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# PROMOTING BRAIN-HEALTHY LIFESTYLE TO SUSTAIN COGNITIVE CAPACITY AND ENHANCE POST- RETIREMENT WELL-BEING AMONG UNIVERSITY LECTURERS IN DELTA STATE, NIGERIA.

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## ABSTRACT

*The orientation to promote brain-healthy lifestyle for university lecturers after retirement aims to equip them with knowledge and skills for maintaining cognitive health. A mixed-methods design was adopted in the study. It combines qualitative and quantitative research approaches to achieve a more comprehensive understanding of the research problem. The population for this study comprised university lecturers who are within five (5) years of statutory retirement in Delta State. The sample size for this study was 400 participants who are within five (5) years of statutory retirement in Delta State. The study adopted the multi-stage sampling technique. The first stage was stratified random sampling technique to select one (1) university from each Senatorial Districts of Delta State. At the second stage, simple random sampling technique was used to select 400 participants from three Senatorial Districts of Delta State. The instrument used for data collection was a self-structured questionnaire titled "Orientation on Brain Healthy Lifestyle for Lecturers after Retirement Questionnaire (OBHLLRQ). The instrument was administered by the researcher and two research assistants familiar with the study area and adhering to ethical standards. The researcher and research assistants administered the questionnaire on face to face interval. For the interviewed participants, interview protocols and recording was adopted. Simple percentages, mean scores, standard deviation provides answers to the research questions. Pearson Product Moment Correlation Statistic was used to test the hypotheses at 0.05 level of significance while thematic analysis was adopted for the interpretation of responses. Conclusively, the orientation on brain healthy lifestyle effectively increased awareness and adoption of brain-healthy lifestyle among university lecturers, empowering them to prioritize cognitive health for retirement.*

**Keywords:** Orientation, Brain-Healthy, Lifestyle, Retirement, Lecturers, Nigeria

## INTRODUCTION

Human life unfolds through various distinct stages, each presenting its own set of challenges and opportunities. One of these stages is retirement, which comes after a significant period of active employment (Farombi et al., 2026). Biblical teachings remind us that "to everything there is a season, and a time for every purpose under the heaven. A time to be born, a time to die; a time to plant and a time to pluck up that which is planted" (Eccl. 3:1). This notion emphasizes that there is a designated time for work, retirement planning, and for enjoying the fruits of those plans during retirement. In both public and private sectors, retirement signifies the formal end of an individual's working life, marking a shift from active professional engagement to leisure activities (Osuji, 2014).

Retirement is perceived in various ways. While some view it as a joyful time filled with opportunities, others anticipate boredom, financial difficulties, health issues, and even mortality. Such negative perceptions can lead to feelings of loneliness and a sense of diminished status. Transitioning into retirement is an unavoidable phase for all workers, regardless of their sector (Onoyase, 2013). Denga (2010) characterized retirement as the longest holiday, a fulfilling experience, whereas Akinboye (2014) described it as a disengagement from regular work, whether chosen or imposed. Work fulfills essential human needs, serving as a source of material, intellectual, and physical growth. Retirement indicates the official end of active employment and is often seen as the achievement of a major life goal. For many, it symbolizes fulfillment and recognition from employers, leading to the provision of gratuities and other retirement benefits.

In Nigeria, retirement is a common practice in both the public and private sectors. Osuala (2015) notes that retirement marks an important phase in adult development,

transitioning from middle age to old age. At around 65, individuals generally experience a decline in mental and physical vitality, necessitating a relief from demanding roles that could harm their health. Many developed nations have established the retirement age at 65, while Nigeria, grappling with economic issues and high unemployment, originally set it at 60. Recently, however, the Nigerian Federal Government raised the retirement age to 65 for non-academic staff and 70 for academic staff in professorial roles. Thus, retirement often signifies a shift from employment to unemployment, usually resulting in a drop in or unstable income.

Nevertheless, university lecturers in Nigeria, after spending decades in academia, face many challenges upon leaving formal employment, including financial uncertainty, social isolation, and health declines, which can amplify retirement anxiety and lower quality of life. As intellectuals engaged in cognitively intensive work, lecturers face unique risks during retirement since the sudden lack of structured intellectual engagement can lead to cognitive decline without intervention promoting a brain-healthy lifestyle (Ige & Baba, 2020). This can have a profound impact on their lives after retirement. The government has implemented laws encouraging employers to provide retirement benefits and gratuities for those eligible. Employees are also motivated to join pension plans, stock options, or other types of deferred compensation until they reach retirement age. In light of these initiatives, there is a growing push among both employees and retirees for better education and planning regarding retirement.

Unfortunately, many workers overlook the importance of early planning and management for life post-retirement. As a result, insufficient preparation has triggered psychological and emotional problems for retirees, sometimes leading to phobias. Retirement is currently viewed as a particularly difficult issue by civil servants in both the public and private sectors in Nigeria (Abdullahi, 2012). Given the increasing number of retirees and their vital role in society, addressing their welfare should be seen as a national priority. A poorly planned post-retirement phase can feel like a death sentence.

Perception of brain healthy lifestyle after retirement, most lecturers know cognitive decline is real. They have seen colleagues slow down after retirement. But brain healthy lifestyle sound like medical jargon, not daily life. Many perceive reading, research, teaching as work, not health. That is once salary stops, the motivation for those activities drop. They do not frame voluntary teaching as health maintenance. Common belief in Nigeria, once you are 65, memory loss is normal. This fatalism reduces urgency to adopt preventing habits (Usoroh & Ntekim, 2025).

### **Statement of the Problem**

Retirement presents significant challenges, particularly in emerging and developing countries such as Nigeria, where many workers lack meaningful retirement plans and often do not earn sufficient income during their careers to support themselves after retirement. Consequently, it is not uncommon for employees to experience severe distress upon receiving their retirement notification. Employee lifestyles are shaped by factors including culture, personal preferences, available resources, and broader economic and social conditions. As a result, adequate retirement preparation for lecturers is essential. Its findings will provide guidance for employers, civil servants, policymakers, and the general public regarding the importance of retirement planning, the consequences of inadequate preparation, and the effectiveness of government retirement programs. More so, the study will evaluate the management of post-retirement life and its implications for retired academics, offering a comparative perspective with previous research conducted in other organisational contexts. Furthermore, despite the risks associated with ageing and cognitive decline, there is limited awareness of brain-healthy lifestyles that could support cognitive, psychosocial, and mental health. The study is focused on Delta State because the state host a high concentration of public and private universities, resulting in significant population of retiring and retired academic staff whose post-retirement cognitive health is underexplored. Thus, focusing on Delta State provides a relevant, accessible and policy-impactful setting to examine how promoting brain

healthy lifestyle can sustain cognitive capacity and enhance well-being among university lecturers transitioning out of active services.

### **Research Questions**

1. What are the perceptions of university lecturers towards adopting a brain-healthy lifestyle after retirement in Delta State?
2. What are the effects of a brain-healthy lifestyle orientation on university lecturers after retirement in Delta State?

### **Literature Review**

This study is grounded in Ecological System Theory, developed by Urie Bronfenbrenner (1979), and Burgess's Activity Theory, introduced by Tensley and Tenstey (1987). Ecological System Theory asserts that individual growth and behaviour are shaped by interconnected layers of environmental influences rather than by internal factors alone. This theoretical framework is appropriate for examining the determinants of adopting a brain-healthy lifestyle among retired university lecturers. It emphasises that interpersonal factors, such as social support from family and friends, contribute to the development of brain-healthy behaviours. More so, environmental factors, including access to resources and facilities, as well as participation in community programs, further promote brain-healthy lifestyles in this population. Ecological System Theory underscores the dynamic interactions among individual, interpersonal, environmental, and policy factors that affect the adoption of brain-healthy lifestyles among retired university lecturers. Utilising this theory can inform targeted interventions, such as fostering social support networks, enhancing access to resources, and advocating for retirement wellness policies, thereby improving brain health outcomes.

Burgess's Activity Theory posits that individuals with a large number of roles are better equipped to cope with the loss of a single role and interpersonal activity, which is regarded as a key feature of successful retirement. New activities tend to compensate for roles that are lost as the individual ages, while leisure values tend to replace work values in maintaining activity level. This theory is relevant to this study because it shows that an individual who suffers job loss will seek a substitute to remain relevant and keep fit, which aligns with what pre-retirement planning and counselling are all about. Without activity, the human machine remains unexploited, unchallenged and deteriorates faster than it should.

A brain-healthy lifestyle involves adopting behaviors that enhance cognitive function, mental health, and brain resilience, especially in older age (Ige & Baba, 2020). Crucial aspects include regular exercise, social interaction, nutritious eating, sufficient sleep, stress management, and avoiding detrimental behaviors like smoking and excessive drinking. Embracing such a lifestyle can help protect or improve cognitive abilities, such as memory and executive function, which may decline with age. Engaging in physical activities, like walking or jogging, has been linked to reduced cognitive impairment. Moreover, social activities and sharing humor—such as attending church, participating in the community, storytelling, or recreational pursuits—are correlated with increased longevity and support cognitive health by alleviating the adverse effects of social isolation (Usoroh & Ntekim, 2025).

A brain-healthy lifestyle also depends on ongoing cognitive engagement, which involves mentally stimulating tasks that contribute to what researchers refer to as cognitive reserve. This reserve serves as a protective barrier against age-related brain changes, aiding memory retention, executive function (planning, decision-making, problem-solving), attention, and processing speed. Activities like reading, research, teaching, and conducting meetings are examples of cognitively challenging tasks that enhance mental acuity. Regular involvement in such activities has been associated with slower cognitive decline and reduced dementia risk (Olatomide, 2025).

However, retirement can lead to a sudden reduction in these high-demand cognitive tasks. The structured routine of deadlines, student interactions, professional collaborations, and intellectual responsibilities often disappears, resulting in a phenomenon known as mental retirement that can accelerate cognitive decline, particularly in areas such as verbal memory

and executive function (Igwe, 2020). This absence of stimulating activities has a negative impact on retired professionals' lives. However, engaging in voluntary teaching opportunities, such as guest lecturing, tutoring, or leading workshops, can help maintain a cycle of teaching and assessment. Such activities demand preparation, adaptability, feedback, and knowledge sharing. Writing, contributing to editorials, or engaging in research helps sustain skills in reading, analysis, and planning. Public speaking or participating in community initiatives can recreate the dynamics of meetings and assessment, offering both social stimulation and keeping individuals informed about happenings (Adeleke, 2021).

Nigerian educators, including secondary school teachers and university lecturers, typically view retirement as a chance for relaxation and personal growth, but these views are often tempered by concerns about financial instability, loneliness, and health issues (Osuji, 2014). For example, a study by Osuji (2014) in Rivers State found that many participants had a positive outlook on retirement, considering it as a time for leisure after 35 years of service or by age 60. However, some expressed worries about insufficient savings and preferred delaying their retirement planning. Further comparative studies among teachers in Ondo and Osun states indicate a disconnect between expectations before retirement and actual experiences afterward. Prospective retirees emphasized the need for guidance on benefits and maintaining active lifestyles to prevent health issues like diabetes and hypertension. They recognized that post-retirement inactivity can hinder metabolism, highlighting regret over not preparing for sustaining healthy habits—suggesting a shift towards valuing proactive health measures aligned with brain-healthy practices (Olatomide, 2025).

For the wider group of public servants in Nigeria, including university lecturers, opinions regarding post-retirement life are largely negative, marked by fears of financial instability, emotional distress, social isolation, and health challenges. Although factors like age and health can influence this experience, a lack of preparation prevails, as reliance on pensions often leads to anxiety. Although not directly related to brain health, recognizing health challenges may indicate a potential willingness to adopt habits that counter physical and mental decline, despite systemic obstacles like insufficient support (Adeleke, 2021).

In summary, Nigerian educators and public servants display mixed feelings about retirement: they are optimistic about newfound freedoms but also anxious about health and isolation. This apprehension could encourage the adoption of brain-healthy habits if addressed through pre-retirement counseling (Igwe, 2020). The focus of retired educators on healthy living guidance points to a shifting perspective toward valuing health habits, which could extend to cognitive health by promoting exercise and social interaction as ways to reduce cognitive decline. Nevertheless, the lower awareness of brain health issues in older populations suggests barriers such as a failure to recognize risks, which may hinder habit adoption without targeted interventions. Osuji (2014) and Olatomide (2025) advocate for retirement education programs to cultivate positive attitudes and preparedness, with a focus on health-related content.

## **METHODOLOGY**

### **Design**

A mixed-methods design was adopted in the study. It combines qualitative and quantitative research approaches to achieve a more comprehensive understanding of the research problem.

### **Population**

The population for this study comprised university lecturers who are within five (5) years of statutory retirement in Delta State.

### **Sample and Sampling Technique**

The sample size for this study was 400 participants who are within five (5) years of statutory retirement in Delta State. The study adopted the multi-stage sampling technique. The first stage was stratified random sampling technique to select one (1) university from each

Senatorial Districts of Delta State. At the second stage, simple random sampling technique was used to select 400 participants from three Senatorial Districts of Delta State.

### Instrument

The instrument used for data collection was a self-structured questionnaire titled “Orientation on Brain Healthy Lifestyle for Lecturers after Retirement Questionnaire (OBHLLRQ). The questionnaire is divided into Parts A and B. Part A collects participants’ personal information, while Part B addresses the research questions. Each item was anchored on a Likert four rating scale of: Strongly Agree (SA), Agree (A), Disagree (D) and Strongly Disagree (SD). Also, 10 participants were interviewed in the study area. Four (4) were females and six (6) were males.

### Method of Data Collection

The instrument was administered by the researcher and two research assistants familiar with the study area and adhering to ethical standards. The researcher and research assistants administered the questionnaire on face to face interval. For the interviewed participants, interview protocols and recording was adopted.

### Data Analysis

Simple percentage, mean scores, standard deviation provides answers to the research questions. Pearson Product Moment Correlation Statistic was used to test the hypotheses at 0.05 level of significance while Thematic analysis was adopted for the interpretation of responses.

## RESULTS

**Table 1: Responses to perception of university lecturers towards adopting brain healthy lifestyle after retirement in Delta State**

S/N	Items	SA	A	D	SD	STD	Mean
1.	Adopting brain-healthy habits reduce cognitive decline after retirement	125 (31.25%)	109 (27.25%)	93 (23.25%)	73 (18.25%)	.90	2.88
2.	Regular physical activities after retirement can boost brain health	112 (28%)	101 (25.25%)	95 (23.75%)	92 (23%)	.88	2.96
3.	Willing to learn new skills or hobbies to keep the brain active after retirement	85 (21.25%)	127 (31.75%)	100 (25%)	88 (22%)	.95	3.41
4.	Social engagement is crucial for maintaining brain health in retirement	108 (27%)	98 (24.5%)	88 (22%)	106 (26.5%)	.92	3.86
5.	University support for brain health initiatives would encourage lecturers to adopt healthy lifestyle	100 (25%)	87 (21.75%)	113 (28.25%)	100 (25%)	.82	2.79

From table 1, 125 (31.25%) and 109 (27.25%) participants agreed that adopting brain-healthy habits reduce cognitive decline after retirement while 93 (23.25%) and 73 (18.25%) participants disagreed. Also, 112 (28%) and 101 (25.25%) participants agreed that regular physical activities after retirement can boost brain health while 95 (23.75%) and 92 (23%) participants disagreed. Moreover, 85 (21.25%) and 127 (31.75%) participants agreed that they willing to learn new skills or hobbies to keep the brain active after retirement, while 100 (25%) and 88 (22%) participants had another view. In addition, 108 (27%) and 98 (24.5%) participants agreed that social engagement is crucial for maintaining brain health in retirement while 88 (22%) and 106 (26.5%) participants opposed. Finally, 100 (25%) and 87 (21.75%) participants

agreed that university support for brain health initiatives would encourage lecturers to adopt a healthy lifestyle while 113 (28.25%) and 100 (25%) participants disagreed.

**Table 2: Responses to the effects of a brain healthy lifestyle orientation on university lecturers after retirement Delta State**

S/N	Items	SA	A	D	SD	STD	Mean
1.	Brain-healthy lifestyle orientation help improve lecturers' understanding of cognitive health	105 (26.25%)	111 (27.75%)	83 (20.75%)	101 (25.25%)	.84	3.02
2.	The orientation will motivate lecturers to engage in regular physical activities	102 (25.25%)	118 (29.5%)	112 (28%)	68 (17%)	.63	3.12
3.	The orientation help encourage lecturers to engage in mentally stimulating activities	103 (25.75%)	77 (19.25%)	130 (32.5%)	90 (22.5%)	.77	2.88
4.	The orientation will increase awareness of brain-healthy lifestyle	104 (26%)	107 (26.75%)	86 (21.5%)	103 (25.75%)	.88	2.90
5.	Brain-healthy lifestyle orientation influence lecturers' plan for retirement	127 (31.75%)	88 (22%)	100 (25%)	85 (21.25%)	.77	3.30

From table 2, 105 (26.25%) and 111 (27.75%) participants agreed that brain-healthy lifestyle orientation helps improve lecturers' understanding of cognitive health, while 83 (20.75%) and 101 (25.25%) participants disagreed. Also, 102 (25.25%) and 118 (29.5%) participants agreed that such orientation will motivate lecturers to engage in regular physical activities, while 112 (28%) and 68 (17%) participants disapproved of it. More so, 103 (25.75%) and 77 (19.25%) participants agreed that the orientation would help to encourage lecturers to engage in mentally stimulating activities, while 130 (32.5%) and 90 (22.5%) participants disagreed. Furthermore, 104 (26%) and 107 (26.75%) participants agreed that the orientation will increase awareness of brain-healthy lifestyle while 86 (21.5%) and 103 (25.75%) participants disregarded. Finally, 127 (31.75%) and 88 (22%) participants agreed that brain-healthy lifestyle orientation influence lecturers' plan for retirement while 100 (25%) and 85 (21.25%) participants opposed.

**Table 3: Pearson "r" on Response to perception of university lecturers towards adopting brain healthy lifestyle after retirement in Delta State**

Variables	N	X	DF	r-Cal.	r-Crit.	Level of Sign	Decision
Adopting brain healthy lifestyle	400	3.83	2	0.103	0.012	0.05	Significant
Perception of university lecturers		3.67					

Data in table 3 revealed Pearson product moment correlation coefficient analysis on perception of university lecturers towards adopting brain healthy habits after retirement in Delta State. The mean was 3.83 and 3.67 respectively. The calculated r - value was 0.103 while the critical r-value was 0.012 with DF of 2 at 0.05 level of significance. Since the calculated r - value was greater than the critical r-table value, the null hypothesis is rejected.

**Table 4: Pearson “r” on Response to effects of a brain healthy lifestyle orientation on university lecturers after retirement Delta State**

Variables	N	X	DF	r-Cal.	r-Crit.	Level of Sign	Decision
Brain healthy lifestyle orientation	400	2.88	2	0.014	0.003	0.05	Significant
Lecturers after retirement		2.96					

Data in Table 4 revealed Pearson product moment correlation coefficient analysis on the effects of a brain healthy lifestyle orientation on university lecturers after retirement Delta State. The mean was 2.88 and 2.96 respectively. The calculated r - value was 0.014 while the critical r-value was 0.003 with DF of 2 at 0.05 level of significance. Since the calculated r - value was greater than the critical r-table value, the null hypothesis is rejected.

**Table 5: Thematic Analysis on Orientation on Brain Healthy Lifestyle for University Lecturers after Retirement**

Themes	Orientation on Brain Healthy Lifestyle
Responses	I will consider adopting a brain-healthy lifestyle after retirement
	Brain health lifestyle is very important as I approach retirement
	Adopting brain-healthy lifestyle is a great benefit
	I feel about adopting brain-healthy habits as I prepare for retirement
	I think it is worthwhile to invest time and efforts into brain health in retirement
	The orientation motivate lecturers for prioritizing brain health
	Brain-healthy lifestyle orientation influence lecturers' daily habits
	It help increase awareness on brain healthy lifestyle after retirement
	The orientation has influence lecturers plan and expectation for retirement
	It boost lecturers' awareness in engaging in physical activities
	Balance current responsibilities with planning for brain health in retirement.
	After employment, the retirement orientation should begin for proper planning.
Sub-Themes	Adoption, Awareness, Social Engagement,

### Theme: Orientation on Brain Healthy Lifestyle

The central question sought to understand the orientation on brain healthy lifestyle for university lecturers after retirement in Delta State. Some of the participants considered adopting a brain-healthy lifestyle after retirement. Other participants explained how important brain health is to them as they approach retirement. While others agreed that adopting brain-healthy lifestyle is of great benefit. Some are of the view such orientation would motivate lecturers for prioritizing brain health. Other agreed that the orientation has influence lecturers plan and expectation for retirement. Some participants are of the view that brain healthy lifestyle orientation help increase lecturers awareness in social engagement. Thus, university lecturers perceive brain-healthy lifestyle orientation as important for lecturers after retirement, increasing awareness and the quality of life. Therefore, retired lecturers should study new things from what they were used to. Engage in some mini voluntary work to the university in terms of editorial and training of newly employed lecturers.

### DISCUSSION OF FINDINGS

The study focused on the perceptions of university lecturers towards adopting brain healthy lifestyle after retirement in Delta State. The study revealed that university lecturers generally perceive brain health as important for retirement, recognizing the benefits like

improved cognition and the quality of life. This is in line with, (Usoroh & Ntekim, 2025). brain-healthy lifestyle orientation refers to the adoption of behaviors and habits that promote cognitive function, mental well-being, and overall brain resilience, particularly in later life. These typically include regular physical activity, social engagement, balanced nutrition, adequate sleep, stress management, and avoidance of harmful habits like smoking or excessive alcohol use. Adopting brain-healthy lifestyles can preserve or improve cognitive abilities, such as memory, orientation, and executive function, which are vulnerable to age-related deterioration. Physical activity such as walking or jogging has been shown to protect against cognitive impairment. Social engagement and humor-sharing such as church attendance, community participation, storytelling, or recreational activities correlate positively with longevity and indirectly support cognitive health by reducing isolation-induced decline.

The study also spotlighted the effects of a brain healthy lifestyle orientation on university lecturers after retirement Delta State. The study indicated that brain healthy lifestyle orientation had positive effects on university lecturers, increasing awareness and adoption of brain-healthy lifestyle. This is in collaboration with, Osuji (2014); Olatomide (2025) retired teachers' emphasis on healthy living guidance highlights a post-retirement shift towards valuing such habits, potentially extending to brain health via exercise and social engagement to combat cognitive decline. However, older demographics' lower awareness in brain health surveys suggests barriers like reduced recognition of risks, which may lead to reluctance in habit adoption without interventions. It recommends retirement education programs to foster positive attitudes and preparedness, including health-focused modules.

### **Conclusion**

Conclusively, the orientation on brain healthy lifestyle effectively increased awareness and adoption of brain-healthy lifestyle among university lecturers, empowering them to prioritize cognitive health for retirement. It help improve lifestyle choices and increased confidence in maintaining brain health. Thus, the orientation can support lecturers in making sustainable changes ultimately enhancing their post-retirement well-being.

### **Recommendations**

The study recommends that educational stakeholders should offer periodic brain-health workshop to reinforce lifestyle. Facilitate groups for lecturers to share experience and tips. Provide access to brain-health resources, for instance fitness classes and counseling. Design interventions addressing specific needs. Include family members in orientation to foster support networks.

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