

Public Awareness and Perception on Care for the Elderly among Funtua Residents in Katsina State, North-west Nigeria

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Abstract The population of the elderly is rapidly increasing globally and there is need to meet up with the special needs and requirements that are unique to them. This study aimed at evaluating public awareness and perception towards care for the elderly. A cross-sectional descriptive survey design was used to administer questionnaire to the participants. Cluster method was used to select 3 out of the 5 wards and 150 participants were recruited for the study using purposive and convenience sampling techniques. A structured questionnaire was used to collect data. Data obtained were analyzed using Statistical Package for Social Sciences (SPSS) Version 20. Descriptive analysis was computed on dependent and independent variables. The result shows that majority of the participants (90%) have relatively good knowledge of the basic care of the elderly, with high positive attitudinal predisposition towards and preference to care for their aged people in their (participants') homes rather than to be nursed in institutions such as nursing homes (92%). Despite the relatively good knowledge and positive attitudes expressed by the participants toward the care for older people, significant efforts are required to health educate the public about the activities of daily living and needs and other specific ways of caring for elderly people, especially those with chronic illness.

Keywords: *public awareness, perception, aged people, care for the elderly, Katsina*

Cite This Article: Shiaka N. Michael, Anyebe Ejembi Emmanuel, Danjuma Aliyu, Munir Ali Salga, and Afiniki B. Saleh, "Public Awareness and Perception on Care for the Elderly among Funtua Residents in Katsina State, North-west Nigeria." *World Journal of Preventive Medicine*, vol. 4, no. 1 (2016): 20-24. doi: 10.12691/jpm-4-1-4.

1. Introduction

Ageing is a universal experience that resulted from significant changes that affect all aspects of the aged person's life, many of these developed changes faced by elderly people are due to social, psychological, and biological problem that have accumulated over the course of their entire lives [1].

Population ageing is a global phenomenon that is a natural evolution of civilization, bringing a number of problems, but also opportunities and challenges. The numbers of elderly people has increased in recent years and many of them need assistance and care in a healthy and safe environment [2]. As the population of the aged peoples continues to increase, the demographic transition affect families and societies globally [3,4,5]. It was reported that, in 2006, 64% of the worldwide population aged 60 and older resided in middle and low income countries, and this proportion is projected to increase to nearly 73% by the 2030 [4].

According to data from the United Nations Population Division (2008), the percentage of older people in the total population was 15.3 % in 2005 and by 2025; it is estimated to have increase to 20.8% of the total population in developed countries [6]. Whereas in Sub-saharan Africa it is estimated that the the population of aged people will increase from 46 million in 2015 to 157 million by 2050 [6]. Nigeria has the largest number of the older population in Sub-Saharan Africa, with 6.6 million people aged 60 and over in 2006, and it ranks among the top 20 countries in the world in the size to have this population. The 2014 estimated population of Nigeria shows that elderly people 65 years and above account for 3% of the total Nigerian population, of which females are 2,861,826 and males are 2,621,845 [7].

The decline in overall function of people as they aged may result in worsening chronic diseases, culminating in the loss of various life activities [8,9,10,11]. It is clear that the care of older people globally is an important issue, and the need for governments to adequately make provisions to care for the growing number of older adults is crucial [12,13,14,15].

A study by Wolinsky [16] established that, most of the elderly people prefer to remain in their various homes than to be cared for at nursing homes. This is because they are able to maintain the integrity of their social network, preserve environmental landmarks and enjoy a higher quality of life.

The type, frequency, and intensity of care/needs of the elderly people varied from assistance for a few hours each week to full-time support [17]. The cares spans through three realms: (a) assistance with essential, routine activities such as eating, bathing, dressing, and tasks required to maintain independence, such as preparing meals, managing medications, shopping for groceries, and using transportation; (b) housing; and (c) medical care [18]. Equally, care for the elderly can be provided in a variety of settings, including recipients' homes; group living arrangements such as congregate housing, adult foster care, residential care and assisted living facilities and community settings such as adult daycare and adult day health centres [18].

Traditionally, care for the elderly people in Sub-Saharan Africa has been the responsibility of family members and were being provided at homes. In developed nations, elderly care is often being provided by the State as part of the social security for the seniors, in nursing homes or charitable institutions. The reasons being the decreased family size, increasing life expectancy of elderly people, the geographical dispersion of families, the tendency for women to be educated, work outside the home [19], changes in the way societies view their elderly and the increase political voice on the elderly people [20]. The call for integrated care for the elderly has become a major theme in healthcare reform because of well-documented issues surrounding the poor quality of care being delivered to those with chronic conditions. Health delivery systems and organizations that developed cares in response to meeting acute care needs of the elderly people have been criticized for issues such as fragmentation, wasted resources and poor outcomes for those with chronic conditions [21]. Subjective observations revealed poor knowledge and attitude towards caring for the elderly among Funtua residents. It is against this background that this study was design to describe public awareness and perception towards care for the elderly in Funtua, Katsina State, North-west Nigeria.

2. Methods and Materials

2.1. Setting

Funtua is a town and a Local Government Area (LGA) in Katstina State, Nigeria. Funtua has an area of 448km² and a population of 225,571 at the 2006 census and 420,110 in 2012 estimated census [22]. The inhabitants of the local government are predominantly Hausa and Fulani by tribe. There are also Yoruba, Igbo, Southern Kaduna, Tiv, Igala, Idoma, Nupe, Kanuri among others. There are various communities under this LGA and they include Tudun-Wada, BCGA, Jabiri, Makera, Sabon Layi and so on. Their main occupation includes trading, farming and animal rearing. As a result of advancement, the youths get involved in computing, research, transportation, civil

service, to mention but a few [23], but it remains a traditional setting.

2.2. Study Design

A cross-sectional descriptive survey was used to carry out the study between September and October 2015.

2.3. Sample

Cluster method was used to select 3 out of the 5 cluster wards and 150 participants were recruited for the study using purposive and convenience sampling techniques.

2.4. Data Collection Tools

A questionnaire developed by the authors from review of relevant literature was used for data collection. The questionnaire is divided into four (4) sections was used to collect data. The tool had Sections A, B, C, and D. Section A was on socio-demographic profile of participants;, Section B consisted of questions on knowledge about care of the elderly;,, Section C elderly care and Section D on how they would want their elderly to be cared for.The tool was pretested prior to administration, and minor adjustment made. One hundred and forty seven of the 150 questionnaires administered were returned and valid for analysis giving a response rate of 98%.

2.5. Data Analysis

Data collected from the participants were coded, inputted and analysed using SPSS Version 20 for windows. Categorical data was expressed as frequency and percentages while continuous variables, were expressed as mean \pm standard deviation.

3. Results

Data obtained showed that most of the participants were females (n=78, 53.1%) and are married (n=86, 58.5%), and relatively young. (Means age of participants was 31.7 years; SD \pm 8.27). The participants' occupational profile showed that they were mainly civil servant (53, 36.1%); business people (44, 29.9%); students (37, 25.2%) and house wives (13, 8.8%). Most participants (77, 52.4%) possessed tertiary qualification (see Table 1).

3.1. Awareness on the CARE for the Elderly

As indicated in Table 2, majority (126, 85.7%) of participants reported having at least an elderly person in their homes that they care for; most (132, 89.8%) of them depicts that they were aware about the care required by the elderly people. In terms of the participant's knowledge on the concept of care for the elderly, 62.9% of them signified that fulfillment of the special needs and requirements that are unique for aged people as the concept that defined care for the elderly. On the benefits of caring for the elderly, vast majority (96, 87.3%) of participants affirmed that it improves the quality of life of the elderly, and makes them feel beloved (91, 82.7%).

Table 1. Participant's socio-demographic data (n=147)

Variable	Frequency	Percentage
Age in years		
18 - 25	42	28.6
26 - 33	45	30.6
34 - 41	38	25.9
42 - 49	22	14.9
≥50	0	0
Gender		
Male	69	46.9
Female	78	53.1
Marital status		
Single	50	34.0
Married	86	58.5
Divorced	5	3.4
Widow	6	4.1
Ethnic group		
Hausa	99	67.4
Igbo	4	2.7
Yoruba	20	13.6
Others	24	16.3
Respondents occupation		
Civil servants	53	36.1
Business	44	29.9
Student	37	25.2
House wife	13	8.8
Highest educational qualification		
Primary	19	12.9
Secondary	37	25.2
Tertiary	77	52.4
Non-literate	14	9.5

Table 2. Participants awareness on the caring for the elderly at home

Variable	Frequency	Percentage
Do you have an elderly person at home that you cared for? (n=147)		
Yes	126	85.7
No	21	14.3
Are you aware of any care for the elderly people (n=147)		
Yes	132	89.8
No	15	10.2
Knowledge on the definition of care for the elderly (n=132)		
Fulfillment of the special needs and requirements that are unique for aged people	82	62.9
Respect and love for the elderly ones	30	22.7
Feeding the elderly ones	19	14.4
Benefits of caring for the elderly		
It improves their quality of life	96	87.3
It makes them feel more loved	91	82.7
It prevents them from fall	41	37.3
Types of care render to the elderly at home (n=139)		
Formal long term care	40	28.8
Informal long term care	91	65.5
Geriatric institutional care	8	5.8
No response	8	5.8

3.2. Perceived Care towards the Elderly

Eight variables were used to obtained data from the participants about their perceived care towards the elderly

(Table 3). Majority (133, 90.5%) of participants affirmed that they like caring for the elderly at home, preferring their elderly ones to stay with them (131, 91.6%). In addition, (115, 82.1%) of the participants would not want their elderly people to be cared for in institutions such as

nursing homes. However, a good number (124, 88.6%) of participants indicated that they need additional assistance in caring for their elderly ones. The findings also revealed

that most (84, 57.1%) of participants perceive that other family members would also prefer that the elderly be cared at home.

Table 3. Participants perceived care towards the elderly (n=147)

Variable	Frequency	Percentage
Do you like caring for the elderly (n=147)		
Yes	133	90.5
No	14	9.5
Would you like your elderly one to stay with you? (n=143)		
Yes	131	91.6
No	12	8.4
Would you like your elderly ones to stay alone and care for them themselves? (n=140)		
Yes	19	13.6
No	121	86.4
Do you want them to be cared for in nursing home? (n=140)		
Yes	25	17.9
No	115	82.1
Do you want a law enacted on the care and protection of the rights of the elderly? (n=140)		
Yes	135	96.4
No	5	3.6
Would you like assistance in caring for your aged people? (n=140)		
Yes	124	88.6
No	16	11.4
Attitude of the family members towards caring for the elderly (n=147)		
Positive	84	57.1
Negative	32	21.8
Neutral	31	21.1
Are you satisfied caring for your elderly at home (n=132)		
Yes	101	76.5
No	17	12.9
No response	14	10.6

4. Discussion of Findings

The results of this study shows that majority (86%) of participants reported that they have at least an elderly person at home whom they cared for in various ways. Furthermore, participants were knowledgeable about the concept of caring for the elderly as they posed that “fulfillment of the special needs and requirements that are unique for aged people” as the concept that defined care for the elderly. This finding is consistent with the study of Ufuomaoghene [24] in two selected teaching hospitals in South Western Nigeria which reported that, physical nursing care activities such as bathing, dressing up, hair care, oral toileting, foot wears, care of the pressure areas and passive exercise were mostly provided by the patients family members. In addition, many other studies [25,26,27,28] were in agreements with the present study findings in these regards.

The findings of this study also reveals that 91% of participants preferred their elderly peoples to live with them at home than to be nursed elsewhere, although, majority (89%) of participants indicated the need for a domestic assistant in caring for their elderly people. Similar findings from other studies [19,28] shows that participants viewed older adults as a source of wisdom and guidance based on their varied life experiences and so

preferred to keep in their home environments. Moreover, older people usually remain with their children and other family members until their death with care usually being given by the family members no matter how seriously ill or disabled their aged relative may be. Research studies [29,30,31] established that feelings of guilt among the society prevent most people from moving their aged parents to a nursing home or other aged care facility, even if they believe that their parents may be given better care there.

5. Conclusion

The study shows high level of awareness and positive attitude towards caring for the elderly. Despite the increasing number of the aged in the relatively semi-urban settlement, care of the elderly is preferably (and it is still actually) situated in homes, with extended families still opting for home against institutionalized care.

6. Recommendations

From the above findings, the following recommendations are made:

Health workers particularly nurses should health educate the community on the importance of caring for the

aged and also enlightened them on some sign, symptoms and illnesses associated with ageing, for prompt monitoring and referral for proper care and treatment.

Government should equip the lay people with adequate knowledge on the care of the elderly to forestall any unintentional neglect from caregivers at their homes. The media can be very useful in this regards.

Government at all level should still establish geriatric unit in every hospital, and primary health care centres especially those in rural areas to enable easy accessibility to health care by the elderly ones for those who may opt for these alternatives or when the need arises for the aged being cared for at home require expert care.

7. Limitation

The narrow scope of this study limits the generalisability of the findings to all areas in the study environment. Supports from researchers and organisations may enhance more coverage and diverse methodological approach for more generalisable findings.

Acknowledgement

The authors wish to thank Messrs Mr. Adeleke IT of the Department of Health Information Management, Federal Medical Centre Bida, Mr. Samaila Balarabe Ayuba, and Mrs. Yusuf Ibrahim Lateefah of Department of Nursing Services, Ahmadu Bello University Teaching Hospital, Zaria for their comments on the final manuscript. The comments of Nurse Mohammed Ibrahim Okeme of School of Post Basic Anaesthesia, Ahmadu Bello University Teaching Hospital, Tudum-Wada, Zaria is genuinely acknowledged.

Competing Interest

The authors declare that no competing interests.

References

- [1] Leonard, D, School of Gerontology. 2015. Available at: gero.usc.edu/.../successful.lect/
- [2] Demand Media, 2015. Retrieved from www.livestrong.com/livestrong.com/health.
- [3] Velkoff, V.A. and Kowal, P.R, Population Aging in Sub-Saharan Africa: Demographic Dimensions 2006. *International Population Report*. Washington, DC, U.S. Government Printing Office. 2007; P95/07-1.
- [4] Troisi J, "Ageing in Africa: Older persons as a resource" A paper presented at the *International Conference on "Rapid Ageing and the changing role of the elderly in African households"*, Organized by the Union for African Population Studies UAPS/UEPA (Senegal), the HSRC in collaboration with the Department of Social Development (South Africa) 18-20 August, 2004, Pretoria, South Africa.
- [5] Sylvia B, "Why we should invest in older women and men: *The experience of help age international*" *gender and development*. 2000;8(2): 9-18.
- [6] Aboderin I.A, Beard J.R, Older people's health in sub-Saharan Africa. *Lancet*. Feb, 2015 14;385(9968):e9-11.
- [7] CIA World Factbook. Nigeria People, 2015. Accessed online at http://www.theodora.com/wfbcurrent/nigeria/nigeria_people.html.
- [8] Erdil, F., Celik, S.S. and Baybuga, M.S. Ageing and nursing services, in J. Troisi, Y.G. Kutsal (ed). *Ageing in Turkey*. Veritas Pres: Malta, 2006.
- [9] Lovell, M, Caring for the elderly: Changing perceptions and attitudes. *Journal of Vascular Nursing*, 24(1):22-26, 2006.
- [10] Tuohy, D, Student nurse-older person communication. *Nurse Education Today*, 23(1):19-26, 2003.
- [11] Happell, B. Nursing home employment for nursing students: valuable experience or harsh deterrent?, *Journal of Advanced Nursing*,39(6):529-536, 2002.
- [12] Aud, M.A., Bostick, J.E., Marek, K.D. and McDaniel, R.W, Introducing baccalaureate student nurses to gerontological nursing. *Journal of Professional Nursing*, 22(2):73-78, 2006.
- [13] Burbank, P.M., Dowling-Castronovo, A., Crowther, M.R. & Capezuti, E.A, Improving knowledge and attitudes toward older adults through innovative educational strategies. *Journal of Professional Nursing*, 22(2):91-97, 2006.
- [14] Hancock, D., Helfers, M.J., Cowen, K., Letvak, S., Barba, B.E., Herrick, C., Wallace, D., Rossen, E. & Bannon, M, Integration of gerontology content in non-geriatric undergraduate nursing courses. *Geriatric Nursing*,27(2):103-111, 2006.
- [15] Hweidi, I.M, Al-Obeisat, S.M, Jordanian nursing students' attitudes toward the elderly. *Nurse Education Today*, 26(1):23-30, 2006
- [16] Wolinsky F.D, Callahan C.M, Fitzgerald J.F et al. The risk of nursing home placement and subsequent death among older adults. *J Gerontol*,47,173-82, 1992
- [17] Kane R.A, Kane R.L, Ladd R.C, *The Heart of Long-Term Care*, Oxford University Press, London, 1998.
- [18] Wysocki A, Butler M, Kane RL, Kane RA, Shippee T, Sainfort F. Long-Term Care for Older Adults: A Review of Home and Community-Based Services Versus Institutional Care. *Comparative Effectiveness Review No. 81*. (Prepared by the Minnesota Evidence-based Practice Center under Contract No. 290-2007-10064-I.) AHRQ Publication No.12(13)-EHC134-EF. Rockville, MD: Agency for Healthcare Research and Quality. November 2012. www.effectivehealthcare.ahrq.gov/reports/final.cfm.
- [19] Ting G., and Woo J, "Elder care: Is legislation of family responsibility the Solution? *Asian Journal of Geriatr*, 4; 72-5, 2009.
- [20] Papalia, D.E. Cameron J. C. and Ruth D. F, *Adult Development and Aging*, 3rd Edition McGraw-Hill, 1995.
- [21] Chen, A., R. Brown, N. Archibald, S. Aliotta, and P. Fox, Best Practices in Coordinated Care. Reference No. 8534-004. Princeton, NJ.: *Mathematica Policy Research*. 2000. Available at www.mathematica-mpr.com.
- [22] Katsina Local Government Website. Retrieved from <http://katsinastate-igac.com/history.html>.
- [23] Adam ALQALI. A Study of Violence-Related Deaths in Baure, Ingawa, Kurfi, Mani and Matazu Local Government Areas of Katsina State (2006-2014) *Project Invisible Violence*. IFRA-Nigeria epapers series, 2015, n°45.
- [24] Ufuomaoghene J.M. The Level of Family Involvement in the Nursing Care of Hospitalized Geriatric Patients in Two Teaching Hospitals in South Western Nigeria, *Stud Home Com Sci*, 5(3): 169-176, 2001.
- [25] Fletcher K. *Acute Care in Leukemia*, Mosby, St. Louise: G. A. Gerontological Nursing, 2000.
- [26] Habel M. The hospitalized older adult: Entering a danger zone. *Nurse Week*, (2004, USA).
- [27] Schein C, Gagnon A J, Chan L, Morin I, Grondines J, The association between specific nurse case management intervention and elder health. *Journal of the American Geriatrics Society*, 53(4): 597-602, 2005
- [28] Türkiye İstatistik Kurumu (TUIK) (Turkey Statistical Institution) 2009, 12:102-109
- [29] Bilir, N, Ageing and community health, in J. Troisi, Y.G. Kutsal (ed). *Ageing in Turkey*. Veritas Pres: Malta, 2006.
- [30] Cankurtaran, M., Halil, M., Ulger, Z., Dagli, N., Yavuz, B.B., Karaca, B. and Ariogul, S, Influence of medical education on students' attitudes towards the Elderly. *Journal of the National Medical Association*, 98(9):1518-1522, 2006
- [31] Celik, S.S. and Celik, Y, Ageing in Turkey, *Journal of Hacettepe University School of Nursing*, 9(1):30-40, 2002.