



Research Paper

Myths and Realities About Caring For The Elderly: Changing Perceptions And Attitudes

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Abstract

The study investigated changing perceptions and attitudes on myths and realities about caring for the elderly. The study specifically examined myth and realities about caring for the elderly, caregivers attitude and perception towards caring for the elderly in contemporary Offa, and identify the nature of changes in care and support for the elderly. The descriptive research design of the survey type was adopted in this study. The sample for this study consisted of 200 caregivers from Offa town in Kwara State. The sample was selected through purposive sampling technique. Questionnaire on Caring for the Elderly (QCE) was used to collect relevant data for the study. Descriptive statistics was used to analyse the data collected. The findings revealed that there are several myths about caring for the elders while the nature of changes in care and support for the elderly are that most elders are left to fend for themselves, care giving and support to the elderly are on the decline, and most children do not stay at home again to take care of the elders. It was recommended among others that the younger ones should be encouraged to see the aged in positive light. This should be carried out through public enlightenment campaign.

Key words: Myths, Realities, Caring, Elderly, Perceptions, Attitudes

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I. Introduction

Like many developing countries in the world, Nigeria is currently witnessing rapid ageing of its population. This growth has brought with it many social, political and economic challenges and those problems associated with health in older ages. This makes old age to be perceived as a “problematic” phase of life. In traditional African society, the elderly people are perceived to be the mediators between this world and the next, the representatives of the ancestors and creators and the guardians of the cultural traditions. This belief made people cater for them and hold them in high esteem (Faronbi, Adebowale, Faronbi, Muse & Ayamolowo, 2017; National Council on Aging, 2020).

Africans believe that old age was an ancestral blessings bestowed on those who live righteously (WHO, 2015). It is thus culturally acceptable that the aged who are unable to fend for themselves must be catered for by the young if they (the young ones) expect to grow old. Thus, the ability of the aged persons to cope with changes in health, income, social activities depends to a very large extent on care and support they receive from the young family members. It was not amazing that children take care of their aged parents no matter what their perceptions and feelings towards the latter may be. Among the Offa people of Kwara State, Nigeria, it was believed that the spirits of their ancestors were always around them to bless and favour those who take care of their aged parents and punish those who abandon their elderly parents. Thus, in traditional Offa society, old age was perceived as a blessing and those who cater for their aged parents will partake from the blessing.

Sadly, values associated with old age are changing in modern Offa society. While young family caregivers' perceptions towards the elderly are changing, the effectiveness of the traditional caring system is also being compromised because of the ways old age and the elderly are perceived by young family members (Luhmann & Hawkey, 2016). The change in perception of old age and the aged has been attributed by scholars to the effects of modernization, urbanization and western influence. For instance, the 19th century Christian missionaries gave Africans a new worldview that is not mono-sectional (Victor & Helena, 2017). The visible world is clearly separated from the invisible world, and after death there are heaven and hell. In this flow of thought, there is no room for ancestral curses or visits from living-dead.

Nowadays, people see old age as something to be afraid of because they feel it is a time they will not be able to do what they used to do especially now that children are not always available to take care of their aged parents. Hence, they feel that they will suffer when they are old. So, old age has become a nightmare to so many people because of the uncertainty of the future. The researcher observed that in the olden days, the aged and elders were seen as the rallying point of every family. This was the reason adult children; grandchildren ensured their wellbeing in the society. While adult children provided food, shelter and comfort for the aged, the little children stayed around to provide them with company or helped with the tasks of daily living, which they could no longer carry out. They also nursed them when sick, and, more importantly, give the assurance of a proper burial when they died. However, today things have changed as most aged persons are left to fend for themselves (Cadmus, Adebuseye, Olowookere, Oluwatosin, Owoaje & Alonge, 2017).

There is growing evidence that perceptions of old age or the aged differ across culture (Ali, Vali & Mahdavi, 2018; Chumbler, Otani, Desai, Herrmann & Kurz, 2016). It is therefore imperative to identify family caregivers' attitudes and perceptions towards the care of the elderly. These observations have attracted the attention of this researcher to investigate changing perceptions and attitudes on myths and realities about caring for the elderly.

The study was carried out with three objectives of finding out:

1. examine myth and realities about caring for the elderly in Offa
2. examine caregivers attitude and perception towards caring for the elderly in contemporary Offa; and
3. identify the nature of changes in care and support for the elderly.

Research Questions

Based on the purpose of the study, the following questions were generated

1. What are the myth and realities about caring for the elderly in contemporary Offa?
2. What are the attitudes and perceptions of caregivers towards caring for the elderly in contemporary Offa?
3. What are the nature of changes in care and support for the elderly?

II. Methodology

The descriptive research design of the survey type was adopted in this study. Descriptive research was considered appropriate because it focuses on the observations and perception of the existing situation. The population consisted of caregivers aged between 21 and 50 years. The sample for this study consisted of 200 caregivers from Offa town in Kwara State. The sample was selected through purposive sampling technique.

A questionnaire designed by the researcher tagged "Questionnaire on Caring for the Elderly (QCE)" was used to collect relevant data for the study. It consisted of two sections namely Section A and B. Section A sought for bio-data of the respondents, section B consisted of 25 items to elicit information on myth and realities about caring for the elderly, attitudes and perceptions of caregivers towards caring for the elderly and nature of changes in care and support for the elderly. Nine items elicited information on myth and realities about caring for the elderly, 10 items also elicited information on attitudes and perceptions of caregivers towards caring for the elderly while 6 items elicited information on the nature of changes in care and support for the elderly. Section B elicited responses from the respondents with response options: Strongly Agree (SA), Agree (A), Disagree (D) and Strongly Disagree (SD).

The face and content validity of the instrument were ensured by assessing the instruments through facial appraisal to ascertain their claims. The instrument was presented to experts of Tests, Measurement and Evaluation. In so doing, these professionals assisted to assess both the face and content validity of the questionnaire. The reliability of the instrument was determined through the test re-test method. A pilot study was carried out outside the sampled area. The instrument was administered on ten caregivers outside the sample area while the data collected on the two tests were correlated using Pearson's Product Moment Correlation statistics which yielded a co-efficient of 0.76

The researcher personally administered the instrument in Offa town which was the area sampled for the study. The researcher was responsible for the administration and collection of the instrument from the respondents. In analyzing the data, the researcher used simple percentage, mean and standard deviation to

analyze research questions raised. For decision making, a mean score of 2.50 was used as the criterion mean. Any item that attained a response mean score of 2.50 and above was accepted otherwise it was not accepted.

III. Results

Research Question One: What are the myth and realities about caring for the elderly in contemporary Offa?

Table 1: Myth and realities about caring for the elderly

S/N	Items	N	Mean	S.D.	Decision
1.	All elderly people are unwell	200	1.61	0.41	Rejected
2.	Disabilities come with age	200	2.53	0.57	Accepted
3.	Memory loss and senility comes with age	200	2.18	0.59	Rejected
4.	The increase in the number of elderly people is the main reason for the rising health care costs	200	2.64	0.55	Accepted
5.	Elderly people are an economic burden on society	200	2.89	0.47	Accepted
6.	Elderly people do not contribute anything to the society	200	1.53	0.42	Rejected
7.	Elderly people are lonely and will gradually withdraw from society	200	1.58	0.45	Rejected
8.	Elderly people are unable to learn or change	200	2.07	0.50	Rejected
9.	Elderly people do not want or need close physical relationships	200	1.97	0.51	Rejected

Table 1 revealed the myth and realities about caring for the elderly in Offa. Any item that attained a response mean score of 2.50 and above was accepted otherwise it was not accepted. Items 1, 3, 6, 7, 8 and 9 were rejected why items 2, 4 and 5. It can be concluded that the myths about caring for the elderly in Offa are all elderly people are unwell; memory loss and senility comes with age; elderly people do not contribute anything to the society; elderly people are lonely and will gradually withdraw from society; elderly people are unable to learn or change; and elderly people do not want or need close physical relationships. While the realities about caring for the elderly are disabilities come with age; the increase in the number of elderly people is the main reason for the rising health care costs; and elderly people are an economic burden on society

Research Question Two: What are the attitudes and perceptions of caregivers towards caring for the elderly in contemporary Offa?

Table 2: Attitudes and perceptions of caregivers towards caring for the elderly

S/N	Items	N	Mean	S.D.	Decision
1.	I am privilege to care for the aged	200	2.99	0.40	Accepted
2.	I am pleased with caring for the elderly	200	3.04	0.36	Accepted
3.	I care for the elders because of the financial inducement	200	1.95	0.41	Rejected
4.	I love taking care of the aged	200	2.91	0.42	Accepted
5.	I can bear all shortcomings attached to caring for the aged	200	2.73	0.49	Accepted
6.	Caregiving have impact on my personal schedules	200	2.48	0.49	Rejected
7.	Caring for the elderly is an easy task	200	2.07	0.44	Rejected
8.	Caring for the aged is a natural gift	200	2.55	0.48	Accepted
9.	Caring for the aged needs specialized training	200	1.94	0.46	Rejected
10.	Only a patient person can take care of the aged	200	3.24	0.38	Accepted

Table 2 revealed the attitudes and perceptions of caregivers towards caring for the elderly in Offa town. Any item that attained a response mean score of 2.50 and above was accepted otherwise it was not accepted. Items 3, 6, 7, and 9 were rejected why items 1, 2, 4, 5, 8 and 10. It can be concluded that the attitudes of caregivers towards caring for the elderly are they felt privilege to care for the aged, pleased with caring for the elderly, they loved taking care of the aged, and they can bear all shortcomings attached to caring for the aged.

The perception of caregivers towards caring for the elderly are caring for the elderly is not an easy task, caring for the aged is a natural gift, caring for the aged do not need specialized training, and only a patient person can take care of the aged.

Research Question Three: What are the nature of changes in care and support for the elderly?

Table 3: Nature of changes in care and support for the elderly

S/N	Items	N	Mean	S.D.	Decision
1.	Most elders are left to fend for themselves	200	2.84	0.47	Accepted
2.	Care giving and support to the elderly are on the decline	200	2.76	0.44	Accepted
3.	The only way most children takes care of the elderly is to provide support by sending remittances	200	2.17	0.51	Rejected
4.	There is physical and emotional support for the elderly	200	2.33	0.49	Rejected
5.	Most children do not stay at home again to take care of the elders	200	2.89	0.42	Accepted
6.	Some children do not want to assist their aged parents	200	2.47	0.51	Rejected

Table 3 revealed the nature of changes in care and support for the elderly. Item 1 shows a mean of 2.84 and has a standard deviation of 0.47. Therefore the item can be accepted that most elders are left to fend for themselves. A mean of 2.76 and a standard deviation of 0.44 were gotten for item 2. Item 2 was accepted because the mean score is greater than the criterion mean of 2.50. The decision level shows that care giving and support to the elderly are on the decline. Item 3 shows a mean of 2.17 and a standard deviation of 0.51. Therefore the item cannot be accepted because the mean score is less than the criterion mean of 2.50. The respondents disagreed that the only way most children takes care of the elderly is to provide support by sending remittances.

Item 4, depicts a mean of 2.33 and a standard deviation of 0.49. Item 4 cannot be accepted because the mean score is less than the criterion mean of 2.50. Therefore the respondents disagreed that there is physical and emotional support for the elderly. However, the mean and standard deviation for item 5 were 2.89 and 0.42 respectively. The respondents agreed that most children do not stay at home again to take care of the elders. Item 6, depicts a mean of 2.47 and a standard deviation of 0.51. Since the mean mark is less than the criterion mean of 2.50, item 6 is rejected. This implies that the respondents disagreed that some children do not want to assist their aged parents. It can be concluded that nature of changes in care and support for the elderly are most elders are left to fend for themselves, care giving and support to the elderly are on the decline, and most children do not stay at home again to take care of the elders.

IV. Discussion

The first finding revealed the myths and realities about caring for the elderly. The myths are that all elderly people are unwell; memory loss and senility comes with age; elderly people do not contribute anything to the society; elderly people are lonely and will gradually withdraw from society; elderly people are unable to learn or change; and elderly people do not want or need close physical relationships. While the realities about caring for the elderly are disabilities come with age; the increase in the number of elderly people is the main reason for the rising health care costs; and elderly people are an economic burden on society. This finding corroborates the assertion of Luhmann and Hawkley (2016) on myths and realities about caring for the elderly.

It was also revealed from the findings that the attitudes of caregivers towards caring for the elderly are they felt privilege to care for the aged, pleased with caring for the elderly, they loved taking care of the aged, and they can bear all shortcomings attached to caring for the aged while the perception of caregivers towards caring for the elderly are that caring for the elderly is not an easy task, caring for the aged is a natural gift, caring for the aged do not need specialized training, and only a patient person can take care of the aged.

Lastly, it was revealed that nature of changes in care and support for the elderly are most elders are left to fend for themselves, care giving and support to the elderly are on the decline, and most children do not stay at home again to take care of the elders. Earlier studies have also attributed the decline in care and support for the aged in the developing countries to the content of formal schooling, which is heavily westernized and this tends to purvey Western values of individualism and self-fulfilment (Victor & Helena, 2017). These processes were also found to have undermined the traditional norms and leave members of both the older and younger generations less willing to sacrifice the younger generation's prospects in order to provide physical care for their elderly parents. With this finding, the study gives strong support to Parsons' theory of Pattern Variables that decline in care and support for the aged is as a result of society's evolvement from collectivism to individualism.

V. Conclusion

From the findings, the study concluded that the myths about caring for the elderly in Offa are all elderly people are unwell; memory loss and senility comes with age; elderly people do not contribute anything to the society; elderly people are lonely and will gradually withdraw from society; elderly people are unable to learn or change; and elderly people do not want or need close physical relationships. While the realities about caring for the elderly are disabilities come with age; the increase in the number of elderly people is the main reason for the rising health care costs; and elderly people are an economic burden on society.

Also, it can be concluded that that the attitudes of caregivers towards caring for the elderly are they felt privilege to care for the aged, pleased with caring for the elderly, they loved taking care of the aged, and they can bear all shortcomings attached to caring for the aged. The perception of caregivers towards caring for the elderly are caring for the elderly is not an easy task, caring for the aged is a natural gift, caring for the aged do not need specialized training, and only a patient person can take care of the aged.

Lastly, it can be concluded that the nature of changes in care and support for the elderly are most elders are left to fend for themselves, care giving and support to the elderly are on the decline, and most children do not stay at home again to take care of the elders.

Recommendations

Based on the following findings, it is hereby recommended that:

1. The younger ones should be encouraged to see the aged in positive light. This should be carried out through public enlightenment campaign.
2. Positive ageing education programmes should be targeted at all levels of society but especially towards those groups that hold less favourable attitudes towards older people.
3. Older people should be encouraged to be more involved in community activities, to increase quality of life, and to reduce social isolation and the possible associated risks of abuse

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