Int. j. adv. multidisc. res. stud. 2024; 4(6):1258-1262

Received: 05-12-2024
Accepted: 15-12-2024

International Journal of Advanced Multidisciplinary Research and Studies

ISSN: 2583-049X

Influence of Socio-Demographic Factors on Care Types Received by Elderly People in Irele LGA, Ondo State, Nigeria

[1] Moses Ayokunle Akanbi, [2] Atinuke Bagbe, [3] Oluwatoyin Kehinde Ogunbamike, [4] Omotayo-Tomo Modupe Stella, [5] Badejo Oduyomi Micheal, [6] Abolade Olawale Simon

[1, 2, 3, 4, 5, 6] Department of Mathematical Sciences, School of Science, Olusegun Agagu University of Science and Technology, Okitipupa, Ondo State, Nigeria

DOI: https://doi.org/10.62225/2583049X.2024.4.6.3594
Corresponding Author: **Moses Ayokunle Akanbi**

Abstract

This study examines the influence of socio-demographic factors on care types received by elderly people in Irele Local Government Area (LGA), Ondo state, Nigeria. The study employed quantitative technique to elicit data from 100 elderly people through structured questionnaires. The study emphasized the relationship between socio-demographic variables such as age, gender, marital status, education, and occupation on care types received by elderly people including assistance with daily activities, companionship, emotional support, financial, and medical care. The initial evidence from this study showed that there are identified socio-demographic factors (age, education and occupation) with influences on care types received by elderly people. Further results indicate significant interactions between socio-demographic factors like age (p=0.000), education (p=0.017), and occupation (p=0.023), and care types received by elderly people. However, gender (p=0.717) and marital status (p=0.138) of elderly people are insignificantly related to care types received in the study. The findings depict that the care types received by elderly people are influenced by their socio-demographic factors. Moreover, evidences showed that financial support, companionship and medical care are germane care types received by elderly people in this study. Hence, the study recommends that more elderly married females should be urgently considered to benefit from financial support, companionship and medical care within families in Irele Local Government Area of Ondo state and the entire Country.

Keywords: Care Types Received, Elderly**,** Influence, and Socio-Demographic Factors

Introduction

The influence of socio-demographic factors on care types received by elderly people in Irele local government, Ondo state, Nigeria is entrenched in the global phenomenon of elderly population. Obviously, previous evidences from different nations of the world have clearly depicted that the proportion of elderly people who belong to the age of 60 years plus are projected to clock 2 billion plus by 2050 (World Health Organisation, 2018).

As a matter of fact, care-givers have played significant roles in providing supports for individuals with disabilities and elderly people within the social systems and healthcare of nations of the world (Ahmad *et al*., 2013) [3]. Further studies emphasized that some elderly people are financially stable than their counterparts with vital cultural issues connected to ageing within Nigerian family settings (Peter *et al*., 2018, Lloyd *et al* 2015 [13]). More importantly, another interesting study emphasized that lack of financial support, poverty, dwindling material support, widowhood and isolation are the major chaos of elderly people (Masauso, 2016) [15].

In African setting, the elderly people have several challenges like: Malnutrition, accommodation, poverty, transportation, physical and mental health (Abanyam, 2013) [1].

Further studies posit that gender differences in coping, social support, individual traits and appraisal, have been very scanty and unstable. Undoubtedly, other reasons have clarified that there are differences in care-giving among men and women. In addition, research evidences have shown that there is a strong influence of gender differences in family care-giving which is traceable to the variables like: Associated behavioral problems, characteristics of the elderly, socio-economic status, illnesses

and disabilities, family composition, demographic details of family care-givers like: Socioeconomic status, age, marital status, employment, education, cultural beliefs and their interaction with the elderly (Etters, *et al*., 2008 [10], Akpınar *et al*., 2011 [4], Serrano-Aguilar *et al*., 2006 [18], del-Pino-Casado *et al*., 2012 [7], Papastavrou *et al*., 2009 [16], Yee & Schulz., 2000 [20], Gallicchio *et al*., 2002 [11], Pinquart & Sörensen 2006 [17], Scerri, 2014, Chappell *et al*., 2015 [6], Almada *et al*., 2015).

In Nigeria, it is vital to note that the proportion of elderly people has been rising. In effect, the need for supporting and caring for the elderly is rising on daily basis. He emphasized that those who have attained the age of 50 years and above are regarded as 'elderly persons' in South-western Nigeria (Akanbi *et al*, 2015) [2].

Studies emanated from Nigeria, Thai, Mexico and Peru has shown that there are no gender variations in susceptibility of economy among elderly people. This is premised on the fact that some elderly people are more financially strong than their colleagues; thereby exposing them to cultural problems within Nigerian families (Lloyd-Sherlock *et al*., 2018; Lloyd-Sherlock; 2015) [14, 13].

In Nigeria, studies have also buttressed that elderly people and retirees with vitality and economically active are poorly paid at the point of retirement. In effect, such elderly people have absolute reliance on their responsible adult children with financial capability and other sponsorship by religious bodies (Ebimgbo *et al*., 2018, Josephson, 2017; Togonu-Bickersteth and Akinyemi, 2014) [9, 12, 19].

Therefore, this study is significant in its ability to fill the gap of socio-demographic factors on care-types received by the elderly people in Nigeria.

In line with the afore-mentioned challenges, this study tries to investigate the influence of socio-demographic factors on care types received by elderly people in Irele local government area, Ondo state, Nigeria. Here are the research questions for this study.

1. Are there identified socio-demographic factors with influences on care types received by elderly people in Irele local government area, Ondo state?
2. Can we probably advocate that there are significant socio-demographic factors that influenced care types received by elderly people in Irele local government area, Ondo state?

Interestingly, the two research hypotheses for this study are: First, there are identified socio-demographic factors with influences on care types received by elderly people in Irele local government area, Ondo state. Second, there are significant socio-demographic factors that influenced care types received by elderly people in Irele local government area, Ondo state.

Methodology

Description of Study Area: Ondo state

The study location is Ondo state within South-western Nigeria. Ondo state comprises of eighteen (18) Local Government Areas (LGAs) which include: Akure North, Akoko North-East, Akoko South East, Akoko South West, Akoko North West, Ondo East, Ilaje, Ese-Odo, Owo, Ose, Ondo West, Ile-Oluji/Oke-Igbo, Irele, Odigbo, Akure South and Idanre, Okiti-pupa, Ifedore, and Ondo East, respectively. The reasons for chosen Ondo state as study location are: First, the proximity to the researcher. Second, there are eligible proportions of elderly respondents. Third, this type of study has not been systematically conducted in Ondo state.

The research design for this study was quantitative technique through questionnaire administration. It involves collecting numerical data from sampled elderly people in Irele, Ondo state. A total sample size of 100 elderly people belonging to age-group 50 years and above participated in questionnaire interviews at Irele Local Government Area (LGA) of Ondo state.

The target population for this study comprises of elderly people (50 years and above) residing in Irele, Ondo state. Nigeria. Data on influence of socio-demographic factors and care types received by elderly people were collected in Irele LGA of Ondo state, Nigeria. The sampling frame for this study include: Aduga, Akingboye, Gbeleju, and Lodan in Irele Local Government Area where elderly people are residing.

The study employed multi-stages sampling method, which are: Stratification of Irele into strata (e.g., urban and rural areas) to ascertain representation of elderly people. This is followed by cluster sampling that involved random selection of elderly people from Aduga, Akingboye, Gbeleju, and Lodan in Irele Local Government Area. Also, random sampling of elderly people within each cluster was drawn for participation in the study. The questionnaire for this study embraced socio-demographic factors like: Age, gender, marital status, education, and occupation. However, elderly people were asked questions on care types received by them such as: Assistance with daily activities, companionship, emotional support, financial support, and medical care on a Likert scale or similar rating system. Prior to data analyses, the data collected went through the process of data cleaning, validation, and coding. Any missing or inconsistent data were addressed to ensure data quality. Descriptive statistics was used to elicit frequencies for the variables of interest. No doubt, inferential statistics was employed to test the research hypotheses and examine the interaction between the dependent variable (care types received) and independent variables (e.g. age, gender, marital-status, education and occupation).

Chi-square tests were employed to examine influences of care types received by elderly people based on categorical independent variables like gender and marital status. Statistical tools employed for data analyses of this study are: R and Micro-soft Excel. These tools helped to generate statistical output for chi-square tests in the study.

Discussions of Findings from the study

The discussions of findings from this study are enumerated below.Table 1 shows the socio-demographic characteristics of the respondents.

Table 1 features the percentage distributions of respondents' age, gender, marital status, educational level and occupation in Irele Local government area, Ondo state.

The percentage distribution of respondents according to their age-category shows that 48.0 percent of them were 50-59 years, 26.0 percent were 60-69 years, 10.0 percent belong to 70-79 years and 16.0 percent of respondents were 80 years and above in this study**.** The respondents with 50-59 years that dominated the study showed that elderly people are those who are 50 years and above as evidenced in the previous work of Akanbi *et al*.,2015.

By gender, the data collected reflects a higher percent (67.0) of female respondents compared to their male counterparts (33.0 percent) in Irele, Ondo state.

According to marital characteristics of the respondents, the data collected from Irele Local Government Area, Ondo state reflects a higher proportion (60.0 percent) of married respondents compared to their widowed counterparts with 40.0 percent.

Also, the majority of respondents in Irele Local government area, Ondo state have post-secondary education (37.0 percent). Obviously, the proportion of respondents who acquired primary, secondary, and none education are 26.0, 21.0 and 16.0 percentages.

Furthermore, of the 100 elderly respondents interviewed in Irele Local government area, Ondo state, majority of them (32.0 percent) are Traders. No doubt, other occupational categories are Civil servants (13.0 percent), Retirees (13.0 percent), Artisans (7.0 percent), Public servants (6.0 percent), Clergy (4.0 percent) and farmers (3.0 percent) in the study.

Table 1: Distribution of Respondents by Socio-Demographic Characteristics

Characteristics	Frequency	%
Age		
50-59years	48	48.0
60-69years	26	26.0
70-79years	10	10.0
80years&above	16	16.0
Total	100	100.0
Gender		
Male	33	33.0
Female	67	67.0
Total	100	100.0
Marital Status		
Married	60	60.0
Widowed	40	40.0
Total	100	100.0
Educational Level		
No Schooling	16	16.0
Primary	26	26.0
Secondary	21	21.0
Post-Secondary	37	37.0
Total	100	100.0
Occupation		
Artisan	7	7.0
Civil Servant	13	13.0
Clergy	4	4.0
Farmer	3	3.0
Public Servant	6	6.0
Retired	13	13.0
Trader	32	32.0
No Response	22	22.0
Total	100	100.0

Source: Field Survey, 2024

Table 2 employs Pearson chi-square and likelihood ratio tests to show interactions between socio-demographic variables and care types received among elderly people in Irele. At p = 0.000, rhe results reveal a high significant relationship between age categories (50-59, 60-69, 70-79, 80+) and care types (assistance with daily activities, companionship, emotional support, financial support, and medical care). To be specific, there is a high significant interaction between and financial support in the study. This result correlates with previous findings which posit that elderly people have absolute reliance on their responsible adult children with financial capability and other sponsorship by religious bodies (Ebimgbo *et al*., 2018, Josephson, 2017; Togonu-Bickersteth and Akinyemi, 2014) [9, 12, 19]. The substantial chi-square value (34.930) and likelihood ratio (37.58) buttressed that financial support; companionship/ medical care received by elderly people vary significantly across different age-groups.

For marital status, the chi-square value of 6.959 and Likelihood ratio of6.991, the p-value (0.138) is not significant. This implies a weaker relationship between marital status (married, widowed) and financial support, companionship/medical care received by elderly people. This result buttressed the previous work by Masauso, 2016, which advocate that lack of financial support, poverty, insufficient material support, widowhood and isolation are the major problems of elderly people.

With reference to gender, the chi-square (2.105) and Likelihood ratio (2.147) values are relatively low, and the p-value (0.717) is obviously not significant. This implies that there is no substantial evidence to establish interaction between gender and financial support, companionship/medical care received by elderly people in the study. This result is supported by previous finding that there are no gender variations in susceptibility of economy among elderly people. Obviously, this is due to the fact that some elderly people are more financially strong than their colleagues; thereby exposing the cultural problems within Nigerian families (Lloyd-Sherlock *et al*., 2018; Lloyd-Sherlock; 2015) [14, 13].

Education exhibits a significant relationship (p=0.017) with care types received by elderly people, as evidenced by substantial chi-Square value (24.563) and Likelihood ratio (29.495). These findings show that the level of education have significant influences on received by elderly people in the study.

Occupation also demonstrates a significant interaction (p = 0.023) with care types received by elderly people. The chi-square value (44.806) and likelihood-ratio (49.186)are high, indicating a relationship between occupational status and care types received by elderly people.

In summary, the two objectives of this study have clearly shown that socio-demographic factors with influences on care types received by elderly people are: Age, education and occupation. Essentially, results indicate significant interactions between socio-demographic factors like age (p=0.000), education (p=0.017), and occupation (p=0.023), and care types received by elderly people. However, gender (p=0.717) and marital status (p=0.138) of elderly people are insignificantly related to care types received in the study.

Table 2: Pearson Chi-Square and Likelihood Ratio tests showing relationship between socio-demographic variables and care types received by Elderly people

Variables	Care Types received by Elderly people	Assistancewith daily Activities	Companionship	Emotional Support	Financial Support	Medical care	P-values	Pearson Chi-Square	Likelihood-Ratio
Age	50-59	4	14	2	23	5	0.000	34.930a	37.58
	60-69	1	11	2	8	4			
	70-79	0	5	0	0	5			
	80+	5	1	0	3	7			
	Total	10	31	4	34	21			
Marital status	Married	4	23	1	19	14	0.138	6.959a	6.991
	Widowed	6	8	3	15	7			
	Total	10	31	4	34	21			
Gender	Male	2	9	1	12	9	0.717	2.105a	2.147
	Female	8	22	3	22	12			
	Total	10	31	4	34	21			
Education	No-School	4	4	2	3	3	0.017	24.563a	29.495
	Primary	0	11	0	9	6			
	Secondary	4	1	2	9	5			
	Tertiary	2	15	0	13	7			
	Total	10	31	4	34	21			
Occupation	Trader	2	6	4	9	11	0.023	44.806a	49.186
	Clergy	1	1	0	1	0			
	Public Servant	0	5	0	1	0			
	Civil Servant	0	4	0	6	3			
	Artisan	1	1	0	5	0			
	Farmer	0	0	0	3	1			
	Retired	1	5	0	2	5			
	No-Response	5	9	0	7	1			
	Total	10	31	4	34	21			

Field work, 2024

Conclusion

The study on influence of socio-demographic factors on care types received by elderly people in Irele local government area, Ondo state would be concluded as follows: The initial evidence from this study showed that there are identified socio-demographic factors (age, education and occupation) with influences on care types received by elderly people.

Further results indicate significant interactions between socio-demographic factors like age (p=0.000), education (p=0.017), and occupation (p=0.023), and care types received by elderly people. However, gender (p=0.717) and marital status (p=0.138) of elderly people are insignificantly related to care types received in the study. The findings depict that the care types received by elderly people are influenced by their socio-demographic factors. Moreover, evidences showed that financial support, companionship and medical care are germane care types received by elderly people in this study.

Recommendations

The policy recommendations for this study are: That more elderly married females should be urgently considered to benefit from financial support, companionship and medical care within families in Irele Local Government Area (LGA) of Ondo state and entire Nigeria.

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