

**CENTRAL POLICY UNIT  
HONG KONG SPECIAL ADMINISTRATIVE  
REGION**

**A QUALITATIVE STUDY ON  
'HIDDEN ELDERLY' IN HONG KONG**

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# EXECUTIVE SUMMARY

This report looks into the life and experiences of the ‘hidden’ elderly in Hong Kong. According to the Commission on Poverty (CoP), the ‘hidden’ elderly are those elderly who “are disengaged from the community and disadvantaged yet not helped by the available services and support.” Hence, in order to be considered ‘hidden’” these elderly must be detached from the community and disadvantaged or vulnerable in some aspects, apart from the service provision dimension. Therefore, when they are helped by the available services and support, or not at risk even without a formal service provision, they should not be defined as ‘hidden.’ It is therefore essential to understand the circumstances of a ‘hidden’ elderly before considering whether or not to help.

A brief review of official documents and news reports about the ‘hidden’ elderly in Hong Kong helps give us four explanations about the ‘hidden’ elderly phenomenon in Hong Kong. They are, firstly, the inadequate capabilities explanation that regards a ‘hidden’ life due to the lack of or inadequate capabilities compared with the average elderly in society in terms of seeking help from available services and networks. Secondly, it is the networks’ deficit explanation that sees a ‘hidden’ life due to weak family, friend, and community helping networks on the one hand, and

inadequate formal service networks on the other hand. Thirdly, it is the self-reliance ethos that regards seeking help as morally wrong. Fourthly, it is the negative welfare experience explanation that sees a 'hidden' life due to earlier negative or unfavourable welfare experiences of the elderly. In other words, they had reached out before but the experiences were discouraging.

A review of the literature finds that hidden populations are those sections of the population who actively seek to conceal their identity; for example, illicit drug users, gays and lesbians, and sexually active teens. "Hard-to-reach" is a term sometimes used to describe those sections of the population that are difficult to involve in public participation. The use of the concept 'hidden' to describe "hard-to-reach" elderly has a special meaning in the Hong Kong setting because it indicates a section of the population living a life below the normal expectation of the larger society. Hence, how to engage them as "interacting" social beings has become a primary aim of the concerned authorities.

## **Research objectives**

We undertook a qualitative study by conducting in-depth interviews of 'hidden' elderly and related service stakeholders in order to understand the perspectives of both service recipients and providers on how 'hidden' elderly should be best helped. Such

knowledge and information is important to devise successful interventions that respond to the needs and characteristics of the 'hidden' elderly on the one hand, and the available services and networks for the 'hidden' elderly on the other hand. With these in mind, we have the following research objectives:

1. To investigate whether the 'hidden' elderly are disadvantaged as compared with the average elderly in society.
2. To explore characteristics of social networks and help-seeking patterns of the 'hidden' elderly and significant life events contributing to their 'hidden' life.
3. To prove how far the four explanations - inadequate capabilities, networks deficit, self-reliance ethos, and negative welfare experience - really do cause the 'hidden' elderly phenomenon.
4. To assess whether the approaches of the existing services for the 'hidden' elderly match the needs of the 'hidden' elderly.

## **Method**

This study adopts a purposeful sampling method. A total of nine stakeholders, including social workers serving the 'hidden' elderly, social work supervisors, one outreaching nurse, one social worker serving 'hidden youth,' and three advocates were interviewed. A total of 22 elderly people were referred - 13 were successfully

interviewed and nine were rejected cases.

After carefully examining all the referral sources, reading all the transcriptions, and discussing among the researchers, we categorize these thirteen elderly interviewees into three groups: 1) the 'hidden' elderly group - the interviewees who were disengaged from the community, disadvantaged, and not helped by the available resources and support; 2) the formerly 'hidden' elderly - those interviewees who were connected with formal social services; and 3) the unclassified but vulnerable group - those interviewees who were difficult to classify since one had a job, one was on industry injury leave and one had good family support, but they were all vulnerable in different ways.

## **Major findings**

The study identifies the following findings, which are presented in the sequences of study objectives.

### ***Objective 1***

***To investigate whether the 'hidden' elderly are disadvantaged as compared with the average elderly in society.***

The findings of the study show that the 'hidden' elderly were disadvantaged as compared with the average elderly in society. Most of the elderly respondents had

minimal contact with people. Respondents had some contact with people living or working in the community, who usually have contact with hospitals for health care, with markets and grocery stores for daily necessities, with neighbours through casual communications, and with relatives during special holidays. However, they seemed to lack contact with people for leisure, entertainment, mutual support. They were isolated and lonely; they felt neglected, useless, and hopeless, and felt dissatisfied with their lives. They didn't believe that they could change anything and they considered that aging was one of the natural causes for such an unchangeable condition. It seemed to suggest that the 'hidden' elderly were not able to fully disconnect from the social system for financial needs and other instrumental needs. The contacts were necessary for the sake of survival but were also superficial; for example, going to the grocery store for food or sitting in the park, on its own, did not generate meaningful engagement; many of those people were not physically isolated but were psychologically lonely.

### ***Objective 2***

***To explore characteristics of social networks and help-seeking patterns of the 'hidden' elderly and significant life events contributing to their 'hidden' life.***

All elderly respondents had formal access to different forms of socio-economic and physical security. In other words, they were formally connected with social

institutions of the larger society in different ways; however, they were not interacting with any real meaning in the *social* sense. They had very weak family and friend network support. They were passive and selective help-seekers, and they sought help from Comprehensive Social Security Assistant (CSSA) scheme or Old Age Allowance (OAA) for their financial needs but did not seek help for other needs. In other words, they depended on themselves. However, this does not mean that relatives, friends, or neighbours were completely unhelpful, but that the exchanges were regarded as not reciprocal. The underlying reasons for their weak social support networks were complex - there were variations amongst individuals - but the help-seeking patterns were somewhat similar - many were passive actors in their social networks, tended to avoid contact, and were somewhat distrustful of others due to bad experiences of the past. We also find that interviewees belonging to the formerly 'hidden' elderly group also need stronger social networks, which place demands on social services.

We also find that the 'hidden' elderly was a heterogeneous group in regard to life events. Some of the significant life events identified that might contribute to their 'hidden' life were either associated with the aging process, such as retirement, declining health conditions, and the death of a spouse, or the events were related to

their life history (non-normative events), such as a long time conflict with family and a long time lifestyle with unstable partnerships.

### *Objective 3*

*To prove how far the four explanations - inadequate capabilities, networks deficit, self-reliance ethos, and negative welfare experience—are true in terms of causing the ‘hidden’ elderly phenomenon.*

It has been found that the four proposed explanations are somewhat relevant in accounting for their isolation and ‘hidden’ life. The respondents were not capable in terms of financial resources, physical fitness, and knowledge in terms of social contacts and help-seeking sources. They were quite cautious of their financial situation and tended not to pay for “expensive” activities such as participating in programmes organized by elderly centres in the neighbourhood. Social and economic insecurity might have taken its toll on their social engagement activities. However, their “natural” social networks did not function well. Their children did not seem reliable in terms of providing support; their relatives were either disconnected or alienated for various reasons. The respondents seem to avoid interpersonal interaction with people around them due to their perceived pecuniary preconditions in friendship. The respondents felt that wealth was necessary to keep friendships. People without financial resources are looked down upon by people. In regard to social relationships,

financial exchange is the most important facilitating and maintenance factor.

Self-reliance ethos is partially true for our interviewees - indeed, four out of six 'hidden' elderly and all four formerly 'hidden' elderly were on CSSA. Against this welfare dependent background, they still exhibited a strong sense of self-reliance ethos when talking about seeking help.

At the time of the interview, most of them had been initially contacted by formal social services. However, the findings show that some of the respondents had negative experiences when they contacted social services. The image of public services, including health care, housing, and social welfare was perceived as paternalistic, if not authoritative, to the respondents. It seems that they felt incapable of challenging that image, and were reluctant to communicate. Some of the negative experiences show resource constraints of the District Elderly Community Centre (DECC). For example, facilities for physical exercises are limited and volunteers are not always available to provide escort services. To those three who overcome barriers for receiving services, they could benefit from them. One valued escort service helped him to make a medical consultation; one became an active volunteer at the DECC and exerted his leadership among peers. He was happy and found his life meaningful. One joined a church and found spiritual power from God.

#### ***Objective 4***

***To assess whether the approaches of existing services for the ‘hidden’ elderly match the needs of the ‘hidden’ elderly.***

Unmet needs of the ‘hidden’ elderly were examined by using three classic theoretical perspectives, which are Maslow’s hierarchy of needs, Bloom’s functions of social network, and Bradshaw’s concept of social needs. It is observed that there are large discrepancies between felt/expressed needs and normative/comparative needs among the ‘hidden’ elderly and the formerly ‘hidden’ elderly groups. For many ‘hidden’ elderly, social networking and social support are what they need in that they can provide instrumental as well as appraisal support. Due to social isolation, re-establishing social networks would take quite a long time at the individual level. In sum, considering the disadvantageous life conditions of the ‘hidden’ elderly, they deserve timely help and assistance.

The strategies or services reported by the service providers were “making-contact,” “building-networks,” “matching-services,” and counselling, etc. Service providers all adopted outreaching strategies to make initial contact with the potential clients. Providing instrumental services such as health check service (e.g. measure blood pressure) on the street was helpful. Collaborating with various stakeholders for case referral was also effective. Community networking strategies have been adopted to help the ‘hidden’ elderly re-establish their social network.

Information needs to be repeatedly and clearly passed to the elderly, considering possible hearing problems and/or cognitive declination.

The service model used is primarily case management, supplemented by service provision, particularly counselling. The outreaching and support services are not “service providers” in the strict sense; they usually have to refer the ‘hidden’ elderly to their centre-based elderly centres. Therefore, full integration into the centre-based elderly centre or local social organisations may possibly offer the “magic” of a change agent. In other words, it is necessary to place the approach and the constraints of this particular service in perspective.

This is noteworthy when considering the “rejected” cases, whose ‘hidden’ lives are poorly understood by us. We do not know whether they (elderly) are at risk and how at risk they are, but these “outstanding” interview cases remind us that reaching the ‘hidden’ elderly may be a demanding process, both in time and effort.

## **Conclusion and policy recommendations**

Taking all the evidence together, it is fair to conclude that ‘hidden’ elderly is a complex phenomenon; complex, as well, is how social intervention is planned to engage them for a meaningful social life. Here, we use the concept of re-engaging the ‘hidden’ elderly into the community as interacting social beings.

This study demonstrates that the elderly respondents, either formerly 'hidden' or presently 'hidden' according to our classification, were not totally physically or even socially isolated from their environment. Even the four cases of the formerly 'hidden' elderly do not produce convincing differences in terms of self-rated measures. Perhaps our classification is to blame. But it also reveals one important factor: these elderly have difficult lives behind them. It is unreasonable to expect that the social intervention, as designed in this case largely by case management can have a magical impact on their lives. In other words, the goal of the social intervention should be modest - to enable these 'hidden' elderly to become interacting social beings for the aim of risk-avoidance. With this aim in mind, we use the interacting social beings for reference in the conditions which determine the opportunities of *the social* available to the 'hidden' elderly.

It is worthwhile to elaborate a little bit on the concept of "interacting social beings." The two concepts of "isolation" and "loneliness" we mentioned earlier underpin the concerns about 'hidden' elderly: that their physical and social isolation has an impact on their psychological mental state, loneliness. According to the study of social quality for Europe by Beck et al. "...the social refers to configurations of interacting people as social beings. There are historically determined conditions before interactions take place at a specific place on a specific time."

The four conditions Beck et al. refer to are as follows. Firstly, people have capabilities of interacting (empowerment): social and cultural empowerment, economic empowerment, and social psychological empowerment. Secondly, the institutional and infrastructural context is accessible to these people (inclusion): health care coverage, housing market inclusion, inclusion in the social security system, inclusion in community services, and social dialogue. Thirdly, the necessary materials and other resources are available for the existence of the interacting people (socio-economic security): maintenance of health, material (income) security, housing and living security, food safety, and environmental issues. Fourthly, the necessary collectively accepted values and norms will enable community building (cohesion): public safety, intergenerational solidarity, social status, social capital, networks and trust, and altruism.

The above four conditions and their illustrations are good reference points in a checklist of what has been achieved, to what extent, and what has been left out, and whether it is desirable to look into the possibilities of inclusion of the components of the conditions which determine the opportunities of the interacting social beings. In our observation, the 'hidden' elderly in general are more vulnerable in the condition of cohesion, especially that they have weak primary social relationships. On the various issues of concern in empowerment conditions, it seems that

social-psychological capabilities are most worrisome; their withdrawal from the social has an impact on their other capabilities. On the various issues of concern in inclusion conditions, it seems that Hong Kong has good housing, health care, social security, and community services coverage; the 'hidden' elderly also have equal opportunities of being covered by the various social and economic institutions, particularly social security institutions. On the various issues of concern in socio-economic security conditions, it is similar with what we mentioned about inclusion conditions. The 'hidden' elderly have poorer life chances despite the equal opportunities available to all in the various social and economic institutions due to their vulnerabilities underpinned by weak capabilities.

Apart from the concerns and recommendations generated from the interacting social being project, there are some other concerns raised by service providers or identified in the interviews of the elderly respondents that are more technically or professionally specified to the direct practice and administration concern in the services for the 'hidden' elderly. They are as follows:

- 1) It was suggested that cross-disciplinary cooperation or team work in need of assessment and intervention is deemed desirable especially with the health care professionals (*Service provider case 4*).

- 2) The need to strengthen the direct service provided by the outreaching and support services was suggested because many ‘hidden’ elderly are afraid of approaching service providers, which is one of the reasons that they are ‘hidden’ in the first place (*Service provider case 7*).
  
- 3) The need to plan and coordinate services on a district basis due to the geographical variations, such as planning and coordination efforts, was suggested because it is deemed desirable to involve district resource providers or coordinators such as District Officers, the District Council, the district office of the Social Welfare Department, district public hospitals, and Non-Government Organizations (NGOs) (*Advocate case 9*).

A final note of caution is necessary; the recommendations we discussed above are considered in isolation of resource constraints and competing claims in society, despite the fact they are deliberated from the perspective of risk avoidance, which is seemingly less resource demanding. Much of the time, prioritizing resources is not a social concern but a political debate. In this regard, the ‘hidden’ elderly is a vulnerable group with less visibility and “voice” with significant political impact except when they encounter great hazards that impact the conscience of the larger society, which is a social cohesion concern. In the end, improving social intervention for the ‘hidden’ elderly needs foresight.

In our observation, the outreaching and support services have done their job of identifying the ‘hidden’ elderly, providing some “counselling” services on the spot,

and connecting them to the centre-based elderly services in the neighbourhood. It is not fair to judge these new services on the basis of the findings of a dozen referred cases and those of the service-provider interviews. However, we are confident in suggesting that the observations and policy ideas we mentioned above point to significant issues of concern about the needs of the 'hidden' elderly and the service model in social intervention for enhancing their well-being. Nevertheless, it is methodologically sound to conduct two representative sampling studies, one on all 'hidden' elderly and the other on the "rejected" cases to see how risky they are, and how the extent of association with social services impacts the risks of the former, before any significant policy initiatives are recommended.