

**AN EVALUATION OF THE  
GOVERNMENT FREE MEDICAL  
PROGRAMME FOR THE ELDERLY IN  
NIGERIA: IMPLICATIONS FOR  
GERIATRIC CARE**

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# Abstract

*The welfare of the elderly in Nigeria has been a source of concern to many researchers, and human rights activists. Apart from the high level of poverty among this group, their well-being is already considered a public health concern. Government at the federal and state levels seem to have no visibly concrete policies for the elderly in terms of social security, provision of other social services, as well as health care. Over a decade ago, a State government (Rivers State) in Nigeria embarked on the Free Medical Care (FMC) programme for the elderly population, as well as for children 0 – 6 years old. This paper investigated that FMS programme from its inception to date in relation to services rendered to the ageing population, with a view to identifying its successes and challenges. The study was guided by three research questions; while interview questions were used to elicit responses from 3 medical doctors and 50 elderly patients who were beneficiaries of the programme. After the analysis of data gathered, it was found, among other things, that the attitude of government was still very poor with regard to caring for the elderly, as shown in the following ways:-1)The percentage of beneficiaries in the ageing population was not only low, but declining; 2)the preconditions for registering and benefitting from the programme were almost making it inaccessible to the elderly; 3)the programme is not as free as it was being claimed by politicians who use same to score cheap political points, as drugs were still being purchased, and other payments demanded compulsorily; 4)Only the urban elderly population has so far been served, leaving out their vast rural majority counterparts. The paper was concluded with some recommendations/implications for geriatric care.*

# Introduction

- A United Nations Report has revealed that enhancing older people's capacity needs to be seen as an integral part of efforts to promote overall societal development (UN, 2002). While developed economies have made, and keep making conducive socio-economic environment for the elderly in terms of their welfare, the reverse is the case in many developing countries.

- In Nigeria, the case is a very pathetic one.
- The 1999 Constitution of the Federal Republic of Nigeria [Section 14 (20b)] indicates that “the security and welfare of the people (including the elderly) shall be the primary purpose of the government.”
- Section 16(2) (d) also stipulates that “suitable and adequate shelter and food, reasonable minimum living wage, *old age care and pensions* and unemployment, sick benefits and welfare of the disabled are provided for all citizens.”

- Some studies dealing with the aged in Nigeria (Eze, 2013; Ajomale, 2007; Mudiare, 2013) have revealed that government attitude towards the elderly population was and is still very negative.
- The attitude of persons and organizations towards the aged is equally not too different.

- Eze (2013) observed that there is no government policy or legislation that concretely provides for the aged in Nigeria.
- However, a Bill seeking to establish a National Centre for Elderly Persons for the general purpose of providing welfare and recreational facilities for the elderly in Nigeria was passed into law on July 14, 2009.
- Not much seems to have resulted from that law in terms of implementation.

- There are no social security policies for the elderly at present in Nigeria(Aboderin, 2006; Ajomale, 2007).
- With all the reforms in the pension scheme (especially the Contributory Pension Scheme), the elderly's lives have not been touched significantly.
- Corruption and other forms of malpractice have made the pension scheme not to achieve desired objectives.

- Two recent cases can be reported here:-
- One, the case of a Director in the Federal Pension office who pleaded guilty to a 3-count charge of stealing ₦23.3 billion (about US\$143.2m ) pension fund, and was given an option to pay ₦750,000 (about US\$4,600) fine or two years imprisonment (Mudiare, 2013).
- Two, the Head of the Pension Reform Task Force team, which was set up to bring sanity into the pension scheme, was indicted of embezzlement of pension funds (Daily Sun Newspapers, 2013; Uwerunonye, 2013). Commensurate sanctions are yet to be seen.

- There is also the inadequate provision of housing facilities for them. The situation in major cities like Lagos and Port Harcourt are cases in point.
- Ajomale (2007) describes how many older persons cannot afford quality medical care; as well as the difficulty in accessing such services from the rural areas where the majority of them reside.
- Thus, many of them are forced to patronize the services of herbalists and other local practitioners.
- Olumba (2013) summarises the problems of the elderly thus:-

- With “the lack of quality medical care, an inexistent care system and welfare for the aged, ...irregular pension payment for the retired workers of government, lack of tolerance from the young ones, and some other factors, the aged persons in Nigeria are facing severe, intractable and endemic hardship.”
- Olumba (2011) concludes with this challenging question: “who will not be afraid to age in a country where kidnappers do not want to see aged persons?” Rape cases involving elderly victims are currently on the increase.

# The Free Medical Services Programme

The launch of the Free Medical Care programme for children (0-6years) and the elderly in Rivers State of Nigeria on May 5, 2000, was seen as a lofty achievement of government.

## **Programme Vision**

- The vision of the Free Medical Care (FMC) Programme was to reduce morbidity and mortality rates in Rivers State, by improving the health status of its residents.

## **Programme Mission**

- The Free Medical Care Programme's mission was to reduce the health/economic burden of the residents of Rivers State by providing adequate and efficient health care services for all.

# Programme Objectives

- Provide quality medical care for all residents of Rivers State of Nigeria that fulfill the registration requirements.
- Create awareness and interest about the programme with recipients to ascertain the usefulness of the programme.
- Provide a forum to meet with all programme stakeholders to appraise the programme regularly.
- Monitor and evaluate the programme on a regular basis.

# Questions Arising

- Questions in the minds of researchers were:
  - ❖ Is the programme serving the target groups, especially the elderly as it was intended?
  - ❖ What are the major achievements and challenges?
  - ❖ What is the way forward?
- This study was therefore to find answers to those questions.

# Objectives of the Study

The objectives of this study were to:

- Examine the modus operandi of the Government Free Medical Care programme for the Elderly.
- Find out possible achievements of the programme.
- Investigate the challenges being faced by the Scheme.
- Propose the way forward.

# Research Questions

- The following research questions guided the study:
- How free is the Government Free Medical Care (FMC) programme for the Elderly?
- Are there significant achievements of the FMC programme since its inception?
- What challenges are being faced by the FMC programme?

# Methods

- **Instrument:**

- Interview questions were drawn up for the two categories of respondents in the scheme: the medical doctors, and the volunteer elderly patients.

- **Sample**

- Sample comprised 3 medical doctors (including the Director in charge of the programme) and 50 volunteer elderly patients receiving treatment in a hospital under the FMS programme.

# Results

- **Research Question One**

How free is the Government Free Medical Services (FMS) programme for the Elderly?

- The programme was seen to be anything but free; 100% of the respondents- doctors and patients alike- said so.
- ❖ Patients are expected to show their tax receipts (house/shop rentage receipts), utility bills, among others.
- ❖ They equally paid a registration fee, as well as make other payments for registration card, laboratory tests, drugs, etc.

## Research Question2

Are there significant achievements of the FMS programme since its inception?

- It has brought some relief to beneficiaries as not every service or drug is paid for.
- Some older adults have benefitted from the programme, especially those at inception.
- The coverage of beneficiaries has been extended to other groups.

# Research Question Three

What challenges are being faced by the FMS programme?

The challenges are numerous:

- Inadequate funding
- Logistics problems: Lack of operational vehicles, etc
- The scheme is getting too costly for the elderly
- Ignorance of, and lack of confidence, in the programme by some elderly folks

## Research Question Three *cont'd*

- Corruption on the part of some staff
- Lack of effective monitoring and evaluation
- Inadequate staffing
- The programme is not a 24-hour service, so emergencies are not provided for
- The rural elderly are almost left out of the scheme
- The inclusion of new categories of beneficiaries is stretching the facilities/personnel beyond limits
- Political factors

# Discussion

- 1) The *Free* Medical Scheme for the Elderly is not really free;
- 2) There appears to be some achievements of the scheme which cannot be considered very significant, in the light of the quality and the cost of services rendered;
- 3) The challenges are simply overwhelming, ranging from financial, personnel, logistics, to administrative and attitude problems.

## **Discussion *cont'd***

- On the whole, these challenges emanate from the poor attitude of government toward the welfare of the elderly.
- That has weakened the programme, making it not only to lose focus, but making the aged population to have no confidence in the scheme.
- This agrees with Eze's (2013) assertion that there is really no government policy/programme that concretely provides for the aged in Nigeria.

## **Discussion *cont'd***

- Olumba's (2011) observation that there is lack of quality medical care for the elderly as well as irregular pension payment for government retirees, among other problems faced by the older citizens.

# Conclusion

- Many respondents are of the opinion that the FMS programme is more of a political programme than one designed to bring real improvements in the health-care of the elderly.
- A change in attitude toward the elderly and their issues would greatly bring about good policies and programmes that will be considered efficient and effective.

# Implications for Geriatric Care

The following suggestions are therefore made for improved geriatric care:

- ❖ Government needs to design a health-care programme specifically meant for the elderly population, and it should be entirely free or heavily subsidized.
- ❖ Proper monitoring and evaluation of the entire programme to ensure that desired objectives are realized.
- ❖ There is the need to strengthen the staffing of the programme by employing more and diverse professionals for the relevant units.

# Implications for Geriatric care *cont'd*

- More operational vehicles should be bought, while existing ones should be properly maintained.
- Rural health centres should be adequately equipped to take care of the medical needs of the elderly population. This would save them the stress of travelling long distances to hospitals at the State capital for any and every health challenge.
- Special allowances/provisions should be made available to health workers serving in the rural areas as an incentive, as is obtainable in other sectors.
- There needs to be effective and efficient public enlightenment to sensitize the State residents about the existence of the FMS programme for the Elderly.

- Erring staff, especially the corrupt and irregular ones in the programme should be sanctioned to serve as a deterrent to others.
- Government should not play politics with health-care generally, not to talk of medical services for the elderly.
- Health-care is a financially demanding sector and should not be left in the hands of only government. Therefore, the private sector, religious bodies and public-spirited individuals should partner with government to provide health-care and other forms of welfare to the elderly population.
- Professional groups in gerontology and geriatrics like psychologists, counsellors, social workers, geriatric nurses and doctors should also provide advocacy and professional support from time to time to the elderly in the area of study. With the high rate of kidnapping of the aged in Nigeria, psychological, medical and legal services are in great demand among these folks.

- Aboderin, I. (2005). Intergenerational support and old age in Africa.
- Ajomale, O. (2007). Country report: Ageing in Nigeria- Current state, social and economic implications. *Sociology of Aging*, ISA RC 11. Summer.
- Daily Sun Newspapers (2013, Jan. 30). A Miscarriage of justice.
- Eze, M. (2013). Old age legislation in Nigeria. Retrieved June 20, 2014 from <http://www.lco-cdo.org/ccel-presentations/1A%20-%20Magnus%20Eze.pdf>
- Federal Republic of Nigeria (1999). Constitution of the Federal Republic of Nigeria. Lagos. Federal Government Printers.

# References *cont'd*

- Gachuchi, J. M. & Kiemo, K. (2005). Research capacity on ageing in Africa: Limitations and ways forward. *Generations Review*, 15(2), 36 - 38.
- Kinanee, J. B. (2013). Lecture notes on 'Management and Counselling of the Aged'. Unpublished manuscript.
- Mudiare, P. E. U. (2013). Abuse of the aged in Nigeria: Elders also cry.american *International Journal of Contemporary Research*, 3 (9), 72-87.
- Olumba, E. (2011). Old age: The Nigerian curse. Retrieved June 18, 2014 from <http://www.nigeriavillagesquare.com/quest-articles/old-age-the-nigerian-curse.html>.
- United Nations (2002). Report of the Second World Assembly on Ageing. N.Y.: Author.
- Uwerunonye, N. (2013, March 4). The facts and farce of a scam. *Tell Magazine*, No. 9 pp. 18-28.

**THANK YOU**

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