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ASSESSING THE IMPACT OF COPING STRATEGIES ON THE HEALTH CONDITIONS OF RETIRED CIVIL SERVANTS IN KONSHISHA LOCAL GOVERNMENT AREA OF BENUE STATE

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ABSTRACT

This paper is an assessment of the impact of coping strategies on the health conditions of retired civil servants in Konshisha Local Government Area of Benue State. The aim was to find out whether the implementation of coping strategies can significantly moderate the effect of retirement on the health conditions of retired civil servants in the study area. Two research questions were raised and two hypotheses formulated for the study. Descriptive survey research design was used. The population for this study was 106 pensioners in Konshisha LGA of Benue State from where the sample of83 was selected through stratified sampling technique. A structured instrument tagged: Civil Servants Retirement and Health Implication Questionnaire (CISRAHIQ) was used. The research questions were analyzed by the use of descriptive statistics of mean score while the hypotheses were tested using Chi—Square test statistics. The study found out that coping strategies do not significantly moderate the effect of retirement on health conditions of retired civil servants in Konshisha Local Government Area of Benue State implying that coping strategies were either absent or poorly implemented for retirees in the study area. The study, therefore, recommended among other things that retired civil servants in Konshisha Local Government Area of Benue State should be trained to acquire relevant skills and given financial support to improve their socio-economic status.

Keywords: Impact, Coping Strategies, Retirement, Health Conditions, Retired Civil Servants.

1. Background of the Study

Retirement is a major life transition with profound implications for health globally. The term retirement generally, refers to voluntary withdrawal from full-time employment or primary career (Sachdev, 2021) enabled by accumulated resources, marking a shift to a new life stage focused on personal fulfillment. There are cross-country differences of retirement age: in Canada, the United States and Australia, the stipulated retirement age is 65 years, in India it is 60 years and 62 years in the France while the retirement age is 56 years in Malaysia. Across the African continent, statistics show that the retirement age in Algeria, Cameroon and Nigeria is 60 years. However, whereas the mandatory retirement age is 60 years for civil servants, military and police officers or thirty five years of pensionable service, whichever one

come first, the mandatory retirement age of academic staff in the professorial cadre is 70 years (Olurankinse&Adetula, 2020).

The potential benefits of retirement include reduced work-related stress, increased leisure time for healthy activities (exercise, hobbies), and escape from hazardous occupations can lead to initial improvements in mental well-being and certain physical health markers for some. Yet there are associated risks factors. According to Agbe (2020) significant body of evidence however, links retirement to increased risk of cardiovascular disease, functional decline, mobility limitations, and accelerated onset of chronic conditions. According to World Health Organization (2025), about 80% of retired persons have two or more chronic illnesses. Studies from Westerlund et al.(2009) and Insler (2014) suggest that retirement can lead to a 5-10% decline in physical health within the first few years. Reduced physical activity and changes in daily structure are key contributors. Statistics show that in the United States, 95% of retired persons have suffered from at least one chronic illness which includes hypertension (58.63%), high cholesterol (47.51%), obesity (41%), arthritis (31.44%)), kidney disease (30%), health diseases (29.34%) and diabetes (26.29%). Similarly, 80% of retired persons suffer from these illnesses in France, while 85% of retired persons suffer from the illnesses in United Kingdom. In Brazil, a study of civil servants found that retirees reported higher life satisfaction than active employees, especially those who fully withdrew from work (Anushree, 2020). However, retirees who continued working - often for financial reasons - had lower satisfaction.

Statistics from World Health Organization (2024) reveal that in Africa, 85% of retired persons suffer from the illnesses in South Africa, 70.72% in Ghana, 68.70 in Kenya, 48% in Egypt, 68.70 in Togo and 70.75% in Cameroun. According to Faronbi, Ajadi and Gobens (2020), a Ghanaian study on pensioners showed that many lived less than eight years post-retirement, with longevity influenced by salary, service years, gender, and age—indicating socio-economic determinants in post-retirement health. In contrast, .Ethiopian retirees not engaged in post-retirement work were more prone to depression and lower life. Coping strategies could have a positive impact on the health conditions of retirees. Agbo (2025) opined that coping strategies such as social support from friends, family and support groups; engagement in leisure activities such as travel, exercise and indulgence in inexpensive hobbies; the application of cognitive reappraisal such as reframing negative thoughts and placing premium on positivity instead of negativity; adoption of emotional-focused coping such as relaxation techniques, stress management and deep breathing can positively impact on the health conditions of retirees.

In Nigeria, while the Contributory Pension Scheme (CPS) established in 2004 improved upon the unsustainable Defined Benefits Scheme, challenges persist as significant portions of the workforce, especially in the informal sector, remain uncovered. Even within the formal public sector, implementation issues exist. PENCOM Q4 2023 reports only about 9.9 million RSA registrations out of a much larger workforce, with only about 2.5 million being active contributors. Consequently, study findings suggest invaluable lessons for Nigeria: retirees with better financial stability and social engagement fare significantly better in health and well-being. High inflation (22.41% as at May 2024 - NBS), stagnant wages, and widespread poverty make financial security a paramount concern for retirees. Pension income often fails

to keep pace with living costs (Devins, Blinik & Hutchinson, 2018, Baluran, 2023,Megari, 2023).

More worrisome is the fact that Nigeria's health system is underfunded and overburdened (WHO estimates doctor-patient ratio ~1:5000, far below recommended 1:600). Out-of-pocket expenditures dominate healthcare financing (>70%), making access to quality care particularly difficult for retirees on fixed, often meager incomes. The prevalence of Non-Communicable Diseases (NCDs) like hypertension and diabetes is rising among the retirees (Fullman, Yearwood, Abay, Abbafati, Abd-Allah, Abdela, Aboyans, et al. 2018, Gwaison, &Maimako,2020; Onyilo &Amonjenu, 2021, Megari, 2023; Obadeji, 2024; World Health Organization, 2024).

According to the 2023 WHO country profile, chronic diseases accounted for an estimated 29 per cent of all retired persons deaths in Nigeria with cardiovascular diseases as the primary cause of chronic diseases-related death (11%) followed by cancers (4%), chronic respiratory diseases (2%) and diabetes (1%) (World Health Organization, 2024). Indeed, the chronically ill patients are facing major struggles such as higher expenditures, social isolation and loneliness, disabilities, fatigue, pain/discomfort, anger, hopelessness, frustration, anxiety and depression (Agbo, 2025).

Benue State shares the national challenges but with specific local dimensions: the heavy reliance of the state on agriculture offers limited formal employment and income security. However, civil service jobs are highly valued for their relative stability and pension prospects. The state has faced well-documented challenges in implementing the CPS smoothly for its civil servants. Reports of delays in pension payments, gratuity backlogs, and verification issues have affected retirees, causing protests by pensioner groups like the Association of Retired Permanent Secretaries (ARPS) Benue Chapter. Consequently, Benue State University Teaching Hospital (BSUTH) has offered multi-specialty care, and has begun providing free healthcare to pensioners since January 2025, easing post-retirement health burdens. The location of this intervention programme however is far out of reach of many retirees from the area of study constituting an obstacle towards their utilization of such intervention programmes.

2. Statement of the Problem

It is presumed that retirement should be a transitional stage from public to private services with attendant gains and profit. Nevertheless, observation by the researcher has shown that retirees face various challenges like declining health, persistent financial instability and or insecurity, social isolation and the emergence of degenerative ailments which invariably affects their entire lives. These challenges can exacerbate the negative impact of retirement on social connection and the ability to self-sustenance and reliance. The researcher presumes that the utilization of coping strategies could play crucially significant roles in mitigating these challenges faced by retirees upon retirement. Unfortunately, personal observation by the researcher reveals that most retirees lack adequate knowledge and understanding about the utilization of coping strategies for improving health outcomes among retirees.

Despite the efforts of BSUTH, rural areas like Konshisha are underserved as tertiary care is concentrated in Makurdi. Hence, Konshisha Local Government Area faces acute shortage of

doctors, nurses, and specialists, especially in geriatric care. Doctor-patient ratio is estimated to be significantly worse than the national average (~1:13,000) based on WDI approximations and state population). Thus, having considered retirement as constituting a health challenge to the people of Konshisha Local Government Area, the research deem it necessary to investigate the implication for retired civil servants and their coping strategies in the study area. The problem of this study in a question form is: Can coping strategies moderate the effect of retirement on the health conditions of retired civil servants in Konshisha Local Government Area?

3. Research Questions

The following research questions were raised for this study:

1. To what extent does retirement has health implications on retired civil servants in Konshisha Local Government Area of Benue State?
2. To what extent can coping strategies mitigate the impact of retirement on the health conditions of retirees in Konshisha Local Government Area of Benue State?

4. Research Hypotheses

The following hypotheses were tested at 0.05 alpha level.

i. Retirement will not have significant health implications on retired civil servants in Konshisha Local Government Area of Benue State

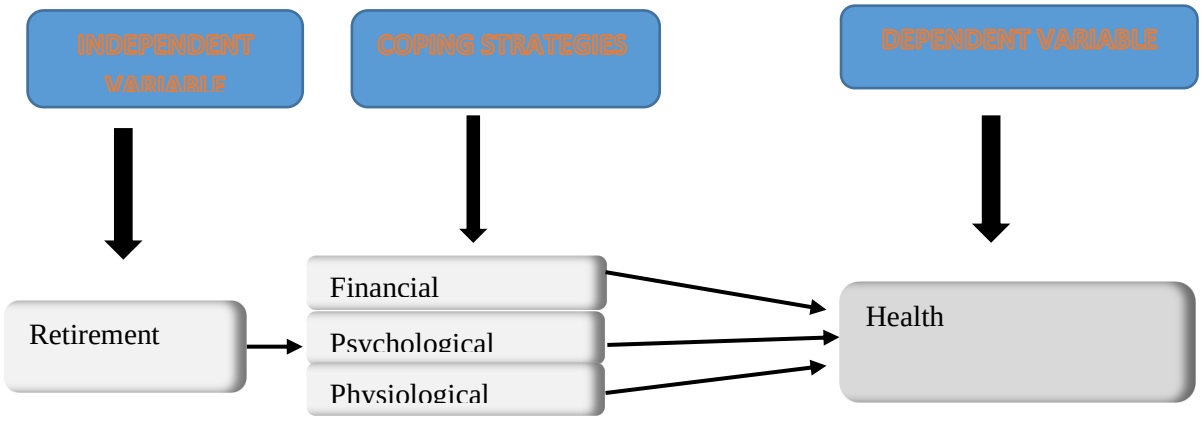
ii. Coping strategies will not significantly mitigate the impact of retirement on the health conditions of retired civil servants in Konshisha Local Government Area of Benue State.

5. REVIEW OF RELATED LITERATURE

This section is a review of literature that is related to the variables of the study. This is carried out under conceptual framework, theoretical framework and empirical studies.

5.i Conceptual Framework

The conceptual framework is depicted in Figure.1:



Retirement

In the past retirement generally meant the one-off cessation of paid work and the beginning of a permanent work-free state and receipt of a pension. Socio-demographic change (population aging) and changes in the sphere of work have a radical impact on the nature of this process. The financial risks of retirement are being shifted on to employees, and the transition to retirement is becoming more diverse and more complex, with people

increasingly remaining in employment even after reaching the statutory retirement age. These changes present challenges for psychological research on retirement (Richardson, 2015).

The term "retirement" generally, refers to voluntary withdrawal from full-time employment or primary career (Sachdev, 2021) enabled by accumulated resources, marking a shift to a new life stage focused on personal fulfillment. Retirement could also be conceptualized as a life stage or planned transition in which an individual permanently leaves the workforce, typically after reaching a certain age or financial stability (Richardson, 2015).. It is often associated with the end of a formal employment and the beginning of a new phase focused on rest, personal pursuits or alternative contributions to society (Sachdev, 2021).

5.ii Health Condition

The notions that disease was a common occurrence, that a person and their environment should coexist peacefully, and that the soul and body were one formed the basis of ancient Greece's view of health. Donev (2020) asserts that the concepts of ancient Indian and Chinese medicine were comparable. The fifth-century BC Pindar defined health as "harmonious functioning of the organs," emphasizing the body's whole operation, the physical component of well-being, and the experience of comfort and painlessness. His idea is still relevant today as a prerequisite for overall health and wellbeing (Antonovsky, 2017).

In his "Dialogues," Plato (429–347 BC) noted that a perfect human society could be attained by balancing the interests of the individual and the community. He also noted that if people established internal harmony as well as harmony with the physical and social environment, they could achieve the ancient Greek philosophical ideal of "a healthy mind in a healthy body." Man is a social creature by nature, according to Aristotle's teachings; he tends to live in communities and has an obligation to uphold moral principles and ethical laws. In order for society to operate harmoniously and maintain the health of its members, Aristotle highlighted the need to regulate social ties (Antonovsky, 2017).

Democritus made the connection between conduct and health, wondering why people prayed to God for health when it was basically within their own power. Hippocrates elucidated health in relation to lifestyle and environmental variables. Hippocrates developed the idea of "positive health," which was based on nutrition, exercise, and the fundamental human constitution—what we now refer to as genetics. He believed that a healthy diet and regular exercise were crucial for good health, and that the changing of the seasons had a significant impact on the body and mind, leading to many prevalent illnesses in the summer (digestive tract diseases) and winter (respiratory tract disorders) (Donev, 2020).

According to WHO (2022), health is more than just the absence of disease or impairment; it is a state of complete physical, mental, and social well-being. Everyone has the basic right to the best possible health, regardless of their race, religion, political views, financial situation, or social standing. Human health, which extends beyond the absence of disease or impairment, is a state of complete physical, mental, and social well-being. It may be measured by examining sickness incidence and prevalence, age-specific death rates, and life expectancy (Semieniuk et al., 2021).

Physical, mental, social, and environmental health are all aspects of human health that are vital to preserving overall well-being (Heine, Norregaard& Parry, 2012; Dell'Ariccia, Ferreira, Jenkinson, Laeven, Martin, Minoiu& Popov, 2018; Hepburn, Callaghan, Stern, Stiglit & Zenghelis, 2020).

5.iii Theoretical Framework

This study is anchored on Eager's theory of international norm construction propounded in 2004 and Nathanson's construction of health risk theory propounded in 1996.

5.iiia Grossman's Health Production Theory

Grossman's Health Production Theory in the year 1972 posited that individuals invest in their health similar to how they invest in other capital, like education, to improve life expectancy and quality. According to Grossman, (1972), health can be considered both a consumption good, contributing directly to individual well-being, and an investment good, improving one's productivity and lifespan. Grossman's model integrates various factors that influence health, such as medical care, lifestyle choices, and socioeconomic status, offering a holistic view of health determinants. The theory applies economic principles to health, explaining how individuals make decisions about health investments and consumption, thus linking health outcomes with economic behaviour. It highlighted the role of individual choices and investments in health, emphasizing the importance of preventive care and healthy behaviours.

Critics to this theory assumed that individuals have perfect information and rational behavior, which may not accurately reflect real-world scenarios where individuals have limited information and may not always act rationally. Furthermore, it may underemphasize the role of environmental and social determinants of health, such as public health infrastructure, social support, and environmental hazards. Even as the original model is relatively static and does not fully account for the dynamic nature of health over a person's life course. The theory might oversimplify the complexity of healthcare systems and the multifaceted interactions between different components of healthcare and public health policies.

The theory is related to the present study because it underscores the fact that health status inNigeria could be a function of some disposing factors, including retirement from service. The theory could therefore be modified to include retirement, coping strategies and health status in Nigeria.

5.iiib Nathanson's Construction of Health Risk Theory (1996)

Construction of health risk theory was propounded by Constance Nathanson in 1996. The main thrust of this theory is that effective policies do not just happen, they occur as a result of active social and political processes. Three hypotheses are vital to the success or failure of public policies towards reducing mortality and disease prevention. These hypotheses are highlighted as follows:

1. Public health policies that lead to mortality decline are likely to be implemented by a strong and highly centralized government which focuses on the welfare of its citizens;
2. Effective public health policies that lead to decrease in morality are likely to be adopted as response to active grassroots involvement from social and/or political movements;

3. The implementation of effective public health policies involve the culturally credible construction of risk.

The last two hypotheses are the most relevant to this study. Both of these hypotheses consist of factors also included in Eager's theory, that is, the importance of social movements and the construction of risk.

The relevance of this theory to the present study cannot be over-emphasized. The implication of the theory to the present study is that the coping strategies (public health policies) for retired workers that lead to mortality decline are likely to be implemented by a strong and highly centralized government which focuses on the welfare of its citizens. Without these in place, retired civil servants are likely to be affected declining health which can lead to death.

5.4 Empirical Studies

Previous studies related to the effect of retirement on health are reviewed in this section. Viertio, kiviruusu and suvisaari (2021) conducted a study on factors contributing to psychological distress in the working population of retired civil servants with a special reference to gender differences using questionnaire data from the nationally representative Finish Regional Health and Well-being study. Psychological distress was measured using the Mental Health Inventory. The study found that women reported more psychological distress than men. Loneliness was associated with the largest risk of psychological distress among retired civil servants.

The study of Viertio, kiviruusu and suvisaari (2021) has close nexus with the present study since both studies are concerned the health of retired civil servants. However, while the former was a gender study, the present study examines the effect of retirement on the health of retired civil servants.

Researching on the retirement challenges and adjustment strategies of retired Local Government Civil Servants in Benue State, Nigeria, Onyilo and Amonjenu (2021)formulated two research questions and two hypotheses. The survey research design was adopted for the study. The population was the entire 5678 retired Local Government Civil Servants from Benue state Local Government Service Commission. Purposive sampling technique was used to select 384 retirees as respondents for the study while simple random sampling was used to select the Local Government Area for the study. The researchers used an instrument titled: Retirement Challenges and Adjustment Strategies Questionnaire (RCASQ) for the study. Data were collected through the administration of questionnaire. The demographic data and research questions were analyzed by the use of descriptive statistics of mean score. The hypotheses were tested by the use of t-test statistics. The results indicated that retired local government civil servants experience challenges in socio-economic, physical and psychological areas. It was also revealed that the adjustment strategies do not significantly differ in terms of gender.

A study was conducted on the association between sleep quality and quality of life of retired civil servants in North Korea by Lee (2021) using cross-sectional research design. The EuroQol five –dimension index scores were adjusted for multiple confounding factors and compared between the good and poor sleep quality groups. Logistic Regression analysis was used to

identify determinants of the lowest quartile of Qol. Results\ showed that poor sleep quality was associated with impaired Qol of retired civil servants, particularly if some or severe problems with anxiety/depression are present.

Lee's (2021) study is relevant to the present study since both studies are concerned with the quality of health of retired civil servants. However, while sleep quality features among others, as an objective in the former study, the present study focuses of health status of retired civil servants. The present study has greater content scope than the former. Also, while the former was conducted in North-Korea, the present study will be domesticated in Nigeria.

Identifying key domains of health-related quality of life for retired civil servants with chronic obstructive pulmonary disease (COPD), Paap, Bode and Palen (2018) used twenty one (21) patients with COPD as study sample. During the interview, the patients were asked to select the domains most relevant to them and indicate in which way the selected domains impacted their lives. Both the answers to the open question, and the patients' statements motivating nomination of the domains were coded into themes. Results revealed that the most relevant domains of HrQoL for retired civil servants with COPD were physical health (fatigue and physical functioning) and social health (instrumental support, ability to participate in social roles and activities, companionship, and coping with COPD.

6. Research Method

Descriptive survey research design was used in this study. The research design is therefore considered appropriate for this study as it is intended to gain relevant knowledge and information of retired civil servants in Konshisha Local Government Area of Benue State of Nigeria (Bless &Higson-Smith, 2000).

The population for this study was 106 pensioners in Konshisha LGA of Benue State (Benue State Pension Commission, 2025) from where the sample of 83 was selected through stratified sampling technique. The sample was stratified into Federal, State and Local Government retirees. The sample was determined using Taro Yamane formula

7. Instrumentation

A validated research instrument tagged: Civil Servants Retirement and Health Implication Questionnaire (CISRAHIQ) was used. The maximum score allocated to each item in the questionnaire was 10 (that is the sum of 4, 3, 2 and 1 for the 4-point Likert-type scale used). The average obtainable score was 2.50 (that is 10 divided by 4 which represents the options of a 4-point likert-scale). The cut-off point for decision making was therefore the average obtainable score of 2.50. Thus, any item with score less than 2.50 was considered to have a very high influence on health while any item with score above 2.50 was considered to have a low influence on health in the study area.

The statistical techniques used in analyzing the data collected for this study were descriptive statistics of frequency distribution tables and histogram to describe the personal data of the respondents, and inferential statistics of the Chi-Square (χ^2) for goodness of fit to test the hypotheses at 0.05 level of significance. Chi-Square test was deemed fit for this study because according to Kwahar and Onov (2017) it tests effect or influence that border on opinions, perceptions and views.

8. Results and Discussion

The section dealt with the presentation, analysis and interpretation of data according to the research questions and hypotheses, as well as the discussion of findings.

8.1 Analysis of Research Questions

Research Question 1: To what extent does retirement has health implications on retired civil servants in Konshisha Local Government Area of Benue State?

Table 1: Respondents' responses on the perceived health implications of retirement on the retirees.

S/N0	Item	N	VHI	HI	LI	VLI	Mean	Decision
1	Social isolation	83	46	28	06	21	3.19	VHE
2	Loss of social status (independence)	83	38	28	9	8	3.61	VHE
3	Overdependence on assistance from family and friends	83	32	41	4	5	3.47	VHE
4	Increase degenerative ailments	83	48	31	04	00	3.19	VHE
5	Loss of financial stability	83	52	21	7	3	3.52	VHE

Table 1 shows majority of respondents agreed that retirement has very high influence (VHI) on the health conditions of retirees as all items had a mean above 2.50.

Research question 2: To what extent can coping strategies mitigate the impact of retirement on the health conditions of retirees in Konshisha Local Government Area of Benue State?

Table 2: Respondents' responses on the extent of coping strategies in mitigating the impact of retirement on the health conditions of retirees.

S/N0	Item	N	VHI	HI	LI	VLI	Mean	Decision
1	Could help reduce emotional stress	83	46	28	06	3	3.48	VHE
2	Coping will not affect self-esteem of retirees	83	39	23	19	2	3.52	VHE
3	Coping could reduce overdependence on assistance from friends	83	36	41	6	0	3.58	VHE
4	Increase the ability to manage degenerative ailments better	83	42	34	06	01	3.72	VHE
5	Coping will restore financial stability among retirees.	83	52	26	4	1	3.42	VHE

Table 2 shows majority of respondents agreed that coping strategies has very high influence (VHI) on mitigating the impact of retirement on the health conditions of retirees as all items had a mean above 2.50.

8.2 Test of Hypotheses

The hypotheses earlier stated are hereby, tested at 0.05 level of significance.

Hypothesis I: Retirement will not have significant health implications on retired civil servants in Konshisha Local Government Area of Benue State

Hypothesis 1 is hereby tested using Chi-Square Analysis:

Table 3: Summary of Chi-Square Analysis of Health Implications on Retired Civil Servants in Konshisha Local Government Area of Benue State

Responses	Observed	Expected	χ^2	P-value	df	@	Decision
Strongly Agree	42	20.75					
Agree	33	20.75					
Disagree	6	20.75	46.08	0.03	3	0.05	Rejected
Strongly Disagree	2	20.75					

(P-value=0.00; P=0.00>0.05; Ho rejected; Positive Influence).

The result of chi-square summary analysis presented in Table 3 shows that the value of Chi-square (χ^2) was 46.08 with a probability value of 0.03 which was less than the significance level of 0.05 (i.e. p<0.05). The null hypothesis which states that retirement will not have significant health implications on retired civil servants in Konshisha Local Government Area of Benue Stat**e** was therefore rejected and the conclusion drawn was that retirement will have significant health implications on retired civil servants in Konshisha Local Government Area of Benue Stat**e**.

Hypothesis 2: Coping strategies will not significantly affect the health status of retired civil servants in Konshisha Local Government Area of Benue State

Hypothesis 2 is hereby tested using Chi-Square Analysis:

Table 5: Summary of Chi-Square Analysis of Coping Strategies and the Health Status of Retired Civil Servants in Konshisha Local Government Area of Benue State

Responses	Observed	Expected	χ^2	P-value	df	@	Decision
Strongly Agree	11	20.75					
Agree	10	20.75					
Disagree	16	20.75	15.28	0.74	3	0.05	Accepted
Strongly Disagree	46	20.75					

(P-value=0.00; P=0.00>0.05; Ho rejected; Positive Influence).

The summary of chi-square result presented in Table 5 shows that the value of Chi-square (χ^2) was 15.28 with a probability value of 0.74 which was greater than the significance level of 0.05 (i.e. p>0.05). The null hypothesis which states that coping strategies will not significantly affect the health status of retired civil servants in Konshisha Local Government Area of Benue State was therefore retained and the conclusion drawn was that coping strategies have not impacted significantly on the health status of retired civil servants in Konshisha Local Government Area of Benue State.

8.3 Discussion of Findings

This study was set to find out the effect of retirement on the health of retired civil servants in Konshisha Local Government Area of Benue State. The study found out that retirement has significant effect on the health of retired civil servants in Konshisha Local Government Area of Benue State. Specifically, the study found out that retirement leads to social isolation, declined financial ability and emergence of degenerative diseases among others. This finding

agrees with Westerlund et al.(2019) who found serious health implications of retirement on the lives of the retirees. This implies that retired civil servants in Konshisha Local Government Area have more severe health issue than their serving counterparts.

The study found as well, that coping strategies could have impacted significantly on the health status of retired civil servants in Konshisha Local Government Area of Benue State. This finding agrees with Onu (2023) who found out that he utilization of coping strategies could play crucially significant roles in mitigating these challenges faced by retirees upon retirement.

9. Conclusion

Based on the findings of the study, the researcher concluded that retirement have significant negative health implications on retired civil servants while coping strategies have the capacity of mitigating the impact of retirement on the health status of retired civil servants in Konshisha Local Government Area of Benue State. Retirees should therefore be encouraged to seek or adopt coping strategies as an approach in mitigating the impact of retirement on their health conditions.

10. Recommendations

Based on the findings and conclusion of the study, the study recommended that:

1. Retired civil servants in Konshisha Local Government Area of Benue State should be trained to acquire relevant skills and given financial support to improve their socio-economic status.
2. Konshisha Local Government should, in conjunction with the Benue State Ministry of Health, organize workshop for retirees focusing psychological, social and financial coping strategies.

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