



PriHEMAC

Primary Healthcare and Health Management Centre

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Some Principles of Healthy Longevity for Promotion of Elderly Friendliness

by Dr. Martins O. Ogundeji



Essential Steps to Social Inclusion Creating a More Elderly Friendly Society

Caring for the Elderly with Dementia in Nigeria

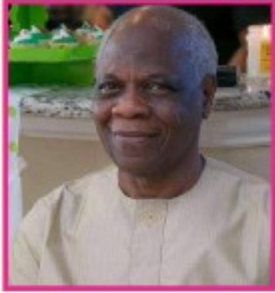
Intergenerational Attitude Towards the Elderly:

Their Past, Present and Future Role in Our Communities.

PriHEMAC
Reports
(2020/2021)



EXECUTIVE DIRECTOR *Profile*



**DR. MARTINS
OLUSOLA
OGUNDEJI**

Dr. Martins O. Ogundeji holds, among others, B.Sc. (Nsg) The University of Ibadan, (UI) 1969; M. Sc. (Community Mental Health), Master of Public Health (MPH) and Doctor Public Health (Dr.PH) all at Columbia University, New York, USA; 1974-1978.

He has served:

1. As Lecturer at School of Nursing, Wesley Guild Hospital, Ilesha, 1969 - 1970 and 1970 -1980 ABU, Zaria
2. As Federal Ministry of Health (FMOH) Principal Health Planning Officer between 1980 and 1998
3. Later as one of the FMOH 4 Zonal Coordinators and retired as a Director of National Primary Health Care Development Agency/Federal Ministry of Health (NPHCDA/FMOH) in 1998.

Between 1998 and 2009, he served as Part-time Lecturer for Post-graduate students of the Department of Epidemiology, University of Ibadan. Between 2001- 2018, he served as Part-time Lecturer for Post-graduate students at the Department of Nursing College of Medicine, University Of Ibadan, and from 2016 till date, Babcock University, Ilishan, Ogun State.

After retirement, he established in 1998, and remains till now, the Executive Director of Primary Health and Health Management Center (PriHEMAC) which has become a reputable Non-Governmental Organization (NGO) with CAC Registration No. IBZ 004797.

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Contents

Meet PriHEMAC	03
Five Steps for Faith-Based Organizations	04
Some Principles of Healthy Longevity for Promotion of Elderly Friendliness	05
Caring for the Elderly with Dementia in Nigeria	08
Essential Steps to Social Inclusion Creating a More Elderly Friendly Society	10
Intergenerational Attitude Towards the Elderly: Their Past, Present and Future Role in Our Communities.	11
PriHEMAC <i>Reports</i> (2020/2021)	13
HOW TO LEND A HELPING HAND TO THE ELDERLY	15

Meet PriHEMAC

PriHEMAC is a reputable NGO with CAC Registration No. IBZ 004797 in 1998.

The NGO has a Board of Trustees made up of reputable Health Professionals - Medical Doctors, Public Health Consultants, Nurses - Economists, Social Scientists, Legal Practitioners etc.

The main vision of PriHEMAC is to promote the health status and wellbeing of vulnerable members of the communities, particularly children, mothers and the elderly.

PriHEMAC has successfully carried out Local, State, National, and International Development Programs. Among many others, two of the remarkable programs PriHEMAC carried out with Development Partners include:

i) Situation Analysis Mission of PHC-TTP in UCH, Ibadan and Kaduna Polytechnic sponsored by Canadian International Development Agency (CIDA) Health Mission (June 10 – July 5, 2002); and

ii) Ibadan Maternal Morbidity Mortality Reduction Project (IMMREP) – a 5-year (2004-2008) project; and Improvement of Primary-Level Maternal Health Services in Ibadan (IPMat) – a 2-year (2009-2010) project sponsored by Physicians for Social Responsibility (PSR) of Finland.

Since 2014, PriHEMAC has embarked on improving the well-being of the Elderly by

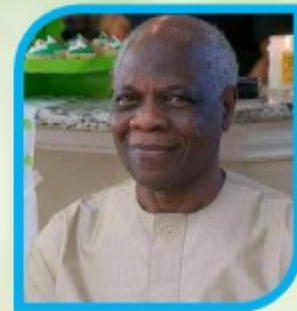
i) establishing a Training Institute for the training of PriHEMAC Elderly Caregivers and PriHEMAC Elderly Friendly Ambassadors (PEFAs) and

ii) Promoting Elderly Friendliness through empowered Stakeholders such as Churches/Mosques. These Churches and Mosques are being empowered to become Elderly Friendly Institutions. PriHEMAC has identified and assembled a group of Volunteers/Consultants known as 'Gallery of Experts' who assist in all training activities. Recently, PriHEMAC trained 25 PEFAs from 6 FBOs in Osun State. Other States that has been covered include Oyo, Ogun and Lagos State.

Among others, the Edition of this Magazine Features: 'Principles of Healthy Longevity by PriHEMAC Executive Director - Dr. Martins Ogundeji; some Papers written by, and Reports of the work of SUNY Students and PriHEMAC Staff.



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Five Steps for Faith-Based Organizations

1
 1. Equality
 Celebration
 by Lorie Shull
 from the Noun
 Project



2
 2. cheering
 by Creative
 Stall from
 www.nounpr
 oject.com

**5). Celebrating your Elderly Members
 at least once annually!**

**4). Arranging engagement of
 Caregivers to provide care for your
 needy Elderly Members.**

**3). Identifying and supporting the training of
 suitable persons as home/health Caregivers**

**2). Ensuring budgetary provisions
 for Elderly Friendly activities.**

**1). Having some trained PriHEMAC Elderly Friendly
 Ambassadors (PEFAs) who can represent their spiritual
 leaders to address the issues of Elderly members.**

Join us on making elderly care better for Nigeria!
 Contact us at info@prihemac.com to learn more on
 how to make a difference.
#BeElderlyFriendly

Some Principles of Healthy Longevity for Promotion of Elderly Friendliness

by Dr. Martins O. Ogundeji

Abstract

This paper briefly mentioned some truths about longevity, 2 major groups of principles or factors affecting longevity - genetics and lifestyles - some benefits of longevity. The focus of the paper is a list of identified principles of longevity as demonstrated by the common lifestyles of people living in the Blue Zones – referring to geographic areas - that contain extremely high rates of nonagenarians (90 years +) centenarians (100 years +) and even the super-centenarians, (those in ages 110+)

Introduction

The term “longevity” is usually used as synonymous with “life expectancy”. Among general truths about longevity are that individuals want to feel like they are 'thirty' even when they are 'eighty'; individuals want to have the wisdom of a grandparent without feeling like one; individuals' goal is not to get to 120 — unless those 120 years come with quality health!

In response to these realities, it is necessary for Elderly Friendly individuals to know that: i) the 2 major groups of principles or factors affecting life expectancy or longevity are genetics, gender and race; and lifestyle choices; ii) experts (4) say that our genes only account for about 20%-30% of our longevity, meaning that we can affect the majority of our aging -- about 70%-80% -- through our lifestyle (3)

Benefits of Longevity

There are innumerable benefits of longevity, including having an opportunity for their children to return the care they have received from parents, among others. Yet, in 2020, out of the 183 countries on the 'longevity' - World Life Expectancy List (5), Japan ranks first with 84.2years; Nigeria ranks 178, with 55.2 years! Lesotho with 52.9 years has the shortest. From these figures, it can be established that an average person lives 29 years longer in Japan

than an average Nigerian!

Many Bible passages also refer to benefits of longevity: 'Wisdom belongs to the aged, and understanding to the old' - Job 12:12; 'No longer will people be considered old at one hundred; only the cursed will die young - Isaiah 65:20; 'The fear of the Lord prolongs life, but the years of the wicked are cut short'- Proverbs 10:27.

Principles of longevity and learning Experiences

Generally, individuals can do little or nothing about genetics, race and gender factors. However, Elderly Friendly Individuals need to: know some of the features or characteristics of the lifestyle of people – those in their nineties (called nonagenarians); in their hundreds (called centenarians; the semi super-centenarians those in ages 105-109 years and the super-centenarians, those in ages 110+) (2); and ii) learn some lessons from the identified features of lifestyles that Expertise does not count – in His presence

promote healthy longevity as discussed briefly below.

i) Engage in moderate, regular physical activities:

One of the common features of the five Blue Zones (1) is that they all have 'fairly hilly terrain' which makes walking and other physical activities around these hills a compelling part of their everyday living. By so doing, muscle-strengthening activities become daily routine, whether one is working or playing.

Learning experiences on this principle imply that individuals could:

Consciously inconvenience oneself by getting rid of handy helpers like the TV remote, the power lawn mower; learn to do things the old-fashioned way.

Practice more activities at work including pacing during phone calls, walking to a colleague's office rather than emailing them and conduct meetings during walks.

ii) Identify Life Purpose and Take Time to Develop the Big Picture:

Many centenarians credit their longevity to having a sense of purpose or a defined goal like having a family to spend time with, a job to enjoy, a hobby one can't get enough of or a

fulfilling mission, like volunteering.

Learning experiences on this principle imply that individuals could:

- Try writing down a list of things one is especially passionate about, and see the what picture that emerges.

- Sharing with one's friends and family members what one feels about one's life's goals are; telling such goals aloud cements them in one's mind.

iii) Take Time to Relieve Stress:

Stress may develop into serious illnesses and make us have unhealthy habits. It should be known that the art of slowing down life's pace, "ties together so many of the other lessons such as eating right, appreciating friends, finding time for spirituality, making family a priority."

Learning experiences on this principle imply that individuals could:

Reduce the amount of time one spends watching TV or surfing the Internet.

Get the right amount of sleep – about 6-8 hours daily (not too little or too much), eat right and learn to say "no"

iv) Cultivate Moderate Caloric Intake:

Caloric restriction and periodic fasting can

significantly reduce risk factors for certain diseases and prolong healthy life. It is always beneficial to painlessly cut calories by 20 percent: one could stop eating when one's stomach is about 80% full; one could learn how to consume less at each meal.

Learning experiences on this principle imply that individuals could:

- Use smaller plates and bowls to serve food in; the bigger the dish, the more we fill it (and then think we have to eat it all).

- Eat more slowly to give your body time to recognize the signs that you're no longer feeling hungry.

v) Make family engagement in life a priority.

The centenarians in the five Blue Zones are completely devoted to their families. In return, their children and grandchildren have

a strong
familial
duty
to



take care of their elders as they age. They found that “elders who live with their children are less susceptible to disease, eat healthier diets, have a much lower incidence of serious accidents,”

Learning experiences on this principle imply that individuals could:

- Consider how home contributes to, or detracts from, family time, at least, establish an area where everyone can gather at least once per day.
- Appreciate the importance of rituals and traditions especially for children; at least, choose one night per week when everyone can be there for dinner, and make it a priority.
- Designate electronics-free zones or times to encourage conversations.

vi) Engagement in social life.

Buettner (op cit.) observed that the



centenarians in the five Blue Zones surround themselves with friends and family members who share their values; this value sharing is perhaps the most powerful thing that can change lifestyle for the better.

Learning experiences on this principle imply that individuals/communities could:

- built closely clustered houses, a church, schools, parks, family shops, bakeries, restaurants and more
- set up spiritual societies and organized festivals

vii) Engagement in Spirituality or Religious Community: The simple act of worship - being Muslim, Christian, Jewish, Buddhist or Hindu - is one of those subtly powerful habits that seems to promote longevity. people who belong to a spiritual community are more likely to engage in healthy behaviors, have a positive sense of well-being and are able to “relinquish the stresses of everyday life to a higher power”.

Learning experiences on this principle imply that individuals could:

- Belong to a religious community, if you are

not already a member.

- Become an active member of the religious community by volunteering or joining the choir.

Conclusion

In conclusion, Elderly Friendly individuals, at any age, need to appreciate the benefits of and factors affecting healthy living and ageing. They should accept responsibility that although there is little or nothing they can do about their genes, gender and race, they should know, learn from and practice the identified consistent characteristic lifestyles of healthy centenarians and the semi-supercentenarians.

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Caring for the Elderly with Dementia in Nigeria

By Megan Ramirez, SUNY COIL Global Commons

Description of dementia

Dementia is a syndrome that involves a slow progression of cognitive decline that is often synonymous within aging populations, accounting for about 91% of all cases.

Key signs of dementia

Key signs of dementia are considerable change in cognitive function such as the inability to differentiate between what has happened and what has not happened, getting lost in familiar places, and a heavy lack of emotional control.

Types of dementia

Currently, it is recognized that there are four major types of dementia that account for 90% of all dementia cases. Of all the common forms of dementia, Alzheimer's is the most common of all cases worldwide and in Nigeria. (2, 4).

How to Recognize The Four Most Common Types of Dementia Alzheimer's:

The elderly will have insidious memory loss, lose their way, have difficulty speaking, but

maintain their social graces and appear physically well.

Diffuse Lewy Body Dementia:

The elderly develops poor memory, mental confusion, incoherent speech and distractibility. They may lose their way and have visual hallucinations.

Frontotemporal Dementia:

The elderly will have changes in personality, and social and personal behaviour.

Vascular Dementia:

The elderly will have mental and physical decline and will look unwell and old for their age. Source: Catherine Hickey, Terry Chisholm, Michael J. Passmore, Jonathon Darcy O'Brien and Jennifer Johnston, "Differentiating the Dementias. Revisiting Synucleinopathies and Tauopathies", *Current Alzheimer Research* 2008; 5(1). <https://doi.org/10.2174/156720508783884657>

Prevalence of dementia

Ibadan study of 2,494 elderly

found 2.29% had dementia and 1.14% specifically had Alzheimer's, a total 64.3% of the study (1). Dementia accounts for 4.9% of elderly people in Nigeria (2). Significant risk factors for dementia are being female, elderly, isolation, lack of mental stimulation, depression, and low educational achievements (2.).

At this time, it is estimated that 50 million people across the globe are affected with dementia, with the expectation of it to be more than triple by 2050.

The Nigerian population of elderly people with dementia has increased over 400% in the last 20 years (2)

Risk Factors of Dementia

It was shown in Ibadan that both old age and being a woman were significant risk factors. Other common risk factors around the world include isolation, lack of mental stimulation, depression, and low educational achievements (2). However, there is a promising side to everything. Dementia is not a common

result of aging.

Prevention of Dementia

The World Health Organization (WHO) states that, "...people can reduce their risk of dementia by getting regular exercise, not smoking, avoiding harmful use of alcohol, controlling their weight, eating a healthy diet, and maintaining healthy blood pressure, cholesterol and blood sugar levels." (3, 4). As well it was noted on the study done in Nigeria, showing that occurrences of dementia of elderly with a spouse was lower than those who did not have a spouse (5).

Caring for the elderly when they present with dementia

Discrimination and stigma lead to mental and physical health issues for most (1). but this practices are especially prevalent in vulnerable populations such as the elderly. PriHEMAC Caregivers, are however well trained by Psychiatric Nurse Practitioner in how to care for those with dementia. They know that the key to being able to handle the unpredictable nature of elders with dementia is to be aware that they will show such things as forgetting and repeating many times, getting angry for no apparent reason, or not knowing where they are.

Calm repetition is often a constant need in caring for the elderly with dementia. One

highly effective way to keep dementia at bay for all elders without dementia is to visit and call often as isolation makes the elderly vulnerable to dementia and those with it get progressively worse.

Communication with family, friends, and community members, as social connection is intrinsically important.

Along with eating healthy, reading the Bible or Koran, continuing to go to church or the mosque, as well as keeping the elderly active mentally and physically, and to have their needs met as soon as possible, are all suggestions PriHEMAC administrative workers, caregivers, and PEFA's from PriHEMAC state that the elderly community is in need of. At the end of the day the elderly need and want what all of humanity requires to live a happy and healthy life: to be included with love, companionship and connection.

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Essential Steps to Social Inclusion Creating a More Elderly Friendly Society

By Nicole Bausenwein, SUNY COIL Global Commons

Introduction

The elderly constituting 3.1% of the Nigerian population experience ageism and social exclusion on a daily basis. (1) They are often excluded from a variety of settings including health facilities, transportation services, places of employment and community gatherings. Social exclusion has adverse effects such as poverty, decreased mobility, psychological distress and poor physical health. Intentional attention therefore needs to be paid to situations that promote social inclusion of the elderly.

Limited mobility

Limited mobility (3) is one of the greatest daily challenges the elderly must face. Most of the elderly do not own private vehicles and must rely on mass transportation. Public transportation issues include lack of sufficient seating, inconsistent bus service, the absence of bus stops close to the elderly's residence and the absence of wheelchair accessible entry and seating.

Usage of Public Transportation

In urban cities, 88% of the elderly rely on public transportation₂ (1) A PriHEMAC caregiver Ms. Abigail shared her personal experiences regarding the elderly's usage of public transportation. "It's not easy for them," she said. "Many of the care receivers are around 90 years old. We usually travel in groups and there are very few cars that will stop to allow the elderly to safely cross the road". Within rural settings, the elderly persons have reported that trips to hospitals and religious institutions are the highest unmet

travel needs. Increased mobility is associated with better well-being. Older people that are able to use public transportation efficiently and safely feel more independent and are able to maintain social connections₄.

Social connections

Social connections are essential in order to maintain psychological well-being. PriHEMAC promotes elderly social inclusion by providing training to caregivers and Elderly Friendly Ambassadors with skills, knowledge and attitudes needed to provide the elderly with quality care.

Retirement factor

Retirement presents unique challenges for the elderly. Apart from income, employment also provides people with social connections, purpose and a sense of identity. When older people retire, they often lose these social connections which can negatively affect their mental health and well-being₅.

Environmental factors

Environmental factors can also affect social isolation and the elderly's mobility such as the absence of elevators, ramps, as well as any configurations that make walking difficult. The elderly is also often excluded from social events because of false assumptions made about their cognitive and physical abilities.

Feeling of Abandonment

In his own comment, Dr. Martins Ogundeji said "The elderly persons are not usually invited to participate and contribute to most discussions within and around their communities which leads to frustration and feeling of

abandonment". The elderly persons usually feel valued when they are able to share their life experiences with others, young and old.

Use of Digital Media

Research by Ezech and Mboso (2) has shown that digital media helps older people adjust to the challenges of aging by keeping them connected and informed. Digital media can provide the elderly with banking, education and social opportunities. However, many older people find navigating digital technology to be a challenge. Computer usage remains low. Family and friends, health issues and retirement, affordability and inability to adapt all influence the elderly's digital technology usage. Community support is needed in order to foster the elderly's continued usage of digital technology and digital media.

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Intergenerational Attitude Towards the Elderly: Their Past, Present and Future Role in Our Communities.

By *Natasha-Marie Telfer,*
SUNY COIL Global Commons



Introduction

Over the years, traditional family supports for the elderly have weakened. The option to interact through technology via phone calls, Zoom meetings, text messaging, Skype and emailing, in lieu of traveling a far distance is frequently chosen. With these changes occurring within the societal structure and inside familial generations, it is inevitable that changes within social norms and values will be forthcoming. One such area is intergenerational attitudes towards the elderly.

Deeply entrenched in past Nigerian culture were for the elderly to be treated with great respect, honor, consideration,

care, and compassion. They were seen as role models for the younger generation, not as being burdensome. Their happiness was to be valued and should they require help to address their physical, mental, emotional, and financial need, it would be prioritized.

PriHEMAC advocates on multiple levels, as it seeks to bring awareness to the needs of the elderly as they strive to reinstate and strengthen the place the elderlies hold in communities and society at large. *Four poignant issues* facing the elderlies are the absence of social security service, healthcare, policymaking, and a shortage of supportive services for them within community organizations and institutions.

Perception of Grand Parent on Ageing

I had the privilege of speaking with Mr. Joel Fadele, both an elder and PEFA, an abbreviation used for an Elderly Friendly Ambassador for PriHEMAC, his son, Barrister Seun Fadele, and the daughter of Barrister Fadele, thirteen-

year-old, Kanyinsola. During my conversation with Mr. Fadele, he spoke passionately about the traditional values and influential role the elderlies had, giving guidance and advice within the community. He mentioned traits such as integrity, honesty, and empathy.

Interestingly, a few days prior, I interviewed Dr. Martins Ogundeji, Executive Director of PriHEMAC, who is also elderly. As I spoke with Mr. Fadele it was daunting how his expressed thoughts were similar in content as Dr. Ogundeji's. The inculcation of values such as extending basic courtesies, be it in the instance of giving your place of seating if none is available at the time to the elderly, always acknowledging and greeting the elderly, as he expressed in his statement,

During Dr. Ogundeji's interview, he used the term, "psychological refueling" while speaking of his parents. He explained that though he travelled, he would return home and visit his parents, with their happiness always at

the forefront, he expressed. It was during these visits that specific needs only his endearing parents could meet would be fulfilled," psychological refueling". His words, "Going back home to see your parent, making sure they pray for you, you tell them what has happened, if you are expecting anything big ahead of you." He continued to say, "They are just between you and your God. There was nothing that stood between me and my parents." These sentences embodied what "psychological refueling" was for him.

Perception of Parent on Ageing

Meanwhile, Barrister Fadele, reiterated the importance of treating the elderly with great respect and giving them preferential treatment. Giving up one's seat for the elderly and offering them a space in front of you if a queue is present should be instinctive for non-elders, it should be seen as an act of honor, respect, and reverence.

As we spoke Barrister Fadele emphasized that striving to uphold the value system taught to him, can be quite challenging due to the harsh realities of current day, however. He mentioned that the struggles of a thirty-year-old man can be indistinguishable from a sixty-year-old elderly male. He spoke of an instance, where both males were rushing to get food at the same time on the

welfare line. This shows how there is a change in the value and respect for the elderly.

An elderly male came to his office twice within a short span of time with the same story of having no money to repair his vehicle and needing help. Naturally, he reacted as expected, doubtlessly believing the veracity of the elderly male words but, on the second occasion Barrister Fadele realized what was happening. It was apparent that integrity and honesty were clearly values amiss

Perception of Grand Daughter on Ageing

It is undeniable that the views, attitudes, and perceptions of the elderly are shaped through the exposure of encounters with them. This is especially true for children and young adults, alike. My interview with Kayinsola (thirteen years old), supports this statement. She spoke of learning that the elderly should always be respected from both her grandfather and dad. In fact, no matter the circumstances respect must always be given she explained recalling an encounter with an elderly person, who was confrontational. Later, when asked if grandparents should expect their grandchildren to take care of them or is it too much to expect; without hesitation, she responded, "Yes, it is not too much to expect." Her answer clearly underscores the fundamental

core value of showing care and respect towards the elderly.

Conclusion and recommendations

While conversing with family members spanning three generations, I cannot help but discern that the intergenerational attitudes towards the elderly have changed in both subtle and overt forms over the past few decades. Sparked by external and internal factors either directly or indirectly impacting the day to day living of society's value system. In familial structures, communities, the decision-making by the private sector and government or lack thereof, all contribute toward these changes. Undeniably, all these areas are interconnected and interrelated. Hopefully, with the continued successes of PriHEMAC Elderly Friendly Care program, the effects of the negative changes will be lessened or reversed as its influence continues to widen within the Nigerian communities.

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PriHEMAC Reports (2020/2021)

Current Status of Promoting Elderly Friendliness Through Empowered Stakeholders Program by PriHEMAC (2018-Ongoing)

i) *Caregivers Training and services*

PriHEMAC started training of Home Health Caregivers of the Elderly and/or Convalescents in 2014. Since then, the organization has trained 218 Home Health Caregivers. PriHEMAC has engaged 87 of the trained Caregivers to provide various services to meet the physical, mental or social needs of the elderly.

ii) *Training and use of PEFAs*

In early 2018, 3 Batches – a total of 66 PEFAs - were trained from 9 Religious Institutions which were empowered with the principles and initial practices of becoming Elderly Friendly Organizations (EFOs).

To further promote/expand the initial achievements of 2018 on the Elderly Friendly Program, an 8-Member (4 Christians and 4 Muslims) Scaling-up Committee was established in September 2020.

The initial step of activities of the Scaling-up Committee was renewing the Approval/Support of the Authorizing Bodies of the 2 Major Religious Organizations - Christian Association of Nigeria (CAN) and Nigerian Supreme Council for Islamic Affairs (NSCIA).

After their approval, and through the efforts of the Scaling-up Committee Members, 3 Rounds of Training were carried out: 70 PEFAs were produced and 16 EFOs (6 Churches and 10 Mosques) were empowered between 11th November and 8th December 2020. The trained PEFAs were instrumental in empowering the EFOs that sponsored them.

Furthermore, the 70 PEFAs and Model Elderly Friendly Organizations were recognized in an Award Ceremony



at PriHEMAC Training Institute on 7th January 2021 with the Honorable Commissioner of health, Dr. Bashir Victor Bello, gracing the occasion as Special Guest of Honor. In the First quarter of 2021 (January-March), 38 PEFAs from 10 EFOs were trained.

By November 2021, PriHEMAC has a total of 45 EFOs and 195 PEFAs.

GLOBAL FUND (GF) DONOR PROJECT

i) *Malaria Global Fund (GF) Donor Project, Communities, Human Rights and Gender (CRG) Equality Special Initiative (CRG-SI) (2021-2023)*

The principal recipient is Impact santé Africa Cameroon while the Sub-recipient is Civil Society in Malaria Control, Immunization, and Nutrition (ACOMIN).

The CRG project is currently being implemented in 3 Countries in Africa: Cameroon, Niger, and Nigeria.

Implementation is being carried out by CRG Teams/Networks in 10 States cutting across the 6 Geo-Political Zones of the country.

PriHEMAC is one of the 10 Networks under ACOMIN in 3 Local Government Areas (LGAs) of Oyo State namely: Egbeda, Ibadan North, and Ogbomoso South Oyo State.

The main focus of the CRG project is to employ the use of interventions that aim to ensure that country responses and programs on HIV, TB, and malaria are community-focused, human rights-based, and gender transformative.

The focus of the project in Africa is on malaria with the key approaches of community diagnosis, advocacy, and monitoring.

ii) *Malaria Global Fund (GF) Donor Project, New Funding Model (2018-2025)*

ACOMIN is a sub-sub-grantee under Catholic Relief Services (CRS), on the Global Fund Malaria Grant for contributing towards reducing the malaria burden and bringing malaria-related mortality and morbidity to zero levels. The aim is to pursue an increase in the quality of service, generate real-time objective information and access the quality and quantity of service delivery, reduce wastage and loss of interventions, and advocate for increased resource allocation for malaria intervention.

As a member of ACOMIN, PriHEMAC is the implementing Organization between the year 2018 to 2020 in Osogbo, Osun State,

PriHEMAC was able to facilitate a good relationship between the community and nine (9) Primary Health Centers consequently identifying challenges to accessing malaria services by community members.

The project has been extended for periods of 2021 to 2025 and PriHEMAC will continue implementing the project at Ejigbo LGA in Osun State

PriHEMAC TRAINING PARTNERSHIP ACTIVITIES

Internship Reports for The Year 2020/2021

1) Young African Leaders Initiative (YALI) Regional Leadership Center, Accra Ghana,

In 2019, Young African Leaders Initiative (YALI) Regional Leadership Center, Accra Ghana, established relationship with PriHEMAC when one of our trained Caregivers – Mr. Gideon Adeniyi - had an award to train at the Centre. The trained Caregiver who has now metamorphosed to become a strong PriHEMAC Officer left exemplary record behind at the YALI Center that other Nigerians who go to YALI for training know about him and look for him.

Thereafter, in 2020, two participants on the Emerging Leaders Program at Young African Leaders Initiative Regional Leadership Center, Accra Ghana, namely, Pomisile Ogunjemite and Oluwadarasimi Adewale traced Gideon to PriHEMAC Office and had their four-week (Sept, - Oct.2020) virtual internship with PriHEMAC.

ii) College of Health Sciences, Osun State University,

Furthermore, for the first time, the College of Health Sciences, Osun State University, requested that five Public Health final year students of the Osun State University, could have their six-week internship in 2021. PriHEMAC Management approved the request. Then, the students were exposed to various Elements and Pillars of Primary Health Care, field works, operation at Primary Healthcare Centers, presentations, assignments, stakeholder engagement, processes of research, and project proposal drafting.

INTERNATIONAL PARTNERSHIP NETWORK

i) Experiential Learning Network, University of Buffalo USA (2020-Ongoing).

In 2019, PriHEMAC and Experiential Learning Network of the University of Buffalo under the Leadership of Professor Mara Huber started a collaboration aimed at granting students a virtual experience of the PriHEMAC program of Promoting Elderly Friendliness through Empowered Stakeholders. The students in return undertook projects which resulted in the production of tools or resources aimed at

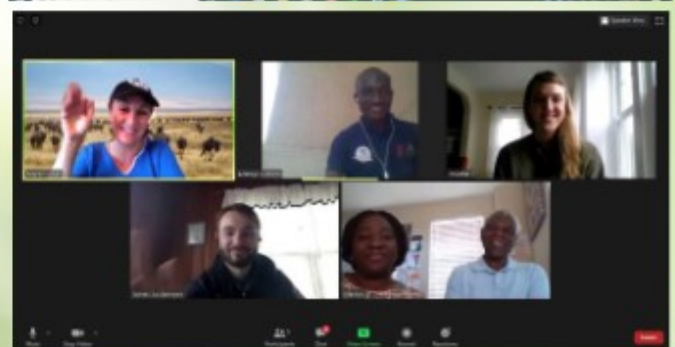
promoting PriHEMAC activities. A total of 13 students have participated in the Program.

ii) State University of New York Collaborative Online International Learning (SUNY COIL) Global Program, USA 2020.

In 2020, after pitching for the SUNY COIL program, PriHEMAC was chosen as one of the Organizations to engage students in International Online Learning.

After completing coursework on intercultural storytelling and international perspectives on UN Sustainable Development Goals (SDGs) 3: Quality Health and Well-being, the students were exposed to PriHEMAC programs enabling them to gain skills in storytelling, intercultural communications, and collaborative project development by telling the story of PriHEMAC through the framework of SDG 3.

The following 12 Students were supervised by Professor John Justino, Professor Mara Huber, Dr. Martins Ogundeji, and Mr. Gideon Adeniyi: Matthew Evans, Jasmin Kumar, Sabrina Martin, Laura Montes, Cooper Myers, Victoria Sheung, Jean Bull, Amanda Hart, Daniela Maniscalchi, Udelle Vargas, Yamile Bautista, and Diondra Horsey.





Follow us on social media!
@PriHEMACares
www.prihemac.com

HOW TO LEND A HELPING HAND TO THE ELDERLY



Make community spaces accessible for the elderly



Call and check in on the elderly in your family



Listen to the stories of your elderly neighbours and community members



Be mindful of the level of noise you make while near the elderly



Invite and include the elderly in the events being held



Educate yourself on the process of aging to better understand and relate to the needs of the elders



Melinda Mei
SUNY COIL
Global Common



Olivia Ingalsbe
SUNY COIL
Global Common



Cailey Shum
SUNY COIL
Global Common

Get Involved!

Join us on making elderly care better for Nigerian
Contact us at
info@prihemac.com to learn more on
how to make a difference.

#BeElderlyFriendly

2022 CALENDAR

January

SUN	MON	TUE	WED	THU	FRI	SAT
30	31	•	•	•	•	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

February

SUN	MON	TUE	WED	THU	FRI	SAT
•	•	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	•	•	•	•	•

March

SUN	MON	TUE	WED	THU	FRI	SAT
•	•	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	•	•

April

SUN	MON	TUE	WED	THU	FRI	SAT
•	•	•	•	•	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

May

SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	•	•	•	•

June

SUN	MON	TUE	WED	THU	FRI	SAT
•	•	•	1	2	3	4
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12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	•	•

July

SUN	MON	TUE	WED	THU	FRI	SAT
31	•	•	•	•	1	2
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17	18	19	20	21	22	23
24	25	26	27	28	29	30

August

SUN	MON	TUE	WED	THU	FRI	SAT
•	1	2	3	4	5	6
7	8	9	10	11	12	13
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21	22	23	24	25	26	27
28	29	30	31	•	•	•

September

SUN	MON	TUE	WED	THU	FRI	SAT
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18	19	20	21	22	23	24
25	26	27	28	29	30	•

October

SUN	MON	TUE	WED	THU	FRI	SAT
30	31	•	•	•	•	1
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9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

November






SUN	MON	TUE	WED	THU	FRI	SAT
•	•	1	2	3	4	5
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20	21	22	23	24	25	26
27	28	29	30	•	•	•

December

SUN	MON	TUE	WED	THU	FRI	SAT
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4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

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WHO WILL CARE FOR THE NEEDY?

“You shall open wide your hand to your brother, to the needy and to the poor, in your land - Deuteronomy 15:11, ESV