

## Editorial

This issue of the journal includes three articles on the welfare and life of the elderly in Zimbabwe. Particularly vulnerable groups, or groups with special needs, like the elderly, may pose a dilemma for development practitioners, particularly in relation to social service provision. While social policy and social development must look to the needs of all the people in a country, there will always be competition for scarce resources. Some indigenous North American peoples were reported to leave their elderly to die, or fend for themselves, so as not to place a burden on the scarce resources of the tribe as a whole. This is indicative of one view of the elderly as being dependent and using resources when they are no longer productive. This was the case even through the major contribution made by the elderly in their productive years was recognised. Today, the general ethic is to accept the need to provide for the elderly, particularly where they may not have been able to make provision for themselves during their working life.

However, in developing countries like Zimbabwe this provision is often inadequate and there remains an assumption, based on tradition, that the extended family will care for the elderly when they are no longer able to work, or when they need to retire from work. This assumption may no longer be valid for all groups, especially as more people are urbanised and live almost their entire life in urban centres, or on commercial farms and mines where there is no possibility to live after retirement or when laid off. However, in Zimbabwe grandparents (the elderly) play an important role in caring for the children of their children - this may be particularly the case for poorer people, single parents and for those working in town and unable to find suitable family accommodation. As Ramji indicates in his article this role may become even more important as AIDS becomes an increasing scourge in Africa, decimating the productive working age group 20-39.

As noted the three articles on the elderly in this issue all focus on the Zimbabwean situation, although Ramji's discussion paper, "A Strategy for Primary Health Care for the Elderly in Zimbabwe", proposes a ten point general approach to primary health care for the elderly which has wider applicability. Any reactions to this proposed strategy would be welcomed by this Journal and the author. Hampson, "Marginalisation and Rural Elderly: A Shona Case Study", looks at the socioeconomic status of the elderly, and argues that the position of the elderly changes with broad social changes, and he suggests that their position can best be understood as marginalisation -

marginalisation in terms of pauperisation, social and cultural exclusion, and low planning priority. In effect, the elderly have "no meaningful national minimum level of support, and no social security 'safety net'" in the Zimbabwean situation. In "The Quality of Life of the Elderly Living in Institutions and Homes in Zimbabwe" Nyanguru shares the results of a study to investigate the population of all residential homes for the elderly in Zimbabwe. Most of these homes are urban based and cater largely for people who, although longterm residents of the country, are not Zimbabwean by birth. Related to the general population, this group had a disproportionate number of single people, particularly male bachelors and female widows.

In the remaining three articles in this issue, Tungaraza discusses the development of social policy in Tanzania in the period 1961-86. She concludes that both economics and politics influence social policy, although their relative influence varies over time. In this sense "economics is a necessary but not sufficient condition for the development of social policy" (p68). Ukpong, in "A Quest for Self-Glory or Self-Reliance: Upgrading the Benefits of Community Development Programmes", makes an interesting argument for the need for local people themselves to make decisions about development in their area, rather than those who act as 'deciders' of self-help projects who are themselves outsiders to the communities they decide for, or are even political opportunists. When these latter are dominant, dependency and loss of self-confidence and capacity among local people is reinforced.

Osei-Hwedie, who is the most frequent contributor to this Journal, looks at social work and social development and concentrates on the role of social workers and their potential contribution to social development. He laments the lack of recognition given to social workers in Africa, in terms of their role in social development, but may himself be unrealistic about the capacities and professional competence of social workers on the continent. This area may be one that could provoke useful debate about the place of social workers in development, and about their professional competency. Contributions to this debate would be welcomed.