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INFLUENCE OF GERIATRIC AND SOCIAL SUPPORT CARE ON HEALTH OF ELDERLY PEOPLE IN ILORIN SOUTH LOCAL GOVERNMENT AREA, KWARA STATE

By

Shehu, R.A., Baba D.A., Ogunsakin, E.A & AbdulRaheem, K. A. (Mrs)

Abstract

This paper examined the influence of geriatric and social support care on the health of elderly people in Ilorin South Local Government, Kwara State. A sample population of two hundred and twenty aged people made the respondents for the study. A structured questionnaire that had been scrutinized by experts and pilot tested in the field was used to collect data from the respondents. The instrument was found to be reliable at 0.81 coefficient of correlation. Simple random technique was used to select the two hundred and twenty elderly people used for the study. Descriptive survey method was adopted for the study. The researcher with the help of four research assistants administered the questionnaires to the selected respondents. Three hypotheses were formulated and used for the study. The hypotheses were tested at 0.05 alpha level of significant. Data collected were analysed by the use of chi square (χ^2) statistical method. The result of the study showed that the geriatric services rendered to the elderly people influence their health and well being. The result also revealed that the social support care given to the old people, impact positively on them. The study recommends that all elderly people should endeavour to visit hospital and health centre for regular and prompt medical check-up; relatives and friends of elderly people should always assist and support them to promote their health and well being.

Introduction

Life is transient and transitional in nature. An individual pass through four stages in life, i.e childhood, adolescents, adulthood and old age. There are different characteristics peculiar to all these stages. During childhood period for instance, the children are usually depended on guidance and assistance of their parent or guardians for carrying out specific actions, the same way the elderly person need the support and assistance of their families for survival. The adulthood period is seen as an active age in which an individuals are independent of their actions.

The final stage of life transitional process is tagged "Ageing". No matter how active and healthy an individual appears during adulthood, ageing period will surely set in. Oxford Advanced Learner's Dictionary (2001, 7th Edition) defined ageing as the process of growing old. Reichel (2001) observed that ageing is an ongoing biological process that begins with birth. He stated further that the rate of ageing is not the same for any two individuals and the reasons for using age 65 to mark old age are mostly social and legislative. Social security, retirement, and many other programmes take effect age at 65. As a biological process, ageing is inexplicable due to damage accumulation from childhood via adulthood to old age and cellular or organ ageing. Ryan (2002) noted that ageing is characterized by damage accumulation at the molecular and cellular levels as well as at the levels of organs and individual organisms, until eventually the damage is so great as to be incompatible with life.

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The term "Ageing" is not confined to damage to body parts alone, it also involve the struggle to maintain body functions and reduce damage to body organs. Margaret (1997) stated that ageing successfully does not imply avoiding the problems, changes or losses that come out with age, it rather means continual striving, despite setback, to maximize gains and minimize losses.

The attainment of old age and its attendance consequences and deficiencies necessitated special health care for the elderly people. Zukerman (2008) opined that elderly care or simple elder care is the fulfillment of the special needs and requirement that are unique to senior citizens (Aged). He stressed that the term encompasses such services as assisted living, adult day care, long-term care, nursing home, hospice care and in-home care. The hospitals and health centers also render medical services to the old people to correct and manage some of the emerging health problems accomplishing ageing. These medical services are known as "Geriatric Services or Geriatric Medicine". Brocklehurst and Hanley (2001) posited that Geriatric is the branch of general medicine concerned with clinical, preventive, remedial and social aspects of illness in the elderly. They stated further that geriatric service is an important part of the National Health Service all over the world, and it is an hospital based service organised by consultant geriatricians and trained geriatric assistants.

The old age is a period characterized with varying impairments such as low physical and mental ability, vision problem, dental problem, fractures, injuries etc. Butler and Lewis (2003) noted that old age brings increased conservatism, exaggeration of lifelong character traits, biases and prejudices, attenuation of interest in new things, impairment of memory, decrease in attention span and inaccuracy of thoughts.

The deficiencies and health problems that usually accompany ageing make the care and management of those conditions, an expedient task. Seyi & Priscilla (1997) observed that a major implication of the increase in life expectancy is the likelihood of an increase in the prevalence of physical disabilities among the elderly. They stated further that majority of health problems and issues associated with ageing have the potential for successful preventive action. Health care is often hindered in the elderly population by poor access to health services and limited use of preventive services.

The provision of geriatric services involve approaches such as diagnostic approach, treatment approach and regular medical check up. Jean (1997) reiterated that since origination of geriatric medicine in 1940 in United Kingdom, it has been progressively generated programmes for the long term care of the chronically ill aged people. Geriatric medicine has deepened its fundamental understanding and adapted its attitudes to meet the need of a population that is growing steadily older.

The practice of geriatric medicine follow the same pattern with that of medicine. The geriatrician render the same kinds of services provides by the general medical practitioner with different approaches. Brocklehurst and Hanley (2001) stated that the practice of geriatric medicine is based on the practice of general medicine, but the method of organizing the work is more akin to that of the psychiatrist and pediatrician than that of general physician. He added that geriatrician provides services in an area which involve not only management of individual ill patients but also the organisation of rehabilitative services, long term care, a day hospital, etc. aimed at maintaining optimal health of old people. The geriatric services provided to elderly people involve long and short term medical and hospital based services, depend on the nature of their illnesses. Beckel (1996) stated that different health problems of elderly people are being managed on long-term care, respite care and home health care, all of which consist of routine geriatric care.

Apart from the geriatric services that take care of health problems affecting the old people, there are different social support services that are being provided to the elderly people to

prevent variety of social problems affecting the health status of the elderly people. According to him, problems such as lack of independence in initiating action, restricted mobility and lack of adequate, safe and affordable housing need urgent solution which often manifest inform of social support services. Seyi & Priscilla (1997) observed that healthy ageing can be achieved through encouragement of social interaction among older people, their families, friends, relatives and community members. The social networks within the community can provide facilities for sports and recreation, as well as offering community social support services.

The bulk of social support activities such as home help services, meal at wheel and community health centre care for elderly people are being provided at community level by concerned associations and organisation. Zhu (1997) stressed that every community usually creates a community service centre capable of catering for old people who may have lost the ability to cope with daily living. He added that the community centre usually organized and arranged necessary care of old people. When all their families and relatives have gone out to work. The health and well being of an old people can be improved through emphasis on promotion of health practice that prolong life and ensure longevity, Alexandre & Ilona (1997) noted that optimal level of health can be achieved for the elderly people through promotion of long term health practices that prolong life and prevent diseases through increasing awareness of aged people to focus on the process of healthy ageing. He stressed further that the elderly people should be raised through health promotive activities to a high functional capacity level with emphasis on need for good nutrition, engagement in a mild and moderate physical activity, and effective education.

Research Questions

- Does the geriatric services rendered to the elderly people have significant influence on their health and well being.
- Does the social support services rendered to the elderly people have significant influence on their health and well being.
- Is there any significant influence of health promotion programme implemented for the elderly people on their health and well being.

Research Hypotheses

- There will be no significant influence of geriatric services rendered to the elderly people on their health and well being.
- There will be no significant influence of social support services rendered to the elderly people on their health and well being.
- There will be no significant influence of health promotion programmes implemented for elderly people on their health and well being.

Methodology

The study was carried out with the use of descriptive survey method. The sample of the study was made up of two hundred and twenty (220) respondents systematically drawn from the elderly people from eleven wards of Ilorin South Local Government Area of Kwara State. The instrument used in gathering information for the study was a structured questionnaire that have been thoroughly scrutinized by experts on the field. A reliability co-efficient of 0.81r was obtained using test-re-test method of reliability. The analysis of data collected was done with the use of chi-square (X^2). The results of the analysis and interpretation are tabulated below

Hypothesis 1: There will be no significant influence of geriatric services rendered to the elderly on their health and well being.

Influence of Geriatric Services on Health and Well Being of Elderly People

	SA	A	D	SD	Row Total	Calculated chi-square	Degree of freedom	Critical Value	Decision
Geriatric services rendered to the elderly people help to maintain healthy ageing	102 (135.67)	14 (8.33)	6 (4.33)	220	38.58	6	12.59	Rejected	
Geriatric services rendered to the elderly people help to maintain health and well being of elderly people	81 (135.67)	130 (8.33)	1 (4.33)	220					
Geriatric services rendered to the elderly people help to maintain health and well being of elderly people	98 (135.67)	115 (8.33)	4 (4.33)	220					
Grand Total	215	407	25	13	660				

The findings from the analysis in the table one above showed the calculated chi-square (X^2) value of 38.58 against the critical table value of 12.59 at 0.05 alpha level of significant with degree of freedom (df) of 6. Since the calculated value is greater than critical table value, the null hypothesis is hereby rejected. This means that the geriatric services rendered by geriatrician and other medical experts have much impact on their health and well being.

Hypothesis 2: There will be no significant influence of social support services rendered to elderly people on their health and well being.

Influence of Social Support Services on Health and Well Being of Elderly People.

	SA	A	D	SD	Row Total	Calculated chi-square	Degree of freedom	Critical Value	Decision
Help and assistance rendered to the elderly people by their family members and friends assist in maintaining healthy ageing	40 (62)	170 (146)	5 (8.33)	5 (3.67)	220	30.40	6	12.59	Rejected
Some community care centers and health promotion programmes are usually helpful in maintenance of health and well being of elderly people	68 (62)	132 (146)	16 (8.33)	4 (3.67)	220				
Rehabilitative services organized and implemented for the elderly people help to promote quick recuperation from their long illnesses	78 (62)	136 (146)	4 (8.33)	2 (3.67)	220				
Grand Total	186	438	25	11	660				

The null hypothesis examined the influence of social support services rendered to elderly people on their health and well being. The table analysis above showed calculated value of 30.40 against the critical value of 12.59 at 0.05 alpha level of significance with the degree of

...the hypothesis is hereby rejected. This means that the health promotion services rendered to the elderly people have much influence on their health and well being.

Hypothesis Three (3): There will be no significance influence of health promotion services implemented for elderly people on their health and well being.

Influence of Health Promotion Programmes on Health and Well being of Elderly People.

		N	D	SD	Row Total	Calculated Chi-square	Degree of freedom	Critical Value	Decision
1	Health awareness programme organized for elderly people on the need to visit hospital for regular medical check up has helped to prevent infection, injuries and disability	72 (75.67)	139 (135)	7 (6.33)	2 (3)	220	18.86	12.59	Rejected
	The health awareness programme organized for elderly people on the need to visit hospital for regular medical check up has helped to promote their health	72 (75.67)	139 (135)	7 (6.33)	2 (3)	220			
	The geriatrician counselling of elderly people on the need for maintaining personal and environmental hygiene has helped to prevent infection, injuries and disability	98 (75.67)	112 (135)	6 (6.33)	4 (3)	220			
Grand Total		227	405	19	9	660			

The result of the analysis of tested hypothesis three (3) above showed the calculated value of 18.86 against the critical table value of 12.59 at 0.05 alpha level of significance with degree of freedom of 6. Since the calculated value is greater than the critical value, the stated hypothesis is hereby rejected. This means health promotion programmes implemented for elderly people have much influence on their health and well being.

Discussion of Findings

The overall results of analysis of all the findings revealed that geriatric, social support and health promotion services rendered to the elderly people have much influence on their health and well being. The result of tested hypothesis one showed that geriatric services such as long term medical services, regular medical check up and rehabilitative care have much impact on the health and well being of elderly people.

The findings is in line with the finding of Jean (1997) that geriatric care has been progressively generated programmes for long term care of the chronically ill aged people. Geriatric medicine has deepened its fundamental understanding and adopted its attitudes to meet the need of a population that is growing steadily older. This finding also confirmed the finding of Brocklehurst (1995) that geriatrician provides services in an areas which involve not only management of individual ill patients but also the organisation of rehabilitative services, long term care, a day hospital etc all of which aimed at maintaining optimal health of people.

The result obtained from test of hypothesis two(2) revealed that social support services rendered to the elderly people influence their health and well being. This is due largely to the

that the family and friends support services; community recreation and rehabilitation programmes have helped to prolong life and maintaining health and well being of elderly people. This confirmed the earlier finding of Keating (1995) that a variety of social problems affect the health status of the elderly people. He stated further that problems such as lack of independence in initiating action, restricted mobility and lack of adequate, safe and affordable housing need urgent solution which often manifest in form of social support services.

This finding was also supported by Zhu (1997) that every community usually create a community service center capable of catering for old people who may have lost the ability to cope with daily living. The community centre according to him usually organized and arrange necessary care of old people when all their families and relatives have gone to work.

The result of analysis of tested of hypothesis three showed that health promotion programmes implemented for elderly people have much influence on their health and well being. Health promotion programmes such as meals on wheel, nutritional awareness campaign, encouragement on environmental hygiene and need for regular medical check up, are all promotive measures that help to improve health and well being of elderly people. This finding is in line with the finding of Alexandre & Ilona (1997) that optimal level of health can be achieved for long term health practices that prolong life and prevent diseases through increasing awareness of aged people to focus on the process of healthy ageing.

Conclusion

Based on the findings from analysis of tested hypotheses above, the following conclusion were drawn:

- The geriatric services rendered to the elderly people have much influence on their health and well being.
- The social support services rendered to the old people have much influence on their health and well being.
- The health promotive programmes organized and implemented for elderly people have much influence on their health and well being.

Recommendations

Based on the findings from this study, the study recommends that:

- All elderly people should endeavour to visit hospital and health centre for regular and prompt medical check up.
- Relatives and friends of elderly people should always assist and support them to promote their health and well being.
- Government and community members should try as much as possible to provide equipment and financial support to the geriatric center and community recreational center.
- Health care provider should endeavor to enlighten the elderly people on what constitute good health habits and healthy living.
- Health care providers should endeavour to enlighten and encourage the elderly people on their nutritional needs and practices.

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