

OLD AGE

Old age or Late adulthood is the period of life in every individual that follows the period of his or her life after he/she turns 65 years of age. **It** is generally considered to begin at about age 65. Old age consists of ages nearing or surpassing the average life span of human beings, and thus the end of the human life cycle. This period is marked by the process of growing old, resulting in part from the failure of body cells to function normally or to produce new body cells to replace those that are dead or malfunctioning. People can be considered old because of certain changes in their activities or social roles. Old people have limited regenerative abilities and are more prone to disease, syndromes, and sickness than other adults. For example, people can be considered as old when they become grandparents, or when they begin to do less or different work, or when they get to the age of retirement. This period is marked by the process of growing old, resulting in part from the failure of body cells to function normally or to produce new body cells to replace those that are dead or malfunctioning. This in turn results in significant physical, psychological and cognitive changes, like cardio-vascular, digestive malfunctioning, depression, and impaired memory functioning and so on.

Physical Changes

As an individual move towards their old age, there are changes which occurs naturally and not due to any disease. These changes include sensory changes, digestion, circulation and sexuality. The physical changes that occur in the bodies of the individuals can be divided into two main categories – external changes and internal changes. These changes are the outward signs of ageing, and are quiet obvious to notice. They consist of changes in hair, skin, posture, etc. most people's hair becomes distinctly gray and eventually turns white, and it may also thin out. The skin becomes less elastic, more wrinkled, dry and thin. The wrinkles are formed partly because of loss fatty tissue under the skin. Functional age is the actual competence and performance a person displays, regardless of chronological age.

Sensory Changes

Human receives and process information from the environment through hearing, vision, taste, smell and touch. With ageing, these senses are often diminished and incoming information may be distorted or difficult to understand. As a result, the older person may give up some enjoyable activities or lose contact with friends and family who are important sources of support.

Hearing

Hearing loss affects the older persons ability to talk easily with others. According to studies, about 30% of people over 60 have a hearing impairment, but about 33% of those 75 to 84, and about half of those over 85, have hearing loss. For example, older people have trouble hearing higher pitched tones. They also may not be able to make out sounds or words when there is background interference. Older persons may be frustrated or embarrassed about not being able to understand what is being said. They may have to ask people to repeat themselves, or endure shouting when a speaker tries to be heard. Older persons may hold back from conversation out of a fear of making inappropriate comments. They may tire from concentrating and straining to hear. As a result, the older person may withdraw from friends and family and outside activities.

Vision

Even though changes to the eye take place as a person ages, many older people have good-to-adequate vision. Nevertheless, beginning in the late 30s and early 40s, an individual may begin to notice some changes. She or he may have to hold the paper farther away to read it due to changes in the ability of the lens to change its shape to accommodate to distance. With ageing, peripheral vision is reduced. A person may need to turn her or his head to see to the sides. The flexibility of the eye decreases and it takes an older person more time to accommodate to changes in light. Adaptations in lifestyle and behaviours must be made to cope with this change. An individual might give up driving at night. Placing more lights evenly around the room so that the entire room is lit is also helpful.

Degeneration of eye muscles and clouding of the lens are associated with ageing. Several changes in vision result from this. Older people tend to have trouble focusing on near objects, but eyeglasses may correct this problem. In addition, the ability to see colors changes with age as the lens yellows. Red, yellow, and orange are easier to see than blue and green. This is why fabrics in warmer shades may be more appealing to the older person.

- I.** Cataracts are cloudy areas in the lens which blur vision and can cause blindness if there is no surgery. There is poorer dark adaptation when coming in from the light. Depth perception is also compromised since binocular vision declines, as well as visual acuity.
- II.** Macular degeneration occurs when light-sensitive cells in the macula, the central region of the retina break down, resulting in blurry central vision, and eventual blindness. A diet high in anti-oxidants can delay this condition. Driving may need to be curtailed at a certain point,

as the older driver has a harder time discriminating the road distractions and signs. This is a hard thing to give up, since it signals physical dependence on others. Elders also are at higher risk of stumbling and serious falls at this point, as they don't see changes in the floor and accommodate smoothly.

Taste and Smell

Some loss in taste sensitivity takes place with ageing. However, the loss is minor and does not seem to occur in most people until well after 70. There is also a loss of smell, but this is not severe. Nevertheless, older people often complain that their meals are tasteless or that they no longer like their favorite foods. Most experts feel that these complaints are caused by a sense of loneliness at meals, or an unwillingness or inability to cook. Also, older persons may not buy more enjoyable foods when they have difficulty chewing due to poor dentures or dental problems, or are stretching their food dollars due to a limited budget.

Touch

The skin serves a protective function by buffering us from the environment. Skin changes leave the older person vulnerable to discomfort and harm. Due to reduced sensitivity, heat sources such as heating pads, hot water bottles, and pot handles can hurt the skin before the elder realises that damage is occurring. An older person may develop a greater sensitivity to cool temperatures and drafts. This is caused by a decline in sweat gland activity, a decrease in the ability to maintain a normal body temperature due to poorer circulation, and a thinning of the skin. Wrinkling, drying, and scaling also occur. The skin tears and breaks more easily, increasing the chance of injury and infection. The sensation of touch connects us with others no matter what our age. Thus, touch is important in maintaining the elder's emotional well-being. Use of touch during communication should be practiced to show that you are there for support and that you care.

Changes in Bones and Muscles

Ageing adults, especially the very old, are vulnerable to broken bones. In addition, joints stiffen and connecting ligaments between bones lose their elasticity. Hand and foot pain may result. Although there is no known way to prevent sometimes painful changes in ageing muscles, bones, and ligaments, regular exercise helps to assure continuing mobility in old age. Most physicians feel that walking, along with adequate rest and a nutritious diet, are tremendously valuable for maintaining mobility and fitness in the later years. It is very important to prevent falls. Due to changes in bone

mass and strength, falls often result in injury, hospitalisation, and continued declines in health.

Teeth and Mouth

Older adults are more likely to lose teeth to gum disease than to problems with the teeth themselves. However, with proper personal care, regular checkups, and improved dentistry methods, older people are more able to retain their natural teeth throughout their lives. Older people who do lose their teeth may now expect and demand comfortable, well-fitting, and durable dentures.

Digestion

The digestive system is very sensitive to emotions. An older person may experience an upset stomach or lack of appetite when lonely, depressed, or worried. Regular contact with friends and relatives, through visits and telephone calls, can help prevent these problems. It is fairly common for older people to have less frequent bowel movements and to suffer from constipation. This is due to changes in tissue and muscles and reduced thirst. Regular exercise, such as a daily walk, can prevent constipation. A well-balanced diet that includes adequate fiber and fluid intake also encourages normal bowel function and minimises the need for laxatives. In contrast, self-prescribed laxatives are an expensive substitute for foods that naturally keep the gastrointestinal system running smoothly, such as bran cereals, fruits, and vegetables. Overuse of laxatives can interfere with the availability of nutrients for healthy body functioning.

Adequate fluid intake is essential for maintaining proper body temperature and functioning of the digestive system. However, some older people make the mistake of limiting their fluid intake in order to avoid frequent urination. Dehydration is a serious problem for the elderly. This is due to their decreased sense of thirst and reduced capacity to conserve water. In addition, laxative abuse, diuretic therapies, infections, immobility, or excessive use of alcohol or caffeine tend to promote dehydration.

Circulation

The older heart slows down and is less able to pump blood through the body than the younger heart. This results in older people having less energy and stamina for physical work. Decreased circulation also contributes to cold sensitivity, particularly in the hands and feet. Because oxygen necessary for proper physical and cognitive functioning is carried through the blood, the elder with poor circulation may experience forgetfulness and other symptoms of poor cognition. Blood vessels, which play an important role in the circulation of blood throughout the body, lose elasticity as we

age. This causes blood to tend to “pool” in the feet and legs. This means that swelling (edema) may occur in the extremities. Consequently, the heart, which undergoes muscle changes as we age, must pump harder in order to carry the blood to all parts of the body.

Changes in circulation make the older person more susceptible to the development of “little strokes” (TIAs) than when younger. Symptoms of such episodes include headache, vision disturbances, loss of balance, confusion, and dizziness when standing quickly from a sitting or reclining position. Because “little strokes” can be harbingers of a larger stroke, consult with the older person’s primary health care provider, should these occur. Many older people are on medications that impact circulation. Be familiar with these medications, and their side effects. This may prevent complications, which may arise from their use. Pressure ulcers, a skin problem found in people with limited mobility, are due to impaired circulation. When an older person is unable to move about, tissue may die due to lack of an adequate blood supply to the skin. Areas particularly susceptible to these ulcers are those over bony prominences such as hips, shoulders, elbows, knees, ankles, and the heels of the feet.

Cardiovascular and Respiratory Systems

They are affected by ageing as the heart muscle becomes more rigid and some cells enlarge, thickening the left ventricle. Arteries stiffen and accumulate plaque. So the heart pumps with less force, and blood flow slows. So during activity, sufficient oxygen may not be delivered to critical tissues. Lung tissue also loses elasticity and capacity is reduced by half. The blood absorbs less oxygen and expels less carbon dioxide. People feel more out of breath when exercising. This is more of a problem for people who have smoked, had a high-fat diet, or been exposed to pollutants. Exercise facilitates respiratory function.

Immune system declines as T cells become less effective.

Auto-immune response is a problem when the immune system turns against normal body tissues. This puts elders at risk of infectious diseases, CVD, cancers, rheumatoid arthritis, or diabetes. The more impaired the immune system is, the more at risk the person is to a variety of agents. Sleep is essential for healthy functioning all one’s life, but as we age, sleep is harder to come by, as elders sleep less, more lightly, and have more trouble going to sleep. Men seem to have more sleep problems than women, due to the enlargement of the prostate gland and the need to urinate more often at night. Sleep apnea is a condition where breathing ceases for 10 sec. or more, causing the person to awaken with a start to breathe again. This afflicts more men than women, but overweight

people have problems with this condition, as more weight is pressing on the lungs, requiring more effort to keep breathing. Legs also move rapidly during the night- “restless legs” and this can disrupt sleep, too. Unfortunately, poor sleep can afflict daytime energy, resulting in a cycle of downward energy, even depression. More prescriptions for sleep aids are given to older adults, but they can have rebound effects later with greater insomnia.

Sexuality

Sexual desires and the physical capacity to engage in sex continue throughout life. Loss of interest in sex is usually due to emotional causes, drug use, or disease, and not necessarily to ageing. Changes in sexual response and in the sex, organs lead to changes in frequency and pattern of performance. However, the older person’s own health and a healthy and willing partner are important factors in sexual expression. Sharing feelings and closeness with another person are very important to sustaining emotional and physical intimacy.

Physical Disabilities

They do increase toward the end of the lifespan, especially illnesses such as CVD and cancer. Respiratory diseases also climb in late adulthood – emphysema is caused by loss of elasticity in lung tissue – most result from smoking. As the immune system declines, more people are at risk of pneumonia, severe lung inflammation. Stroke is 4th most common killer in the elderly. There is a blockage of blood flow in the brain which leads to death of neural tissue and accompanying loss of function. Osteoporosis rises in late adulthood, as well as arthritis. Adult-onset diabetes and unintentional injuries also increase in late adulthood. These illnesses are not caused by ageing, but are related to age – they occur more often in the aged.

Primary ageing – biological ageing that occurs even in the context of good health.

Secondary ageing – is declines in function due to hereditary defects and negative environmental influences, poor diet, lack of exercise, disease, substance abuse, environmental pollution, and stress.

Arthritis is a condition of inflamed, painful, stiff or swollen joints and muscles. There are two forms:

Osteo-arthritis is the most common type – due to deteriorating cartilage on the ends of bones – “degenerative joint disease”. Cartilage that cushions the bones in joints deteriorates, so there is more discomfort with movement. Obesity can place abnormal pressure on joints and damages cartilage, too.

Rheumatoid arthritis is an autoimmune disease that involves the whole body. There is inflammation of connective tissue, there is stiffness, inflammation, and aching. Deformed joints develop, reducing mobility.

Adult-onset diabetes occurs when the insulin output of the pancreas can't control blood sugar after a meal. High blood sugar damages the blood vessels, increases risk of stroke, heart attack, circulatory problems in the legs, and injury to the eyes, kidneys, and nerves. If there is severe loss of blood flow, it can result in amputations and blindness. It may require oral insulin or even shots to maintain blood sugar in the healthy range.

Unintentional injuries- death rate from injuries increases after age 65- mostly due to car collisions and falls.

Motor vehicle accidents are responsible for ¼ of injury mortality later in life. But older adults have higher rates of traffic tickets, accidents, and fatalities per mile driven than any other age group, except for teens. Deaths due to injury are greater for men than women in late life. Driving is especially impaired as vision is impaired. They also have a slower reaction time, and don't always read and interpret road signs effectively. They are also at risk on foot at intersections when they can't determine when to walk.

Falls – 30% of those over 65, and 40% of those over 80 have had a fall within the past year. Serious injury results about 10% of the time- most commonly a hip fracture. This type of break increases 20% from 65 to 85. It associates with a 12–20% increase in mortality. Half never regain the ability to walk without assistance again. Unfortunately, once someone falls, s/he will tend to avoid activities that may be associated with instability, so they restrict social contact and exercise. Prevention may entail corrective eyewear, improved safety in the home or car, and other family members taking on some of the responsibility for the elder's transportation. Late adulthood or old age is the period of life in every individual that follows the period of his or her life after he/she turns 65 years of age. Old age consists of ages nearing or surpassing the average life span of human beings, and thus the end of the human life cycle. People can be considered old because of certain changes in their activities or social roles. Old people have limited regenerative abilities and are more prone to disease, syndromes, and sickness than other adults. Functional age is the actual competence and performance a person displays, regardless of chronological age. The ageing body does change. Some systems slow down, while others lose their "fine tuning". Slight gradual change is common, and most of these are not problems to the person who experiences them. Serious and dramatic change may indicate serious health problems.

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COGNITIVE CHANGES

Late adulthood (old age) is generally considered to begin at about age 65. Erik Erikson suggests that at this time it is important to find meaning and satisfaction in life rather than to become bitter and disillusioned, that is, to resolve the conflict of **integrity vs. despair**. Despite the problems associated with longevity, studies of people in their 70s have shown that growing old is not necessarily synonymous with substantial mental or physical deterioration. Many older people are happy and engaged in a variety of activities. **Gerontology**, an interdisciplinary field that studies the process of ageing and the ageing population, involves psychology, biology, sociology, and other fields. Late Adulthood is the period in an individual’s life beginning at ages sixty or seventy and ending at death. This life period, like any other, is one of continuing change and adjustment both in the physical and the psychosocial realms.

Theories of successful ageing include the following:

The **disengagement theory** states that as people age, their withdrawal from society is normal and desirable as it relieves them of responsibilities and roles that have become difficult. This process also opens up opportunities for younger people; society benefits as more-energetic young people fill the vacated positions.

The **activity theory** contends that activity is necessary to maintain a “life of quality,”

that is, that one must “use it or lose it” no matter what one’s age and that people who remain active in all respects—physically, mentally, and socially—adjust better to the ageing process. Proponents of this theory believe that activities of earlier years should be maintained as long as possible.

Ageism may be defined as the prejudice or discrimination that occurs on the basis of age. Although it can be used against people of all ages, older people are most frequently its target and it may often result in forced retirement. Stereotyping of the elderly is also an aspect of ageism, as seen in such a statement

as “He drives like a little old lady.”

Cognitive Changes

Cognitive development is a general loss cognitively as people move closer to the end of life. The study of cognitive changes in the older population is complex. Response speeds (neural and motor) have been reported to decline; some researchers believe that age- related decrease in working memory is the crucial factor underlying poorer performance by the elderly on cognitive tasks. Selective optimization with compensation is one means of making best use of their cognitive skills. They narrow their goals, select personally valued activities so as to optimise or maximise returns from their energy. They find means to compensate for losses.

Factors related to Cognitive change – mentally active people are likely to maintain their cognitive abilities into advanced old age. Retirement can bring about changes in cognitive abilities depending on how those years are used. Terminal decline is a steady, marked decrease in cognitive functioning prior to death.

Memory

The older adults are taking in information more slowly, and they use strategies less, can't inhibit irrelevant information and retrieve important information from long-term memory. So memory failure increases. Slower processing speed means there will be less retained from current activities. They also forget context, which helps us recall information. Recognition memory does not decline as much as free recall.

- **Deliberate vs. automatic memory:** Implicit memory is memory without conscious awareness. This memory is more intact than deliberate memory, trying to recall information.
- **Associative memory:** Associative memory deficit is a problem creating and retrieving links between pieces of information. This is more common for elders.
- **Remote memory** is very long-term recall. It is not any clearer than recent recall for seniors, even though the myth is that seniors remember the past better than recent events.
- **Autobiographical memory** is memory for your own personally experienced events. Seniors best recall their adolescent and early adulthood experiences better than later life experiences. There was a lot of novelty in those times, as well as life choices being made- spouses, jobs, educational choices. These experiences were more emotionally charged, so they are remembered better. They become part of a person's life story, and are remembered often.

Prospective memory is remembering to do planned activities in the future. There is more forgetfulness and absentmindedness as people age. They tend to do better on event-based memory tasks than time-based tasks.

Language processing

The two aspects of language processing diminish in older age: finding the right words and planning what to say and how to say it. Their speech will have more pronouns, unclear references, they will speak more slowly, pause more often, and have trouble finding the right words. There will be more hesitations, false starts, sentence fragments, word repetitions as they age. They tend to simplify their grammatical structures, so they can better retrieve the words they want.

Problem solving

The problem solving declines in late adulthood so married people tend to collaborate more in problem-solving. They will be better at solving problems they think are under their control. They will make more rapid decisions in areas of health, as that is an area they feel they have learned a lot about.

Wisdom includes practical knowledge, ability to reflect on and apply that knowledge, emotional maturity, listening skills, and creativity in a way that helps others. This does increase with age. It occurs as people deal with more difficulties in life and find various means to adapt to change. Those with wisdom tend to have better education and are physically healthier. It requires insight into the human condition and often follows that people with this ability are found in high positions in business and politics and religion.

- Knowledge about fundamental concerns of life: human nature, social relationships, emotions.
- Effective strategies for applying that knowledge to making life decisions, handling conflict, giving advice.
- A view of people that considers multiple demands of their life contexts.
- Concern with ultimate human values, the common good, respect for individual differences in values.
- Awareness and management of the uncertainties of life – many problems have no perfect solution.

Intellectual changes in late adulthood do not always result in reduction of ability. While **fluid intelligence** (the ability to see and to use patterns and relationships to solve problems) does decline in later years, **crystallized intelligence** (the ability to use accumulated information to solve

problems and make decisions) has been shown to rise slightly over the entire life span. K. Warner Schaie and Sherry Willis reported that a decline in cognitive performance could be reversed in 40% to 60% of elderly people who were given remedial training.

Retirement

Retirement at age 65 is the conventional choice for many people, although some work until much later. People have been found to be happier in retirement if they are not forced to retire before they are ready and if they have enough income to maintain an adequate living standard. Chronic health problems such as arthritis, rheumatism, and hypertension increasingly interfere with the quality of life of most individuals as they age.

Widowhood

Women tend to marry men older than they are and, on average, live 5 to 7 years longer than men. One study found ten times as many widows as widowers. Widowhood is particularly stressful if the death of the spouse occurs early in life; close support of friends, particularly other widows, can be very helpful.

Death and dying

Death and dying has been studied extensively by Elisabeth Kübler-Ross, who suggested that terminally ill patients display the following five basic reactions.

- **Denial**, an attempt to deny the reality and to isolate oneself from the event, is frequently the first reaction.
- **Anger** frequently follows, as the person envies the living and asks, “Why should I be the one to die?”
- **Bargaining** may occur; the person pleads to God or others for more time.
- As the end nears, recognition that death is inevitable and that separation from family will occur leads to feelings of exhaustion, futility, and deep **depression**.
- **Acceptance** often follows if death is not sudden, and the person finds peace with the inevitable.

People who are dying are sometimes placed in a **hospice**, a hospital for the terminally ill that attempts to maintain a good quality of life for the patient and the family during the final days. In a predictable pattern after a loved one’s death, initial shock is followed by grief, followed by apathy and depression, which may continue for weeks. Support groups and counseling can help in successfully

working through this process.

Cognitive interventions

Lifelong learning

Types of programs include Elderhostel, which encourages older adults to live on college campuses and take courses from experts, as well as travel the world. Many universities offer classes at low or no cost for seniors. Benefits of continuing education include learning new information, understanding new ideas, making new friends, and developing a broader perspective on the world. This may serve to shake up their stereotypes and value diversity in a new way.

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PSYCHOSOCIAL CHANGES

Later adulthood or the period of old age begins at the age of sixty. During this stage most individuals lose their jobs because they retire from active service. They begin to fear about their physical and psychological health. In our society, the elderly are typically perceived as not so active, deteriorating intellectually. They tend to become narrow minded and seem to attach significance to religion. Many of the old people lose their spouses and suffer from emotional insecurity. However, this may not be true of everybody. Many people at the age of sixty or above remain very healthy and active in life. The life style including exercise, diet, and regular health checkup helps people to enjoy meaningful and active life.

Involvement in grand parenting helps elderly satisfy many of their personal and emotional needs. Grandparents can serve as important role models. Old people find these roles emotionally self fulfilling and tend to derive self satisfaction through achievement of their grand children. Successful ageing occurs when elders have developed many ways to minimize losses and maximise gains. How and why does a change occur during our adult years? Is it purely the result of biological processes, alteration in our bodies and brains as we grow older? Certainly, such changes must play an important role, but are they the entire story? Let's discuss these important questions according to psychologist's stage theories or contextual approach.

The social world of older adults is varied. In general, older adults place a high value on spending time with friends, sometimes more so than time with family. This might be because of life events wherein family members are not always nearby or readily available. Also, many elders prefer not to interfere with or be a burden to their extended family. They strive to be independent and enjoy life with members of their own cohort. Within a marriage, couples may have trouble adjusting to retirement. This is most true for more traditional marriages. However, evidence suggests that married persons tend to be happier in late adulthood than single persons, though those who have never married often cope the best with feelings of loneliness in late life.

Erikson's Theory

Ego Integrity vs. Despair is the final stage of life. This involves coming to terms with one's life. If there is a sense of integrity, people feel whole, complete, and satisfied with their life choices and achievements. They have accepted the setbacks and disappointments and celebrated the successes and found a way to meaning within all these life events. Everything gets put into a perspective which allows a certain contentment with life. Increased age is associated with greater maturity and well-being. There is even a peace about one's mortality, even as close to the end as these people are. Despair, on the other hand occurs when seniors feel they have made wrong decisions, but life is too short to remedy any life directions. They display bitterness, defeat and anxiety about death, a hopelessness.

Peck's Theory: Three Tasks of Ego Integrity are involved in finding integrity:

Ego differentiation vs. work-role preoccupation: This task comes out of retirement, as people who have been invested in careers find other ways to self-worth. They must find another role to invest in and find meaning.

Body transcendence vs. body preoccupation: This task requires finding a way to transcend physical limitations, disabilities, loss of youth and beauty, to find value in cognitive, social strengths and relationships.

Ego transcendence vs. ego preoccupation: This task involves finding a constructive way of facing the reality of death. Elders must find a future beyond their own mortality, through giving back to a younger generation.

Labouvie-Vief's Theory

Emotional Expertise: Early adulthood is all about pragmatic choices- finding ways to solve real-world problems, at work as well as within relationships. Elders are becoming more in touch with their feelings and must use those feelings to reflect on their life experiences. This emotional sensitivity allows elders to detach from experiences in order to choose better how to respond. Younger people are more impulsively emotional in their coping and problem-solving. Elders are better at emotional self-regulation.

Reminiscence and Life Review

Reminiscence is telling stories about people and events from one's past, and reporting thoughts and feelings. Life review is reminiscence in which the person reflects on past experiences, considering their meaning with the goal of achieving greater self- understanding. Middle age was also assessed as satisfying, with childhood and adolescence ranked as less satisfying.

Stability and Change in Self-Concept and Personality

Secure and Multifaceted Self-Concept- after a lifetime of self-knowledge, people feel more secure about whom they are, and their self-concepts become more complex and multi-faceted.

Agreeableness, Sociability, and Acceptance of Change – there are 3 shifts in personality at this point: a more flexible and optimistic approach to life is present.

Agreeableness – ***generosity, acquiescence, and good-naturedness*** are higher for many people at this point.

Sociability drops to some extent, as people become more selective about relationships and significant people die or move away.

Acceptance of change seems to link to well-being. They develop a capacity to accept life's vagaries,

and they are resilient in the face of adversity.

Spirituality and Religiosity – their sense of spirituality encompasses their lives more meaningfully. Often there develops a sense of truth and beauty in art, nature, and relationships. Religion gives people rituals that stabilise life and give meaning to the life struggle. Spirituality advances to a higher level in late life- to a more reflective approach that is more at ease with the unknowable aspects of life.

Individual differences in Psychological Well-Being

Control Vs Dependency

Dependency-support script is a script in which dependent behaviours are attended to immediately, reinforcing the weaker member in her dependency.

Independence-ignore script is a script where independent behaviours are ignored, also reinforcing dependency in the weaker member. Unfortunately, being dependent is not a happy state, so the helper is often resented, even though the elder may recognise s/he needs the help. These negative feelings can foster depression. Context makes a difference however, since the more lovingly the help is offered, the easier it is to accept without regret. Elders will need help, but we can offer it without expressing disgust or impatience for their needs.

Elder Suicide is not always evident. Sometimes elders quit eating, taking care of emotional or physical problems, refusing to take meds, refusing relationships that could be encouraging. Health is a strong predictor of well-being in late adulthood. When people face illness or chronic disabilities, they feel a loss of personal control. Not only does helplessness increase, but social isolation increases, too. Then as mental health declines, it affects physical health, as people eat more poorly, get out less, distract themselves less from their ailments.

Negative Life Changes occur more often in late adulthood- loss of friends, spouses, poor health issues, financial strain and greater dependency. This issue hit women more often, but they still report that they have people who depend on them emotionally, so they retain some of their former identity, even though many relationships often feel strained, due to the women's lower ability to care for others.

Social Support and Social Interaction – social support reduces stress, so it promotes health and well-being, and increases the odds of living longer. If elders require much assistance from others, though, they often feel distressed that they can no longer reciprocate.

Relationships in Late Adulthood

Social convoy is a cluster of family members and friends who provide safety and support. Some bonds become closer with age, others more distant, a few are gained, and some drift away. Elders do try to maintain social networks of family and friends to preserve security and life continuity.

Marriage – marital satisfaction rises from middle to late adulthood if perceptions of fairness in the relationship increase. If couples engage in joint leisure activities and enjoy more positive communication, their relationships become more satisfying.

Siblings- Bonds with sisters are generally closer than those with brothers. Siblings enjoy reminiscing as they enter later adulthood. This allows them to feel a family continuity and harmony, as well as begin to put their lives into a perspective as they naturally do a life review.

Friendships function to offer intimacy and companionship, acceptance, a link to the larger community, and protection from the toll of loss- physical and emotional. Women are more likely to have both intimate friends and secondary friends- people who are acquaintances they do some activities with occasionally.

Retirement and Leisure

Decision to retire depends on affordability, health status, opportunities to pursue meaningful activities, early retirement benefits, gender and ethnicity. Women retire earlier than most men because of family demands.

Adjustment to Retirement is affected by health status, financial stability, sense of personal control over life events, including the retirement decision, characteristics of the work they did, satisfaction derived from work, social support and marital happiness.

Leisure Activities engaged in relate to physical and mental health, but they also relate to reduced mortality. It is best to develop hobbies and interests and volunteer activities before retirement that can be invested in more seriously after retirement.

Successful ageing occurs when elders have developed many ways to minimize losses and maximise gains. Social contexts can foster successful ageing. These are such things as well-funded social security plans, good health care, safe housing that adjusts to changes in elders' needs, social services, opportunities for lifelong learning. Better in- home help, adapted housing and sensitive nursing home care could make a difference in ageing, too. Later adulthood or the period of old age begins at the age of sixty. During this stage most individuals lose their jobs because they retire from active service. They begin to fear about their physical and psychological health. In our society, the elderly are

typically perceived as not so active, deteriorating intellectually, narrow-minded and attaching significance to religion. Many of the old people lose their spouses and suffer from emotional insecurity. However, this may not be true of everybody. Many people at the age of sixty or above remain very healthy and active in life. The life style including exercise, diet, and regular health check up helps people to enjoy meaningful and active life. Involvement in grand parenting helps elderly satisfy many of their personal and emotional needs. Grandparents can serve as important role models. Old people find these roles emotionally self-fulfilling and tend to derive self-satisfaction through achievement of their grand children.

CHALLENGES AND ISSUES IN AGEING PROCESS

As we age, our bodies change in many ways that affect the function of both individual cells and organ systems. These changes occur little by little and progress inevitably over time. However, the rate of this progression can vary differently for different persons. The ageing process brings with it many challenges, as for instance not being physically as strong as in the earlier years, facing different types of responsibilities, crisis and conflicts. For tackling these challenges one must have varying coping abilities which itself is a challenge. In this unit we will be dealing with the type of challenges one faces as one grows old and the varying coping strategies that they need to have to overcome the same.

AGEING PROCESS

Ageing or aging is a process that accumulates changes in organisms or objects over time. Human ageing process involves multidimensional changes on physical, psychological, cultural and social levels.

As soon as an individual is born, their body begins to age. This process continues throughout our life. Ageing is not simply about old age. It is the lifelong process by which we define the social, mental, and biological stages in our lives. A newborn baby is developing new cells and shedding dead cells daily. The “peach fuzz” hair is replaced with new hair that is stronger and more colored. The skin begins to adapt to the “out-of-umbilical-fluid” environment. Bodies continue to grow in the toddler years into puberty and adolescence. Constant changes take place in the body until the height, determined by genetics, is reached. Then the body starts to spread a little here and there, taking a new shape of body style in the adult years.

Changes in our body are sometimes described as deterioration, such as gray hair, wrinkles, loss of hearing, the need for bifocals. These are just normal changes as the body progresses. A person over the age of 50 can still be vital and healthy. Hardening of the arteries, bone density loss, and slowing metabolism are more signs of the normal ageing process. Ageing retardation could stretch out

our entire life cycle like a rubber band, extending the time we spend in infancy, childhood, adolescence, prime, and senior years. Yet there is always the risk of a serious rift between the maturity of the body/mind and the expectations and requirements of life. The ageing process in humans is a complex biochemical process which includes all the changes taking place socially, psychologically and physically. The process of ageing in the human body is inevitable and there are many signs of ageing occurring both within and outside the human body. Ageing, also known as senescence, is a process that every human being goes through, but the ageing process in women slightly differs from the ageing process in men. As we age, there are a number of changes taking place in the various systems of the human body, which may, at times cause age-related problems and disorders.

The intensity of problems and challenges depends on a combination of both genetic and environmental factors. Again, recognising that every individual has his or her own unique genetic makeup and environment, which interact with each other, helps us understand why the ageing process can occur at such different rates in different people. Overall, genetic factors seem to be more powerful than environmental factors in determining the large differences among people in ageing and lifespan. Ageing or ageing is a process that accumulates changes in organisms or objects over time. Human ageing process involves multidimensional changes on physical, psychological, cultural and social levels.

Heredity, diet, exercise, social involvement, and spirituality all play a large part in your physical wellbeing. Eating right and exercising will keep your body healthier and may stave off some of the effects of ageing, or at least slow the ageing process. Women are naturally obsessed with their looks and their world revolves around their looks and looks only. Ageing is an inevitable natural process and there is no treatment for ageing process. Although, it is true that women face much different challenges than men in ageing process, the key to fight ageing process in women, solely depends upon her perspective about life. If she decides to age gracefully, nothing can deter her from leading a beautiful life.

Ageing, from the male perspective, is frequently associated with loss of physical and mental function and vitality. The implied stigma that comes with ageing often prevents men from dealing with important health issues associated with the process. During middle adulthood, the two primary long-term relationships characteristic are cohabitation and marriage. Cohabitors are unmarried people living together in a sexual relationship, often state their reason for cohabiting as either a trial for marriage or an alternative to marriage. Middle adulthood refers to the people who are experiencing changes and development in their central lives. It is basically about the midlife transition or the period of life beyond young adulthood but before the commencement of old age.

Elder care can be thought of as an umbrella of care and services for the frail elderly. These include a broad range of services including: meals and socialisation, personal care, light housekeeping, residential facilities, and adult day care. The process of ageing in the human body starts at middle age around 45. The process and its effects depend on both, the genetic as well as environmental factors and hence, some of the aspects of the ageing process may differ from person to person. To understand the human ageing process better, let us try and understand the cellular changes that occur along with the ageing process. Ageing causes some amount of reduction in the rate of human cell multiplication (cellular senescence) and also causes some of the cells to function inappropriately. It also interferes with the growth and development of the body tissues which leads to the development of various immune system related disorders. Heredity, diet, exercise, social involvement, and spirituality all play a large part in your physical wellbeing. Eating right and exercising will keep one's body healthier and may stave off some of the effects of ageing, or at least slow the ageing process.

Ageing Process in Women

Women are considerably concerned with their looks and their world revolves around their looks and looks only. It's as though physical appearance is the only thing that matters to them in the world. Obviously, when the first few physical signs of ageing start showing up, their world is shattered into bits. Besides, being the more sensitive gender, the emotional and psychological changes that accompany ageing are difficult to cope. Ageing brings about changes on the physical, psychological and social front of a woman's life.

Physical Challenges

Menopause is the word that immediately comes to one's mind when we say ageing process in women. The woman's life is divided into two phases premenopausal and postmenopausal. The hormonal changes in the body cause many ageing problems. The body starts losing out on bone mass and muscle strength. These weakened bones often result in osteoporosis and arthritis, which accompany the woman throughout the rest of her life. The skin becomes sunken and sallow and eventually, wrinkles begin to appear. The immune system is no longer able to produce sufficient antibodies, thereby making the body susceptible to various illnesses. Most vital organs show diminished performance, which affects the entire health of the woman.

Psychological Challenges

These are to an extent related to physical status of the individual. Menopause is the buzz word here. The hormonal changes during menopause bring about plethora of behavioural changes in a

woman. The very fact that they are no longer fertile, is enough to send many women into depression. Emotional insecurity haunts their mind due to the fear that since she is no longer physically attractive, her spouse may not love her. She may become extremely moody and irritated as she may not be able to cope with the many changes that happen all at once in her life. Lastly, there is this daunting feeling of ageing that she somehow relates with the 'end'. However, some optimistic women may take this as an opportunity to fulfill their unaccomplished dreams and lead a life the way they always wanted to.

Social Challenges

During ageing process in women, their social life entirely depends upon their own attitude towards life and most importantly their health. Some women, due to their poor health or some other reason, may completely shut themselves away from the world. While the other, more outgoing group, may engage themselves in community activities or some hobbies and interests. Most women in this age group are financially settled and have a family that is no longer dependent upon them. Thus, this period poses a golden chance for them to live the life for themselves.

Ageing is an inevitable natural process and there is no treatment for ageing process. Although, it is true that women face much different challenges than men in ageing process, the key to fight ageing process in women, solely depends upon her perspective about life. If she decides to age gracefully, nothing can deter her from leading a beautiful life.

Ageing Process in Men

Ageing, from the male perspective, is frequently associated with loss of physical and mental function and vitality. The implied stigma that comes with ageing often prevents men from dealing with important health issues associated with the process. Ageing process in men has always been related with the decrease of mental and physical functions. The ageing process in men brings physiological changes in the body. Men, in their middle age, do bulge around the middle due to accumulation of a lot of unburned fat and lack of exercises. Ageing process in men does not treat all the men in the same way. The day you notice a grey hair, standing out among the rest of your black hair, you may observe your boss, who is senior in age to you, darting from one place to another, as if he is a 16 year old kid. This may make you wonder, how this chap is managing to stay so fit, at his age.

Whole health

When the ageing process starts, a whole foods diet high in fiber, low in saturated fat, and rich in nutrients is the best health-promoting approach. Eating fresh vegetables and fruits rich in antioxidant

nutrients and fiber helps reduce the risk factors for cancer. Consistent moderate exercise promotes cardiovascular health as well as reduces the risk factors for obesity, diabetes, and osteoporosis. Together with an approach to stress management, diet and exercise form the foundation of an overall health plan.

Mental health

Mental health is an important concern for many men, as Alzheimer's Disease and Dementia which are common to occur during this age may afflict the individual. Maintaining mental health and function as we age is a growing concern. Herbal extracts like ginkgo biloba and nutrients like phosphatidyl serine and DHA (docosahexaenoic acid), a component of fish oil can greatly assist in promoting mental health and function.

Standardized ginkgo extracts help increase circulation to the brain and extremities, act as an antioxidant in the brain and retina, and protect nerve cells through a reduction in platelet aggregation. By promoting blood flow to the brain and reducing potential damage to nerve cells, ginkgo supports cognitive function and can help stave off diseases such as Alzheimer's Disease and Senile Dementia.

Heart health

The most obvious concern for men as they age is heart health and disease. Cardiovascular disease is still among the most common causes of death among men. Diet and lifestyle play a significant role in the progression of cardiovascular disease and are also central to its treatment. Natural medicines can also play a key role in helping to reduce the risk and complications of heart disease.

High fiber foods and a reduced intake of meats high in fat combined with a program of daily exercise and stress reduction techniques have shown very positive results in even the worst heart disease.

Prostate health

Prostate health is a consideration for men once they reach the age of 40. Over the age of 40, it is estimated that 60 percent of men will have an enlarged prostate (also known as BPH, benign prostatic hyperplasia). As men age, the likelihood that they will develop BPH increases. Although the initial symptoms of prostate enlargement may be considered minimal, and only slightly bothersome, proactive care can greatly reduce the risk for more serious complications. Standardized extracts of herbs like saw palmetto, nettle, and pygeum are frequently recommended along with pollen extracts. Natural therapies like pollen extracts and saw palmetto can also help reduce the effects of testosterone breakdown products on prostate cells. High levels of dihydrotestosterone (DHT) have been associated with prostate cancer.

Skeletal health

Joint and bone health issues are also common problems for men in which past sports injuries and wear and tear can lead to osteoarthritis. As one ages, our connective tissue is not able to repair itself as efficiently as when we were younger. Additional nutrition is often necessary to promote cartilage healing and prevent further breakdown of joint tissue associated with osteoarthritis. Although many men do not think about osteoporosis, it, too, is a major concern for men as they age. Although women have bone health risks related to changes in hormone levels, as many as one-sixth of all men will fracture a hip during their lifetime. The ageing process is a natural one. Ageing, however, does not have to mean loss of function or vitality. In fact, healthful eating habits in combination with focused nutrients and herbs can combine to make the 40-plus years the best of any man's life.

AGEING ISSUES AND CHALLENGES IN LATE ADULTHOOD

Elder care can be thought of as an umbrella of care and services for the frail elderly. These include a broad range of services including: meals and socialisation, personal care, light housekeeping, residential facilities, and adult day care. There are few physical differences among a group of first graders. But if you check out the same group 65 years later, their physical differences outnumber their similarities. Some will be the epitome of health, while others will be managing one or more chronic conditions. Some will be vigorous, while others will be lethargic. As we get older, we become physically less like our peers. That's because we are the sum of our life experiences. At age six, not too much has happened to our bodies to make us radically different from our peers. But by middle and old age, we've had decades to develop and maintain habits that have an impact on our health, both negatively and positively.

Ageing may be inevitable, but the rate of ageing is not. Why and how our bodies age is still largely a mystery, although we are learning more and more each year. Scientists do maintain, however, that chronological age has little bearing on biological age. The number of candles on your birthday cake merely serves as a marker of time; it says little about your health. The human body goes through a variety of changes as it gets older. In general, muscles, blood vessels and other tissues lose their elasticity. The heart becomes less efficient, bones become weaker and the metabolism slows down. In spite of the changes to the rest of the body, a lot of people focus primarily on changes to their appearance as they age. These include:

Wrinkles

Fibers in the skin called collagen and elastin break down and lose strength as a person gets older. Sun

exposure throughout life contributes to this process. Without these fibers, the skin cannot hold its shape as well. Older skin retains less fat, making it look less supple. The pull of gravity also causes the skin to sag.

Dry skin

Older people produce less sweat and oil, causing their skin to be drier. Excessively dry skin can emphasise the appearance of wrinkles.

Age spots

Dark spots on the skin, particularly the arms, hands, face and feet, stem from cumulative exposure to the sun. Most people call these marks liver spots, but they are unrelated to liver function. They actually stem from overproduction of the pigment melanin in areas of the skin that have experienced the most exposure to the sun.

Obesity and Metabolic Syndrome

It is seen that most of the adults aged 60 and older are overweight or obese. Obesity is related to type 2 diabetes, cardiovascular disease, breast and colon cancer, gall bladder disease, and high blood pressure. Women in perimenopause and menopause tend to accumulate fat around the waist and hips, and men get the gut. The food intake should be in check by reducing calorie intake and alcohol intake because a lot of alcohol calories go right to the gut. Also, increase in healthy fat intake such as omega-3 fatty acids and unsaturated fats, and eliminate trans fats completely. Foods sweetened with high-fructose corn syrup should be avoided. The common sweetener is found in everything from sodas to breakfast cereal to low-fat yogurt.

Arthritis

Arthritis affects nearly half the elderly population and is a leading cause of disability. The keys to prevention is to avoid overuse, do steady, regular exercise rather than in weekend spurts, and stop if you feel pain. Managing one's weight is just as essential for joint health as cardiovascular health.

Osteoporosis and Falls

Osteoporosis and low bone mass affect most of the adults age 50 and older, most of them are women. According to the National Osteoporosis Association, osteoporosis is not part of normal ageing. Healthy behaviours and treatment, when appropriate, can prevent or minimize the condition. Weight-bearing exercise also helps to keep bones healthy.

Cancer

Risk for developing most types of cancer increases with age. As women age, the rate of cervical cancer decreases, and endometrial cancer increases. The risk of prostate cancer increases with age, and black men have a higher rate than white men. Screening should start in your 40s, and at the very least should involve a digital rectal examination. Lung cancer accounts for more deaths than breast cancer, prostate cancer, and colon cancer combined.

Vision and Hearing Loss

Age-related eye diseases such as macular degeneration, cataract, diabetic retinopathy, and glaucoma affects people aged 40 and older. Eating foods with high antioxidant content may be helpful in reducing vision loss due to macular degeneration. Regular eye exams should include screening for glaucoma, which is called “the sneak thief of sight” for the fact that the first symptom is vision loss. The disease can be arrested, but vision lost to glaucoma cannot be restored. The incidence of hearing loss increases with age. Hearing loss takes a toll on the quality of life and can lead to depression and withdrawal from social activities. Although hearing aids can help, only one out of four people use them. High-frequency hearing loss is common in old age and made worse by a lifestyle that includes exposure to loud sounds.

Mental Health: Memory and Emotional Well-being

Staying mentally active is as important as staying physically active. One of the perplexing problems of ageing is Alzheimer’s disease. Depression is often underdiagnosed and untreated. Many people mistakenly believe that depression is a natural condition of old age. One of the biggest life changes is retirement. Many people have their sense of worth tied up with work. In retirement, depression and suicide rates rise.

Conclusion

The ageing process depends on a combination of both genetic and environmental factors. Recognising that every individual has his or her own unique genetic makeup and environment, which interact with each other, helps us understand why the ageing process can occur at such different rates in different people. Overall, genetic factors seem to be more powerful than environmental factors in determining the large differences among people in ageing and lifespan. Ageing or ageing is a process that accumulates changes in organisms or objects over time. Human ageing process involves multidimensional changes on physical, psychological, cultural and social levels.

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