THE ROLE OF EMOTIONS IN THE LIFE OF OLD AGE PEOPLE

РОЛЬ ЭМОЦИЙ В ЖИЗНИ ПОЖИЛЫХ ЛЮДЕЙ

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Abstract. This article is about to venerate old age people, how to perceive their internal feelings to revere them and features of stress and emotional situations of old age and retired people.

Stress management refers to a wide spectrum of techniques and psychotherapies aimed at controlling a person's levels of stress, especially chronic stress, usually for the purpose of improving everyday functioning. It involves controlling and reducing the tension that occurs in stressful situations by making emotional and physical changes.

As a main part of emotion stress is a feeling of strain and pressure. Small amounts of stress may be desired, beneficial, and even healthy. Positive stress, that we say eustress, helps improve athletic performance. It also plays a factor in motivation, adaptation, and reaction to the environment. Excessive amounts of stress, however, may lead to bodily harm. Bad stress, as we say distress can increase the risk of strokes, heart attacks, ulcers, dwarfism, and mental illnesses such as depression.

Аннотация. Работа посвящена исследованию чувств пожилых людей, особенностей их эмоционального восприятия окружающего мира и эмоций. В своей работе авторы руководствуются принципами бережного отношения к старости и почитания пожилых людей.

Управление стрессом используется в различных методах психотерапии, направленных на контроль уровня стресса человека, особенно хронического стресса, обычно с целью улучшения повседневного функционирования. Это включает в себя контроль и снижение напряжения, которое происходит в стрессовых ситуациях, делая эмоциональные и физические изменения.

В качестве основной части эмоционального стресса чувствуется напряжение и давление. Небольшое количество стресса может быть желательным, полезным и даже здоровым. Позитивный стресс, который мы называем eustress, помогает улучшить спортивные результаты. Он также играет роль в мотивации, адаптации и реакции на окружающую среду. Чрезмерное количество стресса, однако, может привести к телесному повреждению. Плохой стресс, как мы говорим, дистресс может увеличить риск инсультов, инфарктов, язв, карликовости и психических заболеваний, таких как депрессия.
Keywords: old age, emotions, feeling, stress, socioemotional development, compensation, ego integrity.

In our country everybody venerates old people. It is our nationality to heed them. Even to care, love and support old age people 2015 year was adopted as the year of venerating old people in our country. To take care of them we must look social and psychological aspects of old age. The main point is what kind of emotions retired or old age people feel, do they have distresses and how we should prevent them from stressors.

Emotions are our feelings, sentiments which are provoked by everyday events, occurrences, problems. These emotions seem to rule our daily lives. We make decisions based on whether we are happy, angry, sad, bored, or frustrated. We choose activities and hobbies based on the emotions they incite. Emotion is a prominent feature of life, increasingly thought to play a central role in a wide range of human processes spanning normal and abnormal development, including social bonding, intrapsychic dynamics, memory and cognition, and mental and physical health and illness.

Many researchers have tried to identify and classify emotions. Psychologist Paul Eckman suggested that there are six basic emotions that are universal throughout human cultures: fear, disgust, anger, surprise, happiness, and sadness. After some years he expanded this list to include a number of other basic emotions including embarrassment, excitement, contempt, shame, pride, satisfaction, and amusement.

Robert Plutchik introduced another emotion classification system known as the "wheel of emotions." This model demonstrated how different emotions can be combined or mixed together, much the way an artist mixes primary colors to create other colors. Plutchik suggested that there are 8 primary emotional dimensions: happiness vs. sadness, anger vs. fear, trust vs. disgust, and surprise vs. anticipation. These emotions can then be combined in a variety of ways. For example, happiness and anticipation might combine to create excitement.

Emotion involves three distinct components: a subjective experience, a physiological response, and a behavioral response:

The Subjective Experience - the experience of emotion can be highly subjective. Everyone has own unique experience of emotions is probably much more multi-dimensional. For example, all anger is not the same. Your own experience might range from mild annoyance to blinding rage. Even we do not always experience only forms of each emotion. Our feelings are ambivalent emotions over different situations. This is the coexistence of opposing attitudes or feelings, such as love and hate, toward a person, an object, or an idea.

The Physiological Response - emotions also cause strong physiological reactions. Many of the physical reactions you experience during an emotion such as sweating palms, racing heartbeat, or rapid breathing are controlled by the sympathetic nervous system, a branch of the autonomic nervous system. The autonomic nervous system controls involuntary body responses such as blood flow and digestion. The sympathetic nervous system is charged with controlling the body's fight-or-flight reactions. When facing a threat, these responses automatically prepare your body to flee from danger or face the threat head-on.

The Behavioral Response – emotions are expressible. Expression of emotion is a facial aspect or a look that conveys a special feeling: an expression of scorn. Our ability to accurately understand these expressions is emotional intelligence and these expressions play a major part in our overall body language. Researchers believe that many expressions are universal, such as a smile indicating happiness or pleasure or a frown indicating sadness or displeasure.

The biology explanation maintains that degradation and functional slowing of the emotion-relevant brain and autonomic systems make older adults less reactive to emotional stimuli. If the same negative stimulus generates less physiological reactivity in older adults, then it would be less
of a challenge to their well-being. Thus, what is considered a loss in the biological sense would become again for well-being. However, these conditions might only apply to mild or moderate emotional stimuli that are experienced in everyday life. Once emotional stimuli are intense and enduring enough to arouse physiological systems, older adults could react more strongly to them.

The motivational explanation holds that older adults are more motivated than younger adults to downregulate negative effect. Assuming a situation in which both young and old react the same way to an emotional stimulus, both physiologically and subjectively, it is possible that young adults hang onto negative emotions to achieve their other goals, whereas older adults would attempt to defuse negative states quickly.

Old age adults have own cognitive and socioemotional development. Old adults, like middle-age ones, show a decline in information-processing speed, but in a much faster rate. Memory for names and locations decline. Information recall slows down, but most are still able to retrieve. Because of this, old adults, when forced to solve problems, manipulate information instead of relying on casual recall.

Old-age adults tend to be selective in their social interactions - maximizing emotional satisfaction, and minimizing emotional risks. Generally, they prefer visits from family, relatives and close friends. The importance old-age adults place upon emotions is supported by research. Carstensen and Turk-Charles found that after reading a passage from a popular novel to 20-83 year-olds, younger adults perform better in recalling neutral material than older ones, but that older adults perform better than younger ones when the passage is emotional by nature. This means that old adults are more attuned towards emotional information than young adults.

Although old age brings fear to many because of the seemingly inescapable decline of health, there are many provocative people who defied the limitations and stereotypes of aging. One of those is Sadie Halperin. After 11 months of weight lifting and stationary bicycling, Sadie was able to escape hypertension and improve upon her health, from being stuck in a wheelchair, to being able to go out and shop on her own.

Social psychologists offer the Activity theory which suggests that healthy aging corresponds with continued psychological engagement and social participation throughout the older age. Older adults should actively compensate for the age-related changes in their biological, psychological, and social experiences, and individuals must continue to engage in and modify the activities that they pursued in their middle age.

Rather than suggesting that older adults can be characterized by a single characteristic such as disengagement, Erik Erikson argued that individuals pass through eight maturational stages over the course of their life. These stages closely follow biologically driven events such as puberty and aging. Further, each state involves a conflict between two extreme characteristics and the resolution of this conflict shapes the individual personality.

In old age, Erikson argued that individuals must pass through a stage which is characterized by a psychological conflict between ego integrity and despair. In this stage, older adults reflect upon their life and then assess their self-worth. A positive appraisal of their life course experience results in ego integrity while a negative self-appraisal results in despair.

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Stress can make the individual more susceptible to physical illnesses like the common cold. Stressful events, such as job changes, may result in insomnia, impaired sleeping, and health complaints. Research indicates the type of stressor and individual characteristics such as age and physical well-being before the onset of the stressor can combine to determine the effect of stress on
an individual. An individual's personality characteristics, genetics, and childhood experiences with major stressors and traumas may also dictate their response to stressors.

Since severe stress can create both physical and emotional problems, we cannot assume an illness evolving from psychological stress is necessarily purely psychological. Each of us has our genetically inborn system vulnerability – the part of the dam which cracks first. The same degree of stress may give Joe an ulcer, and make Mary wheeze from asthma; it may overwhelm your best friend with feelings of inadequacy and leave you feeling challenged and alive.

Life events scales have been devised which list all the stressful events in our lives and rate them according to severity and the likelihood of precipitating illness. The most weighty and potentially damaging stress of all is when someone we love dies, especially if we are quite dependent on them, such as in a long-term marriage or child’s loss of a parent.

Other potentially incapacitating stresses are divorce, illness, and various losses such as failure of a business, loss of money, a demotion in position or importance, and consequent losses of self-esteem. When the person suffering the loss does not have enough support from her family and friends, the damage is multiplied. We all have problems with loss and need to work to prepare ourselves not to overreact to it. We have numerous other options besides breakdown, but we need to understand them before we can use them.

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