Retirees Lifestyle and Family Care Provision in Benue State, Nigeria

Okonkwo, L. E., Kembe, E. M. Akuto, G. W and Ivande P.D.

Abstract

The study investigated retiree's lifestyle and family care services in Benue State Nigeria. The study adopted a descriptive survey research design. Three objectives guided the study. The population of the study comprised of nine thousand, seven hundred and three (9,703) Government Retirees in Benue State. The sample size of three hundred and eighty-four (384) respondents was drawn using the Taro Yamane Formulae for sample size determination. Simple random sampling technique was used to draw up the sample population. A structured questionnaire titled Retiree Lifestyle Questionnaire (RLQ)) was used as instrument for data collection which contains forty-eight (48) items. The data generated for the study was analyzed using frequency, mean and standard deviation. The study discovered that for family care services, family financial assistance improves standard of living of retirees (4.33), there is discrimination against the aged (4.14), Daily routine drugs and medications are needful for retirees, (4.26) living arrangements should consider the needs of the aged (retirees) (4.26), adjustment in nutrition is essential at old age (4.24). The study also noted that alcohol and smoking are dangerous to the health of retirees (4.29), staying with old friends reduces loneliness (4.19), exercise 2-3 times weekly and each time for an hour is necessary (4.14), retirees need to maintain quality social life (4.11). For challenges encountered by retirees in Benue state, the results showed problems such as financial stress because of cessation of salary, delayed gratuity, and pension after retirement (4.29) and, frustration due to lack of retirements planning (4.24). Conclusively, retirement is inevitable and should be planned and prepared for by the working population. The study recommended positive family relationship that will aid assistance to retirees, retirement lifestyle education be carried out by government and other organisations and regular payment of pension and gratuity by government.

Keywords: Family Care Services, Retirement, LifestyleChallenges,Retirees

Introduction

Human life undergoes different stages, and each stage of life throws its challenges and opportunities at each stage especially during the period of retirement. Retirement is the point when an employee leaves active work from an employment either by government or from a private organization (Onoyas, 2013). Fapohunda (2013), explains that retirement is an inevitable stage coinciding with ageing when the individual gradually disengages from mainstream active work. Bola (2016) explains that retirement involves withdrawal from occupational roles or position after reaching a particular age. The statutory age of retirement from civil service is 60 years or 35 years of unbroken service except in tertiary institutions and the judiciary where retirement has been increased to 70 years for professors and high court judges. Retirement can be seen as a period of taking a break after work for a long time. People work to satisfy both personal, family, and professional needs and so a time comes that one has to leave work and settle with the family and pursue other life aspirations, hobbies and goals.

Family is important to a retired person as it is the basic unit of social unit of the society that represents a natural framework of life and death. According Kembe (2016), family life is a non – negotiable and reciprocal support network throughout the life cycle of

people from birth to death. Family care services therefore are supports received by retirees from members, friends, neighbours, and community to ensure that that the retiree is fully integrated back into the social and family lifestyles. In Nigeria, the socio-cultural values, Customs and traditions respect the elderly especially retired government workers. In their communities, retired people were held in awe because of the experiences in contributing to family and society at large.

Increased mobility of families, education and changes in the society has contributed to changing family roles. There seems to be no one responsible for the care of the aged and it seems there is a generational gap in families that leads to poor care and consequent abuse of the aged today, Ekot , (2015). The current repositioning trends in families and communities as seeing the aged (retirees) as worthless, obsolete, and out-dated has reduced the care received by this group. Previously, family support and care, runs in both directions. grandparents who most times have retired, provide the necessary care for young children while their parents are at work or in the farm. Aged family members often are the source of support and care for livelihood to provide care for spouse, older parents, children, grandchildren, while adult and working children are a source of support and care for their aged parents who are now retired. Pesic, (2007) noted some factors that promote poor quality care in families to include decline in family relationships, negligence, financial stress, and ill health. These factors may lead to consequences of psychological problems, pains, injuries, sickness and even death. Families are expected to provide the basic daily routines of retirees in terms of feeding, medication, washing of cloths, sweeping of surroundings and assist in other social responsibilities at family and community level.

Olaleye&Agah, (2017), noted that successful ageing of retirees is also largely determined by individual lifestyle choices. Healthy lifestyle promotes the well- being and enhances quality of life (Ifejika&Kembe, 2015). According to Abdul &Naijhah (2018), individuals need to be aware of the importance of living a healthy lifestyle by monitoring their food intake, having enough exercise and manage stress. Practicing a healthy lifestyle means proper nutrition, regular physical activities, and recreation, avoiding alcohol, smoking and unprescribed drugs, doing periodic medical check-up, management of stress, and participation in social activities at family and community levels, (Mahin, Hossein & Akbar, 2015). Lifestyle modification of retirees should be a lifelong process of optimizing opportunities for improving and preserving health to live independently and to achieve mental wellness.

Adewuji (2008) stated that adjusting to life at old age remains a problem of retirees. Adoption of four behavioural changes such as being physically active, avoidance of alcohol, smoking and increase intake of fruits and vegetables will increase life expectancy of retirees. Olayeye and Agah (2017) noted that lifestyle changes include day-to-day behaviours and functions of individuals, such as everyday routine exercise (running, walking, jogging). Adjustment in lifestyle with conducive home environment will reduces the risk of coronary heart diseases, stroke, diabetes, and high blood pressure. The current situation of retirees in Benue state and Nigeria in general shows that there is no adequate social policy and implementation of retirees' package for workers who have spent a greater part of their lives working for government. The social media is agog with information on the plight of retirees and their unpaid emoluments such as pension and gratuity. It is also not uncommon to know that retirees have lost their lives due to the inability to afford the necessities of life such as food and medication, some have been left uncared for by family, friends and the community because of some competitive demands on finance and time, therefore, retirement has been dreaded by workers, since there is no certainty in the life after retirement. It is therefore pertinent to investigate the lifestyle and family care provision in Benue state. This will form a basis for developing retirement packages for retirees to adjust after retirement.

Objectives of the Study

1. Examine the family care provisions for Retirees in Benue State
2. Examine the Lifestyle of Retirees in Benue State
3. Determine the challenges encountered by Retirees in Benue State

Methodology

Research Design

The study adopted descriptive survey Research design. The aim of a descriptive Research design is to provide an accurate and valid representation of the variables that are relevant to the research objectives. In this study, the variables include the opinion on the lifestyle of retirees, family care provisions and the challenges faced by retired workers in Benue state. The population is large and involves all government workers who have retired over a period; therefore, a representative sample will be used upon which generalization can be made to the larger population.

Population of the study

The population of the study comprised all the nine thousand, seven hundred and three (9,703) Government Retirees in Benue State, Nigeria that are within the ages of 60, 65, 70 years and above that have worked and currently on the pension roll from the Benue state government. The Retirees comprised both Male and Female staff who have served the State Government in various Ministries in Education, Health, Finance, Land and Mineral Resources, Women Affairs, Youth, and sports and are members of the Association of Pensioners in Benue State. (Benue Pension Office, 2020).

Sample and Sampling Techniques

To ensure that all retired staff from the various ministries were adequately represented, the simple random sampling was used as the researcher visited the venue for Retirees Monthly Meeting in Benue State. To determine the actual sample size for the study, Taro Yamen formular for sample size determination was used to draw a sample size of three hundred and eighty-four (384) Retirees from the total population of nine thousand, seven hundred and three (9,703) Retirees in Benue State.

Method for Data Collection

A structure questionnaire titled Retiree lifestyle Questionnaire (RLQ was used as the instrument for data collection. The instrument contained forty-eight (48) test items to elicit information on family care provision, Lifestyle, and challenges of Retirees in Benue State. The items were structured under a five (5) point rating scale of strongly Agree (SA-5), Agree (A-4), mildly agreed (MA-3), Disagree (D-2), strongly disagreed (SD-1). Consent was sought and obtained from the Head of Pension Service (Pencom office) for the administration of questionnaire on Retirees. Three research assistants were deployed in the administration of the questionnaire. Retiree's monthly meetings venues were used for distribution and collation of the research instrument.

Data Analysis Techniques

The research questions were analysed using frequency, mean and standard deviation Decisions on answering of the research questions were based on the cut-off mean of x3.00. Items with mean values above 3.00 indicated that the respondents agreed to the statement and vice versa.

Results and Discussions

The results are presented on tables 1-3.

Table 1: The results of the study revealed that all seventeen items were accepted including mean score of financial assistance from family, improved standard of living (4.33), daily routine drugs and medications needed (4.26), family living arrangement (4.26) and discrimination against the age (4.14) among 13 other items.

Table1: Mean Responses on Family Care Provision for Retirees in Benue State

S/N	Family Care for Government Retirees	Mean	Std	Decision
1	There is discrimination against the aged	4.1	0.05	Agreed
2	Living arrangement consider the needs of the aged	**4.2**	**0.05**	**Agreed**
3	Living with spouse alone is preferable	4.0	0.04	Agreed
4	House helps assist the aged	4.2	0.04	Agreed
5	Family responsibilities are shared with children	4.1	0.04	Agreed
6	Retirees' opinion in family decision are no longer valued	3.5	0.06	Agreed
7	Retiree's housing arrangement can be in the home for the	3.5	0.06	Agreed
8	aged	3.8	0.05	Agreed
9	Retirees need assistance to move around.	3.4	0.06	Agreed
10	Retirees are helped to maintain daily hygiene routine	3.4	0.06	Agreed
11	Adjustment in nutrition is essential for retirees	4.1	0.05	Agreed
12	Daily routine drugs and medications are needful	4.2	0.63	Agreed
13	Sporting facilities and exercises for the aged is essential	4.2	0.64	Agreed
14	Family care support system is in placeto help the aged	4.2	0.06	Agreed
	Financial assistance by family members improves retiree's quality of living.			
15	Retirees need help during exercises	3.9	0.05	Agreed
16	Communication with young people build family relationship	4.1	0.04	Agreed

Table 2: Table 2 shows the fifteen (15) items had mean scores above 2.5 showing all agreed to lifestyle of retirees.

Table2: Mean Responses on Lifestyle of Retirees in Benue State

S/N0	Lifestyle of Government Retirees in Benue State	Mean	Std	Remarks
1	Attitudes towards ageing and retirement affects health	4.11	0.04	Agreed
2	Sleep and rest are daily routine	3.83	0.05	Agreed
3	Exercising 2-3 times weekly each time for an hour is necessary	3.82	0.05	Agreed
4	Alcohol and smoking are dangerous habits.	3.23	0.06	Agreed
5	Routine medical checkup	3.42	0.05	Agreed
6	Reading books, magazines, and daily newspapers.	4.01	0.05	Agreed
7	Socializing with old friends reduces loneliness.	4.04	0.04	Agreed
8	Subsistence farming /garden to use idle time	4.19	0.04	Agreed
9	Depression is a problem for retirees	3.86	0.05	Agreed
10	Retirees still maintain social life	4.11	0.03	Agreed
12	I enjoy my vacation with family and friends	3.75	0.05	Agreed
13	I am invited to Participate in educational, and social activities	4.10	0.05	Agreed
		4.19	0.04	Agreed
14	I have a Positive attitude and lifestyle thatpromote good health	4.21	0.04	Agreed

Table 3: The analysis of the study indicates challenges with highest mean scores such as frustration due to lack of retirement planning (4.24), difficulties in assessing health facilities for survival (4.13), attitudes of friends relations is sometimes agonising (4.12) and poverty incidence due to absence of social security (4.10) respectively

Table 3: Mean Responses on Challenges of Retirees in Benue State

S/No	ITEMS	Mean	Std	REMARKS
1	Frustration due to lack of pre-retirement planning	4.24	0.05	Agreed
2	Adjustment to new family roles and responsibilities.	3.97	0.04	Agreed
3	Lifestyle challenges in diet, needs, values and mode of dressing	3.82	0.06	Agreed
4	Re-integration into the society after retirement	3.72	0.06	Agreed
5	Financial stress because of cessation of salary, delay of gratuity and pension	4.29	0.05	Agreed
6	withdrawal from social activities due to feelings of Low self esteem	3.79	0.06	Agreed
7	Reduced contact with friends, relatives, and social network	3.39	0.06	Agreed
8	Health challenges (illness)	4.14	0.05	Agreed
9	Required skills for migrating into a new part time job opportunity	3.75	0.06	Agreed
10	Lack energy to get involved in routine physical activities	3.54	0.06	Agreed
11	Routine verification exercise that leads to loss of documents	3.58	0.06	Agreed
12	Difficulties in accessing basic amenities and health facilities	4.13	0.05	Agreed
13	Low qualityof living (high poverty incidence due tolack of or absence of social security).	4.10	0.05	Agreed
14	Lack of access to continuing education and Information necessary for living	3.97	0.05	Agreed
15	Lack of investment to maintain a livelihood	4.01	0.05	Agreed
16	Inadequate retirement residential home	3.58	0.06	Agreed
17	Traditional emphasis on family centered care which is rapidly collapsing causing elderly abuse in families and community	3.72	0.06	Agreed
18	Attitude of friends and relations is sometimes agonizing to retirees	4.06	0.05	Agreed

Discussion

Results on table on the mean response of family care provisions to retirees show all 16 items agreed on the care provided to retirees at the family level. Patience (2013), noted that in African context, children owe their parents the responsibility of providing care such as food, clothing, drugs, and other basic needs and ensuring that the aged get daily assistance in house chore activities such as cooking meals, feeding, laundry, medical assistance, transportation, and sanitation. However, it has been noticed that there are reported cases of elder abuse due to the changes in the society where children no longer stay with aged, retired parents because of work and lifestyle changes. Akpan and Umobong (2013) revealed that there is high prevalence of elderly abuse in families as most Retirees complain of medical neglect, and bedsores, lack of visitation by children, uncomfortable living conditions, inadequate food, and denial of freedom of interaction and other psychological abuse that may cause break down in family relationship. Furthermore, children and other people have been found to exploit the financial management of the elderly. Ajomale (2007) stated that the constant failure and negligence of retirees have been blamed on government policies of not including a comprehensive plan and implementation of retirement benefits in the National development plan. Nigeria lacks a meaningful publicly managed social security system that protects the Retired.

The findings on table two is on lifestyle of retirees with all 14 items indicated agreed. This is in line with Nwagu and Okafor (2008) that chronic illness can be prevented or delayed through healthy lifestyle and the postponement of ageing related disabilities. Healthy lifestyle during retirement should combine the principles of healthy nutrition, sleep, hygiene, regular physical activities, social participation, non-smoking and regular medical examination. Darish and Fahud (2015) noted that health problems such as body pain, metabolic changes, , hypertension and overweight, are caused by unhealthy lifestyles. Variables of healthy lifestyles that influence health includes good diet, exercise, sleep, recreation, avoidance of substance and medication abuse. According to Abdul and Nayinah (2018), individuals need to be aware of the importance of living a healthy lifestyle, by monitoring their food intake and learn to manage stress. Okoye (2012) noted that the major challenges facing retired population in Nigeria is the absence of a functional national policy on the care and welfare of retired persons.

Conclusion and Recommendations

Consequent upon the findings of this study, it is concluded that retirement is inevitable and every worker will one day step aside as a result of reaching the maximum years expected to put into work and aging, these two events in life coincide together and if properly planned and managed, it will be a time of self-actualization and appreciating self and the society for the opportunity to have contributed to its growth and development. Based on the findings, the following recommendations are made

1. Families, relations, neighbors, and friends of retirees are needed at the stage of retirement to assist in providing care through the provision of both emotional, social, and physical care that will help the aged and retired adjust to life after retirement.
2. Government is responsible in meeting the obligations of payment of gratuity, pension, and other entitlement due to its' workers.Furthermore, a comprehensive retirement package and implementation strategies with timelines will help the retiree adjust to life after retirement.
3. Retirees should cultivate a positive attitude and lifestyle habits that will promote healthy living.

References

Abdul, R. and Nayinah, H. (2018). Public Awareness towards Healthy lifestyle. International *Journal of Academic Research in Business and Social Science*, 8 (110): 927-936.

Adetunde, C. (2017). Social Economic Adjustment of Retired Civil Servants in Kwara, Ogun and Lagos State. A Ph.D. thesis submitted to the Postgraduate School Ahmadu Bello University Zaria, Kaduna State.

Adewuji,T. (2018).Plan for your retirement now, Lagos Ijanikin; Acts Systems.

Ajomale, O. (2007). Country Report: Ageing in Nigeria, Elder Abuse: The Nigerian Experience. - Current State, Social and economic implication. *Summer Newsletter of the Research Committee on Sociology of Ageing of the International Sociological Association (ISA*), Oxford Institute of Aging. 15-20.

Akpan, D. and Umobong, E. (2013). An assessment of the prevalence of Elder Abuse and Neglect in Akwa-Ibom State, Nigeria. *International knowledge sharing journal*

Bola, A. (2016). Sustainability, livelihoods, and quality of life of older retirees in Lagos state. *Journal of Global initiatives Policy pedagogy, perspective*, 10 (2): Article10.

Darish, D. and Fahud (2015). Impact of lifestyle on health. *Iranian Journal of public Health*, 44 (11): 1442-1444.

Fapohunda, T. (2013). The pension system and retirement planning in Nigerian. *Mediterranean Journal of Social Sciences*, 4(2): 25-34.

Kembe, E. M and Ifejika L. I. (2013). Strategies for Promoting Healthy Lifestyles in Families. *Journal of Home Economics Research.* 18,179-188.

Kembe, E. (2016). Perspective in Home Science and Human Development. Ibadan : Dove Publishing House.

Mahin, A., Hossein, M. and Akbar, A. (2015). Healthy lifestyle status among non-Institutionalized older people. *Elderly health Journal of Tabriz Health servicesManagement Research Centre*, 1(2):52-61.

Nwagu, E. and Okafor, R (2008). Active Ageing implication for Past Retirement productivity and independence. *Journal of Home Economic Research,* 9 (5):167-175.

Olaleye, Y.andAgah, I. (2017). Active lifestyle and successful Ageing among Pensioners in Ibadan, *African Journal of Social work*, 7(1).

Onoyas, A. (2013). Financial planning strategies towards retirement as perceived by potential retirees in Universities in the Niger Delta, *International Journal of Business and Social Science*, 4(14): 2-8

Pesic.L (2007). Social and health problems of the Elderly. www.reasearchgate.net

Patience, E. (2013). Abuse of the Aged in Nigeria. *American International Journal of contemporary Research*, 3(9).

Quadagno, J. (2015). Aging and the Live Course: An Introduction to Social Gerontology. (3rd. ed.). New York, NY: McGraw-Hill.