

**FAMILY SOCIAL SUPPORT AND SOCIO-ECONOMIC STATUS AS DETERMINANTS OF QUALITY OF LIFE AMONG THE AGED IN OYO NORTH, NIGERIA**

**BY**

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**ABSTRACT**

*The purpose of this study was to investigate into the family social support and socio-economic status as determinants of quality of life among the aged in Oyo North, Nigeria.*

*Descriptive research design of ex-post- facto type was used in the study. One hundred and sixty (160) respondents were selected from selected schools in Oyo North senatorial District Area of Oyo State, Nigeria. The respondents were measured with relevant adopted standardized scale and the data obtained was analyzed using Pearson Product Moment Correlation (PPMC) and Multiple Regression statistical analysis. Three research hypotheses were tested at 0.05 level of significance. The result showed that there was quality of life among aged is significantly correlated with family social support ( $r = .838$ ;  $p < .05$ ) and socio-economic status ( $r = .726$ ;  $p < .05$ ). The independent variables (family social support and socio-economic status) when pulled together have significant effects on the quality of life among aged ( $R$  (adjusted) = .928 &  $R^2$  (adjusted) = .859) and each of the independent variables made a significant contribution to the prediction of quality of life among aged. In term of magnitude of contribution, socio-economic status made the most significant contribution (Beta = .900;  $t = 12.438$ ;  $P < 0.05$ ) to the prediction. Other variables made significant contributions in the following order: psychological wellbeing (Beta = .092;  $t = 2.213$ ;  $P < 0.05$ ) and family social support (Beta = .085;  $t = 1.036$ ;  $P < 0.05$ ).*

*In view of these findings, the study stressed that working aged is to be trained on how to improve their family social support during and after the working age, because their level of family social support has a significant influence on the quality of life, Counselling psychologists should intensify their effort to organize seminars/conferences on the implications of these factors (e.g family social support and socio-economic status among others) on the quality of life among aged in the society.*

**Keywords: Family Social Support, Socio-Economic Status, Quality of Life and Aged**

## INTRODUCTION

### Background to the Study

Aged is defined as those persons aged 65 years or over, and this broad definition is used in the current study. However, people included in this population grouping are far from homogeneous. For example, there are significant differences in living arrangements, family circumstances, income and wealth, social practices and health status. Reflecting these differences, there are important variations in the needs of the aged and in their use of aged care and other community and health related services. Although age itself is far from an accurate guide to these differences, it can be useful to distinguish between different age groups among the aged when examining trends in demand for aged care services. Reflecting this, the study sometimes draws a distinction between three subsets of the aged: those aged 65–74 years (the ‘young old’), those aged 75–84 years (the ‘middle old’), and those aged 85 years and over (the ‘old old’). Meaningful social relationships provide a sense of security and opportunities for companionship and intimacy which are important for the well being of older people (McNicholas, 2002; Fajemilehin, 2009).

It appears that the concept of quality of life is fast becoming a popular concept worldwide including Nigeria. At first sight, quality of life is a simple, straightforward construct. Most people have a reasonably clear idea of what sorts of things would enhance their individual quality of life (and probably the quality of life of other individuals too). There is an adage that says, “He who wears the shoe knows where it pinches”. The quality of life of a person is what he/she perceives it to be. For example, higher pay; longer holidays; more satisfaction in our working lives; time to pursue enjoyable and satisfying leisure pursuits; emotional fulfillment in relationships; and having a long healthy and happy life – all within a safe, caring and supportive local community are among the things people conceived as what could improve their quality of life. Quality of life in the rural setting according to Phillips (2006) is a multifaceted phenomenon determined by the cumulative and interactive impacts of numerous and varied factors like housing conditions, infrastructure, access to various amenities, income, standard of living, satisfaction about the physical and social environment.

Studies have confirmed that family; especially children formed the bulwark of informal social welfare support to elders in Africa. Cases of elder abuse occur every day in Nigeria. But abuse of older persons still has to be regarded as a taboo in Nigerian society that makes it difficult to report cases to the Law Enforcement Agencies (Kinsella and Velkoff, 2001). Aside from the provisions of the Criminal Code related to crimes of violence and assault there is yet no law on elder abuse. Though, creation of awareness of abuse as a public health and social issue has been intensified since the first World Elder Abuse Awareness Day took place in most major cities in Nigeria in 2006 it is yet to receive the appropriate attention it deserves from the society and the government. A lot of policymakers, lawmakers, the older persons and members of the society have begun to see elder abuse as a menace that needs the attention of all especially as older persons become more vulnerable in the countries with economies in transition.

In recent years, there is a rapid increase of elderly population all over the world. Particularly nowadays, one to ten persons is 60 years old and above, while in 2050 this rate will be one to five and finally in 2150 will be one to three individuals respectively. Despite the life expectancy and the facilities that medical and social systems provide to elderly, there is a vital question if they experience discomfort situations; like loneliness, depression, social isolation or controversial quality of life. In turn, quality of life is not homogeneous, but multidimensional with many options extended from health indicators to individual habits, cultures and ethics. Therefore, personal

opinion should be taken into account for assessing the elders' standards of living because they meet important alternations at health conditions, social and economic field, spirituality, sentimental condition, and independent living at this period of their life. According to the above perceptions the evaluation of quality of life of elderly should be done with the appropriate questionnaires. Loneliness has a psychological dimension which reflects on somebody's attitude and behavior about his / her life (Kinsella and Velkoff, 2001).

Elderly often express negative feelings and loneliness which come from a combination of ageing process and social stereotypes, influencing their respective quality of life. For the above reason, loneliness may be a critical indicator to estimate quality of life and vice versa. According to bibliography, elderly aged have lower quality of life and more loneliness than elderly men because of their health problems, physical limitations, social inactivity and marital status. Besides, elderly appear to have higher quality of life and lower loneliness than oldest old. Oldest old are greatly influenced from the ageing process and as a consequence they appear to have more disabilities and physical limitations than older, and lack of autonomy depriving them from participating in social activities or meeting their friends. Moreover, it is believed that married have better quality of life and lower loneliness than divorced and widows. The absence of a partner creates insecurity and isolation to the other one. But the majority these statements come from foreign researchers, and not directly from Greece. It is the first time that overall quality of life and loneliness of Greek elderly, without any health problem, is trying to be examined.

In Nigeria, the proportion of the aged population has been increasing, before Nigeria gained independence in 1960, there was a population census conducted in 1952/53. Since independence, the country had only conducted three successful population censuses in 1963, 1991 and 2006. The total number of persons aged 60 years and above in 1952/53 was 2,448,000. In 1963, 1991 and 2006 population census the total number of persons aged 60 years and above was 3,617,000 and 8,227,782 and 19,580,204. The issue of changes family structure and care provision for the elderly is one of such values, which is culturally rooted and esteemed. In many traditional African societies and most countries in the world the family is charged with the responsibilities for the provision of support for the elderly. Such support predominates and it is provided voluntarily without any remuneration (Kosberg, 1992; Brown, 1999).

Nigeria is the most populous country in Africa and currently has the highest older people's population in Africa (Kinsella and Velkoff, 2001). With the largest population in Africa and the ninth in the world, it is estimated that by the year 2025 the population of Nigerians aged 60 and above will constitute 6 percent of the entire population.

**TABLE 1: PROJECTED POPULATION OF AGED IN AFRICA, WEST AFRICAN AND NIGERIA FROM 2005 TO 2050**

Country	Population 60+ (per cent)			Population 60+ (Million)		
	2005	2025	2050	2005	2025	2050
<b>Africa</b>	5.2	6.4	10.0	47.4	85.8	192.9
<b>West Africa</b>	4.7	5.5	9.0	12.0	21.8	51.6
<b>Nigeria</b>	4.9	6.0	9.9	6.4	11.5	25.5

*Source: UN Population Division (2005)*

There is the potential for a rapid growth rate of the older population in coming years, with a lower growth rate among the younger population. The implication is a major change in the age structure of Nigerian society. Based on the findings of the National Census conducted in 2006 the National Population Commission confirmed an increase in the percentage and the number of those aged 60 years and above. In the coming years, the ageing population is expected to increase in numbers and life expectancy rates will gradually increase with significant social and economic implications to the individuals and the Nigerian government. For example, the old-age dependency ratio is not high at present (at least compared with the developed nations) but it will increase in the coming years. This serves as pointer to problems to come.

Udoh (2006) stated that economic problems also make matters worse especially for those who had no previous working record where they could obtain neither gratuity nor pension. These groups of the elderly had to depend on the care given by their children. Inability of the children to take proper care would mean getting on the street to beg for alms because such elderly people are poverty ridden. Some of these aged persons, old as they are would be found in market places because they have none to go on errands for them. This situation is better for aged who could move from one child to the other in the name of helping to care for her grandchildren, than for the elderly men who would prefer to stay in his home. Saving for the old age has never been part of the culture of the rural communities where most of Nigerian elderly people reside. The social security of these old ones is their children as they had also been to their parents.

Koza (1976) held a similar view in pointing out that development must be about the people and should be seen as a process by which efforts of the people themselves are united with authorities sponsoring development to improve economic, social and cultural conditions of the communities and to integrate these communities into the life of the nation enabling them to contribute fully to national progress. Indeed, a community can play a significant role in improving the quality of life for people, because it can enhance a feeling of security and improve the possibility for developing and maintaining an identity – important factors for quality of life (Davies, 1993). The concern for increasing the quality of life of the aged in Nigeria can be seen in the general concern to alleviate the socio-economic status of the rural poor household. Many programmes sponsored by either the national government or international agencies have been designed to improve quality of life of the aged in Nigeria.

Chang and Jaegar (1996) stated that turned to be a sour experience. This in essence is a pointer to the fact that government pensions are filled with inadequacy and inefficiency, which should be tackled to bring succor to the aged population. Prompt payment of pensions would go a long way in helping to care for the elderly. There are two types of pension schemes – Public and Private Pension Schemes. A public pension scheme is a social security payment made to the retired, the elderly and those that have changed jobs in the public sector of the economy. Heller (1998) stated that the aim of public pension programme is not to raise the savings rate but to provide social security or at least a minimum income for the elderly. A private pension scheme is a social security scheme managed and administered by the private sector in order to provide succor and relief to the elderly at a time when they are not economically active. Efforts should be made to take good care of the elderly because they are known to be matured, experienced and wise, all these qualities they have gained over the years make them the think-tank of the society because they had gone through a lot in life and through their acquired wisdom and experience and the society continues to grow in peace. There is no gainsaying the fact that the elderly is faced with a lot of challenges. As the saying goes, old age comes with its pleasure and pains. It comes with declining physical vigour and diverse diminishing capacities.

Most of these studies did not take into cognizance the gender dimension in relating assessment of quality of life to other covariates. Few studies conducted in Europe that made attempt in relating gender issues to quality of life were conducted in hospitals and particularly among in-patients (Orfila, et al., 2006). In view of this, the present study focuses on family social support and socio-economic status as determinants of quality of life among selected aged in Oyo North, Nigeria.

### **Statement of the Problem**

Aged living in rural areas of Nigeria is generally known to be suffering from general deprivation including access to information resources. Aged most often fail to access various information resources and services even when such information is available. The reasons may not be unrelated to the socio-economic status of the aged or the format in which such information is packaged. In Oyo State of Nigeria, it was observed that aged living in the rural areas are known to be unable to access information which can help to meet the demand of the challenges of daily living. The aged are still not able to cater adequately for the basic needs of food, clothes, shelter, obligations, lack of gainful employment and skills. They have limited access to social and economic infrastructure such as economic, health, portable water, sanitation and consequently, limited chance of advancing in their quality of life. The State government and some non-governmental organizations such as Oil Mineral Producing Development Commission (OMPADEC) and National Poverty Eradication Programme (NAPEP) had introduced some intervention programmes such as poverty alleviation, health for all and so on which aged living in the state could benefit from. However, these programme lack information management input which can help translate the programmes to good qualitative life for aged in Oyo state.

Several studies on quality of life has been carried out in the field of sociology, psychology, medicine, economics but it appears there is lack of emphasis on the manner in which the concept is related to the circumstances of aged socio-economic expectations. Informational factors such as information accessibility, requirements, relevance, preference, and use have not been considered as crucial factors that can enhance or affect the quality of life of the rural people. In view of this, the present study focuses on family social support and socio-economic status as determinants of quality of life among selected the aged in Oyo North, Nigeria.

### **Purpose of the Study**

The main purpose of this study is to investigate on family social support and socio-economic status as determinants of quality of life among the aged in Oyo North, Nigeria. Specifically other purposes include to;

1. Find out the relationship among the independent variables (family social support and socio-economic status) and quality of life among aged
2. investigate the joint contribution of independent variables (family social support and socio-economic status) on quality of life among aged
3. Determine the relative contribution of independent variables (family social support and socio-economic status) and quality of life among aged

### **Research Questions**

1. What is the relationship among the independent variables (family social support and socio-economic status) and quality of life among aged
2. What is the joint contribution of independent variables (family social support and socio-economic status) on quality of life among aged



3. What is the relative contribution of independent variables (family social support and socio-economic status) and quality of life among aged

### **Significance of Study**

This study will be highly important to the government at all level, social and welfare workers, the parents, educational planners, decision and policy makers as well as other stakeholder in community development. However, this study will help the public and private parastatals to know and ascertain the effects of independent variables (family social support and socio-economic status) on quality of life among the aged in the community. The study will provide an insight understanding for the individual family to know the effect of independent variables (family social support and socio-economic status) on quality of life among the aged, this will help the families to adopt effective strategies and planning towards enhancing quality of life among the aged in the community.

The study will also enable the community stakeholders to know the effects of independent variables (family social support and socio-economic status) on quality of life among the aged. This will help in reducing the problems of low family social support and invariably improve the quality of life among the aged in the community. This will also enable the government policy makers and other stakeholders to discover the effects of independent variables (family social support and socio-economic status) on quality of life among the aged. This will help the stakeholders in the school to assist the aged woman in overcoming the challenges of low family social support and psychological wellbeing which will in turn enhance the quality of life among the aged in the community.

The study of this type will further enable the aged to discover the effects of independent variables (family social support and socio-economic status) on quality of life. This will help the aged in the community to adopt effective ways towards enhancing their independent variables (family social support and socio-economic status) and in turn improve their quality of life. The study will help social workers and community development agencies and educational/counseling psychologists to know the implications of independent variables (family social support and socio-economic status) on quality of life among the aged. In that, the study will add more to the interventions of the community development agencies on how to improve the problem poor/low quality of life among the aged in the community.

The independent variables (family social support and socio-economic status) on quality of life among the aged will enable the government and the general public to be aware of these factors and work towards proffering lasting solutions to low quality of life in the country. It is important to note that findings in this study will also serve as a source of reference for other researchers who may want to conduct the same or similar study in other parts of the country. However, the study will fill the gaps in the previous study and add more to the existing literatures.

### **Scope of the Study**

This study will be carried out in Local Government areas of Oyo North. The study aimed at investigating the independent variables (family social support and socio-economic status) on quality of life among selected aged in Oyo North, Nigeria. However, due to the time factors and financial constraints, the researcher will make use of the aged in Oyo North, Nigeria.

## METHODOLOGY

### Research Design

The study adopted descriptive research design of *ex-post-facto type*. Such an approach does not involve the manipulation of variables in the study. It is therefore, after the fact study. It's neither adds to nor subtracts from the existing fact. However, it is carefully observe and record information as it naturally occurred at the time the study was conducted.

### Population

The subjects for the study were all aged in Oyo North Senatorial District in Oyo State, Nigeria.

### Sample and Sampling Technique

The sample for this study comprises of two hundred (200) participants, the researchers will target his audience in Local Government Areas of Oyo North. Purposive and convenience sampling methods were adopted in selecting participants for this study. Purposive in the sense that only aged were used and convenience in the sense that aged in different areas/places that created time in responding to the questionnaires were used. On the whole, total numbers of participants were two hundred and these will consist of aged within the average age of 65 years and above and the study covered both male and female.

### Instrumentations

#### Family Social Support Scale

Family social support scale developed by Harter (1985) was used to measure the family social support of the aged. The instrument consists of seventeen (17) items, responses anchored base on the four points of which are Strongly Agree (SA), Agree (A), Disagree and Strongly Disagree (SD). According to Harter (1985), the instrument had reliability coefficient of 0.71.

#### Socio-Economic Status Scale

The Socio-economic Status of the students developed by Salami (2000) was adopted to measure the socio-Economic Status of the students. This scale was based on their parents' occupation, Educational level, residence and types of equipment in the house. The items contain twelve (12) items to measure the socio-Economic Status. The point from the scale further divided into three parts in the scorings; lower socio-Economic Status, medium socio-Economic Status and high socio-Economic Status. The test retest reliability of the scale was given as 0.73.

#### Quality of Life Scale

The older peoples' quality of life developed by Bowling and Stenner (2010) was adopted to measure quality of life of aged. This instrument consists of twenty (20) items with responses anchored base on the four points and had an internal consistency of .87.

#### Validity of Instrument

For ensuring the validity of the instruments, the researcher gave the instruments to experts in the field of psychology and experts in the area of research and statistics. After all these people had given their suggestions and made necessary corrections on the instruments, the researcher then submitted the instrument to the supervisor who made the final corrections.

### Reliability of Instrument

After validity of the instruments, thirty (30) copies of the instruments were administered on some civil servants in Oyo State in order to test for the reliability. The Cronbach alpha technique was used to test the reliability of the instrument to ensure that it is consistent in measuring what it was designed to measure. The results from the analysis carried out showed reliability coefficient of .86.

### Procedures of Administration

The instruments were administered to the participants on their various places/areas with the permission of necessary authority for the exercise. The researcher was assisted by research assistants in administration and collection of the instruments. However, the administration and collection of instruments was done on the same day of administration.

### Method of Data Analysis

Pearson Product Moment Correlation (PPMC) and Multiple Regression statistical analysis were used to analyse the data. The Pearson Product Moment Correlation (PPMC) was used to establish the relationship between the independent variables and dependent variable while Multiple Regression was used to establish the joint and relative contributions.

## CHAPTER FOUR RESULTS AND DISCUSSION OF FINDINGS

This chapter presents the results and summary of findings. The study investigated the family social support and socio-economic status as determinants of quality of life among the aged in Oyo North, Nigeria. Three research Questions were raised and answered. The data were analyzed using Pearson Product Moment Correlation (PPMC) and Multiple Regression statistical method. The results are presented below:

**Research Question One:** What is the relationship among the independent variables (family social support and socio-economic status) and quality of life among aged?

**Table1: Descriptive statistics and Inter-correlations among the variables.**

Variables	N	Mean	SD	Quality Of Life	Family social support	Socio-Economic Status
Quality Of Life	160	49.80	23.65	1.00		
Family social support	160	38.45	15.75	.838	1.00	
Socio-Economic Status	160	30.60	14.44	.726	.907	1.00

### *Correlation is significant at the 0.05 level (2-tailed)*

Table 1 contains descriptive statistics and inter-correlations among the study variables. As shown in the table 1, quality of life among aged is significantly correlated with family social support ( $r = .838$ ;  $p < .05$ ) and socio-economic status ( $r = .726$ ;  $p < .05$ ). There were also significant correlations among the independent variables. This finding is in line with the study of Udoh (2006) stated that economic problems also make matters worse especially for those who had no previous working record where they could obtain neither gratuity nor pension. These groups of the elderly had to depend on the care given by their children. Inability of the children to take proper care would mean getting on the street to beg for alms because such elderly people are poverty ridden. Some of



these aged persons, old as they are would be found in market places because they have none to go on errands for them. This situation is better for aged who could move from one child to the other in the name of helping to care for her grandchildren, than for the elderly men who would prefer to stay in his home. Saving for the old age has never been part of the culture of the rural communities where most of Nigerian elderly people reside. The social security of these old ones is their children as they had also been to their parents. The lack of social pensions has serious consequences on the well being of the older persons. The majority of older people who cannot earn an income and are not covered by the contributory pension scheme are left at the mercy of the vagaries of life. Social pensions reduce old age poverty and support households. Social pensions target development aid to the poorest and contribute significantly to achieving the Millennium Development Goals (MDGs). The local economies are regenerated and wealth distributed, and general household health and nutrition are improved. For the privileged proportion of the population that is lucky to work in the formal sector, arrangement for social security funds is always made.

In the investigation, it was also found that socio-economic status also predicts the quality of life among the aged. This finding was supported by the study of Koza (1976) who held a similar view in pointing out that development must be about the people and should be seen as a process by which efforts of the people themselves are united with authorities sponsoring development to improve economic, social and cultural conditions of the communities and to integrate these communities into the life of the nation enabling them to contribute fully to national progress. Indeed, a community can play a significant role in improving the quality of life for people, because it can enhance a feeling of security and improve the possibility for developing and maintaining an identity – important factors for quality of life (Davies, 1993). The concern for increasing the quality of life of the aged in Nigeria can be seen in the general concern to alleviate the socio-economic status of the rural poor household. Many programmes sponsored by either the national government or international agencies have been designed to improve quality of life of the aged in Nigeria. Worthy to mention is the introduction of the Better life for Aged (BLW) in 1987 under late Mariam Babangida, (the then Nigerian first lady) and the Family Economic Advancement Programme (FEAP) under Mariam Abacha (the Nigerian first lady in 1993-97) which were planned to play critical role in alleviating the status of aged in Nigeria, socially and economically. However, most of these programmes have failed to ameliorate the working and living conditions of aged because aged in rural areas for which such programmes were meant lagged behind in terms of socio-economic advancement.

**Research Question Two:** What is the joint contribution of independent variables (family social support and socio-economic status) on quality of life among aged?

**Table 2: Multiple regression analysis on quality of life among aged data**

Multiple R(adjusted)=.828				
Multiple R <sup>2</sup> (adjusted)=.859				
Standard error of estimate=8.89				
Analysis of variance				
	Sum of square (SS)	DF	Mean square	F
Regression	76603.307	3	25534.436	322.95
Residual	12334.293	156	76.066	
Total	88937.60	159		

The table above shows that the independent variables (family social support and socio-economic status) when pulled together have significant effects on the quality of life among aged. The value of R (adjusted) and  $R^2$  (adjusted). The analysis of variance performed on the multiple regressions yielded an F- ratio value and was found to be significant at 0.05 level. The result of the second research hypothesis revealed that the independent variables (family social support and socio-economic status) when pulled together have significant effects on the quality of life. The magnitude of the prediction of the independent variables was reflected in the value of R and  $R^2$  (adjusted). The result thus demonstrated that 85.9% of the variance in the quality of life among the aged is accounted for by the linear combination of the independent variables. What the results are saying is that the capacity of the independent variables to predict quality of life among the aged could not have happened by chance. This finding is in consonance with the work of previous researchers. Chang and Jaegar (1996) stated that turned to be a sour experience. This in essence is a pointer to the fact that government pensions are filled with inadequacy and inefficiency, which should be tackled to bring succor to the aged population. Prompt payment of pensions would go a long way in helping to care for the elderly. There are two types of pension schemes – Public and Private Pension Schemes. A public pension scheme is a social security payment made to the retired, the elderly and those that have changed jobs in the public sector of the economy. Neglect of filial obligations due to these structural changes has further impoverished older people and created more physical and social distance between family members.

**Research Question Three:** What is the relative contribution of independent variables (family social support and socio-economic status) and quality of life among aged?

**Table 3: Relative contribution of independent variables to the prediction**

Model	Unstandardized coefficients	Standardized coefficients		T	P
	B	Standard error	Beta		
Constant	4.402	1.912		2.303	P<0.05
Family social support	.128	.123	.085	1.036	P<0.05
Socio-Economic Status	1.473	.118	.900	12.438	P<0.05
Psychological Wellbeing	.138	.062	.092	2.213	P<0.05

The table above shows that each of the independent variables made a significant contribution to the prediction of quality of life among aged. In term of magnitude of contribution, socio-economic status made the most significant contribution (Beta= .900; t= 12.438; P<0.05) to the prediction. Other variables made significant contributions in the following order: psychological wellbeing (Beta= .092; t= 2.213; P<0.05) and family social support (Beta= .085; t= 1.036; P<0.05). The result of the third research hypothesis revealed that each of the independent variables made a significant contribution to the prediction of quality of life among the aged. In term of magnitude of contribution, socio-economic status made the most significant contribution to the prediction. Other variables made significant contributions in the following order: psychological wellbeing and family social support. This is consistent with the previous research. For example, Heller (1998) stated that the aim of public pension programme is not to raise the savings rate but to provide social security or at least a minimum income for the elderly. A private pension scheme is a social security scheme managed and administered by the private sector in order to provide succor and relief to the elderly

at a time when they are not economically active. Efforts should be made to take good care of the elderly because they are known to be matured, experienced and wise, all these qualities they have gained over the years make them the think-tank of the society because they had gone through a lot in life and through their acquired wisdom and experience and the society continues to grow in peace. There is no gainsaying the fact that the elderly is faced with a lot of challenges. As the saying goes, old age comes with its pleasure and pains. It comes with declining physical vigour and diverse diminishing capacities.

## **CONCLUSION AND RECOMMENDATIONS**

### **Conclusion**

Based on the findings of this study, persistent poor quality of life among the aged in Nigerian needs not to continue indefinitely, there is hope that with the improvement of some factors (e.g. family social support and socio-economic status among others) the situation can be changed for the better. The study discovered that some of family social support and socio-economic status influence the quality of life among aged. By and large, family social support and socio-economic status have a great influence on the quality of life among aged. As such, it is very crucial to improve these factors so as to eradicate the persistent occurrence of teachers' bad quality of life among aged in this great country.

By and large, it was also concluded from this study family social support and socio-economic status have a great impact on the quality of life among aged. This means that inadequate family social support, low socio-economic status and poor psychological wellbeing will definitely have a negative effect on quality of life among aged. By implication, quality of life among aged can be improved through adequate family social support, improved socio-economic status and good psychological wellbeing in the country. Therefore, these factors are to be improved in our schools for us to have efficient and improved quality of life and general wellbeing among aged and not only in Oyo North but also in other States of Nigeria and other Country at large.

### **Recommendations**

1. The aged are to be enlightened on the significance of family social support on quality of life among aged. This will help in the collaborative efforts to identify possible problems and provide appropriate solutions to the problems that could come within an individual in the family.
2. Working aged is to be trained on how to improve their family social support during and after the working age, because their level of family social support has a significant influence on the quality of life among aged in the society.
3. Counselling psychologists should intensify their effort to organize seminars/conferences on the implications of these factors (e.g family social support and socio-economic status among others) on the quality of life among aged in the society.
4. Working aged is to be encouraged on how to improve their socio-economic status; this is because socio-economic status has a significant influence on the quality of life among aged in the society.
5. Public and private organisations should endeavour to plan for the workers most especially during the working age such as saving planning, stress management and health maintenance, this will help in boosting the quality of life among aged in the society.

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