirements of the older persons act, Act 13 of 2006.
- Policy makers should also consider conducting research into the needs and interests of male older persons in order to make the activities of prevention and promotion services more attractive and interesting to older men.
- The community and their leaders need to be informed, be made aware of and be encouraged to support and promote the utilization of community-based care and support services as most of them do not seem to have information about the community-based care and support service situated in their areas and are ignorant regarding the programmes and various services.

9 CONCLUSION

This article answered the question that seeks to explain the nature of Community-Based Care and Support Services. The two categories of community-based care and support services namely: prevention and promotion programmes and the home-based care were discussed in this article. The importance or benefit of the programme to the older persons was also discussed.

The Community-Based Care and Support Services programme is a very important and valuable strategy which seeks to address the needs of older persons in the community to enable them to remain with their family. The implementation of this programme enabled the older person to remain within the care and support of their families and communities and within familiar environments. This plays a very important role in their health and well-being. Therefore community-based care and support services can be a very powerful and helpful programme that can make a difference in the lives of older persons if it can be well implemented by all government departments.

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ARTICLE 2

EVALUATION OF COMMUNITY BASED CARE AND SUPPORT SERVICES

1. INTRODUCTION

The older person develops sentimental values to their houses and thereby refuses to be placed in a residential care. In terms of the older persons act, act 13 of 2006 the older persons are encouraged to remain in the care of their families and their communities. However, the older persons tend to be abused by their own families and community members. Help Age International (2003:14) pointed out that in most cases when an older person is expected to be looked after, they have to take on the role of caring for other family members without even basic necessary resources. The older persons take care of their sick children or relatives and later they become second time parents as their children or relatives die and leave their own children behind for older persons to bring them up, bearing both the costs and consequences of care

The researcher, in this article, will present the results obtained from the participants on the evaluation of the community-based care and support services of older persons in the Motheo district. In order to determine whether the programme is benefitting or meeting the needs of older persons or not, research was conducted. The research also seeks to improve the programme so that it can be able to benefit the older persons in the community.

2. PROBLEM STATEMENT

Research has indicated that older persons' health conditions deteriorate as they grow older; some get frail and eventually become bedridden. Sicknesses associated with old age such as dementia; Alzheimer; arthritis and hypertension also contribute to the deterioration of the older persons health. When older persons experience those sicknesses they view themselves as a burden to their family, financially, emotionally as well as physically. Due to the growing number of older persons who are frail, bedridden and who need 24hours nursing care services, the number of frail older person become difficult for old age homes to manage, hence the need for

community- based care and support services. The population of older persons in South Africa is increasing at an alarming rate. Less than three decades ago the global population was viewed as 'young' rather than 'old. 35% of the populations in the world were 14 years of age or younger and (8.5%) were 60 and older. Currently the world population is ageing (United Nations Declaration, 2002:1). According to Statistics South Africa (2011:4) the 2001 census has shown that in South Africa, the population of older persons was at 7.3% in 2001 and the number increased to 7.7 % in 2011, and this shows that the possibility of the number being double by 2015 is very high. An increase of 22% in the world population of older persons is projected by the year 2050.

Keigher et al. (2000:3) believes that older persons should benefit from the family and community care and protection in accordance with each and every person's cultural values. Community care also reduces the level of dependence on expensive institutional care which is a major benefit for society at large. The HIV and Aids pandemic has seriously worsened the welfare of older persons and caused a certain role reversal, as they are of age when many would have become recipients of care and would have expected the rest and respect that comes with old age (Boon et al., 2010:2).

The older persons are made to assume additional responsibilities within their families. Kakooza (2004:6) highlighted that older persons has to assume both productive and child raising duties with little or no support, endure the emotional, physical, financial and social costs that arise from their role as care-givers. There are also instances where the children or grandchildren grow up and get married and leave older persons alone without any means of support to maintain their own families. In the rural area, parents migrate to urban areas to look for jobs and leave older persons with the grandchildren with his or her old age grant as the only source of income in the house. This as a result become a burden to an older persons, both financially and emotionally (Makiwane et al: 2004, 14).

May (2003:54) reported that the older person do care for people with chronic illness without any training and in many cases they are illiterate and lack access to necessary information that might capacitate them to take precautions. This, as a result, makes them susceptible to contracting diseases. This burden on older

persons is even worse in the rural areas where there are few if any resources available such as water, electricity, food and proper infrastructure are not available (Makiwane et al., 2004:23). Community-based care and support service are programmes that are specifically designed to meet the interests and needs of older persons in the community and also to assist them to cope with the difficulties of life. These programmes can be helpful to older persons if they can be well implemented.

The researcher gave answers to the following question:

- Can the evaluation of Community-Based Care and Support Services from the viewpoint of older persons, the management committee and the officials of the Department of Social Development, benefit the older persons who receive the services from the Department of Social Development.
- How can the current programme be enhanced to deliver better services to older persons.

3. AIM

- To discuss and evaluate the Community-Based Care and Support Services strategy as used by the Department of Social Development in rendering services to older persons within communities in Motheo District (Free State Province) and to raise the viewpoints of the direct service providers, officials of the Department of Social Development and older persons that receive these services, in order to enhance the delivery of this programme.

4. RESEARCH METHODOLOGY

4.1 Evaluation research

For the purpose of this study, evaluation research was utilized. Evaluation research is the use of social research methodologies to judge and improve the ways in which programmes are conducted (De Vos, 2005: 367). According to Royse et al. (2010:12-13) evaluation research is the systematic application of social research procedures in assessing the conceptualization and design, implementation and utility of social interventions and program. The evaluation research also helps to determine whether the needs of people in a specific setting are met or the client's goals attained. Rubin and Babbie (2010:42) adds that evaluation research aims at

evaluating the effectiveness of a particular programme and also obtains information needed in programme planning and development. According to Yegidis and Weibach (2009:285) evaluation research attempts to answer many different questions concerning programmes. This model seeks to build knowledge to improve the quality of social programmes, both proposed and existent. Strydom (2013:156) pointed out that evaluation research can assess the aims, the design, funding possibilities, and implementation and applicability of social interventions in order to determine whether an intervention has produced the intended results. The researcher in this study will evaluate the Community-Based Care and Support Services from the viewpoint of the older persons who are recipients of the service, the management committee of the community-based organization and the officials of the Department of Social Development in order to enhance these services for a better service delivery to older persons.

4.2 Designs

For the purpose of this study the researcher utilized the mixed methods designs, where qualitative and quantitative methods were concurrently used. The researcher in this study used the questionnaire and interview to collect data from the older persons who are the recipients of the service, the management committee of the community-based organizations and the official of the Department of Social Development. In this study the three data sets from the three groups of participants were triangulated regarding the qualitative and the quantitative data. Delport and Fouche (2011:442) explained that triangulation mixed methods design is a one phase design in which the researcher uses both quantitative and qualitative methods during the same time frame and with equal weight to best understand the phenomenon of interest.

4.3 Sampling

The researcher in this study utilized the non-probability sampling. According to Alston & Bowles (2009:87) non-probability sampling will give insights into previously unexplored areas and will provide a qualitative researcher with a rich source of data. Claire (2012: 1) explained a non-random assignment of research participants as

when they pick people with specific traits and do their research on them to see effects it has.

For the purposes of this study the purposive sampling was utilized. According to Strydom (2011:232) the purposive sampling is based entirely on the judgment of the researcher, in that a sample is composed of elements that contain the most characteristic, representative or typical attributes of the population that serve the purpose of the study best. Alston and Bowles (2009: 90) add that in purposive sampling, the sample is chosen for a particular purpose. A sample was drawn from six of the funded organisations rendering services to older persons. Reference dictionaries (2013:1) define sample as a much smaller, limited quantity of something that is a larger whole which is used to represent the whole in entirety. These six organizations were selected from the three municipalities, which form the Motheo District. This was done with the purpose of including participants from all three municipalities. Two management committee members were selected from each organization to represent their organizations. Therefore there were a total number of 12 participants. Four beneficiaries (older persons) from each organization also participated in this study; this then gave a total number of 24 older persons who can still function independently. Ten frail older persons who are receiving services at the comfort of their homes were also interviewed. 10 social workers who are rendering services to older persons were selected to participate in this study. In total there were 56 participants.

4.4 Research procedure

Ader et al. (2008:306) defined research procedure as content robust when it can be ascertained that violations of preconditions will have had no disrupting effects on the conclusion drawn with respect to the original research question.

- Permission was obtained from the Department of Social Development in Bloemfontein where the researcher is employed as a district coordinator for the Older Persons sub-directorate to evaluate the community-based care and support services programme for older persons.
- Written permission to participate in the research was obtained from the older persons who are the recipients of services from Department of Social Development; the members of the management of the community base

organisations, as well as the officials who consented to participate in this research.

- All the people who participated in the study signed in the informed consent forms (Annexure 4).
- A questionnaire with open and closed-ended questions was used for both representatives of management committee for organizations of older persons (Annexure 5) and officials of the Department of Social Development (Annexure 6). The researcher's reasons to use questionnaire instead of the in-depth interview is because both officials and some members of the committee are employees and they always have busy schedule that makes it difficult for the researcher to get time with them until the researcher resorted to questionnaires. They were also not willing to work on weekends and after hours as they believed that it is their family time. The use of questionnaires was also an advantaged to the researcher because people were very open, honest and clear when answering questions and this tool assisted the researcher to collect as much information as possible.
- The researched had to travel long distances in order to conduct research activities within limited time, as the district was big. Due to lack of enough time to conduct in-depth interviews, the researcher had to rely on the utilization of structured questionnaires (Annexure 7). The researcher had to grouped older persons in a hall and explained the questions to them and they were also asking for clarity where they do not understand. The older persons answered the questions in writing using the language that they were familiar with. The same questionnaire starting from question thirteen (13) was used to interview the frail older persons at home who are using home-based care services. The older persons were not in the position to write due to their health status and in-depth interview was conducted. The researcher here was asking questions and taking notes of the answers. Tape recorder was used for both interviews.

4.5 Research objectives

According to Varkavisser and Brownlee (2003:1) the objectives of the research project summarize what is to be achieved by the study. These objectives should be closely related to the research problem. General objectives of a study states what

researcher expected to achieve by the study in general terms. Farrugia (2010:1) adds that specific objectives describe the variables that are measured by the study. For purposes of this study, the researcher utilized all four research objectives namely the exploratory, descriptive, explanatory and evaluative designs. Babbie and Mouton (2009:81) add that all of these research objectives can be used in a quantitative or qualitative fashion. In this study these research designs were used to gain both qualitative and quantitative data of the phenomenon under investigation.

4.6 Measuring instruments

Delpont (2005:160) and Monette et al. (2002:103-104) define measurement as a "process of describing abstract concepts in terms of specific indicators by the sign of numbers or other symbols to these indicators in accordance with specific rules." Pretorius (2012:26) pointed out that to ensure the quality of data in quantitative research it is important to ensure the validity and reliability of the data. According to Burns and Grove (2005:374) reliability is referred to as the consistency and dependability demonstrated by a research instrument when it is used to measure the variable attribute that it was designed to measure. Maree and Petersen (2007:147) explained that validity refers to the degree to which the instruments measures what it was supposed to measure. Validity was assured by determining the appropriateness of the questionnaires and checking whether the questions corresponded with the objectives of the study. In qualitative research the data must be trustworthy. According to Botma et al. (2010:232) trustworthiness as was proposed by Lincoln and Guba has four epistemological standards namely: truth value, applicability, consistency and neutrality. For each of the four standards, there are specific strategies and criteria to adhere to and to ensure rigor in the research. These epistemological standards are now discussed in detail:

➤ Truth-value

The researcher made sure that the results are true by checking the members in the sense of communication, validation and interpretation of data. The engagement with the respondents in the setting was undertaken to build a trusting relationship especially in the community hall where the interview was conducted in a form of group.

➤ **Applicability**

Applicability refers to the degree to which the findings are applicable or relevant to different context or other respondents. The three groups of respondents were chosen, that is the older persons who are recipients of services, the management committee of the community-based organizations and the officials of the Department of Social Development, because they all have the responsibility of improving the service delivery in the field of older persons.

➤ **Consistency**

Consistency implies how repeatable the findings of the study are if the study should be repeated in the similar context with the same respondents. The research methodology was clearly and fully described. The three groups of respondents chosen in this study have the expertise and insight in the field of older persons and if the study can be repeated in the same manner with the same respondents, the results will be the same.

➤ **Neutrality**

The findings of a study were not influenced by the respondents and the circumstances of the study in the sense that all the respondents were informed of the purpose and the objectives of the study. The researcher was not bias as she was open for the suggestions and also subjected the study to critical evaluation from the beginning to the end. Hence the study was given to an expert researcher for the second opinion.

4.7 Data-analysis

According to Neuman (1997:30) gathering data for research is divided into two categories namely qualitative and quantitative. For the purpose of this study the researcher utilized the mixed methods designs where qualitative and quantitative methods were concurrently used. In this study the three data sets from the three groups of respondents that is older persons, management committee of community-based organizations and officials of the Departments of Social Development were triangulated regarding the qualitative and the quantitative data. Sullivan (2001:255) explained that researchers may use both a questionnaire and interview techniques,

with respondents filling in answers themselves and being asked other questions by the interviewer. Originally the intention of the researcher was to use the interview only. It seems appropriate in this study to use both data collection tools so as to be able to gather as much information as possible. A self-designed questionnaire with open and closed ended questions was also used to evaluate the Community-based Care and Support Services in order to enhance the service delivery of the programme.

In this study the quantitative data, was transformed into statistically accessible forms of counting procedures (McKendrick, 1990:275). For the purpose of this study only the demographic part was analyzed quantitatively because in the demographic part the respondent only tick what is applicable and were not expected to discuss or explain as in the qualitative method. The qualitative data was analyzed according to Tesch's approach (Poggenpoel, 1998:343-344). The qualitative data analysis is classified in themes.

4.8 Ethical issues

According to Strydom (2005:57), ethics is a set of moral principles which is suggested by an individual or a group, is subsequently widely accepted, and which offers rules and behavioral expectations about the most correct conduct towards experimental subjects and respondents, employers, sponsors, other researchers, assistants and students. Monette et. al. (2005:53-57); Neuman, (2006:132); Salkind, (2009:79-80) regard the following ethical principles as very important when conducting a research:

➤ Voluntary participation

The respondents were informed of the purpose of the study and the effects the study might have on them and they were also told that the participation in the study is voluntary and they are free to withdraw from the study or terminate their participation without any penalty incurred.

➤ Confidentiality

The importance of confidentiality was explained to the participants. They were also requested to keep all the private matters discussed in the study confidential to

protect one another. Confidentiality within the context of this study referred to the management of private information from the participants. The collected private information was used specifically for this study and not for any other purpose. The researcher is a registered social worker and bound to confidentiality by code of ethics as stipulated by South African Council for Social Service Professions (Babbie, 2004:63-72; Van Zyl-Edeling & Pretorius, 2005:107-113).

The research was approved by the ethical committee of the North West University, Potchefstroom Campus (Ethical approval number: NWU-00140-11-S1) (Annexure 3).

➤ **Avoidance of harm to participants**

The researcher ensured that the respondents were protected from all possible emotional discomfort and were not exposed to any harmful activities and circumstances. The researcher offered the counseling service after interview where there was a need.

➤ **Informed Consent**

The participants signed the informed consent form (Annexure 4) to acknowledge that they know what the study is all about before participating. The respondents were also assured of their safety as all the data collected for the purpose of the research was safely locked in the lockable cupboards at the premises of the researcher for 3 years. The researcher will also have a secret code in her computer.

5 RESEARCH RESULTS

Fifty six (56) participants were selected from Motheo District. Out of the 56 participants, thirty four (34) of the participants are the beneficiaries of the Community-Based Care and Support Service. The ages of the older persons who participated in this study ranged from 60 and older. The twelve (12) participants were the management committee of the community-based care and support services and ten (10) officials of Department of Social Development who were involved, are specializing in working with older persons in the Motheo District. For the purpose of this study only the demographic profile was analyzed in the form of statistics.

5.1 Demographic profile

5.1.1 Home language

The home languages of the respondents were as follows:

TABLE 1: LANGUAGE

Language	F	%	M	%
Sesotho	19	34.01	2	3.58
Setswana	16	28.40	2	3.58
English	3	5.37	0	0
Afrikaans	6	10.74	1	1.79
Isixhosa	5	8.95	0	0
Other(Specify) Isizulu	2	3.58	0	0
N	51	91.05	5	8.95

The participants were free to use the language they are familiar with. The numbers which are reflected in the above table also shows that most of the respondents twenty one (37.59 %) were Sesotho speaking. Out of this number of respondents eleven (52.38 %) were older persons, seven (33.33 %) were the representatives of the management committees of the community-based organizations for the older persons and three (14.29%) were the officials employed by the Department of Social Development. Eighteen (32.22%) respondents were Setswana speaking. Out of this number eight (44.5%) were the older persons who are beneficiaries, six (33.3%) were the representatives of the management committees of the community-based organizations for the older persons and four (22.2%) were the officials employed by the Department of Social Development. The two languages Sotho and Setswana are dominant in Motheo District. There were also seven (12.53%) Afrikaans speaking people, out of whom four (57.14%) were older persons who are beneficiaries, one (14.29%) was a representative of the management committee and two (28.57%) were the officials employed by the Department of Social Development. Five (8.95) respondents were IsiXhosa speaking people, out of this

number three (60%) were older persons who are beneficiaries and two (40%) were officials employed by the Department of Social Development. Three (5.37%) respondents were English speaking, out of this number two (66.67%) were the older persons who are beneficiaries and one (33.33%) was a representative of the management committees for the older persons organizations and two 2(3.58%) respondents were Zulu speaking, one (50%) of whom was an older person and one (50%) was an official employed by the Department of Social Development.

Language is very important for effective and efficient communication. According to Melgosa (2008:44) communication is particularly important in interpersonal relationships. In view of the above-mentioned statistics in terms of languages used by the beneficiaries, the service providers, representatives of the management committees of the organizations for the older persons, as well as the officials employed by the Department of Social Development) there are some discrepancies. People who share the same home language also share common cultural norms and values. There are noticeable discrepancies in terms of ratio of number of service providers to the number of older persons who are beneficiaries. In particular, Xhosa and Zulu speaking older persons, who are beneficiaries of the community-based organizations, were not represented in the management structures of the organizations.

5.1.2 Age and gender

In this table only the ages of the older persons who are the beneficiaries of the community-based care and support services will be discussed and evaluated.

TABLE 2: AGE

Age	Males	%	Females	%
22 to 29	0	0	2	3.58
30 to 39	1	1.79	4	7.16
40 to 49	2	3.58	3	5.37
50 to 59	0	0	3	5.37
60 to 69	2	3.58	16	28.40
70 to 79	1	1.79	10	17.9

80 to 89	2	3.58	6	10.74
90 and older	0	0	4	7.16
	8	14.32	48	85.68

According to the Department of Social Development 2006:12) older person 'means a person who is 60 years of age and upwards". According table 1.2 the total number of participants who are 60 and above is forty one (73.15%). However only thirty four (60.62%) respondents participated as beneficiaries and seven (12.53%) respondents who participated as representatives of management committees of the community-based organization for the older persons were also beneficiaries. The statistical breakdown of the thirty four (60.62%) beneficiaries were as follows: The female beneficiaries form a total number of twenty nine (85.29%) and only five (14.71%) were males. Out of the twenty nine (85.29%) female older persons ten (34.48%) were frail female older person who receive community-based care and support services for older persons from their homes. Nineteen (65.52%) were beneficiaries who are still mobile and active. These beneficiaries are members of luncheon clubs and day care center, that is prevention and promotion programmes.

Twelve (21.48%) of the participants were members of the management committee of the community-based care and support services organizations and ten (17.9%) were the officials from the Department of Social Development. In view of the above tabled information the females are the majority. The total number of females are forty eight (85.68%) while only eight (14.32%) were male.

The above information indicates that the female older persons are always willing to participate and contribute to matters that make a positive difference to their lives. The male older persons who participated were also members of luncheon clubs and day care centres. Davidson et al. (2004:93) add that male older persons are few in the community-based care and support services, the reason being the activities in these programmes do not attract male older persons. Ten (29.4%) frail older persons were beneficiaries of the community home-based care for older persons. Out of this number two (5.88%) respondents ranged from 60 to 69 years of age, 5(14.7%) respondents ranged from 70 to 79years of age, two (5.88%) respondents ranged from 80 to 89 years of age and only one (2.94%) were 90 years and above. The services which the frail older persons can receive from the Department of

Social Development and funded Non-profit organization are as follows: home community- based services, meals on wheels, transport services, provision of hygiene and physical care services. However these services reach a very limited number of older persons due to insufficient fund available for service delivery. Due to a high rate of poverty among the older persons, there is a great need for these services.

According to this study, only two (3.58%) are social workers under the category of youth. Wikipedia free encyclopedia (2011: 1) defines youth as a time in life that is neither childhood nor adulthood, but rather somewhere in between. These social workers were field workers who are not actively involved in the provision of services to the older persons due to the high foster care caseloads. However they had knowledge of provision of services to older persons and they are expected to render the service to this vulnerable group of people. Eight (14.32%) were ranging from 30 to 59 years of age. The twelve (21.48%) participants who were members of management committee ranged from 49 to 69 years of age. The involvement of people who are less than 60 years of age in the community-based care and support services programme for older persons promote intergenerational work. According to National youth Agency (2008:1) intergenerational work encourages an exploration of values, identities and relationships between young and old which can lead to changes in attitudes and behavior and ultimately respect for each other. Meaningful engagement between generations can also enhance quality of life, strengthen communities and contribute to social change.

5.1.3 Marital status

Under this subtopic only the marital status of the thirty four (60.62%) respondents who participated in this study as beneficiaries will be discussed.

TABLE 3: MARITAL STATUS

Status	F	%	M	%
Married	10	29.40	2	5.88
Divorced	4	11.76	0	0.00
Single-never married	2	5.88	0	0.00
Widower/widow	11	32.38	2	5.88
Living together	2	5.88	1	2.94
Total	29	85.3	5	14.7

Table 1.3 shows that twelve (35.28%) respondents are still married. Three (8.82%) respondents are living together. They reported that did not want to live alone due to their age. They explained that their partners are keeping them company and provide emotional support them whenever it is necessary. Four (11.76%) female respondents were divorced. Two (5.88%) female respondents were never married and are still single, this was not surprising because of the cultural stereotype that women cannot propose marriage from their male love partners. Eleven (32.38) respondents were widows and two respondents were widowers. These respondents indicated that loneliness is affecting them negatively, especially when they feel sick and they need emotional support. According to Scrutton (1999:167) it is found that the most isolated older persons are unmarried or childless, with few surviving relatives. Yet all people need company and stimulation of friends, loneliness lower morale and dim any hope that older persons might have in their lives. Three (8.82%) respondents were living together or cohabitating couple with their partners. Waite & Gallagher (2013:1) agree that for some divorced adults, new romantic relationship help to rebuild self-esteem and happiness, but for others, new romantic relationships end up in producing greater feelings of loneliness, unhappiness, and lower self-esteem.

5.1.4 Level of education

Under this subheading the level of education of the members of the management committee of the community-based organisations, as well as those respondents who participated as beneficiaries will be discussed. This will give the total number of

46 respondents who participated under the mentioned categories. Out of forty six (100%) respondents, twelve (26.04%) participated as members of the management committee of the community-based organisations, and out of the twelve (26.04%), seven (53%) falls under the category of older persons. Five (47%) respondents are not yet older persons. They were among the founder members in their different organisations. They do have a vision to see these organisations growing and it was for this reason that they were seconded to the management positions in their organisations.

TABLE 4: LEVEL OF EDUCATION

Level of education	F	%	M	%
No formal education	8	17.36	1	2.17
Primary education	11	24.05	2	4.34
Secondary education	8	17.36	1	2.17
Abet education	7	15.19	0	0
Tertiary education	5	10.85	3	6.51
Total	39	84.81	7	15.19

According to table 1.4, nine (19.53%) respondents did not have formal education. Out of these nine (19.53%) respondents, five (55.55%) surprisingly could read and write, because they were able to answer the questionnaires in writing. 13(28.21%) respondents had a primary education, they could read and write. However, the researcher had to thoroughly explain the questionnaires. Seven (15.19%) respondents were taking part in the Kharigude programme (ABET), nine (19.53%) respondents had secondary education. 8 (17.36%) had tertiary education but 2(4.34%) are frail and one (2.17%) was not interested to be a member of the management committee of the community-based organization.

5.2 Evaluation of the views of the three groups of respondents

The results obtained from the three groups of respondents are categorized into seven themes, which were adopted in order to discuss the findings. The seven themes will be discussed with reference to the three groups of participants in each

theme, with a concluding statement on the similarities and differences found in each group on each theme. The themes are:

5.2.1 Theme 1: Understanding of role clarification within the community-based organisations.

It is crucial that the service providers, as well as the beneficiaries, have knowledge and understanding of their roles. Adirondack (1998:150) agrees that even if an organisation acts responsibly, it may have problems with its accountability, including being clear about who has a right to know what the organization is doing with its money, and how much control those people have over financial decisions. Therefore there is a need for people to understand and be clear about their roles in their organisations. The responses of the three groups of participants were analyzed and will be discussed according to their viewpoints as follows:

Viewpoints of the officials (social workers) employed by the Department of Social Development

Kirst-Ashman (2010:18) pointed out that in South Africa social worker means a person registered as a social worker under section 17 of the Social Professions Act (Act No.110 of 1978) in the employ or service of the government or a registered welfare organization. The profession of social work is an odd mixture of many things. It is usually practiced by government civil servants in the west (Europe and North America) while many Non-Government Organisations have social workers on their staff (Bartle, 2007:1). A Social Worker is the person that practically applies knowledge, skills and values to enhance the well-being of individuals, families, groups, organisations and communities.

According to the officials viewpoint the role of social workers is to advocate for the rights of older persons and to ensure that they are treated with respect and dignity they deserve. The officials are also responsible to ensure that older persons are protected from any form of abuse by providing necessary information and to educate the communities. Some officials also indicated that the role of the social workers is to implement or to make sure that the Older Persons Act 13 of 2006 is well implemented. The officials pointed out their role also as to assist the non-profit organisations that are funded by the Department of Social Development to adhere to the norms and standard in terms of the Older Persons Act 13 of 2006 and also to

comply with the contents of the Memorandum of Agreement between them and the Department of Social Development.

Viewpoint of the management committee of the community-based organization

According to the understanding of the members of the management committee, their role in their organisations is to:

- “To oversee the day-to- day running of the organization.”
- “To raise funds to ensure the smooth running of their organisations.”
- “To ensure that their community-based organisations are networking with other stakeholders, with the aim of learning from one another.”
- “To ensure marketing of the services of their organisations, empowerment, capacity building and development of their community-based organisations.”

The management committee also understood the role of coordinators as that of ensuring that organisations provide the required services to the older person's in line with the objectives of the Department of Social Development. According to British Heart Foundation (2009:1) coordinators are responsible for making things happen, providing ideas, sourcing providers and signposting to external resources. A good coordinator will have some of the following characteristics, enthusiasm, motivation, good communication skills, friendly and approachable, be able to listen to other people's idea and feedback, good organisational and planning skills and be able to work well in a team and with different type of people.

There were five respondents who are representatives of the management committee of the community- based organisations, but who are not yet older persons. These members were the founder members in their different organisations. Most of them do have a vision to see these organisations growing; it was for this reason that they were seconded to the management positions in their organisations. Even though they were founder members of their organisations, they still need proper organizational and financial management skills to be able to run their organisations effectively and efficiently.

There are those respondents who understand their role in their organization as the chairpersons, responsible to give direction to the organisation, conduct meetings, disciplinary hearings, address the problems that might hamper the progress of the organisation, make sure the organisation is complying with the norms and standard as outlined in the regulations of the Older Persons Act 13 of 2006. The respondents also believe that their role is to make sure that their organisation is adhering to the Memorandum of Agreement made and entered into between the Department of Social Development and their organisation. Some respondents reported that they are playing a role of secretary and treasurer in their respective organisations. According to them secretary is responsible to keep records of the minutes, write reports, keep register of older person and keep records of every important documents in the organisations. The treasurer is responsible to keep records of the finances of the organisation, income and expenditure, write financial reports and keep all relevant documents safe. According to the respondents, the treasurer and secretary are both responsible to sign cheques at the bank. Other respondents are just recipients of services.

Viewpoint of the beneficiaries in terms of service delivery and compliance

The respondents seemed to understand their role as beneficiaries of the community-based and support services. They reported that they understood their role to be as follows:

- “The role to participate in the activities involved in the programmed in terms of the older person’s act.”
- “The role of understanding our rights and taking responsibility for our own actions.”

The older persons seem to understand they have a right to be protected from domestic violence. However some of the older persons, due to their exaggerated respect for the officials, do not utilize the resources made available to them effectively. For example, they would fail to report the abuse that they experience domestically. The result of this is that older persons become negatively affected. McGarry et. al. (2011:3) adds that the consequences of domestic abuse have significant impact on long-term and emotional wellbeing of those affected.

All three groups of respondents seem to understand their role. However, even though the officials of the Department of Social Development understand their role in terms of service delivery towards the older persons, the Social Workers are neglecting those duties, as they are only focusing on a high foster care case-load. Older persons' cases are not getting first preference in the Motheo District, as social workers are overloaded by foster care cases. The social workers also are not practicing social work as expected due to lack of resources. When a case is reported, social workers will struggle to get a car to follow it up and as a result justice is not done in terms of service delivery to older persons. There is a need for government to improve service delivery to older persons in terms of resources and manpower.

The management committee also seems to understand their roles within the community-based organisations. However the management committees need to develop their understanding of their role, knowledge and skills to be able to improve service delivery. Older persons have skills, knowledge and wisdom that they can use to assist both the officials and management committee to develop their organisations and to improve the service delivery towards them, but in most cases, older persons tend to rely on management to do things for them. The older persons and the representatives of the management committee of the community-based care and support services needs to be given support, guidance and proper training in order to improve the skills they have.

5.2.2 Theme 2: Understanding of Community Based Care and Support Services

In this theme, the views of the three groups of respondents were summarized as one, as they all have the same understanding and knowledge about the Community-Based Care and Support Services.

According to Department of Social Development (2006:12) in terms of the older Persons Act community-based care and support services, means any programme designed within the community to enable older persons who do not wish to or do not need to go to residential care to remain in their communities within their families for as long as possible. When asked about their understanding of the community-based care and support services, the respondents reported that "the community-based

care and support services are any services that are provided within the community, either informal or formal services that make older persons stay longer in their homes with their families and also within the environment that they are familiar with.”

According to Adirondack (1998:30) it is important to have knowledge about the field of work, including its political, social and economic context, accepted standards and expectations, what others are doing and how this organization fits in. All three groups have knowledge and understanding that the following services are provided under the Community-based Care and Support Services: meals on wheels/foot, balanced meal, home-based care, handwork activities/income generating, educational talk, counseling service, music/choir, recreational activities, physical exercise, religious activities, outings and intergenerational activities.

In the Motheo district, there are three old age home that extended their services to provide outreach programmes to the communities. These old age homes do not have enough resources but they are rendering all of the above services to the community even though the services do not reach everybody in the community. Other community-based organisations are rendering only a few of these services to older persons. Due to lack of human resources and not enough funding, the community-based organisations are unable to provide the expected services and activities effectively and efficiently.

All the three group of respondents seemed to understand the definition of community-based care and support services. The respondents also seemed to have knowledge and understanding of the services that should be provided by the Community-based Care and Support Services for older persons in the community. However due to lack of proper management skills as well as lack of sufficient funds not all the organisations are able to render effective and efficient services to older persons in the community. The government should consider increasing the funding for the services to older persons and also provide the nonprofit organisations with the necessary training.

5.2.3 Theme 3: Availability of office spaces and venues to hold meetings for the Community Based Care and Support Services.

The majority of the nonprofit organisations in Motheo District are funded mainly by the Department of Social Development, especially the community based

organisations. The funding which is provided by the Department of Social Development to the community based organisations does not cover the expenses for office rent as well as to finance the hiring of meeting venues. The organisations which are struggling the most, are those that providing their services from the townships of the semi-urban areas. Bruce et. al. (1999: iii) adds that a critical ongoing issue for volunteer organization is financing to cover operations, ongoing programmes and special projects or events.

Viewpoint of the officials (Social Workers) of the Department of Social Development

The officials of the Department of Social Development reported that most of the non-profit organisations in the Motheo district that are rendering services to older persons in the community do not have a place of their own. According to the officials, these organisations are either renting a place or using a private house or a public place such as community or church hall. When renting a place according to the officials, these organisations are utilizing the funding which is supposed to be utilized for service delivery and the services are not provided as expected. The officials further mentioned that rent is not one of the fundable items in terms of the Department of Social Development service specification.

The officials further pointed out that those organisations who have their own sites have built a shanty which is sometimes too small and not in good conditions. These are some of the challenges according to the officials that make their work to be so difficult, because the conditions in these organisations do not meet the norms and standard as stipulated in the regulations of the Older Persons Act 13 of 2006. According to the officials there is lack of services to older persons in the rural area. Most of the areas are far apart from each other and services cannot reach all the older persons in those areas. The officials mentioned that there are few or no officials who are working in those areas. Officials do not want to work or stay in rural areas as there are no incentives for them.

Viewpoints of the beneficiaries and the management committee of the community-based organisations

The views of the two groups of respondents are combined as they are both affected by the same problems and challenges with the meeting venues and office space. The respondents reported that they are using the following places as their meeting place: community hall, old age home, rented place, church hall, private house and shack/shanty. The respondents who are utilizing the community hall and the church hall reported that they experiences challenges, because these places are not reliable as they are public places. The respondents reported that they cannot keep their property or their belongings in these places. Their daily programmes are sometimes disrupted or disturbed due to the public community plan. The respondents who are renting a place reported that they also have lots of challenges as most of the places rented are very small and they are paying lots of money from the funding that was supposed to be used for the services. Rent is not included in the fundable items according to the Department of Social Development's service specification and this makes that they do not to comply with the Memorandum of Agreement signed between them and the Department of Social Development.

Some respondents are using a private house for service delivery; those houses are privately owned by some of the members of those specific organisations. This poses a problem or a challenge in terms of service delivery. For example the members of their families act as though they own the organization; they control and utilize the resource of the organization for their own private needs. When the owner of the house, who was also a member of the particular organization, dies, the children of the deceased member inherit the organization, forgetting that it is a community property.

Some of the respondents have acquired sites for the benefit of their organization; they have built a shanty or shack as their office spaces and meeting venues. These shanties are very small and when the membership of these organisations increases it get overcrowded and become a health risk. Thieves are also stealing their properties as the organisations do not have money for fences and enough security. The good part about it is that it is a sign of growth as this can lead to a proper infrastructure at a later stage. There are those respondents who reported that they

are rendering their community-based care and support services from the old age homes as an outreach programme to the community.

Most of the respondents who participated in this study are from the rural area, the semi-rural area, urban areas and semi-urban areas. According to the respondents from the rural areas, in most cases, the attendance of the beneficiaries in the luncheon club is very poor. The reason for that was that organisation are situated far from their homes, and it requires that the older persons should walk or travel longer distances to access the services. The South African Older Persons forum (2010:6) adds that in rural areas, older people are travelling long distances in order to access health care facilities and social services, as a mobile clinic only comes once a month.

In the semi-urban area of the Motheo district there is a high number of older persons migrating from the farms around the Free State where they use to work and stay, and now they are relocating to urban area to start a new life, there are many informal settlements that are developing in the district and as a result the need for these community-based care and support services is increasing. The respondents who are from the semi-urban areas of the district, reported that their area does not have proper infrastructure that they can use as a meeting place for the community-based care and support service as most of their area does not have developments due to the high number of people moving to those areas.

The three groups of respondents agreed that there are serious challenges with the meeting place and office space for nonprofit organisations rendering community-based care and support service to older persons in Motheo District. It is impossible for the nonprofit organization to render effective and efficient services to older persons without a proper infrastructure. The standard and norms of the nonprofit organisations rendering community-based care and support services in The Motheo district does not meet the requirements of the Older Persons Act 13 of 2006. The conditions in these organisations make it difficult for the officials to do the proper monitoring, assessment and evaluation of service delivery to older persons.

The government should consider assisting the community-based organisations with available venues and if possible provide funding for them to be able to rent bigger

venues that are in good conditions. The government should also consider increasing the number of officials in the rural areas for them to be able to render effective and efficient services to the older persons in those areas.

5.2.4 Theme 4: Advantages of Community-Based Care and Support Services

Uys and Cameron, (2003:4) stated the importance of community-based care and a support services is allowing the older persons to be in the familiar environment and within the care and support of their families. Community-Based Care and Support Services have advantages which add value to the lives of older persons and their families. According to Department of Social Development (2010:17) the objective of the prevention and promotion programmes are to keep older person functionally independent and living with dignity in the community for as long as possible. Mowat and O'Neil (2013:1) add that living longer brings with possibilities of enhanced health, happiness, and productivity but also increasing frailty, chronic illness and diseases of older age such as dementia, diabetes and heart diseases.

Viewpoints of the officials (Social Worker) employed by the Department of Social Development

The officials believed that these programmes are necessary and beneficial to the older persons in a sense that these programmes help to remind older persons of their values and worth in the community, and to promote older persons participation, skills, knowledge and wisdom in the community. The officials also believed that these programmes do protect older persons from any form of abuse in the community. The service such as a well-balanced meal, which is provided at least once a day to the older persons, assist to keep them active, healthy and independent at all the times. Through these services older persons are able to use their talents such as singing and be able to be artistic by using their hands.

According to Department of Social Development (2010:20) the objective of community home-based care is to ensure that frail older persons who cannot function independently receive adequate care and support in their homes so that they are able to continue to remain at home and in the community they are familiar with. Uys and Cameron (2003:4) agree that community home-based care allows the older persons to be in the familiar environment and within the support of their

families. It allows the family and older persons time to come to terms with the illness and his or her impending death. It is less expensive for the family, because problems such as transport to hospital, time and money spent on hospital visits and other costs are reduced. Van Dyk (2002: 327) adds that care is more personalized and older persons feel less isolated from family and friends. Relatives and family can take care of their member while attending to other chores. Older persons prefer to face ill health and death in familiar surroundings rather than in a hospital ward.

Viewpoint of the management committee of the community-based organization

From the viewpoint of the management committee of the community-based organisation, the respondents reported that these programmes assist older persons to identify and report abuse on time and to be able to refer the abuse cases to the relevant people before it is too late. The respondents mentioned that these programmes assist in ensuring that older person's needs are well taken care of and that they are protected from any form of abuse. Some of the respondents pointed out that these programmes also assist in ensuring that older persons who are in need of the services that the families are unable to provide due to different reasons, their needs are met. The management committee indicated that to some older persons especially those who are staying alone these programmes are very important in the sense that they get a nutritious meal every day of which to other older persons it is the only meal in a day as there is no one to cook or clean for them. The respondents point out further that the services provided by the community caregivers assists the older persons with care and support, as well as to help treat their bed sores, and also that to collect their medications from the clinics and to treat minor ailments. The respondents were of the opinion that community-home-based care reduces the pressure on hospital beds.

Viewpoint of the beneficiaries in terms of service delivery and compliance

When asked about the advantages of community based care and support services, one respondent said that *"through these programmes, we get lots of knowledge, learn new interesting things every day and we meet our peers and enjoy being together."* Some of the respondents reported that they feel that they don't have to stay at home all day and doing nothing because these programmes are there for

them. The respondents further reported that these programmes keep them fit and healthy and they also get advice on how to live a healthy life style. One respondent reported that these programmes made them feel important in the community; their choir is sometimes invited for entertainment in the community meetings, the older persons sometimes visit youth or crèche children for storytelling and advice so as to bring back what went wrong in younger generation.

Other respondent reported that *"these programmes keep me from being isolated and being lonely as I am staying alone at home."* The other respondents pointed out that these programmes enable them to meet with other older persons and share ideas and life experiences, such as abuse and neglect by families or children. The respondents believe that through these programmes they learn more about other people's culture and tradition. Some of the respondents pointed out that socialization, exercises and a balanced meal is beneficial for them, because they are staying alone at home. One respondent reported that community home-based care services are good because she is always clean and healthy and she eats well. Her exact words were *"If it was not for this service, I wouldn't be this clean and looking so healthy because my children are not staying with me."* She also added that the caregivers always revive their spirit through words and this gives her strength and courage to live longer. Other respondents reported that they also gain wisdom and skills on things that they don't know through the prevention and promotion services. The respondents also pointed out that these programmes enables them to interact with their peer group and share their problems, achievements and advice one another on how to overcome the challenges of life. One respondent said *"My children used to lock me in the house when they go to work and grandchildren go to school because there was no one to look after me during the day, now I am happy because I am now in a safe environment during the day."* One of the respondents expressed her appreciation to government by saying that *"I am so happy that the government has realized that not every older person want to be in a residential care facility, other older persons like myself prefer to be surrounded by families and friends during their last days on earth and also be given care from their own homes."* Some respondents are satisfied that they are able to spend time with their families and they are able to receive care and support they deserve and that they do not feel isolated or rejected by family member.

All three groups have different understanding and knowledge about the advantages of the community-based care and support services, but the common thing amongst them is that they all view these programmes as important and valuable in meeting the needs of older persons in the community. These respondents believe that these programmes are important in the sense that it is a way of preventing older persons from being institutionalized and affords them opportunity to remain in the community for as long as possible. It safe lots of money for government as people does not need to be admitted at the hospital or residential care facility.

5.2.5 Theme 5: Disadvantages of Community-Based Care and Support Services

The view of the three groups of respondents concerning the disadvantages of the Community Based Care and Support Services are discussed as follows:

Viewpoints of the officials employed by the Department of Social Development

The respondents who are the officials from the Department of Social Development reported that in home-based care service, older persons are subjected to abuse due to their vulnerable state. Some people can take advantage of a home-based care programme if screening and training of caregivers is not stringent. The officials also reported that the family does not want to take responsibility with their family members. Bungane (2012:45) consider it very important that older persons should fill their lives with people who will support them and not reject them during their last days. Becker (2005:55-56) adds that families are an endless resources for our understanding on how to live in the world. With the support, love and protection of their families and friends, older persons can be able to cope with any difficulties of life. The officials believe that monitoring of the service is not done as professionally as expected. The respondents reported that the officials are not doing enough in terms of proper guidance and support to the organisations rendering these services to older persons and this affect growth in these organisations. The reason being there is not enough manpower from the Department to do the proper job. The officials felt that these services are seen as a source of income for community caregivers, as well as the management committees of the community-based organisations. Some management committees are just involved in the programmes

for their own personal gain and the financial incentives attached and are not there for the best interest of older persons.

Viewpoint of the management committee of the community-based organisation

When asked about the disadvantages of community-based care and support services, the respondents who are members of the management committee of the community-based organisations reported that the number of older persons needing home-based care and day-care services is increasing at an alarming rate. The older persons who are beneficiaries of home-based care and day-care services are all over their area of operation, and the distance to travel from one person to the other, has financial implications, e.g. vehicle use more petrol. There is also limited space to accommodate larger numbers in day-care centres and the number of care-givers is also determined by number of older persons. Due to financial implications the organisations can only take few older persons in these services.

The management committee reported that families of bedridden older persons especially on home-based care service fail to provide care to their parents or granny over the weekends and on holidays when caregivers are not working, for an example, older persons would not be bathed and disposable nappies would not be changed during week-ends and holiday as caregivers are not at work. The respondents reported further that there is lack of sense of urgency from the Department of Social Development in terms of intervention, family members abuses older person's grant and fails to pay for the services, to buy toiletries that the caregivers uses to bath an older persons and also fails to buy electricity especially in winter where there is a need for warm water to bath older persons and also to heat the room while bathing. The families make their older persons the responsibility of the caregivers. The respondents indicated that they have limited resources to run these programmes, and they pointed out the following challenges:

- "They are not given enough funding for proper implementation of these programmes."
- "They don't have manpower to run these programmes."

- “Transport also is an issue of concern as they said for them to be able to run these programmes they need their own transport.”
- “They don’t have proper infrastructure as government is failing to assist them to get proper places of their own.”

The respondents reported that they are using the public places as their meeting venues and in most cases they don’t get cooperation from the public as they don’t inform them on time that the place will be booked the next day for public matters, in many instances their programmes are interrupted. Some respondents believed that the community-based care and support services do not benefit the larger population of older persons. Recruitment of older persons and establishment of community-based care and support services is needed especially in rural areas where there are few or no services.

Viewpoint of the beneficiaries in terms of service delivery

From the viewpoint of the beneficiaries the respondent reported that they are expected to write reports in English and training are conducted in language that is not in their level of understanding and most of them have no formal education and it is difficult for them to understand, as a result they do make mistakes in day-to-day running of the organisation especially in financial management.

The respondent further reported that the fact that the organisations do not have their own places to meet disadvantages them, because most of the places they are using are very small and sometimes they are overcrowded as membership increases. During winter the places are very cold and sometimes they are unable to increase membership due to a lack of space. Most places that they are using are in terrible conditions that might expose older persons to danger and also affect their health.

In this theme the following were identified as common experiences from the views of the three groups of respondents, the issue of families being reluctant to take responsibilities of their family members in a home-based care service, the issue of infrastructure which affects the service delivery and the issue of guidance and support from the Department of Social Development which is not properly done due to a lack of manpower from the Department.

5.2.6 Theme 6: The need for government to improve the service delivery of older persons in the community

The community-based organisations by their nature are dependent on the government funding to be able to provide effective and efficient service delivery. Adirondack (1998:1) adds that the voluntary sector includes charities, organisations whose objects are wholly and exclusively charitable, which may or may be registered with the charity commission.

Viewpoints of the officials by the Department of Social Development

When asked if there is a need for government to improve service delivery to older persons, the officials of the Department of Social Development pointed out that, apart from the fact that there is a need for increase in the funding of the organisations rendering services to older persons, proper guidance, training and support must be provided to these organisations to enable them to render effective and efficient service to older persons. There are those officials who believed that government is trying their best when coming to service delivery to older persons. The respondents mentioned that there are Acts and policies that government has introduced and implemented to deal with issues affecting older persons.

At present the establishment of the Free State Older Persons Help Desk which is located at the Premier's office is in place. The aim of the desk, according to the officials, is to create a platform for older person's voices in decision-making for everything that is affecting them. Other respondents add that there is a Forum for Older Persons also aiming at advocating for the rights of older persons. The respondents are convinced that government is playing its part in caring and protecting older persons, now it is up to older persons and community to see to it that these legislations and structures are well implemented and are utilized for the older persons, benefit.

Viewpoint of the management committee of the community based organisation

When asked if there is a need for government to improve service delivery to older persons in the community respondents agreed that government should improve service delivery to older persons. The management committee wants government to improve funding of services to older persons in the community. The respondents

suggested that the government should look at proper mechanisms for monitoring of these services and also assessment of services needed, should be done to enable government to see how much funding is needed. The respondents felt that government should increase number of officials working with older persons, so that they can be able to do regular visits and monitoring on the progress of the organisations and to provide training regularly as needed.

The management committee reported that government should support older persons' programmes 100%, and provide them with proper infrastructure to run these programmes. One respondents who is a member of a management team reported that their luncheon club at Rocklands is struggling with a meeting place, they are moving from one place to the other; paying lots of money for rent and at present they are only depending on funding from government and this as a result is affecting their service delivery as the funding is supposed to be used for rendering services to older persons. The respondents felt that government should provide or assist them with transport to enable them to reach their meeting place on a daily basis as most of them are from faraway areas, due to accommodation problems in their area. Most of them are using transport to reach their meeting place and this affect their attendance as some older persons sometimes end up with too many absenteeism, while others are no longer coming, due to financial constraints. Transportation is a basic need often taken for granted and overlooked. The recipients and service provider often need transportation to go not only to and from medical centres but also to day-care facilities/service centres, shopping, therapy sessions, pay points, churches, service centres, delivery of meals on wheels to the home of older persons and caregivers to be able to provide home-based care services from one area to the other. According to Makiwane et al (2004:33) public transport is also one of the barriers for older persons to function independently. The most common complaint is that it is not user friendly for older persons. The transport route neglects those who stay far from the route. Some young taxi drivers lack respect and the abuse of older persons is common in public transport.

Viewpoint of the beneficiaries in terms of service delivery

When asked if there is a need for government to improve the service delivery to older persons in the community, the respondents reported that there is still a need

for improvement in the public places such as clinics, pay points, banks etc, because older persons are expected to be in long lines for the whole day, sometimes in the rainy and cold weather before accessing services and they are not given first preference due to their age. The older persons wanted government to send a mobile clinic to their meeting place at least once a month. One respondent reported that municipalities services are also issues of concern to older persons, the rate are too high for their income. She said *"government must stop treating older persons as if they are working, the municipal rates are too high for our income, and the worst part is when they involved lawyers to force us to pay. We do not refuse to pay services, but they are too much for us"*.

The respondents reported that there are also some government's officials who are still not treating older persons with the respect and dignity they deserve, when assisting them. Some older persons are still struggling to get a house; they are staying in a shanty or renting a one old room in bad conditions. At the police station, when reporting cases of abuse of an older person, they are not taken seriously and this contributes to the fact that they are no longer reporting cases of abuse, because they are afraid of being intimidated and ill-treated.

Some respondents suggested that all government departments and Non-governmental organisations should work together in order to address the issues that is affecting older persons. Other respondents are of the opinion that they are not getting proper support from the community and their leaders (councilors and the headman in rural areas). The respondents believed that some community leaders do not even know that these organisations exist in their communities, others are aware of the services, but they are ignorant of what it entails. The community leaders do not provide proper support to promote proper service delivery for older persons in their area.

In this theme, the beneficiaries and their management committees agreed that there is still a lot that government needs to do in order to improve service delivery to older persons in the community. The three groups of respondents agreed that government needs to improve funding of the nonprofit organisations rendering services to older persons to enable them to render effective and efficient services to older persons. The three groups of respondents also suggested that government

needs to provide proper guidance, support and training to these organisations in order for them to be able to render a better service. The officials tend to differ with the older persons and management committee, when they referred to the policies and legislations of older persons, structures that were developed and put in place, as a way of dealing with matters that are affecting older persons. The officials believed that government is trying its best in terms of service delivery to older persons.

5.2.7 Theme 7: Understanding of home-based care service

For the purpose of this study, only four non-profit organisations are rendering the home-based care services in Motheo district. The two organisations are rendering the service formally with trained and paid caregivers. The two organisations are rendering the service informally with no formal trained care-givers and no stipend or salary for them. In this theme only ten respondents who are the recipients of home-based care services participated. The respondents are from the four nonprofit organisations that are rendering home-based care to older persons in Motheo District. Uys and Cameroon (2003:22) defined home-based care as a placement of informal and formal caregivers in the home to promote, restore and maintain a client's maximum level of comfort function and health including care towards dignified death.

The following services were identified by all the respondents as services that are provided to older persons within their families in their homes: meals on wheels/foot, transport, primary health care, bathing/cleaning the house, changing nappies/linen, hair and nail cutting, bedsores dressing, respite care, palliative care, laundry service, counseling and physical exercises. The respondents, who are staying with their families, are using two or three of these services and other respondents are using all of these services.

Viewpoint of the officials (Social Workers) employed by the Department of Social Development

When asked about their understanding for home-based care, the respondents reported that "home-based care services are basket of services that are provided in

the home for frail and bedridden older persons or older persons but who do not want to be admitted in a residential care.”

The officials felt that home-based care is a very important service for older persons who are staying alone, frail and bedridden. According to the officials in most cases these older persons are neglected by their own families without any support system. These older people are reported to the Department of Social Development as a crisis case and the Social worker has to give an immediate intervention. The officials further reported that the situation in this matter can lead to an immediate removal of an older person to a residential care facility. The officials felt that there is a need for proper implementation of home-based care in line with the Older Persons Act 13 of 2006 to avoid unnecessary admission of older persons in residential care facilities.

Viewpoint of the management committee of the community based organization

The respondents reported that home-based care is a very valuable and useful service in meeting the needs of frail and bedridden older persons especially those who are alone. The respondents wanted government to fund the programme in order for them to render effective and efficient services to older persons. Most of the respondents reported that they are rendering the service but informally because there is lack of resource in terms of money, transport and human resource.

Some respondents reported that they are losing quality caregivers due to stipend or salary and they opted for greener pasture. The respondents want government to assist them with the training and salary not stipend of care-givers so as to keep them in their organisations. Some respondents reported that their older persons are voluntarily taking care of the other older persons who are sick and not able to attend the luncheon club. The respondents reported that older persons are bathing the sick older persons at home who are staying alone; assist them with the house chores and running their errands. The respondents add that they also provide the older persons at home with meals on foot as most of them do not have transport.

The respondents felt that the home-based care in the Motheo district is a need as many older persons are staying alone without any support system and their conditions are not that good. The old age homes are always full with a long waiting

list for Social Workers to be able to assist these older persons in need of services. Some respondents felt that it is not fair to remove an older persons from the environment that they are familiar with to an old age home even though there are times where the circumstances do not allow an older persons to be in that situation.

Viewpoint of the beneficiaries in terms of service delivery

The respondents reported that the most useful services to them is the meal, bathing which includes changing nappies and linen especially for those who do not have anyone to look after them. There are those respondents whose laundry is taken once a week to a nearby old age home for washing. When asked how will they feel if home-based care service can be provided to older persons for 24hours, meaning a trained caregiver be placed in the older person's house who are staying alone to look after her for 24hours. One respondent reported that *"it can be better if the home-based care service can be provided for 24 hours especially to those older persons who are staying alone in their home, because nowadays safety of older persons is not under guaranteed."* Some respondents who are using the home-based care service and staying alone reported that they are not getting proper support, because the service is not provided for 24hours, the meal is only served once a day, while to other older persons, it is their only meal in a day. Those who are using nappies are struggling a lot, because they have to wait for the next day when the care-givers come to bath them, before they can change it if they are staying alone. One respondent reported that, her exact words *"for me it will not be a good thing because I like my own space, I prefer to be in the company of other people for certain period of time and not always be under supervision because I like to do things my own way."* *"I am happy if the caregivers can keep on visiting me on the agreed days that is when I needed them because I don't want people to occupy my space."*

This respondent is staying alone in the house without the assistance of the family as the children and other relatives visit her occasionally. She is frail, but insisting that she is able to do things for herself, like cooking and bathing during the weekend, because the researcher's concern was on weekends and holidays when the caregivers are not at work.

Other respondent reported that *“government should provide training, better salary and not stipend to caregivers to motivate them to do their caregiving work properly and this will also encourage them to treat older persons with dignity and respect.”* Some respondents agreed that this will also decrease the abuse of older persons by caregivers. In Motheo district, most of the community-based care and support services that are rendering home-based care service are doing it informally with caregivers who are not formally trained. Only two out of thirty four funded nonprofit organisations are rendering the service professionally with a professional nurse as a coordinator and trained caregivers, even though the funding they receive from government is not enough. These organisations are old age homes rendering outreach programmes to the community. When asked how often the respondents make use of the home-based care service, most of the respondents reported that they access the service five days a week and some respondents reported that they access the services 2-4 days every week. There are those respondents who reported that they access the service once a week, because of a shortage of money as they are staying with grandchildren, whom they are sharing their pension with. Other respondents said that it is because they have family members who are taking care of them.

When asked if they have to pay in order to access the service, the respondent reported that, her exact words *“I do not have a problem to pay in order to access the services because I am happy with the services that I am getting and the fees are also affordable.”* The other respondent who is a retired teacher reported that *“beneficiaries have to pay for the services because the prices are reasonable and the services are rendered by the nonprofit organisations that are dependent on donations and sponsors for survival”*. The respondents further reported *“that things like food, petrol, nappies, medications or home-based care kit are becoming more and more costly and this become difficult for the organisations to cope that is why beneficiaries have to meet them halfway in order to assist in building these organisations.”* Other respondents felt that this will assist organisations or service provider to be more professional when rendering service to older persons knowing that beneficiaries are paying to access the service.

Some respondents felt that government is funding these organisations to provide services to older persons in the community and so there is no need to pay in order

to access the service. The beneficiaries should access these services free of charge. The respondents further pointed out that older persons have spent their lives working and taking care of families. Older persons have contributed to the nation-building during their production years and it will only be fair that the good is given back to them. Government has to make sure that older persons are well taken care of. Other respondent reported that *"for me old age grant is too little as I am a breadwinner in the family because children are not getting jobs and I have to support them with what I have, so I decided to access the service once a week."*

All the three groups of respondents felt that home-based care service is a very important and valuable service to older persons who are frail, bedridden and staying alone without any support system. The management committee felt that home-based care can reduce a pressure on old age home if it can be properly implemented. The older persons will be able to access the service in the environment that they are familiar with. The officials and the management committee raised a concern about the family and relatives who are neglecting their older persons without any support systems.

6 DISCUSSION

The focus of this article is based on the results obtained from the views of the three groups of the respondents. The results obtained identified the challenges and needs experience by older persons and the representatives of the management committee for the organisations of the older persons in Motheo District. The respondents believed that the Community-Based Care and Support Services are very powerful and important programmes, aiming at meeting the needs of older persons in the community if it can be well implemented. This is a challenge to government, because it has introduced a programme that needs resources in terms of funding, manpower, commitment and dedication of all government departments, in order for that programme to be well implemented.

Rossenberg et al. (2005:16-35) stated that it is difficult to provide care where there is high rate of poverty, where people do not have enough resources and do not have enough information on the availability and accessibility of resources or services. People need to be informed about basic services. A report done by South African Older Persons Forum (2010:7) stated that non-governmental organisations

running the Community-Based Care and Support Services are not properly funded. The nonprofit organisations are unable to provide excellent services to the beneficiaries due to the funding they receive.

The other challenge identified is that there are only a few services for older persons in the rural area. There is a need for government to improve the service delivery services to older persons in the rural area, because older persons in the rural area are more vulnerable and subjected to abuse of any kind. May (2003:54) pointed out that in most cases older persons care for people with chronic illness without any training and access to necessary information that might capacitate them to take precaution. Makiwane et al. (2004:23) add by saying this burden is even worse in the rural areas where there are little if any resources available.

The lack of proper infrastructure, most of the nonprofit organizations rendering community based care and support services to older persons do not have their own structure where they work or meet. The nonprofit organisations are using the community halls, church halls and shanty, in most cases the places are too small or too big, sometimes they are overcrowded and during winter the halls are too cold and this impact negatively on the health of older persons and the conditions affect the attendance of the prevention and promotion programmes. This requires the attention of the municipality and Department of Public Works to provide sites and vacant infrastructure to organisations for older persons.

Home-based care services were also identified as a need and have challenges to be implemented as required by Older Persons Act 13 of 2006, chapter 3 section 11(3). The proper implementation of the home-based care service for older persons needs the commitment and dedication of the Department of Health. The respondents agreed that caregivers needs proper screening, so as to protect older persons from any form of abuse. The caregivers also need proper training and supervision. The programme also needs resources in terms of human and finances in order to be well implemented. Most of the service providers in the Motheo district are rendering the home-based care service both formally and informally, with trained and untrained caregivers. The standard of the service is not meeting the needs as required by the Act. According to South African older persons forum (2010:2) non-governmental organisations believed that for home-based care to be properly implemented as required by the Older Person Act, substantial budgetary increase is

needed. The non- governmental organisations according to the Older Person Forum reported that they are losing quality caregivers due to poor salaries and they opted for careers offering better remunerations.

The education level and concentration of older persons is also an issue of concern as most of the trainings and workshops are conducted in language and standards that are above the older persons' and management committee's level of understanding. Some management committee members believe that the inclusion of a middle age group, who are educated in their programmes, will make a difference as the person will be able to understand and do what is expected from them. The level of understanding in older persons makes the progress in their organisations to be very slow as some older persons are not trainable.

7 RECOMMENDATIONS

- For the effective and efficient service delivery to older persons, the government will need to increase the funding allocated to the sub-programme of older persons. More focus should be given to the services provision to the older persons.
- The provision of services to older persons requires inter-collaboration and cooperation of government departments, private sector, civil partners and nongovernmental organisations in providing such services.
- The role of each government department should be clearly defined when coming to service delivery to older persons.
- The capacity and skills development are needed for the nonprofit organisations so that they can be able to provide better services to older persons in the community.
- For the effective and efficient service delivery, there is a need for the Department to increase the number of officials working with older persons in the Motheo District.

8 CONCLUSION

This article gave an overview of the results obtained from the three groups of participants on the evaluation of community based care and support service. The three groups gave their views about the programme and its categories. The aim of

the article was to evaluate the community- based care and support services of older persons in Motheo district and from the views of the three groups of respondents, it is clear that this programme is effective, but there is still much that needs to be done for proper implementation.

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**SECTION C:
SUMMARY, RECOMMENDATIONS
AND CONCLUSION**

1 INTRODUCTION

The research was conducted to evaluate the community-based care and support service of older persons in Motheo District, Free State Province. Before this could be done the existing Community-based Care and Support Services had to be explained. For the purpose of this study, this section will give a summary and consolidated recommendations and conclusion. The aim, objectives and central theoretical statement will be tested.

2 SUMMARY

2.1 Aim and objectives of the research

➤ Aim of the research

The aim of this study was to discuss and evaluate the Community-based Care and Support Services strategy as used by the Department of Social Development in rendering services to older persons within communities in the Motheo District (Free State Province) and to raise the viewpoints of direct service providers, officials of the Department of Social Development and older persons that receive these services, in order to enhance the delivery of this programme.

➤ Objectives of the research

The objectives were as follows:

- To discuss the Community-based Care and Support Services of the Department of Social Development from the viewpoint of older persons that receives the services, the officials of the Department of Social Development and the management committee of the community-based organizations.
- To evaluate the Community-based Care and Support Services of the Department of Social Development from the viewpoint of the older persons who received the services, the officials of the Department of Social Development and the management committee of the community-based organizations.

- To triangulate the viewpoints of the three groups of participants in order to make recommendations for the proper delivery of this programme.

The objectives were tested by means of two articles under section B. From the results obtained, it was evident that the objectives were met. The fact that background and nature of the programme were ascertained and the programme was evaluated and proven to be very important to older persons in the community, the aim of the research was achieved.

3 Research methodology

The methods of research were both a literature study and empirical research. Both methods will be discussed as follows:

3.1 Literature study

According to Fouche and Delport (2005:123) the literature study aimed “at contributing towards a clearer understanding of the nature and meaning of the problem that has been identified”. Mitchell and Jolley (2001:518) agrees that literature study is necessary and important for the researcher to familiarize him/herself and gain more information concerning the research topic and also to determine what other researchers have done in this regard in order to avoid and prevent duplication.

A literature study was undertaken during the end of the year 2011 and the beginning of the year 2012. Literature sources used in this study included books, articles, theses, dissertations, knowledgeable persons, newspaper articles and internet resources. The main focus of the literature was on the evaluation of community-based care and support services to older persons, the categories of the community-based care and support services and its importance to older persons.

3.2 Empirical study

The main focus of the study was to describe and evaluate the community-based care and support services for older persons. In this study the evaluation research model was utilized. According to Yegidis and Weinbach (2009:285) this model attempts to answer many different questions concerning programmes. Evaluation

research seeks to build knowledge to improve the quality of social programmes, both proposed and existent. According to Strydom (2013:156) evaluation research can assess the aims, the designs, funding possibilities, implementation and applicability of social interventions in order to determine whether an intervention has produced the intended results. This research method was used by the researcher to evaluate the Community-based Care and Support Services as used by the Department of Social Development in rendering services to older persons who are living with their families within their communities, that is, to assess its ultimate success or failure and to come up with the recommendations on how to enhance the programme.

3.2.1 Research designs

According to Yegids and Weinbach (1996:89) research design refers to a plan or blueprint of the way a researcher intends to conduct research. Maree (2008: 70) adds that the design guides the researcher in planning and implementing the study in such a way as to achieve the intended goals. It begins with identifying and developing the problem based on theory or concepts, before examining the project, up to the final plans for data collection (Burns and Grove, 2001:223). For the purpose of this study the researcher utilized the mixed methods designs where qualitative and quantitative methods were concurrently used. In this study the three data sets from the three groups of participants were triangulated regarding the qualitative and the quantitative data. Delport and Fouche (2011:442) explained that triangulation mixed methods designs is one phase design in which the researcher uses both quantitative and qualitative methods during the same time frame and with equal weight to best understand the phenomenon of interest.

The researcher in this study used interview and questionnaire tools to collect data from the older persons who are the recipients of the service, the management committees of the community-based organizations and the officials of the Department of Social Development. Sullivan (2001:255) explained that some researchers may use both a questionnaire and interview techniques, with respondents filling in some answers themselves and being asked other questions by the interviewer. The intention of the researcher from the beginning was to do qualitative research but it seems appropriate for the researcher to use both methods

due to time constraints and the vastness of the district. The self-designed interview schedule was structured in a way that it includes both qualitative and quantitative questions. The use of self-design interview schedule was very fruitful in the sense that it assisted the researcher to collect as much information as possible. The same schedule from question thirteen was used to interview frail older persons at home who are using home-based care services. In the schedule, there were questions where the researcher was ticking the correct answer based on the respondent and other questions wanted the respondents to explain and discuss and the researcher was taking notes and also using tape recorder to record the information.

The researcher also utilized all four research objectives, namely the exploratory, descriptive, explanatory and evaluative designs. Babbie (2010:94) and Babbie and Mouton (2009:81) add that all of these designs can be used in a quantitative or qualitative fashion. Exploratory research was conducted in order to gain insight and knowledge from the older persons (beneficiaries) and the management committee of the community-based care and support services. According to Fourche and De Vos (2011:95) explorative research is used when there is a lack of information on a specific topic, as in this study. The existing literature reveals that there was insufficient research and even less research pertaining to the evaluation of community-based care and support service of older persons.

According to Burns and Groves (2001:44) the descriptive research objectives provides a detailed description of what was explored and further will allow the researcher the opportunity to look with intense accuracy at the phenomenon. Fourche and De Vos (2011:96) assert that descriptive research describes the behavior, thoughts or feelings of a particular group or subject. Descriptive objectives offer a picture of the specific details of a situation, social context or relationship. In this design the researcher starts with a clearly defined subject and does the research to describe it accurately. Glicken (2004:267) describes explanatory research as attempts to provide meaningful and accurate conclusions from the possibly considerable amount of information gained or already available. Strydom (2013:155) explain that explanatory objectives can be useful in programme evaluation in order to make statements about the influence of the programme on

participants and it focuses on causal relationships between the independent variables and the dependent variable.

3.2.2 Sampling

Non-probability purposive sampling was used in that it targeted participants from previously disadvantaged communities in the Motheo District. According to Strydom (2011:232) the purposive sampling is based entirely on the judgment of the researcher "in that a sample is composed of elements that contain the most characteristic, representative or typical attributes of the population that serve the purpose of the study best". In this study the researcher purposively chose to draw the sample from the six funded organisations and from the three municipalities which form the Motheo District. Two management committee members were selected from each organization which gave a total number of 12 participants. Four beneficiaries (older persons) from each organization also participated in this study; this then gave a total number of 24 older persons who can still function independently. Ten frail older persons who are receiving services in their homes were also interviewed. Ten social workers who are rendering specialized services under the sub-directorate of older persons were selected to participate in this study. In total there were 56 participants.

3.2.3 Measuring Instrument

The researcher in this study used the two types of data collection methods that are normally used in qualitative research: questionnaires and interviews. Candy et al (2006: 213) pointed out that questionnaires and interviewing methods allow researchers to elicit general tendencies and rules of those who answer to questionnaires and interviewees in a certain task. Pretorius (2012:26) adds that to ensure the quality of data in quantitative research it is important to ensure the validity and reliability of the data. According to Burns and Grove (2005:374) reliability is referred to as the consistency and dependability demonstrated by a research instrument (interview schedule in this study) when it is used to measure the variable attribute that it was designed to measure. Validity refers to the degree to which the instruments (interview and questionnaire) measure what it was supposed to measure (Maree & Pietersen, 2007:147). Validity was assured by determining the appropriateness of the questionnaires and checking whether the

questions corresponded with the objectives of the study. In qualitative research the data must be trustworthy. According to Botma et al. (2010:232) trustworthiness as proposed by Lincoln and Guba has four epistemological standards namely: truth value, applicability, consistency and neutrality. For each of the four standards, there are specific strategies and criteria to adhere to and to ensure rigour in the research. These epistemological standards are now discussed in detail:

➤ **Truth-value**

This implies how true are the findings of the study in the context in which the research was undertaken. The researcher made sure that the results are true by checking the members in the sense of communication, validation and interpretation of data. The engagement with the respondents in the setting was undertaken to build a trusting relationship. For example the researcher grouped the respondents in a hall and explained the questionnaire and the respondents answered the questions according to their understanding.

➤ **Applicability**

Applicability refers to the degree to which the findings are applicable or relevant to different context or other respondents. The findings are relevant to the respondents in the sense that they all have responsibility in improving service delivery to older persons.

➤ **Consistency**

Consistency implies how repeatable the findings of the study are if the study should be repeated in the similar context with the same respondents. The research methodology was clearly and fully described. The three groups of respondents chosen in this study have the expertise and insight in the field of older persons and if the study can be repeated in the same manner with the same respondents, the results will be the same.

➤ **Neutrality**

This entails how it can be determined whether the findings of a study were influenced by the respondents and the circumstances of the study and not by the

researcher's biases, motives interests or perspectives. The researcher was not bias as she was open for the suggestions and also subjected the study to critical evaluation from the beginning to the end. Hence the study was given to an expert researcher for the second opinion.

4 PRESENTATION OF THE REPORT

➤ Article 1: Background and nature of community-based care and support services

In this article the researcher gave the background and nature of community-based care and support services. The two categories of the community-based care and support services which includes, prevention and promotion programmes and the home-based care programmes. The services rendered under each category were also discussed as well as the importance of community-based care and support services to older persons. This was done by means of the literature study.

From the literature study it was clear that the community-based care and support services strategy as used by the Department of Social Development to render services to older persons in the community can play an important role in changing the lives of older persons in the community if it can be enhanced and properly implemented.

➤ Article 2: Evaluation of Community-based Care and Support Services

In this article the researcher used the questionnaires attached as (annexure 5,6 and 7) to collect data from representatives of management committees and officials of the Department of Social Development. The same questions for home-based care services in the questionnaire for older persons starting from number thirteen were used to interview the frail older persons at home in order to evaluate the community-based care and support services of older persons. The researcher also grouped the beneficiaries in a hall and assisted them to answer the questionnaire by explaining the meaning of every question to them and they then wrote the answer according to their understanding. It was a two way process, as they also asked where they do not understand. The reason for this approach was for the researcher to gather as much information as possible in a group form.

The findings of this study showed that the programme of community-based care and support services has made an impact in the lives of older persons who are in Motheo District, but there is a need for government to improve the standard and quality of services rendered to older persons in the community.

5 TESTING OF THE CENTRAL THEORETICAL ARGUMENT

Research was conducted based on the following theoretical statement

- Through an evaluation of Community-based Care and Support Services of the Department of Social Development, services rendered by the Department's officials and other direct service providers can be enhanced in order to optimally benefit the older persons that avail themselves of these services.

The findings of this study and the literature review indicated that community-based care and support services can play an important role in the lives of older persons in the community if it can be enhanced and be properly implemented by all stakeholders in order to benefit older persons in the community.

6 Recommendations

Based on the findings on the needs and challenges facing the community-based organisations when coming to service delivery for older persons in the communities, the following can be recommended:

6.1 Provision of resources

- For the effective and efficient service delivery to older persons, the government should increase the funding allocated to the non-profit organizations rendering services to older persons.
- More focus should be given to the provision of services to older persons.
- Government should ensure that the vacant buildings are made available to the non-profit organizations that are funded by the Department of Social Development, as this will enable these organizations to render effective and efficient services to their beneficiaries.
- The government should also consider the funding of the venues or meeting places for the non-profit organizations for them to be able to rent bigger places which are in good condition.

- The non-profit organizations rendering the community-based care and support services to older persons that are in a position to build their own infrastructure should be provided with sites in an affordable price bearing in mind that it is a non-profit organization.

6.2 Capacity Building

- The government should empower the community-based organizations with the necessary management skills, namely general management skills which will enable them to function effectively and efficiently when providing care and support services to the older persons
- The Department of Social Development should ensure that the funded organizations have financial policies in place. This will ensure that financial management skills are developed for the smooth running of the organizations. This will also assist in drawing budgets which will be enough for providing excellent services to older persons in line with the requirements of the Older Persons Act, Act 13 of 2006. The financial management skills will also assist them to be transparent and accountable in terms of the funding.

6.3 Integrated planning and collaboration of service delivery

- There should be an integrated planning and collaboration of service delivery to older persons amongst stakeholders.
- The provision of services to older person requires inter-collaboration and cooperation of government departments, private sector and civil partners and nongovernmental organizations in providing such services
- The role of each government departments should clearly define when coming to service delivery to older persons.
- Government departments should commit themselves in terms of allocation of resources for the enhancement of effective and efficient service delivery towards older persons.
- There is a need for the Older Persons Act 13 of 2006 to be amended in order to bind all the government departments to contribute towards the enhancement of the quality of life of the older persons.

- The departments should ensure that the Forum for Older Persons also includes different stakeholders that are making contributions towards enhanced service delivery for the older persons.
- There is a need for cooperation and open communication especially between the Department of Social Development and the Department of Health in order to avoid duplication of services in terms of home-based care service.

6.4 Shortage of services in the rural area

- Government should ensure that older persons in the rural area also benefit in terms of service delivery.
- Social services resources should be made available for older persons in terms of enhanced service delivery. The satellite offices should be made available in the rural areas to address the needs of older persons in those areas.
- The Department of Health should consider increasing their resources in order for mobile clinics to be made available for older persons in the rural area once a week and for those in the prevention and promotion programmes, once a month.

6.5 Policies and legislation

- The emphasis on older person's policies and legislation should focus on highlighting the importance of the roles of the families and not only the role of the officials.
- There should be a proper screening and training of caregivers in order to avoid unnecessary abuse of older persons.
- Management of the organization should develop policies for the functioning of their organizations to prevent problems within those organizations as far as possible.
- The caregivers within the organizations should have job descriptions that clarify the roles and conditions of employment as well as code of conduct.
- Government should assess the implication of the remuneration policy for caregivers in line with the policies of the Department of labor.
- Officials should also consider conducting research into the needs and interests of male older persons in order to make the activities in the prevention and promotion programmes more attractive and interesting to older men.

- For the effective and efficient service delivery, there is a need for the Department to increase officials working with organizations which render services to older persons in the Motheo District.
- Capacity building is also needed for the officials so that they should be able to know what is expected from them in terms of support and guidance to the nonprofit organizations and also the monitoring and evaluation of services.

7 CONCLUSION

In this section the researcher gave the overall summary of the Community-Based Care and Support service, the recommendations based on the needs and challenges of the community-based organizations in terms of service delivery to older persons in the community and the conclusion.

The community-based care and support services have proven to be the important and valuable programme in the lives of older persons in the community. There are challenges identified that are hampering the proper implementation of the programme. For the proper implementation of the programme, there is a need for intesectoral collaboration of all stakeholders when coming to service delivery to older persons. The role of different stakeholders should be clearly defined.

However the community-based care and support service can be the best programme in addressing the needs of older persons in the community if it can be well implemented.

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SECTION E: ANNEXURES

ANNEXURE 1: PERMISSION LETTER FROM DEPARTMENT OF SOCIAL DEVELOPMENT



social development

Department of
Social Development
FREE STATE PROVINCE

Ref: Ms M. Tshesebe
2011/06/30

University of North West- Potchefstroom Campus
Department of Social Work
Potchefstroom

To Whom It May Concern

CONFIRMATION LETTER: PERMISSION TO CONDUCT A MASTERS RESEARCH PROGRAMME.

This serves to confirm that Me. Mpho Yvonne Tshesebe has been granted permission to carry out a Social Work research programme linked to her master's degree studies. However the official is expected to adhere to the code of ethics and conduct as an employee of the Department of Social Development in line with the Public Service Act, Act 109 of 1994.

Hope you will find this in order.

M.J. Maikgoshu
District Manager: Motheo /Mangaung Metro: Free State.

01 July 2011

P.O. Box 695, Bloemfontein, 9300
Thusanong Building, 3rd Floor, Dr. Belcher Road, Bloemfontein
Tel: (051) 403 2330 Fax: (051) 432 4857 / 086 651 4710
E-Mail: josephm@socdev.fs.gov.za / tinab@socdev.fs.gov.za

www.fs.gov.za

ANNEXURE 2: PERMISSION LETTER FROM THE NON
PROFIT ORGANISATION

Lapologang Old Age Day Care Centre

Caring and creating a Home for the Aged and Sick

6180 Ramatsoele Road

Cell: 082 211 3059 / 079 524 2654

Phahameng

Tel: 051 432 7853

TO WHOM IT MAY CONCERN

The is confirm that the management of the above-mentioned centre has granted permission to Me MPHO TSHESBE to conduct a research on Community Based Care and Support Services for the Older Persons. The management and older persons are been used as participants.

MANAGEMENT

ANNEXURE 3:ETHICAL LETTER



NORTH-WEST UNIVERSITY
YUNIBESITHI YA BOKONE-BOPHIRIMA
NOORDWES-UNIVERSITEIT
POTCHEFSTROOMKAMPUS

Privaat sak X6001, Potchefstroom
Suid-Afrika, 2520

Tel: 018 299-1111/2222
Web: <http://www.nwu.ac.za>

Aan wie dit mag aangaan

Etiëkkomitee
Tel: 018 2994237
Faks: 018
E-pos: 10055355@nwu.ac.za

27 Januarie 2012

Geagte Mnr./Me.

Etiëkaansoek: NWU-00140-11-S1

“Evaluation of Community Based Care and Support Services for Older Persons in Motheo District, Free State Province

Prof. Strydom het bevredigend op die kommentaar van die evalueringspaneel geantwoord en etiese toestemming word aanbeveel.

Vriendelike groete

H.H. Vorster

Prof. H.H. Vorster
Voorsitter

ANNEXURE 4: INFORMED CONCENT

Enquires

PRINCIPAL INVESTIGATOR/RESEARCHER: Tshesebe Mpho Yvonne

ADDRESS: Department of Social Development

Thusanong Building

Dr. Bulcher road, Heidedal

Bloemfontein

9300

Contact Number: 051-4032200/0834438268

DECLARATION BY PARTICIPANTS

I _____ (name), ID No _____ in my
capacity as _____ representing _____

(name of organization) was invited to participate in the study which is being

Undertaken by Tshesebe Mpho Yvonne, a part time master's student in the

Department of Social Work in the School of Psychosocial Behavioral Science at

the Potchefstroom campus of the University of North West.

THE FOLLOWING ASPECTS HAVE BEEN EXPLAINED TO ME:

1. **Title of the study:** Evaluation of Community Based Care and Support Services for Older Persons in Motheo District, Free State Province

2. **Aim of the study:** To discuss and evaluate the community-based care and support services strategy as used by the Department of Social Development in rendering services to older persons within communities in Motheo District (Free State Province) and to raise the viewpoints of direct service providers, officials of the Department of Social Development and older persons that receive these services, in order to enhance the delivery of this programme.

3. **Procedures:** The researcher will give me questionnaire and discuss it before I completed it. The researcher will interview me, taking notes of what I am answering and using a tape recorder to record the information.

4. **Risks and discomforts:** There are no known risks or discomforts associated with this study.

5. **Participants' rights:** No pressure will be exerted on me to consent to participate and I understand that I may withdraw from contributing in the study at any time without any penalty.

6. **Confidentiality:** I understand that the data collected through the questionnaire and interview will be kept confidential. The results of this study may be published in the research document, professional journals or presented at professional conferences, but my records or identity will not be revealed unless required by law.

I HERE CONSENT VOLUNTARILY TO PARTICIPATE IN THE ABOVE STUDY.

Signed/confirmed at _____ on _____ 2013

Signature or right thumbprint of participant

Signature of witness

ANNEXURE 5: QUESTIONNAIRE FOR MANAGEMENT COMMITTEE

EVALUATION OF COMMUNITY BASED CARE AND SUPPORT SERVICES IN
MOTHEO DISTRICT, FREE STATE PROVINCE.

PLEASE ANSWER THE FOLLOWING QUESTIONS

SECTION A: PERSONAL INFORMATION

1. Home language? (Only one)

Language	
Sesotho	
Setswana	
English	
Afrikaans	
Other (Specify)	

2. Age group - Tick with an X

Age	Male	Female
30 to 39		
40 to 49		
50 to 59		
60 to 69		
70 to 79		
80 upwards		

3. Race - Tick with an X

African	
Indian	
Coloured	
White	
Other	

4. Marital Status - Tick with an X

Status	
Married	

Divorced	
Single- Never married	
Widower or Widow	
Living together	
Other (Specify)	

5. Occupation – Tick with an X

General Worker	
Domestic Worker	
Professional(Social worker, teacher, retired, etc)	
Unemployed	
Other	

6. Level of education- Tick with an X

No formal education	
Primary education	
Secondary education	
Tertiary education	
Abet education	
Other	

SECTION B:

7. What do you understand by your role in your Organisation? Explain

8. List services that are currently provided to Older Persons in the community by your Organisation?

9. Where does your organization rendering prevention and promotion Programme from? e.g community hall

10. The area where your organization is located e.g rural

11. What are the advantages and disadvantages of the Community Based Care and Support Service?

11.1. Advantages

11.2. Disadvantages

12. Do you think there is a need for government to improve the service delivery for Older Persons in the community?

13. What are your recommendations for improving the service delivery to Older Persons in the Community?

14. Do you think the beneficiaries are satisfied with the services provided to them by your organization?

Yes		No	
-----	--	----	--

15. Motivate your answer

16. Which services are currently provided to older persons within their families in their homes by your Organisation?

Meals on Wheals/foot	
Transport	
Primary health care	
Bathing /cleaning the house	
Changing nappies/linen	
Hair and nail cutting	
Bedsore dressing	
Respite care	
Palliative care	
Laundry	
Counseling	
Physical exercise	
Other	

17. How often do you provide home based care service to the older persons?

Frequency	No. of days
Once a month	
Once a week	
2-4 days a week	
Other	

18. From the above table which services do you think are most useful for older persons in their home and why?

19. Does the beneficiaries/ family pay for accessing the Community Based Care and Support Service? Tick the relevant service.

Fees	Day Care	Luncheon Club	Home-Crare	Based	Cost per month/ per day
Annual Fee					
Admission Fee					
Meals					
Transport					
Other					

20. Are the beneficiaries / family satisfied with the service provided by home-based carer?

Yes		No	
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21. Motivate your answer

22. In your opinion, is there a need for Older Persons to pay a fee in order to access Community Based Care and Support Services? Explain.

ANNEXURE 6: QUESTIONNAIRE FOR GOVERNMENT OFFICIALS

EVALUATION OF COMMUNITY BASED CARE AND SUPPORT SERVICES IN
MOTHEO DISTRICT, FREE STATE PROVINCE.

PLEASE ANSWER THE FOLLOWING QUESTIONS

SECTION A: PERSONAL INFORMATION

1. Home language? (Only one)

Language	
Sesotho	
Setswana	
English	
Afrikaans	
Other (Specify)	

2. Age group - Tick with an X

Age	Male	Female
20 to 29		
30 to 39		
40 to 49		
50 to 59		
60 to 69		

3. Race - Tick with an X

African	
Indian	
Coloured	
White	
Other	

4. Marital Status - Tick with an X

Status	
Married	
Divorced	

Single- Never married	
Widower or Widow	
Living together	
Other (Specify)	

5. Occupation – Tick with an X

General Worker	
Domestic Worker	
Professional(e.g. Social worker, Nurse, etc)	
Other	

6. Level of education- Tick with an X

No formal education	
Primary education	
Secondary education	
Tertiary education	
Abet education	
Other	

SECTION B:

7. What role do you play as government official in making the lives of Older Persons better?

8. What do you understand by Community Based Care and Support Service for Older Persons?

9. What are the advantages and disadvantages of the Prevention and promotion programmes for Older Persons e.g. luncheon clubs, day care centers, economic empowerment programme etc?

9.1. Advantages

9.2. Disadvantages

10. In your opinion, is there any gap in the Government's role of addressing the needs of Older Persons in the community? Explain

11. What are your recommendations for improving the service delivery to Older Persons in the Community?

12. Do you think Older Persons Act 13 of 2006 is addressing the needs of Older Persons? Motivate

13. Do you think Older Persons are satisfied with the services provided to them by Government officials? (Particularly Department of Social Development)

Yes		No	
-----	--	----	--

14. Motivate your answer

15. What are the advantages and disadvantages of home-based care service for older persons?

15.1. Advantages

15.2. Disadvantages

16. Do you think there is a need for trained and paid care gives to provide the service? Motivate

17. Is there a need for professional nurse to monitor the service? Motivate

18. In your opinion, is there a need for Older Persons to pay a fee in order to access Community Based Care and Support Services? Explain.

ANNEXURE 7: QUESTIONNAIRE FOR OLDER PERSONS

ANNEXURE 7

QUESTIONNAIRE: OLDER PERSONS (BENEFICIARIES)

EVALUATION OF COMMUNITY BASED CARE AND SUPPORT SERVICES IN MOTHEO DISTRICT, FREE STATE PROVINCE.

PLEASE ANSWER THE FOLLOWING QUESTIONS

SECTION A: PERSONAL INFORMATION

1. Home language? (Only one)

Language	
Sesotho	
Setswana	
English	
Afrikaans	
Other (Specify)	

2. Age group - Tick with an X

Age	Male	Female
60 to 69		
70 to 79		
80 to 89		
90 upwards		

3. Race - Tick with an X

African	
Indian	
Coloured	
White	
Other	

4. Marital Status - Tick with an X

Status	
---------------	--

Married	
Divorced	
Single- Never married	
Widower or Widow	
Living together	
Other (Specify)	

5. Occupation – Tick with an X

General Worker	
Domestic Worker	
Professional(retired Social worker, teacher, nurse, etc)	
State grant recipient	
Not recipient of state grant	
Other(specify)	

6. Level of education- Tick with an X

No formal education	
Primary education	
Secondary education	
Tertiary education	
Abet education	

SECTION B:

7. List the services that are currently provided to you as an Older Persons in your community?

8. What are the advantages and disadvantages of the Community Based Care and Support Service?

8.1. Advantages

8.2. Disadvantages

9. Do you think there is a need for government to improve the service delivery for Older Persons in the community?

10. What are your recommendations for improving the service delivery to Older Persons in your Community?

11. As a beneficiary are you satisfied with the services provided to you in the community?

Yes		No	
-----	--	----	--

12. Motivate your answer

13. Which services are currently provided to you as an older person within your families in your community? (Home-based Care)

Meals on Wheals/foot	
Transport	
Primary health care	
Bathing /cleaning the house	
Changing nappies/linen	
Hair and nail cutting	
Bedsore dressing	
Respite care	
Palliative care	

Laundry	
Counseling	
Physical exercise	
Other	

14. Frequency for accessing / providing home based care service (Tick relevant answer)

Frequency	No. of days
Once a month	
Once a week	
2-4 days a week	
Other	

15. From the above table which services do you think are most useful for older persons in their home and why?

16. Who is the primary care-giver in the households? (Tick relevant answer)

I am	
The neighbors	
Children	
Spouse	
Grandchildren	
Relatives	
Volunteers	

17. Primary care-givers in the households are: (tick the relevant answer)

Trained	
Not trained	

18. Does the beneficiaries/ family pay for accessing the Community Based Care and Support Service? Tick the relevant service.

Fees	Day Care	Luncheon Club	Home- Crare Based	Cost per month/ per day
Annual Fee				
Admission Fee				
Meals				
Transport				
Other				

19. Are the beneficiaries / family satisfied with the service provided by home-based carers in their home?

Yes		No	
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20. Motivate your answer

ANNEXURE 9: LANGUAGE EDITING CERTIFICATE

I, Christian Albert vd Walt, certify that I revised the dissertation for language and style and found it in order.

Signed at Potchefstroom on this 4th day of November 2013.

C A vd Walt

B. Iuris, BA Honnours, MA.