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SOCIAL SUPPORT AND PSYCHOLOGICAL DISTURBANCE AMONG THE ELDERLY IN BENUE NORTH-WEST SENATORIAL ZONE, BENUE STATE, NIGERIA

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ABSTRACT

The adverse effect of psychological disturbances among the elderly cannot be overemphasized as it poses a global public health challenge. Thus, the study examined the relationship between social support and psychological disturbance among the elderly in Benue North-West Senatorial Zone. The study adopted the correlation design and used the simple random sampling to sample two Local Government Areas in the zone, while the purposive sampling technique was used to sample 120 senior citizens; 91 (75.8%) males and 29 (24.2%) females with the mean age of 73 years with 54 to 92 years age range. The Multidimensional Scale of Perceived Social Support (MSPSS) and Depression, Anxiety and Stress Scale (DASS-21) were used to collect data. Four hypotheses were formulated and tested using standard multiple regression analysis. The first finding shows that there was a significant negative relationship between family social support and psychological disturbance β = -.294, t=-2.007; P<.05. The second finding revealed that there was no significant relationship between friend's social support and psychological disturbance β=.081, t=.784; p>.05. There was no significant relationship between significant others social support and psychological disturbance β=-.048, t =-334; p>.05. On the whole, social support significantly predicts psychological disturbance among elderly in Benue North-West Senatorial Zone R = .309, R^2 = .095, F (3,101) = 3.543; p<.05. It was concluded that social support determines the psychological disturbance of the elderly. It was recommended that mental health professionals and elderly caregivers to provide psychological protection to the elderly and use social support (family) programs in their treatment as a non-pharmacological method to prevent psychological disturbances such as anxiety, depression and stress to enhance the elderly people's.

Keywords: Anxiety, Elderly, Family, Nigeria, Psychological Disturbances, Social Support.

Introduction

Psychological disturbance remains a major global health challenge, significantly contributing to morbidity and mortality, with mental illnesses disturbing over one billion people worldwide and ranking among the leading causes of disability (World Health Organization, 2025).The prevalence of psychological disturbance and its associated factors vary across the globe while the aging population presents a challenge to all regions of the world especially in Africa, Sub-Sahara Africa where Nigeria is located (Vierto, et al., 2021; WHO, 2021; Chiahemba et al., 2024).

Social support refers to the comfort and assistance individuals receive from friends, family, groups, communities, institutions and significant others (Onalu & Nwafor, 2021). It plays a vital role in helping people cope with life's challenges by fostering resilience and emotional well-being. This support can be formal, such as institutional programs, or informal, such as encouragement from loved ones. Importantly, social support conveys a sense of value, worth and acceptance, which strengthens individuals' ability to manage stress and adversity. By promoting belonging and reassurance, social support becomes a crucial resource for navigating difficult circumstances (Onalu & Nwafor, 2021; Pasen et al., 2024).

Having strong social relationships and knowing that support is readily available positively influences individual health and overall well-being. Evidence shows that social connections foster resilience, reduce stress, and enhance coping mechanisms in the face of adversity (Lakioti et al., 2024; Oyewo, 2025). Conversely, the absence of social support can lead to significant negative outcomes, particularly for individuals experiencing life challenges. Those without supportive networks are at greater risk of depression, anxiety, and even suicidal tendencies. Meanwhile, strengthening social bonds and institutional support not only improves mental health but also contributes to broader public health goals, ensuring healthier and more resilient populations (Mueller et al., 2021; Lakioti et al., 2024; Velayudhan et al., 2025).

The interpersonal theory by Freedman et al. (1951) attributed psychological disturbance to dysfunctional patterns of interaction. It emphasizes that human beings are a product of relationship with other beings and described psychological disturbance as maladaptive behaviour observed in relationships which is caused by unsatisfactory relationship of the past or present. As such, the theory is relevant in this study because it demonstrates the causes of psychological disturbance to human being and point out interpersonal therapy as treatment package on how to address psychological disturbance among the elderly. Therefore, the theory can be used to explain the importance of interaction (social support) among elderly and the need for interpersonal tolerance and belongingness among older people to their loved ones in the society so that they will not perceive the world as malevolent and unjust in their lives and become psychologically disturbed.

Older adults who have served their nations and retired often face frustration when they lack adequate support from governments, organizations, and communities. This neglect highlights only a fraction of the broader challenges confronting the elderly, highlighting the urgent need for social protection and policy interventions. Without sufficient support, many older persons experience psychological disturbance as they critically evaluate their lives, often grappling with feelings of abandonment and diminished self-worth (Eke et al., 2024; Akosile et al., 2024; Agu et al. (2025).

Studies emphasize that inadequate social support systems increase vulnerability to depression, anxiety, and other mental health issues among the elderly. In Nigeria and similar contexts, reliance on family care is common, yet economic pressures and weak institutional frameworks leave many older adults without reliable assistance. Addressing these gaps through comprehensive social policies and accessible support services is essential to safeguard the dignity, health, and well-being of aging populations (Yildirim & Arslan, 2020; Mueller et al., 2021; Eke et al., 2024; Okoro et al., 2025). Thus, the elderly people in Benue State face psychological disturbance and health risks when deprived of family, friends, and essential social support.

Moreso, the adverse effect of psychological disturbance among the elderly cannot be overemphasized as it poses a global public health challenge (WHO, 2025). It has been observed that when the elderly people lack support from families, friends and significant others it affects their optimal functioning. As such, could those elderly people who have access to luxury and comfort by friends, families and significant others function optimally? Therefore, the need to examined social support and psychological disturbance among the elderly in Benue North-West Senatorial Zone cannot be overemphasis.

The specific objectives of the study include:

i. To examine the relationship between family social support and psychological disturbance among elderly in Benue North-West Senatorial Zone.
ii. To examine the relationship between friend's social support and psychological disturbance among elderly in Benue North-West Senatorial Zone.
iii. To ascertain the relationship between significant others social support and psychological disturbance among elderly in Benue North-West Senatorial Zone.
iv. To examine the extent social support influence psychological disturbance among elderly in Benue North-West Senatorial Zone among elderly in Benue North-West Senatorial Zone.

Hypotheses

i. There will be a significant relationship between family social support and psychological disturbance among elderly in Benue North-West Senatorial Zone.
ii. There will be significant relationship between friend's social support and psychological disturbance among elderly in Benue North-West Senatorial Zone.
iii. There will be a significant relationship between significant others social support and psychological disturbance among elderly in Benue North-West Senatorial Zone.
iv. Social support will have a significant influence on psychological disturbance among elderly in Benue North-West Senatorial Zone among elderly in Benue North-West Senatorial Zone.

METHOD

Participants

The study employed one hundred and twenty (120) elderly people; 91 (75.8%) males and 29 (24.2%) females with age range of 54 to 92 years and the mean age of 73 years old. The Eligibility (inclusion) criteria for elderly persons include one who (a) is 60 years and above; (b) served in the public or private or traditional or religious sector and retired on the basis of service fixed age of sixty (60, 65 & 70) years or thirty-five (35) years of unbroken active service (c) for judicial officers, teachers and academic staff of tertiary institutions, 65 years and 70 years respectively considered in active service; (d) reside in the selected local government areas as at the time of the research; (e) physically and or mentally sound to complete the study questionnaire or with support by the researcher or research assistants. Exclusion criteria include an adult who is (a) less than 60 years; (b) an elderly person who is blind, deaf or physically challenged that they cannot read, understand and comprehend a sentence; (c) elderly persons who are psychically or mentally unstable to complete the study questionnaire. The setting of the study is Benue North-West Senatorial Zone (also known as Zone B). It comprises of Buruku, Gboko, Tarka, Guma, Makurdi, Gwer West and Gwer East Local Government Area Councils. Makurdi and Gwer-East Local Government Areas were selected through a simple random sampling technique to avoid bias, while the purposive sampling technique was used to sample 120 elderly people for the study.

Instruments

The Multidimensional Scale of Perceived Social Support (MSPSS) was developed by Zimet et al., (1988) to measure the participants' subjective view of how people such as families or peers are available to meet or assist them through comfort or support. The scale has 7; point Likert response format of 'very strongly disagree' (1) to 'very strongly agree' (7). The 12-item scale is divided into three dimensions; family support (item 3, 4, 8 & 11), friends support (item 6, 7, 9, & 12) and significant others (item 1, 2, 5 & 10). The original validation reported Cronbach alpha of .92 for family, .93 for friends, and .93 for significant others, indicating excellent internal consistency (Aloba et al., 2019; Bello et al., 2022). High scores indicate strong perceived social support while low scores indicate weak perceived social support (see figure 1.1). Meanwhile, some of the items that constitute the scale include; "there is a special person who is around me when I am in need", "there is a special person with whom I can share my joys and sorrows" for significant others support; "my friends really try to help me", "I can count on my friends when things go wrong" for friends support; and "my family really tries to help me" and "I get the emotional help and support I need from my family" for family support. The MSPSS is categorized scores into low perceived social support (1.0-2.9), moderate perceived social support (3.0-5.0), and high perceived social support (5.1–7.0) (Zimet et al., 1988).

Depression, Anxiety and Stress Scale (DASS-21) was developed by Lovibond and Lovibond (1995) to measure psychological disturbances, depression, anxiety and stress. It consists of 21 items, with seven items per subscale, rated on a 4- point Likert scale reflecting severity over the past week. The DASS- 21 is based on the tripartite model of

emotional distress with item 3, 5, 10, 13, 16, 21 for depression; item 2, 4, 7, 9, 15, 19, 20 for anxiety and item 1, 6, 8, 11, 12, 14 and 18 for stress with reliability coefficient of .94, .87 and .91 respectfully. The overall psychometric studies consistently demonstrate strong internal consistency, with Cronbach's alpha values ranging from .82 to .94, and good construct validity across clinical and non- clinical populations. The recommended cut-off scores for conventional severity labels (normal, mild, moderate, severe and extreme severe) are as follows:

	Depression	Anxiety	Stress
Normal	0-9	0-7	0-14
Mild	10-13	8-9	15-18
Moderate	14-20	10-14	19-25
Severe	21-27	15-19	26-33
Extreme Severe	28+	20+	34+

Source: Lovibond & Lovibond (1995).

Procedure

Prior to the administration of the study questionnaires, the researcher obtained a letter of permission from traditional council, associations, groups that housed the elderly in Makurdi State. During the administration, the researchers reported to the Zaki (Chief) for introduction and acceptance in that community. This process was done in the selected Local Government Areas to avoid conflicts/security issues in the study area. Through the purposive sampling, one hundred and forty-five (145) copies of the study questionnaire were administered among the participants through face-to-face approach. The researchers also ensured absolute and maximum confidentiality. The data collection was done for the period of six (6) weeks. Meanwhile, eleven (11) copies of the questionnaire were missing due to non-retrieval while fourteen (14) copies were invalid on account of non-completion by the participants and only one hundred and twenty copies were duly valid for data analysis.

Design and Statistics

The study adopted the correlation design. This design is most suitable for the study because it allows the researchers to examine the relationship between the concepts under study without manipulating the variables but providing insight to its association for better understanding.

The standard multiple regression analysis was used to test the formulated hypotheses via SPSS version 23.

RESULTS

Table 1: Standard Multiple Regression Analysis Table showing the relationship among variables

Predictors	R	R^2	df	F	Sig	β	t	Sig.
Constant	.309	.095	3,101	3.543	.017		6.173	.000
Family						-.294	-2.007	.047
Friends						.081	.784	.435
Significant Others						-.048	-.334	.739

Dependent Variable: Psychological Disturbance

The result in Table 1 indicated that there was a significant negative relationship between family social support and psychological disturbance β = -.294, t=-2.007; P<.05. The result further shows that psychological disturbance decreases to 29.4% as family social support increases. This implies that where the family members fail to support the elderly, they will become psychological disturbed.

The second result shows there was no significant relationship between friend's social support and psychological disturbance β=.081, t=.784; p>.05. The result revealed that friends social support contribute 8.1% to psychological disturbance. This implies that friends social support does not reduce psychological disturbance among the elderly in Benue North-west senatorial zone.

The third result revealed a no significant relationship between significant others social support and psychological disturbance β=-.048, t =-334; p>.05. The result further shows that significant others social support contributes 4.8% to psychological disturbance. This implies that significant others social support does not reduce psychological disturbance among the elderly in Benue North-west senatorial zone.

The fourth result in Table 1 indicated that social support significantly predicted psychological disturbance among the elderly in Benue North-west senatorial zone R = .309, R^2 = .095, F (3,101) = 3.543; p<.05. The result further revealed that all the dimensions (family, friends and significant others) of social support accounted for 9.5% variance to

reduce psychological disturbance. This implies that social support reduces psychological disturbance among elderly people in Benue North-West Senatorial Zone.

DISCUSSION

The study examined social support and psychological disturbance among elderly people in the North- West senatorial zone, with findings discussed in relation to the stated hypotheses. The hypotheses that social support and its dimensions significantly predict psychological disturbance was partly confirmed. Results suggest that social support influences psychological disturbance, though the roles of friends and significant others differ. This aligns with recent evidence showing that reduced social support is strongly associated with depression and diminished quality of life among Nigerian older adults (Akosile et al., 2024). Similarly, Agu et al. (2025) highlight that loneliness and social isolation exacerbate psychological distress, underscoring the importance of family support in enhancing well- being. Unlike earlier findings that emphasized instrumental support as a predictor of distress, current results emphasize family support as a protective factor, reinforcing the need for targeted interventions to strengthen familial and community ties among the elderly in Nigeria.

Scholars continues to demonstrate the protective role of social support in reducing psychological disturbance among older adults. The current study's findings confirm that family support is particularly vital in enhancing psychological well- being and mitigating distress. Upasen et al. (2024) observed that resilience combined with strong social support significantly improved mental health outcomes among community- dwelling older adults. Similarly, Dong et al. (2024) emphasized that informal social support fosters active aging and reduces psychological distress, highlighting the indispensable role of family and close relationships. These findings align with the present study, reinforcing that unit family support should be considered a critical protective factor for elderly populations. Strengthening familial and community networks is therefore essential to reduce psychological disturbance and promote healthier aging trajectories.

Studies affirm that social support plays a crucial role in reducing psychological disturbance among older adults and serves as a foundation for effective interventions. The current study's findings align with this evidence, emphasizing the importance of family, friends, and significant others in sustaining psychological well- being. For example, Oyewo (2025) found that social support and happiness moderated depressive symptoms among elderly men and women, highlighting its protective role. Similarly, Velayudhan (2025) stressed that social determinants, including social support, are vital in safeguarding mental health in older populations. These findings, though conducted in different geographical contexts, reinforce the global consensus that social support is a universal protective factor. Thus, strengthening family and community networks can be practically applied to reduce psychological distress and enhance mental health among elderly populations worldwide.

Implications

i. Family support serves as a culturally sensitive form of psychological care for the elderly, delivered through therapeutic communication. It reduces psychological disturbance, enabling older adults to function optimally. This highlights the importance of prioritizing family-centered interventions to strengthen resilience and promote mental well-being in aging populations.

ii. Social support aligns with interpersonal theory, emphasizing tolerance, belongingness, and meaningful interaction among the elderly. By fostering strong family ties, older adults avoid perceiving the world as unjust or malevolent. This reduces psychological distress, enhances their sense of security, and sustains their contribution to societal development.

Limitations

The data collected was in form of self-report and was distributed to two local government areas in the Benue North-West Senatorial Zone. Further studies should consider the other local government areas. Also, the study was limited to social support (family, friends & significant others) and psychological disturbance. Further research should investigate the role of emotion regulation while considering loneliness and psychological distress.

Conclusion

The study concludes that family support plays a crucial role in reducing psychological disturbance among the elderly. Unlike support from friends or significant others, which showed no significant impact, family support emerged as the most influential determinant of psychological disturbance. This finding highlights the importance of strong familial bonds and consistent emotional backing from family members in promoting mental stability

and resilience among older adults. It affirms that interventions aimed at improving mental health of the elderly should prioritize strengthening family relationships, as they provide the most effective buffer against psychological distress in aging populations.

Recommendations

Based on the findings of the study, the following recommendations were made:

Measures should be put in place by the Government through NGOs on providing social support to the elderly in Benue State hence the researchers established a significant role of social support on psychological disturbance. Also, Clinical psychologists, social workers and care givers should consider family support as an intervention plan to help manage psychological distress issues among Senior Citizens. This is true because the researcher revolved that family support reduces psychological distress among the elderly.

For policy makers, the Government should establish the elderly peopled home where they will reside with their family members. It is feasible, practicable and workable solutions to reducing the associated challenges with psychological disturbance among the elderly in line with the global best practices.

Psychological disturbance is a global public health challenge associated with terminal illness, high mortality rate, increased mental health challenges and cardiovascular illness. Meanwhile, social support is an important protective factor for the elderly in order to understand, strategically and live optimally while contributing to the societal development. Therefore, providing social support (family support) care is the culturally sensitive provision of psychological care through therapeutic communication. This implies that social support reduces elderly people psychological disturbance which enable them to function optimally which support the interpersonal theory explaining the importance of interaction (social support) among elderly and the need for interpersonal tolerance and belongingness among older people to their loved ones in the society so that they will not perceive the world as malevolent and unjust in their lives and become psychologically disturbed.

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