

**ASSESSING THE IMPACT OF OLD AGE SECURITY EXPECTATION ON
ELDERLY PERSONS' ACHIEVED FERTILITY IN NIGERIA**

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Abstract

Introduction: This is addressed by examining the fact that due to the dearth of formal care for the elderly, the onus for the care of this class of people rest squarely on their children. This poses important public policy and academic questions on the welfare of the elderly.

Methods: Multi-stage sampling procedure was used to select LGAs, EAs and individuals for the study. In all, 810 respondents were interviewed. Logistic regression model was used to determine the net effects of the explanatory factors on the welfare of the elderly.

Results: The study found that some elderly persons gave birth to certain number of children in expectation of old age care. Education and religion are related to the family size of the elderly persons. Those with primary level of education are 4.3 times more likely to see high number of children as important source of old age security than those secondary level of education.

Conclusion: The study concludes on the need for a well-organised social security system catering for all old persons.

Key words: Elderly, Achieved fertility, Old age security, Nigeria, & Welfare

Introduction

The incipient decline in fertility in Nigeria, which is expected to continue unabated in the next ten to twenty years, as well as improved survival chances throughout the life cycle, imply that the coming decades will witness dramatic increases in the number of the elderly, that is, persons 60 years and above. Ageing of the population presents formidable challenges to developing countries, such as Nigeria, that are currently struggling with underdevelopment.

The attention of the international community has been drawn to this relatively recent but increasingly important demographic phenomenon. Thus, the World Assembly on the Elderly in Vienna, in 1982, made recommendations bordering on the elderly's health, environment and consumer protection among other issues. Likewise, the UN General Assembly, 1991, and the 1994 Cairo International Conference on Population and Development re-echoed concerns on elderly persons worldwide, and proffered measures for improving their lives, and that of the rest of mankind, within the framework of sustainable development.

The situation of the elderly in Nigeria is not quite different from what is obtainable in other Sub-Saharan African countries. In fact, it is only South Africa and Namibia that currently have a social security system where persons aged 60 years and above are entitled to a monthly pension (Ferreira, 1986: 34). The Nigerian elderly are disadvantaged regarding systemic support. Several factors are responsible for this. First, as mentioned earlier, demographic change is increasing the number and proportion of older persons, and thus the demand for social support. Second, development factors are changing social institutions with severe

implications for the support for the elderly. For instance, the nature and structure of the family is changing as more young people leave agricultural employment, obtain education, enter the wage economy and migrate to urban areas. The implications of this change in the family structure on the well being of the elderly include over-reliance on formal support system, falling income, deteriorating health conditions, poor nutrition, isolation, and boredom.

The above tends to separate the young and middle age population from the old as the majority of elderly ones live in rural areas, where agriculture is the main occupation. Agricultural workers, either as subsistence workers or as workers in commercial agriculture, usually do not receive pension benefits or social security. As in most countries in the world, the family or the extended family system in Nigeria is the most important institution for older people care. As the development process changes traditional institutional structures, old people may receive less familial support than did prior generations.

The breakdown in traditional values in Nigeria, and continued rise of the nuclear family, and deteriorating economic conditions, have all resulted in declining family support for the elderly. Older persons, particularly in rural areas, do not have formal support systems to substitute for the withdrawal of family support. In Nigeria, social security benefits are provided only for a small category of workers in wage employment, and the family, the traditional support unit, is gradually shifting from being a production to a consumption unit.

In Nigeria, support for the elderly is still almost entirely provided by families, with the state providing little or no support system for them. Older women are more likely to suffer

from disabling illnesses than older men and therefore have a greater need for support from caregivers and state services.

Because women frequently outlive their husbands, they experience a distinct drop in standards of living on the death of their spouse because much of their societal access to resources have been channeled through their spouse (Peil, 1992: 12). This situation, true of the world's wealthiest societies, is exacerbated in African society where widowhood practices frequently absorb the bulk of wife/ wives resources, property ownership practices remove the roof over her head and entitlement to land on her husband's death and where lifetime earning and saving potentials have been weak in any case given the structure of society. This is more pronounced in Nigeria through the harmful traditional practices against women.

Over the years, modernization, industrialization and the accompanying strong western influence have brought about changes in the structure and socio-economic functions of the family in Nigeria. First, the massive rural-urban migration, often necessitated by the search for white-collar jobs, has resulted in the reduction of the relevance of the extended family system and the increasing isolation of the elderly. Secondly, the mutual obligations of the extended family system are being systematically eroded by the increasing emphasis on material success and individualism. Thirdly, the interdependence that was once the hallmark of the extended family is being replaced by emphasis on autonomy and independence of the nuclear family, consisting of a man, wife and children. Fourthly, access to knowledge through formal schooling has led to a reduction in the power and prestige given to the accumulated wisdom of

the elderly. Their knowledge and experience are seen as not being directly relevant to the problems of the modern age (Ogunbodede, 1998: 5).

Studies conducted in various parts of Africa have consistently reported that contrary to the fear that modernisation may have weakened children's commitment to caring for older parents, children still remained the bulwark of informal social welfare support to elders. This has been found to be the case in Ghana (Apt, 1994:13), Zimbabwe (Adamchak, 1991:6), Kenya (Cattell, 1990:14) and Nigeria (Togonu – Bickersteth 1987a: 26, 1989:21; Peil, 1991:5, 1992:17). It has been suggested that an expectation of and a need for support in old age are important contributions to high fertility in West Africa (Caldwell, 1976:15). Parents are expected to “invest” in their children with the hope that such investment will yield dividends when the parent is old and requires assistance from the children. Hence, disabled children are viewed as “poor investment” and are often neglected by their parents (Bamisiaye and Di Domenico, 1983:11) while childlessness in old age has been linked to isolation, ill health and poverty (Peil, 1995:4-7).

In Africa, the care of older family members is falling on fewer children and the impact is felt most by those with the least resources. Poverty is a critical risk factor for older persons in developing countries in general and widespread poverty within communities contributes to the stress felt by families (Gorman, 1997:14).

The theory of fertility decline put forward by Caldwell (1982:12) has relevance for the kinship exchanges, which are associated with traditional and western living arrangements for

the elderly. The theory posits that wealth typically flows up to the oldest generations in traditional societies, whereas in western societies wealth flows downwards. Therefore, a large number of children make good sense in traditional society in terms of old age security. In developed societies, where raising children requires large financial outlays and social security provisions are a state concern, large families are not a requisite to financial well being in old age. However, Olusanya (1989:15) argued that the “gift of God principle” is a more powerful explanation of the pro-natal disposition of Yoruba and of their fertility level rather than the calculus of wealth transfer. Makinwa-Adebusoye (1991:9) took a mild position by concluding that some implicit support for the idea that African parents based their decision on family size at least to some extent on economic calculation. In sum, the quality of surviving children is an important factor in the well being of the elderly.

Therefore, what is the present status of the elderly in our society? What are the current socio-economic conditions of the elderly? How far has the family abdicated its responsibility towards the elderly? Is child-sex preference related to socio-economic status of the elderly? Is there a relationship between socio-demographic characteristics and desire to limit family size? These and other emerging questions would be probed into in the course of this study, using the Ijebu of south –western Nigeria as a case study

Methods

This study was conducted in Ijebuland. The Ijebus are spread into parts of South-Western, Nigeria. The 2006 census figure put the population of Lagos state at 9,015, 781, out of which about 281,481 were Ijebu. Out of the 2,338,570 people in Ogun State, about 725, 299 were Ijebu. Lagos state had twenty local government areas. Of these, Ikorodu, Ibeju-Lekki and Epe local government areas are largely inhabited by the Ijebus. Ogun state has twenty local government areas, with eight of them in Ijebuland. The Ijebu therefore are found in eleven

local government areas of Lagos and Ogun States. The methods comprise the use of questionnaire, case histories and document analysis. Quantitative method was exhaustively used. Ordinarily, the structured interview helps to generate standardized information from a representative sample of a given population.

In order to ensure conformity to the principles of representativeness, the sample size was determined statistically. The sample size determination formula developed by Frank-Nachmias and Nachmias (1996) is adopted in this regard. It is given as follows:

$$N=S^2/(S.E)^2$$

Where N = the desired sample size

S = standard deviation of the variables under study

S.E = standard error (error margin)

Two important decisions are necessary in order to use this formula: how large a standard error is acceptable and since the study involves more than one variable, is a sample that is adequate for one variable satisfactory for other variables? (Frankfort-Nachmias and Nachmias, 1996; Moser and Kalton, 1972). For the purpose of this study, a standard deviation of 1.2 was assumed. The assumption is that these variables are likely to possess similar standard deviation and may represent other variables included in the analysis as far as the degree of variability is concerned. Also, because of the desire to obtain a sample size that could produce dependable estimates of the population parameters, the standard error was fixed at 4 percent. This connotes that the risk of error in estimating the population parameters based on the sample data in the present study is four out of a hundred. In other words, the sample estimates of the population parameters are likely to be correct 96 times out of a hundred. This margin is perceived as acceptable in view of the 95-confidence level generally allowed in social science research. So standard deviation =1.2 and standard error =4 percent (0.04). The sample size is therefore computed as follows:

$$N= (1.2)^2 / (0.04)^2 =900$$

So the study sample size is theoretically put at nine hundred elderly in the study population.

A sample of elderly persons was drawn in the following stages: -

Stage 1: Simple random sampling technique was used to select 5 LGAs of Ijebu ethnic group from 11 LGAs in Lagos and Ogun States. Table 1 below shows the population and size of Ijebu by state. The lottery method of simple random sampling technique was employed here.

The selected LGAs are: Ikorodu LGA and Epe LGA (Lagos State) while Ijebu Ode; Shagamu and Ijebu North LGAs (Ogun State)

Stage two involved the stratification of each of the five selected LGAs into three clusters based on the residential patterns that reflect the socio-economic status of the residents. Each of the LGAs was stratified into an elite cluster, a transitional cluster and a traditional cluster. The elite cluster represented areas where only one family is living in a housing unit and the residents were of relative high income and better education. The transitional cluster was where families live in rented apartments. The traditional cluster represented the indigenous areas, where people from the same lineage reside together in a housing unit.

The third stage involved the selection of clusters from the three residential clusters. Lottery method of simple random sampling was employed here.

The fourth stage was the selection of enumeration areas (EAs) in the selected clusters. EAs in the selected clusters are first listed before the selection of final EAs. An Enumeration Area is a statistically delineated geographical area carved out of a locality (or a combination of localities) with 500 people or less. The entire area of study has 1530 EAs (National Population Commission, 1994). Out of these 34 were randomly selected, using lottery method of simple random sampling technique; the 34 EAs represented 2.22 percent of the study areas.

The fifth stage was the selection of household from the selected EAs. Household was selected within each EA through household listing until the required sample of 25 households was obtained. The sampling interval used in selecting household varied from one EA to another because of the variation in the number of households in each EA. The sixth stage was the selection of an elderly person to be interviewed in households with more than one qualified

elderly persons. Each elderly person was randomly selected and in all 850 elderly persons were interviewed. The unit of analysis was the individual elderly.

FINDINGS

Socio-Demographic Profile

Information provided by 810 elderly men and women is analyzed in this study. The sample is unequally divided between males and females (roughly two-fifths and three-fifths, respectively). The study decided to have more females than males in the sample because in the elderly group, we have more females due to socio-cultural factors for example more male mortality implies that there are more females. Also, a study conducted by WHO (1996) shows that women through their working life, have limited access to and control of productive resources such as land, credit and technology.

Table 1.1 shows the important socio-demographic characteristics of the respondents. As regards place of residence, the study yielded about three-fifths of the respondents from rural areas and two-fifths from the urban areas. Age distribution reveals that roughly two – fifths of the respondents fall below age 65, another one-fifth above the 70 years of age, while about two-fifths of the respondents are between 65 and 69 years. The mean age for both sexes is 66.9 years, as shown in Table 1.1, 67.4 years among male respondents and 66.5 years among their female counterparts. Considering the crucial implications of age in this study, it is imperative to note that the nature of the distribution may not be unconnected with the fundamental problem associated with age reporting in developing countries. Such problems include people's ignorance of their actual age, because the society does not value the importance of age, and the tendency of some people to report themselves into younger ages.

Therefore, the option taken in most cases, particularly in rural areas, is to estimate the age for respondents on the basis of certain past events or occurrences. This, however, presents a serious epistemological problem. In the rural areas, due to early marriage, poor nutrition, subsistence farming, and lack of adequate medical services, respondents wear out fast, making them look older than their actual age. Despite this, attempts were made at estimating their right ages. Yet the age distribution presented should be taken with some caution bearing in mind the ever-occurring issue of age misreporting in Nigeria. Nevertheless, the age distribution does not reflect any significant difference between male and female respondents; on the average, males are older than the females by about one year.

According to Table 1.1, it is evident that the majority of the respondents have some level of formal education. In fact, nine out of every ten of the males and four-fifths of the females have at least, primary education. The level of literacy is higher among the male respondents than their female counterparts. For example, about two-fifths of the females and only one-tenth of the males are illiterate. Also, the proportion of males who had some secondary education and above (about one-quarter) is higher than that of their female counterparts (about one-tenth). In all, the above educational pattern reflects the national pattern of literacy: It has been reported by the National Population Commission (NPC) that while 66 percent of male population have had some level of education, only 57 percent of their female counterparts are of the same category. The religious affiliation of the respondents indicates that about two-fifths of both sexes are muslims. Half of the respondents were Christians while the remaining one-tenth belong to traditional Africa religion.

The marital status of the respondents is also presented in Table 1.1. More men than women were still in a marital union, about half and two-fifths, respectively. Clearly, elderly people desire to have someone beside them to provide assistance, reduce boredom and its associated health problems. The Table reflects that one out of every five male or female respondents were widowed; more female respondents (16.5%) reported divorce/separation relative to men (about 11%), which may reflect the different effects of polygyny on male and female. About one-fifth of male and female respondents, indicated that they remarried following widowhood or divorce. The level of divorce or separation observed in this study is higher than the national average of 0.9 and 6.2 percent among males and females respectively (NPC, 1998).

Furthermore, the Table shows that the majority of the respondents are in polygynous marriages. About two-thirds of male and female respondents indicated polygynous unions. Those who reported monogamous marriage comprise just about one-third of men and one-fifth of women. The point to note here is that polygyny is more prevalent perhaps because of the spread of Islamic religion in the population, and because an Ijebuman or Yorubaman is polygynous in nature. Kinsella (1990) asserts that members of the extended family live under the same roof, and are more available for interaction than would otherwise be the case.

A related issue is age at marriage. It is apparent in Table 1.1 that women got married earlier than men. While about two-fifths of male respondents got married before or by age 24, about half of their female counterparts got married at the same age. The fact that the average

age at first marriage among male respondents is 22.02 years and 20.94 years among female shows that women marry earlier than men. Also, the mean age at first marriage is lower in the rural areas than in the urban areas for both sexes (17.1 and 20.9 years) respectively.

Table 1.1 depicts the respondents' type of family. It is apparent from the Table that about three-quarters of the respondents live in extended family setting. This further corroborates the polygynous type of marriage found earlier in the analysis.

The distribution of the sample by number of surviving children shows that the majority of the elderly Nigerians surveyed in this study have large families, that is, families with more than four children. Indeed, more than three-quarters of respondents have more than 4 children, with one-tenth having nine children or more. The mean number of children for both sexes is 5.3. Caldwell (1976) asserts that one of the major reasons for high fertility in Africa is the need for social and economic security at old age. This corroborates the 2003 Nigerian Demographic and Health Survey, which put the total fertility at 5.7 per woman. This high fertility is one of the factors responsible for lower developmental efforts particularly in human resources sectors of health, education and employment.

The study examined the number of male children among the study population. It was found that only four percent had no male child at all, a quarter of them had two male children and another quarter had three male children. The mean number of male children for male respondents is 2.7 and 2.6 for female respondents. With respect to female children, only two percent had no female child at all. It was revealed that about one-quarter of them had two

female children and three-tenths of them had three female children. The mean number of female children for both sexes is 2.7. The mean number of female children for male respondents is 2.6 and 2.7 for female respondents.

Table 1.1 reveals that one-third of the male respondents ever desired to have more children and three out of every ten female respondents ever desired to have more children. As a corollary to the above, about three-quarters of the respondents are staying with their children.

Achieved Fertility by Old age Security Expectation, by Sex

According to Table 1.2, the majority of the respondents were not influenced by old age expectation to have their present family size. The basis for this question was the traditional belief that the more the children one has, the more likely one's care at old age. However, Table 1.2 shows that only a quarter of the male respondents were influenced by old age expectation to have certain number of children; about three-tenths of the female respondents were so influenced. The basis for the response is the fact that child bearing is perceived as act of God and therefore cannot be manipulated by anybody to achieve an advantage.

Achieved Fertility by Selected Socio-Demographic and Economic variables

Table 1.3 shows the percentage of respondents by achieved fertility by selecting socio-demographic variables. In certain respects, the results did not reflect the expected outcome. Amongst the male respondents, about three-fourths of urban dwellers have more than four children relative to more than four-fifths of their rural counterparts. On the other hand, the effect of place of residence is also not significant among female respondents; for example, about four-fifths of both urban and rural areas have more than four children. This may be attributed to the efficacy of traditional methods of birth control (periodic abstinence, withdrawal, ring charm, pillow charm and others). Also, condoms are distributed free of charge in the rural areas whereas they are sold in the urban areas. Yet, there is the need to reduce this

fertility rate put at 5.28 per woman. Despite the fact that modern methods of family planning like condom, injections and others are gaining ground in both urban and rural, place of residence, there is still need to reduce this fertility in order to enhance the fight for poverty eradication. One striking observation is that the proportion of female respondents in both areas with more than four children is higher than the male counterparts. This was not expected because efforts at reducing fertility rate have been focused on the women. A good example of this phenomenon was the 1991 Nigerian population policy, which expected an average of four children per woman. The implication of the above is that women still constitute a significant proportion in the determination of family size and more efforts should be focused on vasectomy and ultra uterine devices and even Norplant. One way of doing this is to create incentives for any woman who comes forward for vasectomy after two or three births.

With respect to age, the observed pattern is that of high fertility at lower ages. This is quite expected as an average elderly respondent has at least four children. The chi-square value of 16.40 for female category is statistically significant.

The study expected those in polygamous marriage to have more children than those in monogamous marriage. This was confirmed by the study where about four-fifths of those in polygamous unions have more than four children while about seven out of every ten respondents in monogamous unions have more than four children. The above has proved right out a priori expectation. To strengthen the above result is the chi-square value of 13.72 for male category, which is statistically significant.

The result of the effect of educational attainment on number of children is quite revealing. It shows that more men than women are influenced by education to have less than four children. The highest proportion among the male with more than four children are those who completed secondary education, this is rather surprising and the highest proportion among the female with more than four children are even those with post-secondary education. However the justification for the above result may be found in the low educational status of the study

population. For example very few of them have secondary education and above. The fact that the chi-square value of 24.67 for male is significant is not surprising while that for female (30.30) is significant further strengthens the above assertion. Type of family did not reveal contradictory results with respect to number of children. Among males and females, those in extended families are more likely to have more than four children than those in nuclear families. To strengthen the above result is the chi-square value of 5.04 for male category, which is statistically significant.

Not surprising those living with their children are more likely to have more than four children than those not living with their children. The fact that the chi-square values (27.08 and 6.98 for male and female categories respectively) are statistically significant strengthens this assertion. In terms of occupation, Table 1.3 shows that elderly male and female respondents who worked in government establishments are less likely to have more than four children than who were traders. The implication of the above is that more female across occupation have more children than their male counterparts. The fact that the chi-square value of 29.90 for female category is statistically significant strengthens this assertion.

Multi-Variate Analysis

Table 1.4 presents the odds ratios of two logistic regression models examining the effect of some basic characteristics on achieved fertility. In this regard, separate models are developed on the basis of gender, examining the effects of the independent variables on the likelihood of high fertility by sex of respondents. The dependent variable is coded 1 for high fertility and 0 if otherwise. The aim is to assess the effect of each of the independent variables (with respect to defined categories) on achieved fertility while others are held constant. According to the Table, while age of respondents, education, occupation are significantly related to achieved in model 2, in the male model, with the exception of education and occupation, all the characteristics are significantly associated with achieved fertility. In the first model, rural residence is 1.1 times more likely to have higher number of children than urban settlement.

With respect to educational attainment surprisingly, while no education is 1.7 times more likely to have high number of children, secondary education is 1.6 times more likely to have high number of children than primary education. In respect of age of respondents, while those age 60-69 are 2.0 times more likely to have more children, those aged 70-79 are 1.5 times more likely to have high number of children than those aged 80 years and above. In terms of occupation, while those who worked in government organization are 53 percent times less likely, traders are 92 percent less likely to have high number of children than those who worked in “other” category.

In female model, elderly education indicates that while no schooling are 1.4 times more likely, secondary education are 1.1 times more likely to have high number of children than primary education. With respect to age of respondents, while those aged 60-69 are 1.3 times more likely, those aged 80 years and above are 84 percent times less likely to have high number of children than those aged 70-79. Contrary to the literature review, rural dwellers are 72 percent times less likely to have high number of children than their urban counterparts.

CONCLUSION

The post-Cairo International Conference on Population and Development, and the World Assembly on elderly in Vienna made recommendations bothering on the elderly’s health, while proffering measures for improving their lives, and that of the rest of mankind, within the framework of sustainable development. These meetings and others witnessed an increased interest in the social and economic security of the elderly. Several studies (Adebagbo, 1978; Brand, 1993; Togonu-Bickersteth, 1987a, b, 1988, 1989, 1995; Peil,

1991,1992; Ekpenyong, 1987) have focused on the various aspects of the elderly problems, ranging from health, gender, and economic, inter-generational households among others. However, little or nothing has been done on the social and economic security of the elderly. This study was borne out of the fact that no society or government can offer total care for all elderly people – no matter how developed or wealthy the country is. This fact particularly applies to Nigeria, where a large proportion of the population comprises poor or indigent persons. What this means is that a great deal of the responsibility for the care of these persons devolves upon caregivers in the community, usually the family members. Therefore, the paradigm that places elderly's care on the feet of government needs to be thoroughly examined as it is more apparent that family constitutes the core of the elderly care especially in developing countries like Nigeria.

Therefore, a great attention is paid, in this study, to the informal care system, while not ignoring the expected formal social security from government. The importance of the non-governmental organizations in the care of the elderly is also treated for it is pertinent bearing in mind the fact that all the countries in Africa are set to go through the process of demographic transition during the next two decades, with the obvious implication for population ageing. According to the Nigerian 1991 census, there are about 4.6 million Nigerians aged 60 years and above, or 5.2 percent of the entire population (NPC, 1994). It is evident from the study that old age expectation had some effect on family size. The import of the above is that there is a high value for children as a source of old age support.

The study refutes one prevailing notion, that the higher the number of children, the more likely the level of care an elderly person received. Therefore there was emphasis on quality of children rather than number of children. However, the study confirmed that the family system still contributes significantly, in most cases, towards the social and economic security of elderly Nigerians, though such contribution tends to come, primarily and mostly, from the elderly person's own children, rather than from the extended family, as such.

The idea that old-age security and well being in Nigeria should remain the primary responsibility of the family is untenable. Government must assume the primary responsibility in a partnership in which the family also continues to play a significant role. Therefore, it is also recommended that appropriate measures be introduced by government to protect the family, in particular, the nuclear family, to strengthen family values and promote inter-generational understanding, as well as to empower Nigerian youths, especially, through significant improvements in the educational, employment and other economic opportunities available to them, so that they will be in a better position to take adequate care of their elderly parents.

Table 1.1: Percentage Distribution of Respondents by selected socio-demographic characteristics, by sex

Characteristics	Male		Female	
	%	N=330	%	N=480
Study Area				
Ikorodu	24.9	82	26.0	125
Epe	22.1	73	18.3	88
Ijebu Ode	19.1	63	18.3	88
Ijebu North	19.7	65	16.5	79
Shagamu	14.2	47	20.9	100

Place of Residence				
Rural	55.8	184	65.8	316
Urban	42.2	146	34.2	164
Age				
60-64	40.3	133	43.3	208
65-69	33.3	110	38.3	184
70+	26.4	87	18.4	88
Mean	67.4		66.5	
Education				
None	13.9	46	20.0	96
Primary	59.7	197	66.9	321
Secondary	26.4	87	13.1	63
Mean	2.8		2.4	
Religion				
Roman Catholic	17.0	56	14.6	70
Protestants	24.8	82	31.7	152
Islam	43.9	145	39.7	191
Traditionalists	12.4	41	12.3	59
Other (Christians)	1.9	6	1.7	8
Marital Status				
Married	51.5	170	44.0	211
Widowed	20.0	66	21.0	101
Divorced/Separated	10.9	36	16.5	79
Remarried	17.6	58	18.5	89
If Remarried, Why?				
Widowhood	11.8	39	11.0	53
Divorced	6.1	20	7.3	35
Not Applicable	82.1	271	81.7	392
Type of Marriage				
Monogamous	33.3	110	32.1	154
Polygynous	66.7	220	67.9	326
Type of Family				
Nuclear	27.9	92	22.3	154
Extended	72.1	238	77.7	326

Family Size				
One	0.9	3	2.3	11
Two	7.6	25	4.6	22
Three	13.9	46	15.6	75
Four	19.4	64	15.2	73
Five	14.5	48	22.3	107
Six	13.3	44	15.0	72
Seven	9.1	30	5.8	28
Eight	9.7	32	10.0	48
Nine+	11.5	38	9.2	44
Mean	5.3		5.2	
Number of Male Children				
None	3.0	10	4.8	23
One	19.7	65	22.5	108
Two	25.5	84	24.8	119
Three	24.8	82	25.2	121
Four	13.6	45	10.0	48
Five	6.7	22	7.1	34
Six	6.1	20	4.8	23
Seven	0.6	2	0.8	4
Mean	2.7		2.6	
Number of Female Children				
None	1.2	4	2.7	13
One	22.4	74	15.6	75
Two	27.3	90	29.0	139
Three	27.0	89	31.0	149
Four	10.9	36	10.6	51
Five	7.9	26	7.9	38
Six	2.4	8	2.7	13
Seven	0.9	3	0.4	2
Mean	2.6		2.7	
Ever desired for more children				
Yes	34.5	66	30.8	79
No	65.5	264	69.2	401
If staying with Children				
Yes	69.4	229	72.1	346
No	30.6	101	27.9	134

Age at First Marriage				
15-19	33.9	112	42.1	202
20-24	42.7	141	47.1	226
25-29	20.3	67	10.6	51
30+	3.1	10	0.2	1
Mean	22.0		20.9	

Table 1.2: Percentage Distribution of Respondents by achieved fertility and old age security expectation, by sex.

CHARACTERISTIC	MALE		FEMALE	
	%	N=330	%	N=480
Did old age expectation influence the number of children?				
Yes	25.5	84	28.1	135
No	74.5	246	71.9	345

Table 1.3: Percentage distribution of the elderly by level of fertility by selected socio-demographic and economic variables.

Characteristics	Male N = 330				Female N = 480			
	Low	Medium	High	Total	Low	Medium	High	Total
Place of Residence								
Rural	23.4	48.4	28.2	184	23.7	52.8	23.4	316
Urban	23.3	45.9	30.8	146	17.1	48.2	34.8	164
	X2 = 0.29				X2 = 7.78*			
Age								
60-64	18.7	48.5	45.4	134	17.8	51.9	30.3	208
65-69	25.2	48.6	26.1	111	26.2	52.5	21.3	183
70-74	26.8	51.8	21.4	56	18.5	55.4	26.2	65
75-79	33.3	38.9	27.8	18	28.6	14.3	57.1	14
80+	27.3	64.5	7.2	11	20.0	40.0	40.0	10
	X2 = 13.10*				X2 = 16.40**			
Type of Marriage								
Monogamous	29.1	54.5	16.4	110	23.4	48.1	28.5	154
Polygamous	20.5	43.6	35.9	220	20.3	52.9	26.8	326
	X2 = 13.72*				X2 = 4.74			
Education								
None	20.5	47.7	31.8	44	15.8	61.1	23.1	95
Primary Inco.	24.1	49.1	26.7	116	25.8	51.0	23.2	198
Primary Co.	26.8	51.2	22.0	82	19.4	51.6	29.0	124
Secondary Inco.	29.4	49.0	21.6	51	35.3	38.2	26.5	34
Secondary Co.	9.7	29.0	61.3	31	6.3	31.3	62.5	

Post Secondary	-	33.3	66.7		6.3	31.3	62.5	
	X2 = 24.67**				X2 = 30.30**			
Type of Family								
Nuclear	28.3	51.1	20.7	112	23.4	48.6	28.0	202
Extended	21.4	45.8	32.8	218	21.0	52.2	26.9	278
	X2 = 5.04*				N2 = 3.14			
Living Arrangement								
Staying with children	16.2	48.0	35.8	229	18.5	52.3	29.2	346
Not staying	39.6	45.5	14.9	101	29.1	48.5	22.4	134
	X2 = 27.08**				X2 = 6.98*			
Type of Work								
Trading	19.1	46.1	34.8	89	27.4	47.3	29.3	146
Government Work	29.1	49.3	21.6	148	22.4	54.3	23.3	219
Others	18.7	44.0	37.3	93	12.6	41.4	46.0	115
	X2 = 12.11				2 = 29.90**			
	“Significant at P < 0.05				“”Significant at P < 0.01			

Low = 1-3 children

Medium = 4-6 children

High = 7+ children

Table 1.4: Odds ratios from two logistic regression models examining the effect of selected characteristics on achieved fertility

Characteristics	Male		Female	
	Odd Ratio	S.E.	Odd Ratio	S.E.
Age				
60-69	2.02*	0.336	1.26	0.327
70-79	1.45*	0.333	0.84*	0.321
80+	1.00	Rc	1.00	Rc
Education				
None	1.66	0.434	1.42*	0.310
Primary	1.00	Rc	1.00	Rc
Secondary	1.62	0.324	1.05	0.359
Place of Residence				
Rural	1.06*	0.271	0.723	0.254
Urban	1.00	Rc	1.00	Rc

Type of Work				
Trading	0.922	0.390	0.386*	0.347
Govt. Work	0.534	0.336	0.486*	0.332
Others	1.00	Rc	1.00	Rc

- 2 log likelihood 302,991 457,504

Model chi-square 6.912 14.446

*Significant at P < 0.05

**Significant at P < 0.01 rc – reference category

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