Community-Based Care For Home Bound Elderly Persons In Nigeria; A Policy Option

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Abstract: In Nigeria, the elderly are still cared for within the confines of the family. However there is an observable progressive shift in the function of the family. Traditional functions of the family like care and social support to older family members have gradually decreased in the recent past due to financial problems, migration and other accompanying issues. Family members most often are unable to effectively cope with the challenges of caring for elderly persons especially those that are home-bound. The inability of family members to cope with caregiving can lead to frustrations which may translate to abuse of the elderly person. This however is not so in developed countries where community based services are available to cater for these home-bound elderly persons. This paper therefore seeks to suggest the need for government to consider providing community-based intervention programmes for elderly persons in Nigeria.

Keywords: community-based, services, elderly persons, care-giving

1 INTRODUCTION

Improvement in life medical sciences have led to greater longevity. The greater longevity of the elderly demands care and support for a longer period and also entails high cost of medical and health care. The rising cost of living and shrinking income pattern in Nigeria often makes it difficult for the family to provide adequate care and support especially as there are no government provision for the elderly person [1]. Today in Nigeria also many women are taking up paid employment and this has led to a decrease in the availability of primary caregivers for the elderly and increased reports of neglect and elder abuse [2]. Since family members are not able to provide these care, it may result in frustration on the part of the elderly person and also the care giver. This can bring about elder abuse and neglect [3]. Elder abuse according to [4] is a concealed problem that is frequently cloaked under the shroud of family secrecy. In many countries worldwide, awareness is just developing that elder abuse does occur. It is “a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person” [5]. It has serious health consequences and like any other form of abuse, it is a violation of human rights and a significant cause of injury, illness, loss of productivity, isolation, and despair [5]. Elder abuse according to [3] can lead to depression, suicidal thoughts, and feelings of unhappiness, shame, or guilt among elderly persons.

A lot of the elderly persons would have been better cared for if there is a specialised institution where they can be placed. However, none of these institutions exist because of the belief that placing an elderly person in a home amounts to abandonment that has serious consequences for the perpetrators [6]. For instance it is generally believed that the elderly person will place a curse on the children and other family members that support such placement. For this reason, the elderly is left at home with little or no care in some cases.

This situation however should not be allowed to continue without any form of intervention. The major form of intervention required is by the government as is the case in developed countries. In Nigeria, there are no services and programmes dedicated to elderly persons apart from the pension scheme, which is only for the elderly persons that have been in government employ. Therefore there is need for programmes and services like we have in other countries. However, given our unique cultural characteristics that rejects institutionalisation, it may be necessary for us in Nigeria to start thinking about community-based care. Clearly, the lack of any government intervention and the weakened traditional family care-giving system have made community-based care an appealing option. Thus, this paper proposes a culturally acceptable community-based care option for the elderly especially those who are home bound. To do this, the paper raises the following questions: a) What are the factors that are affecting the care of elderly persons in...
c) What are the merits of community-based care? d) What forms of community-based care model can Nigeria adopt in caring for its growing elderly population?

II. CARE OF THE ELDERLY AND FACTORS INFLUENCING CARE-GIVING OF THE ELDERLY IN CONTEMPORARY NIGERIA

According to [7] care of the elderly in Nigeria is the responsibility of the family with little or no assistance from the government a situation that has not changed today. In traditional Nigerian society, the care and support of elderly persons were provided by the family members, especially the wives, sons, daughters, sons-in-law, and daughters-in-law [1]. This care giving according to [8] was backed not simply by the emotional bonds of relationship emerging out of blood relationship or marital relationship but by the force of pervasive influence of traditional values, norms, and behavior which were not simply practised as a matter of routine but also deified. The care of the elderly was the moral imperative, which was considered not only material bliss but also spiritual salvation [7]. However, this traditional bond between the elderly and the younger members of the family is gradually becoming weak in Nigeria for so many reasons.

The first major reason is the processes of modernization, urbanization, industrialization and the attendant migration of youths from rural to urban areas. These have greatly undermined the position of the elderly in contemporary Nigerian society [6]. Also the process of development which has brought with it, rapid change in social behaviours and institutions that have adverse implications for the care and well being of the elderly person. The extended family system has progressively been weakened by the combined forces of economic hardship, wage labour, occupational and geographical mobility with the result that in some cases aging parents are abandoned because their children are unable to support them. These changes have weakened the respect for the elderly and the commitment to supporting them.

For instance, there is high occupational and geographical mobility today and so many of the children are so far away from their parents. [9] argues that the relationship between elderly parents and their adult children can be destroyed or diminished by permanent geographic separation or if one or both of the participant(s) are unable to perform their role, maybe as a result of health or other obligations. [7] believes that such factors as feelings of superiority or inferiority, selfishness, break in trust, withdrawal by one or both participants and so on may diminish ageing relationships and so affect care-giving. [10] suggest that likelihood of withdrawal from the relationship of a care-provider could be in direct proportion to the level of care needed and the physical and mental stress of providing it.

Similarly, with growing economic problems in the country coupled with high unemployment, many children do not have the needed finance to take care of their aged parents. All these have resulted in the weakening of the family institution, which has played significant role in the care of the elderly, who due to physical disability and slowing down of motor ability are unable to care for themselves.

Increase in life expectancy has brought about more elderly people and the trend will continue [11]. Before now, there was little chance that a man and his wife would survive to see all their grandchildren, but today a lot of them do. This demographic situation, unique to our time, has profound significance for the planning and delivery of health, social services and programmes for the elderly. This is because the process of aging is often confounded with other associated factors such as; deteriorating physical health, poor nutrition, bereavement, social isolation, and so on. This being the case, the demand for health services will increase, pension spending will rise and the need for community based services will also arise. There will also be more pressure on caregivers, country’s resources and budgets. Demographic and socio-economic changes have also threatened the well-being of elderly women occasioned by their inferior social position [12].

Notwithstanding these realities, human service administrators and policy makers in Nigeria still believe that the elderly are always well cared for by their families and so have not shown any serious interest in the issue of aging. The reality being that many families in Nigeria do not have the resources to meet fully the needs of the elderly members [1]. They have not realised that population aging will potentially be a very serious matter especially with the very limited resources available to support the elderly. Rather, emergency measures are introduced as the need arises [13]. Special services for the aging in area of income, housing, medical services, care giving and so on are lacking. Also the national policy on the elderly is largely on paper with no effort being made to implement it.
III. THEORETICAL FRAMEWORK

Two related models will provide the theoretical foundation for this paper. They are [14] General Model of the Stress-Health Process and [15] Conceptual Model of Caregiving Stress. According to [15] long-term caregiving of an elderly person (in this case) depletes social support resources and reduces perceptions of control. They further note that, under the demands of constant care especially for an elderly person who is home bound, caregiving expands to encompass the entirety of the caregiver-care recipient relationship. Caregivers may then find it necessary both to relinquish outside employment and to increase expenditures for services. As a result of this, they may experience decline in physical as well as mental health. Sometimes there may also be financial and emotional costs to caregivers. [14] on their part, described a sequential, cyclical model in which stressful situations begin when functional limitations of the care recipient (elderly person) and problem behaviors create a need for caregiving. The potential caregiver must appraise the situation and decide if she (usually) or he can deal with the problems. A positive or benign appraisal leads to positive emotional responses and a sense of well-being. Alternately, an appraisal of the situation as stressful leads to negative emotional reactions (e.g., anxiety, depression). They also noted that these reactions may interact with care recipient behaviors to create an escalation of negative outcomes such as abuse and neglect. Caregiver health and mental health are affected, with concomitant increased risk for physical and emotional problems. However, it is believed that if there are community based services and resources that the care-giver or care receiver can turn to, the level of stress on both parties will most likely decrease or even disappear. Therefore the need for the provision of community-based services for elderly persons is not just for the benefits of the elderly person’s but for the benefit of their family members who are all potential care-givers and the society as a whole.

IV. COMMUNITY-BASED CARE FOR ELDERLY PERSONS AROUND THE WORLD

In many parts of the world, governments have introduced various community based services and programs to support the elderly and their families bearing in mind the peculiarity of their environment. In United States for example some of the programmes are federal sponsored; some are state; yet others are private with the state or federal government subsidizing and/or supervising. They include Nursing Homes, Senior Centres, Congregate and Home Delivered Meals, Meals-on-Wheels, Transportation Services, Telephone Reassurance and Friendly Visiting Programmes, Adult Day Care, Adult Protective Services and also services to the Family Care-givers ([16].

In many countries in Europe there are also programmes and services that are specifically for the elderly people. In Britain some of the programmes that are geared towards encouraging the elderly to remain at home include: “Staying Put” and “Care and Repair” projects where government give grants to voluntary agencies to help make the homes of the elderly more comfortable [17]. More emphasis is being paid to home care. For example there is the “hospital-at-home”, programme that enables medical personnel to visit the elderly in their homes. Relatives can also be paid for providing care to the elderly at home if the elderly chooses to remain at home. Also many paid “volunteers” (often women) perform many helping functions for the elderly at very low wages with reimbursement by the local social services department. Other services provided for the elderly include home help, meals-on-wheels, aids and adaptations and day care centres. On the whole the British government is laying a lot of emphasis on “family-friendly” programmes [17].

In Israel, [18] reports that day care centers are one of the core community-based services for frail older adults. In Israel, there are 172 such day care centers. In Sweden [19] report that there are different types of community-based day care for the elderly. One type called “day care that provides rehabilitation” (DCR) is aimed at improving physical ability. Each patient is offered an individual programme worked out by professionals, i.e. occupational therapists or physiotherapists. Attendance is usually restricted to three months, with the option to return for a new session if needed. The DCR centres have strict admission routines and usually require referral by a physician or home help director.

In China, [20] reports that the government of China has begun to adopt a community-based service model that incorporates China’s unique social, cultural, economic and political characteristics. China’s community-based in-home...
care is designed to care for people in a wide range of situations and needs. For instance, there are the very old (age 80+), people with disabilities and chronic diseases, those living alone without adult children or family members nearby, those living in poverty, and older people in more developed rural areas, to name a few [21]. Community-based services in China include both government-funded public welfare assistance (such as low-income family benefits), and community-oriented, semi-governmental funded self-help initiatives (such as day care programs and community kitchens) [20]. [22] enumerated such community-based services in China to include day care centers, in-home care, community-sponsored meal programs, community kitchens, recreation centers, and mutual aid networks. They are funded by multiple community and governmental sources, including resources donated by individuals, local business owners, corporations, organizations, schools, hospitals and other social entities [23]. All these community-based services exist in many more countries around the world but unfortunately, there is none in Nigeria. The only available service that the government provides for the elderly -the pension scheme-is grossly inadequate in that it serves only a small percentage of elderly persons. The pension scheme is only for those elderly who have been engaged in public service therefore gender differences in the receipt of pension is significant as the cohort of elderly women today did not work in the public service and so are left out. Generally, majority of the elderly persons were engaged in self-employment before they retired so they are not covered by pension. Therefore they depend on private savings and investments or their children.

V. MERITS OF COMMUNITY-BASED SERVICES

Scholars are of the view that community-based services for elderly persons have a lot of advantages [20, 24-28]. For instance [20] reports that community-based services provide older people and their families with supplemental care and offer respite care and other needed supports that many adult children who work and/or live in distant cities cannot provide. Also community-based services enable older people to live at home on their own, or with their children, grandchildren or other relatives, they help in sustaining and preserving the functioning of older people, allowing them to age in place, and meet some of their long-term care needs. [26] reports that community-based services provide social and emotional needs that can help to alleviate feelings of loneliness, boredom, and solitude, and improve quality of life of older people. [24] stated that community-based services enable family members to lead normal lives, and encourage them to assume this responsibility for a longer period. [25], believe that community-based services relieve family members of care-giving stress and help in reducing absenteeism from work places of family caregivers. [20] stated that lack of adequate affordable elder care institutions and the weakened traditional family care-giving system have made community-based in-home care an appealing option in China. The merits are too numerous to say the least.

V. CONCLUSIONS AND RECOMMENDATIONS

Ageing has become a global phenomenon and indeed a critical policy issue receiving some recognition by governments of developed countries where it is reflected in the government’s vital document of economic and social development strategy. Globally, the greatest increase in the number of older people is occurring in the developing and middle income countries. Nigeria is not an exception. According to the United Nations criteria, a population is seen as “aged” when more than 7 percent of its members are aged 65 years and over, or more than 10 percent are aged 60 and over [29]. Nigeria still has a relatively “young” population when compared to most European countries and other countries where life expectancy is high. However, as medical advances allow people to live longer, the proportion of the elderly will increase in Nigeria also.

According to [30] publications it is evident that the population of Nigerians aged 60 years and above is already increasing. United Nations 2005 population profile shows that there were 5 million Nigerians aged 60 years and above in 2005 and the number will continue to increase. By year 2025, it is estimated that 6% of our population will be 60 years and above [30]. Accompanying this increase should be the awareness that an increase in the proportion of elderly people in any society indicates also an increase in the special problems that confront the elderly. This does not seem to be so in Nigeria, as there has been few or no programmes devoted to the elderly segment of the population [31]. Therefore in response to the growing population of elderly persons there is a growing need for social services. One way of doing this is for the Nigerian government to begin to consider adopting some of the community-based service model that exist in other countries. This way, elderly persons and their family members will not go through the stress of
care-giving without any community-based support. This study therefore recommends that given the peculiar cultural situation especially on the issue of institutionalization, it may be necessary for policy makers to consider establishing neighbourhood adult day care centres where elderly persons can meet each other during the day. Other services like medical, nutritional, recreational and educational services can also be incorporated into the neighbourhood day care centres. All these will go a long way toward helping elderly persons to age in one place.

The use of adult day care centers has been reported by many scholars to be very advantageous to elderly persons and their families. For instance [32] reported that use of day care centres led to lower emotional stress and deterioration of strain between caregivers and elderly parents. They also noted that the use of adult day care centers assist with the growing and stressful demands that are placed on caregivers. According to [33] the knowledge that an elderly relative is in a safe and controlled environment when he/she is at work leads to less stress on the part of the care giver. In his own contribution, [34] noted that regular attendance at adult day care centers contributes to the increased level of self-esteem among elderly women who are functionally limited both in their sense of mastery of life and situation, as well as in their self-evaluation. In their own study [35] reports that day care centres helps in exchange of information among the elderly. According to them, active exchange of information and experience and development of networks help elderly persons to learn about the happenings in the community. All these advantages and many more should spur policy makers towards considering establishing these neighbourhood adult day care centres.

REFERENCES


