

Dynamics of Ageing in Akoko Area of Ondo State Nigeria: Challenges of Public Welfare for the Aged

ديناميكيات الشيخوخة في منطقة أكوكو بولاية أوندو في نيجيريا: تحديات الرعاية العامة للمسنين

OLATUNDE, Oluwafemi Imisioluwa

Department of Sociology, Adekunle Ajasin University, Akungba-Akoko, Ondo State, Nigeria
firmfemiola@gmail.com

Accepted

قبول البحث

2023/12/9

Revised

مراجعة البحث

2023/11/5

Received

استلام البحث

2023/8/17

DOI: <https://doi.org/10.31559/CSSS2024.2.1.5>



This file is licensed under a [Creative Commons Attribution 4.0 International](https://creativecommons.org/licenses/by/4.0/)

Dynamics of Ageing in Akoko Area of Ondo State Nigeria: Challenges of Public Welfare for the Aged

ديناميكيات الشيخوخة في منطقة أكوكو بولاية أوندو في نيجيريا: تحديات الرعاية العامة للمسنين

Abstract:

Objectives: The purpose of this study is to investigate the dynamics of ageing in Akoko Land of Ondo State Nigeria and challenges of public welfare for the aged. The Study was anchored on disengagement theory to explain the inevitable process of disengagement as a rewarding and universal that must be mutually agreed upon.

Methods: Both quantitative and qualitative data were collected from randomly selected respondents and key informant participants numbering one hundred and forty (140). The quantitative data collected from 120 respondents were analyzed with statistical package for the social sciences, while the qualitative data collected from 20 participants were analyzed using content analysis.

Results: Findings revealed that the aged were relatively neglected in term of care and social security. Majority of the respondents 94.2% agreed that extended family system alone cannot stand as a social insurance for the aged. 90% agreed that improvement in the social care and security policies across public and private organization would help to alleviate most aged poverty level.

Conclusions: This study recommends, among others, that every family should extend mutual love and care gesture towards their ageing cohort, the aged should themselves engage in proper future savings and investments, while the society, through the non-governmental organizations (NGOs) and the Government should intensify their efforts to provide social security, public infrastructure, medical facility, prompt pension and retirement benefit payment in order to assure graceful ageing for every aged cohort in the society.

Keywords: Aging Dynamics; Welfare; Challenges of Welfare; Aged People; Akoko Land.

الملخص:

الأهداف: الغرض من هذه الدراسة هو دراسة ديناميكيات الشيخوخة في أرض أكوكو بولاية أوندو في نيجيريا وتحديات الرفاهية العامة للمسنين. وارتكزت الدراسة على نظرية فك الارتباط لتفسير عملية فك الارتباط الحتمية باعتبارها عملية مجزية وعالمية يجب الاتفاق عليها بشكل متبادل. المنهجية: تم جمع البيانات الكمية والنوعية من المجيبين الذين تم اختيارهم عشوائيًا والمشاركين الرئيسيين المخبرين الذين يبلغ عددهم مائة وأربعين (140). وتم تحليل البيانات الكمية التي تم جمعها من 120 مشاركًا باستخدام الحزمة الإحصائية للعلوم الاجتماعية، في حين تم تحليل البيانات النوعية التي تم جمعها من 20 مشاركًا باستخدام تحليل المحتوى.

النتائج: أظهرت النتائج أن كبار السن يتعرضون للإهمال نسبيًا من حيث الرعاية والضمان الاجتماعي. اتفق أغلبية المستجيبين (94.2%) على أن نظام الأسرة الممتدة وحده لا يمكن أن يكون بمثابة تأمين اجتماعي للمسنين. وافق 90% على أن تحسين سياسات الرعاية الاجتماعية والأمن عبر المؤسسات العامة والخاصة من شأنه أن يساعد في تخفيف مستوى الفقر لدى معظم كبار السن.

الخلاصة: توصي هذه الدراسة، من بين أمور أخرى، بأن تقوم كل أسرة بمد المحبة المتبادلة والرعاية تجاه فئتها المتقدمة في السن، ويجب على كبار السن أنفسهم الانخراط في المدخرات والاستثمارات المستقبلية المناسبة، في حين أن المجتمع، من خلال المنظمات غير الحكومية (المنظمات غير الحكومية) وينبغي للحكومة تكثيف جهودها لتوفير الضمان الاجتماعي، والبنية التحتية العامة، والمرافق الطبية، ودفع المعاشات التقاعدية واستحقاقات التقاعد بشكل سريع لضمان شيخوخة جميلة لكل فئة مسنة في المجتمع.

الكلمات المفتاحية: ديناميات الشيخوخة؛ الرعاية؛ تحديات الرعاية؛ كبار السن؛ أرض أكوكو.

1 Introduction

Universally, aged are usually the people who are above sixty years of age within a given population or society. The aged population globally is currently about 7.96 million, comprising of about 10% of the world population (United Nations Department of Economic and Social Affairs (UNDESA 2023); World Population Data Sheets (WPDS, 2022). However, the concept of “aged” is multidimensional, which includes chronological age (birth-date), biological age (human body ability), psychological age (psycho-emotional functioning) and social age (grandparents) (United Nation Development Programme (UNDP, 2022; World Bank (WB, 2020 & 2022). Aged are also recognized in terms of their needs, capabilities, lifestyles, experiences and preferences that are shaped by their age, gender, health, income, education, ethnicity and other factors. Aged are mostly the retirees and the dependant aspect of the society who have contributed immensely or meaningfully to the survival and the development of their society during their younger years. Aged percentage differs or varies from society to society and from time to time due to socio-economic and demographic behaviour of each society and other significant achievements of human development such as improved health, greater longevity and lower mortality (UN 2022; UNDESA 2023; Dugarova & Gülasan 2017). This imply that the plight of the aged within a society depends on the country level of development and category. Nigeria and most societies in Africa are regarded as ‘young’ and youthful societies.

The aged in Nigeria constitute about 3-4% of the total population like most country in West Africa except Carbo-Verde and Ghana with 6% and 4% respectively (WPDS, 2022; Nigeria Population Projections (NPP,2020). However, other African countries have increased aged population, for instance Tunisia had 9% Morocco 8% and Algeria 6% in the North, while Mauritius had 12%, Reunion 14% and Seychelles 12% from the East African (WPDS, 2022). This indicated that most African societies consist of more young, energetic, and vibrant youth-population that engages in active services, while the aged are fewer in numbers and sizes. Despite the acknowledgement of aged importance which has led to the recognition of their rights by most international mechanisms and initiatives. Most aged who are no longer active agents of social change, economic emancipation, and national development, are mostly neglected or regarded as insignificant. Some societies described them as essential impediment to societal development rather than being carried along in the developmental policy and discourse, to properly address and negotiate for their needs and rights (UN 2022; UNDESA 2023; UNDP 2016; UNFPA & Help-Age International 2017/18).

However, age stratification varies from society to society and such is the case of the aged public and family welfare. It is surmise that while the developed societies treat their aged with great reverence, developing societies neglected their aged as unproductive impediment. This shows that it is the society that determine the type of care and social security to be directed towards the aged (Dikeocha, 2015). Thus, the major problems facing the aged- population have not received the required attention they deserve in Africa and Nigeria, in particular. Developed societies like the United States of America (USA), China, Japan, Sweden, France etc., are regarded as matured and aged societies because of the larger numbers of the aged in their population. These societies have provided policies and programmes that have assisted in solving most aged challenges and difficulties through adequate health-care and technological advancement (WPDS, 2022; Ajomale,2004).

Americans and most western societies use to have fewer aged population like most Africa societies before the American Revolution of 1725-1783. Currently and amazingly, adequate technology, Western medical care, socio-economic and political policies in place has aided life-expectancy greatly to about 79years in the 20th Century (WPDS,2022; Hess, 2008). Thus, life-expectancy in most developed societies is high compared to that of the developing and least developed nations. For example, life expectancy in China, Hong Kong Sari and Japan, 85years; Iceland 83, Demark, Finland and Ireland is 82; The USA, 76years; Canada, 82years; Israel, 83years; Singapore, Malta, and Switzerland, 84; San Marino, 87; United Kingdom (UK) and Cyprus, 81years; while that of Nigeria is 54years, Ghana, 64years; the Sudan, 65years; Algeria, 76; Egypt, 75; Gabon, 66; São Tomé and Príncipe, 68; Réunion, 80; Mauritius, 74; Botswana, 61; South Africa, 62 etc. (WPDS, 2022). The developed nations and some developing societies had achieved these statuses because of the love and passion toward the aged in their societies. These societies focus on better ways to solving and aiding the aged with the greater recognition, respect, and regard from both the government and voluntary organizations toward the aged in such societies (WB, 2020; ILO, 2014).

Contrarily, Africa and Nigeria society attention was rather shifted to the young and youthful population that is regarded as economically “active sectors” at the expense of the ageing population. This was also supported by the argument that African societies have limited or inadequate resources and the little available resources should not be wasted on the ageing population who are seen as inactive and insignificant to the society’s development. Rather, such scarce resources were directed towards the positive development sectors which consist of the youth than those of the aged, thus, most people are afraid of growing old (Iruonagbe, 2005). Probably, because the society belief and expect the immediate children and the extended-family members alone to take care of the aged in Africa custom.

1.1 Statement of the Problem

The problems facing the aged in Nigerian society emanated from the changes in the structure of the family system and the absence of any social security support programmes from the government (UN 2017; Dikeocha,2015). For example, the traditional family system, in Nigeria consists of the extended-lineage members such as parents, grand-parent, aunties, uncles, brothers, sisters, cousins, nephews, nieces etc. The system serves as a “social insurance” or traditional safety-net, for the aged. Family members, especially adult-male children, form the bulwark of informal support for the aged. This shows that the care of the aged is a value that is customarily rooted, highly observed and well respected in Nigerian society before the advent of the Europeans.

Much scholarly work has not been done on the dynamics of ageing and challenges of social welfare. The few scholars who have attempted researching into this area are Jones (2007) 'A Journey through the Years: Ageing and Social Care' where he analyses the history of English social care philosophy, policy, and institutions since the late seventies, and the challenges of today which they have helped to shape. He found that from 2005, the challenges of ageing and social care was defined more in terms of improving the broad wellbeing of older people and finding new ways of contributing to it, particularly to reduce their subsequent need for services. Also, Bloom, Jimenez, and Rosenberg (2011) in a working paper titled 'Social Protection of Older People', opined that government activity aimed at ensuring that vulnerable population groups must receive appropriate and effective public support to ensure the financial security and safeguard the aged health. However, despite the growth and extent of social protection programmes in both developed and developing countries, most emerging economies have nascent systems and only a small portion of all such efforts address the specific vulnerabilities and needs of aged.

While the aforementioned studies are valuable and informative, there are still large gaps in the age care and social welfare in Nigeria. Though, the above studies were conducted in different cultural settings, few studies that were conducted in similar cultural setting to the study area includes the work of Ajomale (2004) and Iruonagbe (2005), deviated from the variables under consideration. Therefore, these studies cannot be used to generalize the aged social care and security in Nigeria. Hence, it will be of great importance to conduct research on this.

Based on the above information, the paper is set to answer the following questions: How is the social care of the ageing population in Akoko? What is the societal attitudes towards the aged? and; What are challenges facing the aged in the Akoko land? Therefore, this paper examines the dynamics of ageing and the challenges of public welfare for the aged in Akoko, Ondo State Nigeria as general objective, by interrogating the aged to understand the available social care of the ageing population, examine the societal attitudes towards the aged, and challenges facing the aged in the study area.

1.2 Method

The paper being an empirical study adopted mixed methods of research to elicit information from the respondents who were randomly selected from two Local Government Areas in Akoko land. The Local Government Areas are: Akoko South-West and Akoko North-East Local Government Areas (LGAs) of Ondo State. Four major towns were purposively selected from the two Local Government Areas, and these towns constitute the population of the study. The towns are: Oka-Akoko, and Oba-Akoko from Akoko South-west; Akungba-Akoko and Ikare-Akoko from Akoko North-east. The selection of these towns is predicated upon the fact that they are among the fast developing urban area in Akoko land in term of population, institutions, health care facility etc., The sample size for this study is one hundred and twenty (120) respondents and twenty (20)

key informant participants who were randomly selected from the four purposively selected towns in both Akoko South-west and Akoko North-east LGAs. Questionnaire Schedule (QS) and Key Informant Interviews (KIIs) were employed in data-collection. The instrument was divided into sections based on the objectives of the study. The result of data was collected, collated, analyzed and interpreted using content analysis and the SPSS model.

2 Theoretical Framework: Disengagement Theory and Aged Public Welfare

Disengagement theory by Cummings and Henry (1961), was employed to explain the inevitable process of disengagement as a rewarding and universal which must be mutually agreed upon. The withdrawal of the aged from the society allow for a better replacement since advancing in age is normal and to be expected. People tend to lose some amount of strength, skills and knowledge gained as part of the workforce when they aged. Aged also lose credibility and respect on a personal level in family and friend relationship after retirement. The theory is beneficiary to both the individual and the society where such disengagement takes place, because it will minimize the social disruption that may occur when an aged eventually died. While retirement/disengagement enables the aged to be freed from the roles of occupation and thus may pursue other roles not necessarily aligned to full-pay of economic generation, it also enables the society to bring in young blood into full participation within the social world. It is surmise that disengagement is graded to suit the declining biological and physical capacities of the aged and the society needs. Thus, the society that disengage the aged from their social roles has also prepare a replacement to function in their absent. The study, therefore, conceives disengagement/replacement as a systemic normative model adopted from the developed societies which have to move simultaneously. It imposes Western-values and policies on the developing nations which, later, resulted in political, social and cultural change. It also, identifies lack of industrialization as the major causes of aged insecurity and lack of public welfare in developing countries. It uses differential value and systemic immaturity peculiar to the developing countries, as key-points in explaining inequality in the aged care and social security. Thus, for disengagement too. be objective and value free, government should legitimize public welfare and social security for the aged in the society.

The theory is criticized for failing to consider the aged social care, locality and security as a centerpiece of initiating the disengagement policy. For instance, Akoko being a large Yoruba cultural subgroup spanning from Ondo northeast to Edo southwest Nigeria, has population of about 20.3%. The area housed other ethnic grouping and cover four out of the eighteen local government in Ondo state and Akoko Edo local government in Edo State. Aside from the State university and State hospital sited in the area there is yet no other public or joint stock enterprises to raise the populace living standard. Thus, most retirees and other aged can only fall back to farming, petty trading, security guard or be at the mercy of their children and relative for sustenance as their pension and gratuity are either delayed, if, not denied. Ignoring the aged social care and security policy by state and federal government after deprivation of their prompt entitlement may degenerate into social chaos. Aged knowing there may be no support or any intervention strategies either from the society and other former organization may indulge in impersonation, age reduction and other self-corrupt imposed strategy as result of inadequate disengagement policy. However, such strategy fails to construct adequate notions of both the aged, social structures, social institutions and the role of human agency in shaping social relations in general.

Also, disengagement theory oversimplified view of social change (Coetzee, Graaf, Heindricks & Wood 2007). Human nature has a propensity to resist change in favour of the status quo, special interest and attempt at preserving their social status and expected roles (Matunhu, 2011). Change is resisted because it brings in elements of uncertainty. Another intriguing weakness of the disengagement theory is that it is based on deterministic reason which states that within the linear model of socio-economic empowerment, changes are initiated externally. The determinist reason gives little room for the expected reciprocal social care and security relationship for the disengaged aged by the society. The premise encourages the social institution to neglect the disengaged aged in the society.

Nevertheless, disengagement theory is considered relevant to this work because it explains the mode and the manner of transformation which an external influence like the larger society and government policy have over the aged social care and security. Initiating a disengagement policy and its complementary retirement benefits (pension and gratuity) is expected to have positive improvement on the aged socio-economic life,

longevity and sound healthy living. Therefore, adequate retirement policies must go along with better social care and security for the retiree and other aged, in other for them to enjoy a commensurable life after retirement. However, it is imperative to acknowledge the fact that disengagement enables continuity as the younger population takes over from the retired aged with modern experiences and stronger commitment

3 Discussion

3.1 Demographic Characteristics of the Respondents

Table 1: Sociodemographic Characteristics of Respondents and Participants ($n = 120$)

	Total N = %		Male N = %		Female N = %		p
	120	100	76	63.3	44	36.7	
Age							
18-37 years	30	25.0	19	15.8	11	9.2	
38-57 years	40	33.3	25	20.8	15	12.5	
58 years above	50	41.7	32	26.7	18	15.0	
Marital status							
Single	34	28.3	21	17.5	13	10.8	
Married	66	55.0	42	35.0	24	20.0	
Divorced	12	10.0	08	6.7	04	3.3	
Others	08	6.7	05	4.2	03	2.5	
Educational background							
No formal	10	8.3	04	3.3	06	5.0	
Primary	22	18.3	14	11.7	08	6.7	
Secondary	38	31.7	26	21.7	12	10.0	
Tertiary	50	41.7	32	26.7	18	15.0	

Source: Author's Field Work (2023)

The sample of 120 respondents was made up of 76 (63.3%) males and 44 (36.7) females. The age distribution shows that 30(25%) of the respondent were between the age range of 18 to 37 years. Specifically, 40(33.3%) were between the age range of 38 to 57 years, while 50(41.7%) of the were aged within 58years and above. The marital status distribution showed that 34(28.3%) were single, 66(55.0%) were married, 12(10.0%) were divorced, while 8(6.7%) were in other forms of status outside the listed. Educational distribution of respondents revealed that 10(8.3%) had no formal education. 22(18.3%) had primary education, 38(31.7%) had secondary education, while 50(41.7%) had tertiary form of education.

3.2 Social Care and Security on the Ageing Population

Table 2: Reaction on Aged Social Care and Security ($n = 120$)

	Total N = %		Male N = %		Female N = %		P
	120	100	76	63.3	44	36.7	
Questions							
Does aged enjoy their family company?							
Yes	106	88.3	67	55.8	39	32.5	
No	14	11.7	09	7.5	05	4.2	
Are children excited being around the aged?							
Yes	110	91.7	69	57.5	41	34.2	
No	10	8.3	07	5.8	03	2.5	
Are aged held in love and treated with absolute respect?							
Yes	108	90.0	68	56.7	40	33.3	
No	12	10.0	08	6.7	04	3.3	
Is family the most natural and conducive social organization for aged care.?							
Yes	114	95.0	72	60.0	42	35.0	
No	06	5.0	04	3.3	02	1.7	
Can extended family system alone stand as a social insurance for the aged.							
No	113	94.2	72	60.0	41	34.2	
Yes	07	5.8	04	3.3	03	2.5	

$X^2=103.830, p < 0.01$

Source: Author's Field Work (2023)

Findings on social care and security towards the ageing population showed that 88.3% of the respondents agreed that aged enjoy the company of their family, 91.7% affirmed that children are excited being around the

aged. 90% maintained that aged are held in love and treated with absolute respect. 95% consented that family is the most natural and conducive social organization for the aged care. Also 94.2% confirmed that extended family system alone cannot stand as a social insurance for the aged. ($X^2=103.830$, $p < 0.01$). An excerpt from one of the KIIs shed light on the participant observation of social care and security of the ageing population:

In about five decades ago the condition of the aged in Akoko land was so encouraging and enjoyable. Most times, the aged enjoy the company of their immediate and grandchildren and other extended family members, not only during festival period but because they are always around to care for them and seek their advice. The aged are held in love and treated with absolute respect because family has been the most natural and conducive social organization for the aged care. The aged also acted as decision-makers, mediators, advisers and embodiment of cultural history both in the families and communities. (KII Male participant, Aged 69 years).

A respondent put in her words said:

The aged then are believed to be the epitome of wisdom, custodian of tradition and reservoir of knowledge because they have passed through various stages of life, and thus, could give vivid accounts of their experiences. They were believed to represent knowledge and wisdom because of their experiences and exposure to other stages of life. Aged represent the repertoire of life as their social condition is more or less an eye-opening matter or relic of their youth. Any society that neglects or rejects its aged is doomed, as their experiences and knowledge are of great relevance to society (KII Female participant, Aged 45 years)

In another view extracted from a retiree aged male in his compound in Akungba Akoko Aged in the land are more often held in high esteems while their judgment and pronouncement is belief to be right, fair, and just. Their authority is never challenged. They are usually the head of the households, and, are usually consulted on most special cases that concern the family or society. (KII Male participant, Aged 67 years)

This shows that aged does not only attracted respect, but also goes alongside with care, value and viable security from both family and society in Akoko land. So, one of the effect of modernization is the changes in the cultural norms and values which is now affecting the aged lifestyle and necessary care from both family and society.

3.3 Societal Attitudes Towards the Aged

Table 3: Report on Societal Attitudes Towards the Aged ($n = 120$)

Questions	Total N =%		Male N = %		Female N =%		P
	120	100	76	63.3	44	36.7	
Are aged confide to solitary home?							
Yes	114	95.0	72	60.0	42	35.0	
No	06	11.7	04	3.3	02	1.7	
Has modernization taken authority and power away from the aged?							
Yes	104	86.7	66	55.0	38	31.7	
No	16	8.3	10	8.3	06	5.0	
Has urbanization taken away children from the aged?							
Yes	108	90.0	68	56.7	40	33.3	
No	12	10.0	08	6.7	04	3.3	
Are authority given to most qualified persons?							
Yes	112	93.3	71	59.2	41	34.2	
No	08	5.0	05	4.2	03	2.5	
Does education determined socio-economic position, and political affiliations rather than on age?							
Yes	115	95.8	73	60.8	42	35.0	
No	05	4.2	03	2.5	02	1.7	
Has modern societies shifted power and authority vested in the aged to a legal-rational power and authority							
Yes	110	91.7	70	58.3	40	33.3	
No	10	8.3	06	5.0	04	3.3	
Does poor aged suffered rejection from family and society at large?							
Yes	108	90.0	69	57.5	39	32.5	
No	12	10.0	07	5.8	05	4.2	

$X^2=81.315$, $p < 0.05$

Source: Author's Field Work (2023)

Findings on the societal attitudes towards the ageing population shows a drastic change from the expected cultural supportive and protective attitudes to a negligence. Majority of the respondents 95% agreed that most aged are confide to solitary home, 86.7% of the respondents attested that modernization has taken authority

and power away from the aged. 90% claimed that urbanization has taken away many children from the aged, 93.3% also confirmed that positions of authority are now given to most qualified persons. 95.8% of the respondents affirmed that level of education determined the socio-economic position, and political affiliations rather than age. 91.7% of the respondents also reaffirmed that modern societies have shifted power and authority vested in the aged to a legal-rational power and authority. 90% equally maintained that most poor aged now suffered rejection from family and society at large.

An excerpt from one of the KIIs shed light on the participant observation of changes in social attitudes towards the ageing population.

“Changes in societal attitudes towards the aged is obvious, most traditional, religions and family positions reserved for the aged then are now changing. Authority, love, care, and support for the aged which often increased with age within the family and society at large has decreased. Thus, most poor aged are left to the mercy of available good Samaritan or face the challenges alone as the case may be”. (KII Male participant, Aged 57 years)

A respondent maintained that:

“The inadequate attitude from the society and family towards most aged has reduced the care and security expected by the aged and their cohort. The necessary financial help, required care and constant visitation from immediate and extended family members or the society delegates expected to increase aged social wellbeing has gradually declined. Thus, most aged, especially the widowed are compelled to solitary or life of loneliness. As they are denied the presence of people, expected social care, and needed security that may likely impacted their life positively in the society”. (KII Female participant, Aged 52 years)

These findings implied that the attitude of the society towards aged in Akoko land some decades ago has change tremendously from the area of authority, social care and security. Thus most aged now faced rejection as a result of negligent that arises from social movement and economic down turn of most family income. Also, the educational attainment, political affiliation and economic strength of most people has placed them in better social and economic positions and thus reduced the aged value and position in Akoko land. The chi-square test on the social attitudes towards the aged shows that 90.4% of the respondents agreed to the fact that the attitude of the society and family towards the aged has reduced the care and security expected by the aged and their cohort. ($X^2=81.315$, $p < 0.05$).

3.4 Challenges Facing the Aged in The Society

Table 4: Report On Challenges Facing the Aged in The Society

Questions	Total N =%		Male N = %		Female N =%		P
	120	100	76	63.3	44	36.7	
Are aged facing immense challenges because of irregular retirement-benefits?							
Yes	114	95.0	72	60.0	42	35.0	
No	06	5.0	04	3.3	02	1.7	
Is lack of financial empowerment programmes and inadequate financial strength of the family members a challenge to the aged?							
Yes	111	92.5	70	58.3	41	34.2	
No	09	7.5	06	5.0	03	2.5	
Can improvement in the social care and security policies across public and private organization would help to alleviate the negative impact of poverty on most aged?							
Yes	108	90.0	68	56.7	40	33.3	
No	12	10.0	08	6.7	04	3.3	
Are aged living in poor environment that lack basic infrastructural facilities?							
Yes	112	93.3	71	59.2	41	34.2	
No	08	5.0	05	4.2	03	2.5	
Are aged who tried to re-engaged given hazardous jobs like neighbourhood watch, night guard?							
Yes	115	95.8	73	60.8	42	35.0	
No	05	4.2	03	2.5	02	1.7	
Are most Aged resorted to drug-abuse (self-medication) and alcoholic drinks, etc, to relieve them of their emotional trauma, loneliness, and depression							
Yes	117	97.5	73	60.8	44	36.7	
No	03	2.5	03	2.5	-	-	
$X^2=103.830$, $p < 0.01$							

Findings on the challenges facing the aged in the society shows that 95.0% of the respondents agreed that the aged are facing immense challenges because of irregular retirement-benefits for the retirees, 92.5% both attested to lack of financial empowerment programmes from the society and inadequate financial strength of the immediate and extended family members as a challenge to the aged. 90.0% of the respondents affirmed that improvement in the social care and security policies across public and private organization would help to alleviate the negative impact of poverty on most aged. 93.3% consented that many aged are living in poor environment that lack basic infrastructural facilities, 95.8% confirmed that aged who tried to re-engaged are given hazardous jobs like neighbourhood watch, night guard etc. depending on their capabilities. 97.5% finally reaffirmed that most aged resorted to drug-abuse (self-medication) and alcohol addiction, etc. to relieve them of their emotional trauma, loneliness, and depression.

An excerpt from one of the KIIs shed light on the participant observation of challenges facing the ageing population:

“Many aged challenges emanated from Western system acculturation which has totally broken the extended family bond and feelings for the aged. Thus, most youth are in the city struggling while their aged parents are confined to solitary living and loneliness with no one to run errand for them. As a result of this, many of the aged are going through a lot of trauma, both socially, psychologically, economically and also in the area of health-care services’ delivery”.

(KII Male participant, Aged 65 years)

“Aged challenges range from irregular retirement-benefits, inadequate financial empowerment programmes, poor financial status of the immediate and extended family members. unstable economic situation, loneliness etc. Most poor aged who live in poor environment lack basic infrastructural facilities, patronizes traditional method of healing process over the non-affordable orthodox health care system, re-engaged in hazardous jobs like neighbourhood watch, night guard etc. to earn a living while others resorted to drug-abuse and alcoholic addiction” (KII Female participant, Aged 60 years)

This implied that the society has turned most aged into a dependent insignificant but essential impediment to social change. They have easily forgotten their meaningful and immense contribution towards societal development in their younger years.

The implication of this on the aged health is further ill-health and untimely death ($\chi^2=103.830$, $p < 0.01$). An excerpt from one of the KIIs shed light on the participant observation of changes in social care and security of the ageing population.

4 Conclusion

Evidently, for an aged life to be devoid of pain and suffering in Nigeria, such individual must have design a way out from the onset. Nigeria is yet to enact a National Policy on the care and welfare of the aged even though the National Social Development Policy (NSD.,1989) stipulated and allocated some objectives in respect of the aged. However, the Africa Union Framework Policy on care and welfare for the aged in Abuja, Nigeria’s capital city, in August, 2006, also developed a comprehensive policy to be forwarded to the National Assembly for ratification and subsequent implementation.

At the moment of the study, there is no Social Scheme Policy for the aged apart from the Contributory Pension Scheme with 7.5% contributions each to be paid by the employer and the employee. Invariably, this affect only those in the formal sector, thus, artisans, farmers, fishermen, commercial drivers, etc. are not included in any organized scheme of social security for the aged except those with individual investments in form of shares, stocks, bonds. There is need for tax-relief in respect of maintenance of close relatives such as widowed aged, and others incapacitated by old age or infirmity.

4.1 Recommendations

To improve the living condition of the aged just like the developed society, the paper made the following recommendations:

- Government and other non-governmental agencies must put in place better polices that will enhance the care, welfare and lives of the aged.
- Adequate and improved pension schemes must be made readily available to all retirees.

- Government must also ensure that people whether in the public or private sector begin to enjoy free medical care as soon as they reach the generally accepted age of retirement which is put at 60 years in the Civil Service.
- Government and other private organizations or NGOs can help establish some old people homes for those who wish to reside there, especially for those who have no family members to look after them.
- Family must contribute its role as the cornerstone of all human societies i.e. family-members should be closer to the aged, while their children (irrespective of the unfavorable economic situation in the country) should begin to be more responsive and also attend to the emotional needs of their parents and also providing for their need.

4.2 Funding

This study received no specific financial support.

4.3 Competing Interests

The author declares that there are no conflicts of interests regarding the publication of this paper.

References:

- Ajomale, O. O. (2004). *Socio-Economic factors that determine the Health and Social Well Being of the Elderly in Ibadan, Nigeria*. The need for Social work Intervention.
- Coetzee, K.J., Graaf, J., Heindricks, F., & Wood, G. (2007). *Development: Theory, policy and practice*. Cape Town: Oxford University Press.
- Cumming E, & Henry, W, E. (1961:1964). "New Thoughts on the theory of disengagement" in: Kastenbum, R J. Editor, *New Thought on Old Age*. New York Springer.
- Dikewoha, P. (2015). *Dumped at Sunset: Abandoned Old People Lament Their Desertion by Kith and Kin*. *The Nation* (Sat, Nov 7: 2, 4 & 5).
- Dugarova, E. & N. Gülasan. (2017). *Global Trends: Challenges and Opportunities in the Implementation of the Sustainable Development Goals*. Joint report by the United Nations Development Programme and the United Nations Research Institute for Social Development. New York: UNDP and Geneva: UNRISD.
- Erinosh, A.O. (2005). *Sociology for Medical, Nursing and Applied Professionals in Nigeria*.
- Help-Age International. (2016). *Work, family and social protection: Old age income security in Bangladesh, Nepal, the Philippines, Thailand and Vietnam*. East Asia/Pacific Regional Office. Help-Age
- International and Internal Displacement Monitoring Centre (IDMC,2012). *The neglected generation: The impact of displacement on older people*. Help-Age International and IDMC
- Hess, B. (2009). *Microsoft Encarta DVD, Redmond, W.A. Microsoft corporation*. (Sat, Nov 14:2015)
- International Labour Organization. (ILO, 2014). *World Social Protection Report 2014/15: Building economic recovery, inclusive development and social justice*. Geneva: ILO.
- Iruonagbe T.C. (2005). *The Fear of Growing Old, Lessons from Nigeria*. A paper presented at the International Conference on Human Development, Covenant University, Otta, Ogun State, Nigeria, 27-30 June
- Matunhu, J., (2011). A critique of modernisation and dependency theories in Africa: Critical assessment. *African Journal of History and Culture*, 3(5), 65-72.
- National Population Projection (NPP, 2022). *Nigeria Population Projection and Demographic Indicators-State and National*. Abuja.
- United Nations Department of Economic and Social Affairs. (UNDESA, 2022). *World Population Prospect: Summary of Results*. New York: USA
- United Nations Department of Economic and Social Affairs. (UNDESA, 2023). *World Social Report 2023: Leaving No One Behind in an Ageing World*.
- United Nations Development Programme. (UNDP, 2016). *Leave No One Behind: Ageing, Gender and the 2030 Agenda*. Issue Brief. New York: UNDP.

United Nations Development Programme Annual Report (UNDPAR, 2022). *The Future Is Hopeful Help-Age International annual report review (2017/18)*. Strengthening the right of older people, globally and in the middle east

United Nations Population Fund (UNFPA) and Help-Age International (2012). *'Ageing in the 21st century' A celebration and a challenge*. New York: London.

World Economic and Social Survey (WESS, 2007). *Development in an Ageing World*. New York: United Nations.

United Nations (UN, 2017). *Monitoring of population programmes, focusing on changing population, age structures, and sustainable development, in the context of the full implementation of the Programme of Action of the International Conference on Population and Development Report of the Secretary-General*. E/CN.9/2017/3. New York: United Nations.

World Bank Group. (WBG, 2016). *Global Monitoring Report: Development Goals in an Era of Demographic Change*. Washington, DC: World Bank.

World Population Data Sheet (WPDS,2022). *Special Focus on the Demographic Impacts of Covid-19*.