

Social Exclusion of Nigerian Elderly Population and the Strategies & Innovative Tools to Include All

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Abstract:- The population of the older adults in Nigeria and indeed globally, has continued to rise with increasing life expectancy. In Nigeria, the elderly population are disproportionately affected by poverty and diseases, and are at higher risk for social exclusion. With the absent of a defined social security benefit, the need for social inclusion for the elderly has become greater because family support for the elderly is gradually fading and may become a thing of the past in the near future. The 2030 agenda for the Sustainable Development Goals (SDGs) is emphatic on the mantra "No one left behind," with particular focus on the vulnerable including the elderly. In this paper, pieces of literature on social exclusion experienced by the Nigeria elderly were reviewed to identify the key areas where social exclusion are concentrated and to suggest innovative tools to ensure that people of all ages are socially integrated. Findings revealed that Nigerian elderly are excluded from health care access, education and information technology, financial services, economic resources, as well as civic and societal participation. The author suggested that the stakeholders involvement in formulation and implementation of viable social security policy for the Nigerian elderly; age – oriented education for all Nigerians; the need for government to provide support to family members who have elderly persons to care for, and need for a policy that promotes adult education and economic empowerment for the elderly, are all needed for members of all ages to be socially integrated.

Keywords: Elderly, Aging, Social inclusion, Social isolation

I. INTRODUCTION

Defining older persons have been problematic across nations, compelling the United Nations to propose a working definition of the elderly as the chronological age of 60+ (United Nations, 2013). According to the United Nations world population prospect (2010), It is estimated that 8 percent of the world population, about 524 million people were aged 65 and above. This number is projected to triple to about 16 percent of the world population, 1.5 billion people by 2050. Developed countries have the oldest population profile, while the developing countries have the most significant majority of older people and the most rapidly growing aging population (WHO Global Health & Aging Report, 2011). Some studies (Adebowale et al., 2012; Mudiare, 2013; Weiss & Lonnquist, 2015) have attributed this global demographic trend to declining fertility and improved life expectancy, which are offshoots of advancement in medicine. It is generally believed that the advancement in medicine slowed the progression from chronic disease to

disability and contributed to the reduction of the severity of disabilities.

It is my argument that given the appropriate social supports and security, the aging population can be expected to live a relatively healthy life, and will age gracefully. Population aging is clearly shown to have titanic transformative force on all aspects of society, ranging from health, economy, security, employment opportunities, family structure, housing resources, and transportation services (World Health Organization, 2011; United Nations, 2015 as Cited in Animasahun & Chapman, 2017; Ebimngbo, Atumah & Okoye, 2017). Hence, Population aging is becoming a powerful and transforming demographic force that is now gaining focus at national and international levels. Population aging, particularly in Africa is occurring simultaneously with poverty, rising inequality, migration, climate change, and conflict, and affects the manner at which people age, their ability to contribute to society and also explains their vulnerabilities Dugarova & Gülasan (as cited in Dugarova, 2018). The changing demographics of the elderly population in our society present the challenges of social inclusion of the elderly into the global community and has compelled many nations of the world to seek innovative measures to optimize the biopsychosocial well-being of the segment of the population under study.

Aging is generally associated with waning capabilities, but elderly persons also have the fundamental human right to live a dignified life and to participate in societal activities within the limitations imposed by health challenges which accompany aging. Old age is not synonymous with poverty and disability, but elderly persons are among the most Vulnerable to poverty and diseases in the society and are often left behind owing to their declining physical capability Naegele & Schneabel, 2010; Knaele, 2012; Panda, (as cited in Mohammed, 2018), adding that under certain circumstances, there is a greater likelihood of excluding older women than men in social activities.

The lower rate of labor market participation, average earnings, unpaid domestic labor, and higher incidence of non-formal employment occupied by the elderly population account for higher poverty rate and for a greater risk for exclusion among older women ILO, 2014; UN, 2017 (as cited in Dugarova, 2018). Stories abound in Africa, where a significant proportion of the elderly are abandoned when they

are unable to fend for themselves and receive little or no support from family members. The situation is further exasperated, knowing that there is no kind of social support whatever from the government that targets the aging population in Nigeria. The vulnerability of the elderly in our society is a situation which requires special attention given that the aging population is socially excluded, and further left behind, and we must endeavor to find avenues through which they must be included.

Nigeria participated in the 2002 African Union Conferences on action plan for the aging population, but we are yet to have any formal social security or policy for our aging population besides the pension scheme for retirees of government employees (Ajomale, 2009; Adebowale et al., 2012; Shofeyeke & Amosun, 2014; Animasahun & Chapman, 2017; Ebingbo et al., 2017). However, Omokaro (2018) asserts that the country is currently overhauling its systems towards a robust policy that would protect the dignity of older persons and promote their inclusion, participation, independence, and security. Slow as it may be, there may be a ray of hope indeed for our aging population. The Sustainable Development Goals (SDGs) 2030 Agenda is also one global tool that seeks to address this problem of social exclusion of the vulnerable, including the elderly, and could prove beneficial to the elderly Nigerian population if stakeholders make concerted efforts that are elderly friendly. The 2030 agenda proposes an all-inclusive and sustainable future that "leaves no one behind" in its strategies of industrialization, production, education, poverty reduction, skill transfer and social cohesion (Global Forum on Development: Concept note, 2016).

According to Knaele (2012), most studies done on social exclusion had their focus on children, young people, and families with little attention paid to older people. This paper is a review of current literature on the domains of social exclusion experienced by the elderly with particular reference to Nigeria, and attempted to suggest tools for their inclusion. The author will attempt to answer the following questions; what is the aging demographics of Nigeria? What defines the concepts "left behind" and "counting all in"? How is social exclusion measured? How has the elderly population in Nigeria been left behind? What are the implications of leaving the elderly population in Nigeria behind? And how can we ensure inclusiveness for the aging Nigerian population?

II. NIGERIAN AGING DEMOGRAPHICS

The 2006 census showed that about 4.3 percent (6,038,566) of the total Nigerian population (140,431,790) were aged 65 and over (Adebowale et al., 2012). Mundiare (2013) affirms that Nigeria has the most significant number of older persons in South Saharan Africa. The number of older adults in the country as at January 2018 has increased by about 35,369 given the estimate by United nations (as cited in Country meter, 2018). It is estimated that the current Nigerian population of about 194,615, 054 has about 6, 073,936

persons (2,934,795 males/ 3,137,195 females) above 64 years, life expectancy is now 47.6 year, and the age dependency ratio is put at 5.6% (Country meter, 2018). This trend confirms the predictions that Nigeria must prepare to meet the many challenges that will stem from the increased aging population (Ajomale,2009)

III. THEORETICAL FRAMEWORK

This paper is anchored on the "activity theory of aging" propounded by Havighurst in 1961 as a better alternative to the disengagement theory. The theory posits that successful aging and satisfaction is possible when older adults remain active and maintain societal interaction and participation, and that being socially active is an incentive for delayed aging and better quality of life (Loue & Sajatovic, 2008).

IV. CONCEPTUALIZING SOCIAL EXCLUSION VERSUS SOCIALLY INTEGRATING PEOPLE FROM ALL AGES

The concepts of social exclusion (left behind) and social inclusion (counting all in) have their origin in policy discourse of France in the 1970s and later Europe in mid-1990s, Aasland & Flotten (as cited in Rawal, 2008; Naegele & Schnabel, 2010). The concepts of social exclusion and inclusion gained widespread popularity and applicability after World summit that gave attention to the relevance of those concepts in social policy analysis of developing countries IDS, (as cited in Rawal, 2008). Numerous scholars have argued that defining the two concepts have proved problematic because of the subjectivity and diversity of meaning that they assume for older people.

However, Social exclusion is used to describe social disadvantage; the process by which individuals or groups are wholly or partially kept out of participating in the society they live in, European Foundation (as cited in Rawal, 2008; Council on Ageing New South Whales as cited in Nycyk, 2015). Nycyk argued that many scholars adjudge the social exclusion of the elderly to include denying older persons the social right to go to a place or depriving them the resources to achieve their personal goals.

Social inclusion, on the other hand, is used to describe citizen's social right for equality, O'Reilly (as cited in Rawal, 2008). The Australian government argued that Social Inclusion include the provision of resources and opportunities to learn, work, engage, and have a voice (Nycyk, 2015). Rawal argued that social inclusion is usually defined with respect to social exclusion because both are interrelated. Therefore, it is logical to say that understanding the social exclusion of the elderly will help us in understanding how the elderly can be socially included.

Most previous studies on the elderly tend to focus on poverty, but Layte et al.,(as cited in Ngaele & Schnabel, 2010) contend that measuring social exclusion among the elderly has a greater advantage over measuring the concept of poverty.

This is because unlike poverty, the multidimensionality of social exclusion includes material and immaterial deprivation.

V. MEASURING SOCIAL EXCLUSION

Although the multidimensionality of social exclusion makes it difficult to have a generally accepted agreement on what constitutes social exclusion. However, a crucial element in the measurement of social exclusion in the elderly is the level of independence they enjoy (Knaele, 2012). Knaele identified seven (7) domains of social exclusion experienced by older adults with respect to their participation in socio-economic, cultural, community, and civic life of the society.



Figure 1. Domains of Social Exclusion for older people (Source; Knaele, 2012).

As presented in figure 1, the domains of social exclusion include (1) exclusion from decent housing and public transport (2) exclusion from civic activities and access to information (3) exclusion from local amenities (4) exclusion from common consumer goods (5) exclusion from cultural activities (6) exclusion from social relationships and (7) exclusion from financial products. Important predictors of social exclusion and inclusion for the elderly include their health status, physical mobility, gender, sexuality, presence of disability, living condition, income level, work status, dependence on family, friends or social supports (Petriwsky, A., Warburton, j., Everingham, J., & Cuthill, M., 2012).

According to a report from the office of the UK Deputy Prime Minister (Naughtin, 2008), the risk factors for social exclusion include age, living alone or childlessness, poor mental and physical health, transport services, living in rented accommodation, lack of access to telephone, low income and/ or reliance on welfare. Akpomuvie (2010) identified economic situations of the elderly such as low educational level and loss of spouses as the most important risk factors for the socially excluded elderly. The older adults

have a special area of need that must be addressed for them to be socially included and to enjoy an improved quality of life. Some of the important areas which need to be addressed include adequate and balanced nutrition, clothing, decent housing, love and care from family and community members, access to elderly oriented medical care, activity, employment, education and communication (Akpomuvie, 2010).

VI. THE NIGERIAN ELDERLY, FURTHEST LEFT BEHIND

The elderly people are an important segment of Nigerian population that should be preserved because they are the custodian of our culture and tradition (Adebowale et al., 2010; Ebimngbo et al., 2017). Shofeyeke & Amosun (2014) affirms that there is a dearth of literature on the social exclusion of Nigerian elderly. However, many studies show that Nigeria is backward in economic prosperity and health indices, and as such, poverty and disease continues to ravage her populace, and all these conditions leave the elderly more vulnerable. Social policies in Nigeria are skewed in favor of young people, especially women and children, thereby leaving the elderly very far behind (Ajomale, 2009; Ayodeji as cited in Ebimngbo, et al., 2017). There is no formal social security for the older population as can be found in developed countries, the only thing available is a contributory pension scheme for those who have worked successfully with government, and their number is relatively small compared to the general population (Ajomale, 2009; Fajanaas cited in Ebimngbo et al., 2017). As a result, many elderly persons in Nigeria continue to depend on their children for financial support to meet their daily need.

Traditionally, older persons in Nigeriawere known to enjoy some form of informal social supports from close family relations like spouses, children, daughters- in- law, sons-in-law, etc., this supports have been shown to be fading as a result of rural-urban migration of younger adults, changes in family living structure, increasing unemployment, rising cost of living and shrinking income (Ajomale,2009; Adebowale et al., 2012; Shofeyeke & Amosun, 2014; Animasahun & Chapman, 2017; Ebimngbo et al., 2017). This corroborates the assertion of the United Nations Report which says "with increased population mobility and urbanization, as well as fewer intergenerational households, the provision of household-based social support is becoming more challenging" (UN, 2017 cited in Dugarova, 2018, p. 14).

When families can no longer support their older relatives, dependency becomes inevitable and the likelihood of abuse tends to increase. In 2015, it was reported that 13 elderly persons were being thrown out by their families in Cross River State, on the claim that they were witches (Ventures, 2015). The implication of this is that the Nigerian elderly are in a state of "reckless abandon," and at the mercy of chronic loneliness, poverty, disease, disability and avoidable painful death. These despicable situations of the elderly make them prone to abuse and neglect.

Poverty in Nigeria is disproportionately distributed across rural and urban areas. Poverty is higher in the rural and urban fringes than in the urban areas and significantly higher in the Northern part of the country, National Bureau of Statistics (as cited in Akpomovie, 2010). In a study of rural elderly in rural communities of North Central Nigeria by Adebowale et al. (2012), they found that 49.1 percent of the elderly population do not perform well in four measures of well-being, namely: physical, social, psychological & environmental. Those who are married, and who are regularly visited by their children, and who received financial support from their children were less likely to report poor experience in the measure of well-being than those who were lonely and had no financial support. This finding speak volume for a system that must promotes social and financial support for the elderly.

Most Nigerian elderly lack access to decent housing both in towns and villages (Mudiare, 2013; Gesinde, as cited in Ebimbo et al., 2017). This is due to the fact that many of those who are employed, particularly as civil servants, cannot afford a decent accommodation and as such are not able to save for the rainy days. Their pension benefits are not guaranteed, and the greatest majority of elderly Nigerian populations are rural dwellers that have never been on the government payroll. According to a report by Venture (2015), there are only a handful of assisted living facilities and 13 nursing homes in the country. There are also no defined system to finance long term care and as such, in the face of the gross lack of institutionalized care for the elderly, adult children who are not able to provide the required personal care for their old parents engage the services of caregivers, and on several instances, the caregivers get worn out and turn abusive to the elderly (Mudiare, 2013).

In Nigeria, there is a general problem of healthcare quality and access, and there is a dearth of specialist healthcare professional such as geriatricians, geriatric nurses and gerontologist for the elderly as can be found in developed countries (Adebowale et al., 2012; Animasahun & Chapman, 2017). This is because the aging population as a segment of the population has not been getting the kind of attention and consideration by the policymakers. The policies in most African countries are skewed to other segments of the population, especially women and children. The existing National Health Insurance Scheme (NHIS) covers only about 20% of the Nigerian populace, and studies revealed that the younger persons health care needs are significantly met when compared to those 60 years and above (Daramola, Maduka, Adeniran & Akande, 2017).

Education remains the bedrock of civilization, development, and a key determinant of health and socio-economic status. It is a given that the majority of the people who are deprived of education are more exposed to the risk of social isolation. According to the Nigerian Minister of Education, the literacy level in Nigeria is alarmingly low, especially in the Northern region that is faced with a

humanitarian crisis (Adamu, 2017). One can then imagine the proportion of the elderly that are not literate and we can all expect that their level of societal participation will be significantly affected.

Whereas in 2012, a UK study by UNFPA and Help age international found that 45 percent of people within the age bracket of 55 -75 spend up to 30 hours per week online, and 47 percent of that age category could use skype and instant messengers (Dugarova, 2018). However, a Nigerian study of the use of Information and Communication Technology (ICT) among elderly and long-serving academics by Ejechi (2013), found their use of ICT unsatisfactory. This finding affirm that Nigerian elderly are left behind technologically, giving the high illiteracy rate of Nigerians. Many older persons may not be able to use the enormous technological resources at their disposal like telephone, Automated Teller Machine (ATM), Point of Sales (POS) machine, etc. The inability to use the available technological know-hows, which are readily available to improve the quality of life contributes to a high level of frustration and exposes the elderly to a higher risk of abuse by family members and caregivers.

VII. THE SOCIETAL COST OF LEAVING THE ELDERLY BEHIND

Social exclusion give birth to grave consequences for the elderly and includes (1)exclusion from family and community participation which can lead to a feeling of isolation, loneliness, and hopelessness, and put together, all these factors may lead to depression. (2) Abuse and neglect are defined forms of social exclusion that may subject the elderly to physical and psychological torture. (3) Exclusion from information and education can lead to low self-esteem and feeling of helplessness. (4) Exclusion from access to quality and affordable health care can increase the progression of aging-related diseases and disabilities. This means that the quality of life of the aging population can be compromised if the social exclusion is not addressed or confronted frontally; this may ultimately lead to a painful death.

VIII. INNOVATIVE SOCIAL INCLUSION TOOLS FOR ALL AGES

Having examined the multidimensional domains of social exclusion, we considered the following recommendations and suggested a model for ensuring social inclusion of the elderly who have been left behind. First, combating social exclusion and ensuring inclusiveness requires that all stakeholders including the elderly, government, Non-Governmental Organizations must come to the drawing board to help formulate and implement a robust social security framework for our aging population. This policy must draw on existing international policies like the SDG 2030 Agenda, and the UN social policy plan for older adults while taking into consideration our peculiarity as a nation.

Next, education in geriatrics and gerontology must be emphasized at all educational levels to sensitize younger people on the need for social inclusion of the elderly. More institutional care setting for the elderly are required to care for the growing number of the aged who may require such care and support. Also, educational and economic empowerment programs should not be skewed to younger people, women, and children, but should also target the elderly, especially the rural poor. The elderly should be encouraged and supported to learn how to use ICT, including the ability to learn and make online financial transactions. The government should provide incentives for family members to continue to support their older adults, and must institute policies that protect the elderly Nigerians from age-based discrimination, abuse, and maltreatment.

As the world population of the elderly continues to grow, the problem of socially excluding the elderly is increasingly becoming a popular topic of discussion at national and international levels. Although defining social exclusion is generally problematic because of its multidimensionality, scholars have attempted to devise some means of measuring the concept, and we believe that following the recommendations, the likelihood of social integration for all ages will be achieved.

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