

Lived Experiences of Elderly Persons Living Alone in Rural Areas of Botswana

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ABSTRACT

Most of the developing countries are experiencing an increasing population of elderly persons aged 60 years. The main contributing factor to this is the increase in life expectancy, which has been experienced in recent times thanks to improvements in general health. A majority of these elderly persons reside in rural areas, with an increasing number of them residing alone in a household. Consequently, a majority of the elderly residing in rural areas face challenges impacting their lives. This paper reports the findings of a study that explored the lived experience of elderly persons living alone in rural areas of Botswana. The study used a case study research design and collected data from a sample of 12 elderly persons aged 60 years and above living alone, using in-depth interviews and observation. Data were analyzed manually following a qualitative data analysis procedure developed by Faherty (2010). Five key themes emerged to explain the lived experiences of elderly persons: (i) level of autonomy, (ii) multiple losses in life, (iii) attachment and belonging to a place, (iv) problems with basic necessities of life, and (v) dissatisfaction with living alone. These themes capture positive and negative situations experienced by elderly persons. Positively, living alone has given these elderly persons a certain level of autonomy in managing their lives. In contrast, most of them experienced distressing multiple losses structuring their lives. They receive inadequate social support from their family and community. Some of them lived in poor housing conditions, and they relied solely on old-age pensions for survival. The study concluded that elderly persons living alone in rural areas need integrated support services from family, community, government and non-governmental structures in order to live dignified lives. The introduction of an all-encompassing program of care and support involving all these key stakeholders is thus recommended.

KEYWORDS: Botswana, elderly persons, lived experiences, living alone, rural areas

This paper shares the findings of a study that explored the lived experiences of elderly persons in rural areas of Botswana aged 60 years and above living alone for extended period. The study adopts Koopman-Boyden and Moosa's (2014) definition of living alone as residing in a single-person or no more than one-person household. There has been a global rise in the number of people living alone in one-person households (Mutanda & Odimegwu, 2019), and elderly persons constitute a great proportion of these households. Generally, the proportion of elderly persons has increased rapidly worldwide owing to the demographic transition from high to low levels of fertility and an increasing life expectancy, and population aging will continue to grow more rapidly than before (United Nations [UN], 2013; World Health Organization [WHO], 2023).

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WHO (2023) indicated that between 1990 and 2020, global life expectancy rose by more than 8 years, to 72 years. It is projected that for at least the next twenty-five years, the older population is expected to continue growing more rapidly than other age groups (UN, 2013; United Nations Economic Commission for Europe [UNECE], 2017). The projection by WHO (2023) indicates that older adults who are more than 60 years old worldwide were to increase from 1.1 to 1.4 billion by 2030. Indeed, global aging should be viewed as a success story, as people aged 60 years and above live longer, healthier, and more productive lives (Nangia, 2016).

The pace of population aging is much faster in developing countries than in developed countries; two of every three older persons today live in developing countries (UN, 2013). The most rapid population aging in the world is taking place in Africa. Patel (2005), cited in Dhemba and Dhemba (2015), posited that the Southern African region, in particular, is also experiencing an aging population as it has the largest number of elderly persons on the continent. This means that poor African countries will have less time to adjust and respond to the consequences of population aging (Dokpesi, 2014; Osei-Waree & Wilson, 2016).

In Botswana, the trend in the aging population indicates that in 1971, the population of the elderly was 72 573, and by the year 2001, it had increased to 190 264 (Botswana Central Statistics Office, 2001). However, the elderly population in Botswana as of the 2011 population census was 138,415, a decline of 27 percent from the 2001 population census (Botswana Central Statistics Office, 2014). This decline might be attributed to a number of factors, but the HIV/AIDS scourge is one of the major contributing factors. The death toll in Botswana due to HIV/AIDS was at its peak in the early years of the 21st century, and the elderly, particularly women as primary caregivers of their sick children and other relatives, were infected (Shaibu, 2013).

Recent statistics indicate that the population of the elderly is increasing as it was 189,522 in 2022, representing 8 percent of the total national population (Moore et al., 2024). The Human Development Report 2023/2024 shows that the life expectancy at birth in Botswana stands at 68.4 years for females and 63.3 years for males (United Nations Development Programme [UNDP], 2024). However, the quality of life of elderly persons in Botswana is low compared with the general population mainly because little attention has been given to their needs (Bainame & Shaibu, 2001; Gobotswang, 2018; Ministry of Local Government Botswana [MLGB], 2012; Moore et al., 2024; Onen et al., 2019). Despite government initiatives targeted at this population, particularly the Old-Age Pension Scheme (OAPS), the situation of elderly persons in rural areas appears to be worrisome (Mupedziswa & Ntseane, 2011; Onen et al., 2019).

In Botswana, the compulsory retirement age from public service is 60 years, but one can opt to retire at the age of 45 (Gobotswang, 2018; Ministry of Local Government Botswana, 2002). However, elderly persons in Botswana are not entitled to an old-age pension until they are 65 years old. Even though Botswana is commended as one of the few countries to have introduced non-contributory, fully publicly funded OAPS (The Regional Hunger and Vulnerability Programme, 2011), the money is not enough, especially for the majority of elderly persons who are in the low-income bracket. Studies in Botswana revealed that elderly persons felt the money should be increased to meet their needs and sustain their livelihoods (Gobotswang, 2018; Seleka et al., 2007). The Minister of Finance, when delivering the 2023 Budget Speech, announced an increment of the old-age pension allowance by BWP100.00 from BWP530.00 to BWP630 per month (Serame, 2023).

Despite all its achievements as an upper-middle-income country (United Nations Development Programme, 2018), there are challenges that Botswana still faces, particularly in rural areas where a majority of elderly persons reside. Rural areas are characterized by poverty, poor and inadequate housing structures, poor nutrition, water problems, low-income levels, and poor transport and communication facilities (International Poverty Centre and Botswana

Institute for Development Policy Analysis [IPC & BIDPA], 2005; Nhongo, 2004). Although some of the elderly persons residing in rural areas are self-reliant and well-off, the majority are struggling to sustain themselves, while others are extremely poor (Lucas, 2009; Mkandawire, 2016).

The assumption in Botswana, like in many African countries, is that the family system would care for their elderly relatives. However, the socioeconomic changes that have occurred in Botswana have changed traditional social support systems, leaving many elderly persons vulnerable, without clear sources of care and protection (Clausen et al., 2007; Lucas, 2009; Shaibu & Wallhagen, 2002) as the family unit has transformed from being collective and inclusive to become individualistic and exclusive (Shaibu & Wallhagen, 2002). The able-bodied people who are traditionally expected to care for the elderly persons are also migrating elsewhere in search of better opportunities. This has resulted in elderly persons living alone over an extended period, and this appears to be challenging given the demands that are brought about by old age. This study, therefore, sought to establish the lived experiences of elderly persons living alone in rural Botswana and the support mechanisms that were available to them. The following research questions guided the study:

1. How do elderly persons in the rural areas of Botswana explain their experiences of living alone over an extended period?
2. What circumstances resulted in elderly persons to be living alone?
3. What formal and informal support systems are available to elderly persons?
4. How accessible are the support systems to elderly persons?

The study provides insight into the status of elderly persons living alone and how they go about their lives on a daily basis. This study contributes to the knowledge of elderly persons in this kind of living arrangement. The findings presented in this paper could help other researchers by pointing out areas that require scholarly and applied research attention. In Botswana, the general welfare of elderly persons and their quality of life as a policy matter have not been given sufficient attention. This is evident as currently, there is no comprehensive policy that is focused on the situation of elderly persons. This paper reports findings that provide policymakers with informed insights on issues of concern to the elderly that require formulation of policies and other interventions. It also offers insights into the lived experiences of elderly persons in a typical rural area in Botswana. Development practitioners in the areas of social security and protection, through the findings of this study, will be able to gain insights into best practices in working with elderly persons.

Theoretically, this research study was conducted through the lens of the continuity theory of normal aging by Atchley (1989), which uses a life-course perspective to define and predict how one might respond to old age (Estes, 2001). The continuity theory of normal aging believes that the latter part of life is a continuation of the earlier part and, therefore, an integral component of the entire life cycle (Estes, 2001). It has been used to view elderly persons from a positive perspective, that is, as people age, they continue with their life by maintaining the same personalities, habits, and perspectives that they developed over a lifetime. Individuals will respond to aging in the same way they have responded to previous life events (Estes, 2001). Continuity theory originated from the observation that a large proportion of elderly persons show consistency in their activities, personalities, and relationships, despite their changing physical, social, and mental status.

Understanding Living Alone and Elderly persons

Living alone is a phenomenon experienced in many societies in recent times cutting across age and gender (Mutanda & Odimegwu, 2019). Koopman-Boyden and Moosa (2014) noted that at the societal level, living alone can be negatively perceived as being individualistic

and usually influenced by industrialization, mass urbanization, and the empowerment of women. Usually, young people or young adults live alone by choice, moving from their parental home to seek independence and explore their own pathways in life or even migrating in search of a better life (Koopman-Boyden & Moosa, 2014).

On the contrary, for most elderly persons residing alone is often not by choice, but by circumstances beyond their control. The reasons may vary from losing a spouse through death, after divorce, or a dependent family member moving out to adult children leaving parental homes to establish their own (Dokpesi, 2014; Osei-Waree & Wilson, 2016). However, in the African setting, adult children do not move out permanently; they might be living elsewhere, for example, in urban areas, but keep on visiting their parental home in rural areas. Living alone as elderly persons is more common in developed countries as many people live longer, and there is widespread diversity in familial and marital values (Koopman-Boyden & Moosa, 2014; Ku et al., 2021; Mutanda & Odimegwu, 2019).

In an African setting, in the pre-colonial and to a certain extent during the colonial period it was rare for an elderly person to live alone as the family system was well-functioning with a strong kinship, which valued extended family above individual goals. Intergenerational interdependencies were the basis of care and support at both family and community levels. However, the challenging economic and social forces in the post-independence era defined by rapid urbanization and globalization have influenced the family unit to transform from being collective to individualistic (Dhemba & Dhemba, 2015; Dokpesi, 2014; Ku et al., 2021). Ball (1983), cited in Taylor (1995), states that the traditional collectivism of African societies had yielded to the individualism of competition, examinations, and a success vs. failure mentality as socialized in Western-oriented schools. The able-bodied members of the family who are supposed to take care of their elderly parents have been migrating in search of a better life (Ku et al., 2021).

Opportunities and Challenges of Living Alone

Koopman-Boyden and Moosa (2014) note that developed countries like the United States of America, the United Kingdom, New Zealand, Australia, and others have witnessed substantial research in this area, which has greatly influenced policies geared towards elderly persons. In contrast, there are few studies on elderly persons living alone in African countries, especially in rural areas. For instance, Osei-Waree and Wilson (2016) conducted a study that explored the meaning of living alone to elderly persons in rural areas of Ghana, and Wandera et al. (2017) investigated the prevalence and factors associated with living alone among elderly persons in Uganda. Most studies in Africa have focused on elderly persons who are co-residing with other family members such as adult children or grandchildren (see Kendall & Anglewicz, 2018; Kyomuhendo et al., 2021; Shaibu, 2013, 2002; Zimmer & Dayton, 2005).

Despite limited literature available in the African context, it seems that living alone presents both opportunities and challenges to elderly persons. Living alone may be interpreted differently by individual elderly persons themselves. For some, it can be a way of achieving independence and freedom in making choices and controlling the use of time and other resources such as money, space, and others (Sundsli et al., 2013). For others, it gives them a feeling of significance, as well as an identity, as they are able to manage their lives on their own and engage in activities of their choice (Koopman-Boyden & Moosa, 2014; Osei-Waree & Wilson, 2016).

While living alone is often viewed as contributing to social isolation and loneliness (Nzabona & Ntozi, 2015), it does not necessarily mean the person is socially alone or lonely. For example, in Botswana, most elderly persons residing alone (physically) have neighbors who are relatives with whom they keep in contact on a daily basis, and they hardly get bored. The pattern of rural settlements in Botswana is such that members of the extended family live

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around or close to each other (Shaibu & Walhagen, 2002). Those have adult children or grandchildren residing elsewhere still have social contact through visitation. Advances in modern technology have also made communication easier through the use of mobile phones.

A study by Shaibu and Wallhagen (2002) on family caregiving of the elderly in Botswana, focusing on boundaries of cultural acceptance options and resources, further revealed that most elderly persons in Botswana identify themselves with their locality. This means that even if they were having challenges in caring for themselves, they would not give up their dwelling place and move in with a caregiver, their adult children, or someone else. They prefer to get assistance while living in their own place, which sometimes is not feasible. However, aging in “their place” enables them to have strategies to cope with the challenges of daily living, meet the demands of aging, and continue living alone.

Despite all the opportunities that come with living alone, elderly persons living alone face challenges, especially in developing countries where there are few or no institutionalized support systems in place. Turner (2001), cited by Dhemba and Dhemba (2015), observed that in Lesotho, elderly persons who live alone or without a younger adult were most vulnerable to poverty due to lack of or no income to meet their needs. Living alone may also contribute to loneliness, and it has been observed that loneliness is a risky factor to the health and well-being of an elderly person, especially with deteriorating health or health problems, which in most cases reduces functionality (Nzabona & Ntozi, 2015). Consequently, this can make it hard for an elderly person to perform daily activities at home (Nzabona & Ntozi, 2015). The study conducted in Ghana by Osei-Waree and Wilson (2016) revealed that elderly persons who live alone fear for their personal safety.

Methodology

Research Design and Context

The study upon which this paper is based adopted a qualitative case study approach designed to provide an understanding of the situation of a specific section of the elderly population in Botswana, namely those residing alone in a homestead over an extended period of 6 months and above. The case study approach enabled the researcher to gain an understanding that would result in learning about real-world behavior in this context and its meaning. Secondly, by studying the lived experiences of elderly persons within their real-world context (Leedy & Ormrod, 2014; Maree, 2016), the case study research design enabled the researcher to analyze each case in detail to explore and gain an in-depth understanding of this phenomenon. Elderly persons living alone were taken as a case to study as they are a unique category of people now existing within rural communities. They understood their circumstances better as they were the ones directly experiencing it.

The study was conducted in the two neighboring rural villages of Nkange and Senete in the Tutume Sub-District of Botswana. This Sub-district does not have sufficient economic activities and employment opportunities, resulting in able-bodied persons migrating to different places in search of better life opportunities (Statistics Botswana, 2015a). The Tutume Sub-District has a population of 147 377 as per the results of the 2011 population and housing census, an increase of 19.3 percent from the 2001 census (Statistics Botswana, 2015a). The sub-district is headquartered in Tutume village, contributing 12.4 percent of the total sub-district population. The proportion of the elderly population in the sub-district is higher than the national average of 5.5 percent (Statistics Botswana, 2015b). Nkange village has a total population of 3 665 while Senete village has a total population of 2 845 (Statistics Botswana, 2015a). The number of elderly persons was 229 in Senete village and 352 in Nkange village (Botswana Central Statistics Office, 2014).

Sample and Sampling Procedures

The study focused on elderly persons living alone as the main participants since the researcher was interested in their lived experiences. Although living alone in a homestead, these elderly persons do not live in isolation but are a part of communities. In order to have a thorough understanding of the situation of these elderly persons, the study also got the views and observations of their middle-aged neighbors aged 40-59 years, members of village development committees, and Social and Community Development (S&CD) officers who are tasked by the Government to provide them with social services. Six elderly persons in each village who were living alone were selected as the main participants (n=12) of the study. The criteria used for the selection of elderly persons included individuals who were (a) 60 years of age and above, (b) living alone, and (c) willing to voluntarily share their lived experiences.

Although they are part of a community, elderly persons living alone are a ‘hidden population’, which is not easily identifiable by an outsider. Hence, this study used snowball sampling to identify potential elderly persons to include in the sample. By citing Faugier and Sargeant (1997), Woodley and Lockard (2016) note that traditionally, snowball sampling has been employed as a “solution to overcome problems of data sampling in the study of hidden populations” (p. 322). Bryman (2012) indicates that “With this approach to sampling, the researcher makes initial contact with a small group of people who are relevant to the research topic and then uses them to establish contacts with others” (p. 424).

In this study, the researcher identified potential participants by making initial contacts with ordinary people in the village who were able to assist in identifying potential participants. Community members were requested to refer the researcher to homesteads of elderly persons who met the selection criteria. The elderly persons interviewed were requested to recommend other elderly persons they knew. This process continued until the sample of 12 elderly persons was reached. All the 12 elderly persons voluntarily agreed to participate in the study.

Data Collection

The study involved elderly persons and other participants who were considered significant to fully understand the situation of their experiences of living alone. The study, therefore, triangulated different methods of data collection, which consisted of focus group discussions (FDGs), individual interviews, observations, and documentary research. This section briefly describes two methods that were used to collect data from elderly persons.

Interviews with Elderly persons

Interviews were used to collect data from elderly persons as the main target population. Interview is defined as a qualitative research technique that the researcher conducts to elicit information in order to achieve a holistic understanding of the participant’s point of view or situation (Bryman, 2012; Leedy & Ormrod, 2014; Silverman, 2001). It was chosen as it allowed the researcher to get the elderly persons perspectives as they lived alone.

An interview guide with open-ended questions organized according to the objectives of the study was used during the interview with each elderly person. The interview guide was translated into the two local languages of Setswana and Kalanga for easy communication with the participants. An interview guide was used for three reasons: (a) to allow the researcher to make sure that all relevant questions were covered, (b) to enable the researcher to explore and probe more so as to obtain data deemed useful for the study, and (c) to allow the researcher to interact with the participant on a one-to-one basis while gathering data. Interviews were conducted with 12 elderly persons (six in each village). Of the 12 participants, four (4) were male while eight (8) were female, and their ages ranged from 65 years to 98 years.

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The initial intention of the study was to get equal numbers of men and women. However, it emerged during fieldwork that there were more elderly women living alone than elderly men. As shown by the life expectancy figures above, women in Botswana generally outlive their male counterparts, and more men than women who are widowed or divorced tend to re-marry (IPC & BIDPA, 2005; Marupula, 2006), and as such, elderly men are less likely to live alone for an extended period.

The researcher introduced herself to each participant and explained the purpose of the study. An arrangement was made with each individual for the interview, agreeing on a date and time. All the interviews were conducted by the researcher face-to-face, and they took place at the participants' homesteads using Kalanga. The interviews lasted between thirty minutes and one hour, and they were captured using a digital audio recorder with the participants' consent. Audio recording captured everything that was said, and it saved time as it enabled the uninterrupted flow of the interviews.

Observation Field Notes

During interviews with the participants, the researcher was also actively observing. Observation involves recording the behavioral patterns of people, objects, and events in a systematic manner (Bryman, 2012). The researcher manually recorded what she observed in the form of field notes immediately after each interview with the participants. The purpose of using observation field notes was to capture significant data that was not possible to be captured through audio recordings. Aspects that were observed and recorded included the physical status of the participants, the general condition of the environment within and outside the elderly person's homestead, the number and quality of housing units, and other structures such as sanitary and waste disposal facilities. The researcher also observed how each elderly person interacted with people who visited them during the interview.

Data Analysis

This study followed a qualitative data analysis procedure that involves seven steps described by Faherty (2010). This manually-based process allows the researcher to interact with the data and be hands-on in the actual analysis. Faherty (2010) stated that "although these steps are presented in deliberate, sequential order, in the reality of social science research and evaluation projects, such a linear and unyielding progression is rarely, if ever, used" (p. 57). The analysis of data, therefore, followed five of the seven steps suggested by Faherty (2010). The first step involved transmitting raw data into an accessible format whereby the audio-recorded data from interviews and focus group discussions were transcribed verbatim into a Word document. The transcripts were then translated from the local language of Kalanga into English. Some of the words and sentences were left in Kalanga, where it was deemed necessary to do so.

The second step involved coding transcribed data which were printed out as hard copies. The researcher read through all the transcripts labeling with a pencil the interesting lines and paragraphs with keywords (codes) that the data appeared to be representing. The third step of developing themes involved a process of sorting the different codes and organizing them according to their similarities and differences. The codes were grouped under meaningful headings as per the researcher's understanding by comparing and contrasting them. This process led to the identification of themes. The fourth step of report writing involved the presentation and discussion of results, some of which are disseminated (*step 5*) through this paper.

Ethical Considerations

Following the approval of the research proposal and data collection instruments, a letter of ethical clearance was issued by the University of Eswatini to conduct the study. As the research was conducted in Botswana, the researcher followed the procedure in place by submitting an application for a research permit to the Ministry of Local Government prior to the commencement of data collection, and it was granted (Ref Number CLG14/14/3/1 II (108)). The researcher sought informed consent from all research participants by explaining to them the purpose of the study and advising them that participating in the study is purely voluntary. All the participants in the study, including all the 12 elderly persons were mentally fit, and each personally consented voluntarily. Informed verbal consent was received from all elderly persons and written informed consent was received from all the other participants.

Results

A total of eight major themes emerged from the analysis of the data collected through the interviews with the elderly persons to explain their lived experiences of living alone over an extended period, five of which are discussed below. These five themes are discussed in this paper as they emerged to capture some common lived experiences among elderly persons, and they were also confirmed by the analysis of the data collected from other participants. The other three themes not discussed in this paper are (i) subjective meanings of being old, (ii) proactive care of self in later life, and (iii) inter-generational conflicts and struggles. These three themes are too specific, and they capture the uniqueness of the lived experiences and situations of individual elderly persons, and thus, they shall be discussed in a separate paper.

Table **1**
Themes and Sub-Themes on Lived Experiences of Elderly persons Living Alone

Themes	Sub-themes
Level of autonomy	Independence Independently setting personal goals Being in charge of own situations
Multiple losses in life	Loss of immediate relatives Paradoxes of gains and losses Reduced functionality Loss of source of livelihood
Attachment and belonging to a place	Sense of attachment and belonging Aging in one's own place Comfort and sense of security Ownership of property and sense of worth
Problems of elderly persons with basic necessities of life	Poor living conditions Dilapidated and uninhabitable shelter Insufficient and high cost of food Challenges of fetching water
Dissatisfaction with living alone	Fear of undignified death Constant worrying and loneliness Safety and security being compromised Assistance in cases of need Living alone as a constant struggle

Theme 1: Level of Autonomy

The study found that living alone over an extended period gave elderly persons a *level of autonomy* as individuals in their own right. All the 12 participants revealed that living alone provided them with an opportunity to be *independent*, which entailed the ability to make decisions independently, as captured by this extract from an elderly woman aged 98, and by another elderly woman aged 88: “I make sure that I use wisely the money I get from the old-age pension and namula leuba [drought relief programme], to meet my needs” (EP#6, 88 years).

I receive pension on monthly basis and every time I collect it I budget on how to use it. I pay for different services that I have used. I pay for utility bills like water and buy electricity and I also pay the person who delivers fire-wood for me, and buy food. I save money for travelling to visit relatives and for emergencies. (EP#4, 98 years)

The above results demonstrated that some elderly persons in this study had high levels of financial management. They took independent decisions on how to spend the money they received from the government without anyone telling them what to do with it. The results also revealed that these elderly persons were *independently setting personal goals*. From the different experiences shared by the elderly persons, it transpired that as they lived alone they were in full control of their lives. They were able to schedule how they used their time on a day-to-day basis. Knowing their own capabilities enabled them to decide which activities to do, how to plan for their meals, who to visit, and when. An elderly woman, aged 75, as well as an elderly man aged 81, stated:

For me to know that I am now unable to care for myself is when I will be unable to cook with a small pan. That will be a sign that I need help. Other than that I'm still fine and capable of doing things for myself. If I am no longer capable, I will let my children know but if they are to help me they will only do so in my own home. (EP#7, 75 years)

I wanted to keep goats because I felt I am still active. Then I decided to go and collect registration forms at the government offices in Tutume so that I can be assisted by the government through its program. I'm still waiting for their response. What I know is that I am able to look after the goats, they are easy to rear. (EP#1, 81 years)

Two elderly persons also shared their experiences on how they independently communicated with or let their neighbors and relatives know about their whereabouts on a day-to-day basis. An elderly man, aged 81, and an elderly woman aged 65, shared:

I normally wake up early before sunrise and move around in my yard, that way my sister can see from her homestead that I am okay. I never allow myself to sleep until sunrise, I wake up early every day and that is how I start my day. (EP#3 81 years)

Every day when I wake up I take my white garden chair and put it in front of my house. That way my neighbours can see that I am alright. If they don't see the chair outside, they will suspect that something might be wrong with the old woman, they will then come to find out whether I am alright. (EP#9, 65 years)

These results revealed that the experience of living alone made elderly persons develop independent and strategic ways to manage their daily lives. They are actively in charge of the situations they are in, and this gives positive meaning to their lives, in spite of old age and being alone at home. The participants were in charge of their situations despite the challenges they faced.

Theme 2: Multiple Losses in Life

All of the 12 elderly persons in the study had lost some of their immediate relatives: children, spouses or siblings, and parents. They indicated that *the loss of immediate relatives* had negatively impacted on their life journeys, leading to various turning points. The losses they experienced had changed the course of their lives. An elderly man, aged 81 years, lamented: “After my first wife died, life was hard as I had to be both a father and a mother to our children; by that time, they were still young. I became a single parent” (EP#3, 81 years). Similar sentiments were shared by an elderly woman aged 72:

My daughter passed away 2 years ago, and after that I was struggling to cope. She was staying with me and assisted me with many things in my home. She was doing all the household chores such as cooking, cleaning and doing the laundry for me. Life became very difficult after she was gone. (EP#7, 72 years)

Although some elderly persons expressed some of their experiences as losses, they also considered them as blessings, hence the sub-theme of the paradoxes of gains and losses. Most elderly persons stated that they were excited when their children left home for the city to look for job opportunities. Their children leaving home were an indication that their efforts of raising them had paid off, and they were now left with no responsibilities; little did they know that they were to experience the empty nest syndrome as they aged. Interestingly, some of them benefited from the migration of their children as they received remittances, and others had built better houses. For instance, one elderly woman proudly shared stated that: “I raised my daughter well. She is now married and working in the city. She is the one who built this nice house you see. She connected the water, electricity and bought a cooking stove for me” (EP#9, 65 years). Similar sentiments were shared by an elderly man aged 81 who stated: “My daughter, who is married not far from here, is the one who built this one-roomed house and that pit latrine for me” (EP#1, 81 years),

These sentiments show that some elderly persons benefited from their children’s changing situation through migration and marriage. Their children were able to assist them improve their living conditions. These elderly persons stated that they were thrilled when their children got married and started their own families. To them, this was a validation that they had raised their children properly. Contrary to this, some of the elderly persons expressed their frustrations because their married children had abandoned them in old age as they now take care of their in-laws and their own children. One elderly woman had this to say: “My daughter was taking care of me before she was married. After she got married, she is now focusing on taking care of her in-laws and has forgotten about me” (EP#2, 75 years). Similarly, an elderly man, aged 81, lamented: “My daughters are married and have their own families to take care of, including their in-laws, and they are unable to care for me. They have a lot of commitments” (EP#3, 81 years).

Some of the elderly persons stated that their married children are assisting them in many ways but they did not rely on them as they had other responsibilities at their marital homes. This was a loss of support system for the elderly persons as their children, who were expected to reciprocate by taking care of them in old age, had transitioned to a married life, which has its own responsibilities and challenges. Two widowed elderly persons shared the paradox of gains and losses they have experienced as a consequence of the marriage of their children:

My daughter is supportive. She assists me in many ways. She is the one who bought me a mobile phone and visits me. However, as she is married she has other responsibilities which make it hard for her to take care of me. (EP#5, 70 years)

When my son got married I was excited that I am going to have a daughter-in-law because all my children are men, little did I know that

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I was fooling myself. After some misunderstanding with my daughter-in-law, she made it clear to me that she is not here for me but for my son. (EP#6, 88 years)

Another loss that the elderly persons were experiencing owing to aging was reduced functionality and deteriorating health. The loss of functionality caused different emotions, such as sadness, anger, and fear, as it signified the loss of independence. Two widowed elderly women expressed their fear and sadness of loss of functionality and independence as follows: “I fear that one of these days I won’t be able to do things for myself. I do not want that moment to come” (EP # 4, 98 years).

It makes me sad because I am unable to do a lot of things for myself nowadays. I can’t see properly, which makes it hard for me to do other household chores. This makes me sad as I have to rely on my neighbors for help. (EP #11, 85 years)

The elderly persons, however, revealed a certain level of resilience not to be victims of deteriorating health due to aging. They reported living positively as they continued with their lifestyles and performed their household chores to remain active in spite of reduced functionality. For instance, a divorced and widowed elderly man aged 81 years and a widowed woman aged 98 years, respectively, stated that:

I am no longer able to do things like before, but I continue to do household chores. You see this yard as clean as it is I am the one who is cleaning it. I take my time clearing the grass, when I am tired I take a break and then continue until I finish. (EP#3, 81 years)

Even though I am old I still do things for myself. I cook and I do my own laundry. I pay for those activities that I am unable to do like fetching firewood if it is far. I can move around my yard and pick few sticks that I can carry. (EP#4, 98 years)

The above sentiments by an elderly woman who was about to be 100 years of age demonstrated that the elderly persons in this study were ageing gracefully. They were able to cope with the demands brought about by ageing. They acknowledged their reduced capacities, but did not despair. Their responses revealed that they experienced difficulties in performing essential activities of daily living which had a major impact on their livelihood. The multiple losses that elderly persons had suffered had led to *loss of source of livelihood*. However, they had developed some adaptive strategies. An elderly man, aged 78, said: “After I retired from my employment, I came back home. I started practising subsistence farming. As you can see, I had stroke and I cannot continue with farming. I am only relying on pension for survival” (EP#8, 78 years). An elderly woman, aged 65, said:

I used to grow different crops in my field. I have problems with my feet and I can’t walk a long distance to my field and I stopped using it. I now have a backyard garden. I can’t just sit down without doing something. (EP#9, 65 years old)

Theme 3: Attachment and Belonging to a Place

Despite multiple losses elderly persons had experienced in their lives, they still had a sense of attachment and belonging to the place they had called home for their entire lives. This attachment to a place emerged when elderly persons were asked about future plans they had set if it happened that they were no longer able to care for themselves altogether. An elderly woman, aged 85, had this to share: “This is the only place I have stayed for my entire life. There is no other place I can call home apart from here. I do not have any plans about moving away from this place” (EP#11, 85).

All of the 12 participants revealed that they strongly felt that their homes were the only places in which to continue growing old and eventually die. They preferred to age in their own place, and if it happened that they were unable to function and make independent decisions, they wished to be assisted in their homes rather than be moved to another place. Their homes gave their lives meaning and purpose. They expressed strong attachment to their homes as they had built them from scratch with their own hands. An elderly man and an elderly woman respectively shared their determination to age in their own homes: “My children wished I could move to their places because I have poor vision. I refused to move, telling them I am fine in my own home” (EP#2, 75 years).

If it happens that I can no longer care for myself, my children will know what to do. If they decide to take me away I won't agree. I want to continue living in my own homestead. I built this home a long time ago and my heart tells me not to move but to stay in my home forever and die here. (EP#3, aged 81 years)

This shows that elderly persons' homes are valuable property they now own in life. Some were born and raised in the same places and all of them had spent all of their adult lives in the same community. They had a strong bond with their environment because of the social network of family and friends, as well as the great memories they had created and experienced in the same places for their entire lives. An elderly man, aged 81 years, had this to share: “I was born and raised in this village. This is the only place I have called home. All of my friends from childhood live here and some have died and are buried here....” (EP#1, 81 years). Similarly, an elderly woman had this to say:

My parents were from this village and I also grew up here. My late husband was also born in this village. We got married and built this homestead together. I have never lived in any other place apart from this one. (EP#4, 98 years)

The elderly persons, apart from their wishes to age in their places, also revealed that remaining at home enabled them to adopt practical strategies to cope with and meet the demands of ageing and continue to live alone. They generally emphasized that their homes gave them the comfort and sense of security as captured in these extracts from two elderly women: “I hardly visit my daughter where she is staying. I hate staying in a school cottage house and I do not feel comfortable there” (EP#7, 72 years).

Moving to someone's place is so uncomfortable, you feel lost. Whenever I visit my children in the city I do not feel okay because it is not my home. I sometimes cut short my visits in order to come back to my home where I feel comfortable. You know, when you don't own anything in this community you are nothing. (EP#4, 98 years)

The elderly persons felt comfortable and at ease in their homes. They are at peace living alone in their homes rather than being at their children's homes where they feel constrained. All of the 12 elderly persons emphasized that to *own property* in their rural communities was an unquestionable demonstration that one had lived a life of purpose and fulfilment as captured in these sentiments shared by an elderly woman and an elderly man, respectively: “In life when you don't own anything, you are treated as nothing, but when you own something such as a home you are respected. This makes one to feel worth” (EP#1, 81 years); “Owning a plot in this community means you have worked hard in your life and this makes me proud of myself. If you are old and have no home, everyone treats you like you are nothing and views you as lazy” (EP#8, 78 years).

Apart from attachment to place and social status of a fulfilled life, almost all the elderly persons wanted to remain at home in order to protect their property, which they would hand over to their descendants as an inheritance. An elderly woman, aged 85, and an elderly man, aged 78, for instance, stated that:

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When I became unable to continue farming, I advised my children to use the field as it lay fallow. The neighbours will soon extend their fields into my land. The children are not listening to my advice. I am looking into the future that they will need this field and by that time people would have long taken all the land. (EP#11, 85 years)

I had long talked to my children to use the field as I am no longer able to plough. They are not responding and it makes me sad. I worry a lot about my field that is why I do not want to leave this village because people would steal it. (EP#3, 81 years)

The above experiences shared by these elderly persons were a common concern for the elderly persons in this study, especially those who owned a piece of arable land. They feared that when they were gone or deceased, their children and grandchildren would be dispossessed of this valuable and scarce asset, which they were supposed to inherit from them. They were trying to encourage their children to be familiar with the properties they owned, especially farming fields that remained unutilized, to avoid potential dispossessions and conflicts. These elderly persons were advising their descendants to utilize the lands for their own benefit.

Theme 4: Problems with Basic Necessities of Life

This theme of problems with basic necessities of life appeared to simultaneously confirm and contradict the sense of attachment and belonging that elderly persons had expressed. On the one hand, it appeared that elderly persons would continue to live alone in their homes regardless of their circumstances because that is where their hearts and souls belonged. On the other hand, insisting on remaining in their homes appeared to bring problems in meeting the basic necessities of life for these elderly persons.

Most elderly persons revealed that their living conditions were poor and not conducive to any person of their age because of their vulnerabilities. Some of the housing structures were visibly dilapidated and were not suitable for occupation by a person of their age during harsh weather conditions, such as rainy days or during winter and summer seasons. When asked about their main challenge, elderly persons indicated that their housing structures, especially the bedrooms, were dilapidated and not conducive to sleeping in. The researcher also noted the condition of the housing structures in some of the homesteads of elderly persons. She observed the bad condition of these structures that sheltered elderly persons. Most of the housing structures were mud huts and thatched with grass. The grass was now worn out and raged by wind (Field notes, recorded on 13/01/2018). One elderly woman stated that the situation of her life becomes unbearable during the rainy season as all her mud huts are leaking and the water damages her belongings, including food: “When it is raining I do not sleep. It is like I am under a tree. My blankets become wet and in my kitchen it is worse. You see this big three-legged cast iron pot, I borrowed it from my neighbours to store my food when it is raining so that it does not get spoiled” (EP#12, 83 years).

An elderly man aged 71 started by asking the researcher whether she had noticed the condition of his house upon entering his homestead. The researcher observed that there was a colorful cloth that he used as a door which could be seen from afar. He then lamented that:

Imagine when it is raining with that cloth as a door, it's a nightmare. I hired someone to build this one-roomed house for me and he didn't do his measurement properly and when he was roofing the material was not enough. I could not afford to buy corrugated iron sheets for roofing and it was left like that. When it is raining I cannot sleep and my food is spoiled. (EP#10, 71 years)

This elderly man went to the extent of showing the researcher around his home to confirm what he was talking about. The researcher also observed that a two-roomed house was

being constructed in his yard. He had only a dilapidated one-roomed house which he used both as a bedroom and a kitchen. He does not have a toilet and water connection in his yard (field notes, recorded on 15/01/2018). This elderly man explained that the government was building a house for him as he had a disability and was unable to do work for himself. He mentioned that when the house is finished, it would help him to live a dignified life. However, he stated that there are problems unknown to him that delay the completion of the house. It is equally important to highlight that four of the elderly persons who participated in this study did not have problems with the basic necessities of life. For instance, in responding to the question of who built the house in her home, an elderly woman, aged 65, responded, and another elderly woman, aged 98, commented:

My daughter is the one who built this big house for me and connected water and electricity. This had made life easier for me as I can cook indoors with an electric stove and sit and watch television. She also buys food for me every month. (EP#9, 65 years)

My children are the ones who built this modern house for me. They also connected electricity and water. This has helped me a lot, as I no longer fetch water from community tap. I just go to my tap with a cup and get water to drink. (EP#4, 98 years)

Although the majority of the elderly persons experience housing challenges, some elderly persons are relatively well-off living in more secure modern housing structures built by their migrant children connected with electricity and water as well as with in-door flush toilets. Their children also provide them with sufficient food and medication. However, most elderly persons in this study revealed that they frequently experience insufficient food as they rely on the pension allowance from the government. For example, two elderly women had this to say: “I buy food on credit and pay at month end after I received pension. Food is very expensive in our local shops and this makes it hard to buy healthy food” (EP#6, 88 years).

I do not have enough food because I no longer plough. I use my monthly pension to buy food, but the shops in this village are very expensive. I sometimes travel to buy food at Choppies store in Tutume, but the problem is long queues there. Sometimes my neighbors who are good Samaritans give me food if they have harvested enough. Sometimes they don't give me and I struggle to get enough food. (EP#12, 83 years)

Nevertheless, not all poor elderly persons in this study relied solely on pensions to buy food. Three of the elderly persons, for example, were enrolled in the destitute program and they received a basket of food every month. This social program by the government, which is coordinated by the S&CD, is cushioning their poverty, and they were highly appreciative of the reliable food and toiletry they are receiving on a monthly basis, as exemplified below: “I am enrolled in the destitute program. I get grocery which includes food, toiletries and an allowance which enables me to buy other things I need to keep me going” (EP#10, 71 years).

Since enrolling in the destitute program my life is now better. I get food and it is enough to last for a month as I am alone. The food that the government gives us is healthy especially for us the elderly persons. The pension is a top up and I use it for other things not food. (EP#2, 75 years old woman)

Apart from housing and food, most of the elderly persons also reported that they were encountering serious challenges in accessing water. An elderly woman, aged 83, and an elderly man, aged 71, shared this: “I struggle to fetch water from the public tap, which is far from my house. Due to my reduced mobility, I am unable to walk long distances” (EP#12, 83 years).

I do not have water connected in my yard and because of my poor vision I cannot go and fetch water at the communal tap. I rely on my sister

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who normally comes to assist me with household chores. She fetches water for me. (EP#10, 71 years)

All these challenges highlight that the elderly persons living alone experienced compromised access to basic necessities of life such as shelter, food and water.

Theme 5: Dissatisfaction with Living Alone

Although the elderly persons in this study expressed a sense of attachment and belonging, they also expressed dissatisfaction with living alone in their homes. As indicated in theme 1, living alone was found to be giving elderly persons a high level of autonomy to make decisions about their own lives. However, no elderly person in this study expressed any desire to live alone, as they argued that this put them in compromised positions in many ways. When asked how they felt about living alone, all the 12 elderly persons stated that there was nothing good about it because there were many reported incidents in the country whereby a person was found dead alone in the house. They did not want to die that way. They strongly disapproved of living alone, especially at an old age.

It emerged from the study that elderly persons were not necessarily afraid of dying, but rather they did not want to die in an undignified manner, whereby their corpses would be found after some days in a state of decomposition. They also stated that people who die alone were unfortunate in life because if there was someone around, such deaths could be prevented. For example, when a stroke victim is given immediate attention, his or her life could be saved. The elderly persons generally expressed a wish to die with dignity, having a caring person by their side till their last breath as this would make them rest peacefully. Responding to a question on how she felt about residing alone, an elderly woman, aged 88, lamented that:

It is not a good thing to live alone as you can see I am alone and when I go to bed I am still on my own... If something happened to me, I will die alone with no one to see me take my last breath...If I die, by the time [my son] comes to visit me I would have rotten in my house. (EP#6, 88 years)

The elderly persons expressed that many challenges they faced on a daily basis as they lived alone made them constantly worry and feel lonely. An elderly woman, aged 98, stated:

It is not good to live alone because you have no one to talk. It is better now that I am talking to you, when you leave I will have no one to talk to until I go to bed. It makes me to feel lonely. I worry about who will assist, especially at night. (EP#4, 98 years)

All elderly persons expressed concern that sometimes they did not have anyone to assist them in times of urgent need, such as in cases of emergencies like sickness and robbery. They emphasized the need for having company or someone for *security and safety* reasons. In expressing her dissatisfaction with living alone, an elderly woman, aged 88 years, revealed:

My other concern is thieves who come to my house and break the lock. It happened when I went to the post office to collect my old-age pension. On my return I found my house lock vandalized. I always carry the keys with me but they broke the door lock twice [...]. The second time they broke-in they stole my money. (EP#6, 88 years)

This elderly woman revealed a lack of security and exposure to danger and harm elderly persons living alone are faced with. She suspected someone who knew her was observing and monitoring her movements and broke into her house when she had gone out. She was worried that the person would one day attack and kill her in her own house, particularly at night, as there would be no one to assist her. Theft is negatively impacting on the elderly persons' lives in many ways. For instance, an elderly man, aged 81, lamented:

I had a lot of chickens around here and they all disappeared, only few are left. The chickens were helping me a lot. I would sell some to make money or slaughter one to eat. They also kept me company because I would call them when giving them food. (EP#3, 81 years)

This elderly man revealed how the people who stole his chickens had made him poor. The chickens were his source of food as he would slaughter one and pick eggs anytime he wanted. The chickens were also his marketable assets, which helped him get money to improve his living conditions by buying food, clothes, medication, and many other things he needed. He stated that his chickens were his friends as he fed, called and yelled at them, just like taking care of young children. In essence, they relieved him of the stress and depression of ageing and experiences of living alone. The researcher could see from his grief-stricken facial expression that the disappearance of his chicken had brought more stress and anxiety to him. The elderly persons were concerned about their safety and lack of help in case of emergency.

Discussion

The findings of this study revealed that elderly persons living alone in rural areas of Botswana have diverse experiences ranging from those that accord them a certain level of independence to those that negatively impact their lives and make them vulnerable. The diversity of lived experiences of elderly persons captured by the themes could be categorized into those that they expressed positively, namely, enjoying autonomy living alone and being attached and belonging to a place and those that they expressed negatively, namely, multiple losses in their lives; problems with necessities of life and dissatisfaction with living alone.

It transpired that as they reside alone in their homes, they are in full control of their lives. Living alone provided elderly persons with opportunities to be independent and make decisions freely, as well as manage their finances. They made independent decisions on how to spend their old-age pension money without anyone telling them what to do with it. This finding of independence emerged in previous studies. For instance, the findings from Eshbaugh (2008) indicated that elderly persons living alone enjoyed the aspects of living alone such as being independent or being one's own boss and keeping their own schedule. Similarly, Koopman-Boyden and Moosa (2014) found that sole living gave the elderly persons a feeling of significance, as well as an identity, as they were able to manage their time and engage in activities of their choice.

Linked to the level of autonomy the elderly persons enjoyed living alone is their emphasis on remaining in their rural homes until they eventually die. It emerged that the elderly persons were attached to their rural homes for socially constructed reasons. These reasons include the strong bond they had with their environment, the strong social networks of family and friends they have created since their childhood, and the sense of self-worth and social prestige attached to owning an immovable property such as a homestead and a plowing field.

These findings are in agreement with a study by Shaibu and Wallhagen (2002) on family caregiving of the elderly in Botswana, which discovered that the elderly persons seemed to cherish their sense of place and independence. These authors reported that elderly persons are reluctant to leave their homes and move in with their adult children for easy caregiving. On the contrary, elderly persons were willing to accept family caregiving but preferred that it should be given in such a way that they remain at home (Shaibu & Wallhagen, 2002).

Despite the positivity of autonomy and attachment to a place, the study also revealed that elderly persons had endured multiple losses that negatively impacted their lives on a daily basis. These multiple losses included, among others, loss of immediate family members such as spouse, children and siblings, loss of livelihoods and sources of income, incapacitation and loss of mobility and eyesight, as well as constant deterioration of their living conditions. The main challenge was deteriorating health, consequently leading to reduced functionality and

increased exposure to everyday risks and vulnerabilities. This made their lives hard as they were unable to perform daily home chores such as cooking, cleaning and doing laundry.

Other challenges elderly persons experienced were a lack of urgent assistance in the event of an emergency, such as illness and fracture from a fall; increased levels of petty criminality, which compromised their safety and security; and they were constant worrying and lonely. These findings supported the study by Williams (2003) on ageing, poverty, livelihoods and HIV/AIDS in Uganda. Williams (2003) reported that elderly persons were affected by being socially isolated, physical weakness, vulnerability, and powerlessness; they were the most neglected group and struggled to grow food and make a living, or they were in poverty.

Although strongly attached to their homes, the findings of this study revealed that the challenges elderly persons faced made them dissatisfied with living alone. None of the twelve elderly persons in this study expressed any desire to live alone, as this put them in compromised positions in many ways. Contrary to this complete rejection of living alone by the elderly persons in rural Botswana, a study by Eshbaugh (2008) on elderly women living alone in Iowa in the United States of America revealed variability of perceptions. Eshbaugh (2008) reported that some elderly women enjoyed living alone, others perceived living alone negatively, while perceptions of other elderly women were neither positive nor negative. The difference between the experiences of elderly persons in rural Botswana and in the USA might be due to the differences in the availability and accessibility of social services.

Elderly persons living alone experienced problems in accessing basic necessities of life such as shelter, food and water and this affected the quality of their ageing lives. The process of ageing and the experience of living alone of the elderly persons led to the loss of sources of livelihood, which made it hard for the elderly persons to provide sufficient and healthy food for themselves (Osei-Waree & Wilson, 2016; Williams, 2003). However, this study revealed that living alone with all the twelve elderly persons was not a mere choice, but it was a reality of life in which they found themselves.

Death of immediate family members such as spouses, children, siblings and other extended family members emerged as the main reason that led the elderly persons to live alone. They were also left home alone as their children transitioned to adulthood through marriage and or migration. The loss of immediate family members impacted negatively on the lives of elderly persons as they had to continuously adjust to changing life events. There is no doubt that a strong sense of attachment to a place is also one of the reasons elderly persons live alone. Although this sense of attachment and belonging defined elderly persons's identity and gave them autonomy over their lives, it was also a major hindrance for them to receive the care and support they needed, especially from their children who worked and lived in towns.

The elderly persons in this study appreciate the old-age pension they receive from the Government of Botswana. However, they also revealed that it is insufficient to meet their needs. This matter also emerged from other participants in this study, namely middle-aged persons, members of village-level committees and Social and Community Development Officers. Although appreciating the recent increment of the old age-pension by the Government of Botswana, the findings of this study reveal that the assistance the elderly persons require exceeds any amount of money they could receive. The elderly persons need a comprehensive set of interventions that will enable them to enjoy and live a purposeful and active life while ageing in their homes.

Implications of the Findings to Existing Literature

At a global level, the literature revealed that population ageing must be celebrated because it signifies important achievements of global declines in infant and maternal mortality, reductions in fertility, decreases in infectious and parasitic diseases, as well as improvements in nutrition and education (UN, 2015; WHO, 2023). The findings of this study have significant

implications for these global achievements in that they highlight the situation of elderly persons living alone in the rural context of a typical developing country. The literature highlighted that the elderly persons were a neglected population in society across the world (Dermont & Harris, 2020; Dhemba & Dhemba, 2015; UN, 2002; UNECE, 2017; UNFPA & HelpAge International, 2012; Villegas, 2014; WHO, 2023). This study also confirmed this situation, implying that practical action needs to be taken to ensure that their needs are met.

The literature further highlighted that elderly persons in developing countries were in a precarious situation because of the disintegration of traditional extended family systems and the ineffectiveness or lack of support from their governments (Dokpesi, 2014; Ku et al., 2021; Maundeni & Mupedziswa, 2017; Osei-Waree & Wilson, 2016). Different scholars have observed that recently in Africa, there has been decay in the extended family systems, which for many years played an important role in providing support and care for elderly persons elderly persons (Bainame & Shaibu, 2001; Dokpesi, 2014; Lucas, 2009; Moore et al., 2024). Studies have revealed that the lack of policy for elderly persons in most of the developing countries makes it hard for those countries to attend to the welfare of elderly persons. The findings of this study support the conclusion by Villegas (2014) that “the personal struggles of the elderly can be alleviated if the government can intervene through better policies” (p. 154).

This study, therefore, recommends that an all-encompassing program of care and support of the elderly involving all key stakeholders from government, community and family structures be introduced. It is recommended that community-based day-care centers for elderly persons be established through active participation of all stakeholders and elderly persons in particular. These centers could provide social support to elderly persons in rural areas without them leaving the comfort of their own homes, as is the case with institutionalized old-age homes in highly-developed countries. A detailed study is recommended to examine how attachment to a place impacts the quality of life of elderly persons in different parts of Botswana. Considering the dearth of literature in Africa, a comparative study is recommended to examine the living conditions of elderly persons in Southern African countries.

Limitations of the Study

The main limitation of this study was the small sample size of twelve elderly persons living alone who were the main participants. The other limitation is that all the twelve elderly persons were sampled from only two neighboring villages, and as such, this hinders the generalizability of the findings to other areas. Although snowball sampling was used to identify the elderly persons as a ‘hidden population’, it was limited in identifying other elderly persons with diverse backgrounds who might have provided rich data. Another limitation of this study is that it did not include immediate family members (such as children who are caregivers) of the twelve elderly persons who participated in the study. Their perspectives and experiences could have strengthened the findings of this study. However, some of the participants in the focus group discussions with the middle-aged people were incidentally members of the extended families of some of these 12 elderly persons.

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