The Aging in Rural Kenya and the Process of Social Isolation

While Kenyans aged 60 and above can be found both in the rural and urban the National draft Policy on older persons and aging maintains that aging is predominantly a rural phenomenon (Government of Kenya. 2008: 5). This claim can be interpreted from three main perspectives:

First, is the fact that in the Kenyan setting, majority of the urban workers end up retiring to their rural homes because they can hardly save enough to invest in urban homes and they have nothing promising to look to in the form of urban homes for the aged.

Secondly, though there are several scenarios with regards to homes especially housing for the aged ranging from “family based rural homes in the villages and homesteads, family based urban homes, high and middle class residential areas, the slum areas and institutional homes” (ibid: 24), the fact remains that there are those of the urban workers who invest in urban property have not changed their attitude towards a home. For them, the ancestral rural village where ancestral land has been passed on from one generation to another is what constitutes a home. For this category, even if they invested in urban properties in the form of buildings/houses, they do not consider these properties as homes or as properties that can be converted into homes.

Third is the fact that there is emerging a trend of diminishing roles for the aged in the urban setting.

It is obvious that the Gusii community of Kenya, just like many other communities, suffer three major handicaps. First, the extended family has completely disappeared. The community a typical representation of Max Weber’s (1934) changing traditional society: A society that has transformed from one that was motivated by tradition, values or emotions to one that that is goal- oriented. Some of the changes Weber predicted in this social change include the development of science and displacement of religion, impersonality, and the technical rationalization of social relationships. With this major transformation among the Gusii people, the result has been that family care for the aged is explicitly absent. Secondly, the community cohesion is being eroded since the traditional structures and organization are being replaced by the modern ones, which do not provide for the kind of communalism that was experienced in the traditional society. Third, the fact that Kenya does not have a functional welfare component within its official structures, it will be futile to think that the state will provide adequate care for the aged.

The greatest concern to day in regard to ageing in Kenya is the types of social networks the aged have: How are they socially connected or/and isolated? There is no denying the fact that older citizens in Kenya today are experiencing a low level of contact with family, friends, neighbors, community and social sources (GoK 2008:33).

It is evident that the rural aged is experiencing social isolation: isolation occasioned by the death of Africa’s four great values of Kinship, Sharing, Solidarity and Common good. The Kinship values which had both the biological, social and ontological reality necessary for the individual to negotiate his/her space in the community is fast disappearing. So for them thee tangible substances that count for most in daily their lives namely: good will, fellowship, sympathy, and social intercourse among the individuals and families who make up a social unit are absent. Finally the aged rural Kenyan becomes helpless socially as they are left to themselves. It at this point that it can be concluded that the rural old have lost their social
capital: Connections within and between social networks as well as connections among individuals.

Politically, this puts pressure on the policy on welfare to the aged. Given that welfare services in Kenya and in most African countries were until recently being provided within the traditional social structures, the state was not under any pressure to look into policy to address welfare in a formal way. Now that the traditional structures are slowly dying, the state is directly challenged to address the welfare of the aged in a formal way. Efforts to this end were visible in 2004 when the first National draft on older persons and aging was developed. The draft was revised in 2008 which was approved by cabinet on 7th May 2009. Since then the Ministry of Gender, Children and Social Development has prepared sessional paper no 2 of 2009 to be submitted to parliament for debate.