

Ageing PLC: A Business Where Everyone is a Shareholder But Not Aware. Can Social Work Lead?

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Preamble

“Older people are vital, contributing members of our society. They work, volunteer, and raise young people. They hold our nation’s memory and are a deep repository of the rich traditions and cultures that make our nation diverse and vibrant. The abuse or neglect of any one of them diminishes all of us” – Kathy Greenlee, United States Assistant Secretary for Aging and Administrator, Administration for Community Living

What is ageing?

Ageing as a concept is drawn from the word, age, which is an indicator of progress through the stages of life and serves as an important scheduling mechanism for numerous forms of political, social, and cultural activities, such as schooling, marrying, working, voting in an election, securing a driver’s license, and retiring. The process of growing older by the passing of each calendar year would be ordinarily referred to as ageing. However, ageing is no longer an ordinary term and has formed heated conversations in several domains that transcend academia. As a result, ageing has been conceptualized differently.

A remarkable definition of ageing was made at the 1982 United Nations (UN) World Assembly on Ageing in Vienna, where ageing was given a benchmark of commencing at 60 years, essentially arguing that disengagement from a lot of life’s activities begins by 60. In corroboration, although without the mention of a particular age, Rose (2009) said that ageing is a persistent decline in the age-specific fitness components of an organism due to internal physiological deterioration. In Southeast Nigeria, traditionally ageing is seen not from a point of deterioration or a disease (*Nka abughi oya*), but as a stage in life one must prepare for (*Nku onye kpara n’okochi ka o na-anyanya n’udu mmiri*). Thus, an overall look at the concept of ageing shows that the definitions of ageing are

founded on chronological, biological/physical, psychological, and social/cultural significance.

The chronological definition of ageing sticks to age progression, while the biological/physical definition as further reemphasized by Brown and Frothingham (2023) maintains that ageing is associated with physical alterations like grey hair, wrinkling of the skin, loss of dentition, etc., tending toward being frail, less self-sufficient, and dependent on others for various forms of support, especially, physical support. The beauty of ageing is that it is experienced differently by different people. For example, two persons may share the same chronological age but they may differ vastly in their functional and physical capabilities. Someone might be chronologically older than another person yet the latter will be considered to be older than the former if the latter has a medical condition that has altered their physical looks considerably.

Varying experiences pertaining to ageing has given rise to scholars arguing about psychological ageing (Mitina et al., 2020). Here, ageing is considered to be unique to the feelings of the aged. For example, a 70-year-old who just started a new business and is looking forward to the future of the business may be considered psychologically younger than a 60-year-old who just retired and hoping for a monthly pension. Yet it could as well be obtainable that the 70-year-old will be regarded as an elder by the society, and accorded the roles, responsibilities, and status of an elder. The latter is the social and cultural definition of ageing, fundamentally asserting that ageing is a function of societal construct about who is elderly, and the same society is responsible for the positive and negative feelings about ageing (Ali et al., 2018; Kalaycıoğlu, 2019).

The above discourse suggests that ageing is not inevitably a cumulative and unremitting deterioration process. Instead, ageing might be best conceived as a facet of adaptation that is sometimes determined by the individual's psychology, culture, lifestyle choices, or society. Therefore, available evidence and logic at our disposal suggest that people do not become old or elderly at any specific age. However, there is the certainty that at some point in someone's existence, disengagement from life's activeness will set in, which is why it is a responsibility to create conditions that would make such disengagement fulfilling. Hence, concepts such as successful ageing, healthy ageing, and positive ageing are beginning to be dominant in ageing conversations, and even more, unsuccessful ageing, unhealthy ageing, and negative ageing. The former emphasizes ageing that comes with a sense of fulfilment, inner feelings of happiness, community contributions, compliance with medical therapies, and optimal social functioning overall, while the reverse is the case for the latter (Bar-Tur, 2021; Menassa et al, 2023; Rowe & Kahn, 1997; Urtamo et al, 2019; WHO, 2020). Attaining successful ageing in the industry of growing old is the

essence of this lecture. As Ashton Applewhite puts it, “*The thing about ageism, is that the group we see as different from ourselves is our future selves*”. The rest part of this lecture brings home this reality while signposting how the noble profession of social work, charged with the welfare and interest of members of the societies can step in to offer professional help.

Population ageing around the world

Population ageing is a shift in the distribution of a country's population towards older ages and is usually reflected in an increase in the population's mean and median ages, a decline in the proportion of the population composed of children, and a rise in the proportion of the population composed of the elderly. Population ageing is one of the most important demographic trends across the globe. According to Population Reference Bureau (2023) some of the top three countries currently experiencing population ageing (those ages 65 and above) include Japan (28%), Italy (24%), and Finland (22%).

Several factors can contribute to population ageing. The first one is the declining birth rate, which is when the average number of children born to each woman (fertility rate) declines. The result is a smaller proportion of children in the population and a larger number of persons born at a time when the fertility rate was higher. A decline in fertility reduces the number of babies, and as the effect continues, the number of younger people in general also decreases. The second is increasing life expectancy that is when the average age at which people die (mortality rate) increases. An increase in longevity raises the average age of the population by increasing the number of surviving older people.

The third is increasing emigration because those who leave a society are usually disproportionately young. Of the three factors, it is believed that declining fertility now contributes to most of the population ageing in developed countries. More specifically, the large decline in the overall fertility rate over the last half-century is primarily responsible for the population ageing in the world's most developed countries (Gu, Andreev & Dupre, 2021). This is because many developing countries are going through the experience of giving birth to fewer children which in turn will result in faster fertility transitions and even faster population ageing than the developed countries ever experienced.

Of the three factors (declining birth, increased life expectancy, and emigration) mentioned above, I believe that the second one is having the most serious impact in Nigeria given the effects of medical science, better sanitary conditions, and nutritious diets (notwithstanding the 56-year life expectancy by WHO, 2023). The first factor also has a strong footing, given the aggressive family planning campaign the Nigerian government embarked upon years ago, improvements in women's education, and in recent years, the economic hardship that is forcing couples to give birth to fewer children they can

adequately provide for. The effect of the third factor is also being experienced very recently in Nigeria as the economy and political leadership continue to be discouraging, forcing more young people to leave the country to where they feel safe and can thrive. It is now common in our various communities to see older adults whose children are all outside Nigeria, a circumstance that comes with mixed feelings.

The myth of Africa being a youthful population

According to the Global Health and Ageing report presented by the World Health Organisation (WHO, 2022), the number of people aged 65 or older is projected to grow from an estimated 524 million in 2010 to nearly 1.5 billion in 2050. In addition, by 2050, the number of people 65 years of age or older is expected to significantly outnumber children under five. Among the countries currently classified by the United Nations as more developed (with a total population of 1.2 billion in 2005), the overall median age rose from 28 in 1950 to 40 in 2010 and is projected to rise to 44 by 2050.

Asia and Europe were found to record the highest number of older adults across the globe. Japanese older adults constitute about 28% of the country's total population, Italy is at 24%, Finland, Portugal, and Greece completed the world top five at 22% each (Population Reference Bureau, 2020), while Chinese older adults constitute about 17.3% of the country's total population (Xinhua, 2019). Compared to these figures, Africa's population is exceptionally young compared to other world regions that have been ageing at a fast rate: only 5.6% of Africa's population was age 60 or older in 2020 compared to 23.4% in North America and double-digit percentages in every other world region. Even by 2050, Africa's older population is projected to remain in single digits, less than 1 in 10 (9.3%). That will still be lower than the current rates for other regions (Population Reference Bureau, 2020)

Africa is said to be the youngest continent in the world according to the population distribution. Based on estimates and projections from the Census Bureau's International Database, Africa had the fewest older people of any world region: 74 million in 2020. The 25 countries with the lowest median age in Africa also are the countries with the lowest median age worldwide (He, 2022). Currently, the median age in Nigeria is 18.6 years, which means that Nigeria's population is dominated by adolescents and younger adults below 50 years (Karemer, 2023). Also, a young population could reflect low life expectancy, which is why the African continent is said to have the lowest life expectancy in the world (He, 2022) but are the statistics the same as reality

Although Nigeria is said to have one of the youngest national populations in the world, its ageing population is also progressively increasing. A steady increase in the older population is projected to push the share to 2.9% by 2030, 4.0% by

2050, and 10.1% by 2100 (United Nations Department of Economic and Social Affairs [UN DESA], 2019). This is still very minimal compared to what is happening in other parts of the world. The percentage of Nigerians over the age of 65 has remained around 2.8% of the total population since at least 1980.

However, my question is:

- i. *How many of us here present who are over 40 years old have one or two parents living?*
- ii. *How many of us here present who are over 20 years old have one or more grandparents living?*

Statistics may not lie but they do not tell us the real story, especially in a country like Nigeria, where vital statistics such as birth rate and death rate are derived from projections. In Nigeria today, the last census was conducted 17 years ago in 2006. Meanwhile, we have been told that Nigeria has about 6 million older adults and a life expectancy of 56 years. Yet we can attest to the fact that people of 40 years and above still have one or both parents alive in Nigeria, and those in their 20s can point to one or both grandparents alive.

In my years of conducting primary research with caregivers, I can point to how easy it is to get adult offspring who are responsible for the care of their parents who are aged 60 years and above. It tells us that current statistics on older adults in Nigeria may not be the reality, which is why I am saying today that Nigeria has far more older adults than captured in our national numbers. Going by this reasoning, if by 2050, our population reaches 401 million as projected (UN DESA, 2019), it then means a significant percentage of that number will be older adults, leaving us with the question of ‘how prepared are we?’. Again, if we consider the progression of available statistics on older adults in Nigeria, with about 2 million Nigerians over the age of 65 in 1980, 6 million in 2020, 16 million by 2050, and 74 million by 2100 (UN DESA, 2019), it speaks to growth, even though the figures should be questioned for not reflecting the true state of our experience, as I have earlier argued.

Therefore, it may be wrong to supposedly conclude that Nigeria has no ageing problem because the entire population is large despite the low proportion of older adults. Thus, Nigeria is indeed ageing beyond the projected statistics and we should worry about our ageing and the attendant issues. So if we limit our attention to the percentage of older people, we fail to see the remarkable and ever-increasing absolute size and their impact on the country’s growth.

Ageing policies in Nigeria

In 1982, the United Nations saw the need to have specific policies and programmes that would be concerned mainly with the active social participation of older adults, reforms to education, health, housing, family, social welfare and

economic security for older adults. This International Plan of Action was adopted at the 1982 UN World Assembly in Vienna (UN, 1982). Many developed countries embraced this Plan of Action and went ahead to kick-start policies and programmes for older adults. Many developing countries under the guise that they have a young population paid lip service to the Plan of Action. According to Alexandre and Asghar (2018), countries like the United States, the United Kingdom, Australia, Finland, Japan, and Thailand made efforts to have key legislations and policies in place. Most countries in sub-Saharan Africa with the exception of South Africa did nothing (Ministry of Employment and Social Welfare, 2010; South African Government, 2017).

In 1991, the UN declared such qualities as independence, participation, care, self-realisation and dignity vital to the lives of older people (UN, 1991). This declaration advocated for the integration of older people into society, and later additions proposed that they should be offered opportunities to volunteer in the community, both to provide services and to develop and maintain their cognitive capacities, skills, and remain functional within the limits of what they can contain (UN, 2002). The United Nations declared 1999 the 'International Year of Older Persons'. The UN proposed that 'a society for all ages' be celebrated in recognition of humankind's 'demographic longevity', pointing out that ageing must be at the centre of politics in all countries. In 2002, the second UN International Assembly on Ageing was held to evaluate the results of the first assembly and approve the action plan. The assembly defined the notion of active ageing, emphasising participation, protection and health as fundamental pillars of active ageing. This assembly created the Madrid International Plan on Ageing (MIPAA), to promote older adult's physical and mental well-being. This plan views discrimination against ageing as violating fundamental human rights and urges governments to eliminate all forms of discrimination (UN, 2002). However, although the MIPAA recommendations to achieve and protect older people's rights may be considered outstanding, they are not legally binding on member countries. So many of them chose not to take any action.

In Nigeria, there are pockets of social policies for the care and support of older adults. One of the very first is the Pension Scheme which dates back to 1946 though the appropriate legal enactment that brought the scheme to being was the Pensions Ordinance of 1951 when the Colonial Government in Nigeria, decided to have a pension scheme for African staff employed by the government (Abdulazeez, 2014; Okoye & Aghedo, 2011). It has since undergone several reforms with the Pension Reform Act of 2014 being the most current (Olasehinde & Olaniyi, 2019).

Next, we had the National Social Development Policy of 1989 which had a full chapter on how to promote the well-being of older Nigerians. In 1993, the

Federal Government approved the Nigeria Social Insurance Trust Fund (NSITF). Under the provision of the NSITF Act, 1993 all employers of labour in the Private Sector registered under the Companies and Allied Matters Act (CAMA) 1990, either as companies or partnerships, irrespective of the number of their employees or were sole businesses with a workforce of not less than five (5) employees, were required to register as members of the NSITF Scheme and remit their contributions monthly. It was mandated to provide retirement pension benefits among other benefits. The NSITF scheme was a defined benefit scheme that enabled contributors to enjoy pensions and grants far beyond their contributions.

Then there is the National Social Protection Policy (NSPP) of 2016 which has a paragraph on older adults. It noted that ageing persons are an important component of every country's demographic stratum, deserving social protection like other age cohorts. The population of older persons in the world is increasing at a very rapid rate. The government's approach to social protection of the elderly is mainly through social security, which is limited to formal employment. For this reason, social assistance to the aged is being emphasised in this policy" (Federal Government of Nigeria, 2016). One is not sure if the implementation has started, but recent research with older adults by my students and myself from 2020 till date has not reported the existence of any government-driven functional social protection service for older adults in southeastern Nigeria (Ebimngbo, et al, 2022; Ebimngbo & Okoye, 2022; Ekoh et al, 2023; Iwuagwu et al, 2023; Ene et al, 2022).

In 2017, the Nigerian Social Welfare Policy was also revised. Recognising the need to protect older adults, we (myself as part of the expert commission) dedicated the first part of chapter three of the policy document to "Welfare services for Older adults". To date, nothing has been heard about the document. I believe that it is probably caught up in one bureaucratic process or another.

Still, in the same year 2017, the National Assembly enacted the National Senior Citizen Centre Act to provide for the needs of Nigerians aged 70 and older. This enactment is in accordance with Nigeria's 1999 constitution, which mandates the Nigerian state to offer adequate social services and enhanced quality of life to older Nigerians (National Senior Citizens Centre Act, 2017 2018; Shehu, 2021). In 2021, President Buhari approved the roll out of the National Senior Citizens Centre and appointed a 12-member board that represents various ministries and ageing-focused organisations (Shehu, 2021). As of today, the National Centre is up and running in Abuja. It has also formed different partnerships with various organisations and institutions. The Centre is currently in the process of setting up offices and advocating for the domestication of the National Senior Citizens Centre in each state.

Next, we have the National Policy on Ageing for Older Persons. The Federal Executive Council ratified the National Policy on Ageing for Older Persons in Nigeria in February, 2021. It was stated that the objective of the policy is to have a society where senior citizens are guaranteed security, independence, participation, comprehensive care, self-fulfilment, and dignity. This is the only thing we know about the policy currently, as one is not sure how it will operate or when it will take off. We were equally made to know that as of 2020, older adults were over 200,000 in the National Social Register and were to be beneficiaries of the COVID-19 cash transfer. Of course, we are aware of the controversies that have trailed the National Social Register, and we also know that there is no specific cash transfer programme coordinated by the Federal Government for older adults in the country.

From the foregoing, we can see that the Nigerian federal government is very forthcoming with policies for older adults, though this cannot be said for the states. In Anambra state for instance, where I have conducted most of my research, government provisions for older adults are more like ad hoc and politically motivated interventions that include giving them money during political campaigns and sharing bags of rice during festive periods. It was only in 2013 that the Anambra state government under Governor Peter Obi, signed into law the Indigent Adult Welfare Scheme which was meant to pay older adults who are 75 years of age or older the sum of five thousand naira (5000) every month. The scheme was operational for about six months because I knew my father was a beneficiary. Currently, the scheme is not operational as several research reports from my team have shown (Ebingbo et al, 2021; Ekoh et al. 2021; Ebingbo et al, 2020).

We cannot conclude this section without discussing some of the major problems affecting the implementation of some of these ageing policies in Nigeria. Earlier research evidence (Okoye, 2012; Okoye, 2011) suggested that the major problem is corruption. Research evidence by Tanyi, et al, (2018) is still in tandem with earlier findings. Unfortunately, that has not changed as the following newspaper reports confirm – Ojo (2022) in Punch Newspapers reported that at the Nigeria Social Insurance Trust Fund (NSITF), payment vouchers worth over N17 billion have allegedly been destroyed by termites and rain. The revelation was made on Monday, August 15, 2022, during the probe being conducted by the Senate Public Accounts Committee headed by Senator Matthew Urhohide (Edo-South). Also in 2021, Ochojila (2021) reported in the Guardian Newspapers that the Federal High Court, Abuja has sentenced the former Chairman of the defunct Pension Reform Task Team (PRTT), Abdurashheed Maina, to a total of 61 years imprisonment but to run concurrently for eight years for defrauding the Federal Government of the sum of N2.1 billion in pension funds. Eromosele (2021) also reported in Vanguard newspapers that the Nigerian antigraft agency, the Economic and Financial

Crimes Commission (EFCC), disclosed that they have probed over a N157 billion pension scam.

Therefore, one can conclude that corruption is the bane of ageing policies in Nigeria. Others include a lack of political will to implement the policies to the latter, the cultural belief of filial care for older adults, lack of state priority for the vulnerable, overall weak attention to social services, and weak engagement of qualified social service professionals.

What is Ageing PLC?

Ageing PLC is a limited liability company where every Nigerian and those yet unborn are shareholders. Unfortunately, it is not a company where you have the option to be a shareholder or not. It is also not a company that is about to fold up any time soon if it is not well managed. Far from it. The company is always there whether mismanaged or not. However, many shareholders today in this company are not drawing as many dividends as they should. Note that if this company is well managed, shareholders will draw fat dividend cheques every year during the end of the financial year. Also, unlike other companies where there are board members who are given the authority to run the company, in Ageing PLC, every shareholder has a role to play in how the company is run, and failure to do so will result in little or no dividends in the future.

Ageing PLC has branch offices and subsidiaries within us, in our homes, offices, immediate environment, communities, and wherever we find ourselves. As shareholders, we are supposed to work hard and maintain these branches for the overall good of all shareholders. However, many of us are not aware of what to do, nor do we know that we are shareholders even though we know the company exists. Many of us rationalise that we are of a new age, and won't have the same problems as older adults of today when we get there. Yet we forget that we have not really done anything to grow or expand the business. Therefore, we may not even draw any dividend when the time comes.

A longer life should bring with it better opportunities, not only for older adults and their families but also for everyone in the society. For older adults, additional years provide the chance to pursue new activities such as further education, a new career, or a long-neglected passion. For their families, older adults also contribute in many ways such as being unpaid nannies, teachers and playing other roles for younger family members. While for the other family members, they can be unpaid counsellors, financial advisors, confidants, etc. To the community, they can be unpaid conflict management specialists, mediators, and counsellors. Yet the extent to which these opportunities and contributions are harnessed depends heavily on everyone becoming involved in making Ageing PLC a success.

Problems of older adults in Nigeria: A setback to Ageing PLC

Older adults like every other group (children, youths, and middle-age adults) in the society have needs and problems that are associated with and peculiar to it as a social category. These problems; however; are not general and typical of every member of the group and most often can be aggravated if the society does not have good policies and programmes to tackle them (Okoye, 2004a, 2004b). These problems may be economic, physiological, psychological, and sociological.

Economically, many older adults in Nigeria are dependent (Okoye et al, 2017). This is mainly because many individuals in the cohort of older adults we have currently, have little school education and therefore have low professional qualifications. Accordingly, the jobs they engaged in life were rather low in status and altogether reflected the traditional social structure. This kind of social origin according to Okoye (2004b) does not favour financial security in old age and in the absence of a well-developed social security system, such older adults lack the financial capacity to attend to their basic needs. Today in Nigeria, research findings have shown that support for older adults is informal rather than formal (Ebimngbo & Okoye, 2017; Ebimngbo et al, 2018, 2019c, 2020). As a result, many older adults in Nigeria rely on their children, families, friends, faith, and community-based organisation for support. (Ebimngbo et al, 2019c). These supports are sometimes not forthcoming as a result of economic hardship bedevilling their children and families. This has resulted in low quality of life for older adults. Today a lot of children and relatives are not able to support their parents as they may wish to and so a lot of older adults especially those in the rural areas have a very poor quality of life.

For some of the older adults who were able to be employed by the government or private organisations and earn pensions, the story is very much the same as newspaper headlines are filled with cases of fraud in the pension scheme as we noted earlier. The Economic and Financial Crime Commission (EFCC) boss in a 2012 gathering reported that the agency had handled over 157 billion pension cases (Ofodu, 2021; Eromosele, 2021). An investigation by BBC Africa Eye into pension fraud in Nigeria uncovered monumental corruption among government workers in all cadres with many of them soliciting extra payments before paying out pensions; people arbitrarily being declared 'dead' and having to prove they are alive before their pension is reinstated (Olaiya, 2021). We are all aware of the celebrated Maina case (Nseyen, 2023). The latest is that which took place at the Nigeria Social Insurance Trust Fund where payment vouchers worth over N17 billion have allegedly been destroyed by termites and rain. (Ojo, 2022). The list is endless. Even when the pension is paid, it is so paltry that it is not enough to sustain daily living. I remember that my mother's pension was 12 thousand Naira for more than ten years. This goes to show that

many retired older adults in Nigeria face a lot of financial difficulties without support from family and friends.

Biologically and physically, there are common health conditions associated with ageing. Nickel et al (2021) posit that the performance of many organs such as the heart, kidney, brain, and lungs show a gradual decline over the life span due to the loss of cells from these organs with a resultant reduction in the reserve capacities of the individual. As a result, the lives of older adults are characterised by the emergence of several complex health issues commonly called geriatric syndromes. According to WHO (2022), they are often the consequence of multiple underlying factors. They include hearing loss, cataracts and refractive errors, back and neck pain and osteoarthritis, chronic obstructive pulmonary disease, diabetes, urinary incontinence, and dementia. As people age, they are more likely to experience some of these conditions at the same time.

Psychological problems of older adults include emotional and adjustment problems. Depressive reactions occur frequently in older adults. This depression is often related to the loss of loved ones and emotional support. According to Okoye et al (2017), adjustment to losses is a recurring problem older adults must face because it is a constant reminder to them that their days are numbered coupled with the removal of “one more” support. Also, many older adults know that they are no longer able to be as effective as others and this can be emotionally disturbing (Okoye, 2013a). In Nigeria, a lot of older adults suffer from isolation and loneliness because most often their children do not live with them as a result of work demands. Even when they visit their children, they are usually left at home during the daytime because their children have to go to work and their grandchildren go to school, so most often, they are alone with their paid caregivers. At times many children do not have the patience to sit down and chat with them while others feel that they know what is best for them and so make all the decisions. All these make older adults unhappy and could affect them psychologically.

Finally, the sociological problems of older adults have to do with the loss of vital roles, social status, and prestige that goes with these lost roles. As these vital roles that formerly provided them with primary access to economic, social, and psychological necessities of life are lost through retirement and discriminatory practices, older adults become marginalised. As I noted in some of my papers (Okoye & Nwafor, 2023; Okoye, 2004a), the excessive attention paid to material wealth has greatly reduced the influence of older adults in Nigeria. In many town unions, it is usually the wealthy who get to become the president-general without recourse to the counsel of older adults. Also, it is those who gave the most significant monetary donations in the village that receive chieftaincy titles and dictate what happens at community and village

meetings. That may probably explain why we have town union crises and chieftaincy disputes in so many communities in the southeast. The saying *nwata kpata ego okenye eje gbuo onwe ya n'ozu* (When a young man suddenly becomes rich, the elderly will be at his beck and call) seems to be playing out today.

Though participating in decisions has been hailed as essential to successful ageing according to research findings reported by Nnachi and Okoye (2013), it is still not practiced in Nigeria as many older adults are deprived of the right to participate in decision-making in various spheres of life. Even in the church and at the village or kindred levels, their voices are not heard because some people still believe that they are 'senile' and cannot make rational decisions (Okoye & Ebimngbo, 2022). When they are involved in some developmental project, it is usually at the end of the process and only for ceremonial purposes. Most often, they are invited to cut the ribbon at the commissioning of such a project.

This was not so in traditional Igbo society which was governed on a gerontological basis with the oldest age grade being at the helm of affairs (Okoye & Nwafor, 2023; Akukwe, 1992). Naming ceremonies could not take place unless older adults were present to give their blessings on the occasion. Marriage could not take place unless you had the advice and guidance of older adults. Ceremonies about life and death did not take place unless older adults provided the necessary guidance. Okoye and Nwafor, (2023) and Akukwe (1992) noted also that older adults played important roles in traditional medicine in that most often they acted as healers, diviners, and herbalists. It was also their duty to adjudicate and bring back peace during conflicts such as marital and inter-family feuds. They advised, counselled, and guided their communities in times of trouble or war probably because of their experiences. With all these duties and responsibilities attached to their status, they did not feel much deprivation. This may be the reason why we have these Igbo proverbs that revere older adults

*Aku nwata jiri gbaa ugo b'okenye pirichara ya
Okenye adighi ano n'ulo ewu amuo n'ogbili
Ihe okenye noro n'ala nwe hu, nwata agaghi ahu ya n'elu
Nwata gwa okenye ebe on'eje, okenye agwa ya ihe oga ekwu m'orue*

All these point to the wisdom and experiences imbued in older adults.

Although the above-mentioned problems of ageing exist in all societies, I believe that they are worse in Nigeria because we have failed to see ageing as everyone's business. We have failed to put policies and programmes in place to take care of the needs of older adults.

Ageism as a man-made problem for older adults in Nigeria

One of the first research I conducted in social gerontology in 2002 was on ageism. Ageism refers to discrimination, prejudice, and stereotypes directed at older adults simply because they are old. It can be institutional, interpersonal, or self-directed. Institutional ageism refers to the laws, rules, social norms, policies, and practices of institutions that unfairly restrict opportunities and systematically disadvantage individuals because of their age. Interpersonal ageism arises in interactions between two or more individuals, while self-directed ageism occurs when ageism is internalised and turned against oneself.

Ageism starts during the socialisation process in childhood and is reinforced over time. From an early age, children pick up cues from those around them about their culture's stereotypes and prejudices, which are soon internalised. As I child I learnt that slippery green algae is called "*imi agadi nwanyi*" (mucus from the nose of an old woman). To date, I do not know the real name of slippery green algae in Igbo.

The term ageism was first coined by Butler (1969) who argued that the tendency to perceive ageing negatively reflects a deep-seated uneasiness and distaste for growing old probably because older adults are not being cared for. These feelings Butler believed arise partly from a fear of becoming powerless or useless and from a fear of becoming a burden to others.

Ageist behaviours are interesting because we are stereotyping, and discriminating against a group that we plan to join later in life. That's right — when we're young, we discriminate against our future selves. Scientific evidence underscores the seriousness of ageism as a social problem for older adults in Nigeria. A study by Okoye (2004c) tried to explore various misconceptions about older adults among students in secondary schools. Reports from the study show that majority of the students (over 80 %) believe that:

- ✓ the majority of the old people are senile and feel miserable most of the time,
- ✓ most old people have no interest in sexual relations,
- ✓ the elderly tend to become more religious as they age
- ✓ most elderly people are set in their ways and find it impossible to learn
- ✓ most elderly workers cannot work as effectively as younger workers
- ✓ about 80% of the elderly are not healthy enough to carry out their normal activities

Okoye (2002) published a PhD research report on ageing stereotypes. Findings indicate that majority of the respondents believed that old people behave like children (78.9%) and are also sickly (70.4%). Also, more than half of the respondents believed that the elderly were secretive (51.9%), conservative

(64.1%), and always suspicious (57%). In the focus group discussion, there was unanimous agreement that older adults complain a lot and they seek “too much attention”. In fact, one male participant in the rural area said, “You can never please elderly people no matter what you do even if you kill yourself for them”. Another participant noted that her grandmother always liked to draw attention to herself by complaining about her leg today, her hands tomorrow, and her eyes next. They also use such terms as obstacles to fun, irritating, and not accommodating to describe older adults. Other studies by Okoye (2004c; 2005a; 2005b) also corroborated the findings of previous studies.

Ageism is not limited to young people or non-medical professionals as a study by Ben-Harush et al (2017) reported that ageism exists among nurses and even social workers. It is also not limited to Nigeria because a large-scale international study involving six countries by Cuddy et al (2005) reported that ageism and elderly stereotyping are not unique to American culture but consistent across cultures. There are so many words we use in our everyday lives that we are not aware that they promote or reinforce ageism. For instance, it is very common to find words such as older adults “aged 65 and over” and “age-friendly” in scientific papers published by aging and other related journals. It is recommended to be specific about the particular age bracket such as people aged 65-69 while referring to certain groups of older adults. Using such words as older people aged 65 and above does not reflect the diversity and unique experiences of older adults within such age group.

People commonly say “I am too old for this” which is considered an ageist statement because it projects ageing as a limitation, a decline in functional ability, and disease. It is also advisable to use words like "diagnosed with arthritis" instead of "suffering from arthritis". This applies to other chronic illnesses associated with older adults. The idea is that there is a massive global campaign aimed at changing the narrative of seeing aging as a normal life course process rather than pain, loss of functional ability, memory, and disease to be cured.

Rather we use such terms as “*A naghi agwo nka agwo*” (ageing has no cure) to rationalise why Mama who has ordinary malaria cannot be taken to the hospital. Some other times, you hear people saying that “*nka a bughi oria*” (ageing is not an ailment) and this becomes a reason for not taking the older adults to the hospital or giving the person adequate treatment. Findings by Ebimgbo et al (2019a) noted that many adult children will always give the impression that they have no money to pay hospital bills for a sick older parent but will have money for the funeral of the same older adult.

In summary findings from various studies, I have carried out over the years have shown that ageism is detrimental to older adults in so many ways including:

- i. making older adults not to have expectations after some time and so they gradually become more dependent than their age and situation warrant as a result of our reactions to them
- ii. not doing things they want to do because we will call them such names as “*agadi ekwe nka*” *okenye aburozi umuaka*, Paapaa, “forcing guy”
- iii. not being able to complain when sick because no one will take them seriously. They bear their problems with equanimity.
- iv. Ageism is the root cause of elder abuse in Nigeria

Generally, self-stereotypes by older adults according to Okoye and Obikeze (2004) are very damaging to society, therefore, there is a need for us all to be concerned about ageism. Ageism according to research findings, appears to begin during socialisation process and infiltrates our thinking and behaviours. This can only be eradicated if we decide to be active shareholders of Ageing PLC by becoming more aware of the blatant forms of ageism and its more subtle forms that operate within us all.

Are older adults their own worst enemy?

One of the fallouts of ageism, a lack of policies for older adults, and a lack of commitment to Ageing PLC is that many older adults do not think that life can get any better. People grow old to expect the worst. There is a primary school Physical Education song and demonstration that goes like this—“*I kaa nka ighota ije*” while walking bent (When you grow old you understand the act of walking) Why should that be so? In fact, many older adults look forward to the worst. Sometimes, because as shareholders we do not know what we should do, we resist growing old and adaptations related to it. The social media has also not helped the Ageing PLC. Most often, it is now used as a tool to propagate ageism and create a fear of ageing in people.

I read this message on a Gerontology WhatsApp forum posted by someone who is over 60 years

Four Stages of Elimination in Life

At 60, the workplace eliminates you. No matter how successful or powerful you were during your career, you'll return to being an ordinary person. So, don't cling to the mindset and sense of superiority from your past job, let go of your ego, or you might lose your sense of ease!

At 70, society gradually eliminates you. The friends and colleagues you used to meet and socialise with become fewer, and hardly anyone recognises you at

your former workplace. Don't say, "I used to be..." or "I was once..." because the younger generation won't know you, and you mustn't feel uncomfortable about it!

At 80, family slowly eliminates you. Even if you have many children and grandchildren, most of the time you'll be living with your spouse or by yourself. When your children visit occasionally, it's an expression of affection, so don't blame them for coming less often, as they're busy with their own lives!

At 90, the Earth wants to eliminate you. Some of the people you knew have already departed forever. At this point, don't be sad or mournful, because this is the way of life, and everyone will eventually follow this path!

If a social gerontologist and an older adult can post this, then we still have a lot of work to do. I also believe that many of us sitting here will read it and see some truth in it, or even see ourselves in the write-up. Please do not. Not only is the post filled with ageism, but the writer and sharer do not really know that they are shareholders in Ageing PLC.

As part of the findings in my PhD research work, I noted that attitudes and assumptions about ageing are heavily embedded within social cognitions. It is generally believed by Nigerians that age comes with inevitable physical and cognitive decay. Such assumptions as reported by Okoye (2002) affect the social and psychological world of older adults and can subsequently result in 'self-fulfilling prophecy'. This is to say that the older adult now behaves as the society expects. This may lead older adults to devalue themselves and have low self-image and self-esteem. They may even consider themselves a social burden and have a strong sense of "waiting for death" Similarly, Levy (2009) argues, in her Stereotype Embodiment Theory, that when age stereotypes and prejudices become internalised and reinforced all through someone's life, they grow old believing those prejudices about their ageing process and also have similar expectations and self-perceptions. All these may now manifest into poor health outcomes that may be more imaginary than real. More current research evidence by Sargent-Cox (2017) noted that it is the attitude toward ageing that drives the outcome.

Finally, we can't let older adults themselves off the hook when it comes to being their own worst enemy. Research findings by Okoye, (2012), Agbawodikeizu, et al (2018, 2019), Ebimgbo et al, (2019a) and Ebimgbo et al. (2021) seem to suggest that many older adults are not voluntary partners in matters that concern them. Stories abound in our research of how many of them make life difficult for caregivers and family members. Okoye, (2012) and Ebimgbo et al, (2021) have reported that many older males are not ready to leave their homes to that

of an adult child for ease of caregiving. My father-in-law for instance used to say whenever we invited him to our house “*Okenye adi apu olili*” (An older adult does not go on a pleasure visit). This shows the deeply ingrained assumptions that pervade the ageing space in Southeast Nigeria and elsewhere. Agbawodikeizu et al. (2018; 2019) reported that many older adults are not willing to draw up a will or make some pronouncements about how family properties will be shared for fear that they will die after such. This sometimes affects caregiving because some adult children may feel that they are not favoured and so may not contribute to the upkeep of their parents even when they are capable of doing so. Agbawodikeizu et al (2023) in their study exploring older adults’ perception of living in residential care facilities as an alternative care option report that many older adults would rather die than go to institutions for older adults, while some stigmatise and shame those who accept institutional care whereas this change of residence may actually help the older adult to live a better-quality life.

Many of us here who are 60 years of age and older have built our village six-room duplex with no single room downstairs. Even when we have a room or two downstairs, they are so small and there are stairs all over the ground floor and the entrance of each room. If we are indeed real and functional shareholders in Ageing PLC, we will know that the best rooms with en-suite bathrooms should be downstairs and should be wheelchair accessible. We still have shiny and expensive slippery ceramic tiles all over our houses with the hope that “It is not my portion” that we will fall and that “my God will not allow it”. So those who fell are those whose God allowed it to happen?

Many older adults here cannot be caught with a walking stick (especially women) no matter what, rather they will go for an umbrella, which can easily break and lead to a fall that may result in a broken hip and the attendant hip replacement surgery if the family can afford it. Some older adults will rather opt to die than wear a diaper or move around with a catheter. Some would rather scream and shout while talking to people than wear hearing aids. Why is this so? Are we then not our own worst enemy? I have tried to note that this again may be a result of societal labelling and expectations (Okoye, 2013a; 2014b). Many older adults have imbibed this and it has become their reality whereas it should not be. There are also cases where many older adults still refuse to change their lifestyle and diet to help them manage some health-related problems that come with ageing. Some will rationalise that they have lived long enough and that their death at 75 years or less is not a “miscarriage” (*Nwuo taa obu nwa gara?*).

In conclusion, there is growing proof from the research we have done over the years that societal concepts and stereotypes that are reinforced and perpetuated throughout a lifetime manifest as personal beliefs and attitudes about ageing

and the ageing process (Okoye, 2004c; Okoye et al, 2017; Ebimngbo et al, 2021). Therefore, the health and wellness of older people are being impacted by these perspectives and attitudes. Of course, this raises the question: What can we do to ensure that we have healthy and constructive attitudes towards ageing? Are there professionals who can help change the narrative?

Social work as a field of study and a profession

Social work is a helping profession. It is a science because social workers have a systematic method of engaging in their interventions. It is also an art because social workers are dealing with human beings, therefore they are required to possess various skills and techniques for getting individuals to work with them. The goal of social work is to promote and restore a mutually beneficial connection between people and their environment to improve everyone's quality of life (Okoye, 2014a; Okoye & Tanyi, 2012).

Social work is not the only profession concerned with how individuals function better in their environment, nor is it the only profession interested in social conditions and social problems. However, it is social work's simultaneous focus on and attention to both the person and the person's environment that makes social work unique among the various helping professions. Social work provides opportunities to work in many different settings with people whose problems, issues, and needs are diverse.

The following sentences and axioms can help explain social work better to a layperson

Social workers do not give men fish but teach them how to fish (Helping people to live and function optimally)

We love the sinner but hate the sin (Work with everyone)

Jack of all trades and master of all (Have a solution to every problem)

For every two people, a third should be a social worker (To make sure the relations between the two are smooth).

Social work is the art of listening and the science of hope (We listen and we work towards a better tomorrow)

Offer your hand, not your judgment (Be ready to help not to judge)

We believe in "Opportunity is now here" (There are no impossible situations rather every situation is an opportunity to make a difference)

It is generally believed that social work is born out of the need to help individuals optimise themselves in their environment and make the environments to possess the conditions that will enable people flourish. Social

workers do this by standing in the gap between the individual and the problem that is preventing the individual from achieving optimal performance. We say that once you have two people, the third person should be a social worker in order to oversee the smooth running of the relationship between the two people. Social workers are found everywhere because of the nature of their profession. Their training is generalist in nature so they are prepared to work anywhere. Some of the popular settings where you find social workers include schools, hospitals, organisations and industries, correctional institutions, communities, child and family services, gerontology, migration, mental health, and so on.

Social work is a profession built on six core values. These core values, which are the foundation of social work's unique purpose and perspective, include service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence. These values lay the moral groundwork for social workers and provide a summary of values that serve to define professional norms and direct their practice. These values support social workers in identifying ethical and legal responsibilities. The public can hold social workers accountable by using these values. These key social work values continually guide professionals as they strive to achieve the purpose of social work.

The purpose of social work as a profession is broad but can be narrowed down to four according to Pincus and Minahan (1973) in their seminal textbook titled *Social Work Practice: Model and Method*. They are as follows:

- i. To enhance the problem-solving and coping capacities of people.
- ii. To link people with systems that provide them with resources, services, and opportunities.
- iii. To promote the effective and humane operation of these systems.
- iv. To contribute to the development and improvement of social policy.

Therefore, all the activities that social workers carry out in their day-to-day practice can be subsumed under any of the four purposes mentioned above.

In order to be a responsible professional, the social worker must understand and function within the profession's accepted areas of expertise, such as love for people, maturity, self-awareness, interpersonal communication abilities, empathic understanding, eagerness to learn, assertiveness, perseverance, responsibility, optimism, enthusiasm, spontaneity, goodwill, open-heartedness, sincerity, creativity, adaptability, discretion, energetic and leadership potential. Also, social workers must possess some competencies to be effective. Some of these competencies include being knowledgeable about; theoretical orientations in social work and other related professions, human behaviour and the social environment, social welfare policies and services, human diversity, social work research, and social and economic justice.

Since social workers work with individuals whose lives they can make or mar with their intervention style. They are expected to abide by certain professional codes of practice and principles. These principles include; respect for the inherent worth and dignity of human beings, acceptance, individualisation, self-determination, non-judgmental attitude, confidentiality, purposeful expression of feelings, and control of emotional involvement. These principles guide social workers in whatever field they find themselves in helping them to provide effective and ethical services.

In order to make sure that social workers abide by the basic principles, all over the world social work has associations such as the International Association of Schools of Social Work, (IASSW), International Federation of Social Work (IFSW) and International Conference of Social Welfare (ICSW). In Africa, we have the Association for the Schools of Social Work in Africa and in Nigeria, we have the Nigeria Association of Social Workers (NASoW), The Association of Medical Social Workers of Nigeria (AMSWON), and The Association of Social Work Educators of Nigeria (ASWEN). All these associations are working in a facilitative role in the field of social work profession to uphold the social work values, principles, human rights of all people, and social justice. They also encourage social workers all over the world to promote the social work profession, adopt best practices, and follow the laid down code of ethics for effective practice.

Social workers operate at different levels. They are at the individual and family level, the group level and the organisation and community level. At each of these levels, the social workers can play several roles depending on the situation and the intervention methods being adopted. Some of these roles include counsellor, broker, manager, expert, leader, enabler, facilitator, motivator, researcher., negotiator. mediator, advocate. activist, enabler, educator, and case manager.

In conclusion, social work is a profession dedicated to helping individuals, families, and communities to improve their overall well-being. They try to provide effective services that meet the needs of their clients and foster a sense of trust and safety. Their ultimate goal is to achieve increased self-sufficiency, improved mental health, and an improved quality of life for their clients.

Challenges facing Social Work in Nigeria

Social work in Nigeria is neither a new nor an old profession. It has existed since the 1970s, when the civil war brought many problems that traditional

welfare institutions and existing governmental social services could not handle. This led the Nigerian Federal government to invite the United Nations Regional Adviser on Social Welfare Policy and Training to study the social welfare service situation in the country and advise on what should be done (Okoye, 2013b). The Adviser's report marked an important watershed in the history of social work in Nigeria as it led to the deployment of some staff members of the Ministry of Social Welfare overseas to acquire professional social work training and learn how to manage and organise social welfare agencies. Also, the federal government established a two-year diploma programme in Social Work in the Department of Sociology/Anthropology, University of Nigeria, Nsukka from the 1976/77 session. Later, the Federal School of Social Work Emene was established in 1982 to provide mid-level manpower social work services in the Ministries. Currently, over 30 higher academic institutions are providing social work training in the country.

According to Okoye (2019), the federal government enacted a policy that mandated every health institution owned by the federal government to operate a social welfare department that would deploy the services of only trained social workers. This order by the federal government has to a great extent assisted patients in the hospital to enjoy many benefits from social work services. This policy however has not been replicated in state-owned hospitals. This is a major challenge as many hospitals still do not have social work units thereby limiting the benefits patients can derive from having a social worker on their medical team. This has also limited employment opportunities for trained social workers.

To date, social work in Nigeria has no accrediting body to license practitioners and oversee the curriculum for training social workers in institutions of higher learning. Although the bill seeking to professionalise social work in Nigeria has been passed and signed into law, its implementation is yet to commence. This is a major challenge because social work in Nigeria is still an all-comers affair. Many tertiary institutions that train social workers in Nigeria do not operate under a harmonised curriculum. Without an accrediting body, no profession can grow because they are responsible for enforcing members' accountability in all fields of practice.

Okoye (2013b) and Onalu and Okoye (2022) have reported that there is still the need to develop new approaches to intervention and training that mirror the realities and challenges facing social workers in Nigeria. Currently, many of the models, theories, and perspectives we use in social work are all borrowed from Western textbooks. Therefore, a major challenge facing social work in Nigeria today is the indigenisation of the social work curriculum to suit Nigerian-trained students who wish to practice social work with Nigeria as focus (Nnama-

Okechukwu et al, 2022; Levy et al. 2022; Nnama-Okechukwu & McLaughlin, 2022; Onalu & Okoye, 2022; Chukwu, et al 2022).

Relating to the above is a lack of teaching materials, especially textbooks as reported by Okoye (2014a). Many libraries stock sociology textbooks thinking that this is the same as social work. Not only this, but most of our textbooks come from the United States of America and the United Kingdom. Okoye (2014a) stated that nearly all the case examples in some of these books are not what Nigerians can readily appreciate or understand and one of the challenges facing us as teachers is how to use local examples to portray some of the social work issues in such a way that the students will appreciate what is being said. This means that staff and students have to operate under very difficult conditions. This however has changed a little with the publication of Okoye, et al. (2017) *Social Work in Nigeria: Book of Readings*. This is a book written by Nigerian social workers for Nigerians and beyond. The text has also helped to introduce Nigerian social work to other social workers around the world.

Okoye (2014a) and Okoye and Ebingbo, (2022) noted that another major challenge facing social work in Nigeria is the poor input in fieldwork practice. Today in Nigeria, there are very few agencies where students can go for field practicum. These few that exist are manned by staff members who are not social workers by training and so cannot provide effective supervision as the students need. This sometimes brings about tensions as agency staff members tend to feel unnecessarily intimidated and insulted by students who had to teach “them their job”. Social work is a profession whose training requires more than 40% practicum experience. Therefore, without the availability of these agencies where these practical experiences can happen, the students will not learn enough to become seasoned social workers.

Lastly, another major concern is that social workers themselves are yet to be at the frontline of advocacies for optimal recognition and regulation of the profession. It seems as though our voices are not loud and strong enough. We are yet to vehemently speak to the powers that be about the nature and importance of our discipline, and why the discipline must be maximally respected. It is a fight that needs incremental wins ,Currently the first and second which are (a) to diligently have a defined knowledge base and sustainably produce manpower, and (b) to be recognised by law have achieved by my generation and the one before me. I am therefore, calling on the current generation and younger colleagues to join me as we achieve the next wins. There are studies that have documented the need for social workers to rally around a social work-centred/led coalition to scale up voice and correct anomalies that have continued to mar the full maturity of the profession in Nigeria (Agwu et al., 2023; Chukwu et al. 2022; Amadasun, 2022). The time to act is now.

Overall, the social work profession remains key to social transformation, social organisation, social care, and social justice in Nigeria. This includes the care of older adults, yet all the challenges we have mentioned above appear to be a major constraint in this regard.

What can social workers do to support Ageing PLC?

The uniqueness of social work among other helping professions lies in its focus on the social functioning of people and helping people interact more effectively with their environments. One group of people that social workers in Nigeria can work with as a result of this uniqueness are older adults and their families especially given the fact that filial care is the dominant care model in Nigeria. Despite their being “few” in number, older adults are vulnerable to several threats especially given the fact that the majority of them in Nigeria live in rural areas where poverty is rife, health services are lacking, and economic opportunities are inadequate (Okoye, 2004a). This exacerbates their other problems. Therefore, there is a need for a group of professionals who can help bridge the gap between older adults and other members of society.

One major area of social work that is gaining ground in other parts of the world as a result of population ageing is gerontological social work. This is a branch of social work that is concerned with maintaining and enhancing the quality of life of older adults and their significant others such as family members and caregivers (Schalach et al, 2000). Gerontological social workers are concerned with ameliorating those factors that may serve as barriers to the overall well-being of older adults. Here, interventions are usually directed at enhancing dignity, self-determination, personal fulfilment, quality of life, optimal functioning, and ensuring that, as much as possible, older adults live normal lives. Generally, gerontological social workers aim to achieve interventions that will be in line with the purpose of social work in the lives of older adults.

Research findings by Okoye (2012), Okoye and Asa, (2011), Ebimgbo and Okoye (2020), Ebimgbo et al, (2021), Ekoh et al (2021) Ekoh et al, (2023) and Agbawodikeizu, et al, (2023) indicate that many older adults in the southeast and by extension in Nigeria rely on their families for all the needed support. This reliance on family support sustains them not only in poverty as many of them do not have savings or other means of supplementing their finances, but also in the provision of emotional and social support. Based on this, the social worker needs to devise ways of helping the family so that this support will not dwindle. One such way is by advocating on behalf of the family for policies that will make their caregiving role easier. Social workers can push for direct payment of family caregivers by the government (Okoye, 2014a), tax rebates for children caring for older parents, and the development of programmes that

can sustain family resilience so that they can continue to provide the care and support the older adults need.

Using evidence from research by Okoye (2011) and Ebimgbo et al. (2019b; 2020), the role of social work in improving the lives of older adults in Nigeria cannot be overemphasised. We noted that social workers must pursue and help implement policies and programmes that recognise the challenges unpaid family caregivers especially women, face. We also recommended that social workers create awareness of the need for the inclusion of men in actively providing support in the filial care of older adults in various homes. Findings from various studies by Okoye and her students are consistent with their emphasis on support for filial care. However, we note that for it to be sustainable, it must not be attributed to the female gender alone. According to Ene et al (2023), the attribution of filial care to the female gender makes the practice non-inclusive, and arguably unsustainable in the long term. Social workers should through interventions and programmes encourage men to offer support to women, either by task-sharing, alternating responsibilities, or agreeing to paid care options. The sustenance of filial care demands that households be seen as one and that collective responsibility be encouraged (Eneh, et al, 2023). Therefore, social workers are expected to strengthen the traditional support and care systems and also reawaken African communalism which will debase the increased emphasis on ‘me and my family’ at the expense of ‘us and our family’ (Okoye et al., 2017).

Also, social workers in community development, besides working directly with individuals and groups, can endeavour to promote the responsiveness of organisations, communities, and institutions that older adults have cause to visit. This can be done through a variety of management, administrative, and community-organising roles including policy and programme development, programme management and evaluation, resource development, and strategic planning. This will make these organisations, communities and institutions “older adult friendly” through the provision of walkways, wheelchair access, and other assistive devices. Social workers can also liaise with opinion leaders to ensure that older adults are exempted from some of the ongoing financial obligations in the community, especially knowing that these older adults are financially dependent on their family members. Exempting them from communal financial responsibilities would alleviate the financial burdens on the family to a large extent.

Okoye and Nwafor (2023) have also argued that the Igbo philosophical tenets of *igwebuike* (number is strength) and *onye aghana nwanne ya* (be your brother’s keeper) are typical examples of context-specific ideas that were used to enforce and sustain care for older adults in the traditional society. Hence social workers should borrow from these ideals in their practice today especially

as studies have shown there is a decline in the system of care for the older adult in the contemporary Igbo society which is detrimental to the well-being of older adults. Social work professionals have a mandate to provide a safety net for older adults in our society. Therefore there is a need for social workers to embark on the sensitisation of community members of the *igwebuike* and *onye aghana nwanne ya* philosophy. This may go a long way in curbing some of the challenges older adults are facing currently, especially the problem of elder abuse. As an empowering profession, social workers can inculcate in members of the public the need to make adequate financial plans for their end of life. This could be achieved through personal savings during their active phase of life, acquiring landed properties, building commercial houses, etc. through mortgaging. This will dissuade the financial dependency of older adults in the later days of life.

Social workers can collaborate with other stakeholders, such as human rights activists, civil society organisations, and lay attorneys, to facilitate the implementation of the National Policy on Ageing for Older Persons for the benefit of Nigerian older adults. This way, older adults would be shielded from the social injustice brought about by the lack of policies on issues affecting them. Also through this collaboration, social workers and other stakeholders can canvass for a reappraisal of the current pension scheme to accommodate all older adults and not just those who worked for the government.

Medical care and services are currently unaffordable for many older adults in Nigerians who find it difficult to pay for the medical services they need. Therefore, medical social workers need to be adequately informed about affordable services in the community to enable them to recommend such services to older adults, especially the poor and indigent. Often the most important service an older adult and their family members need is simply assistance in negotiating an overwhelmingly hospital bureaucratic system (Mellor & Linderman, 1999). Social workers are well placed to render this service to them. They can act as liaisons between older adults, their families, and the hospital system. Social workers, with their training in interpersonal relationships, group work, and (often) interdisciplinary team skills, play a vital role in the development and functioning of the interdisciplinary team unit in hospitals to meet the needs of older adults who visit the hospital. The social worker can provide key leadership in identifying all the psychosocial issues that are crucial to the wellbeing of older adults who are in the hospital. The social worker's roles within this team can include convener, facilitator, and expert.

Studies by Okoye (2013a), Okoye and Asa (2011) and Ebimgbo et al. (2019a, 2022b) found that caregivers undergo a lot of stress, which sometimes results in their not having sufficient time for themselves as well as developing negative

attitudes towards older adults. Social workers, therefore, can teach family caregivers the basic social skills and competencies required to cope with this stress. Since filial care is the current dominant care option in Nigeria, this should be seen by social workers as a major area of concern. Findings by Okoye (2012), Okoye and Asa (2011) and Ebimngbo et al. (2019b, 2022a) suggest that elder abuse usually results when the caregiver is stressed.

One of the fallouts of filial care is the issue of elder abuse as reported by Okoye and Echezona, (2010). Many older adults are abused by their family members. Studies by Okoye and Akanni (2009), Okoye and Asa (2011) and Ebimngbo and Okoye (2017) seem to suggest that many of the family members of older adults are not aware of what constitutes elder abuse. Therefore, the need for social work professionals becomes imperative. They can collaborate with other professionals and civil society organisations to educate the public on what constitutes elder abuse through various means such as television talk shows, banners, social media, and so on.

Social workers need to educate policymakers and community members that older adults are not a homogenous group. The needs of those who are 60 years to 70 are quite different from the needs of those who are 80 to 90 years and also those who are 90 years and older. The interventions and service infrastructure for various segments of the older population must be built on an understanding of the complex differences that subsets of the older population have in their need and demand for services. There is a need for massive enlightenment on this by social workers in collaboration with other civil society organisations. This will help put these ageing subsets into perspective for policymakers and members of the public, especially charity organisations and philanthropists who once in a while, give financial and material supports to older adults.

Research findings by Okoye (2002; 2004c; 2005a; 2005b) and Okoye and Obikeze (2005) show that young people possess ageing stereotypes that are detrimental to the overall goal of Ageing PLC. Social workers can check this trend by drumming up support for the inclusion of ageing topics in primary and secondary civic education curricula, as noted by Okoye (2005b). At the university level, social workers can campaign for the inclusion of a topic in the compulsory General Studies course in Conflict and Peace Studies, Humanities, and Nigerian Peoples and Culture. That way every undergraduate is made aware that they are shareholders in Ageing PLC.

Earlier we noted that there is a need to have adult day care centres in different communities where older adults can visit periodically to meet older members of the community. This will help ease the loneliness that has been reported by Ebimngbo et al. (2021). Social workers know the implications of loneliness and

the need to safeguard against it. They can work in these daycare centres by providing counselling to older adults whom loneliness affects. They can focus on the strengths of older adults to promote resilience in times of loneliness. This they do by building on the resilience that the older adults have developed from coping with previous adversities, and they strive to place self-determination as the central value. Social workers can also improvise preventive measures by identifying ways to engage older adults in such centres and building a network of relationships providing social support by their kind in adult-daycare centres. Social workers can also encourage family members to get their older adults to attend daycare centres. Social workers can help facilitate the designing and building of such daycare centres for older adults.

Also apart from adult day care centres, social workers can facilitate the development of other community-based services for older adults. Okoye (2013a) found that community-based services are crucial in helping older adults living with caregivers maintain functionality and achieve successful ageing. Community-based services were reported by Okoye (2013a) to be instrumental in providing older adults with some social and emotional benefits that can help to lessen their feelings of loneliness, boredom, and solitude, and improve their quality of life. It is imperative that social workers have knowledge of community resources and how to access them for the benefit of older adults. Thus, social workers must press the Nigerian government to support the establishment of community-based services for Nigerian older adults as is the practice in other countries around the world including Britain, Israel, Sweden, and China (Okoye, 2013a). It is important to note that social workers through lobbying, can ensure that community- and home-based, geriatric centres, as well as health care centres with adequate facilities, are established in various communities to provide proper health treatment and services for older adults either free or at an affordable cost.

How can we as individuals get involved in the Ageing PLC

Reports from Okoye (2013a), Okoye, et al (2017), Okoye and Ebimgbo, (2022) and Mbam et al (2022) seem to suggest that legislation and government-led action for the care of older adults in Nigeria are still very rudimentary. They have all argued for the need for an improvement in government-led initiatives that will be enduring. While we wait for these to happen, I suggest that as individuals and shareholders in the Ageing PLC, we can get involved in the following ways discussed below:

Research findings by Okoye, et al (2017), Ebimgbo et al, (2020) Ebimgbo and Okoye (2021), and Agbawodikeizu et al. (2023) have suggested that many older adults want their children to call them on the phone, send them money and also visit them often. In other words, having a supportive and understanding family is important for older adults. It enables them to have a sense of belonging

despite losses in capacity. Therefore, we can all strive to make time to call our older relatives, sometimes visit them, and also send money to them, even if the person is financially buoyant. We can start a campaign tagged **#callanolderadulttoday#** **#visitanolderadulttoday#** **#sendmoneytoanolderadulttoday#** This way we start laying the foundation for Ageing PLC so that we can also enjoy the dividends (our children will also call us) in the future.

Another way to get involved is by supporting the provision or by providing if we can, safe and accessible private and public buildings, transport, open spaces, and places that are easy to walk around for older adults. Okoye and Ebimngbo (2022) have reported that many older adults are afraid to leave their homes because of access to other areas in their environment. In Nigeria today many public buildings are without ramps while in many urban centres, walkways are just fancy and really not accessible. The same can be said for many of our private residences. We can start by making our homes accessible to our older relatives, our offices, our churches, our markets, our business premises, and so on. We can be involved by thinking of ways that may reinforce the adaptation and psychosocial growth of older adults.

Research by Okoye (2014b), Okoye and Asa, (2011) and Okoye, (2013a) has shown that the establishment of an adult-daycare centre and halfway homes is a necessity in our local communities, as many older adults and caregivers especially advocated for them in our interviews. Some of the caregivers noted that such centres will act as a source of respite for them as they can rest and relax during the period the older adult will be there. I have also advocated in several presentations on the need to encourage private business owners to establish such homes for profit-making under the supervision of a government agency like the Senior Citizens Centre or other related agencies. This can yield a lot of money for proprietors just like daycare centres for children are yielding money. It will also provide employment for the workers who will be employed there.

A halfway home is a home where an older adult can reside for a while if the caregiver has travelled, or is ill and unable to care for the older adult for some time. It is not a permanent home for older adults. The maximum stay in a halfway home is usually three months. Some women have not been able to go to their daughter's *Omugwo* (post-partum care) or attend some important functions because they have no one to care for their mother who is living with them. This can sometimes breed negative attitudes towards the older adult by other family members especially the immediate family of the primary caregiver. About July 14, 2023, a video of a woman flogging a naked aged woman repeatedly and throwing buckets of water on her as she lay on the floor went viral. The woman was later arrested by the police for abusing the woman who

happens to be her mother (Fraze, 2023). When she was interviewed, she expressed her frustration in the caregiving process. Maybe a halfway home or adult daycare centre could prevent such saddening events.

Currently, our society appears not to be ready for permanent homes for older adults as research findings from some studies have shown (Eneh et al, 2022; Agbawodikeizu et al, 2023; Onalu et al 2023). However, given the problems and cases of abuse many older adults experience in the hands of family and paid caregivers it may not be a bad idea to start giving it some thought. In fact, some older adults as reported by Agbawodikeizu et al (2023) noted that they would rather stay in such homes than suffer at the hands of paid caregivers. A recent case in point where a caregiver killed the care receiver was that of the mother of former Edo State governor, Madam Oredola Igbinedion, who was murdered by her caregiver on December 2, 2021, in her home. Who knows if she was residing in an Old People's Home, the tragic incident may not have happened. These homes are income-generating and with government supervision, they will not be as bad as we think. This is also one way of generating employment in Nigeria.

It is also possible to get involved in the ageing business by teaming up with other shareholders to start a training institute for caregivers where they can take short-term courses. Okoye (2013a) reported that the majority of caregivers for older adults are not trained in any ageing-related course. Rather the only requirement was for them to agree to do the job of caregiving. Lack of training and knowledge has been reported by Eneh et al, (2023) to be a major challenge in managing and coping with the health and nutritional needs of older adults in their care. Such a training institute can partner with some of these employment agencies from which many adult children source for caregivers for their older parents and relatives. This training, of course, will not be free. This way, we create employment, and at the same time ensure quality care for older adults.

Conclusion

Let us as individuals begin to see ourselves in every older adult around us (healthy or frail) knowing that that will be us in the next few decades if we are as lucky as they have been to live as long as they have. Let us join in the collective advocacy against ageism. We have to constantly remind ourselves and the people around us that ageing is not a problem or disease to be cured; ageing is living. The reason is that people with positive feelings about ageing do better on memory tests, heal quicker, live longer and fulfilled (Diener et al, 2017).

Ageing brings remarkable improvement, increased knowledge, expertise, wisdom, and happiness. More so, older adults direct their cognitive resources such as attention and memory to information resources. Let us begin to train

our minds to look forward to ageing knowing that it is inevitable – without any fears or negative feelings about it. Since the worries of life do not allow us to actually begin enjoying life at 40, let us change the phrase from “life begins at 40” to “life begins whenever you feel like living it” – whether it is at 40, 60, or even 80, it’s all in the mind! That way, the 60-year-olds will not be considered too old to be taken care of and the 80-year-old will not feel as if the worst has happened simply because the years have come and gone.

Finally, let us as individuals team up to nurture and maintain this business (Ageing PLC) we jointly own but are unaware we do.

References

- Abdulazeez, N. (2014). Pension scheme in Nigeria: History, problems and prospects. *Arab Journal Business Management Review*, 5(2), 1-6.
- Agbawodikeizu, P. O., Agwu, P.C., Okoye, U.O & Oyeoku, E. K (2018) Perception and attitudes to end of life planning and implications for social work practice in Enugu State, Nigeria. *International Social Work*, 62(2), 892–904. <https://doi.org/10.1177/0020872818755862>
- Agbawodikeizu, P., Agwu, P., Okoye, U. & Igwe, I. (2019). End-of-life in Nsukka town of Nigeria and Nigerian-based social work practice Controversies in preparing for end-of-life in Nsukka town, Nigeria and suggestions for Nigerian-based social work practice. *Social Work & Social Sciences Review*, 20(2), 95-112. DOI: 10.1921/swssr.v20i2.1140.
- Agwu, P. C., Emodi, N. V. & Okoye, U. O. (2021). Climate change and effects: A qualitative experience of selected older adults. In Chaiechi, T (Ed), *Economic Effects of Natural Disasters Theoretical Foundations, Methods, and Tools*. London: Elsevier, Academic Press.
- Agwu, P., Levy, S., & Okoye, U. (2023). Using Preventive, Protection, Prosecution and Partnership Framework to Explore the Successes and Constraints of Social Work to Address Sex Trafficking in Edo, Nigeria. *The British Journal of Social Work*, bcad189. <https://doi.org/10.1093/bjsw/bcad189>.
- Akukwe, F.N. (1992). *Senior Citizens: A Policy Dilemma*, Onitsha: Veritas Printing and Publishing Co. Ltd.
- Alexandre, S., & Asghar, Z. (2018). International policy frameworks on ageing: assessing progress in reference to the Madrid International Plan of Action on Ageing. *Журнал исследований социальной политики*, 16(1), 141-154.
- Ali, A. A., Jones, K. C., & Lu, F. G. (2018). Sociocultural Perceptions of Normal Aging—A Review and Media Presentation. *The American Journal of Geriatric Psychiatry*, 26(3), S22-S23.
- Amadasun, S. (2022) Social work interventions for human trafficking victims’ in Nigeria, *International Social Work*, 65(2), 343–355.

- Bar-Tur, L. (2021). Fostering well-being in the elderly: Translating theories on positive aging to practical approaches. *Frontiers in Medicine*, 8, 517226.
- Ben-Harush, A., Shiovitz-Ezra, S., Doron, I., Alon, S., Leibovitz, A., Golander, H., & Ayalon, L. (2017). Ageism among physicians, nurses, and social workers: Findings from a qualitative study. *European journal of ageing*, 14, 39-48.
- Butler, R. N. (1969). Age-ism: Another form of bigotry. *Gerontologist*, 9(4, Part 1), 243-246.
- Brown, M. & Frothingham, S. (July 24, 2023). *Chronological Aging and Biological Aging*. <https://www.healthline.com/health/chronological-ageing>.
- Chukwu, N. E., Levy, S., & Agbawodikeizu, P. U. (2022). Social work education in Nigeria and the search for enhanced local relevance: perspectives from social work academics. *Social Work Education*, 1-17. DOI: 10.1080/02615479.2022.2103528.
- Cuddy, A. J., Norton, M. I., Fiske, S. T. (2005). This old stereotype: The pervasiveness and persistence of the elderly stereotype. *Journal of Social Issues*, 61(2), 265-283.
- Diener, E., Pressman, S. D., Hunter, J., & Delgado-Chase, D. (2017). If, why, and when subjective well-being influences health, and future needed research. *Applied Psychology: Health and Well-Being*, 9(2), 133-167.
- Ebimgbo, S. O., & Okoye, U. O. (2017). Perceived factors that predict the availability of social support when it is needed by older adults in Nnewi. South-East Nigeria. *Nigerian Journal of Social Sciences*, 13, 10–18. <https://journals.aphriapub.com/index.php/NJSSUNN/article/view/900>.
- Ebimgbo, S. O., Atumah, O. N., & Okoye, U. O. (2018). Policy implication of inadequate social support systems for older adults in Nnewi LGA, Anambra State. *Nigerian Journal Public Administration and Local Government*, 19, 109–127.
- Ebimgbo, S. O., Chukwu, N. E., Onalu, C. E. & Okoye, U. O. (2019a). Perceived Challenges Associated with Care of Older Adults by Family Care-givers and Implications for Social Workers in South-east Nigeria. *Indian Journal of Gerontology*, 33(2), 160-177.
- Ebimgbo, S. O., Onalu, C. E., Atama, C. S. & Okoye, U. O. (2019b). Forms and predictors of older adults' maltreatment in Nnewi, South-East, Nigeria: Implications for social work practice. *Journal of Social Work in Developing Societies*, 1(2), 26- 41.
- Ebimgbo, S. O., Obi-Keguna, C. N., Chukwu, N. E., Onalu, C. E., Abonyi, S. E., & Okoye, U. O. (2019c). Culture-based social support to older adults in Nnewi, South-East, Nigeria. *African Population Studies*, 33(2), 4891–4900. <https://doi.org/10.11564/33-2-1402>.
- Ebimgbo O., Agwu, P., Chukwu, N. & Okoye, U. (2020). Appraising sufficiency of financial support for older adults in Anambra State, Nigeria, *Ageing International*, DOI 10.1007/s12126-020-09379-6.

- Ebingbo, S. O., Chukwu, N. E. & Okoye, U. O. (2021). Gender differences in family support to older adults and implications for social work in south-east Nigeria. *Journal of Aging Studies*, 59, 100979.
- Ebingbo S.O. & Okoye U.O. (2021) Aging in Nigeria. In: Selin H. (eds) *Aging Across Cultures. Science Across Cultures: The History of Non-Western Science*, vol 10. Springer, Cham. https://doi.org/10.1007/978-3-030-76501-9_2.
- Ebingbo, S. O., Nnama-Okechukwu, C. U., Onalu, C. E., & Agha, A. A. (2022a). Perceived Adequacy of Material Support Systems Available to the Childless Older Adults in Southeastern Nigeria: Implications for Social Workers. *Ageing International*, 1-21.
- Ebingbo, S. O., Atama, C. S., Igboeli, E. E., Obi-keguna, C. N., & Odo, C. O. (2022b). Community versus family support in caregiving of older adults: Implications for social work practitioners in South-East Nigeria. *Community, Work & Family*, 25(2), 152-173.
- Ekoh, P. C., Okoye, U. O., Agbawodikeizu, P. U., George, E. O., & Ejimkaraonye, C. (2023). Ageing in displacement and gaps in support: support for older people in protracted displacement in New-Kuchingoro IDP camp, Abuja, Nigeria. *International Journal of Migration, Health and Social Care*. <https://doi.org/10.1108/IJMHS-05-2021-0048>.
- Ene, J. C., Chukwu, N. E., & Ajibo, H. T. (2022). Exploring care management for older adults with illnesses as family members' responsibility. The need for social workers' support services in Nigeria. *European Journal of Mental Health*, 17(3), 38–51. <https://doi.org/10.5708/EJMH.17.2022.3.3>
- Eromosele, F. (October 5, 2021). *Nigeria's pension fraud hits N157bn—EFCC* <https://www.vanguardngr.com/2021/10/just-in-nigerias-pension-fraud-hits-n157bn-efcc/>
- Federal Republic of Nigeria [FGN] (2016). *National Social Protection Policy (NSPP)*, Ministry of Budget and National Planning. Abuja: FGN. <https://www.social-protection.org/gimi/Ressource>
- Frazer, B (July 16, 2023). *Daughter arrested for maltreating aged mother in Anambra*. <https://www.channelstv.com/2023/07/16/daughter-arrested-for-maltreating-aged-mother-in-anambra/>
- Gu, D, Andreev K, & Dupre ME. (2021). Major trends in population growth around the world. *China CDC Weekly* 3(28):604-613. doi: 10.46234/ccdcw2021.160. PMID: 34594946; PMCID: PMC8393076.
- He, W. (April 13, 2022). *Increases in Africa's older population will outstrip growth in any other world region*. <https://www.census.gov/library/stories/2022/04/why-study-aging-in-africa-region-with-worlds-youngest-population.html>
- Iwuagwu, A., Okah, P., Nnama-Okechukwu, C., Chukwu, N., Agha, A., Anazonwu, N., Onalu, C. & Okoye, U., (2023). Barriers to Social Inclusion

- among Older Adults with Disabilities in Imo State, Nigeria: A Descriptive Phenomenological Inquiry. *Scandinavian Journal of Disability Research*, 25(1), p.132–146. DOI: <https://doi.org/10.16993/sjdr.997>.
- Kalaycıoğlu, H. S. (2019). Social Aspects of Ageing. *Ageing in Developing Countries*, 4 (1), 18-25.
- Karemer, L. (2023). *African countries with the lowest median age as of 2023* <https://www.statista.com/statistics/1121264/median-age-in-africa-by-county/>
- Levy, S., Okoye, U. O., & Ingram, R. (2022). Making the ‘local’ visible in social work education: Insights from Nigeria and Scotland on (Re) balancing and contextualising indigenous and international knowledge. *British Journal of Social Work*, 52(7), 4299-4317.
- Levy, B. (2009). Stereotype embodiment: a psychosocial approach to aging. *Current Psychological Directions in Science*, 18, 332–336. doi:10.1111/j.1467-8721.2009.01662.x.
- Mellor, M. J., & Lindeman, D. (1999). The role of the social worker in interdisciplinary geriatric teams. *Journal of Gerontological Social Work*, 30(3-4), 3-7.
- Menassa, M., Stronks, K., Khatmi, F., Díaz, Z. M. R., Espinola, O. P., Gamba, M., & Franco, O. H. (2023). Concepts and definitions of healthy ageing: a systematic review and synthesis of theoretical models. *EClinicalMedicine*, 56.
- Mitina, M., Young, S., & Zhavoronkov, A. (2020). Psychological aging, depression, and well-being. *Ageing (Albany NY)*, 12(18), 18765–18777.
- Ministry of Employment and Social Welfare. (2010). *National ageing policy. Ageing with security and dignity*. https://s3.amazonaws.com/ndpc-static/pubication/Ageing+Policy_July+2010.pdf.
- National Senior Citizens Centre Act, 2017. (2018). [Act No. 24]. *Federal Republic of Nigeria Official Gazette*. <https://gazettes.africa/archive/ng/2018/ng-government-gazette-dated-2018-02-20-no-26.pdf>
- Nickel, c., Arendts, G., Jacinta Lucke & J., Mooijaar, S. (22 February 2021). *Silver Book II: Geriatric syndromes*. <https://www.bgs.org.uk/resources/silver-book-ii-geriatric-syndromes>.
- Nnachi A. I. & Okoye, U. O. (2013). “*Growing elderly population and the imperative of educating social workers to promote successful aging in Nigeria*”. Paper presented at the 2nd National Conference of the Nigerian Association of Social Work Educators (NASWE). On the theme Social Work Practice in a Diverse Society: Meeting the Challenges of Contemporary Nigeria From Wednesday 13th –Saturday 16th March, 2013 at The Banquet Hall, University of Benin, Benin-city.
- Nnama-Okechukwu, C., McLaughlin, H. Okoye, U. Hendricks, H., Imaan, L., Malinga, T., Wizi-Kambala, A., Ebimgbo, S., Veta, O. & Imo, N. (2022). Indigenous knowledge and social work education in Nigeria: Challenges

- and need for sustainable development. *International Social Work*. <https://doi.org/10.1177/00208728221098511>
- Nnama-Okechukwu, C. U., & McLaughlin, H. (2022). Indigenous knowledge and social work education in Nigeria: made in Nigeria or made in the West?. *Social Work Education*, 1-18. Doi; 10.1080/02615479.2022.2038557.
- Nseyen, N. (May 5, 2023). *N2.1bn pension fund fraud: Appeal Court upholds Maina's conviction* <https://dailypost.ng/2023/05/05/n2-1bn-pension-fund-fraud-appeal-court-upholds-mainas-conviction/>
- Ochojila, A. (09 November 2021). *Court jails Maina eight years for N2.1b fraud*. <https://guardian.ng/news/court-jails-maina-eight-years-for-n2-1b-fraud/>
- Ofodu, L. (June 1, 2021). *Nigeria's pension fraud* <https://punchng.com/nigerias-pension-fraud/>
- Ojo, J. (17th August 2022). *Mindboggling mismanagement of funds at NSITF* <https://punchng.com/mindboggling-mismanagement-of-funds-at-nsitf/>
- Okoye, U. O. (2002). *Perception of aging and knowledge of aging issues among the Nigerian youth: Implications for social policy*. Unpublished doctoral dissertation, University of Nigeria, Nsukka.
- Okoye, U. O (2003). Globalisation and the care of the Elderly in Nigeria In Maduagwu, M.O. and Onu, V. C. (eds) *Fulbright Alumni Book of Readings No.1 Globalization and National Development in Nigeria*, A publication of FULBRIGHT Alumni of Nigeria (FAAN) pp 115-127.
- Okoye, U. O. (2004a). The erosion of traditional forms of care for the elderly and its implication for the elderly in Nigeria. *Conference proceedings of the African Conference on Aging: Rapid ageing and the changing role of the elderly in African households*. 2004, Omoluabi, E, Makiwane, M & Bah, S. (eds) pp 224-236.
- Okoye, U. O (2004b). Social Security for the Elderly in a Democratic Nigeria. In Maduagwu, M.O. and Mohammed, A. S. (eds) *Fulbright Alumni Book of Readings No.2 Challenges and Prospects of Democratisation in Nigeria*, A publication of FULBRIGHT Alumni of Nigeria (FAAN) pp 190-200.
- Okoye, U. O. (2004c). Knowledge of aging among secondary school students in south-eastern Nigeria. *Educational Gerontology*, 30, 481-490.
- Okoye, U. O & Obikeze, D. S. (2005). Stereotypes and perception of the elderly by the youth in Nigeria: Implication for social policy. *Journal of Applied Gerontology* (SAGE Publications), 24(5), 439-452.
- Okoye, U. O. (2005a). Young children's perception of the elderly: A Comparison with data from the United States and Southeastern Nigeria: *Journal of Intergenerational Relationships*, (3), 7-24,
- Okoye, U. O. (2005b). Factors influencing secondary school student's knowledge of older persons in Eastern Nigeria. *Nigerian Journal of the Social Sciences*, 3(1), 145-161.

- Okoye, U. O & Akanni, I. A. (2009). Willingness of youths to support aged parents: A study of undergraduates in South-Eastern Nigeria. *Nigerian Journal of the Social Sciences*, 5(2), 101-114.
- Okoye, U. O & Echezona I.R. (2010). "What constitute elder abuse: a study of knowledge and preventive mechanism known to young people". Paper presented at Safety 2010 World Conference on the theme Safe and Equitable Communities held on 21 - 24 September 2010 at Queen Elizabeth II Conference Centre, London, UK.
- Okoye, U. O. (April, 2011). Gender differences in the care-giving of ageing parents: A study of adult off-springs in Nsukka town of Enugu state. *International Journal of Health and Social Inquiry*, 1(1), 1-10.
- Okoye, U. O. & Tanyi, P. I. (2011). Awareness of social work profession in Nigeria: A challenge to social workers in Nigeria. *Journal of Nigerian Social Work Educators*, 1(1), 85-100.
- Okoye, U. O. & Aghedo G. (July, 2011). Workers' perception of the Pension Reform Act, 2004: A study of Prisons' staff in Enugu State. *Nigerian Journal of the Social Sciences*, 7(1), 77-89.
- Okoye, U. O. (2012). Family care-giving for ageing parents in Nigeria: gender differences, cultural imperatives and the role of education. *International Journal of Education and Ageing* 2 (2), 139–154.
- Okoye, U. O. (2013a). Community-based care for home bound elderly persons in Nigeria: A policy option. *International Journal of Innovative Research in Science, Engineering and Technology*, 2 (12), 7089–7091. <http://www.Ijirset.com/upload/2013/december/4-Community.pdf>.
- Okoye, U.O. (2013b). Trends and challenges of social work practice in Nigeria. In Cree, V.E. (ed), *Becoming a social worker: Global Narratives* (Chapter 17, pp 149 -157). London: Routledge, Taylor and Francis Group.
- Okoye, U. O. (2014a). Indigenizing social work education for better social service provisioning in Nigeria. In: Omuta, G.E.D. (Ed.), *perspective on bsocial services in Nigeria* (pp.883-895) Ibadan: HEBN Publishers Plc.
- Okoye, U. O. (2014b). Financial incentives to support family care-givers of older adults in Nigeria: A policy consideration. *Research on Humanities and Social Sciences*, 4(4), 55-62. <http://www.iiste.org/Journals/index.php/RHSS/article/view/11302/11610>.
- Okoye, U., Ebimgbo, S. & Ene, J. (2017). Social work with older adults. In Okoye, U., Chukwu, N., & Agwu, P. (Eds.). *Social work in Nigeria: Book of readings* (pp. 160–171). Nsukka: University of Nigeria Press Ltd.
- Okoye, U. O. (2019). Health care social work in Nigeria. In Winnett, R., Furman, R., Epps, D., and Lamphear, G. (Eds) *Health Care Social Work: A Global Perspective*. New York: Oxford University Press.
- Okoye, U. O., & Ebimgbo, S. O. (2022). Contextualising Social Work Fieldwork Practicum: Innovations, Challenges, and Perspectives from Nigeria. *The Routledge Handbook of Social Work Field Education in the Global South*, 329-342.

- Okoye, U. O. & Nneka, F. N. (2023). Philosophies guiding the model of care for older adults in traditional Igbo society: A guide for social work decolonisation agenda. In Twikirize, J. M., Tusasiirwe, S. & Mugumbate, R. (Eds). *Ubuntu Philosophy and Decolonising Social Work Fields of Practice in Africa* (pp. 150-162). Routledge.
- Olaiya T. T. (03 May 2021). *BBC documentary exposes pension corruption in Cross River* <https://guardian.ng/news/bbc-documentary-exposes-pension-corruption-in-cross-river/>
- Olasehinde, F. M., & Olaniyi, D. E. (2019). Evaluating the benefits of the old and the new pension schemes in Nigeria. *Ekonomski horizonti*, 21(1), 3-14.
- Onalu, C. E., & Okoye, U. O. (2022). Teaching and practicing social work in Nigeria: Challenges and prospects. *Journal of Social Work in Developing Societies*, 4(1), 68-83.
- Pincus, A., & Minahan, A. (1973). *Social Work Practice: Model and Method*. Itasca, IL: Peacock.
- Population Reference Bureau. (2020). *Countries with the oldest population in the world*. <https://www.prb.org/countries-with-the-oldest-populations/>.
- Rose, M. R. (2009). Adaptation, aging, and genomic information. *Aging I*, 444–450.
- Rose, M. R., Flatt, T., Graves, J. L., Greer, L. F., Martinez, D. E., Matos, M., & Shahrestani, P. (2012). What is aging?. *Frontiers in genetics*, 3, 134.
- Rowe, J. W., & Kahn, R. L. (1997). Successful aging. *The Gerontologist*, 37, 433–440.
- Sargent-Cox, K. (2017). Ageism: we are our own worst enemy. *International psychogeriatrics*, 29(1), 1-8.
- Schalach, A., Damron-Rodriguez, J., Robinson, B., & Feldman, R. (2000). Educating social workers for an aging society. *Journal of Social Work Education*, 36, 521-538. DOI: 10.1080/10437797.2000.10779026.
- Shehu, G. (2021). Buhari establishes centre for Nigeria’s senior citizens, appoints board members [Press Release]. <https://www.premiumtimesng.com/news/more-news/464950-buhari-establishescentre-for-nigerias-senior-citizens-appoints-board-members.html>.
- South African Government. (2017). *Old age pension*. <http://www.gov.za/services/social-benefitsretirement-and-old-age/old-age-pension>.
- Tanyi, P. L., André, P., & Mbah, P. (2018). Care of the elderly in Nigeria: Implications for policy. *Cogent Social Sciences*, 4(1), 1555201. <https://doi.org/10.1080/23311886.2018.1555201>.
- The Cable (May 04, 2021). *Retirement hell: BBC Africa Eye uncovers corruption in pension system* <https://www.thecable.ng/retirement-hell-bbc-africa-eye-uncovers-corruption-in-pension-system>.
- Togonu-Bickersteth, F., & Akinyemi, A. I. (2014). Ageing and national development in Nigeria: Costly assumptions and challenges for the future.

- African Population Studies*, 27(2), 361–371. <http://aps.journals.ac.za/pub/article/view/481>. <https://doi.org/10.11564/27-2-481>.
- United Nations (1991). *Human Rights Council, Report of the Independent Experts on the Enjoyment of all human rights by older persons*. Retrieved from <https://documents-dd.ny.un.org/doc/UNDOC/GEN/G16/147/83/PDF/G1614783>.
- United Nations. (2002). *Political declaration and Madrid international plan of action on ageing, second world assembly on ageing*. New York: United Nations.
- United Nations (2002). *Report of the Second World Assembly on Ageing*. Madrid. 8-12 April 2002. New York: United Nations.
- United Nations Department of Economic and Social Affairs [UNDESA]. (2019). *World population prospects 2019 (Custom data acquired via website)*. <https://population.un.org/wpp/>
- Urtamo A, Jyv akorpi SK, Strandberg T.E. (2019). Definitions of successful ageing: a brief review of a multidimensional concept. *Acta Biomedica*, 90(2), 359-363. doi: 10.23750/abm.v90i2.8376. PMID: 31125022; PMCID: PMC6776218.
- World Health Organization (2023). *Health data overview for the Federal Republic of Nigeria* <https://data.who.int/countries/566>.
- World Health Organisation [WHO] (2020). *Decade of healthy ageing: Baseline report*. <https://www.who.int/publications/i/item/9789240017900>.
- World Health Organisation (1 October, 2022). *Ageing and health* <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health>.
- World Health Organization. (2021). *Global report on ageism*. <https://apo.org.au/sites/default/files/resource-files/2021-03/apo-nid311614.pdf>.
- Xinhua. (2019). *Chinese civil affairs minister pledges enhanced elderly care service quality*. XinhuaNet. http://www.xinhuanet.com/english/201901/03/c_137717474.htm