

EXPLORING DEPARTMENTS OF ADULT EDUCATION AS PLATFORMS FOR PROVIDING TRAINING ON HUMANIZED CARE-GIVING FOR THE ELDERLY IN NIGERIA

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Abstract

While developed nations are taking more positive steps in caring for their elderly, nations in Sub-Saharan Africa seem to be moving backwards in the care of the elderly. Members of the community used to be their brothers' keepers but these days, the news media is rife with stories of brutal and inhuman acts against the elderly. Even biological children have been observed to neglect their elderly parents. Ideally, human development should result in the well-being of all but sadly, this is not the case. The paper discusses the urgent need for the use of Adult Education departments as platforms for certified training towards the provision of humanized caregiving for the elderly outside Gerontology and other elderly-related courses being offered presently. This paper discusses the concept of humanization by highlighting various dictionary definitions. In an attempt to trace the history of humanization, Freire's philosophy of humanization was discussed. Some philosophical underpinnings of humanization and three specific theories, to wit, Humanistic Education Theory, Social Care Models and Paulo Freire's Adult Learning Theories were discussed as the bases for the arguments canvassed. The paper also discussed dehumanization as the opposite of humanization. Some despicable acts of dehumanization, violence and neglect of the elderly trending in news media were highlighted. Thereafter the paper briefly discussed the forms, prevalence, risk factors, perpetrators and consequences of elderly abuses as gleaned from reviewed literatures in order to create awareness of what constitutes elderly abuse. The paper also argues that innovations in technology affect the elderly both positively and negatively and that seniors are being scammed due to lack of trustworthy and properly trained care-givers. This paper looked to the departments of adult education to provide solution by widening their scope to include training on humanized caregiving for the elderly akin to certified care-giver qualifications in developed societies.

Keywords: Elder abuse, humanized elderly care-giving, training, adult education departments.

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Introduction

The world is experiencing a significant demographic shift, with the elderly population (ages 65+) projected to triple by 2050 (United Nations, 2020). Unfortunately, this growth has not been matched by corresponding improvements in care and support for older adults, particularly in Sub-Saharan Africa. Instead, the region has witnessed a disturbing surge in neglect, abuse, and dehumanization of the elderly (World Health Organization, 2020).

As HelpAge International (2019, p. 12) notes, "older people are often marginalized, excluded, and vulnerable to abuse". This alarming trend underscores the urgent need for a renewed focus on humanized caregiving, recognizing the inherent dignity and worth of every individual, regardless of age. Human development should ideally culminate in the well-being of all, particularly the most vulnerable (Sen, 1999). The harsh realities faced by many elderly individuals in Sub-Saharan Africa reveal a stark contrast. Globally, news media reports are

replete with stories of brutal and inhuman acts against the elderly, including - Abandonment (e.g., BBC News, 2020); physical abuse (e.g., Human Rights Watch, 2021); financial exploitation (e.g., The National Council on Aging, 2025). The reported cases of elder abuse in Nigeria, often perpetrated by the elderly's own children, underscore a breakdown in familial caregiving, empathy, and accountability. These incidents reflect the absence of informed, compassionate caregiving practices and make a strong case for integrating adult education departments into national strategies for caregiver training and elder protection.

Adult Education is a discipline that has been saddled with finding solutions to the ever-evolving problems of man for panacea. By so doing the orbit of the discipline and practice will be expanded and be doing more to achieve the sustainable development goal of seeing to the well-being of all. By exploring the concepts of humanization and dehumanization, examining the prevalence and forms of elderly abuse, discussing the roles and justification for looking to the department of adult education for panacea, as well as presenting proposed training programme for humanized care giving, this paper aims to spark a necessary conversation about the importance of dignified care for older adults.

Conceptualizing Humanization and other Key Terms

Humanization is a multifaceted concept that encompasses the values, principles, and practices that recognize and uphold human dignity. Humanization has been defined variously as the process of making something more humane or more suitable for human beings (Oxford English Dictionary, n.d.); the quality or state of being humane (Merriam-Webster, n.d.); treating people with dignity, respect, and compassion (Cambridge Dictionary, n.d.), and recognizing and valuing the inherent worth and dignity of every human being (United Nations, 1948, Universal Declaration of Human Rights, Article 1).

Philosophers and scholars have also variously interpreted humanization as empowerment and liberation from oppressive conditions (Freire, 1970); a relational process that acknowledges the interconnectedness of human beings (Buber, 1958); and a moral and ethical imperative to prioritize human well-being (Sen, 1999). These definitions and interpretations underscore the importance of empathy, compassion, and understanding in human interactions.

Philosophical Underpinnings and Specific Theoretical Frameworks

This section explores the theoretical foundations of humanization, tracing its evolution and examining its significance in the context of elderly care. Paulo Freire's philosophy of humanization provides a critical framework for understanding the concept. Freire (1970, p.75) defines humanization as: "...the process of becoming, of being, of existing, of transforming, of creating, of overcoming, and of being fully human, which is characterized by the pursuit of freedom, justice, and dignity". Freire's work emphasizes the dialectical relationship between humanization and dehumanization, highlighting the need to recognize and challenge oppressive systems that perpetuate marginalization, alienation, and domination.

Other experts have contributed to the understanding of humanization. Buber (1958) emphasizes the importance of dialogue and mutual recognition in humanization Sartre (1946) views humanization as the process of taking responsibility for one's freedom and choices. Sen (1999) sees humanization as the expansion of human capabilities and freedoms. These perspectives highlight the complexities of humanization, including the struggle for dignity

and autonomy, the importance of social relationships and community, the need for critical consciousness and agency.

In the context of elderly care, Freire's philosophy underscores the importance of empowering older adults to exercise their agency and autonomy, challenging ageist and ableist attitudes that perpetuate dehumanization, and fostering inclusive and compassionate care environments. Specifically, this study is guided by three interconnected theoretical frameworks: Humanistic Education Theory, the Social Care Model, and Paulo Freire's Adult Learning Theories. These frameworks provide both philosophical and pedagogical grounding for exploring how departments of adult education can serve as effective platforms for training in humanized caregiving for the elderly in Nigeria.

Humanistic Education Theory: Championed by theorists such as Carl Rogers and Abraham Maslow, emphasizes empathy, personal growth, and the development of the whole person (Rogers, 1969; Maslow, 1970). This theory supports a learner-centered approach, essential for caregiver training that goes beyond clinical skills to include emotional intelligence, respect, and compassion. In the context of eldercare, a humanistic approach aligns with the principle of humanized caregiving, which involves seeing the elderly as persons with unique experiences, needs, and rights, not just as recipients of services.

The Social Care Model: This offers a complementary perspective by focusing on person-centered, dignity-enhancing care that promotes independence, social inclusion, and well-being (Twigg, 2004). Unlike the medical model, which often prioritizes clinical efficiency, the social care model emphasizes relational and community-based care. This model is especially relevant in the Nigerian context, where elderly care often occurs within extended family and communal systems. Adult education departments, as community-facing institutions, are well-positioned to deliver training that reflects the values embedded in this model.

Paulo Freire's Adult Learning Theories: These provide a transformative pedagogical lens for this study. Freire (1970) emphasized the importance of dialogue, critical consciousness (*conscientização*), and education as a tool for social transformation. His theory justifies adult education approaches that empower caregivers to critically engage with the socio-cultural and structural factors affecting the treatment of the elderly. By fostering reflection and action, Freirean pedagogy enables the development of caregivers who are not only skilled but also socially and ethically responsive.

In sum, these three frameworks justify the use of adult education departments as platforms for humanized eldercare training. Humanistic education ensures emotional and ethical grounding (Rogers, 1969; Maslow, 1970), the social care model provides a practical and value-based structure for care (Twigg, 2004), and Freire's adult learning theory offers a transformative, justice-oriented pedagogy (Freire, 1970). Together, they support the development of caregiving practices that are competent, compassionate, and contextually relevant to Nigeria's evolving eldercare landscape.

Humanization in Elderly Care: In the context of elderly care, humanization entails recognizing older adults' autonomy and agency, providing person-centered care, fostering social connections and community engagement, and promoting dignity and respect (World Health Organization, 2019b; Kitwood; 1997). As argued by Kitwood (1997, p.12), humanization in dementia care requires a shift from "...a culture of care to a culture of

personhood". Care-givers must treat the elderly in their care as a person with the dignity of human person.

Dehumanization, The Opposite of Humanization: Dehumanization, the antithesis of humanization, involves denying or disregarding human dignity and worth (Galtung, 1990). Dehumanization can manifest in various forms, including objectification, marginalization, and violence.

Sub-Saharan Africa: Sub-Saharan Africa comprises 46 countries, including Anglophone countries (e.g., Nigeria, Ghana, South Africa), Francophone countries (e.g., Senegal, Democratic Republic of Congo), Lusophone countries (e.g., Angola, Mozambique), and countries with diverse cultural and linguistic backgrounds. Characteristics and attitudes toward the elderly vary across Sub-Saharan Africa depending on the type of societies. In patrilineal societies (e.g., Nigeria, Ghana), older adults often hold authority and respect while in matrilineal societies (e.g., Mozambique, Tanzania), older adults may experience reduced status. Urbanization and modernization have brought about changing family structures and values may exacerbate elder abuse. Besides, studies suggest that poverty and lack of social support increase vulnerability to elder abuse (HelpAge International, 2019); cultural norms and values can perpetuate or prevent elder abuse (Galtung, 1990; United Nations, 2020; National Center on Elder Abuse [NCEA] (2020); and that healthcare systems and social services often lack capacity to address elder abuse (World Health Organization; 2019).

Elderly Abuse and Neglect

Elderly abuse and neglect are pervasive issues affecting millions worldwide. This section examines the prevalence, forms, and consequences of elderly abuse, highlighting the urgent need for humanized caregiving.

Prevalence of Elderly Abuse in Sub-Saharan African Countries: According to the World Health Organization (WHO), approximately one in six older adults experience elder abuse worldwide (WHO, 2020). In Sub-Saharan Africa, the prevalence of elder abuse is alarming. HelpAge International (2019) reports that 44.5% of older adults reported emotional abuse, 34.6% reported financial abuse, and 22.1% reported physical abuse. In South Africa, 43.6% of older adults experienced some form of abuse (South African Medical Research Council, 2018).

In Nigeria, 35.4% of older adults reported emotional abuse, while 27.5% reported financial abuse (National Demographic and Health Survey, 2018). In Kenya: 29.6% of older adults experienced physical abuse, and 25.5% experienced emotional abuse (Kenya National Bureau of Statistics, 2019). In Tanzania, 24.5% of older adults reported financial abuse, while 20.6% reported physical abuse (Tanzania National Bureau of Statistics, 2019).

Forms of Elderly Abuse:

Generally, elderly abuse can take various forms, including:

Physical abuse: Infliction of physical harm or injury, such as hitting, pushing, or restraining (National Center on Elder Abuse, 2020). Example: A study in South Africa found that 21.6% of older adults experienced physical abuse (South African Medical Research Council, 2018).

Emotional abuse: Verbal or psychological mistreatment, such as intimidation, belittling, or humiliation (World Health Organization, 2020). Example: Research in Nigeria revealed that 35.4% of older adults reported emotional abuse (National Demographic and Health Survey, 2018).

Financial abuse: Exploitation or misuse of financial resources, such as theft or manipulation (HelpAge International, 2019). Example: A study in Kenya found that 29.6% of older adults experienced financial abuse (Kenya National Bureau of Statistics, 2019). In Nigeria, Ameh *et al.*, (2021) reported increasing incidents of financial exploitation.

Neglect: Failure to provide necessary care or support, such as abandonment or lack of medical attention (American Psychological Association, 2019). Example: Research in Tanzania showed that 24.5% of older adults reported neglect (Tanzania National Bureau of Statistics, 2019).

Social abuse: Isolation or restriction of social interactions, such as confinement or social exclusion (National Center on Elder Abuse, 2020). Example: A study in Ghana found that 21.1% of older adults experienced social abuse (Mould, 2019).

Virtual abuse: Exploitation or manipulation through technology, such as internet scams or identity theft (Koenig & Rinfret, 2018). Example: The current writers observed that elders are often targeted by internet fraudsters, particularly "yahoo" or "waya boys," who exploit their lack of technological savvy. Retirees are often the target of scammers who lurk around to swoop on their pensions and gratuities. Innovations in technology affects seniors both positively and negatively. This paper posits that seniors are being scammed due to lack of trustworthy and properly trained caregivers.

The forms of abuse seniors suffer are sometimes related to their ages, physical and mental health status among other factors. Despite cultural reverence for the elderly in many African societies, there is growing evidence of severe abuse experienced by seniors aged 80 and above. These abuses, often hidden due to stigma, illiteracy, or institutional neglect, underscore the critical need for humanized caregiving training, particularly through departments of Adult Education.

Physical Abuse and Witchcraft Accusations: Elderly women, particularly those above 80, have been violently attacked and ostracized under allegations of witchcraft. In Ghana and Tanzania, older women are frequently beaten, scarred, or banished to so-called "witch camps" (HelpAge International, 2021). Similar incidents have been documented in Nigeria, where frail elderly women are brutalized by relatives or neighbours (Adinkrah, 2015). These cases highlight a lack of caregiver education on aging-related conditions like dementia, which may be misinterpreted as witchcraft.

Neglect and Abandonment: Cases of extreme neglect abound, with seniors left locked in homes without food, water, or supervision. In Lagos, Nigeria, an 85-year-old woman was found unconscious after being abandoned by relatives for four days (Vanguard News, 2023). In South Africa and Uganda, elderly patients are sometimes left in hospitals by relatives who never return, turning health institutions into unregulated long-term care facilities (WHO, 2021). These situations show the absence of formal caregiving skills among family members and the general public.

Financial Exploitation: Older adults are often targeted for economic abuse. In Zimbabwe and Nigeria, family members routinely siphon off pensions or social welfare payments meant for the elderly (Kariuki, 2020). Widows in Kenya, especially those over 80, face "property grabbing" by in-laws and relatives who forcibly take over homes and land (Human Rights Watch, 2022). Adult education programs on legal literacy and elder rights could provide necessary protection and empowerment.

Emotional and Psychological Abuse: Verbal insults such as “useless” or “a burden” are common forms of emotional abuse directed at seniors. In Cameroon and Ethiopia, this often leads to depression and suicidal ideation (Okoye & Asa, 2011). Many older adults are deliberately excluded from family or community activities, leading to chronic loneliness (HelpAge International, 2021). Training caregivers in empathy and communication can reduce these patterns.

Sexual Abuse in Care Facilities: Even in institutional settings, some seniors face sexual violence. In South Africa, a male caregiver was convicted of sexually assaulting an 82-year-old woman in a care home, exposing the lack of regulation and training in eldercare (South African Human Rights Commission [SAHRC], 2022). Adult education curricula must include ethical caregiving and professional conduct.

Technology-Induced Abuse: Technology has introduced new avenues of exploitation. Elders in Nigeria and South Africa are often scammed by younger relatives who use their mobile phones or biometric details to steal from digital wallets or bank accounts (Adebowale, 2022). Adult education departments can play a key role in teaching digital literacy and safeguarding for both elders and caregivers. These examples reveal the urgent need for the Departments of Adult Education to take an active role in training caregivers in humanized, age-appropriate, and trauma-informed eldercare.

Humanized caregiving can only become a norm when institutions involved in adult education integrate eldercare ethics, communication skills, and practical caregiving into their curricula and outreach.

Consequences of Elderly Abuse: Elderly abuse has severe consequences, including physical harm or injury, emotional distress or trauma, financial instability or loss, social isolation or decreased quality of life, and increased risk of mortality (WHO, 2020).

Risk Factors for Elderly Abuse: According to Comfort Keepers Edmonton (2025), any senior can become prey to abuse but those with dementia or disabilities are at a considerably higher risk. Women both disabled and non-disabled are more prone to abuse than men. It has also been stated that certain factors increase the risk of elderly abuse, and they include social isolation, cognitive impairment, financial dependence, lack of access to support services, and cultural or societal norms condoning abuse (HelpAge International, 2019)

Perpetrators of elderly abuse: Generally, perpetrators include caregivers, family members (Olowoekere, *et al.*, 2020), strangers and scammers. It is unfortunate that perpetrators of elderly abuse are often people in position of trust to the elderly. According to Tester and Roberto (2022), trusted others, those individuals upon whom older adults may rely upon for assistance and services, such as friends and neighbours, paid caregivers, financial advisors, legal guardians, home repair workers, and the like, are also known perpetrators of elder abuse. Personal drivers and cooks are not left out. The hospitality, respect and revered treatment of the elderly and the age old communal care of the elderly that Africans are known for are being speedily eroded. This calls for immediate action to stem the tide.

Breaking the Cycle of Abuse: To address elderly abuse, while it is essential to still do the usually recommended things, such as raise awareness and promote education, strengthen laws and policies, provide support services for victims, foster community engagement and social connections, there is urgent need to restore and incorporate the essence of the dignity of the human person via promotion of humanized caregiving practices. Hence, the consideration of the use of departments of adult education to foster training for humanized care giving.

Role of Adult Education Departments in Promoting Humanized Caregiving

Adult Education departments have vital roles to play in addressing the dearth of trained caregivers and promoting humanized caregiving for older adults in Sub-Saharan Africa, and they include:

Expanding Caregiver Training Programs: Adult Education departments can develop context-specific caregiver training curricula, provide training on elder abuse prevention and response, integrate technology and digital literacy into training programs, foster empathy and understanding of older adults' needs (National Commission for Adult Education, Nigeria, 2020).

Enhancing Caregiver Skills and Knowledge: Training programs can focus on gerontology and aging processes, person-centered care and dementia care, communication and interpersonal skills, and conflict resolution and stress management (HelpAge International, 2019).

Promoting Humanized Caregiving Practices: Adult Education departments can integrate humanization principles into training programs, encourage caregiver reflection and self-awareness, foster a culture of respect and dignity for older adults, and support continuous professional development for caregivers (World Health Organization, 2019a).

Community Engagement and Awareness: Adult Education departments can conduct community outreaches and awareness campaigns, engage with local organizations and stakeholders, promote intergenerational learning and exchange, and support policy advocacy for elder care and protection (United Nations, 2020).

Collaborations and Partnerships: Effective collaborations between Adult Education departments and healthcare organizations, social services agencies, community groups, and government agencies can enhance caregiver training, support, and resources.

Collaborating with Faith-Based Organizations

Faith-based organizations can play a significant role in promoting humanized caregiving, as many religious traditions emphasize the importance of caring for the vulnerable and helpless. Benefits of collaboration would include leveraging moral and ethical frameworks to promote compassionate care, accessing existing community networks and infrastructure, tapping into volunteers and community resources, and integrating spiritual support and pastoral care. For instance, adult education departments can partner with churches to provide caregiver training and support, collaborate with Islamic organizations to promote elder dignity and respect, and work with faith-based NGOs to provide healthcare and social services. In these relationships, the following key considerations should guide - Respect for diverse faith traditions and cultural contexts, ensuring inclusive and non-discriminatory practices and building trust and relationships with faith leaders and communities. By engaging faith-based organizations, Adult Education departments can enhance the moral and ethical foundations of caregiving, expand community engagement and outreach, and foster a culture of compassion and empathy.

Justification for Utilizing Adult Education Departments to Provide Caregiver Training

There are several compelling reasons to leverage Adult Education departments for caregiver training, especially in addressing the growing need for elderly care in Sub-Saharan Africa. First, caregiver training aligns seamlessly with the foundational principles of adult education, which emphasize lifelong learning, continuous skill development, and adaptability. UNESCO's 2015 Recommendation on Adult Learning and Education highlights adult learning as essential for inclusive, lifelong education, explicitly naming health and well-being

as key thematic areas (UNESCO, 2015). Additionally, UNESCO underscores the link between education and public health, stating that education develops the skills, values and attitudes that enable learners to lead healthy and fulfilled lives (UNESCO, 2025).

Adult Education departments are deeply embedded in their communities and are well-equipped to address local healthcare and social service needs. They embody the empowerment and social transformation ethos central to adult education, and this is important for enhancing caregivers' competencies and empathy. In practical terms, Adult Education departments bring established infrastructure and pedagogical expertise. They maintain strong connections with community-based organizations, healthcare providers, and social services. Their faculty are trained in adult learning methodologies and capable of crafting curricula for caregiver-specific training. Moreover, these departments frequently offer flexible delivery modes - online, in-person, or hybrid - making caregiver training more accessible to diverse learner populations.

From a financial perspective, using existing Adult Education resources is highly cost-effective. It minimizes startup costs, leverages economies of scale by training many caregivers concurrently, and fosters community engagement through partnerships that ensure curricular relevance and impact. Internationally and nationally, there is strong policy support for integrating caregiver training into adult education. UNESCO's "Education for All" movement and the Incheon Declaration of 2015 affirm adult education's role in health and well-being (UNESCO, 2015a; UNESCO, 2015b). In Nigeria, the National Policy on Education, 2023 (as cited in NMEC, n.d.) while establishing the National Commission for Mass Literacy, Adult and Non-Formal Education (NMEC) affirm adult education's significance in tackling socio-economic challenges, including health and aging.

Success stories from around the world further validate this model. The Open University in the UK has long provided mature learners with professional and social development opportunities across numerous sectors, including health and welfare (Open University, 2022). Australia's institutions, like Workers Education Association [WEA] Sydney, offer diverse adult learning programs spanning vocational, language, and health-related areas, suggesting a viable pathway for caregiver education (WEA Sydney, 2025). In the United States, various partnerships between adult education providers and healthcare agencies have yielded robust caregiver training programs (e.g., Disability Care courses at vocational colleges, Reddit community; Life Without Barriers, 2019).

In Nigeria, however, caregiver training, especially in humanized elderly care, has yet to be integrated within university Adult Education departments. Instead, such training is largely provided by teaching hospitals like University College Hospital (UCH) Ibadan and University of Benin Teaching Hospital (UBTH), geriatric centers such as the Chief Tony Anenih Geriatric Centre, and community-focused institutions like the University of the Third Age (U3A Nigeria). This gap presents a significant opportunity to align with international best practices, expand access to training, elevate quality, and address a growing need in aging care.

Proposed Training Program for Humanized Caregiving

The Departments of Adult Education can play a pivotal role in addressing the challenges of elderly care in Nigeria by instituting a comprehensive training program focused on humanized caregiving. This program is designed to empower adult learners and caregivers

with the necessary skills, knowledge, and attitudes to provide empathetic and dignified care for the elderly. Some of the proposed training elements, types and components are discussed below among others.

Objectives of the Training Program: The program aims to:

Equip caregivers with practical competencies rooted in empathy, respect, and cultural sensitivity.

Promote awareness of elder rights and legal protections.

Enhance community capacity to identify, prevent, and respond to elder abuse and neglect.

Foster intergenerational solidarity through lifelong learning.

Target Audience: The program targets family caregivers, community health workers, volunteers, NGO members, faith-based organizations, and retirees interested in advocacy and peer support.

Training Components: The curriculum will encompass the following key areas:

Introduction to Ageing and Elderly Care: Understanding the biological, psychological, and social aspects of ageing, common health issues, and diversity in ageing experiences.

Principles of Humanized Caregiving: Core values such as dignity, respect, empathy, ethical considerations, communication skills, and emotional support techniques.

Health, Safety, and Hygiene: Basic nursing care, nutrition, medication management, and creating safe environments.

Legal Rights and Social Protection: Nigerian elder rights laws, reporting mechanisms, and social welfare access.

Managing Abuse and Neglect: Recognizing abuse signs, prevention, intervention, and referral systems.

Impact of Technology: Digital literacy for the elderly, protection from scams, and use of technology for social connection.

Practicum/Fieldwork: Supervised community placements and reflective learning through case studies.

Delivery and Certification: The program will utilize a blended learning approach, combining face-to-face sessions, community engagement, and supervised practice offered flexibly to accommodate adult learners. Successful participants will receive a certificate from the Department of Adult Education, recognized by relevant health and social welfare institutions.

Likely Implementation Challenges and Strategies to Overcome

While promising, the program's implementation may face several challenges including limited awareness among stakeholders, resource constraints, cultural attitudes, learner commitment difficulties, and monitoring capacity issues. To overcome these barriers, the following strategies are recommended:

Advocacy and Sensitization: Raising awareness through engagement with policymakers, community leaders, and the media.

Capacity Building: Training qualified instructors and developing culturally relevant materials.

Flexible Learning: Offering modular and part-time options to fit adult learners' schedules.

Incentives: Providing certification, linking training to opportunities, and offering stipends where possible.

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Partnership for Monitoring: Collaborating with external bodies to support evaluation and continuous improvement.

Potential Partnerships and Collaboration

Sustainable implementation necessitates collaboration among multiple stakeholders:

Geriatric Hospitals and Care Centers: For practical training and mentorship.

NGOs: To co-design training and facilitate outreach.

Government Agencies: For policy alignment and funding support.

Faith-Based Organizations and Community Leaders: To promote program acceptance.

Academic Institutions: For curriculum development and research support.

Technology Providers: To enhance digital literacy and protect the elderly from online risks.

Through these partnerships, the program can leverage resources, expand reach, and gain legitimacy, thus positioning Departments of Adult Education as innovative agents in Nigeria's elderly care landscape.

Conclusion

Eldercare in Sub-Saharan Africa is at critical crossroads. The region faces an urgent need to address elder abuse and ensure humanized caregiving. Adult Education departments can offer scalable, sustainable solutions through targeted caregiver training. By fostering empathy, building skills, and embracing technology responsibly, these departments can significantly improve the quality of life for older adults. Strategic partnerships with healthcare systems, community groups, and faith-based organizations are key to success and sustainability.

Recommendations

To promote humanized caregiving and address elder abuse in Sub-Saharan Africa, four-fold recommendations pertaining to policy, practice, research and community engagement have been made hereunder:

Policy Recommendations:

Integrate caregiver training into national healthcare policies.

Establish standards for caregiver training and certification.

Allocate resources for caregiver training programs.

Practice Recommendations:

Develop context-specific caregiver training curricula.

Collaborate with healthcare organizations and community groups.

Provide ongoing support and mentorship for caregivers.

Research Recommendations:

Conduct studies on caregiver training effectiveness.

Investigate the impact of humanized caregiving on older adults' well-being.

Explore innovative technologies for caregiver training.

Community Engagement Recommendations:

Raise awareness about elder abuse and humanized caregiving.

Engage faith-based organizations and community groups.

Promote intergenerational learning and exchange.

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