

## Effect of counselling on psycho-social adjustment of aged people in Makurdi metropolis

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### Abstract

This paper examined the effect of counselling on psycho-social adjustment of aged people in Makurdi Metropolis. The study employed a quasi-experimental design based on non-randomized control group pre-test, post-test design. A sample of 30 aged people was sampled. Purposive sampling technique was employed to sample aged people (respondents). The instrument used for data collection was Aged People Psycho-Social Adjustment Questionnaire (CAPPSSA) comprise of Anxiety and self-acceptance scales. The data was analyzed using descriptive statistics of mean and standard deviation to answer the research questions. ANCOVA was used to test the hypotheses at .05 level of significance. The findings revealed that counselling has significant effect on adjustment to anxiety among the aged people. This implies that there is a significant difference in mean adjustment scores on anxiety between aged people exposed to counselling and those that are not. The study also found that counselling has significant effect on adjustment to self-acceptance among aged people. This implies that there is a significant difference in mean adjustment scores on self-acceptance between aged people exposed to counselling and those that are not. It was therefore, recommended that government and Non-Government Organizations (NGOs) should work together in making provisions such as aged people home with counselling unit equipped with profession in order to support the aged to properly adjust to psychology disorders such as anxiety among others. Philanthropist and well-wishers should endeavor to organize service of social workers to assist the aged to cope with life demands and accept their self for better sustenance.

**Keywords:** Counselling, psycho-social adjustment, aged people, anxiety and self-acceptance

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### Introduction

Aging is characterized by loss of independence, emotional stress and physical problems which could lead to problems of psycho-social adjustment. The researcher have seen the aged or elderly in a miserable, unhappy, dejected and some in sad mood. Could it be that this class of people does not benefit from the advancements in disease management and other policies that can alleviate their challenges? Aged persons in Nigeria face multiple challenges in maintaining their psychosocial health status (Animasahun & Chapman, 2017). The authors revealed that, challenges as changes in family dynamics, increased demand for healthcare services, increased economic stress, and decreased functional independence. It has been observed that, the aged has been stressed due to lack of adequate funds to take care of basic needs. In Nigeria, elderly persons, who have retired from the economic productive phase, are most vulnerable to

experiencing economic hardship (Oladeji, 2011). This implies that elderly people are usually faced to cope with the paradox of dwindling financial resources, increased health challenges and a geometric rise in medical expenses.

It is estimated that 20% of aged people experience some type of mental health concern (American Association of Geriatric Psychiatry, 2018). The most common conditions include anxiety, severe cognitive impairment, and mood disorders (such as depression or bipolar disorder). Mental health issues are often implicated as a factor in cases of suicide. Aging is characterized by loss of independence, emotional stress and physical problems which could lead to problems of psycho-social adjustment. This clearly shows that psycho-social adjustment among the aged people is questionable. Adjustment means reaction to the demands and pressures of social environment imposed upon an individual. It is an active, creative effort to live effectively. Alao (2014) defined adjustment as a process of altering behaviour or affective response so as to reach a harmonious relationship with a new or challenging environment, situation or person. Psychosocial adjustment or adaptation refers to people's capacity to adapt to the environment, which implies that the individual has sufficient mechanisms to feel good, integrate, respond adequately to the demands of the environment, and achieve his or her objectives (Madariaga et al., 2014). As used in this study, psycho social adjustment encompasses both psychological and social adjustment which psychologically could be seen in areas of anxiety and depression while social adjustment is observed in the areas of interpersonal relationship and self-acceptance.

*Anxiety* is a feeling of unease, such as worry or fear that can be mild or severe. Anxiety is a physiological and psychological state in which a person experiences high levels of arousal in the brain and body (Stoklosa, Patterso, Rosielle, & Arnold, 2011). It is a common human reaction to fear. This fear can be rational or irrational; it can also be a fear of current or future threats to oneself. Anxiety is one of the leading mental health disorders diagnosed in adults today (Muris & Broeren, 2009). Late-life anxiety is a significant public health burden. Epidemiologic data suggest that approximately one in ten older adults has an anxiety disorder that can lead to years of suffering (Schuurmans et al., 2005). Millions more struggle with anxiety symptoms. Demir and Yildirim (2017) found that the art therapy program in young adults had a significant positive effect on mental disorders as well as anxiety and depression levels. Another experimental study investigated the effect of mindfulness-based cognitive therapy Program on anxiety levels of university students. The results of the study showed that the applied therapy model significantly reduces the anxiety levels of university students (Demir & Yildirim, 2017; Demir, 2017). Similarly, Ozgul, Ozlem, Arzu, Neslihan and Ebru (2013) studied the effect of personal counselling on anxiety, depression, quality of life and satisfaction in patients. As a result of all follow-ups, the anxiety and depression score averages of the experimental group were determined to be lower compared to that of the control group. It was determined that the experimental group had a higher score average of life quality compared to the control group except for the postoperative period. It was determined that the personal consultancy being conducted by the same nurse throughout the diagnosis and treatment process decreased the risk of anxiety and depression and increased the life quality of patients with breast cancer. Similarly, Olufunmilayo (2014) studied counselling for positive ageing: an exploratory study of selected elderly women in Ondo State, Nigeria. The results of the cross-tabulation showed that ageing was perceived to be associated with negative consequences such as degenerating diseases. Majority of the participants indicated that counselling could be an important tool for shaping people's attitude towards ageing and old people. They also agreed that Old People's Home may not enhance positive ageing. Quality social interaction and regular medical check-ups were regarded by majority of the respondents as ways of enhancing positive ageing.

Self-acceptance is defined by Gregg (2014) in human psychology as a person's assent to the reality of a situation, recognizing a process or condition (often a negative or uncomfortable situation) without attempting to change it or protest it. He also asserted that, the perception people have about their past or future is related to the perception of their reality. The author further argues that people have a tendency to maintain a positive self-evaluation by distancing themselves from their negative self and paying more attention to their positive one. Self-acceptance is a level of individual awareness about personal characteristics and the willingness to live with such conditions (Hurlock, 2004). Individuals with good self-acceptance feel that certain characteristics possessed are inseparable parts of themselves, which subsequently grow as gifts. Such individuals feel everything they have is something pleasant, so that they have desire to continue to enjoy life. In addition, they can gracefully accept any changes related to the

aging process. The elderly period is characterized by changes experienced by the elderly, including the growth of gray hair, skin begins to wrinkle, weight loss, the date of the teeth so that it has difficulty eating. In addition, there are also changes that affect the psychological life of the elderly, such as feelings of exclusion, no longer needed, inhumanity to accept new reality and changes related to the interaction of the elderly with the social environment (Munandar, 2001) Changes that occur in elderly demand the elderly to be able to adapt themselves with the tasks following their development. One of the things that must be owned so that the elderly can adapt themselves is the ability to accept themselves and the environment well (Plexico, Erath, Shores, & Burrus, 2019). Lawan (2016) carried out a study on effects of cognitive restructuring and social skills training counselling techniques on avoidant personality disorder among the aged in Kano Metropolis. The results indicated that cognitive restructuring Counselling Technique has effects in the reduction of avoidant personality disorder. Social skills training counselling techniques Counselling Technique has effects in the reduction of avoidant personality disorder. There was no differential effect base on the technique between CR and SST. There was a differential effect base on gender in the CR treatment in favor of male while there is no differential effects base on gender in the SST.

Counselling has been identified as the focus or melting pot of the guidance programme. For Gibson (2018) *Counselling* is the process that occurs when a client and counsellor set aside time in order to explore difficulties which may include the stressful or emotional feelings of the client. Gibson further asserts that, it is the act of helping the client to see things more clearly, possibly from a different view-point. It is through counselling that all other guidance services are implanted. Counselling is an interpersonal relationship, or it is face to face interaction between a counsellor who is trained and a client which aims at assisting a person or group of persons to understand and resolve a specified developed need and adjustment problem. It is against this background that the study seeks to examine the effect of counselling on psycho-social adjustment of aged people in Makurdi Metropolis.

The purpose of this study is to examine the effect of counselling on psycho-social adjustment of aged people in Makurdi Metropolis. The specific objectives are to: (1) Ascertain the effect of counselling on anxiety of aged people expose to counselling and those that are not. (2) Find out the effect of counselling on self- acceptance of aged people expose to counselling and those that are not.

## Method

The study employed a quasi-experimental design based on non-randomized control group pre-test, post-test design. This design compares two groups, both group were measured once before the treatment and only the experimental group was treated, after treatment both the experimental and control group were measured. The control group was treated. A sample of 30 aged people was sampled. Purposive sampling technique was employed to sample aged people (respondents).

The instrument used for data collection was Aged People Psycho-Social Adjustment Questionnaire (CAPPSA) comprise of Anxiety and self-acceptance scales. The researcher administered the instrument (CAPPSA) to both the experimental and the control group in order to determine the equivalence between the two groups as pre-test. After which an interval of about forty-five minutes was given for all the respondents to fill, while the researcher retrieved the completed questionnaire. The experimental group was exposed to group counselling, to determine its efficacy on aged people psycho-social adjustment for 4 weeks before the post-test was administered. The treatment or the experimental group was given counselling services for four weeks based on the following topics: anxiety, depression, interpersonal relationship and self-acceptance. The researcher counselled the aged people in experimental on how to adjust the problems pertaining anxiety, self-esteem, depression, interpersonal relationship and self-acceptance after which the instrument was administered to both the experimental and control groups as post-test in order to ascertain the effect of treatment and data was collected for analysis. The data was analyzed using descriptive statistics of mean and standard deviation to answer the research questions. The ANCOVA was used to test the hypotheses at .05 level of significance to establish the effect of counselling on aged people psycho-social adjustment at control and experimental group.

## Results and Discussions

The result is present in line with research questions and hypotheses that guides the study: The effect of counselling on anxiety of aged people expose to counselling

Table 1 <Mean and Standard Deviation of the Effect of Counselling on Anxiety of Aged People Exposed to Counselling and Those that are Not>

Method	N	Pre-test		Post-test		Mean gain
		<i>x</i>	SD	<i>x</i>	SD	
Exposed to Counselling	17	5.76	2.11	11.35	2.42	5.59
Not Exposed to Counselling	13	5.77	1.83	8.69	2.21	2.92
Mean Difference						2.67

Table 1 shows the mean scores of the effect of counselling on anxiety of aged people exposed to counselling and those that are not. The table reveals that the mean anxiety scores of aged people expose to counselling was 5.76 with a standard deviation of 2.11 at pre-test, their post test score was 11.35 with a standard deviation of 2.42. While the mean anxiety scores of aged people not exposed to counselling was 5.77 with a standard deviation of 1.83 at pre-test. Their post test score was 8.69 with a standard deviation of 2.21. Table 1 further show that the mean gain of aged people exposed to counselling was 5.59 and those not exposed to counselling gain of 2.92. The mean difference between the anxiety scores of aged people exposed to counselling and those that were not was 2.67 in favour of aged people exposed to counselling.

### The effect of counselling on self-acceptance of aged people expose to counselling

Table 2 <Mean and Standard Deviation of the Effect of Counselling on Self-Acceptance of Aged People Exposed to Counselling and Those that are Not>

Method	N	Pre-test		Post-test		Mean gain
		<i>x</i>	SD	<i>x</i>	SD	
Exposed to Counselling	17	5.88	2.32	12.00	4.18	6.12
Not Exposed to Counselling	13	6.00	2.68	6.92	2.93	0.92
Mean Difference						5.20

Table 2 shows the mean scores of the effect of counselling on self-acceptance of aged people exposed to counselling and those that are not. The table reveals that the mean acceptance scores of aged people expose to counselling was 5.88 with a standard deviation of 2.32 at pre-test, their post test score was 12.00 with a standard deviation of 4.18. While the mean acceptance scores of aged people not exposed to counselling was 6.00 with a standard deviation of 2.68 at pre-test. Their post test score was 6.92 with a standard deviation of 2.93. Table 1 further show that the mean acceptance gain of aged people exposed to counselling was 6.12 and those not exposed to counselling gain of 0.92. The mean difference between the self-acceptance scores of aged people exposed to counselling and those that were not was 5.20 in favour of aged people exposed to counselling.

Table 3 <ANCOVA on Mean Anxiety Scores between Aged People Exposed to Counselling and Those that are Not>

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	60.508 <sup>a</sup>	2	30.254	5.661	.009	.295
Intercept	404.787	1	404.787	75.744	.000	.737
Pre..test	8.359	1	8.359	1.564	.222	.055
Group	52.100	1	52.100	9.749	.004	.265
Error	144.292	27	5.344			
Total	3326.000	30				

Corrected Total                      204.800                      29

a. R Squared = .295 (Adjusted R Squared = .243)

Table 3 reveals that  $F(1, 29) = 9.749$ ;  $p = 0.004 < 0.05$ . Since the p value (0.004) is less than the alpha level (0.05), the null hypothesis is not accepted. This means that counselling has significant effect on adjustment to anxiety among the aged people. This implies that there is a significant difference in mean adjustment scores on anxiety between aged people exposed to counselling and those that are not.

Hypotheses 2: There is no significant difference in mean adjustment scores on self-acceptance between age people exposed to counselling and those that are not.

Table 4: ANCOVA on Mean Anxiety Scores between Aged People Exposed to Counselling and those that are not

Source	Type III Sum of Squares	df	Mean Square	F	Sig.	Partial Eta Squared
Corrected Model	200.642 <sup>a</sup>	2	100.321	7.278	.003	.350
Intercept	265.574	1	265.574	19.267	.000	.416
Pretest	10.765	1	10.765	.781	.385	.028
Group	191.972	1	191.972	13.928	.001	.340
Error	372.158	27	13.784			
Total	3454.000	30				
Corrected Total	572.800	29				

a. R Squared = .350 (Adjusted R Squared = .302)

Table 4 reveals that  $F(1, 29) = 13.928$ ;  $p = 0.001 < 0.05$ . Since the p value (0.004) is less than the alpha level (0.05), the null hypothesis is not accepted. This means that counselling has significant effect on adjustment to self-acceptance among aged people. This implies that there is a significant difference in mean adjustment scores on self-acceptance between aged people exposed to counselling and those that are not.

**Based on the analyzed data the following findings are those discussed:**

The first finding revealed that counselling has significant effect on adjustment to anxiety among the aged people. This finding was confirmed with test of hypothesis 1 which revealed that there is a significant difference in mean adjustment scores on anxiety between aged people exposed to counselling and those that are not. This finding correspond with Demir and Yıldırım (2017) who found that the art therapy program in young adults had a significant positive effect on mental disorders as well as anxiety and depression levels. Also, mindfulness-based cognitive therapy Program significantly reduces the anxiety levels of university students. Similarly, Arzu, Neslihan and Ebru (2013) revealed that as a result of all follow-ups, the anxiety and depression score averages of the experimental group were determined to be lower compared to that of the control group. It was determined that the experimental group had a higher score average of life quality compared to the control group except for the postoperative period. It was determined that the personal consultancy being conducted by the same nurse throughout the diagnosis and treatment process decreased the risk of anxiety and depression and increased the life quality of patients with breast cancer. Similarly, Olufunmilayo (2014) results of the cross-tabulation showed that ageing was perceived to be associated with negative consequences such as degenerating diseases. Majority of the participants indicated that counselling could be an important tool for shaping people’s attitude towards ageing and old people.

The second finding revealed that counselling has significant effect on adjustment to self-acceptance among aged people. This finding was also confirmed with test of hypothesis 2 which revealed that there is a significant difference in mean adjustment scores on self-acceptance between aged people exposed to counselling and those that are not. This finding tallied with Lawan (2016) whose results indicated that cognitive restructuring Counselling Technique has effects in the reduction of avoidant

personality disorder. Social skills training counselling techniques Counselling Technique has effects in the reduction of avoidant personality disorder.

## Conclusions

Based on the finding of this study it is concluded that counselling have significant effect on psychosocial adjustment of aged people in the areas of anxiety and self-acceptance. The study have shown that aged people adjustment to anxiety and self-acceptance is enhanced by exposing them to counselling.

## Recommendations

The following recommendations are made in line with the study findings: 1) Government and Non-Government Organizations (NGOs) should work together in making provisions such as aged people home with counselling unit equipped with profession in order to support the aged to properly adjust to psychology disorders such as anxiety among others. 2) Philanthropist and well-wishers should endeavor to organize service of social workers to assist the aged to cope with life demands and accept their self for better sustenance.

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