

## **Analysis of Support Systems of Elderly Persons in Lagos State, Nigeria**

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### ***Abstract***

The advancement in age could be associated with several changes in the body. These changes might require support systems for elderly persons to function optimally. These support systems are needed to improve well-being and living conditions. This study therefore aimed at investigating the support systems of elderly persons in Lagos State, Nigeria. The study adopted a descriptive survey design and the sample was drawn from selected local government areas in Lagos state, Nigeria based on simple random, proportional and accidental sampling methods. The instrument used for data collection was entitled “Support Systems of Elderly Persons Questionnaire”. The instrument was content validated with reliability coefficients of 0.78. Data was analysed using a mean at 2.50 benchmarks and Analysis of Variance at a 0.05 alpha level. The findings of the study indicated that support systems of elderly persons comprised mainly children ( $\bar{X}=3.28$ ) and family ( $\bar{X}=3.18$ ) while the forms of support are household management ( $\bar{X}=3.04$ ) and medical care ( $\bar{X}=3.00$ ). There was a significant difference in the support systems of elderly persons in Lagos State, Nigeria based on age. The study therefore recommended that people should be made aware of the care requirements needed by the elderly, particularly those who are 80 years old and older.

Key words: elderly persons, forms of support, well-being, Lagos State, Nigeria

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## ***Introduction***

Old age is sometimes associated with multitude changes and challenges. Elderly persons experience reduced agility and are vulnerable to diseases as a result of a weakened immune system. According to Mafauzy (2000), acute and chronic diseases, urinary incontinence, instability and falls are some of the major problems confronting elderly persons. Specifically, Abanyam (2013) mentioned that the African elderly face the challenges of malnutrition, physical and mental health, poverty, accommodation and transportation problems. In addition, Masauso (2016) noted that poverty, isolation, widowhood and a lack of financial and material resources are the major challenges facing the elderly population.

Considering the problems and challenges confronting elderly persons, they need to be supported to be able to cope with these problems. Support systems are sources and forms of assistance needed by the elderly persons to cushion the effects of challenges imposed on them during the last stages of life. The presence of support systems significantly helps the elderly person's ability to cope with problems. Support systems for elderly persons are factors that promote their well-being and improve their quality of life. A good support system predicts healthy living and promotes long life. Thekkedath and Joseph (2009) opined that the feeling of being wanted, useful, and respected enhances the elderly's self-esteem and dignity, thus contributing positively to their well-being. Clark (2005) stated that the absence of support can predict deterioration of physical and mental health among the elderly. According to Clark, a support system is a major factor that prevents the occurrence of negative symptoms of depression and anxiety from developing.

Support systems refer to the manner in which the elderly are maintained and helped (Buckholz, 2014). Support systems provide companionship and engagement. It promotes activities and helps to improve the well-being of the elderly. It is also a source of pleasure and enables access to resources (finance, mobility and time) needed by elderly persons. It is the set of services that helps to maintain the quality of life and social engagement of the elderly.

The types of support received by the elderly persons can be categorized into formal and informal sources (Hutchison, 2010). Formal support systems include the services provided by formal service providers such as professionals, institutional homes, and trained employees (Hutchison, 2010). The informal support system is the natural and traditional supports available to the elderly. This support comes from family, relatives, neighbours and friends, and religious and community groups (Buckholz, 2014). The family is the most important provider of informal support for many elderly persons. Family members assist with household chores, running errands and providing transportation. Family members also made available the provision of emotional comfort, confidences, and advice. It is estimated that 80-90% of the support received by elderly persons is provided by family members (Hutchison, 2010). This is because family members can provide better emotional and social support than other support providers. The members of the family also know the elderly person better than any third party and are likely to provide and be present at all times for all-around support.

Families remain a major source of physical, emotional and financial support for the elderly. The majority of the elderly maintain close ties with their families through frequent interaction. Members of the family provide support when the elderly are in need (Haifeng, Yang, & Tianyong, 2014). Family members provide materials and instrumental support. This helps to reduce feelings of loneliness. The family is the one that reduces the occurrence of psychosocial problems of the elderly. The close bond that exists between elderly and family members helps to reduce the chance of suffering from psychosocial problems (Kourkouta,

Iliadis & Monios, 2015). In the opinion of Iecovich and Lankri (2002), families and adult children are traditionally expected to be the main source of support for elderly people, thus the support is in the form of provision of material, financial assistance and instrumental help. This submission is supported by Eboiyehi (2015) who reported that in African societies, children took responsibility of caring for the elderly as a means of showing gratitude for taking care of them when they were young. The elderly are seen as feeble who needed to be taken care of. They are perceived to be the custodians of African cultural heritage, therefore, the young take good care of them and value them in society. This belief system also affected the attitude of Africans (Nigerians inclusive) towards institutionalisation. In Nigeria, institutionalisation of elderly persons is regarded as unacceptable. The elderly that are institutionalised is regarded as neglected and abandoned. Accusatory fingers will be pointed at the children and families of the elderly person and they will be seen as being wicked and irresponsible. This point is further substantiated by Hungwe (2011) and Ncube (2017) that institutionalisation in African culture invokes negative feelings and abandonment of the elderly.

Friends and neighbours also provide a significant amount of care for elderly persons as they play significant roles in terms of socializing and recreation, although, they may be less inclined than family members. Friends and neighbours give the elderly person encouragement, and during times of life's challenges, friends give help and offer hope. Contacts with friends serve to reduce loneliness and increase feelings of usefulness. Neighbours are those with whom one lives in close residential proximity and with whom one has face-to-face contact (Bulmer, 2015). Neighbours can be helpful to the elderly in an emergency when there is death in the family or by taking care of the elderly when they fall ill and wait with them until family members arrive. Neighbours are also particularly useful in meeting the needs of the elderly with everyday life; minor help which includes allowing people into the house like meter readers or delivery men, keeping an eye on things, and paying the elderly a brief visit (Bulmer, 2015). Religious and community groups also provide emotional and social supports needed by elderly persons. This is provided through group activities and joint participation in the community.

The formal system includes a mobile phone-based system that is developed to detect and transmit movement notification of an elderly person's daily-life situations (Miyachi, Ogawa, Caldwell, Yonezawa & Maki, 2005). The system contains a dual axis accelerometer that measures body movements as a result of respiration, posture changing, and falling. It also contains two low-power active filters and two batteries. The elderly person carries the system on the waist and the system automatically sends the elderly person's location by e-mail and informs the person's family by voice through the phone (Miyachi, Ogawa, Caldwell, Yonezawa & Maki, 2005). This system thrives only in enlightened and developed countries.

Another formal support system is a living situation monitoring system that is composed of sensor units, a controller unit, and a supervisor unit (Inoue & Shimizu, 2013). The sensor units perceive any human motion by detecting the Infra-Red emission from a human body. The controller unit analyses the data to check the physical condition of the elderly in the house. These data would be sent to the supervisor unit for classification.

This study focuses on the informal support system which is predominant in Nigeria as the formal support system is yet to be given due attention in Nigeria (and is not readily available) as a result of inadequate education and poor technology.

Elderly persons need support in the form of instrumental support (provision of financial assistance and tangible items), emotional support (this is the provision of love and care), appraisal support (this entails giving feedback), informational support (this involves giving

advice, information and suggestions) and companionship support (this includes having a sense of belonging and presence of others). Elderly persons need this support more strongly than in their previous periods of life.

Haifeng, Yang and Tianyong (2014) stated that instrumental support is important in reducing negative feelings in elderly persons. Material and instrumental support is essential in ameliorating the pain that the elderly is passing through (Haifeng, Yang & Tianyong, 2014). Sims et al. (2014) opined that instrumental support is the provision of tangible items such as finance, assisting with chores and providing transportation. Similarly, receiving emotional support plays an important role in the positive functioning of elderly persons. The feeling that elderly persons are loved adds value to their life. According to Sims et al. (2014), emotional support refers to the availability of encouragement and comfort. It is greatly associated with better cognitive performance. Emotional support boosts elderly persons' self-esteem and gives rise to a feeling of belonging. Informational support includes the provision of information on resources and suggestions about coping skills. This type of support is needed to cope with stress or solve some problems.

Relevant to this study is the hierarchical compensatory model by Cantor (1979). According to this model, the elderly person demonstrates preferences in the hierarchy regarding who gives support. It follows that the spouse comes first, then the children, followed by other family members and relatives, then the friends, neighbours and formal service providers. The provision of support depends largely on the availability and proximity of the provider. The limitation of the hierarchical-compensatory model is that it does not differentiate the tasks that are appropriate for a different person (i.e. spouse, children, relatives, friends and neighbours) to carry out. The model assumes that the elderly live in a traditional household with spouse and children to give support and it also assumes that the relationship with family members is positive. It does not take into consideration the situation of divorced couples and separated family members.

Related to the hierarchical compensatory model is the task-specific model proposed by Litwak (1985) which posited that the selection of support provider/care giver is based on the ability of the provider to perform required tasks rather than on a kinship basis as proposed by Cantor (1979). It follows that the support provider/care giver chosen by the elderly person will be the best person to perform the required tasks. This implies that the selection to provide support will be based on the competence and commitment of the support provider. The merit of this model is that it recognises the limitation of the support provider and the specific needs of the elderly person.

Previous research related to this study are Dai, Zhang, Zhang, Li, Jiang and Huang (2016) which examined the social support and self-rated health of elderly people. The respondents revealed that children are the major source of support followed by their spouse and relatives. It was also shown that age, marital status, education and living conditions are associated factors for support among elderly people as does their 2014 research on the social support and emotional well-being of the elderly. This result revealed that the order of support included spouse, children and friends. This result also showed that spousal support contributed to decreasing negative effects. It was concluded that family and friend support played different roles on the emotional well-being of the elderly.

Likewise, Unanka (2002) investigated family support and the health status of the elderly. The findings indicated that the elderly depended on children, wives, in-laws, and God (spiritual) for support. The elderly also recognised that physical presence and emotional support was very important. In a similar vein, Okumagba (2011) examined family support for the elderly. The main objective of the study was to investigate sources, forms, frequency and

adequacy of support received by the elderly. The findings indicated that the family constituted the major support received by the elderly.

Based on the aforementioned, the purpose of this study was to investigate the support systems (sources and forms) of elderly persons in Lagos State, Nigeria.

### **Research Question**

1. What are the support systems of elderly persons in Lagos State, Nigeria?

### **Research Hypothesis**

1. There is no significant difference in the support systems of elderly persons in Lagos State based on age and gender.

### ***Methodology***

The design adopted was a descriptive survey. The respondents were those individuals who were 60 years of age and above. These individuals were chosen from pension offices and established retirement organisations in Lagos state, Nigeria. There are twenty local government areas in Lagos state. The researcher adopted the simple random sampling technique to select six of those local government areas. The selected are Ikorodu, Kosofe, Surulere, Somolu, Eti-Osa and Badagry local government areas. The researcher proportionally selected 1,613 respondents from the aforementioned local government areas based on accidental sampling. Those that were not up to 60 years of age were excluded from the study. Although, there is no agreement on the age that could be referred to as old age, the United Nations had adopted the chronological age of 60 years to be referred to as old age (Shofoyeke & Amosun, 2014; Dhemba & Dhemba, 2015). In Nigeria, where this study was conducted, the age of 60 years signifies the time when an individual retires from the public sector/civil service and as such, this study concentrated on the elderly.

A researcher-designed instrument entitled “Support Systems of Elderly Persons” questionnaire was employed for the study. The questionnaire was administered to the respondents by the researcher and two research assistants who have been specifically briefed by the researcher to ease the administration and retrieval of the instrument. A total number of 1,613 copies of the questionnaire were administered with 1,578 duly completed and returned. Therefore, 1,578 was used for data analysis.

In order to establish the reliability of the instrument, a test-retest method was used. The instrument was administered to 40 elderly persons in the Ilorin metropolis who were not part of the sample. The same instrument was re-administered on the same set of people after an interval of four weeks. The two scores were correlated using Pearson’s Product Moment Correlation to obtain the correlation coefficient. A reliability coefficient of 0.78 was obtained. The content validity of the instrument was ascertained by giving the instrument to four experts; two from the department of Counsellor Education, University of Ilorin and two from the Department of Psychology, University of Ilorin, Nigeria.

Consent forms were given to respondents to seek their permission to participate in the research on a voluntary basis. Confidential items like the names and addresses of respondents were not asked. The respondents were informed that the purpose of collecting the data was

for research only. Respondents were assured of the confidentiality with which the information obtained was treated. The researcher also received ethical approval from the University of Ilorin Ethical Review Committee (UERC) to carry out the study. The data collected was analysed using a mean at a 2.50 benchmark and two-way Analysis of Variance at a 0.05 alpha level.

## ***Results***

**Research Question:** What are the support systems of elderly persons in Lagos State?

**Table 1: Mean and Rank Order Analysis of Support Systems of Elderly Persons**

<b>Item no.</b>	<b>As an elderly person, I receive / have received support from</b>	<b>Mean</b>	<b>Rank</b>
3	children	3.28	1 <sup>st</sup>
1	Family	3.18	2 <sup>nd</sup>
2	spouse	2.94	3 <sup>rd</sup>
5	friends	2.91	4 <sup>th</sup>
6	religious organizations	2.87	5 <sup>th</sup>
4	neighbours	2.79	6 <sup>th</sup>
7	community groups	2.58	7 <sup>th</sup>
10	peer group	2.54	8 <sup>th</sup>
8	cooperative societies	2.44	9 <sup>th</sup>
9	voluntary organizations	2.42	10 <sup>th</sup>
<b>As an elderly person, I receive / have received support in form of</b>			
2	household management (cleaning of the house, meal preparation etc.)	3.04	1 <sup>st</sup>
4	help with medical care	3.00	2 <sup>nd</sup>
6	financial assistance	2.99	3 <sup>rd</sup>
10	regular visit	2.98	4 <sup>th</sup>
3	running errands outside the home	2.92	5 <sup>th</sup>
9	spiritual support	2.89	6 <sup>th</sup>

8	companionship	2.85	7 <sup>th</sup>
7	mobility/transportation	2.79	8 <sup>th</sup>
1	personal care (getting out of bed, taking a shower, dressing)	2.78	9 <sup>th</sup>
5	operating equipment at home	2.78	9 <sup>th</sup>

Table 1 shows the mean and ranking of support systems of elderly persons in Lagos State. The result on the table revealed that most of the items on the sources of support for elderly persons were ranked above the benchmark of 2.50. Items 3, 1, and 2 ranked top on the list. Item 3 ranked 1<sup>st</sup> with a mean score of 3.28 while item 1 ranked 2<sup>nd</sup> with a mean score of 3.18 and item 2 ranked 3<sup>rd</sup> with the mean score of 2.98. The result on Table 1 also revealed that all the items on the forms of support were ranked above 2.50. Items 2, 4 and 6 ranked highest on the Table with mean scores of 3.04, 3.00 and 2.99 respectively.

**Hypothesis:** There is no significant difference in the support systems of elderly persons in Lagos state on the basis of age and gender.

**Table 2: 2-way Analysis of Variance Showing Differences in the Support Systems of Elderly Persons in Lagos state based on Age and Gender**

Source	Type II Sum of Squares	Df	Mean Squares	Cal. F	Crit. F	Sig.
Corrected Model	2684.119 <sup>a</sup>	5	536.824	4.069		.001
Intercept	5121679.341	1	5121679.341	38822.577		.000
Age	1592.126	2	796.063	6.034*	3.00	.002
Gender	214.674	1	214.674	1.627	3.84	.202
Age * Gender	870.133	2	435.067	3.298*	3.00	.037
Error	207386.540	1572	131.925			
Total	5331750.000	1578				
Corrected Total	210070.659	1577				

a. R Squared = .013 (Adjusted R Squared = .010) \* Sig. at  $p < 0.05$

Table 2 presents a 2-way ANOVA result on elderly persons' support systems based on age and gender. The table shows that the calculated F-value (6.03) for age is greater than

the critical F-value of 3.00 ( $p = 0.002$ ), while the calculated F-value (1.62) for gender is less than the critical F-value of 3.84 ( $p = 0.202$ ), at degrees of freedom (df) of (2, 1572) and (1, 1572) respectively, hence, the hypothesis based on age was rejected, while it was retained based on gender. In order to examine the magnitude of difference in the respondents' support systems based on age, a Duncan Post-hoc test was conducted in Table 3 below.

**Table 3: DMRT Showing the Magnitude of Difference in the Respondents' Support Systems based on Age**

Age	Group	N	Mean	Duncan Groupings
60-69 years	1	820	56.21	C
70-79 years	2	462	57.08	B
80 years & above	3	296	58.91	A

Table 3 shows the magnitude of differences in the support systems of elderly persons on the basis of age. The information on the Table revealed that group 3, which are respondents who are 80 years and above with a mean score of 58.91, contributed more to the differences noted in the ANOVA on Table 2. The mean score of group 3 (58.91) is greater than the mean scores of groups 1(56.21) and 2 (57.08).

### *Discussion*

The mean and rank order of the support systems of elderly persons in Nigeria showed that elderly persons received support from children, family, spouse, friends, neighbours, among others. Elderly persons also received support in the form of household management, medical care, financial assistance, regular visits, spiritual guidance, companionship among others. The finding of this study corroborated the findings of Okumagba (2011) who found that elderly persons received support from children, family members and friends. Likewise, this finding was consistent with the findings of Haifeng, Yang and Tianyong (2014) who found that elderly persons received support from spouse, children and friends. Also, the findings of this study agreed with the findings of Dai, Zhang, Zhang, Li, Jiang, and Huang (2016) who found that elderly persons identified children, spouse and relatives as the sources of support. It was found by Dai, Zhang, Zhang, Li, Jiang, and Huang (2016) that the elderly received support in the form of daily life assistance, as well as with emotional and social interactions.

The reason for this finding is that informal care has remained the most type of support sought by elderly persons in Nigeria. Elderly persons are more comfortable sharing problems with relatives than with strangers. Informal support is regarded as a basic element for survival

for elderly persons. Also, it is believed that such support averts institutionalisation. In the African culture, specifically Nigeria, institutionalisation of elderly persons is regarded as a taboo; the elderly person that is institutionalised is regarded as neglected and abandoned. Accusatory fingers will be pointed at the children and families of such referring to them as being wicked and not responsible.

The result of the hypothesis showed that there was a significant difference in the support systems of elderly persons based on age. This meant that the support systems of elderly persons who fall within the age of 60-69 years differed from those of other categories. The findings further revealed that respondents who are 80 years and above contributed to the differences noted in the result and thus may experience support systems that are different from others. The finding of this study corroborated the findings of Dai, Zhang, Zhang, Li, Jiang and Huang (2016) who found that support is associated with the age of elderly persons. The more an individual advances in age, the more the functioning of the body systems deteriorates, thereby requiring more help from people. Therefore, individuals in this age group (80 years and above) needed more care, warmth and love than other counterparts.

It was also revealed in hypothesis three that there was no significant difference in the support systems of elderly persons based on gender. This meant that both male and female elderly persons received the same support systems. The findings of this study contradicted the findings of Fajemilehin and Odebiyi (2011) who found that female elderly persons enjoyed more support than their male counterparts. The findings of this study did not agree with the findings of Ajiboye, Soyombo and Atere (2012) who found that elderly women received more support than elderly men. The reason for this finding is not unconnected to the fact that people are more aware about the importance of caring for elderly persons whether male or female. For instance, the usual practice is that only women visit their children to enjoy their time with grandchildren but it is not rare nowadays to see elderly men also visiting their children to have a nice time with the grandchildren. Also, many had accepted that both elderly male and female were responsible for the success of children, therefore both deserved to be cared for.

### ***Recommendations***

Individuals should be exposed to the care needed by the elderly and it should be given adequate attention. Significant persons around the elderly such as family members and neighbours should continue to give them special care and attention. Elderly persons who are 80 years and above should especially be taken care of. The Government of Nigeria is urged to give importance to the care and maintenance of elderly persons; allowances and pensions should be paid promptly. Monthly special packages could be arranged for those who are 80 years and above to supplement what they receive from family members. Counsellors could organise seminars for individuals in the society keeping them informed of the relevance of support systems for elderly persons. Well-equipped counselling centres should be made available for elderly persons to seek professional advice on issues bothering them.

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