

**INTERGENERATIONAL HOUSEHOLDS AND WELL-BEING OF THE
ELDERLY IN OJO LOCAL GOVERNMENT AREA**

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ABSTRACT

Intergenerational household has been identified as an important determinant in the lives of older persons' in Nigeria. This study aims at explaining the patterns of intergenerational households and supports as well as its impact on older persons' wellbeing.

Multi-stage sampling procedure was used to select LGAs, EAs and individuals for the study. In all, 250 respondents were interviewed. Logistic regression model was used in the analysis.

The study found that some older persons actually live in intergenerational households. Education, income and religion are related to the formation of intergenerational households. Those with tertiary education are 1.2 times less likely to report improvement in wellbeing than those with primary education.

The study concludes that intergenerational household may be a panacea to dwindling wellbeing of older persons.

INTRODUCTION

Population is ageing in most countries of the world today. Going by the recent current economic recession, the care of the elderly has been a course for serious attention being the most vulnerable subset of the population (Ekpeyong, 1995). The implications of ageing are more serious for developing countries where majority of the elderly do not have regular earnings after retirement where there are problems of earning from assets in old age. In all societies, intergenerational households are large and potentially have an important influence on equality and economic growth. The development of each generation of elderly depends on the resources that it receives from productive members of society for health, education and sustenance (Lee, 1994). The well-being of the elderly on the other hand depends on the social programs that provide health care, income and support e.tc by the family systems that dominate in many developing countries. The importance of intergenerational households has not gone unnoticed. During the last two decades, there have been important advances in measuring, modelling, and assessing the implications of intergenerational households and well-being of the elderly both at the micro and macro level (Bommier and Lee, 2004). As population ageing increases in both developed and developing countries, issues surrounding support and care of older persons are receiving more attention.

The living arrangements of the older population can have an influence on the demand for formal and informal support systems. Living arrangements are influenced by a variety of factors including marital status, financial well-being, health status, and family size and structure, as well as cultural traditions such as kinship patterns, the value placed on living independently or with family members, the availability of social services and social support, and the physical features of housing stock and local communities on the older generations. Changing family structures also influence the need for formal support systems. There are several alternative forms of family and generational structure that are shaped by changes in marital status, fertility, mortality and migration. Much of the research has focused on the traditional paths through the life course (e.g, marriage, bearing children and widowhood) and has not considered the alternative pathways and their consequences on living arrangements and well-being in later life. In traditional societies, the family has been the most rural and conducive social organization for the care and support of old aged persons. The care and support to old aged persons was provided by family members especially the wife, sons, daughters, son-in-laws and daughter-in-laws. This care giving was backed not simply by the emotional bonds of relationship emerging out of blood relationship or marital relationship but by the force of persuasive influence of traditional values, norms and behaviour which were not simply practiced as a matter of routine but also defied (Sijuwade, 1991). The care of the elders was the moral imperative which was considered not only material bliss but also spiritual salvation (Gore, 1992). In Nigeria, it is often assumed that the family will automatically take on the responsibility of caring for the elderly, yet little is known about the contemporary conditions of the elderly within the safety net in practice. Currently, little is known about the link between intergenerational households and the well-being of the elderly in Lagos metropolis. As the elderly constitute an increasing proportion of Nigeria's population, it is

pertinent to examine their needs and concerns which have direct impacts on their well-being and quality of life. Hitherto, question on how to care for these growing numbers of elderly, their concerns and need are yet to feature prominently in major policy debates. The co-residence of parents and adult children is also rarely in highly modernized countries, but it is common in many developing countries. In developing countries, the flow of intergenerational support is upward whereas in highly developed countries, the flow is downward. The well-being of the elderly has become an increasingly important issue in the current society; the family has emerged as one of the more important potential sources of well-being, next to having a good health and a decent pension. For many older persons, having a good relationship with one's children is probably as important if not more important than pension. Therefore, what are the living conditions of older persons in intergenerational households? To what extent does such household assist in improving the wellbeing of older persons? What is the structure of intergenerational households in Lagos metropolis? What are the consequences of intergenerational relations for the well-being of the elderly? These and other questions shall be probed into in the course of this study.

THEORETICAL ORIENTATION

In this study, attempt would be made to employ the social exchange theory, disengagement theory and activity theory. In the study of old people, the structural functionalist perspective has offered two theories. On the one hand, there is the disengagement theory which emphasizes the phasing out of old people from certain roles in order that society can continue to function. On the other hand, activity theory emphasizes the need to keep old people active in order to integrate them into society, again so that society can continue to function (Davis, 1959).

Disengagement theory was further expounded by Cumming and Henry (1961:24) in "Growing Old" "Disengagement is an inevitable process in which many of the relationship between a person and other members of society are severed and those remaining are altered in quality." As individuals grow older, they and society will prepare in advance for the ultimate 'disengagement' which is caused by incapacitating disease or death. The theory states that the process of disengagement is the method by which society prepares for the structure of its member so that when the inevitable arrived, it does not disrupt the orderly functioning of society. Two criticisms have been leveled at the theory. First, by implication the theory suggests that disengagement is desirable and therefore condones a policy of indifference towards the problems of older people (Shanas, 1965). Second, disengagement is not inevitable and non-engagement in old age reflects the life long pattern of social interaction for some people.

Activity theory takes a different perception in explaining the process of old age. Havighurst (1963) argued that successful old age could be achieved by maintaining into old age the activity patterns and values typical of middle age. Happiness in old age is achieved by denying the onset of old age and where the relationship, activities or roles of middle age are lost, it is important to replace them with new ones in order to maintain life satisfaction. Indeed, there is a considerable amount of data to suggest that, in North America at least, the level of activity individuals have developed over a lifetime tends to persist into their later years (Riley, 1968). The central criticism of activity theory is its idealistic nature. It would appear unrealistic to expect, for all but a small minority, that people can maintain the level of activity associated with middle age through to old age in view of the limitations imposed by biological changes, alone. Activity theory is also unrealistic because the economic, political and social structure of society prevents the older workers from maintaining a major activity of middle age, namely, productive, employment.

Social Exchange Perspective

The intellectual origins of social exchange theories lie in the classic formulation of Blau (1947) and Homans (1956). The theories attempt to explain motivation for behaviours, and the balance and structure of exchanges. While the key concepts include social rewards and costs, social resources and social contact, the theories attempt to account for exchange behaviour between individuals of different ages as a result of the shift in roles, skills and resources that accompany advancing age (Hendricks, 1997). On this point, Gouldner (1958) stressed that social exchange assumes some principles of reciprocity. Gouldner (1958:27) suggests that the norm of reciprocity “defines certain actions and obligations as

payment for benefits received”, and “in its universal form, makes two interrelated, minimal demands:

- i. People should help those who have helped them
- ii. People should not injure those who have helped them. The basic characteristic is that the norms integrate both past event and future events with present behaviours.

On one hand, the norm of reciprocity involves “duties that people owe one another... because of their prior actions... we owe other certain things, because of what they have previously done for us” including the elderly. On the other hand, the norm actually mobilizes egoistic motivation and channels them into the maintenance of social systems. If you want to be helped by others (in the future), you must help them (in the present). The use of this theory in this study is premised on the fact that much of human suffering as well as much of human happiness have its source in the actions of other human beings. For example, the neglect of the welfare of the elderly is due to the actions of government and their immediate families. Some social associations are intrinsically rewarding, for example, children had pleasure in caring for their parents. This mutual affection is sociologically relevant and rewarding. Therefore, children and their parents benefit simultaneously from the social interaction and the only cost they incur is the indirect one of giving up alternative opportunities by devoting time to the association. A person who fails to reciprocate favours is accused of ingratitude. This very accusation indicates that reciprocation is expected and it serves as a social sanction that discourages individuals from forgetting their obligations to associates.

This theory is relevant to any analysis of the parent–children relationship. By this theory, we give to others only on an expectation of getting something back

in turn. The parent-child relationship is first established as irrational love. Therefore, a child is expected to take care of his parents at old age bearing in mind the contribution of the latter to his growth and success in life. Gouldners (1958) suggests that there is a universal norm of reciprocity, whereby people repay assistance from others in any form either by helping them in return or at least by doing nothing against their benefactors. The repayment may be of the same kind as the gift or something quite different. What is returned is often, but not necessarily equivalent to what is given. If reciprocity is exact, it may mean that the relationship is finished. Even kinship ties suffer if benefits are never repaid. But frequently the recipient returns less or more than is given as an indication of continuing social obligation, such as when a child decides to send his aged parents abroad for medical check up. Thus, the social structure of society can be seen as a network of obligations between individuals and groups based on prior services. Even relations with the ancestors can be seen as a form of exchange. They are remembered and oblations are showered on them partly because of their prior services to the family and partly because of the protection they can give in future; the living members of the family build up a debt, which the ancestor must pay in time of need. Social exchange theories have tended to concentrate on either restricted or generalised exchanges.

Methods

This study was conducted in OJo LGA of Lagos State. The 2006 census figure put the population of Ojo LGA at 281,481. 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.

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

Stage 1: Simple random sampling technique was used to select Ojo out of 20 LGAs in Lagos State. Table 1 below shows the population size of Ojo LGAs. The lottery method of simple random sampling technique was employed here.

Stage two involved the stratification of each of the 11 wards in the LGA into three clusters based on the residential patterns that reflect the socio-economic status of the residents. Each of the wards 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 23 EAs (National Population Commission, 1994). Out of these 10 were randomly selected, using lottery method of simple random sampling technique; the 34 EAs represented 43.5 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 250 elderly persons were interviewed. The unit of analysis was the individual elderly.

RESULTS

CHARACTERISTICS OF RESPONDENTS

Table 1: Summary of Socio-Demographic profile of Respondents

VARIABLES	FREQUENCY	PERCENTAGE
SEX		
Male	125	46.6
Female	117	53.4
Total	242	100
LAST BIRTHDAY		
60-64 years	47	17.5
65-69 years	64	23.9
70-74 years	76	28.4
75-79 years	33	12.3
80 and Above	22	8.2
Total	242	100
MARITAL STATUS		
Married	133	49.6
Divorced	36	13.4
Separated	25	9.3
Widowed/widower	48	17.9
Total	242	100
RELIGIOUS AFFILIATION		
Islam	120	44.8
Christianity	115	42.9
African Traditional Religion	1	.4

Others	6	2.2
Total	242	100
ETHNIC AFFILIATION		
Yoruba	154	57.5
Igbo	47	17.5
Hausa	37	13.8
Others	4	1.5
Total	242	100
EDUCATIONAL ATTAINMENT		
SSCE/WASCE	49	18.3
HND/BSC	147	54.9
NCE/OND	16	6.0
OTHERS	30	11.2
Total	242	100

Source: researcher's field survey, 2011

Interpretation

The above table 1 shows that more than half of the sample population are males and almost one quarter of the remaining respondents are females. This implies the survey was able to capture more male elderly than females.

The next cadre of measurement captured the age of respondents as at their last birthdays, it was discovered that more than one-quarter of the respondents are between the ages 70-74 which shows a little faction of the sample population are aged. Those within the age brackets 65-69 and 60-64 years represent the most active population as regards the elderly within Ojo Area but the survey captured only less than one tenth of the respondent. This implies more of the respondents were the less strong and inactive population.

Only four categories of marital status were observed from the sample survey. These are married, divorced, separated and widowed. It was discovered that almost more than half of the respondents are married. Others ranked below one-tenth, to which 25 out of 242 were separated as at the time of this survey. This shows more of the respondents are happily married with their families.

From the Table above it could be inferred that almost half of the respondents each were either Muslims or Christians which were more than three-quarter of the entire respondents. The remaining formed a minority interest group that constituted less than one-tenth of the respondents who worship traditional gods and lastly a minute fraction constituted other kinds of religion not captured.

The table also revealed the ethnic affiliation of the respondents and it was observed from the sample survey that more than half of the respondents belong to the Yoruba speaking tribes, one-fifth are from the Igbo speaking ethnicity which ranked the second highest ethnic group of respondents covered by the research survey. The least of the entire ethnic group captured were the Hausa tribes, which is due to the fact that the research was carried out in the western region.

Finally, the table above also shows the highest level of qualification of the sample survey. The table shows that more than half of the sample population have either HND/B.Sc certificate, which means more elders within Lagos have attended an institution of higher learning. One-fifth of the respondents are holders of WAEC certificate which implies that a little faction of the respondents had no opportunity to attend higher institutions.

Table 2: Economic Background and Household Composition of the Elderly

VARIABLE	FREQUENCY	PERCENTAGE
AGE OF RETIREMENT		

60-64		32.8
65-69	88	7.8
70-74	21	.7
75-79	2	.7
NO RESPONSE	2	48.1
Total	129	100
	242	
NATURE OF RETIREMENT		
MANDATORY RETIREMENT	79	29.5
ILL HEALTH RETIREMENT	23	8.6
RETRENCHMENT	2	.7
OTHERS	10	3.7
NO RESPONSE	128	47.8
Total	242	100
DO YOU RECEIVE ANY GRATUITY/ PENSION?		
Yes	108	40.4
No	134	49.6
Total	242	100
HOW OFTEN DO YOU RECEIVE YOUR PENSION?		
OFTEN	53	19.8
VERY OFTEN	57	21.3
RARELY	5	1.9
NO RESPONSE	127	47.4
Total	242	100
DO YOU HAVE ANY CHILD/ CHILDREN OF YOUR OWN?		
Yes	237	88.4
No	5	1.9
Total	242	100

Total		
ARE YOU LIVING WITH ANY MEMBER OF YOUR FAMILY?		
Yes	174	64.9
No	68	25.4
Total	242	100
IS THIS HOW YOUR OWN PARENTS ALSO LIVED WITH THEIR OWN CHILDREN?		
Yes	144	53.7
No	98	36.6
Total	242	100
ARE YOUR CHILDREN FULLY IN CHARGE OF YOUR WELL-BEING WITHIN THE HOUSEHOLD?		
Yes	110	50.7
No	132	49.3
Total	242	100.0
ARE THERE ALSO ANY KIND OF SUPPORT YOU RENDER WITHIN THE HOUSEHOLD?		
Yes	131	48.9
No	111	41.4
Total	242	100.0
DO YOU PREFER INTERGENERATIONAL HOUSEHOLD ARRANGEMENTS?		
Yes	108	40.0
No	134	60.0
Total	242	100.
WHERE DO YOU PREFER STAYING MOST?		
INTERGENERATIONAL HOUSEHOLD	92	34.3
PERSONAL HOUSE	123	45.9
EXTENDED FAMILY	15	5.6

WITH ADULT CHILDREN	12	4.5
Total	242	100.0

Source: researcher's field survey, 2011

The table 2 above summarizes the age of retirement of the elderly within the Ojo Area and it was observed that more than one-fifth of the respondents retire between ages 60-64. This by implication represents the active elders within the state who still possess the will power to earn income. On the other hand a larger number of respondents were undecided as regards their age of retirements, may be due to fear of being assessed by their employers.

The table further revealed the nature of retirement the respondents have been subjected to accept and it was disclosed in the afore presented table that more than one-quarter have been subjected to mandatory retirements. This is a function of age limits. Less than one-tenth said ill health retirement but this happens occasionally. A very small fraction of the respondents said retrenchment is prevalent which in normal sense is not termed as retirement but lay off.

Approximately one-half of the respondents said they don't receive gratuity. This is normal within the climate of this part of the world where policies on pension and gratuity are not strictly adhered to because of corrupt practices. Two-fifth of the respondents said they receive gratuity.

Table 2 also shows the rate at which the gratuities are paid. It is seen that less than one-quarter of the respondents said they receive that gratuity very often and one-fifth said they receive theirs very often. On the other hand only less than one-tenth said they rarely receive their own gratuity.

The table also showed that three-quarter have children on their own while a minute portion does not have children of their own. This is due to the fact that almost all the respondents covered in the survey are either married or have been married before.

Most of the respondents said they stay with their family members which implies that the level of elderly care will be high.

The response of one-half of the sample population as regards if their children are responsible for the well being of the household was affirmative. Meaning their children are responsible for the well being while less than one-half said they are not. Three-quarter of the respondents are of the opinion that they don't support intergenerational household arrangement, may be due to the nature of parental care experienced. On the other hand, two-fifth of the respondents are not in support.

Finally, the table above shows that almost one-half of the respondents prefer personal households to any other kind of household. This could be due to the poor level of care received from members of the family. But one-fifth are of the opinion that intergenerational household is preferable.

Table 3 Well Being and Old Age Security of the Elderly

VARIABLES	FREQUENCY	PERCENTAGE
HOW IS YOUR HEALTH STATUS		
GENERALLY?		
EXCELLENT	60	22.4
	139	51.9

GOOD	37	13.8
FAIR	2	.7
POOR	4	1.5
VERY POOR	242	100.0
Total		
DO YOU HAVE ANY MAJOR HEALTH PROBLEMS?		
Yes	59	22.0
No	183	68.3
Total	242	100.0
ARE YOU SATISFIED WITH THE SUPPORT YOU RECEIVE FROM THE HOUSEHOLD?		
VERY SATISFIED	81	30.2
SATISFIED	151	56.3
NOT SATISFIED	10	3.7
Total	242	100.0
DO YOU RECEIVE OTHER FORMS OF SUPPORT/CARE FROM INDIVIDUALS, ORGANIZATIONS OR GOVERNMENT?		
VERY ADEQUATE	58	21.6
ADEQUATE	123	45.9
FAIRLY ADEQUATE	61	22.8
Total	242	100.0
WHAT ARE THE CHALLENGES OR PROBLEMS YOU FACE IN THE HOUSEHOLD?		
NONE	47	17.5
DISREGARD/LACK OF RESPECT	58	21.6
POVERTY	45	16.8
HEALTH ISSUES	48	17.9
LACK OF BASIC FACILITIES	44	16.4
Total	242	100.0

Source: researcher's field survey, 2011

Interpretation of Findings

On the health status of the elderly in the area, more than one-half of the respondents said they enjoy good health generally while more than one-quarter are in excellent conditions as at the time of this research. This means a large population of elders within the area enjoy good health. On the contrary, less than one-tenth of the respondents have either failing health or bad conditions that require urgent medical expertise.

A very large number of respondents have not had any major health problems. This is a sign that elderly ones are not prone to frequent and terminal health crisis and just a quarter of the respondents have had major health crises.

The table further shows if the elderly are satisfied with the level of care received from the household. It is obvious that the elderly are well taken care of within Ojo Local Government Area as almost 100% of the respondents said they are well taken care of by their household. Only a minute portion of the respondents said they are not well cared for.

As regards the adequacy of care been received from other individuals, organisations and the government, it is seen from the table that more of the respondents are of the opinion that those care facilities provided are adequate enough in meeting their needs.

One-quarter of the challenges faced by the elderly is more attributed to lack of respect or disregard received from the younger populations which results to mental and emotional distress. Less than one-tenth of the population are of the opinion that poverty and inability to purchase the basic facilities to aid living constitute a

challenge in meeting their needs. Other problems faced by the elderly include health issues and lack of basic amenities but it was also noted that over one-tenth of the population said they have no problems.

Table 4: Distribution showing Suggestions, Conclusions and Recommendations

VARIABLE	FREQUENCY	PERCENTAGE
WHO DO YOU THINK OUGHT TO GIVE THE PRIMARY RESPONSIBILITY TO LOOK AFTER THE ELDERLY?		
FAMILY/CHILDREN	140	52.2
GOVERNMENT	62	23.1
ELDERLY THEMSELVES	18	6.7
OTHERS	22	8.2
Total	242	100.0
ARE YOU AWARE OF ANY SPECIAL FACILITIES WHICH PRIVATE ORGANIZATIONS ARE PROVIDING FOR THE ELDERLY?		
Yes	144	53.7
NO	98	46.3
Total	242	100.0

Source: researcher's field survey, 2011

The table 4 above revealed the opinions of respondents as regards who ought to be given the primary responsibility to look after the elderly. It was observed that more than one-half of the respondents are of the opinion that the family members or children should be responsible. One-half of the respondents said the government should be responsible which in my opinion should be in the area of prompt payment of pension arrears and less expensive medical accessible facilities. Only a few of the respondents were a little bit sarcastic to have said the elderly themselves.

Lastly, the table further showed that more than half of the respondents are aware of special facilities been offered by private organisations to the elderly.

Results and Hypothesis Testing

Inferential statistics helps us infer from statistics that have been given in the frequencies and description (all forming the descriptive statistics). It points out certain meanings and important relationship which are hidden within the data. Hypothesis is simply a conjectured statement about an unknown statistical parameter to which a test of inferential analysis is carried out. The chi-square analysis was done using the statistical package for social scientist (SPSS).

Hypothesis I

There is no inverse relationship between intergenerational households and well-being of the elderly.

Table 5 Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	3.266 ^a	4	.514
Likelihood Ratio	3.260	4	.515
Linear-by-Linear Association	2.383	1	.123
N of Valid Cases	242		

a. 4 cells (40.0%) have expected count less than 5. The minimum expected count is .89.

Decision Rule

The chi-square calculated of 3.266 with 4 degree of freedom at 5% level of significance is less than the decision criterion or the alpha level of 9.49, therefore

the null hypothesis is accepted and the alternative hypothesis is rejected. Hence, there is an inverse relationship between intergenerational households and well-being of the elderly.

Hypothesis II

There is no significant relationship between the income of the family and economic stability of the elderly.

Table 6 Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	9.996 ^a	4	.059
Likelihood Ratio	10.189	4	.037
Linear-by-Linear Association	.231	1	.631
N of Valid Cases	242		

a.

cells (44.4%) have expected count less than 5. The minimum expected count is .04.

Decision Rule

The test statistics of 9.996 with 4 degree of freedom at 5% level of significance is greater than the decision criterion of 9.49m therefore the null hypothesis is rejected and the alternative hypothesis is accepted. Hence, there is a significant relationship between the income of the family and economic stability of the elderly.

Hypothesis III

There is no positive relationship between the levels of individualism in the family and elderly care in Ojo Local Government Area.

Table 7 Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	5.658 ^a	2	.059
Likelihood Ratio	5.517	2	.063
Linear-by-Linear Association	5.158	1	.023
N of Valid Cases	242		

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 16.30.

Decision Rule

Decision Rule

The test statistics of 5.658 with 2 degrees of freedom at 5% level of significance is less than the decision criterion of 5.99, therefore the null hypothesis is accepted and the alternative hypothesis is rejected. Hence, there is no positive relationship between the levels of individualism in the family and elderly care in Ojo Local Government Area.

DISCUSSIONS OF FINDINGS

This study has been able to analyze all the data obtained from the field survey and relevant test of hypotheses was carried out in order to answer the research questions and achieve the research objectives. The results from the test carried out shows that there is an inverse relationship between intergenerational households and well-being of the elderly. That is, the well-being of the elderly is largely determined by the care and support received within the household.

Also, the result from the test shows that there is a significant relationship between the income of the family and economic stability of the elderly. This also states that the more viable one's income is, the more the care that would be given to the elderly.

Finally, it was revealed that there is no positive relationship between the levels of individualism in the family and elderly care in Ojo Local Government. That is, the care attributed to the elderly in the household does not depend solely on an individual or individuals in the household but also other government, organizations, institutions are also to cater for these senior citizens.

CONCLUSION

This study established the fact that there is no human society where the aged are not present. The care for this group of people should be the major concern of the children and family members of the aged, the government and the aged themselves during their active years.

Our society must be transformed from act of seeing our aged or elderly as not a burden but a gift that needs to be tapped from their wealth of experience about life. More attention must be given to them to feel among when they are not dispersed

off. The children and family of the aged should show great concern to their old ones by taking good care of them financially and materially.

Government must also rise up to their responsibilities by institutionalizing some schemes for the benefits of the old. More policy making should not be encouraged but rather the implementation of these schemes should be effected.

RECOMMENDATIONS

The following suggestions and recommendations are made based on the findings:

Firstly, people must not see the elderly people as a burden to the society but rather as a custodian of customs and traditions, often critical to the survival of the group and must be treated as such. The stereotypical perception about the ageing population must be corrected so as to make life worthwhile for these members of the population, particularly having spent the best part of their lives for the service of their society and community at large.

Secondly, on the part of the aged the idea that 'Government must do everything for us syndrome should be discouraged'. They should learn how to make provisions for themselves during their active service years.

Thirdly on the part of Government, there must be with immediate effect review of all the existing welfare policies for the aged in the country so as to make them beneficial to the ageing population.

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