

# PSYCHO-SOCIOLOGICAL ISSUES IN OLD AGE & THEIR ADJUSTMENT

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## Abstract

This stage generally refers to those over 60–80 years. During old age, people experience a conflict between integrity vs. despair. When reflecting on their life, they either feel a sense of accomplishment or failure. Physically, older people experience a decline in muscular strength, reaction time, stamina, hearing, distance perception, and the sense of smell. They also are more susceptible to severe diseases such as cancer and pneumonia due to a weakened immune system. Mental disintegration may also occur, leading to Dementia or Alzheimer's disease. However, partially due to a lifetime's accumulation of antibodies, the elderly are less likely to suffer from common diseases such as the cold.

Whether or not intellectual powers increase or decrease with age remains controversial, longitudinal studies have suggested that intellect declines, while cross-sectional studies suggest that intellect is stable. It is generally believed that crystallized intelligence increases up to old age, while fluid intelligence decreases with age. For young people, time seems to have no end. But, as time passes we suddenly realize that the number of remaining years is limited. The realization that we are growing old can be traumatic. Our ideas about and attitudes toward aging are very important in how well we cope with and enjoy the passing years, Some psychological characteristics of aging get passed down from generation to generation through our genes. Others can result from real or perceived changes in our bodies as we age (e.g., mental or physical limitations). Social and cultural differences also affect how we deal with aging. Men and women think about aging differently, because of biological, social, and psychological differences between the sexes. For example, women tend to live longer than men, so they generally experience more losses of family members and friends.

## How Our Minds Change as We Age

Losing mental function is perhaps the most feared aspect of aging. In fact, the fear itself often begins to wear down our quality of life. We begin to believe the stereotype that we are losing (or will lose) our mental function. This can lead to loss of self-esteem and withdrawal from others. However, mental function does *not* have to decrease with age. Our fears are usually groundless.

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### ***Learning***

The ability to learn continues throughout life, although we may learn in different ways as we age. Older people often require more time and effort to absorb new information. We may need to read instructions more carefully to be able to organize and understand new information. As we get older, we tend to avoid learning things that are not meaningful or rewarding to us, or that cannot be linked to one of our other senses, such as sight or hearing. The reasons for these changes in learning are not known, but they may be partly caused by changes in our sight, hearing, and other senses that we use for memory.

### ***Memory***

Older people may have trouble remembering some things, but not others. Short-term memory (i.e., less than 30 minutes) worsens as we age. Although we often hear that long-term memory (weeks to months) also worsens as we age, this may depend more on getting information into our memory, rather than remembering it later. Very long-term memory (months to years) is basically permanent, collected through a lifetime of day-to-day education and experience. This type of memory increases from the age of 20 to about the age of 50 and then remains essentially the same until well after 70. Most of us learn to adapt to changes in learning and memory. We slow down and do things more carefully. We think about things a little longer to remember them. We may avoid new or strange environments. As a result, any memory losses may not even be noticed until we experience a major life change, such as moving or the death of a spouse.

### ***Reaction time***

As we age, we tend to process information at a slower pace. This means it takes longer to figure out what is going on and what to do about it (if anything). Most of this "slow down" is caused by changes in the nervous system over time. We tend to slow down even further when doing tasks that require more thought or are more complicated. When an event is a surprise, we are particularly slow to respond. However, older people tend to make fewer mistakes in their responses than younger people.

### ***Intelligence***

Whether intelligence declines as we age is hotly debated. Although overall intelligence stays about the same throughout life, older people don't do as well as younger people on many standardized intelligence tests. In formal tests of performance, older people also slow down with age—but, they make fewer mistakes. This is because we learn to value correctness as we age. So although we may be slower to respond, our answers are more accurate. We tend to be more cautious and less willing than younger people to make a mistake in judgment, which is a valuable characteristic in many real-life situations.

### ***Life skills***

You should keep in mind that most intelligence tests do not address things that we deal with in our daily lives. For example, older people tend to do better than younger people on tests that deal with practical activities, such as using a telephone directory. In fact, as we age, most of

us get much better at being able to manage our daily affairs. It is usually only in times of stress or loss that we may be pushed beyond our limits, and having a support network to help us cope is very important. Older adults can continue to gain support, care, respect, status, and a sense of purpose by interacting with younger people. And younger people can learn from the experience, cultural meaning, stability, and continuity of older people.

### **Stresses**

Older adults often must face a great number of stresses that can be caused by a broad range of events and situations. Stresses can be physical or social. They can be an ongoing part of day-to-day life, or caused by sudden traumatic events. Common stresses for older people include the following:

- diseases or health conditions, possibly chronic (e.g., arthritis)
- perceived loss of social status after retirement
- death of a spouse

Stress often affects our physical health and can have an even stronger effect on our mental well-being. Too much stress can be associated with a number of psychological and physical conditions, such as anxiety, headaches, and ulcers.

### **Care giving**

Chronic diseases and conditions affect older adults. Family members, especially spouses, are most often the caregivers. More than 44 million Americans (mostly women) care for family members of all ages. Many older adults are also caregivers for another family member.

Although care giving can be rewarding, it is also very stressful. Caregivers have twice the risk as others for mental and physical health problems (e.g., burnout, substance abuse, depression, etc.). They are also more than twice as likely to be taking medications to relieve anxiety or stress. Social isolation, family disagreements, and financial hardships are common problems associated with long-term care giving. Caregivers can benefit greatly from training, information, and support. Programs that provide education, counseling, and behavioral therapy can decrease the stress of care giving. Support groups for individuals with specific diseases (e.g., Alzheimer support groups) often have information about support programs for caregivers.

### **Failure and unhappiness**

As we get older, the death of friends and family becomes more common. Losing and grieving for a spouse is one of the most traumatic situations commonly faced by older adults. More than 1 million spouses (mostly women) were widowed in the United States in 2003. This number is estimated to increase to 1.5 million every year by 2030. Other losses that may also cause grief include loss of sight or hearing and losses in function caused by illnesses (e.g., trouble walking from arthritis). These and other negative life events place a heavy burden on older adults.

Most people grieve intensely for 6-12 months after a major loss. Generally, we feel depressed and withdraw from others. After about a year, we begin to accept the loss and start to

interact more with friends and family. Going through the grieving process is an important part of emotional healing, and we shouldn't try to ignore it or pretend it isn't there. Getting treatment for depression can also help avoid the mental and physical health problems associated with a grieving process that goes on far longer than usual.

### *Changing roles as we age*

People shift through many roles throughout their lives. We are children, parents, friends, workers, patients, students, sports enthusiasts, artists, etc. One of the most dramatic changes involves retirement. When older adults retire, they leave work and social roles that likely provided economic rewards as well as social status. In addition, older people may find that there are changes in their personal relationships after retirement. For example, spouses may find themselves spending much more time together than they ever did before. Older parents may add the role of grandparent or even great-grandparent, which brings both new rewards and new demands. Losses in function may place older adults in the position of asking for help, rather than providing it. Similarly, another's losses may place someone in a care giving role. These role changes can be stressful and affect mental and physical health.

### *Social status*

Many social factors affect how we think about ourselves and how others think about us. Our sex, race, and economic status all affect our real and perceived social status. These factors also can affect the resources that are available to us to help cope with aging and health. For example, it's difficult for poorer people to use support programs or community activities that cost money. Ethnic or cultural backgrounds may also have a major effect on our outlook and how we deal with situations. For example, women from some cultures do not feel comfortable exercising in public.

Many people are uncomfortable discussing some illnesses. Others may agree to only those treatments that are acceptable in their culture. Some cultures view hospice care as a wish to bring about the death of the person. Similarly, a procedure like autopsy may strongly violate certain cultural or religious beliefs.

### **Healthy Ways to Cope with Stress**

Everyone must learn to manage both the stresses caused by major life events and the routine stresses of day-to-day life. Too much stress can greatly affect our physical health and ability to function, as well as our mental health and overall well-being. This includes enthusiasm for life and the ability to enjoy social interactions.

Problems caused by stress often relate to how we deal with the stressful situation. There are positive ways to deal with stress, even when the stress is beyond our control (e.g., the death of a loved one). Learning positive behaviors can improve how we understand and cope with

stress. For example, we can learn how to take more control of a stressful situation. We can also become more aware of social services and programs that are available. Family counseling and therapy can also strengthen social relationships with family and friends.

### ***Belief in yourself***

One of the best ways to cope with all kinds of stress is through a strong belief in yourself and your ability to deal with situations. Believing in you has many positive effects on health, both physical and mental. The way a person deals with a stressful situation has a big effect on what happens and how he or she feels about it. This is true for many kinds of stress, including those related to disease, loss in function, and changes in social roles. In fact, feelings of self-confidence and personal control can go a long way toward improving function and overall quality of life, even in the face of physical disability.

### ***Benefits of Believing in Yourself and your Ability to Control Situations***

- Lessens the negative effects of stress
- Contributes to overall physical health and ability
- Helps maintain overall function
- Contributes to being able to make good decisions and follow through
- Contributes to ability to get more done

More good news is that there are effective ways to strengthen your belief in yourself. Your sense of personal control and self-confidence increases when you succeed at something new or when you see others like yourself succeed. Encouragement and empathy also can increase self-confidence and a feeling of personal control. A number of training programs are available for improving performance in specific areas. Examples include programs to reduce the fear of falling or to stick with an exercise regimen after a heart attack.

### ***Coping strategies***

Coping strategies are emotional and mental responses that help us deal with stress. They provide positive reinforcement and reinforce self-esteem. There are many coping strategies that we can try. For example, thinking confidently and optimistically in the face of bad news might help us meet the challenge and increase the likelihood of a good result.

Another coping strategy that people tend to adopt with age is to cut down on the number and kinds of things they do, but to keep doing those activities that they like the most and do well. In other words, people spend more time doing a few selected activities and getting the most enjoyment from them. Although performance and abilities may lessen over time, you can continue to do the things you like, but perhaps you might simplify them. For example, a person who enjoys preparing fancy dinners might choose a simpler main course that he or she has prepared many times, along with several simple side dishes.

### ***Social involvement***

Participating in family and community activities is a major source of personal satisfaction. Being involved plays an important role in improving self-esteem and giving meaning to life. This is true for people of all ages, but is especially important for older adults.

Becoming more involved and finding ways to contribute to the broader world can improve overall well-being. There are many ways to get involved, including providing family assistance (e.g., baby-sitting), participating in group activities, volunteering, and even taking a job. Social involvement also helps to fight depression, which is more common among those who withdraw from their friends, family, and community. Social isolation is a strong risk factor for health problems and early death.

### ***Social networks***

Social networks provide many benefits that improve our overall well-being. Social networks provide emotional and physical support in times of crisis. For example, family and friends can support older adults through the death of a spouse or close friend. They can also provide help if an older adult experiences functional losses. However, we shouldn't allow ourselves to rely completely on social networks. Older people, particularly men, who receive too much assistance, may be less motivated to manage and overcome a disability. If a person receives too much help or isn't encouraged to care for themselves, permanent disability can result. So although the social network is very helpful, the person should also be encouraged to regain maximal function.

#### ***Benefits of Social Networks***

- Less risk of early death
- Better physical and mental health
- Less risk of disability or decline in activities of daily living
- Better chance of recovering ability to perform activities of daily living
- Buffered impact of major life events
- Greater feeling of personal control

Having social relationships that are enjoyable and meaningful is more important than having a large number of social interactions. Close personal relationships, such as a happy marriage or close relationships with family or friends, seem to be the most important. However, close relationships that are filled with disagreements and conflict work in the opposite direction. Having a large social network can have both positive and negative effects. A large social network offers the opportunity for greater involvement and contribution. However, a large social network also means a greater number of losses (death or disability) within the network.

### ***Spiritual or religious involvement***

Religion plays an important part in the lives of many older adults, who are generally more actively involved than younger people in religious services and practices. More than 50% of all older adults report frequent attendance at religious events. This involvement generally has overall benefits. Religious activity contributes to social interaction and encourages involvement.

### ***Healthy behaviors***

Healthy behaviors have positive effects on overall well-being at any age. Positive behaviors include the following:

- being physically active
- eating a healthy diet
- not smoking
- drinking alcohol only in moderation
- practicing relaxation or stress-reduction techniques

Although these are physical behaviors, they are also important psychologically and socially. For example, older adults with strong feelings of personal control and self-esteem are more likely to practice healthy behaviors. Similarly, healthy behaviors are likely to promote self-esteem and feelings of accomplishment in older adults.

Strong social networks generally encourage healthy behaviors, making them easier and more enjoyable. Seeing friends and family gain health benefits from exercise encourages a person to increase his or her physical activity as well.

## **OLD AGE PSYCHOLOGY**

The years of late adulthood mark the period of life in which people are known as elderly. The period is characterized in many ways with the declines that occur in almost all aspects of development. Extending in time from the age of sixty-five until death, old age or **late adulthood** is a dynamic period of life that has its own challenges for adjustment and problems to overcome as the individual continues to experience the aging process.

Our culture promotes and values youthfulness over age and many of its ideas about old age are stereotypes that are largely negative in nature. Aging has a negative connotation in our culture along with the individuals who are the elderly. Gerontophobia is defined as the unreasonable and irrational fear of old people (Kuhn, 1978).

Changes may be taking place in attitudes about aging and the aged individual. As this age group increases in numbers through the years to come, greater understanding and appreciation of the process of development in late adulthood should also take place. Changes in social policy affecting elderly individuals can be expected to changes as well.

### **Stereotypes of the Elderly**

Stereotyping refers to categorizing characteristics of individuals such as by age, sex, race, ethnic background, or occupation. From this process of categorization, it is relatively easy to

attribute qualities that may be typical of one individual to an entire group that may share a common trait or characteristic.

| <b>Stereotypes About the Elderly</b>   |
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| <ul style="list-style-type: none"><li>• Almost all older people live in institutions.</li><li>• Older people are isolated from their families and are lonely.</li><li>• Older people have poor health and spend a great deal of time in bed</li><li>• Older people cannot learn.</li><li>• Older people are not interested in sexual activity and are incapable of sexual behavior.</li><li>• Old age begins with sixty – five.</li><li>• Most people move after retirement.</li><li>• Older people prefer to live with their children.</li><li>• Old people sleep a lot.</li><li>• Old people are grouchy and irritable.</li></ul> <p style="text-align: right;">(Harris, D. K. and Cole, W. E. 1979)</p> |

A negative stereotype exists about the nature of elderly people depicting the elderly person as sick, poor, unimportant, unhealthy, not friendly, ugly, and sad (Serock et al., 1977). There are several sources of these negative feelings and attitudes about the elderly. One source being literature, some of which one is exposed to as a child when attitudes begin forming about many ideas and topics. Age norms may be another source of images about the elderly. Age norms are expectations of behaviors according to an individual's age. Certain behaviors that are approved at one age may not be considered appropriate at another.

### **Divisions of old age**

When does old age begin? While old age is just a state of mind to many people, there are several cultural events tied to chronology that are landmarks of the beginning of late adulthood. Age sixty five is usually considered a milestone and as the beginning of late adulthood. This and other landmarks are rather arbitrary. Events that coincide with attaining sixty-five and the beginning of old age include retirement from major work roles, beginning social security benefits and Medicare coverage, income-tax, and vantages, reductions in transit fares and admission prices, and special purchase privileges.

Advances in modern medicine, better health care, improved nutrition, and other factors now enable people to be in better health to a more advanced age. For these and other reasons, the period of late adulthood can be divided into four subcategories based on age by decade.

| <b>AGE DIVISION OF LATE ADULTHOOD</b>  |
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| <b>THE YOUNG – OLD: 60 to 69 YEARS</b><br>This is a transition period marked by many adjustments such as retirement and declining strength. Sharp reduction in expectations of behavior. |



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| <p><b>MIDDLE-AGE OLD: 70 to 79 YEARS</b><br/>                 Increasing deaths of friends and spouses; reduced participation in home and community activities; increasing health problems; contracting social world.</p>   |
| <p><b>OLD – OLD: 80 to 89 YEARS</b></p> <ul style="list-style-type: none"> <li>• Assistance needed in maintenance of social contacts.</li> <li>• Many health problems.</li> <li>• May become institutionalized.</li> <li>• May lead a very sheltered life.</li> </ul> |
| <p><b>VERY OLD – OLD: 90 to 99 YEARS</b></p> <ul style="list-style-type: none"> <li>• Health problems are more severe and serious.</li> <li>• Very limited activity.</li> </ul> <p>(Burnside, I. M. et. al. 1979).</p>  |

Neugarten (1978) first recognized that not all individuals in late adulthood are disabled or feeble. She distinguishes between the “young-old”, who are relatively healthy and robust in the initial years of this period between the age of fifty-five and seventy-five, and “old-old”, who are beset with health problems and the disabilities of advanced age.

### General Trends

Late adulthood extends for a considerable period of time in an individual’s life. One does not become an older person immediately upon reaching sixty-five. Aging is a gradual process that produces changes slowly. The period of late adulthood generally is marked as a time of continued decline. The general trend of decline is most noticeable in the physical changes that occur with increasing regularity during the period. The role changes that accompany old age are also very characteristics of this stage in the life cycle and occur in work as well as in family roles, while individuals usually make some compensation these adjustments take place more slowly throughout the period.

### Developmental Tasks

The developmental tasks of late adulthood differ from those of earlier stages in two fundamental ways:

1. There is a focus on maintenance of life rather than discovering more about it. (Havighurst, 1972).
2. The tasks center on happening in the person’s own life rather than on the lives of others (Hurlock, 1980).

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| <p><b>DEVELOPMNETAL TASKS OF LATE ADULTHOOD</b></p>  |
| <ul style="list-style-type: none"> <li>• Adjusting to decreasing physical strength and health.</li> <li>• Adjusting to retirement and reduced income.</li> <li>• Establishing an explicit affiliation with one’s age group.</li> <li>• Meeting social civic obligations.</li> <li>• Establishing satisfactory physical living arrangements.</li> </ul> |

(Havighurst, 1972)

The developmental tasks of late adulthood require persons to adjust to several unique challenges in order to remain healthy during this time in life. The challenges of include:

1. Accepting an increasing degree of dependency on others.
2. Adjusting to decreased economic conditions leading to changes in life style and living conditions, and
3. Developing new interests.

### **Sense of Integrity versus Despair**

The last stage of psychosocial development described by Erikson (1950) is the fulfillment, result, and culmination of the preceding stages. Development of the sense of **integrity** versus **despair** is the challenge of late adulthood.

The achievement of a sense of integrity is made with identification with mankind. The individual who acquired the attitude of integrity has come to understand and accept the meaning of life and the uniqueness of his/her existence during a particular period of historical time in a particular culture. Included in this understanding is an acceptance of the temporal limits of life.

Healthy psychosocial development in old age results in the person acquiring the sense of integrity. Development in this period of life challenges the person had hoped for, dreamed about, or desired for life to be. During late adulthood, there is much reflection and evaluation made by the individual of his/her life and its course. The essentials of the self or personality are examined and displayed in everyday behavior. There is no longer a preoccupation with how one should act or false beliefs held about what is right or appropriate behavior. The attitude of integration of her/his being or personality and has a sense of satisfaction in a more complete way than ever before. The integrity of the self is attained during this stage in life. The future is seen to be less demanding in its urgency for promised fulfillment and the boundaries of everyday, temporal existence come closer into view with each passing day. For many individuals life is lived for the self rather than for others. This period of life is one of renewal. Individuals continue to grow until death, and the growth is motivated by the courage of the person to face all his/her virtues, strengths, weaknesses, and shortcomings. Erikson describes the accomplishment of integrity as when the individual discovers an identity of “being through having been and to face not being”. Acceptance of oneself in old age is accomplished also by accepting one’s death as inevitable.

Individuals can experience old age with a sense of despair rather than integrity. This attitude derives from a feeling of loss, disappointment, and dissatisfaction with the way one’s life was lived. Such an attitude is one of apology, regret, and fear of the end of life. The individual experiences a pervasive sense of “if only” – that is, “If only I had gone to college, I might have had a better job and been happier in my life,” or “If only I had changed jobs sooner, I might not have been so unhappy”, and so on. Despair is discouragement, hopelessness, and a feeling of desperation about one’s life

## **Social and Mental Development**

Individuals may find old age to be a time of contradictions. On the one hand, they experience a rapidly increasing rate of decline and deterioration, especially in physical skills and functioning. On the other hand, there is indication that personal and social growth continues through the years of late adulthood. Continuity and change remain in effect among the elderly.

Role changes occur during late adulthood just as they have throughout the life cycle. Adjusting to these and other changes are the central challenge of development at this time of life. Most individuals become aware that limitations can impede development during their lifetime. Some limitations originate from within while some arise from environmental circumstances. In old age, people become more aware of these limitations as they experience the challenges of development (Havighurst, 1972). Successful adjustment and adaptation also lead to healthy development in late adulthood.

## **Personality Adjustments**

Peck's View of Personality in Old Age.

Robert Peck (1968) believes that three main adjustments occur in personality development among older people:

1. Ego differentiation versus work – role preoccupation refers to adjusting to retirement from work roles; the person must adapt to shifting the primary personal identity away from a work role to other means of self-identity in other role.
2. Body transcendence versus body preoccupation refers to a person's attempt to center attention and effort on finding happiness and satisfaction in relating with others and in creative or mental endeavors rather than focusing on bodily concerns and distress over a declining physical condition.
3. Ego transcendence versus ego preoccupation involves a person's recognition and acceptance of his/her impending death by living life as fully as possible and attempting to make life secure, satisfying, and meaningful for those who will survive after the person dies.

## **Personality Type and Aging:**

Several researchers propose that successful adjustment in old age is related to an individual's personality type. Richard, Livson, and Peterson (1962) studied a group of men ranging in age from fifty – five to eighty – four years.

The researchers identified five personality types:

1. Mature individuals, who accepted their strengths and weaknesses, maintained close intimate relations with others, and were relatively well adjusted.
2. Rocking-chair type of personalities, who showed a passive nature perceived themselves as dependent on others, and viewed old age as liberation from work and other responsibilities.

3. Armored personality types, who used defense mechanisms to cope with problems, were fairly rigid in behavior and thought, and maintained an active life style,
4. Angry personalities who showed much bitterness and hostility as well as frustration about their troubles.
5. The self-haters who blamed themselves more than others for their problems in old age and were depressed and generally demoralized.

The first two types (mature and rocking chair) showed generally successful adjustment in old age while the last three types (armored, angry, and self-haters) were less successful in adjusting aging.

Neugarten, Havighurst, and Tobin (1968) found similar personality types in a study of persons between seventy and seventy – nine years. The researchers identified role activities that were associated with these personality types.

| <b>PERSONALITY TYPES IN OLD AGE</b>  |
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| <p><b>INTEGRATED TYPE</b></p> <ul style="list-style-type: none"> <li>• Reorganizers (involved in range of activities; reorganize life by substituting new roles for ones that are lost).</li> <li>• Focused (Moderate levels of activities; focus on fewer roles with more selectivity).</li> <li>• Disengaged (low activity levels buy high satisfaction level).</li> </ul> |
| <p><b>ARMORED – DEFENDED TYPE</b></p> <ul style="list-style-type: none"> <li>• Holding-on (cling as long as possible to middle – age activities).</li> <li>• Constricted (Become withdrawn from activities and people as Defence against aging).</li> </ul>  |
| <p><b>PASSIVE – DEPENDENT TYPE</b></p> <ul style="list-style-type: none"> <li>• Succorance – Seeking (dependent emotionally on others).</li> <li>• Apathetic (passive; little or no interest in others or environment).</li> </ul>   |
| <p><b>UNINTEGRATED</b></p> <ul style="list-style-type: none"> <li>• Disorganized (poor control of emotions; disorganized thought processes).</li> </ul> <p style="text-align: right;">(Neugarten, Havighurst, and Tobin 1968)</p>  |

### Conclusion

Due to advancement of science and technology, the normal age of humankind is increasing day by day and the medicines are invented for all the diseases. So, there is no need to fear about old age problems. When we are healthy minded, alert and sharp, the old age will come to us very gracefully and we can enjoy every moment of life. When we keep away from envy, hostility, anger and bitterness, the old age period will be really wonderful and there will not be any old age problem.

During old age, there will be changes in the structure and functions of the human body. There will be changes in physical appearance such as wrinkles appearing on the face, graying of hair, slowing down of reactions and movements. All our activities will become slow and because of that, there will be some change in our behavior also. Some old people will always be comparing themselves with the individuals of the same age group. We can overcome all the old age problems like Biological, Physiological, Emotional and Function problem if we plan correctly.

The old age people should develop the mentality of moving well with others. They should not try to find fault with anybody. Some people will expect respect from others and they think that they should be consulted for each and everything. This attitude is wrong. Instead, they can spend their time in useful ways, by engaging themselves in some activity. Old age can be gold age, if our attitude is correct. Old age is not at all a problem that spends their young age and middle age by helping other.

Some of the old people try to postpone old age. They like the company of young people and they treat youngsters equally. Young people can plan well for happy old age. They can set goal in the early period of their life so that the old age can be passed in a peaceful way. The old age problems should be felt by other family members and the remedial action should be taken to remove the negative attitude in the minds of the elderly people.

The general old age problems are inability to concentrate, inability to converse, inability to hear, inability to see and forgetfulness. The feeling of insecurity decreases the self-confidence also. Some people fear about death and they all the time talk about that only. The old people have lot of idle time and much waste time in finding fault with others and complaining about them. Having seen all the hardships in life, the old people should be ready to understand others. They should allow the youngsters to enjoy their lives. The old age problems can be solved only if the old people accept that getting old is a natural phenomenon.

Therefore, even though getting old is inevitable, keeping a positive attitude is certainly helpful.

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