

Unit 5 Development needs and tasks of Middle Age

Middle Age



Introduction

- Age group-40 to 59 years of age.
- Physically and psychologically matured individual.
- This is the period of physiological changes that are gradual and inevitable; although physical growth has stopped and he/she continues to mature emotionally.
- In this period, he or she has obtained personal achievements and socioeconomic stability.

- He/she enjoys the role in assisting other young people or children. That is the time of helping aging parents progress through the later years of life.
- The middle aged adults use his leisure time in creative work and get satisfaction from his/her own work.
- This is the time when a person prepares for retirement.

Middle Age: Physical Signs

- Graying & thinning of hair
- Drying & wrinkling of skin
- Change in body shape as pockets of fat settle on the upper arms, buttocks, & other body parts
- Increased likelihood of being overweight
- Loss in height as back muscles, connecting tissues, & bones lose strength
- Decline in hearing & vision

Unit 5.1 Physiological Needs

- Nutrition
- Work and leisure
- Rest, sleep and exercise
- Sexuality
- Injury control

Nutrition

- Basal metabolism rate gradually decreases. For each decade after 25 years, there should be a reduction in caloric intake by approximately 7.5%.
- The reduced basal energy requirements, caused by losses in functioning protoplasm and the frequently reduced physical activity, combine to create less demand for calories.

- Teach that intake of carbohydrate and fat foods should be reduced, especially the foods with "empty" calories: rich desserts, candies, fatty foods, alcohol and cola beverages.
- Over weight should be avoided since it is a factor for causing diabetes, cardiovascular, and hypertensive disease, and cause problems with mobility such as in arthritis.

- For a healthy person, diet should contain the basic 4 food groups with emphasis on protein, minerals, vitamins, and low cholesterol and low calorie foods.
- The person should chew food well, eat smaller portions, eat in a pleasant and unhurried atmosphere.
- It is possible to change habits of overeating and to lose weight in the middle age.

Work and Leisure

- If the person is fortunate enough to be in a business or profession in which he/she works successfully for self or is allowed freedom within a specialized area of work, he/she will experience the dignity of being productive and will enjoy an increasing self-esteem.
- Unfortunately, most middle-agers are not in this position.

- Knowing the degree of work stability, extent to which work is satisfying, and the emotional factors that have operated in the person's concept of work and in the self-concept are all important in assessing how well the middle-ager can function as a mentally and physically healthy person.
- The middle-aged person may demonstrate this leadership ability on the job or in community or organizations.

- We can encourage or reaffirm the middle-ager in the leadership role. As a nurse, we can also assist the middle-ager in working through feelings or conflicts related to the work setting or the job itself.
- Emphasize that play and recreation are essential to a healthy life.
- Recognize the person's creative efforts to encourage further involvement in leisure activities.
- Educate the person about importance of preparing for retirement.

- Inform the person of places, courses, or workshops where he/she can learn new creative skills and use of talents.
- Encourage the person to enjoy change, to participate in organizations, and initiate stimulating contacts with others.
- Encourage the person to stop the activity when it no longer meets personal needs.

Rest, sleep and exercise

- Middle age need not be a time when a person's body fails, but it is a period which requires better maintenance than was necessary in the earlier life.
- Although, there is a general and gradual decline in quickness and level of activity during the latter part of life, people who were most active among their age group during adolescence and young adulthood tend to be most active among their age group during middle and old age.

- There is frequently a postmenopausal rise in energy and activity, possibly for several reasons.
- Less time and energy goes into child-rearing.
- The children leaving home allows time for self and pursuits in creative, social or community projects.
- The person may feel more self-confident and satisfied with life achievements and less competitive.

- Less physical and psychic energy may be used in various interval conflicts or in worrying unnecessarily about the details in life.
- New self awareness and flexibility can increase psychic and physical energy and a feeling of well-being.
- That, while physical changes do occur, adopting sedentary habits will not maintain health.
- Balanced with rest and sleep must be physical activity to keep the body posture and functioning at its optimum. Judicious exercise may modify and retard the aging process.

- Vigorous exertion is an excellent outlet for emotional tensions.
- Walking briskly with both arms swinging, bicycle riding, and a variety of sports are recommended.
- Teach about value of exercise. The type of exercise does not matter as long as the person likes it, engages in it regularly, and it is suitable for personal strength and physical condition.

- There are certain precautions which the middle-ager should take: gradually increase the exercise, exercise consistently, and avoid overexertion.
- Teach them to take rest between strenuous exercise and activity as there should be no sense of fatigue.

Injury Control

- The gradually changing physical characteristics, as well as preoccupation with responsibilities, may contribute to the middle-aged person's having accidents.
- As a nurse, we can teach about safety related to remodeling a home, maintaining a backyard, or establishing a work center.
- The middle-ager is a person at work in an industry, office, school, home or out-of-doors.

- Fractures and dislocations are the leading cause of injuries for both sexes. Motor vehicles accidents, occupation related accidents and falls are common in this age.
- We can help the person maintain energy and improve health by teaching the information.
- The person can learn to moderate eating, drinking or smoking habits and to use only medically prescribed drugs.

- Many measures promote health: regular physical examination, pursuit of leisure activity, use of relaxation techniques, working through the emotional and family concerns related to middle age, affirming the worth of self as a middle-ager, preparing for the later years, and confronting developmental tasks.
- Prepare for possible accidents and illness.
- We can meet emotional and spiritual needs of the person while giving physical care and doing health teaching related to common health problems.

Sexuality

- During this period sex hormone begins to decline such as estrogen and progesterone in the female. Therefore most of the women experience menopause between the age of 45-50 years of age.
- There is decreased level of androgen which may cause climacteric changes in male.

- Due to the hormonal changes in both male and females, middle aged adult experience changes in the erection and decreased sexual activity. Therefore, some may experience emotional distress and for this reason, both male and female clients need more information about menopause and climacteric changes.

5.2 Physiological concepts and physical characteristics

Physiological development

- Major physiological changes occur between 45-65 years of age.
- The changes in physical appearance and functions vary from person to person.
- The most visible changes are gray hair, loss of hair, wrinkling, body metabolism which begins to slow down due to lack of exercise.
- There is weight gain, with excess fat deposition especially around waist and abdomen.

- Presbyopia (long sightedness-blurred vision at close range) is common in middle adulthood.
- The impact of physiological changes has an effect on the person's self concept and body image.

Hormonal changes

- This is the era of life known as the menopause for the woman or the climacteric for either sex. The terms are often used interchangeably.
- The menopause is the permanent cessation of menstruation preceded by a gradually decreasing menstrual flow.
- The climacteric is the period in life when important physiological changes occur, with the cessation of the woman's reproductive ability, and the period of lessening sexual activity in the male.

- Basic to the changing physiology of the middle years is the declining hormonal production.
- The male climacteric comes in the fifties or early sixties, although the symptoms may not be as pronounced as in the female climacteric.
- A few men may even complain of hot flashes, sweating, chills, dizziness, headaches and heart palpitations.

- Unlike women, however, men do not lose their reproductive abilities, although the likelihood diminishes as age advances.
- The output of sex hormones of the gonads does not stop; it is merely reduced.
- The testes become less firm and smaller; cells in the tubules degenerate; and sperm production decreases.
- Because of decreased testosterone production, the man may need a longer time to achieve erection and may experience premature or less forceful ejaculation.

- Testosterone level is likely to be lower in the middle-aged male who has high stress, lowered self-esteem, and depression.
- In about 20% of the males, hypertrophy of the prostate begins naturally late in middle age so that gradually the enlarging prostate around the urethra causes frequent urination, dribbling, and nocturia.

- The pituitary continues to produce follicle stimulating hormone and luteinizing hormone, but the aging ovary is incapable of responding to its stimulation.
- While the ovaries are producing less estrogen and progesterone, the adrenals may continue to produce some hormones, thus helping to maintain younger feminine characteristics for some time.

- During the perimenopausal period(about 5 yrs) some discomforts may occur in a small percentage of women: vasomotor changes cause hot flushes associated with chilly sensations, dizziness, headaches, perspiration, palpitations, water retention, nausea, muscles cramps, fatigability, insomnia, paresthesia of fingers and toes.

- Psychological factors, such as anger, anxiety and excitement, are considered as important in precipitating hot flashes in susceptible women as conditions giving rise to excess heat production or retention, such as a warm environment, muscular work, or hot food.

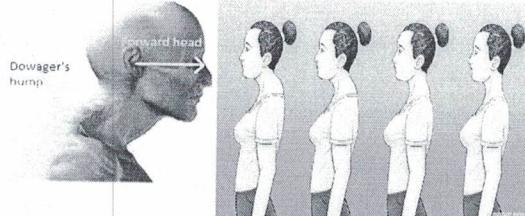
- Administration of estrogen will reverse the vasomotor symptoms and a gradually decreasing dose avoids severe symptoms, but such treatment also prolongs the symptoms and may be of little assistance in treating emotional symptoms.

- The hormonal decline brings additional changes. The skin, subcutaneous tissue, and mucous membranes become dry and begin to atrophy.
- The loss of skin turgor and muscles tone results in wrinkles, pouches under the eyes and loss of muscle tone, including of the pelvic floor.
- The uterus, ovaries, external genitalia, and breast tissue begin to atrophy.

Metabolic Changes

- Metabolic changes include decalcification of the bones, producing decreased bone density and a gradual osteoporosis.
- With the bone porosity and gradually shrinking intervertebral discs, the women will eventually be an inch or 2 shorter and the “dowager’s hump” will form in the cervical and upper thoracic area.

Dowager's hump



- By age 55, a woman runs 10 times the risk of bone fractures as the 55 year old man.
- Most vulnerable to fractures are forearms, hips and spinal vertebrae.
- Teaching should encompass safety as well as nutritional measures to prevent fractures. This can be managed by calcium and vitamin D replacement .
- Some of the changes in the women result because the level of androgen in the body remains constant while the estrogen is decreasing.

- Thus the woman is distressed to find a small amount of hair growth, especially on the chin.
- She also experiences a loss of weight in the face and limbs at a time when diminishing muscle tone and additional adipose deposits make her look and feel larger in the middle.
- The coarseness of skin and sharpness of contours are the result of the loss of some subcutaneous tissue.

Others Changes

- Cell atrophy and changes in cell regulation and repair cause the number of cells to be reduced gradually after about 30 years. The body starts to shrink minutely.
- A gradual loss in efficiency of nerve conduction and muscles function contribute to increased muscles atrophy and impaired sensation to heat and cold.

- There are also changes in the special senses such as dimming of vision.
- Presbyopia, a decreasing elasticity of the lens and decreasing power of accommodation, occurs in middle age, so that the person reads the morning paper at arm's length.
- The pupil takes in half as much light at 50 as at 20 years.
- Glasses are often needed, but self-consciousness can delay getting the needed visual aid.

- Some degree of hearing is also gradually lost, especially for high-pitched sounds. Auditory reaction time slows; sound discrimination decreases.
- The decreasing elasticity of blood vessels, particularly in the coronary arteries, causes the middle-aged person to be more susceptible to hypertension and cardiovascular disease.

- There is a rise in serum cholesterol after the menopause, but administration of estrogen alters the serum cholesterol, alphalipoprotein, and cholesterol-phospholipids ratio to retard the process of atherosclerosis.
- Cardiac output and glomerular filtration rate gradually decrease.
- Tooth decay is not caused by aging but by circulatory changes, poor dietary habits, poor mouth hygiene over the years.

5.3 Psycho-social concept

1. Cognitive Development
2. Creativity
3. Emotional Development
4. Developmental Crisis
5. Changing Body Image
6. Religious/Spiritual Development
7. Adaptive Mechanism

1. Cognitive development

- Middle aged adults are able to learn new skills and information.
- Some adults prepare themselves for new education, career and vocational training.
- The cognitive function changes when they are seriously ill or have trauma.
- Reaction time or speed of performance is individual and generally stays the same or diminishes during late middle-age.

- Memory is maintained through young and middle adulthood; no major differences are evident. Some quantitative changes may occur.
- Learning occurs in adults of middle age. The capacity for intellectual growth is unimpaired, and is enhanced by interest, motivation, flexibility, a sense of humor, confidence, and maturity attained through experience.

- Problem-solving abilities remain throughout adulthood. Generally, better educated people perform better than less educated people in any age group. Middle aged adults use different strategies.
- The middle-ager is able to do all the cognitive strategies of Piaget's stage of Formal Operation.
- With increasing emphasis on continued learning, the middle-aged person is frequently enrolled in refresher courses, continuing education courses, or workshops related to occupation or profession.

2. Creativity

Creativity is seen not only in famous people. The average middle-ager may have many responsibilities and stresses; however, typically he/she approaches a situation, task or learning experience in a creative way. Creative output are peak in early and middle adulthood. Previous experiences enhance creative act and creativity.

We can encourage the middle-ager to pursue creative ideas and activities as well as to approach roles, responsibilities and tasks in a creative way.

3. Emotional development

- During the middle adulthood, men and women start to consider themselves as different generations with different needs.
- Many men and women in their 50's face a transition from becoming parents to becoming grandparents.
- They have to make decisions about their old parents and work as well. This causes emotional disturbances in this age because the person is facing a massive emotional change.

- In addition that, men and women get emotionally disturbed in their middle adulthood because they start to think the opportunities they have lost.
- The fact that in future the opportunities are going to diminish even more also bothers them a lot.
- Women face a lot of emotional and psychological problems in their middle adulthood.
- One of the major problems that women face during their middle adulthood is caring for their families.

- Widowed, divorced and minority women can have low self-esteem.
- A person in middle adulthood faces many challenges that need to be solved. These include the change of relationships, making new relationship, growing up of children and changing a gender role.
- Furthermore, people get the opposing feelings of generativity and stagnation in this age. All these challenges need to be resolved if a person wants to be happy, emotionally stable and contended.

- Generativity versus stagnation is the seventh of eight stages of Erik Erikson's theory of psychosocial development. This stage takes place in middle age.
- Generativity refers to "making mark on the world" by caring for others as well as creating and accomplishing things that make the world a better place.

- Stagnation refers to the failure to find a way to contribute. These individuals may feel disconnected or unininvolved with their community and with society as a whole.
- Those who are successful during this phase will feel that they are contributing to the world by being active in their home and community.
- Those who fail to attain this skill will feel unproductive and unininvolved in the world.

• Psychological Well-Being

- Five factors influence psychological well-being in middle adulthood:
1. Good Health & Exercise
 2. Sense of Control & Personal Life Investment
 3. Positive Social Relationships
 4. A Good Marriage
 5. Mastery of Multiple Roles

4. Developmental crisis

- A **midlife crisis** is a transition of identity and self-confidence that can occur in middle-aged individuals. The phenomenon is described as a psychological crisis brought about by events that highlight a person's growing age, inevitable mortality, and possibly shortcomings of accomplishments in life. This may produce feelings of depression, regret, and anxiety, or the desire to achieve youthfulness or make drastic changes to their current lifestyle.

- The term was coined by Elliott Jaques in 1965. More modern research has shown this is not a phase that most middle-aged people actually experience, and some have questioned the existence of this phenomenon.
- When it does occur, a midlife crisis is not typically actually experienced during the midpoint of one's life, which for most average human lifespans would be around the age of 40.

- A mid-life crisis could be caused by aging itself, or aging in combination with changes, problems, or regrets over:
- work or career (or lack thereof)
- spousal relationships (or lack thereof)
- maturation of children (or lack of children)
- aging or death of parents
- physical changes associated with aging

□ Midlife Crisis in Men

Men go through midlife crisis because they reach a certain age and realize that life is passing them by. They become afraid:
 Afraid of the changes that come with aging.
 Afraid of becoming ill.
 Afraid of becoming less attractive to the opposite sex.
 Afraid of not attaining goals they have set for themselves.
 Afraid of dying.

□ Midlife Crisis in Women

Women, on the other hand are thrust into midlife crisis because they reach a certain age and find they finally have the opportunity to do all the things in life they have put off doing while caring for her family.

A woman's children are grown and all of a sudden she has the opportunity to do all those things she put off while being a mother. She and her husband have both worked hard, are now financially secure and she views this security as her opportunity to explore all those things she has put on the backburner.

- She goes through menopause, which means both biological and psychological changes. The psychological changes a woman experiences at menopause can cause her to question how she has lived her life and whether she should make changes to the way she lives.

Treatment and prevention

- Physical changes that commonly occur during these years are weight gain, wrinkles, sagging skin, hair loss. Regular exercise and maintenance of a nutritious diet may help to sustain one's physical and mental health during these years of transition.
- Significant changes made early in life may prevent one from having a mid-life crisis.

- People who changed jobs before their midlife years had a greater sense of generativity when they reached mid-life. They also experienced a greater sense of motivation to deviate from stagnation and a desire to help the younger generation thrive. This is a psychological stage proposed by Erik Erikson that describes a normal stage adults go through during their mid-life years.

5. Changing body image

- The gradually occurring physical changes described earlier confront the person and are mirrored in others.
- The climacteric causes realignment of attitudes about the self that cuts into the personality and its definition.
- Other life stresses cause the person to view self and her/his body differently.
- The person not only realizes he/she is looking older but subjectively feels older as well.

- Illness or death of loved ones creates a concern about personal health, sometimes to excess, and thoughts about one's own death are more frequent.
- Whether male or female, the person who lacks self-confidence and who cannot accept the changing body, has a compulsion to try cosmetics, clothes, hair styles, and the trappings of youth in the hope that the physical attributes of youth will be attained.

- Most people gradually adjust to their slowly changing body and accept the changes as part of maturity.
- The mature person realizes it is impossible to return to youth.
- The middle-ager feels good about self.
- We can promote integration of a positive body image through communication skills and teaching.
- Repeat the strengths of being middle-aged to the client.

6. Religious/spiritual development

- The middle-aged person continues to integrate new concepts from widened sources into a religious philosophy if he/she has gained the religious maturity.
- Faith and trust in God or another source of spiritual strength are increased.
- Religion offers comfort and happiness.
- The person is able to deal effectively with the religious aspects of upcoming surgery and its possible effects, illness, death of parents, or unexpected tragedy.

- In modern times, spirituality gives the emphasis on subjective experience and the "deepest values and meanings by which people live," incorporating personal growth or transformation, usually in a context separate from organized religious institutions.

- Spirituality moderates positive relationships with various measures of life satisfaction, psychosocial wellbeing, both physical and mental health, and is helpful in the quest for meaning and purpose in life.
- Spiritual interventions can help relieve psychological distress and fear of death, as well as the stresses of caregiving for loved ones with chronic illnesses in later years.

7. Adaptive Mechanisms

- Adult socialization is defined as the processes through which an adult learns to perform the roles and behaviors expected of self and by others and to remain adaptive in a variety of situations.
- The middle-ager is expected and normally considers self to be adaptive.
- Coping or adaptive mechanisms or ego defenses used in response to the emotional stress of the middle years depend on the person's capacity to adapt and satisfy personal needs, sense of identity, nature of interaction with others, sense of usefulness, and interest in the outside world.

- The middle-aged adult must be able to channel emotional drives without losing idea and strength.
- During middle age, the person is especially vulnerable to a number of disrupting events: physiological changes and illness in self and loved ones, family stresses, changes in job or role demands or responsibilities, conflict between family generations, and societal changes.

- The person should be able to cope with ordinary personal sudden change and the frustrations and disappointments in life with only temporary disequilibrium.
- He/she should be able to participate enthusiastically in adult work and play, as well as have the capacity to experience adequate sexual satisfaction in a stable relationship.

- The person should be able to express a reasonable amount of aggression, anger, joy, and affection without undue effort, unnecessary guilt, or lack of adequate control.
- Further, the middle-ager is a role model of maturity for the young adult.
- The person can adapt successfully to the stresses of middle age.

- As a nurse, we can help the middle-aged prevent or overcome maladaptive mechanisms.
- As we extend empathy and reinforce a sense of emotional maturity and health, the person may feel more able to cope with life stressors and perceived failures.
- Stress management techniques can be used for crisis intervention.
- Refer the person to a counselor if needed.