

Older People Reimagining and Envisioning Preventive Care Through Land Acquisition: Evidence From Rwanda

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Abstract

This article presents findings about older people reimagining and envisioning preventive care through land acquisition in the Karongi district, Rwanda. My primary objective was to understand how land acquisition constitutes a means for older people’s preventive care arrangement. Ethnographic data were collected from 15 older people’s households. Empirical findings indicate that land scarcity makes it a coveted resource that attracts care around older people possessing it. Those unable to use their land rent it out to someone else who accepts to use the land and share the harvest equally with the owners. Furthermore, caring relationships between the landowner and the land user go beyond sharing the harvest to provide other forms of caring practices, such as assistance to access health care, firewood, and water provision, as well as helping older people sell their harvest. Renting out the land displays the image of an older person actively engaged with the community and who attracts caring practices using the land. Besides, land acquisition is the basis for intergenerational care negotiation, as expectations to inherit the land encourage children to care for their older parents. Thus, this article shows preventive care that is happening outside the realm of the Western biomedical model, but rather within an imagined model of owning an asset that benefits older people, their kin, and the community.

Keywords

community care; intergenerational care; land, older people; preventive care; Rwanda

1. Introduction

In Rwanda, state-led care for older people is limited to those formally employed in public or private institutions. Only 7% of older people are covered by a pension scheme (MINECOFIN, 2009). Those in the

informal sector have to resort to family support when in need of care. However, socio-economic changes make family care for older adults unreliable or insufficient to cover older people's needs (Sabates-Wheeler et al., 2020). The decline in family support for older people results in the young generations' competing needs and insufficient means to respond to their own needs and those of their parents (Aboderin, 2006). The gradual decline of intergenerational support for older people makes it uncertain. This is what Sabates-Wheeler et al. (2020) qualify as fragile support from children to parents. In reaction to this situation, older people do not assist helplessly in the face of this situation; they rather imagine how they would be cared for when in advanced old age. It should be noted that the notion of retirement does not exist in older people's communities in rural settings, especially those in the informal sector not covered by a pension scheme (Guyen, 2019). More senior people continue to work on their land to ensure their daily subsistence until they are frail (NISR, 2015b).

Frailty is a crucial stage that leads to increased vulnerability in old age and requires more claims for care (Yang & Lee, 2010). Thus, it is wise to think about care at this stage and to be prepared to face it earlier. Preparation for old age includes thoughts and activities about how to age well (Sörensen et al., 2021). Envisioning preventive care in advanced old age requires adopting strategies to make care possible and proactively deciding how to live in old age (Hou, 2019). One of the strategies some older people in the Karongi district use is acquiring and maintaining land, which they see as a way of preparing to live well through advanced old age. This consideration incites us to research the relevance of land in older people's preventive care in rural settings in Rwanda. Preventive care in this article is not envisioned in terms of disease prevention and health screening practices (Drewes, 2013); rather, it is conceived in terms of strategies to attract care practices in the future and simultaneously avoid social isolation. Among the actions oriented to attract care in rural areas in Rwanda is land acquisition. For the land to play a role in attracting care around older people in their frailty stage, kinship, as well as the surrounding community, are vital in enabling an age-friendly environment that allows them to access resources needed for their everyday living.

It is worth mentioning that land is scarce in Rwanda. More than 60% of the rural population has less than 0.5 hectares of land (Musahara & Huggins, 2005). In the context of land scarcity, land is a desired asset that attracts social networking from various angles. Research indicates that access to land in Rwanda is not given to everyone; a quarter of the Rwandan population is landless, and this issue will continue to grow (Musahara & Huggins, 2005). Land scarcity makes Rwanda a unique case study where land is paramount in attracting caring practice for older people. This article contributes to the care debate by showing that preventive care in agrarian society goes beyond the biomedical Western model to include the accumulation of assets to draw on when in need of care. In this regard, older people who own land expect to benefit from caring practices. Caring for older people goes hand in hand with showing them dedication and attachment, and carrying out activities on their behalf that they cannot do themselves (Van der Geest, 2002). Doing an activity for someone relates to what Sadruddin (2020) calls, in her article on ageing and dignity in Rwanda, "care of the small thing" that gives older people dignity.

Furthermore, research on ageing in Rwanda indicates that social changes such as demographic, health, social, and economic forces are at the foundation of the looseness of family ties (Davis et al., 2019). From this perspective, older people have to think about alternative agencies through which they can navigate their preventive care. The article aims to explore how land acquisition and maintenance constitute a strategy for preventive care in advanced old age. In this regard, some questions need to be raised. How do older people

mobilise kin and community care around them through their land possession? What types of care are older people entitled to when they become frail? How do kin and community benefit from caring for frail older people? The article uses older people's narratives about their lived experiences in their socio-cultural settings to reflect on these interrogations and to provide an empirical-based answer. Apart from that, throughout this article, an older person is understood drawing on the Rwandan older person policy that defines older people using social and chronological age. Social age determines an older person by changes in social roles and functional or psychological and intellectual abilities. In contrast, for chronological age, an older person is any person who is 65 years and above (MINALOC, 2021). In Rwanda, an older person is not only determined by chronological age, as is the case in other cultural settings where old age is determined by the age of retirement (Apt, 1996). Furthermore, the concept of care is used following Van der Geest's (2002) definition, which considers care as an assemblage of emotional and practical performance relating to the manifestation of concern, dedication, and attachment on the one hand and carrying out activities for others who, for physical or emotional reasons, are unable to do so.

2. Theoretical Framework

This article draws on previous studies conducted on old age care, which have investigated elderly care from various perspectives. Care has been debated from different points of view. The Marxist feminist perspective considers care as unpaid care work accomplished by women within the household, while paid activities belong to the male breadwinner (England, 2005). Feminist scholars portray care as a positive dimension of our lives that the capitalist and patriarchal order has socially devalued. It can be conducted in a way that rewards rather than penalises women. Caring activities give a woman a certain status and contribute to forming a woman's identity (England, 2005). In the same vein, disability studies examine care in terms of power relations between caregiver and care receiver; the latter should be considered an active actor (Thelen, 2015). The work of Hochschild (1995) contributes to the care debate by categorising it into warm and cold, traditional and modern, as well as public and private. However, Thelen (2015) rejects these divisions. She suggests overcoming the narrow focus and looking at care as embedded in a larger institutional framework and within different temporalities. In the same perspective, looking at care broadly allows us to understand different angles of care as an activity, a service, a social relation, and emotions, summarised in "caring for" and "caring about" (Alber & Drotbohm, 2015).

Several scholars have contributed to the care debate from various contexts. In Asia, care has been a subject of much discussion; Laurence Cohen analysed family care in Muslim and Hindu families in India and its impact on their health, especially pathological dementia and the social construction that derived from it (Cohen, 1998). Along the same line, Lamb (2020) examines successful ageing in India and North America and shows how it differs between the Euro-American and the Indian perspectives. While the Euro-American view considers successful ageing the ideal of independence, the Indian view focuses on interdependency within the family. Besides, people become elderly caregivers to older people by practising rituals of care, which are repetitive practices that achieve effects through correct performance (Aulino, 2016). On the African continent, elderly care has been the subject of many scholarly investigations. Van der Geest (2016) analysed family care for older people in rural Ghana and concluded that families would struggle to provide good care to their ageing parents. In the same perspective, the decline in family care for older people in Southern Ghana makes the latter express curiosity for Western care facilities, which they consider like schools where they can meet their colleagues (Coe, 2018). While in Ghana older people wish to live in retirement homes, in the Democratic

Republic of Congo the existing retirement homes are not fully operational. The elderly in such care facilities are those socially rejected or accused of witchcraft (Pype, 2018). Besides, older people in Tanzania provide care to older people. This testifies to the failure of intergenerational reciprocity, which makes older people create new options for action and space within generations (Pype, 2018).

In Rwanda, the 1994 genocide against the Tutsi has reconfigured the carescape, where older people are obliged to provide care to older people as some have lost all their family members (Sadruddin, 2020). Furthermore, the genocide made some elderly childless, others widowed, and deprived of traditional family care (Davis et al., 2019). Even for those with children, the economic hardship coupled with the difficulties in sustaining their livelihoods fragilise the social support from children to parents (Sabates-Wheeler et al., 2020). All these changes in elderly arrangements call for thinking about attracting other forms of caring practices. This article focuses on land acquisition to attract various forms of care.

To a certain degree, older people feel secure when they have their land and do not worry about the way they would be cared for in old age. In her research on Benin, Alber (2018) shows that buying pieces of land and keeping them constitutes one of the strategies older people use to arrange their retirement despite being in the informal sector. Preparing for retirement makes older people position themselves in terms of care at the late phase of their lives when there is no state support. In rural areas, land serves not only as the basis for food production but also as a place of belonging and attachment (Manzo, 2003). Moreover, land is becoming progressively more important in old age care since it is the basis for rural livelihoods. It also serves as the area where older people interact with kin and community and define their caring relationship experiences (Manzo, 2003). People's attachment to their space is materialised in a strong feeling of belonging to a geographical setting that emotionally connects them to where they have experienced their social and economic living throughout their life course (Rubinstein & Parmelee, 1992). Economic life relates to investments and other economic activities, while social life involves constructing social networks that extend to the community neighbourhood. Older people's investments, especially buying land for future use, constitute a preventive care strategy. Alber (2018) indicates that older people prepare to live in old age by buying land because this is a source of caring resources after they have ceased working. From this perspective, older people's foresightedness for future care is a way of imagining preventive care.

Preventive care is commonly conceived as a set of measures to prevent diseases or injury (Drewes et al., 2012). For older people, preventive care also includes contributing to the goal of healthy ageing, the maintenance of independence, and well-being by preventing or postponing disability or social isolation (Drewes, 2013). In the context of this research, it seems appropriate to focus on well-being and preventing social isolation. In countries like Rwanda, particularly in rural areas, where the professionalised care for older people is quite inexistent, reflecting on preventive care goes beyond preventing diseases and includes measures adopted to access resources and care necessary for living through old age until the end of one's life. It is much closer to the feeling one has of being cared for when in advanced old age; the feeling of having planned for life in advanced old age (Alber, 2018). To make this preventive care function and achieve the expected results, there is a need for kin and community interventions. Kin's care falls within the perspective of intergenerational reciprocity. Community intervention in older care practices relates to social networking. Older people do not live in isolation; they live with other community members who help them to engage in social activities. Continuous interactions with neighbors enhance a shared emotional connection and increase one's feeling of belonging in the community (Chavis & Wandersman, 1990). Older

people's interaction with neighbours resonates with the community development's values of combating social exclusion, poverty, and discrimination. These values enable community members to create social and economic wealth that helps older people deal with social and economic changes in their society (Cavaye, 2001). The social and economic changes push older people to reconstruct their social networks regarding which their material and relational resources may shape more or fewer results (Bramanti, 2022).

Moreover, older people's material and social resources enable their routinised interactions with the community. The community's closeness to older people favours an old-age-friendly neighbourhood environment that allows access to caring practices and successful ageing (Rugel et al., 2022). This article uses a life course perspective to reflect on how older people's assets, like land, connect to preventive care. The life course perspective is a theoretical orientation in the study of lives. It is a sequence of socially defined events and roles that the individual enacts over time. These events and roles potentially shape the present and the future (Giles & Elder, 1998). It postulates that individuals construct their life course through their choices and actions embedded and sharpened by history and place over time within lived interdependent lives (Elder et al., 2003). Applying the life course perspective to preventive care enables us to understand how older people's land-acquiring experiences link to caring practices by kin and community. Thus, the actions and choices of older people through their life trajectory shape their care at an advanced age. The article argues that to apprehend how older people imagine and envision preventive care, we should focus on the timing for acquiring land and how it connects to the lives of kin and the surrounding community in a determined social-cultural setting.

3. Methodology

This article draws on ethnographic data collected during fieldwork in Rwanda from December 2020 to March 2021. Drawing on Murchison (2010), ethnography is a research strategy that allows researchers to explore and examine the culture and societies that are a fundamental part of the human experience. Ethnography helped me to study older people in their social settings and capture their experiences in mobilising caring practices through land possession. Besides, this article is part of a research project on the social protection of older adults in Rwanda. The Directorate of Research and Innovation in the College of Arts and Social Sciences of the University of Rwanda has approved this research. Before conducting interviews, all informants had to give their informed consent orally, and interviews were only conducted with those who consented to participate in the research. In-depth interviews were conducted in Karongi district, one of the thirty districts that compose Rwanda. The choice for this district was motivated by the fact that it is among the Rwandan districts with a high proportion of older adults, 5.6% of the total population, against the national proportion of 4.9% (NISR, 2015a). In addition, in my previous visits to the District, I have observed various initiatives of older people to care for themselves. The article explores the strategies used by older people for their preventive care. It specifically focuses on land acquisition as an asset highly coveted in a community where most people rely on the land for their everyday livelihood. The Rwandan population and housing census indicate that 82% of the older people aged 60 and above reside in rural areas and have agriculture as their economic activity (NISR, 2023). Informants were selected purposively based on the fact that they possess more than one piece of land and make that land productive through others. In this regard, fifteen older people were selected, including six women and nine men. The informants' age ranges from 78 to 92 years; these are older people who are frail and unable to cultivate their land by themselves. In-depth interviews were conducted with the selected informants at their houses. The interviews focused on the older people's lived experiences in terms of land

possession and caring practices. Each selected informant received my visits at least three times. The visits helped me socialise with informants, build rapport with them, and get immersed in the field. As Malinowski (1922) indicated, to truly understand the local inhabitants one must live with them and observe their lives and cultural accounts. In addition to the interviews and participant observation, field notes were used to capture information not collected by interviews. Interviews were recorded and then transcribed and translated from Kinyarwanda to English, which helped the researcher to familiarise and immerse with the data. Data were analysed using the thematic analysis method. This method helped the researcher identify, analyse, and report patterns or themes embedded in the interviews (Braun & Clarke, 2006). From this perspective, systematic analysis of the entire data set led to the identification of repeated themes across the data set, which relate to the land's usefulness in preventive care as well as to the meaning and experiences that informants have of these themes. To ensure confidentiality, all informants are given pseudonyms when quoting them in this study. Furthermore, cases presented in this article are for those who consented to participate. In this perspective, the meaningfulness of the case study does not reside in the number of cases but in what the case tells us about society as a whole (Burawoy, 1998).

4. Empirical Results

4.1. *Planning for Preventive Care*

"A walking stick in old age is cut earlier and kept far from the reach of everyone," said Anastase, an older man, 81 years old. Anastase gave this statement when he explained how land constitutes an asset that helps older people plan for their preventive care. He had bought three pieces of land in his village when he was in his active age. During that period, he purchased crops from his neighbours and sold them at the local market. This activity helped him to mobilise money so that he could buy the land he has now. He did not acquire his three pieces of land at once but kept buying them one by one as his income increased. He did not think about selling his land again because he knew that his land was the walking stick in his old age. This land acquired earlier is the source of livelihood in his old age as it is the one, he uses to produce food for his family.

Another informant, Adela, managed to get land and keep it to serve her in old age. Adela is an older woman of 92 years old. She earned two pieces of land she uses together with the land around her house to produce various crops that she needs daily. She said: "I can't run a shortage of food because my land is there to give me the food I need."

Adela is happy that she has the land that allows her to have food that lasts from one agricultural season to another. It is worth mentioning that, in rural areas, those who do not have enough land to produce food are likely to experience food shortages. Thus, land constitutes a precious means of food production for Rwandans, particularly for rural older adults who secure their food security through their land (Takeuchi & Marara, 2011).

With renting out her land, Adela cannot beg for food. She put her story this way:

I have sufficient food all the time and cannot beg for it as those without land do. It is good to think about your old age when you can do something to prepare for it.

Adela explained that she bought the land from selling the crops she grew on the land surrounding her house. She kept saving money until she purchased the first piece of land and the second one.

In the same perspective of selling crops to get land, Alphonse, another informant in the Karongi district, bought land using the money from selling coffee beans. Alphonse is an older man, 79 years old. He had a coffee plantation that generated an income for him at every harvest season. He used that money to buy pieces of land in different locations in his village. He explained that his land is a kind of savings for his old-age livelihood. Like other informants, Alphonse uses his land to produce foodstuffs, and whenever he needs money to respond to different needs, he sells a part of the land to get the money he needs. Nevertheless, he is convinced he cannot sell the whole land as he will bequest it to his children.

Contrary to Alphonse, who got land from the sale of coffee beans, Kaberuka got land from the money he earned from his work. Kaberuka is an older man, 81 years old. He worked for several years as a casual worker in road maintenance. As a casual worker, he did not have a work contract, and he was not entitled to the pension scheme as his employer did not contribute to the social security fund. However, he managed to prepare for his old age with his little salary. He bought two pieces of land that he is now using to respond to his needs. According to Kaberuka's narrative, he did not want to save money in his bank account because land kept increasing its value while the money in the bank kept depreciating. He said: "Land has a value that is constantly increasing; so, I saved my money on buying land rather than depositing it in a bank account where its value decreases yearly."

In the same vein of the land value, another older man of 84 years, Matabaro, said: "The land is an asset that keeps increasing its value and rescues you when you do not have enough strength to cultivate it."

The cases presented above show that some older people not entitled to retirement benefits try to create an alternative, which is buying land that they use to respond to their old age needs. Thus, buying land is an act of sightedness to envision preventive care. Through land acquisition, older people I talked to in rural areas of Rwanda adopt measures to prevent the lack of care and plan for their well-being in advanced old age. The land is not only a means for food production but also for attracting care from the surrounding community.

4.2. Attracting Community Care Through Land Acquisition

Older people participants in this study report to attract community care through their land. These narratives made the researcher explore how older people entice care from the community through their land possession. In the Karongi district, older people use the surrounding community to make their land productive. An old woman explained that she rented out her land to her neighbours, who agreed to share with her equally the harvest, what she called in Kinyarwanda *hinga tugabane*, which means "cultivate we share":

With *hinga tugabane*, my neighbours cultivate my land and grow the agreed crop, and then I share with them the harvest.

Another informant said: "When I give my land to my neighbour to grow crops, I get in return the foodstuffs through sharing the harvest with them."

The problem of land scarcity made land a highly demanded resource in rural areas in Rwanda, as most of the population depended on land for their survival. Thus, those without land seek it from those possessing it, which makes the *hinga tugabane* practice commonly used. An older man of 79 years explained it as follows:

In this region, the land is not enough for all people to produce the food they need, so my neighbours without land come to me to ask for land during every agricultural season. I [always have] someone to use my land.

From the quote above it is clear that land is becoming scarce. According to the district development strategy, 77.7% of households own less than 0.99 hectares of land, while 85.2% of the population is in the agriculture sector (Karongi District, 2019).

The practice of *hinga tugabane* is not only limited to sharing the harvest between the landowner and land user, but it also extends to assisting when in need. Some informants explained that as follows:

When I was sick, my land user accompanied me to the hospital and kept visiting me during the two weeks I was admitted to the hospital. He brought food and drinks whenever he came to see me.

My neighbour, who uses my land, besides providing me with foodstuffs, brings me water and firewood and helps buy products from a market located far from here.

When I share the harvest with my tenant, he helps me sell a part of it to the market, and I get money to buy other products.

Land allows older people to create caring relationships with their surrounding community, while people without land have access to it through the *hinga tugabane* practice. Thus, community development based on neighbourhood mutual support arises from social and economic caring practices (Kokos, 2001). Moreover, older people and community members come together to solve their problems in mutually beneficial relationships: Those without land access it and produce the food crops they need, while older people, unable to cultivate their land, benefit from their harvests to improve their own well-being.

It is worth mentioning that land acquisition does not only attract community care but also constitutes an asset that connects generations in a caring relational practice.

4.3. Land Holding to Enhance Caring Relationships Among Kin

Land is an important asset for the family in an agricultural-based economy society. The prominent way of land acquisition in rural areas in Rwanda is from parent to child through donation or inheritance. From this perspective, some older people with land benefit from their children's care as they expect to inherit the land. One respondent reported:

I will bequeath my land to my children [and] they will care for me, as they know they will inherit the land. But when you don't have land, children run away from you in search for their land.

Another informant said:

When you have land, it is for your children, who will inherit it at your death. They have, in return, to care for you to avoid you giving the land to any other person, or selling it.

In their lifetime, a parent has the right to donate land and property to someone other than the offspring. When children do not care for their older parents, they lose their advantage over their parent's property when the latter decides to dispose of their property as they want, without worrying about careless children.

It is worth mentioning that land serves not only as children's inheritance but also as a place of rest after death. As one older man put it: "At my death, the burial ceremonies will be organised on this land. This is the land of our ancestors that has passed from one generation to another."

In rural Rwanda, land plays a significant role in funeral rituals. An informant explained it as follows:

It is not good for an older person to die without bequeathing land to their offspring. On their last day, a child who buries [a parent] is given a piece of land. If you don't have land, people will criticise you for not having managed to leave something behind.

From the above narratives, having land and keeping it is used to be cared for when alive but also on a person's last day. It also prevents older people from being shamed by the community when they die. Older people in this study are proud to have land to leave to their children. An older woman expressed her satisfaction:

I am happy that I have land to leave behind for my children. A good parent always thinks about their children and is proud to bequeath something to them. But when you consume all your property, people will consider you a greedy parent who has forgotten his children.

Another informant said: "I am proud to have land to leave to my children. I have fulfilled my duty, and I will die happy."

The decision to keep land throughout one's life span is a means of arranging for preventive care and preparing for the bright future of one's descendants. Furthermore, land constitutes an asset that strengthens caring relationships between kin members.

5. Discussion

This article builds on qualitative data and explores how older people envision preventive care through land acquisition. To achieve this aim, we focused on the lived experience of 15 older people in the Karongi district. While preventive care is often envisaged in terms of preventing various diseases and injuries, the empirical results indicate that in rural settings, preventive care goes beyond medical aspects to include the accumulation of resources to draw on when in need of care. The valuable resource that older people focus on is the land, an asset that attracts different forms of care when they are becoming frail. Thus, the cases presented here testify to a paradigm shift in understanding preventive care. Therefore, preventive care has to be envisioned, taking into consideration socio-economic settings that reflect the everyday living of individuals. Through owning

land, some older people benefit from material, financial, health, and emotional care practices embodied in the *hinga tugabane* practice. The shift in caring practice is related to constant care adaption to the changing circumstances (Drotbohm, 2015). Caring practices through *hinga tugabane* fill the family care gap threatened by socio-economic changes. In this regard, drawing on Thelen (2015), care becomes an open-ended process connecting the giver and the receiver in a practice that satisfies socially recognised needs.

Preventive care in this study materialises in the everyday living conditions in a rural setting, where securing food and having the means to access health care services are among the primary needs many older people strive to satisfy. In this regard, land possession makes interviewees in this study be cared for by their tenants regarding food provision or assistance to access health care services. Some people in the Karongi district acquire land through inheritances or by buying it from others. The land passes from one generation to another through inheritance and constitutes an asset that connects generations, as children expect to get land from their parents. From that perspective, land serves as the basis for care negotiation between children and their parents, as parents have the right to bequest the land to those who care for them. Research on kinship relations in Rwanda indicates that children who did not show absolute respect to their parents or did not act in their interest lost the favour of receiving a good inheritance (Pontalti, 2018). This could generate tensions and conflicts among family members, especially between those who inherited small patches of land and those with ample land. Land ownership is traditionally the main form of self-insurance in a traditional peasant society (Freiberg-Strauss & Jung, 1988). In managing preventive care in advanced old age, timing matters. Older people interviewed in this study know that they have to imagine living their advanced age while they are still active and able to acquire land. This resonates with the life-course theory, which contends that in the development of an individual's life paths or life trajectories, timing plays an important role and stands as a central element to the life-course perspective. There are three kinds of live timing: individual time, generational time, and historical time, which influence the individual's positions and societal roles (Mitchell, 2003).

Besides, the increasing value of the land over time is a motivating factor for some older people to imagine their old age in terms of land holdings. Those aware of the depreciation of money kept in a bank account opt for land as an asset of increasing economic value. It should be noted that the main ways of acquiring land in Rwanda are inheriting it from the parents or buying it. However, regarding inheritance, not everyone can inherit the land from his parents. As Musahara and Huggins (2005) indicate in their research on land reform in Rwanda, a quarter of the Rwandan population does not own land. Furthermore, most of the rural population has less than 0.5 hectares of land, which is not susceptible to subdivision according to the Rwandan land law. Thus, land scarcity makes acquiring land well before old age an illusion for some people. Unless they buy it from others; otherwise, they have to resort to the *hinga tugabane* practice for their survival. Regarding access to land through purchasing, this depends on the land market dynamism. As the population increases, land demand and its financial value also increase. Research indicates that land can double its price between two successive sales (Baldwin et al., 2019). This is because land is the main livelihood asset for the rural population, and farming is the main occupation for rural inhabitants. Thus, buying land requires mobilising financial resources as people compete to buy land on sale (Bizimana, 2011). The value of the land is determined by its size and location. For example, land with access to public roads is more expensive than land without access to the road or exposed to landslides. There is no regulation about the price of the agricultural land. The seller and the buyer bargain about the price until they agree on the convenient price. Once the sale contract is signed, the seller and the buyer go to the nearest land administration office to register the transfer of land rights and pay the required transfer fees (Baldwin et al., 2019).

Moreover, land for older people is a social place that allows them to sustain a sense of belonging and extend their social networks. In their research on older people and their social space, Wiles et al. (2009) indicate that older people attach great importance to the place where they live and give it a sense of belonging, attachment, and well-being. In that spirit, older people keep their land and feel proud to leave it to their children as a legacy. Land possession brings care not only in the lifetime of older people but also at their death in funeral ceremonies. Thus, land becomes a commodity that has symbolic, economic, and social value. It connects the living to the dead through inheritance and burial and establishes a person's sense of belonging in place (RISD, 2013). It is these values that go beyond kin to expand to community members to strengthen caring relationships.

Older people's social networking with their land users provides not only a kind of security but also an assurance to get food and income from the sale of foodstuffs. This kind of security that elderly landowners have echoes preventive care imagined earlier in their life course when still active. The insurance and security older people enjoy through their land resonate with the walking stick cut earlier and kept far.

The relationships between older people, landowners, and their surrounding community relate to community development values. Older people who agree to give up their land to their neighbours contribute to their well-being by allowing them to produce foodstuffs. As land is scarce in Rwanda, accessing it constitutes a reliable means to secure a living in rural settings where most of the population relies on land for their survival. Interactions between older people and their community enhance their social engagement and promote their well-being. Similarly, the community helps older people to access resources, like food and health care, needed to maintain their quality of life. Thus, the community creates an age-friendly environment that promotes healthy ageing, social participation, and ageing in place. This kind of support for older adults is rooted in the cultural value of mutual help that is prominent in the Rwandan community. This mutual help revitalises community engagement in caring practices that benefit both older people and community members.

6. Conclusion

Preparing for preventive care is a goal in the life course of the older people interviewed in this study, that they strive to achieve when still active. Older people who participated in this study imagine preventive care through land acquisition. Land is, at the same time, a physical and social space that connects them to their kin and the community. The article argues that preventive care is to be envisioned depending on the social-cultural context of a given community, expressed in their everyday living conditions and community values. Thus, acquiring land throughout the life course and keeping it increases the likelihood of being cared for by the surrounding community and kin. As indicated in the older people's narratives, land has expanded beyond the economic sphere of a means of production to become a way to envision preventive care in advanced age. The interactions between older people and their neighbourhood over land use stimulate community development based on satisfying mutual needs of getting food and shared emotional bonds and support. When older people become frail, they lose their physical power but remain with the social power of mobilising the community around them for the use of their land and share equally with them the harvest. Despite the achieved results, this study is not free from limitations. The first limitation was the limited prior research studies on elderly care in Rwanda. This literature gap made the researcher look at available literature in contexts other than Rwanda. Furthermore, the Rwandans, in their culture, do not like to disclose their personal information to an outsider, even less information related to asset possession. This led the

researcher to spend time with informants and build rapport with them to get the needed information. The article analysed older people's preventive care arrangement in a rural area and it cannot be claimed to be exhaustive; therefore, we recommend that future research focus on preventive care in urban settings to explore older people's caring agencies and their interrelatedness.

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Conflict of Interests

The author declares no conflicts of interest.

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