Community Q&A:Covid-19

HEAR FROM THE EXPERTS

PriHEMAC

PRIMARY HEALTH CARE& MANAGEMENT CENTRE

Elderly Friendliness

Changing the Elderly Narrative featuring Dr. Martins

Understanding Covid-19:

SIGNS AND SYMPTOMS
PREVENTION
ELDERLY AND COVID-19

SOCIAL, EMOTIONAL AND PHYSICAL NEEDS

for the Elderly in Nigeria

Magazine Design by Amanda M. Hart

EXECUTIVE DIRECTOR PROFILE, DR MARTINS OLUSOLA OGUNDEJI

Dr. Martins O. Ogundeji holds a B.Sc. (Nsg) at the University of Ibadan (UI); M. Sc.(Community Mental Health), A Master's of Public Health (MPH), and Doctor of Public Health(Dr.PH) at Columbia University, New York, USA.Between 1970 and 1980, he served as a lecturer at the School of Nursing and in 1980 and 1998, as Health Planning Officer. He was also the first acting registrar of the National Community Health Practice Board. Later he became one of the 4 Zonal Coordinators of FMOH and retired as a Director of National Primary Health Care Development Agency/Federal Ministry of Health (NPHCDA/FMOH).Between 1998 and 2009, he served as a Part-time Lecturer for Post-graduate students of theDepartment of Epidemiology, from 2001 to date at the Department of Nursing College ofMedicine, UI, and from 2016 to date, Babcock University, Ilishan, Ogun State. He has established a Training Institute for Health Caregivers of the Elderly and Convalescenceand PriHEMAC Elderly Friendly Ambassador (PEFAs). Since 2015, he has initiated aPartnership between Molete Baptist Church Ibadan (MBCI) and PriHEMAC for CommunityCare of the Elderly Initiative, which has metamorphosed to the 'Elderly Friendly Organizations'Model. This model consists of five stages to help organizations get on the right track to effectively promoting elderly friendliness and meeting the needs of these community members. He has helped PriHEMAC utilize public-private strategy with multilateral and bilateral development partners to empower and build capacity for target groups so that quality health services can be provided to them.His vision is to promote Elderly Friendliness among empowered Stakeholders. The statement that he has created for PriHEMAC is to bridge the gap between the government objectives/targets that are set in place and what the government policies and development programs actually implement. They are there to help meet these objectives for society and to help the people in need within Nigeria. This is what Dr. Martins stands behind and strives for every day as Director of PriHEMAC.Dr. M. O. Ogundeji has been the Founder/Executive Director of PriHEMAC since 1998 till date.

Article Edit by Matthew Evans SUNY Global Commons

TABLE OF CONTENTS

Meet PriHemac

Dr. Martins Olusola Ogundeji

Mrs Oladayo Adeyemo

Mrs. Temitope Olstunbosun

Mrs. Cecelia Falola

Mr. Gideon Adeniyi

Miss Arike Ogundeji

Mrs. Folasade Akintola

PRIMARY HEALTH CARE AND MANAGEMENT CENTRE

PriHEMAC(Primary Health Care and Management Centre) aims to build an elderly-friendly community. Their vision posted on their website, writes, "To promote the health status and well being of susceptible members of the communities, particularly children and the elderly." Dr. Martins and his team of dedicated professionals have proven their commitment to building a more elderly-friendly community by fullfilling their vision one day at a time.

By providing community training elderly care, assisting with physical, social, and psychological services, PriHEMAC continues to be seen as an essential leader now more than ever, during the Covid-19 pandemic. In the contents of this magazine issue, we will explore what PriHEMAC has done to help the community and take a closer look at what Dr. Martins has to say about Covid-19. You will explore what PriHEMAC' s overarching goals are concerning the Sustainable Development Goals and meet the people who made all of these goals possible. With clear goals set ahead, PriHEMAC has gained an energetic band of reputable colleagues and affiliates worldwide. With this confidence and principled leadership, PriHEMAC rises to the expectation of serving its community. PriHEMAC remains a valuable resource for those seeking their services.

Amanda M. Hart
SUNY GLOBAL COMMONS STUDENT

"MOVING AHEAD TOGETHER WITH STRENGTH AND COMMITMENT TO REACH THE NEEDY WHERE THEY LIVE AND WORK."

Prihemac's Mission

PriHEMAC

Changing the Narrative

PriHEMAC PROJECT ON PROMOTING ELDERLY FRIENDLINESS THROUGH EMPOWERED STAKEHOLDERS

c

Rationale for Elderly Friendliness?

Many society members and institutions have been insensitive to the vulnerable particularly
elderly groups in their activities, programs, processes, plans, and policies.
While the highest level of change desired is at the societal level where every community becomes elderly friendly as put forward by the “Global Age Friendly Cities and Communities” project of World Health Organization (WHO).
This cannot be achieved until individuals, especially the very influential, and the lowest level
of society becomes elderly friendly.
This is the basis for the strategy of PriHEMAC initiative of promoting Elderly Friendliness through empowered stakeholders.

Impacts Realted to Covid-19

Conditions such as hypertension, diabetes, cardiac failure, cancer, stroke and other chronic diseases that are common among the elderly (Co-morbidity) predisposes them to COVID 19 and make its impact worse. Other socio-economic effects are hunger, loneliness and abandonment leading to psychological problems such as depression among the elderly. Our Elderly Friendly Ambassadors have been trained and working at mitigating the severity of these problems. PriHEMAC has identified the different categories of stakeholders that can be empowered to become Elderly Friendly by training their members as Elderly Friendly Ambassadors and caregivers championing meeting the psychological, physical and social needs of the elderly. The empowerment comes in form of training,provision of data analysis tools, advocacy tools and sensitization tools.

An Elderly Friendly Ambassador is a selected influential member of an organization or stakeholder that desire to be elderly friendly who becomes an ambassador a fter training. Stakeholders identified include Faith Based Organizations, Multilateral and Bilateral Organizations, philanthropist and GovernmentMinistry, Department and Agency.
PriHEMAC has for the past 5 years trained over 150 care givers and 65 Elderly Friendly Ambassadors from 20 organization across Southwerstern Nigeria. for an organization to become elderly Friendly, PriHEMAC has listed 5 stagesthe organization must undergo.
Molete Baptist Church,Ibadan, Nigeria, an organization led by **Rev Dr. E. K. Alabi** as the senior pastor has gone through all the stages and is a model of elderly friendliness.
The more elderly friendly organizations we have, the closer we are to achieving elderly friendly communities and cities across the world.

Executive Director, PriHEMAC DR. MARTINS OGUNDEJI

CHANGING THE NARRATIVE

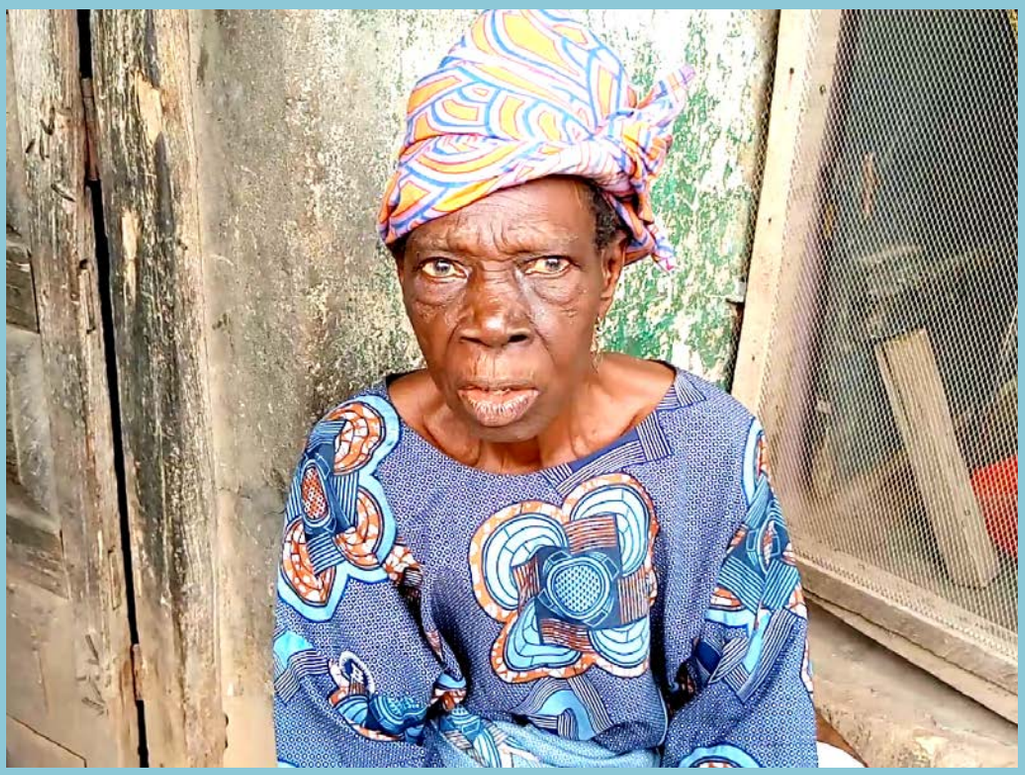
SUNY GLOBAL COMMONS: Amanda Hart

Elderly Friendliess should be a common goal, not only for adults, but for the younger generation as well. While conversing with Dr. Martins and his program officer Mr. Gideon Aydeniyi , it became quite clear that the narrative for elderly in Nigeria has become a sorrowful one, full of despair and disrespect. " The children used to take care of their Elders, that is not the case anymore." Says Mr. Adeniyi to the SUNY COIL Porgrams Team. " Changing the Narrative means helping the Elderly have someone in thier life to take care of their needs ."

Through the educational programs that PriHemac provides, Elderly Friendliness is at the core of its operation. Many older people are abandoned by their families, changing social structures, and many suffer from loneliness and depression due to this shift of family values.

Mr. Aydeniyi told our team that something even as simple as a video call could make all the difference in a person suffering from depression or loneliness. Especially during times of isolation, such as the current Pandemic. Depression from being isolated is prevalent in older adults. This is one of the most critical factors in a person's health, as depression can cause a host of other physical related illnesses as it weakens the immune system (referring to Dr. Martins' article previous to this one).
Keeping the elderly in contact with members of the community or family is one of the best preventative measures that can be taken to minimize damages to one's health caused by loss of interaction with their peers, family, and community.
With the risk of abandonment from family, as children grow up and leave the family unit, Elders are often left with little help, scarce employment opportunities, and are poverty-stricken. With organizations such as PriHEMAC, change is possible. Now the elderly have an advocate in their corner, helping to ensure their futures are bright. PriHEMAC is stepping in to make sure their voices are heard.

Amanda Hart SUNY Global Commons



Depression in Nigerian Elders

WHY ARE NIGERIA'S ELDERLY DEPRESSED?

By Daniela Maniscalchi,
SUNY Global Commons

The elderly population is growing in Sub-Saharan Africa due to changes in the social structure and urbanization, and more young adults are relocating to urban areas to better themselves. This then leaves elderly people in rural areas to live on their own. These changes are affecting the health of the elderly population. Major depressive disorder (MDD) is common is Nigerian elders. This illness is serious and debilitating, yet very few who suffer with MDD receive help or treatment due to low economic status and people living in rural areas. MDD is different than everyday depression. It is an occurrence that lasts two weeks or longer and has the following characteristics: depressed mood, lack of interest or pleasure, appetite and weight change, disturbance in sleep pattern, fatigue, and morbid thoughts. This condition affects the quality of life at home, work and social connections, and it also affects life expectancy in this population ("Epidemiology of Major Depressive Disorder in The Ibadan Study of Ageing," 2007).

Three things that can contribute to MDD in the elderly are: little to no social support, low socioeconomic status, and deteriorating physical health. Limited social support and difficult economic situations in Nigeria offer limited resources for elderly to deal with mental health issues. Failing health without proper medical care compounds the issues elderly face with depression ("Epidemiology of Major Depressive Disorder in The Ibadan Study of Ageing," 2007). Elderly depression is 2-3 times more common than dementia. This disease can impact the individual and the family. Depression that happens to the elderly later in life can create more of a disability than hypertension, lung disease, and diabetes (Baiyewu, Yusuf, & Ogundele, 2015, p. 2009).

This condition is not only limited to Nigeria, it affects the elderly population around the world. In research from the World Health Organization (2017), 10–16% of individuals aged 65 years and over can experience significant depressive symptoms. These symptoms can include: social isolation, cognitive impairment, chronic illness, and limitations in daily activities and tasks (2017). Since depression is widespread in the elderly population, there is a pressing need for early detection, interventions, and prevention of this disease so they have a better quality of life. According to the Nordic School of Public Health, social activities "are the most promising in regard to improving the mental health of older adults" ("Social activities effective in preventing depression among older adults," 2010). Social interactions with friends and family, along with community gatherings are extremely beneficial in helping aging adults deal with depression.

"This condition affects the quality of life at home, work and social connections"

SOCIAL, EMOTIONAL ,AND PHYSICAL NEEDS FOR THE ELDERLY IN NIGERIA

By Daniela Maniscalchi, SUNY Global Commons

Typically, Nigerians look after their aging family members at home; however, economic hardship and urbanization is creating a dynamic where more working-class Nigerians have to move far away from home.

This can create a disruption in the family structure where the elderly population is lacking the care they need.

Families who can afford senior care for their relatives might hire a caregiver, but if a family is not able to afford this kind of care, the aging family member is frequently left alone, which has the potential to be dangerous. Oftentimes, Elderly people have health issues they have to deal with. In addition to these health issues, they can also deal with social, emotional and physical i.ssues. Social, emotional and physical needs are as important as medical needs.

Each one of these needs have to be met and addressed so this population can be as healthy as possible. Isolation and loneliness, along with stress, depression and anxiety can cause a host of problems for the elderly. Physical needssuch as proper medical care and nutrition is also vital for this population to stay in good health. It's imperative to know what can be done to meet all of these needs so the elderly population in Nigeria can stay active, involved in the community and as healthy as possible.

Meeting social needs:

The elderly population can feel isolated and lonely due to the death of a spouse, loss of their independence, abuse from either negligence or abandonment, loss of income and separation from their children and family. This is why it's important for them to remainconnected to their family, friends and community. A study showed that cognitive capabilities are slower in people who had fewer social interactions than those who had more (Elder Care Alliance, 2017).

Elderly social support, which includes, companionship and visits with family and friends can help to decrease the risk of some physical health issues, along with stress, anxiety and depression. It's extremely important for the elderly to stay connected to family members, friends and in the community, whether those community meetings are through activities or spiritual gatherings. PriHEMAC Caregivers provide safe companionship to mitigate this.

Meeting Psychological/ Mental Needs:

As people age, they can feel vulnerable and fearful about their independence and health declining. These fears can lead to negative emotions and feelings of sadness, which can make the elderly fee las though they're losing control over their lives. These same feelings can lead to harmful depression, anxiety and phobias. It's important to make elders feel emotionally supported, safe and secure.

Their mental health should be observed andtreated and there should be someone in their life they can trust and rely on,whether it's a family member, friend, neighbor or caregiver. A study showed inorder for elderly people to feel safe and emotionally cared for, they need toknow someone is around for them who they can trust and rely on if they need help (Petersson, Lilja, & Borell, 2011). PriHEMAC caregivers offer psychologica lservices such as referral services, effective communication, prevention of violence and abuse, memory care, etc.

Meeting physical needs:

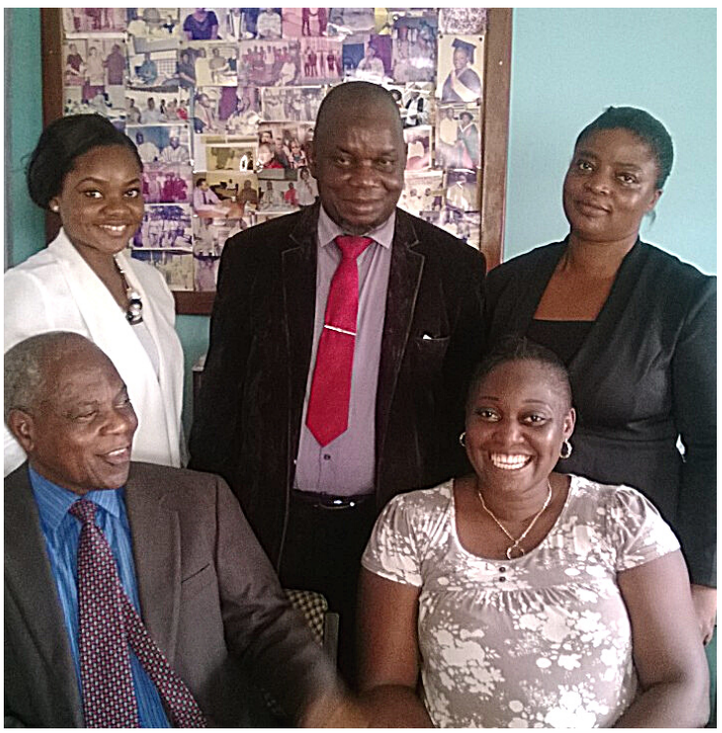
Aging people still need the same physical needs as everyone else – in addition to food, water and shelter, a lot of times the elderly have more needs because of health issues that come with age. Medical conditions such as: bone fracture, stroke, diabetes, and incontinence, etc. can make it difficult for an elderly person to do daily activities like dress, eat, bath and use the toilet by themselves. Making sure the elderly has medical and personal care, foods that are nutritious, and medications for their health can help to meet their physical needs. PriHEMAC Caregivers can provide physical services such as First Aid, Checking of Vital Signs, Daily Personal Care and grooming, Bed Bath, Prevention of Bed Sores/Treatment of Pressure Areas etc.

By supporting Nigerian elders through caring for their social, emotional and physical needs, it can help to reduce their fears and feelings of isolation and loneliness; it can help to eliminate depression; and it can help to make sure their health needs are met, which can create a more purposeful and healthy life for them.

Gideon Adeniyi, Program Officer at PriHEMAC, states that the Training Institute equip Caregivers and Elderly Friendly Ambassadors in having the correct knowledge,right attitude and appropriate skills to provide holistic customized services to meet various common social, psychological, physical needs of the elderly.

PriHEMAC Caregivers are legally bound and provide services under the thorough management of Doctors and Nurses.Also,the Consultancy, Advocacy and Research (CAR) Department is also involved in partnerships with Academia, Bilateral and Multilateral Organizations.

" It's extremely important for the elderly to stay connected to family members, friends and in the community, whether those community meetings are through activities or spiritual gatherings. PriHEMAC Caregivers provide safe companionship to mitigate this."



SDG'S AND THE EDLERLY IN NIGERIA

By Jasmine Kumar
SUNY Global Commons Student

In 2012, the United Nations came up with seventeen Sustainable Development Goals (SDGs) to replace the Millennium Development Goals (MDGs) , which were established in 2000 to start a global effort to reduce poverty, hunger, prevent deadly diseases from spreading, expand primary education amongst children, and more (Sustainable Development Goals). Since muh progress was still needed to be made, the SDGs were established, and they included additional goals that could encourage sustainability within the world.

Some of the seventeen SDGs include no poverty, zero hunger, good health and well-being, clean water and sanitation, affordable and clean energy, sustainable cities and communities, climate action,and much more (The Sustainable Development Goals report, 2019). Although progress within one SDG affects the other, since PriHemac's mission is to promote and provide care for the edlerly it is mainly committed to progressing SDG number three, good health and well being.

The Nigerian Health Insurance Scheme (NHIS) was established in 2005 to establish a government council that aims to ensure that every Nigerian has access to good health care services, protect Nigerians from the financial burden of medical bills, limit the rise in the cost of healthcare services, ensure efficiency in health care services, and more (Welcome, 2011). Despite efforts to reform the healthcare system and provide access to cheaper health services, the NHIS has not met the needs of a majority of constituents in Nigeria.

The combination of a lack of proper health insurance and strong health care infrastructures with the cultural view towards the elderly in Nigeria, leaves the elderly community vulnerable to sickness and improper care for issues such as depression, dementia, and more. Specifically, the cultural view towards the elderly in Nigeria is that many children view caring for their elderly parents and family members as a burden so the elderly tend to be left alone without proper care (G.Adeniyi, personal communication, July 31, 2020). PriHemac's mission aims to promote elderly friendliness and provide care for the elderly community that is neglected at the governmental and societal level.

United Nations Development Programme. Sustainable Development Goals.https://www.undp.org/content/undp/en/home/sustainable-development-goals/background.html
United Nations. (2019). The Sustainable development Goals Report. UNSD. https://unstats.un.org/sdgs/report/2019/The-Sustainable-Development-Goals-Report-2019.pdf
Welcome M.O. (2011). The Nigerian health care system: Need for integrating adequate medical intelligence and surveillance systems. J Pharm Bioallied Sci, 3(4), 470-478

THE ROLE OF PRIHEMAC IN ACHIEVING SDGS THROUGH PROJECTS ON
PROMOTING ELDERLY FRIENDLINESS IN OYO STATE.

Over the years PriHEMAC has been a champion in achieving the sustainable development goals in organizations through training of Caregivers and Elderly Friendly Ambassadors, provision of care at the community level, and providing consultancy, advocacy and research on the elderly. PriHEMAC has contributed to various targets of Sustainable Development Goals 1, 2, 3, 10, 16, and 17. It is important to note that the various goals are interconnected such that achieving SDG 3 leads to achieving other deliverables.

GOAL 1: NO POVERTY
Sustainable Development Goal number1 states “By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living onless than $1.25 a day.”
Through PriHEMAC Elderly Friendly Ambassadors resources are distributed to elderly to meet their basic needs, thereby reducing the impact of poverty on this vulnerable group.

GOAL 2: NO HUNGER
One of the targets for Sustainable Development Goal number 2 states “By 2030, end all forms of malnutrition, including achieving, by2025, addressing the nutritional needs of older persons.”
PriHEMAC has designed a module which enables trained caregivers to prepare nutritive balanced diets suitable for the elderly. Through PriHEMAC Elderly friendly Ambassadors, the organization has consistently prevented undernourishment of the elderly , especially by providing them food items during the COVID-19 pandemic.

GOAL 3: GOOD HEALTH AND WELLBEING
PriHEMAC has contributed to reduction of mortality from noncommunicable diseases through prevention and promotion of mental health and well-being of the Elderly. Several modules of the PriHEMAC handbook for Caregivers and Elderly Friendly Ambassadors are aimed at equipping caregivers to meet the mental, social, and physical needs of the elderly.
It is established that the chance of developing a chronic illness increases at old age, and that is why PriHEMAC has provided support to the elderly through Caregivers. For the past 5 years, PriHEMAC has trained over 150 caregivers (members of health workforce) and 65 Elderly Friendly Ambassadors , thereby substantially contributing to the targets aimed at achieving the recruitment, development, training and retention of the health workforce.

GOAL 10: REDUCE INEQUALITY
PriHEMAC is contributing to the empowerment and promotion of the social, economic, and political inclusion of the elderly through our Elderly Friendly Ambassadors who ensure that this age group is part of the various activities going on in their organization and communities.

GOAL 16: PEACE AND JUSTICE
A module in the training of PriHEMAC Elderly Friendly Ambassadors includes training on prevention and advocating against elderly abuse, consequently reducing all forms of violence and related death rates among the elderly.

GOAL 17: PARTNERSHIP FOR GOALS
PriHEMAC has shown commitment to enhancing capacity-building support and significantly increasing the availability of high-quality, timely, and reliable data disaggregated by age, through our training and consultancy, advocacy and research team that has conducted research in partnership with academics and other agencies.
PriHEMAC is committed to improving the mental, social and physical well being through her training of caregivers and Elderly Friendly Ambassadors in Partnership with Faithbased Organizations, Government Ministries, Departments and Agencies, Multilateral and Bilateral Organizations

Adeniyi Gideon

"Program officer, PriHEMAC & YALI RLC Fellow.

PRIHEMAC TRAINING

By Matthew Evans
SUNY Coil Global Commons Student

"These high standards and requirements
that PriHEMAC has for itself and its employees sets it apart and makes it an
extremely important force in achieving elderly friendliness and promoting the
health and well-being of the elderly community."

PriHEMAC Gallery of Experts

Dr. Victor Bello

Honourable Commissioner of Health, Oyo State, Nigeria.

Dr. Modupe Oyesiji

Deputy Director, National Primary Health Care Development Agency, South West

Dr. Kofo Soyinka

Family Physician

Mrs OladayoAdeyemo
Mental Health expert

Rev. Dr. E. K Alabi

Senior Pastor, Molete Baptist Church

Mr EmmanuelBoore
NHIS
Very Rev'd.

Dr. Segun Babalol

aProgram officer, Christian Council of Nigeria, Southwest Nigeria.

contact the following number to get trained as caregiver or be part of PriHEMAC Elderly Friendliness project; +2347031659289, +2348033256644, +2347030782068.

by Matthew Evans SUNY Coil Global Commons

Information on Program Training

The care that PriHEMAC provides to its patients is something that they take greatpride in. The organization has set up its own training institute forits caregivers and pushed past the requirements set in place by theFederal Ministry of Health to ensure quality care for the people of Nigeria.This training extends past solely caregivers and even provides training to Elderly Friendly Ambassadors. This is very important to PriHEMAC because one of their major goals is to promote elderlyfriendliness in the community. The training that they offer theseambassadors helps do this and it helps prevent the neglection and mistreatment of elderly people in the first place.The training received for their professional caregivers is very extensive as well. These caregivers attend the PriHEMAC Training Institute wher they are trained and taught by "qualified, experienced and dedicated
medical, social and nursing professionals" to ensure that they are well equipped to adequately take care of the elderly patients. Another important note is that this is not the only training that these caregivers have received. Many of the PriHEMAC caregivers have also received training and have experience in other important fields They have secondary school certificates, have been auxiliary nurses,Community Health Extension Workers, and teachers. They then stillreceive a two-week training at the PriHEMAC Training Institute andbecome registered Home Health Caregivers. This applies to the PriHEMAC home nurses as well. They are already registered nurses that receive PriHEMAC training at their institute for one week.

ThePriHEMAC training for Home and Health Caregivers started in 2014. Between then and January of 2019 ,PriHEMAC has produced over 150 trained professionals, and of those, thirty-eight have been engaged under PriHEMAC management. PriHEMAC again is looking to push past the training requirements set in place by the government and to bridge the gap between what the goal is for society and what is actually being accomplished.

This is why they also provide specialized training on how to meet all of the different needs of the elderly community. PriHEMAC does this by providing extensive training on how to meet physical, social, and psychological needs of their patients. Physical services that they provide include first aid, checking of vital signs, daily personal care and grooming, bed baths, and prevention of bed sores/treatment of pressure areas. As you can see this goes beyond helping those who are in immediate need of attention and helps improve the daily lives of the elderly. The social services provided include addressing loneliness and depression, loss of independence, and low income. They do this by
providing monetary aid and by providing safe companionship to the elderly community. Lastly the way that they address psychological need are by providing referral services, effective communication, memory care, and through the prevention of violence and abuse.PriHEMAC even provides training for its ambassador organizations. They offer a handbook to ambassadors as a guide on how to care for the elderly and what sort of things are important and what they should expect to deal with. PriHEMAC has also set in place five different stages that these organizations progress through to become elderly friendly. Stage one consists of training elderly friendly ambassadors within the organization. Stage two is when these trained ambassadors begin to collect data and vital information on their elderly community.Stage three they progress to full mobilization of meeting these needs of their elderly community. Stage four is when they obtain caregivers for the elderly so that they can effectively meet these needs. Finally, in stage five, they celebrate the elderly within their community. These stages are very important for these organizations and it is another way that PriHEMAC promotes elderly friendliness within their community and others.These high standards and requirements that PriHEMAC has for itself and its employees sets it apart and makes it an extremely important force in achieving elderly friendliness and promoting the health and well-being of the elderly community.

Gallery of Experts

celebrations

Nigerian Proverbs Explained

Bi okete ba dagba tan omu omo re nii mu.
Literal: The rodents sucks the breast of the offspring when it grows old.
Interpretation: It is a natural expectation that the child takes care of the elderly when they grow old

Oun ti agba ri lori ijoko, ti omode ba naaga, ko le ri
Literal: A child leaping can't see what the elderly see sitting down

Interpretation: No matter the giftedness of the youths, it can never be equated with the experience, insight, and foresight of the elderly

BI OMODE BA LASHO BI AGBA, KO LE LAKISA TO
LITERAL: A CHILD CAN'T HAVE RAGS AS MUCH AS THE ELDERLY EVEN IF HE HAS CLOTHS THAN HIM

INTERPRETATION: A CHILD MAY HAVE THE VERY BEST OF THINGS COMPARED TO THAT OF THE ELDERLY, YET HE CAN NEVER HAVE THE ANTIQUITY AND WEALTH OF EXPERIENCE OF THE ELDERLY

Owo omode o to pepe, be t'agbalagbe o wo kengbe

Literal: A child's hands are too short to reach a high shelf, but the elder's hands too are too big to enter into a narrow gourd.

Interpretation: Every member of society, youths and elderly alike, has his/her own roles to play to enable the society to operate in an orderly manner that is beneficial to all.

Agba ki wa l'oja k'ori omo tun tun wo

Literal: An elder cannot be present in the market place while a new born baby's head bends .

Interpretation: Things don't go faulty and bad under the elderly's watch hence the need for the experience of the elderly

Agbalagba ti o sare ninu egun, ti o ba le nkan, dajudaju nkan lo n'lee

Literal: When an adult takes flight in a field of thorns, he's either chasing something or something is chasing him
Interpretation: It is utmostly important to pay attention to the priority and caution of the elderly.

Gideon Adeniyi, Program officer, PriHEMAC
& YALI RLC Fellow.

Where do proverbs come from?

Amanda M . Hart Suny Global Commons

Proverbs are based on the past wisdom of collective cultural views. Usually , they are quoted from experience. Reading these particular nigerian proverbs, we are easily reminded about what the role of our elders play in the community. We enjoy the privledges of today because of what our elders did yesterday. With PriHemac's services, the neglected elderly can once again be restored to a respected member of the community.

Image Source : Wikipedia.Com/Nigeria

ELDERLY LONLINESS

By Matthew Evans
SUNY Global Commons Student

Growing old is something that all people will experience and there is nothing that can be done about it. There are some struggles that come with becoming old that go beyond having a hard time paying bills and having a nutritional diet. One of these struggles that is often overlooked or downplayed is loneliness. Many people that grow old don't always have family around or may no longer have a partner and they become extremely lonely. This is one of the social needs of the elderly community in Nigeria that PriHEMAC is trying to take care of.

Elderly people can become lonely for many reasons including death of their partner, divorce, or abandonment by their family. This is very hard for older people the deal with especially when they cannot take care of themselves as well as they used to. Many elderly people realize that as they grow older their health will deteriorate and they will be able to do less and less by themselves. After working this is the time for elderly people to be at their happiest and to be surrounded by those who love them. This is the time in their life where they need to be taken care of and they need somebody to be there alongside them.

The elderly population of Nigeria in 2016 was 9.6 million and it is expected to grow to 20 million by the year 2050. If the elderly population continues to grow at this rate it will be harder and harder for them to receive the care that they need. This is why PriHEMAC focuses on loneliness in elderly people and promotes elderly friendly ambassadors. The ambassadors can be more involved in the community, put on programs, and provide a sense of family to these elderly people. This could include encouraging older people t attend church by offering food to the elderly and putting on programs after the service to get the elderly community involved and doing more things.

Another thing that PriHEMAC does to help combat loneliness in elderly patients is by providing home nurses and companionship. They have nurses that go inside the homes of elderly patients to take care of them, feed them, and just spend time with them. Providing this sense of security and care to the elderly community is very important and PriHEMAC is always working towards improving the lives of the elderly in Nigeria and is always looking to train more caregivers.

COMMUNITY QUESTIONS: COVID-19

Q: I have really enjoyed the services of trained caregivers from PriHEMAC over time and I wish other elderly with little or no resources could enjoy same. How can this become possible?

"Over 70% of care receivers paid for the services they have enjoyed while the remaining was paid for by third party. So the only way to get the less privileged elderly to receive care from trained caregiver which is their source of income is to get Philanthropist, Faith Based Organization, Bilateral and Multilateral organizations to partner with PriHEMAC. This is the basis of the launching of PriHEMAC Endownment Fund and the project of Promoting Elderly Friendliness through Empowered Stakeholder".

Mrs Cecelia Falola, Nurse Educator & PriHEMAC Caregiver Supervisor

Why would the government say that the elderly should not be part of church services during this time knowing that the house of worship is one of the best places I get to socialize and keep up spiritually?

"The emergence of the Covid 19 Pandemic has created a lot of social disconnection. The virulence nature of the virus is such that it is extremely unfriendly to the elderly people. While it is obvious that old age usually comes with underline ailments, the novel coronavirus is said to latch on such ailments as opportunistic infections to worsened the health situations of the elderly. The government through the ministry of health understands this problem and thus took a decision to keep old expel away from public and social place. The decision is aimed at preventing the elderly people from unnecessary exposure to the contagious virus.In so much as the Church of God is both a spiritual and social place where person to person interaction is usually unrestricted, it is practically difficult to control the levels of interaction and fellowship. Since we cherish the elders in the Church so much and do not wish any of them untimely death, it becomes inevitable that they should stay off the Church until the the spike in the Coronavirus curve is flattened. Although we mixed the full fellowship and inspiration of the elders in the Church, the life elders and senior citizens are worth shielding from danger until there is a vaccine or such cure for the Covid 19. It is further expedient to state that spirituality and socializing in the Church must not be at the detriment of the wellness of our elders. They can always pray in the houses or worship with Church on line through social media and better still through the Church making every home a cell church with individual families

"Rev'd Dr. E. K Alabi, Senior Pastor, Molete Baptist Church, model elderly friendly organization.

I was told to limit how often I go out and minimize the number of persons that comes to visit me because I am more susceptible. Why is that?

"People, particularly the elderly, are advised 'to limit how often they go out and minimize the number of persons that come to visit them because everyone is susceptible. It is now believed that in general population, 40% are non-symptomatic carriers of covid-19 disease; in other words, almost half (one out of every two) persons we meet or that meet us are carriers of the disease!!!The elderly ones are more susceptible because i) their body immune system is generally weakened because of old age and ii) many elderly people live with other health conditions (comorbidity) like diabetes, hypertension, heart failure, obesity which aggravates the symptoms of Covid-19"

Dr. Martins Ogundeji, Executive director, PriHEMAC.

I have started beginning to doubt the reality of this Covid-19 because many I see don't use nose masks and I don't even know anyone that has contacted it. How real is COVID-19?

"It is very dangerous to be tempted to doubt the reality of Covid-19 pandemic because the whole world is being seriously affected. Millions of people have died and are still dying daily from the horrible disease that has locked down the whole!.Nigeria is NOT an exception. As of June, 22, 2020, the 3 States with highest confirmed cases and deaths are Lagos, Federal Capital Territory (FCT) and Oyo. There were 10, 510 confirmed cases and 128 deaths in Lagos State; 1,870 confirmed cases and 33 deaths in FTC; 1,380 confirmed cases and 12 deaths in Oyo State. One of those who died of Covid-19 in Oyo State was the immediate past Governor of the State – Senator Isiaka Ajimobi!!! For various reasons, there may be some people who do not care to use nose masks to prevent the spread of Covid-19. Even President Donald Trump of USA also doubted, for a while, the relevance of using nose mask to control Covid-19. However, he has since changed his mind and he is now advising people to use mask!! I believe that, in Nigeria, it is no longer optional to use nose mask to mitigate the spread of Covid-19, it is now compulsory across the nation!COVID-19 IS A REAL PANDEMIC!!!!"

Dr. Martins Ogundeji, Executive Director, PriHEMAC.

I have enjoyed the constant visitation and check-up by PriHEMAC Elderly Friendly Ambassadors. What is this initiative really about?

"PriHEMAC Elderly Friendly Ambassadors are Philanthropist or influential members of Faith-Based Organizations, Government Ministries, Department and Agencies among others who have undergone training on various physical, social and psychological needs of the elderly and are able to galvanize support to respond appropriately either by sending caregivers, mobilizing resources and responding in every other way that the need of the elderly is met. These are products of PriHEMAC's Project of having Elderly Friendly Organizations.PriHEMAC has listed 5 stages for an organization to be tagged 'elderly-friendly'. They are;Training of influential members of the organization as Elderly Friendly Ambassadors Collection and analysis of the data of elderly members in their organization Training of caregivers to meet the physical, psychological and social needs of elderlyProvision of the fund (e.g. Elderly Friendly Foundation Fund) to engage caregiversCelebration of elderly yearly and fundraising for elderly care through such programs.While about 20 organizations have started the process, only one organization has gone through the five stages and has become a model of elderly-friendly organization in Oyo State"

Gideon Adeniyi, Program officer, PriHEMAC & YALI, RLC Fellow.

It is really difficult surviving during this COVID-19 because I hardly have food available for me to eat. Some friends that support me still hardly have their pension gratuity regularly. What is the plan of the government/Church/Mosque for the Elderly at this time?

"There is no doubting the fact that we are in the worst of times in this century with the breaking of Covid - 19 since February in Nigeria. The Federal Government declared total lock down of States with index cases and epicenter in March. Our State, Oyo, is the closest to the epicenters and couldn't have escaped all the spill overs of the effects and the contagion itself.However, with the lockdown comes economic hardship since the entire commercial system is in comatose. Life and living became a serious problem since nobody prepared for the pandemic. Movements were restricted and enforced from local to intra and inter state movements with security enforcements and fines. So there was societal social paralysis and curfews were imposed. Banks were shut down so people cannot access their money. Markets were closed so there was panic buying of food items and definitely with mixups and confusion. People were exploited in the markets and many could not buy up all that was needed. Life became miserable and the whole country was engulfed in confusion. The so called government palliatives were marred with controversies, manipulations, and shortchanged by politicians.The Church of God had to come to the rescue of the elders who are the most vulnerable at this time. We have since been trying to provided palliatives in form of food items and token on weekly basis to keep the elderly in our church and neighborhood going. This is the way we have been sustaining them through our full time care givers. We equally provide medications and make hand sanitizers available to them from time to time. We also arrange Doctors visit at the expense of the Church to these individuals at the expense of the Church. We also provide on line counselling and advisory services to some of the elderlies who are frustrated because they cannot access their funds in the bank and to some their pensions are not forth coming. Others have major medical complaints which are too heavy a burden for the Church and others need cannot be fully gratified because the little that the church can provide cannot fully take care of the family needs with other dependents.Right now we have put and Elderly Care Foundation in place and stillRaising funds from good spirited people to assist us in reaching out to more elders. Their vulnerability and helplessness is a serious concern."

Rev'd Dr. E. K Alabi, Senior Pastor, Molete Baptist Church, model elderly friendly organization.

By Matthew Evans
SUNY Global Commons Student

Nutritional Needs

As mentioned in the PriHEMAC Trainingarticle, one of the physical needs that PriHEMAC seeks to address is nutrition for the elderly. Malnutrition in Nigeria is a huge issue. Malnutrition itself is one of the largest issues that the world faces because it causes many otherproblems when it goes unchanged. When people talk malnutrition, they almost always are referring to children. In Nigeria malnutrition is a huge proble amongst the elderly community as well. One cause of this is the cultural views that are held by many in Nigeria. This is that when you have a child, that child is supposed to take care of you. What this causes in society is the government to not address problems within the elderly community because it is expected that they will receive help from their children, and it is not the governments job to provide for them. In a survey that was conducted in Lagos State, Nigeria, it was found that more than half of the elderly residents wereat risk of malnutrition, more than 35% of them were malnourished, and only 12.5% of the elderly community had a normal nutritional status. This is very frightening.

Malnutrition is something that PriHEMAC is fighting and there are many things that they are doing to address this issue. PriHEMAC provides a handbook to its Elderly Friendly Ambassadors and within this handbook it provides information on a few different things including the imperatives of retirement preparedness and promoting elderly friendliness through empowered stakeholders. What this handbook also contains is an entire module on the nutritive requirements of the elderly and how to prepare balanced diets suitable for the elderly. This is very important because it empowers many people outside of their organization with the knowledge on the needs of the elderly and how to keep them healthy.

The reason that this handbook is so important and helpful is because PriHEMAC has elderly friendly organizations that they partner with that go through different stages. These organizationsstart by training elderly friendly ambassadors then they start collecting data on the elderly community so that they can start to meet these needs. After this they obtain and train caregivers to provide services to and meet the needs of the elderly. This is why this handbook is so important because it highlights the main needs of the elderly and it provides the ambassadors with information on how to address these. So, when PriHEMAC highlights malnutrition it stressesthis to these organizations and helps to provide the correct food to itspatients to combat this.One of the star organizations for PriHEMAC is Molete Baptist Church. They work closely with PriHEMAC and one of the things that they do is provide breakfast to all of the elderly people that attend their church and work towards providing them with a nutritionallybalanced diet. PriHEMAC is making great efforts to stop malnutrition in the elderly and are always training and educating more ambassadors to raise awareness.

COVID-19: SIGNS & SYMPTOMS

by Amanda M. Hart SUNY Global Commons Student

Symptoms can appear between 2-14 days after exposure. You may experience some/ none or all of the symptoms. If you feel you have contracted COVID-19 It is important to talk with a qualified health care provider you can trust.

Per CDC Guidelines, below are listed are eight signs and symptoms
to look for if you think that you have been exposed to COVID-19. Recognizing the symptoms may help to lessen spread in the community, and possibly save lives.:Currently there is no cure for Covid-19.

1 SHORTNESS OF BREATH

Pain or Pressure in chest . If you notice bluish lips or face seek medical attention immediatly. Also look for racing heart or chest pain.

2 COUGH

This may be an early symptom of pnemonia if the cough is prolonged and dry.

3 FEVER AND/OR CHILLS

Typically a pronlonged fever of over 100.1 for longer than five consecutive days.

4 CONJESTION/RUNNY NOSE

Immediately discard tissue and wash hands afterward to decrease community and household risk.

5 NAUSEA & VOMITTING

Severe Gastrointestinal upset with pain

6 FATIGUE/ BODY ACHES

Chills, Sweating, Extreme Tiredness or Lethargy.

7 LOSS OF TASTE/SMELL

New loss of taste or smell. Smell and taste typically returns after recovery.

8 DIARRHEA

Remember to always wash your hands and drink plenty of fluids to avoid dehydration.

COVID-19 PREVENTION

DANIELA MANISCALCHI, SUNY GLOBAL COMMONS STUDENT

According to healthypolicy-watch.org, as of July 29, 2020, Oyo state has the third highest count of COVID-19 cases in Nigeria and the infection rate is going up. The World Health Organization (WHO) has advised countries and governments about COVID-19 and how to safely protect their citizens, especially the vulnerable population like the elderly.

WHAT IS COVID-19?

Coronavirus (COVID-19) is a new infectious disease that began in late 2019. This newly discovered disease was originally seen in China but has been spreading throughout the world. The majority of people (approximately 80%) who are infected with COVID-19 will have mild to moderate respiratory illness and can improve and recuperate without specific medical treatment. The elderly and those who have underlying medical conditions, such as diabetes, cardiovascular disease, cancer and chronic respiratory disease are at a higher risk of developing and experiencing serious illness from COVID-19. Since the elderly are at a higher risk of complications and possible death, this disease needs to be taken very seriously. There are no vaccines or treatments for this illness at this time.

PROTECT YOURSELF

Practice at least 2 metres (6 feet) of social distancing from people; especially anyone who is sneezing or coughing. If you are not feeling well and have the following symptoms: cough, fever or shortness of breath, isolate yourself by staying home and away from others, and notify a healthcare professional immediately. Avoid areas that have high rates of infection. Avoid large crowds in the community, including cultural events. Try to avoid shaking hands or hugging other people.Wear a mask to prevent the spread of COVID-19.Ways the elderly population can stay healthy during COVID-19:

STOPPING THE SPREAD OF COVID19

SINCE COVID-19 IS MAINLY SPREAD BY DROPLETS OF SALIVA OR EXCRETIONS FROM THE NOSE WHEN A PERSON WITH THIS DISEASE COUGHS OR SNEEZES, IT IS VITAL FOR A PERSON TO EXERCISE PROPER RESPIRATORY PROCEDURE BY COUGHING OR SNEEZING INTO A BENT ELBOW OR TISSUE. IF USING A TISSUE, IT SHOULD BE DISPOSED OF IMMEDIATELY AND PROPERLY PLACED IN A WASTE BIN. MASKS WORN TO COVER THE NOSE AND MOUTH, SHOULD BE USED TO STOP THE SPREAD OF COVID-19. STAYING INFORMED ABOUT HOW COVID-19 IS SPREAD IS ONE OF THE BEST WAYS TO SLOW DOWN AND STOP THE TRANSMISSION OF THIS DISEASE. TO GUARD YOURSELF AND OTHERS FROM INFECTION, WASH YOUR HANDS WITH SOAP AND WATER OFTEN, AND FOR NO LESS THAN 20 SECONDS. IF YOU CAN'T WASH YOUR HANDS WITH SOAP AND WATER, USE AN ALCOHOL-BASED HAND SANITIZER. REMEMBER NOT TO TOUCH YOUR FACE, EYES, NOSE OR MOUTH, AS THIS CAN SPREAD GERMS.

ELDERLY & COVID-19

The elderly population is more vulnerable to COVID-19. They can become extremely ill so taking the appropriate precautions are very important. Taking care of their general health and well-being is imperative, which includes staying on top of any existing conditions they may have. The elderly should stay away from large gatherings and anyone who is sick. They should wash their hands frequently to avoid the spread of germs. It's important for the elderly population to follow medical advice. Medications should be taken as normal for preexisting conditions, with an extra supply on hand, in the event it is necessary to isolate. If you feel ill, have a cough, fever or shortness of breath, isolate yourself by staying home and away from others and seek immediate medical attention.

Past Affiliates:

PriHEMAC Partnership with WHO on Maternal Care:

The Partnership for Maternal, Newborn & Child Health (PMNCH) was an affiliate of PriHEMAC. By working together with PMNCH, we aimed to promote the well being of communities of mothers and children within Nigeria. Here at PriHEMAC we supported delivering PMNCH's objectives such as promoting access to high quality reproductive, maternal, newborn, and child health care. Issues such as maternal mortality rate and child mortality rate in Nigeria were focused and worked on through our collaboration with PMNCH.

Partner for Prevention and Treatment of TB:

With assistance and partnership from Stop TB (Tuberculosis) Partnership, that focuses on the prevention and treatment of TB, PriHEMAC advocated for increasing the number of PHC
Centres providing sputum-specimen collection services, and training of health workers on the existing myths and latest facts of TB to discourage discrimination and stigmatization of TB patients by health workers (CITE).

Current Affiliates:

SUNY COIL Global Commons Partnership:
Through the SUNY COIL Global commons program students that attend State University of
New York (SUNY) schools have worked with us at PriHEMAC to further our reach with our elderly community here in Nigeria by promoting our mission. . Additionally, John Justino, Director of the
Center for Global Health at the UAlbany School of Public Health and the professor for the course International perspectives on Good Health and Well-being (SDG 3), has helped students contribute to promoting our elderly friendly organization.

Experiential Learning Network, University of Buffalo:

With assistance and partnership from Mara Huber, Associate Dean for Undergraduate
Research and Experiential Learning at the University of Buffalo, the SUNY COIL Global Commons Program was able to assist us at PriHEMAC with informing the elderly community of our elderly friendly ambassadors, caregivers, experienced health professionals , and the type of care we can provide them during COVID-19.

IMPORTANT RESOURCES

PriHEMAC website:
http://prihemac.com

PriHEMAC Twitter:
@PriHEMACares

PriHeamc Facebook:
@PriHEMACares

10 Year Capacity Report of PriHEMAC:
The following report by the WHO on a case study of Nigeria's Primary Health Systems (PRIMASYS) gives an overview of the health care system, governance,
health care financing, human resources for health, access to healthcare, and
timeline of relevant Primary Health Care (PHC) policies in Nigeria.

Affliate page Edited by Jasmine Kumar SUNY Global Commons Student

Meet the Editoral Staff for PriHemac Magazine

Amanda M. Hart

PriHemac Magazine Graphic Designer/ Senior Editor

SUNY COIL Global Commons/ University at Buffalo B.A. Psychology SUNY ERIE A.S. Science

Daniela Maniscalchi

Project Lead Communication /Editor SUNY COIL Global Commons/ SUNY Empire CollegeBS Community and Human Services

Project Supervisors

Jasmine Kumar

Project Editor/Interviewing Team SUNY COIL Global Commons/ Stony Brook University Biology Major

Mara Huber

SUNY COIL Global Commons/ University at BuffaloAssociate Dean for Undergraduate Research and Experiential Learning and Director of Experiential Learning Network

Matthew Evans

Project Editor/Interviewing Team SUNY COIL Global Commons/ SUNY BrockportCriminal Justice Major

John Justino

SUNY COIL Global Commons/ University at AlbanyClinical Associate Professor

A State University at New York Global Commons Project


PriHEMAC