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### RESEARCH ARTICLE

#### SOCIAL SECURITY PROVISION AND HEALTHCARE OF SENIOR CITIZENS IN ABIA STATE, NIGERIA.

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#### Abstract

Senior citizens require more medical attention as they advance in age compared with the younger citizens. In many developed societies, the government through social security provides free medical care for senior citizens. In Nigeria, where there is no functional social security programme, many senior citizens face untimely death because of their inability to access proper healthcare services as a result of lack of social security system. This study examined the effect of social security on healthcare of senior citizens in Abia State, Nigeria. The study adopted convergent parallel design. The population of study was the senior citizens in the State. The validated questionnaire and interview guide were the instruments of data collection. Interviews were conducted with senior citizens and community leaders. Descriptive and inferential statistics (regression) were employed in analysis of quantitative data. Qualitative data were content analyzed. The study found that there was joint significant effect of social security provisions on access to health care services by senior citizens, (Adjusted  $R^2 = 0.160$ ,  $F_{(6,68)} = 3.347$ ;  $P < 0.05$ ). The Free Healthcare Initiative for Senior Citizens (FHIC) programme provided by the state government covered only four out of the seventeen local governments in the state. The study concluded that the absence of social security system in the state is a major impediment to access to health-care services in spite of the FHIC programme. There is need for establishment of social security programme to cater for the healthcare of senior citizens.

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#### Introduction:-

The welfare of the senior citizens has been a problem confronting many societies globally. This has become more challenging in the face of continuous increase in the number of senior citizens. Nigeria is not exempted from this global trend of increase in the ageing population (Togonu-Bickersteth & Akinyemi, 2014). Therefore, the Nigerian senior citizens face hardship and poverty as a result of the weakness that comes with aging. Senior citizens generally require medical attention regularly compared to the younger generation. This is as a result of the likelihood of development of some diseases that are associated with old age like hypertension, diabetes, dementia, arthritis, cancer, heart diseases, osteoporosis and blindness. However, many developed countries have put in place functional social security provisions that help in taking care of the problems of old age especially access to healthcare.

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According to Vlachunyoni (2017), the problems associated with old age leave the senior citizen in need of social provisions. In some cases, these needs remained unmet especially in societies where there is no intentional effort by the government to provide for the senior citizens. A large number of senior citizens in developing countries globally have continued to live in pain, poverty, squalor, neglect, loneliness and very poor health condition. Many of them have ended up as destitute and street beggars (Adeyanju, Onosaga & Edoni 2015). Across Nigerian cities, it has become a norm to see senior citizens begging for alms at parks, bus stops rail stations, religious gatherings, markets, under the bridges and others spots they are sure of getting the attention of kind hearted individuals. This is as a result of the inability of the government to provide an institutionalized social security system for the upkeep of the senior citizens.

There have been international conventions and plans of action that have been targeting the welfare of older people across the globe. The Madrid Plan of Action and the United Nations Principles for Senior Citizens were adopted by the UN General Assembly in 2002. The Proclamation on Ageing and the global targets on ageing for the Year 2001 was adopted by the General Assembly in 1992. Again, the Shanghai Plan of Action 2002 and the Macau Outcome document of 2007 were adopted by United Nations Economic and Social Commission for Asia and Pacific (UNESCAP) (Giri, Sabharawal, Gangdharan, Sreenivasan & Mitra 2011). However, as good as these conventions have been, most developing countries such as Nigeria have not been able to domesticate them, by putting in place national laws and policies that will facilitate their implementation in their national environment.

The provision of social security especially for senior citizens should be seen as human right and not a privilege or an act of charity. The international organizations have worked hard to ensure that the right to social security is recognized and respected globally. Many western countries have functional social security programmes which take care of the welfare of their senior citizens. However, in Nigeria, where there is no social security system in place, senior citizens are faced with many hazards including inability to access healthcare services. Most the senior citizens traditionally depend on their extended family for their sustenance, and this has become increasingly problematic given the structural changes in the society where people are focusing more on their nuclear family as a result of economic difficulties.

Abia state, one of the 36 states in Nigeria introduced the Free Healthcare Initiative for Senior Citizens (FHIC) programme, to take care of senior citizens in the state. However, there had been allegations of the programme being used as a political tool to reward party supporters as in spite of the programme, many senior citizens live in poverty and are exposed to untimely death because of inability to access health care services. The study therefore, examined the effect of social security on healthcare of senior citizens in Abia State, Nigeria.

## **Literature Review**

### **Social Security for Senior Citizens**

Developments in scientific knowledge and awareness on proper nutrition and health principles seem to have resulted in improvement in life expectancy across the world. Globally, the number of senior citizens has continued in to increase (Ansari, 2015; Roy 2013; Panigrahi 2013; Kurian & Uchiyama, 2012). This increase has grown in the last three decades. In the opinion of Roy (2013), the population of elderly is increasing tremendously both in absolute term and in relative proportion. This is due to the continuous fall in fertility and coupled with increase of life expectancy. This implies that fewer number of children are born yearly while the older generation are living longer than before.

According to Otoo and Osei-Boateng (2012); Ebimgbo, Atumah and Okoye (2017), social security involves a set of benefits provided by the state to individuals and or households to ameliorate possible hardships resulting from loss or reduction in income as a result of sickness, maternity, employment injury, invalidity, old age or death. According to Social Security Administration (2013), it is a programme established by statute that insures individuals against interruption or loss of earning power and for certain special expenditures arising from marriage, birth, or death.

As this number of ageing population increases, the need to adequately take care of them continues to arise. In the opinion of Aluko (2007), the population is aging and the number and proportion of older people is increasing globally. The world is experiencing rapid demographic transition and transformation, as people have fewer children, live longer and have increasing need for welfare (Aluko, 2007). The increasing number of the aging population is experienced in all countries, including the developing countries like Nigeria. This gives rise to the need for the provision of the platform and scheme to adequately provide welfare for the aging population. According to Kinsella

and Gist (1998), the number of widows and older never-married women is continuously and rapidly rising in most parts of the world. Considering this fact, it might be right to say that more women will have need for welfare and upkeep than the men. This is because they live longer than the men and therefore, may have more medical and welfare needs than the men.

Social security has been identified as a guarantee to welfare at old age. This is because old age is associated with weakness and sometime different disease conditions that may not allow the individual to earn income as the younger ones (Adenuga, Babatunde & Adenuga 2016; Campbell 2012; Cebis & Cebis 2017; Panigrahi 2013; Shen, Li, & Tanui, 2012). In the opinion of Panigrahi (2013), the increasing population of the elderly will have some socio-economic implications such as health care facility, social security measure, adjustment, dependency, elderly care and living arrangements. The ability of the government, community and individuals to take care of these rising implications determines the welfare of the elderly (Shen, Li, & Tanui, 2012). Campbell (2012) and Cebis and Cebis (2017) affirmed that social security is a vital source of guaranteed income and welfare in retirement. This is because it is an assured means of income at old age.

### **Medical Provisions for Senior Citizens**

Globally, the population of the ageing has continued to increasing in an alarming rate with great changes on demographic structure of the world (Coberley, Rula & Pope, 2011; Lehmborg & Funa, 2010; Lin, Chen & Cheng, 2014; Rowe, Berkman, et al. 2016). The increase in the ageing population implies that more of the senior citizens will need medical benefits to ensure good health.

According to Coberley, Rula and Pope (2011); Lehmborg and Funa, (2010); Lin, Chen and Cheng, (2014) and Rowe, et al. (2016), growing old is associated with frailty, weakness, disability and many chronic diseases. Many countries have taken giant steps in ensuring good health for the senior citizens especially in providing adequate medical attention. In the opinion of Coberley, Rula and Pope, (2011) in the last 50 years, the healthcare spending in the United States has increased from 5.2% to 17.5% and 95% of the healthcare expenses on the nation's senior citizens are spent on people with one or more chronic diseases. This implies that as the number of senior citizens increases, the cost of their medical attention will also increase. Without adequate health care, old age will become a period of misery and pain. The antidote to remain happy at old age is to enjoy a fairly good health.

According to Martinez, Perez and Tejenia, (2015), the risk of falling into poverty increases substantially with advancement in age. This is not only due to the reduction in the ability to perform a job and earn a reasonable income, but also as a result of the increasing levels of expenses incurred in taking care of a deteriorating health and increased chances of disabilities. Many senior citizens earn substantial income but spend much on hospital bills and medications. This affirms the importance of medical benefits to the seniors. This will not only give them good health but will also promote economic growth as many of them will be involved in activities that will improve their personal and family finances. Living long without medical support may be a herculean task as old age is associated with many medical concerns.

Rowe, et al (2016) suggested that many of our health care systems are not prepared to render the medical and support services associated with taking care of the elderly. The number of the elderly has been increasing without equal preparation to support their medical care which is instrumental to good life at old age. According to Lin, Chen and Cheng, (2014), World Health Organization (WHO) for more than a decade has developed a new policy on the care of the senior citizens called 'active ageing'. This suggests growing old gracefully by being independent and socially relevant. Since 2007, WHO has continued to promote ageing friendly cities to give the seniors the desired old age. It may be difficult to achieve active ageing without medical support which is preventive and also curative. Improvement in medical technology and better life style practices have led to increase in life expectancy (Kang, et al. 2009; Liu, et al. (2016 and Wan, et al. 2013). In many countries, the life expectancy has increased, that people live longer than the last two decades. The improvement in life expectancy and medicine has given rise to geriatric diseases hence the need for health insurance coverage especially for the senior citizens.

In the opinion of Kang, et al. (2009), women enjoy higher life expectancy and are more prone to osteoporosis hence their higher need for health insurance. Osteoporosis in many cases leads to disability. According to Kang, et al. (2009), in Korea, there is no health insurance for senior citizens who have developed disability as result of osteoporosis. Again, Wang, et al. (2013), argue that health insurance utilization reduces out-of-pocket medical expenses. In cases where the senior citizens with disabilities are expected to pay for their medical expenses, one is

left to imagine the quality of care they will be able to afford. There is no gainsaying that many of them may not be able to afford and receive quality health care. Improved health insurance reduces out-of-pocket medical expenses and also leads to quality healthcare services (Wang, et al. 2013).

### Theoretical Framework

The study adopted the social justice theory as the theoretical construct for the analysis of the influence of social security on access to healthcare by senior citizens with special reference to senior citizens in Abia State Nigeria.

### Social Justice Theory

Social justice is generally defined as the fair and equitable distribution of power, resources, and obligations in the society to all people, regardless of race or ethnicity, age, gender, ability, status, sexual orientation, and religious or spiritual background (Van den Bos, 2003). Fundamental principles underlying this definition includes values of inclusion, collaboration, cooperation, equal access, and opportunity. This theory supports that everyone should be treated fairly and equitably without considering their race, ethnicity, gender, social affiliation and any other form of discrimination.

According to Anifalaje, (2017), the principle of social justice is not identical to the demand for equal treatment of all persons. It rather requires preferential treatment for the underprivileged who lack advantages possessed by the other members of the society. It advocates that the very privileged members of the society support those that are underprivileged to give them a meaning to life. These values are also the foundation of a democratic and egalitarian society which recognizes the rights of citizens. There is a crucial link that exists between social justice and overall health and wellbeing. Therefore, the absence of justice often represents increased physical and emotional suffering as well as greater vulnerability to illness. Furthermore, social justice issues an access to resources as they are also inexorably tied to collective well-being (e.g., relationships and political welfare) of families, communities, and society (Hage, Ring & Lantz, 2011).

Social Justice Theory was formulated by Rawls, (2005). This theory rejects the principle of utilitarianism which looks for the greater good for the greater number of people. According to this theory, every individual has an inviolability founded in justice that even the welfare of the entire society cannot override. This also applies to relating with members of the society, there is the need to ensure justly, equitably and respect to the individuals in dealing with them. This implies that in dealing with citizens of a nation, each one should be treated in a way that will respect his or her rights as a citizen.

The theory posits that programmes should be created with the ultimate goal of social justice and structural changes, recognizing that genuine change must go beyond an individual level. Every individual should be considered in the programmes.

### Methodology:-

The study location was Abia, one of the five states in South-East geo-political zone of Nigeria. The state has a population of more than 4 million people with about 5% of them being 60 years and above (National Population Commission and National Bureau of Statistic Estimates, 2016). The study adopted convergent parallel design. Data were collected with the use of validated questionnaire and interview guide. A total of 100 copies of the questionnaire were administered and 75 were retrieved. The sampling technique for the study was stratified random sampling. Key informant interviews were conducted with the administrator of the Free Home Healthcare Initiative for the Senior Citizens, Community leaders and Representative of the retirees' associations. Quantitative data were analyzed using descriptive and inferential statistics (regression analysis) while content analysis was employed in analyzing the qualitative data.

### Results:-

**Table 1:-Medical Benefits**

Items	SA	A	FA	D	SD
Senior citizens have medical needs that require attention more often than non-senior citizens	54 72%	1 1.3%	2 2.7%	1 1.3%	17 22.7%
Senior citizens majorly depend on the family members for provision of medical benefits	69 92.0%	1 1.3%	0 0	1 1.3%	4 5.2%

My former employer is responsible for my medical care	0 0	3 4.0%	1 1.3%	11 14.7%	60 80%
There are no special medical benefits at all for senior citizens in my state	40 53.3	4 5.3%	1 1.3%	1 1.3%	29 38.7%

**Source:** Field Survey (2018)

Table 1 has responses from Abia State on the medical benefits available to senior citizens. A total of 72% (54) of the respondents strongly agree that 'senior citizens have medical needs that require attention more often than non-senior citizens'. Secondly, 1.3% (1) of the respondents agree to the statement while 2.7% (2) of the respondents fairly agree. However, 1.3% (1) disagree while 22.7% (17) strongly disagree. Therefore 76% (57) of the respondents in agree that senior citizens have medical needs that require attention more than non-senior citizens.

A total 92% (69) of the respondents strongly agree that senior citizens majorly depend on the family members for provision of medical benefits. Another 1.3% (1) agree, no respondent fairly agree. However, 1.3% (1) disagree while another 5.2% (3) strongly disagree. It is inferred that 93.3% (70) of the respondents agree that senior citizens majorly depend of the family members for provision of medical benefits.

The third statement on Table 1 says 'my former employer is responsible for my medical care'. In response to the statement, none of the respondents strongly agree, 4.0% (3) agree while only 1.3% (1) fairly agree. However, 14.7% (11) of the respondents disagree while 80% (60) strongly disagree. It can be understood that 84.7% of the respondents disagree that their former employer is responsible for their medical care while only 15.3% agree.

Table 1 recorded the fourth statement as 'There are no special medical benefits at all for senior citizens in my state'. In response to the statement 53.3% (40) of the respondents strongly agree, another 5.3% (4) agree while only 1.3% (1) fairly agree. However, another 1.3% (1) disagree while 38.7% (29) strongly disagree.

**Table 2:-Healthcare Services**

Items	SA	A	FA	D	SD
The government provides free healthcare for senior citizens	17 22.7%	1 1.3%	2 2.7%	1 1.3%	54 72%
The government provides subsidized healthcare services for senior citizens	1 1.3%	2 2.7%	0 0	9 12.0%	63 84.0%

**Source:** Field Survey (2018)

On the question, the government provides free health insurance for senior citizens; a total of 22.7% of the respondents strongly agree that the government provides free health insurance for senior citizens in Abia State. A minority of 1.3% merely agree while 2.7% fairly agree that the government provides free health insurance for senior citizens. However, a minority of 1.3% disagree while 72% strongly disagree that the government provides free health insurance for the senior citizens. Therefore, 73.3% of the population disagree that government provides free health insurance for senior citizens while 26.7% disagree. The government does not provide free health insurance for senior citizens in the state as alluded by the majority of the respondents.

Again, on the statement 'the government provides subsidized healthcare services for senior citizens'; 1.3% of respondents strongly agree while 2.7% agree while none of the respondents fairly agree. However, 12.0% disagree while 84.0% strongly disagree that the government provides subsidized healthcare services for senior citizens. Therefore with 96% of the respondents, the government does not provide subsidized healthcare services for senior citizens in Abia State.

### Testing of Hypothesis

H<sub>01</sub>: there is no significant effect of social security provisions on the senior citizens' access to healthcare in Abia State

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	2.583	1.241		2.082	.041
Medical benefits	.121	.137	.129	.883	.380

Old Age Pension Scheme	-.267	.106	-.304	-2.518	.014
Income Tax/R	-.181	.113	-.209	-1.597	.115
Social service	.153	.083	.228	1.841	.070
Social Allowance	.078	.108	.088	.716	.476
Social Insurance	.218	.106	.245	2.046	.045
<b>R = .477</b> <b>R<sup>2</sup> = .228</b> <b>Adj R<sup>2</sup> = 160</b> <b>F(6,68) = 3.347, Sig = .006<sup>b</sup></b>					

#### Dependent Variable: Senior citizens access to healthcare

The R-squared value revealed that social security elements explains about 22.8% of the variance in senior citizen's healthcare access in Abia State (Adjusted  $R^2 = 0.160$ ,  $F_{(6,68)} = 3.347$ ;  $p < 0.05$ ). While the remaining 77.2 percent of changes that occurs in senior citizens' healthcare access are as a result of other factors not captured in the model. The result revealed that there is a moderately strong positive relationship existing between social security elements and senior citizens' healthcare access as revealed by the correlation coefficient ( $R = 0.477$ ).

The overall model showed an F test that is statistically significant with ( $p < 0.05$ ) which proved the fitness of the model. The overall P-value  $< 0.05$  has led to the rejection of the null hypothesis. Therefore, it was found that social security provisions has significant affect on the senior citizens' access to healthcare access in Abia State, South-East Nigeria.

Social security provisions positively affects the senior citizens' healthcare access in Abia State in South-East Nigeria. Social security provisions will have positive effects on the senior citizens' access to healthcare in Abia State.

#### Discussion of Findings:-

The largest group of senior citizens in Abia State are 76 years and above as revealed in the study. More than 50% of the senior citizens in Abia State are females which means they may need more medical attention as females are more prone to disease of the elderly than the males. According to Kang, et al. (2009), women enjoy higher life expectancy and are prone to more diseases. Therefore, it is expected that senior citizens in Abia State will need more of healthcare services. Again, many of the senior citizens may have their spouses as dependents since more than 70% of them are married. There are some childless senior citizens who may not have anyone to take care of them in the absence of provision by the government.

Senior citizens have medical needs more than non-senior citizens generally. Senior citizens in Abia State depend on family members for provision of medical benefits in the absence of government provision. The former employers are not responsible for the medical care of the senior citizens in Abia State. Again, there are no special medical benefits at all for senior citizens. The government neither provides free health insurance nor subsidizes the healthcare provision for the senior citizens. The Free Home Health Initiative for senior citizens establishment by the Abia State government is merely to score political card and is not representative enough. Many senior citizens who are qualified for the programme were not included.

Majority of the respondents agree that senior citizens have medical needs that require attention more often than non-senior citizens. Again, Durazo, Jones, Wallace, Arsdale, Aydin, & Stewart (2011) opine that senior citizens have medical needs more often that the younger generation. However, Durazo, et al (2011) are afraid that they may not have the necessary diet for their health which may pose a risk factor. Social security has been used in many societies to provide medical benefits for senior citizens. As opined by Campbell (2012), social security is capable of making the senior citizens vibrant, healthy and responsive to government activities and gestures. On the contrary, majority of the respondents are of the opinion that the government neither provides free health insurance nor subsidizes their healthcare. This will definitely impact on the welfare of the senior citizens as old age is associated with many health challenges and loss of revenue (Health & Older People 2013).

A total of 70% of the respondents are of the opinion that senior citizens majorly depend on their family members for provision of medical benefits. Again, Okumagba, (2011) stressed that senior citizens in Nigeria majorly depend on children, grand-children and other relatives for support. This may suggest that the absence of social security on healthcare for senior citizens in Abia State may have adverse effect on the senior citizens. This was also affirmed by table 2 where majority of the respondents declined that the government neither provides free health insurance nor subsidizes healthcare services for them. However, the key informant interviews conducted revealed that there is Free Home Healthcare Initiative for the Senior Citizens in Abia State. One of the interviewees is of the opinion that the initiative is working hard although it covers only four out of the seventeen local governments in Abia State. On the contrary, the other interviewees stressed that it is a politically motivated initiative that was aimed at helping a few party faithful members and scoring high by making much impact on the media. According to Oladeji and Adeniyi (2015); and Oyormegbunen (2014), the dependence on family members for provision of medical care for senior citizens may not be sustainable in the face of the changing family structure in Nigeria.

The third statement on the Table 2 affirms that former employers are not responsible for the medical care of senior citizens and the last statement revealed that there are not special medical benefits for senior citizens in Abia State. This also affirms the responses on table 2 where the senior citizens disagree that the government provides health insurance for them. As it has been established earlier and opined by Okumagba (2011), senior citizens in Abia State depend on their family members to provide medical care. This may not be sustainable in the face of the globalization and changing family structure in different societies where the family is moving from extended family to a nuclear family system.

### Conclusion and Recommendations:-

Most senior citizens in Abia State, Nigeria are faced healthcare challenges without sufficient funds to access healthcare services as a result of absence of social security system. The absence of social security for healthcare leaves the senior citizens at the mercy of family members and friends, a mechanism that is not sustainable, given that globalization has resulted in greater emphasis on nuclear family system instead of extended family. However, the changing family structure in Nigeria makes the healthcare of senior citizens in absence of social security provisions by the government more difficult task. The Free Home Healthcare Initiative for Senior Citizens though laudable, is handicapped by inadequate funding, limited coverage and politicization. The fact that only four out of the seventeen local governments in the state are covered makes the programme incapable guaranteed access to healthcare services for senior citizens in the state.

Therefore, there is need for the government to establish a sustainable social security program especially on healthcare for senior citizens. This is in recognition of the increasing number of senior citizens. The coverage of the Free Home Healthcare Initiative for Senior Citizens should be extended to all the seventeen local governments in the state. The government should establish social security as a national policy. This will prevent the use of social security as a political tool at the state level.

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