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Assessing the Impact of Usual Place of Residence on Welfare of The Elderly Persons in Nigeria

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Abstract
Elderly care has received increased attention in recent years and the impact of rapid urbanisation on their welfare has generated several public policy and academic concerns. This is addressed by comparing the welfare of the elderly before the sudden rapid urbanisation with that being witnessed today. Quantitative data was collected through individual-based questionnaire. Multi-stage sampling procedure was employed to select local government areas, enumeration areas and individuals for the study. In all, 810 respondents were interviewed. Logistic regression model was used to determine the net effects of the explanatory factors on the welfare of the elderly. The study found that the welfare of the elderly was better attained prior to rapid urbanisation because of support from children and the extended family. It also found that urbanisation and industrialisation has led to the balkanisation of the family system. The study concludes that the welfare of the elderly requires the strengthening of family support system and development of community-based programmes.
Keywords: Elderly, Care, Urbanisation, Extended Family, Family Support System, Nigeria.

Introduction

Individual ageing is a major global phenomenon as a result of improved health and nutrition that have lowered mortality worldwide. Yet increased longevity and survival represents a fundamental shift in social structure that affects the labour market, family structure and the social contracts along generations (Hernandez, 1992). Both fertility decline and mortality improvement affect not only the proportion of the elderly in the total population at the macro level but also the elderly people's way of life at the micro level.

The wisdom of the demographic transition suggests that old age will become one of the most important issues that need to be addressed in developing countries in the next few decades (Wilson, 1997). At present, two-thirds of the world's elderly population lives in developing countries and this figure is expected to rise to three-quarters within the next decade. By the year 2025, seven of the ten countries with the largest absolute population of elderly people will be in developing countries (Bose, 1994).

Nigeria will experience a steep rise in its elderly population in the coming decades. In the 80 years between 1911 and 1991, the elderly population of Nigeria has gone from 1.21million to 4.60

million. By the year 2000, the projected elderly population was 7.25million and by 2025, the absolute number of the elderly population will be 17.62million (World Bank, 1990).

Literature on the elderly in Nigeria is scarce, although social scientists have started to give increasing attention to the problem. The government has not yet launched any formal programme for the welfare of the elderly. Some recent small-scale surveys show a depressing picture. Findings from recent micro level survey indicate that all is not well for the country's elderly population. So far, they have been supported mainly by their adult children, but owing to deteriorating economic conditions, this support may not be expected to continue for long (United Nations, 1987). In the wake of urbanization, modernization and the participation of women in economic activity outside the home, the elderly of Nigeria are being exposed to a situation in which they will lose their age long high status in society (Ogunbodede, 1998).

Historically, old people were venerated as a source of wisdom. Transitionally, the elderly provided child care services as the able bodied worked in the modern labour market. Currently, childcare facilities and the modern education system increasingly remove the functions of child socialization and education from older women. The position of older women in the education and socialization of children have been eroded as the educational systems of Africa have largely been transposed from the west without reference to local constraints and local resources (John, 2000).

Over the years, modernization, industrialization and the accompanying strong western influence have brought about changes in the structure and socio-economic functions of the family in Nigeria. First, the massive rural-urban migration, often necessitated by the search for white-collar jobs, has resulted in the reduction of the relevance of the extended family system and the increasing isolation of the elderly. Secondly, the mutual obligations of the extended family system are being systematically eroded by the increasing emphasis on material success and individualism. Thirdly, the interdependence that was once the hallmark of the extended family is being replaced by emphasis on autonomy and independence of the nuclear family, consisting of a man, wife and children. Fourthly, access to knowledge through formal schooling has led to a reduction in the power and prestige given to the accumulated wisdom of the elderly. Their knowledge and experience are seen as not being directly relevant to the problems of the modern age (Ogunbodede, 1998). Nigeria is passing through a phase of rapid socio-economic transition. The economic development resulting in urbanization and industrialization has brought about important changes in the socio-economic profile of the people. For instance, there has been an assault on the age-long tradition of joint family system (Gokhale and Pandit, 1994). Migration of younger people from rural areas to the cities and towns, coupled with the emergence of nuclear family structure, has increased the vulnerability of the elderly (World Bank, 1994).

Research has shown that no society or government can offer total care for all elderly people in the population - no matter how developed or wealthy the country is (Peil, 1995). This fact particularly applies to Nigeria, where a large proportion of the population comprises poor or indigent persons. What this means is that a great deal of the responsibility for the care of these persons devolves upon caregivers in the community, usually the family.

To be regarded as elderly, social scientists generally agree that a person must be 60 years and above. Julian (1980) makes three classifications in this regard. The first classification comprises the "young old persons" – within the age brackets of 60-74. This group is regarded as still being healthy and active. The second group is referred to as " Old- old" and constitutes persons age 75 -85, who are more likely to require support. The third group, the "frail elderly" is made up of people above 86

years, who for health and economic reasons, cannot fend for themselves without support. For the purpose of this study, elderly population refers to all persons from the age of 60 years and above. This is justified by the fact that the retirement age in the Nigerian civil service is 60 years. At this age, the elderly are expected to be catered for by their immediate families and government. The degree to which this takes place and the social and economic security of the elderly are the concern of this study.

Therefore, what is the present status of the elderly in the urban area? What are the current socio-economic conditions of the elderly? Does the situation of the elderly in rural areas differ from that of urban areas? These and other emerging questions would be probed into in the course of this study, using the Ijebu of South western Nigeria as a case study.

Theoretical Perspectives

This paper adopts the modernization theories of social change to explain the impact of urbanization on welfare of the elderly.

Theories of Social Change

Social change theories can be and have in fact been grouped differently by different authors. One popular approach is that by Cohen (1969: 179-203) in which he tries to identify the different sources of change and classify them accordingly. He ends up with seven theories of social change ranging from the technological, economic, conflict, reintegration, adaptation, cultural interaction and ideational. Elaborate as this approach may however seem, it fails to portray the rather obvious interconnectedness of origin of social change. In line with this consideration we can distinguish three groups of theories of social change viz, Classical, Modernization and Marxist theories. This study shall however use the modernization theory of social change in explaining the present conditions of the elderly population in Nigeria.

Modernisation theory of social change portrays marked influences of classical theorists such as Durkheim, Marx and Weber (cited in Rex, 1961). However, many analysts of modernisation follow the examples of Durkheim, Tonnies, Parsons and Merton. Both Durkheim and Tonnies were concerned with the moral breakdown and social disorganization, which followed the loss of traditional community. This phenomenon of anomie was added in their analysis to reflect a form of strain, which emerged between any two or more elements of the system. This incompatibility disturbs the equilibrium and social stability of the system, which may result in social change. By loss of traditional sense of social security and order and the quest for a new order, we can explain the problem of social and economic security of the elderly. In the same way, we can notice the rise of 'institutions' as a result of the discrepancy between the Nigerian family which is traditionally patriarchal and caring and the conflicting values of industrialisation and bureaucratization which disrupted the elderly's enviable position of authority by giving primacy to acquired rather than ascribed status at old age.

Modernization theory also embraces and elaborates the classical tradition versus modernity dichotomy approach to social change. Notable contributors to this perspective are again Parsons and Cohen. Cohen's (1973) theory of economic development conceives of society as passing from the traditional stage through take off to the stage of high mass consumption. Parsons (1950) in an attempt to integrate Weber's and Tonnies perspectives incorporated a list of the modes of orientation of social action or what is technically referred to as the pattern variables. He noted in his

analysis that social actions and institutions in a traditional setting are more characterized by different selection of orientational alternatives than is the case in a modern society. As laid out below, traditional society is characterized by the values to the left and modern society by those to the right followed by explanations

i. Affectivity Vs Affective neutrality--- whether people desire immediate maximum gratification or are ready to forgo some now for future advantage.
ii. Diffuseness Vs Specificity--- whether one's relationship with others is to be all embracing or to be limited just to selected areas.
iii. Collectivism Vs Individualism--- whether the collective goal take precedence over personal goals or vice-versa
iv. Particularism Vs Universalism--- whether one should personalise or leave open, obejctive and impersonal one's relationship with others.
v. Ascription Vs. Achievement--- whether people are to be judged by endowed or achieved qualities.

METHODS

Study Population

This study was conducted in Ijebuland. The Ijebus are spread into parts of South-Western, Nigeria. The 2006 census figure put the population of Lagos state at 9,015, 781, out of which about 281,481 were Ijebu. Out of the 2,338,570 people in Ogun State, about 725, 299 were Ijebu. Lagos state had twenty local government areas. Of these, Ikorodu, Ibeju-Lekki and Epe local government areas are largely inhabited by the Ijebus. Ogun state has twenty local government areas, with eight of them in Ijebuland. The Ijebu therefore are found in eleven local government areas of Lagos and Ogun States. The methods comprise the use of questionnaire, case histories and document analysis. Quantitative method was exhaustively used. Ordinarily, the structured interview helps to generate standardized information from a representative sample of a given population. This study was conducted in South Western Nigeria among the Ijebu people.

Instruments

The method used was questionnaire schedule. Ancillary instruments included case histories and document analysis. This combination of several methods of data collection, known as triangulation, is expected to provide data on both social gerontology and demography of ageing. It was informed by the need to integrate demographic approaches and sociological perspectives. The questionnaire was interviewer-administered.

The study was conducted primarily through the survey method. Quantitative method was exhaustively used. Ordinarily, the structured interview helps to generate standardized information from a representative sample of a given population.

Sample Size

In order to ensure conformity to the principles of representativeness, the sample size was determined statistically. The sample size determination formula developed by Frank-Nachmias and Nachmias (1996) is adopted in this regard. It is given as follows:

$$N=S^2/(S.E)^2$$

Where N=the desired sample size

S=standard deviation of the variables under study

S.E=standard error (error margin)

Two important decisions are necessary in order to use this formula: how large a standard error is acceptable and since the study involves more than one variable, is a sample that is adequate for one variable satisfactory for other variables? (Frankfort-Nachmias and Nachmias, 1996; Moser and Kalton, 1972). For the purpose of this study, a standard deviation of 1.2 was assumed. The assumption is that these variables are likely to possess similar standard deviation and may represent other variables included in the analysis as far as the degree of variability is concerned. Also, because of the desire to obtain a sample size that could produce dependable estimates of the population parameters, the standard error was fixed at 4 percent. This connotes that the risk of error in estimating the population parameters based on the sample data in the present study is four out of a hundred. In other words, the sample estimates of the population parameters are likely to be correct 96 times out of a hundred. This margin is perceived as acceptable in view of the 95-confidence level generally allowed in social science research. So standard deviation =1.2 and standard error=4 percent (0.04). The sample size is therefore computed as follows:

N= (1.2)2 / (0.04)2 =900

So the study sample size is theoretically put at nine hundred elderly in the study population while the empirical sample is 810. The theoretical sample was derived from Frank- Nachmias and Nachmias (1996) formular for computing sample size.

Sampling Procedures

A Sample of Elderly Persons was Drawn in the Following Stages

Stage 1: Simple random sampling technique was used to select 5 LGAs of Ijebu ethnic group from 11 LGAs in Lagos and Ogun States. Table 1 below shows the population and size of Ijebu by state. The lottery method of simple random sampling technique was employed here.

The selected LGAs are: Ikorodu LGA and Epe LGA (Lagos State) while Ijebu Ode; Shagamu and Ijebu North LGAs (Ogun State)

Stage two involved the stratification of each of the five selected LGAs into three clusters based on the residential patterns that reflect the socio-economic status of the residents. Each of the LGAs was stratified into an elite cluster, a transitional cluster and a traditional cluster. The elite cluster represented areas where only one family is living in a housing unit and the residents were of relative high income and better education. The transitional cluster was where families leave in rented apartments. The traditional cluster represented the indigenous areas, where people from the same lineage reside together in a housing unit.

The third stage involved the selection of clusters from the three residential clusters. Lottery method of simple random sampling was employed here. At this stage 30 clusters were selected with 7 clusters selected from Ikorodu, 5 clusters from Shagamu and 6 clusters each from Epe, Ijebu-Ode and Ijebu-North. Two elite, two transitional and three traditional clusters were selected from Ikorodu, while one elite, two transitional and three traditional were selected from Epe, Ijebu-Ode and Ijebu-North, respectively. One elite, one transitional and three traditional clusters were selected from Shagamu LGA.

The fourth stage was the selection of enumeration areas (EAs) in the selected clusters. EAs in the selected clusters are first listed before the selection of final EAs. An Enumeration Area is a

statistically delineated geographical area carved out of a locality (or a combination of localities) with 500 people or less. The entire area of study has 1530 EAs (National Population Commission, 1994). Out of these 34 were randomly selected, using lottery method of simple random sampling technique; the 34 EAs represented 2.22 percent of the study areas.

The fifth stage was the selection of household from the selected EAs. Household was selected within each EA through household listing until the required sample of 25 households was obtained. The sampling interval used in selecting household varied from one EA to another because of the variation in the number of households in each EA. The sixth stage was the selection of an elderly person to be interviewed in households with more than one qualified elderly persons. Each elderly person was randomly selected and in all 850 elderly persons were interviewed. The unit of analysis was the individual elderly.

Data Analysis

The quantitative analysis was carried out after data entry, data cleaning, data reclassification and data transformation of some variables had been done. In order to achieve this, both descriptive and analytical procedures were used. The quantitative data was analysed using the Statistical Product Solution Services software. Three levels of analysis were undertaken, namely, univariate(simple percentage), bivariate(chi-square statistics) and multivariate(logistic regression model).

Model Specifications

A number of models were estimated to demonstrate the impact of socio-demographic variables. The equation shows that the dependent variable is a function of multiple independent variables. The definition of the variables in the logistic regression equation is as follows:

Logit $P = \alpha + \beta_1\chi_1 + \beta_2\chi_2 + \beta_3\chi_3 \ldots\ldots\ldots\ldots\ldots + \beta_4\chi_4$

Where P estimated the probability that an elderly person felt that children are important sources of old age security and $\chi_1 \ldots\ldots\ldots \chi_4$ are the independent variables.

Results and Findings

Socio-Demographic Profile

Information provided by 810 elderly men and women is analyzed in this study. The sample is unequally divided between males and females (roughly two-fifths and three-fifths, respectively). The study decided to have more females than males in the sample because in the elderly group, we have more females due to socio-cultural factors, for example more male mortality implies that there are more females.

Table 1.1 shows the important socio-demographic characteristics of the respondents. As regards place of residence, the study yielded about three-fifths of the respondents from rural areas and two-fifths from the urban areas. Age distribution reveals that roughly two – fifths of the respondents fall below age 65, another one-fifth above the 70 years of age, while about two-fifths of the respondents are between 65 and 69 years. The mean age for both sexes is 66.9 years, as shown in Table 1.1, 67.4 years among male respondents and 66.5 years among their female counterparts. Considering the crucial implications of age in this study, it is imperative to note that the nature of the distribution may not be unconnected with the fundamental problem associated with age reporting in developing countries. Such problems include people's ignorance of their actual age, because the society does not value the importance of age, and the tendency of some people to report themselves into younger ages.

Therefore, the option taken in most cases, particularly in rural areas, is to estimate the age for respondents on the basis of certain past events or occurrences. Though unreliable and this presents a serious epistemological problem. In the rural areas, due to early marriage, poor nutrition, subsistence farming, and lack of adequate medical services, respondents wear out fast, making them look older than their actual age. Despite this, attempts were made at estimating their right ages. Yet the age distribution presented should be taken with some caution bearing in mind the ever-occurring issue of age misreporting in Nigeria. Nevertheless, the age distribution does not reflect any significant difference between male and female respondents; on the average, males are older than the females by about one year. To circumvent this age problem, the study used the age of respondents' first child to cross check the age claimed.

According to Table 1.1, it is evident that the majority of the respondents have some level of formal education. In fact, nine out of every ten of the males and four–fifths of the females have at least, primary education. The level of literacy is higher among the male respondents than their female counterparts. For example, about two-fifths of the females and only one-tenth of the males are illiterate. Also, the proportion of males who had some secondary education and above (about one-quarter) is higher than that of their female counterparts (about one-tenth). In all, the above educational pattern reflects the national pattern of literacy: It has been reported by the National Population Commission (NPC) that while 66 percent of male population have had some level of education, only 34 percent of their female counterparts are of the same category. The religious affiliation of the respondents indicates that about two-fifths of both sexes are muslims. Half of the respondents were Christians while the remaining one-tenth belong to traditional Africa religion.

Table 1.1
Percentage Distribution of Respondents by selected socio-demographic characteristics, by sex

Characteristics	**Male**		**Female**	
	%	**N=330**	**%**	**N=480**
Study Area				
Ikorodu	24.9	82	26.0	125
Epe	22.1	73	18.3	88
Ijebu Ode	19.1	63	18.3	88
Ijebu North	19.7	65	16.5	79
Shagamu	14.2	47	20.9	100
Place of Residence				
Rural	55.8	184	65.8	316
Urban	42.2	146	34.2	164
Age				
60-64	40.3	133	43.3	208
65-69	33.3	110	38.3	184
70+	26.4	87	18.4	88
Mean	67.4		66.5	

Education				
None	13.9	46	20.0	96
Primary	59.7	197	66.9	321
Secondary	26.4	87	13.1	63
Mean	2.8		2.4	
Religion				
Roman Catholic	17.0	56	14.6	70
Protestants	24.8	82	31.7	152
Islam	43.9	145	39.7	191
Traditionalists	12.4	41	12.3	59
Other (Christians)	1.9	6	1.7	8
Marital Status				
Married	51.5	170	44.0	211
Widowed	20.0	66	21.0	101
Divorced/Separated	10.9	36	16.5	79
Remarried	17.6	58	18.5	89

The marital status of the respondents reveals that more men than women were still in a marital union, about half and two-fifths, respectively. Clearly, elderly people desire to have someone beside them to provide assistance, reduce boredom and its associated health problems. The Table reflects that one out of every five male or female respondents were widowed; more female respondents (16.5%) reported divorce/separation relative to men (about 11%), which may reflect the different effects of polygyny on male and female. About one-fifth of male and female respondents, indicated that they remarried following widowhood or divorce. The level of divorce or separation observed in this study is higher than the national average of 0.9 and 6.2 percent among males and females respectively (NPC, 1998).

Usual Place of Residence as Affecting Welfare of the Elderly

The major objective of this section is to examine the importancue of usual place of residence on the welfare of the elderly with respect to socio-demographic characteristics in the study population. Table 1.2 presents the odds ratios of two logistic regression models examining the effects of some basic characteristics on usual place of residence on the welfare of the elderly. In this regard, separate models are developed on the basis of usual place of residence, examining the effects of the independent variables on the likelihood of usual place of residence. The dependent variable is coded 1 usual place of residence as affecting the welfare of the elderly and O if otherwise. According to the table, while education, religion and family size are significantly related to the perception of usual place of residence as affecting the welfare of the elderly in the rural model, in the female model, with the exception of religion, all the characteristics are significantly associated with perception of usual place of residence as affecting the welfare of elderly.

In the rural model, while those with none education are 94 percent times less likely, those with primary education are 29 percent times less likely to see usual place of residence as affecting the welfare of the elderly than those with secondary education. In terms of religion, while Muslims are

1.8 times more like to, those who are adherents of African traditional religion are 3.5 times more likely to see usual place of residence as affecting the welfare of the elderly than those who are Christians. With regard to family size, while those with 4-6 children are 7 percent times less likely to those with seven or more children are 57 percent times less likely to see usual place of residence as affecting the welfare of the elderly than those with 1-3 children.

In urban model, those with primary education are 4.3 times more likely to see usual place of residence as affecting the welfare of the elderly than those with secondary education in terms of family size, while those with 4-6 are 3.6 times more likely, those with seven or more children are 2.7 times more likely to see usual place of residence as affecting the welfare of the elderly than those with 1-3 children.

Table 1.2

Odds ratio from two logistic regression models examining the effect of selected characteristics on importance of usual place of residence on the welfare of the elderly.

	RURAL		**URBAN**	
Characteristics	**Odds Ratio**	**S.E.**	**Odds Ratio**	**S.E.**
Education				
None	0.94	0.663	2.49	0.56
Primary	0.29*	0.620	4.32*	0.61
Secondary	1.00	Rc	1.00	Rc
Religion				
Christian	1.00	Rc	1.00	Rc
Islam	1.76	0.568	0.58	0.56
Traditionalist	3.53*	0.652	2.27	0.62
Family Size				
1-3	1.00	Rc	1.00	Rc
4-6	0.07*	0.802	3.55*	0.25
7+	0.58	0.524	2.66	0.26
-2 log likelihood	49.059	148.652		
Model chi-square	10.920	11.301		

*Significant at P < 0.05

**Significant at P < 0.01 rc – reference category

Conclusion

At the outset of this paper, we raised the question of how usual place of residence affect the welfare of the elderly. This study was borne out of the fact that no society or government can offer total care for all elderly people – no matter how developed or wealthy the country is. This fact particularly applies to Nigeria, where a large proportion of the population comprises poor or indigent persons. What this means is that a great deal of the responsibility for the care of these persons devolves upon caregivers in the community, usually the family members. Therefore, the paradigm that places elderly's care on the feet of government needs to be thoroughly examined as it is more apparent that family especially the rural based community constitutes the core of the elderly care especially in developing countries like Nigeria.

The most interesting variable understudy is the level of educational attainment among the elderly population. It has been found that there exists a significantly high illiteracy level among the elderly. This excludes those who have been exposed to Quranic education. The study refutes one prevailing notion that the urban based elderly fare better in terms of welfare than their rural based counterpart. Therefore there was a shift to the urban area as evident in rural model, table 1.2. However, the study confirmed that the family system still contributes significantly, in most cases, towards the welfare of the elderly Nigerians, though such contribution tends to come, primarily and mostly, from the elderly person's own children, rather than from the extended family as evident by the number of elderly parents living with their children in some studies.

The reality, as revealed in this study, is that old people welfare is influenced by such factors as marital status, religion and sex of respondents. Income inadequacy is a problem faced by most of the elderly, while in general, urban based elderly are noticeably worse off than rural based elderly, income-wise. Elderly people in Nigeria suffer a large financial care gap because of the lack of a comprehensive and adequate social security system. More fundamentally, Nigeria is passing through a phase of rapid socio-economic transformation and sustained economic development. Thus old people have to count on either financial support from their sons and daughters or seek continued employment in a depressed economy. Further jeopardy still exists in the employment market resulting in fewer employment opportunities and lower wages for those who get a job.

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