

MAGYAR GERONTOLÓGIA

14. ÉVFOLYAM KONFERENCIA KÜLÖNSZÁM

2022. 14. évf. Konferencia Különszám

On-line verzió: ISSN 2062-3690

[www.https://ojs.lib.unideb.hu/gerontologia](https://ojs.lib.unideb.hu/gerontologia)

Health challenges of the elderly: a comparative study of the need for health social workers in Nigeria and Bangladesh

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Key words: Bangladesh, elderly, health, Nigeria, policy.

Introduction

The established fact is that the population with the highest consumer of healthcare services is the elderly because of the increasing demand for adaptive health services accessible to the elderly. As the elderly continue to age, there is a decline in the health condition, developed societies have explored and employed several multidisciplinary approaches to the care of the elderly. The focus is on social work as a profession.

Methodology

The study was designed to be a systematic review of articles published in reputable journals between 2010 and 2022 with keywords - elderly, aged, health, ageism, Nigeria, Bangladesh, and Social Work. The objective was to identify the health challenges facing the elderly and the roles of the health social workers in Nigeria and Bangladesh from 24 published research articles found in Google Scholar and PubMed. This study compares Nigeria and Bangladesh for their many similarities in economy, religion, population, and policies.

Results

The study identifies the need for social workers trained in understanding the dynamics of the health sector and identifying health needs among clients, bridging the gap between patients and health/social institutions that provide for their optimal social functioning. Papers reviewed poor nourishment, depression, cardiovascular diseases, and physical disabilities that contributed to a decrease in general life expectancy and reshaped the population pyramid of both countries. With populations of 216,746,933 and 167,885,680; 2.77% and 5.45% represents the percentage of elderly population in Nigeria and Bangladesh respectively. The study revealed that the social and health care system in both countries could require an overhaul due to the non-appreciable level of impact it is making on the general population and little or no space for the elderly. In terms of access to necessary health services, health outcomes, health systems, illness and risk factors, and mortality rate, Nigeria and Bangladesh are placed at 49.1% and 69% respectively. While a monthly allowance of 5 Euro in addition to retirement benefits and pension is provided for senior citizens in Bangladesh, this does not apply to the situation in Nigeria. Thus, both health and social institutions must be reviewed to accommodate the dynamic needs of the elderly population. As compared to developed countries where health social workers are legally bound to help the elderly access or receive quality care regardless of their disability, in both countries are either educational or general practice based which is owed to the fact that the profession is emerging and lacks sufficient legal backing for its professionalization, except in Nigeria until recently. Among the many obstacles, the elderly are faced with out-of-pocket health expenditure, the low level of literacy and the absence of exclusive laws to support this marginalized population.

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