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# UNIT 1    PHYSICAL CHANGES (EARLY ADULTHOOD, MIDDLE AGE, OLD AGE)

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## Structure

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- 1.3 Middle Age/ Middle Adulthood
  - 1.3.1 Physical Changes
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## 1.0 INTRODUCTION

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The distinction between childhood and adulthood varies considerably among cultural and social groups. The personal and social significance of the passage of years is shaped by the cultural age system. All societies divide the lifespan into recognised stages. These life stages or periods are marked by certain physical, psychological and social milestones. The life stages are commonly identified as prenatal stage (from conception until birth), infancy (from birth to the end of second year of life), early childhood (ages three to six years), middle childhood (six years until puberty), adolescence (start of puberty to adulthood), young adulthood (ages twenty to forty), middle adulthood (ages forty to sixty-five) and later adulthood or old age (sixty-five and older). This unit will help you understand the physical changes of all the three stages of adulthood.

Early adulthood is the stage of our life between the ages of about 20-40 years old, who are typically vibrant, active and healthy, and are focused on friendship, romance, child bearing and careers. It is the first stage of adulthood in which the body physically changes and is one of the hardest times in our lives after teenage years. In this stage, a person may continue to add a bit of height and weight to her teenage frame. The body continues to undergo significant hormonal changes.

In middle adulthood, an important challenge is to develop a genuine concern for the welfare of future generations and to contribute to the world through family and work.

Midlife is also viewed as a period of creativity and significant contribution to society. It is found that the best works of scientists, writers and artists are produced during the late forties and early fifties. Middle adulthood is the second stage of adulthood in which one of the most noticeable change is loss of elasticity in the skin, especially in the face. This results in lines and wrinkles that are seen as one of the first signs of ageing.

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. 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.

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## 1.1 OBJECTIVES

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After going through this unit, you will be able to:

- discuss and understand the period of early adulthood;
- understand the physical changes during early adulthood;
- discuss and understand the period of middle adulthood;
- understand the physical changes during middle adulthood;
- discuss and understand the period of old age; and
- understand the physical changes during old age.

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## 1.2 EARLY ADULTHOOD

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Early adulthood is the stage of our life between the ages of about 20-40 years old, who are typically vibrant, active and healthy, and are focused on friendship, romance, child bearing and careers. It is the first stage of adulthood in which the body physically changes and is one of the hardest times in our lives after teenage years. One has to deal with so much in this time and it seems to be real time of self search as well as preparation. During this time in our life we find ourselves with a new sense of independence and for the first time in life we really feel free. However, along with that comes a lot of added personal responsibility to both ourselves and others and we really begin to learn more about ourselves as well as others through social interaction.

During the period of young adulthood one sees himself or herself as an autonomous and independent adult. In this period the individual becomes financially less dependent on the parental family. A major development task is during this period is the choice of a career. Young men and women tend to settle down in a career of their choice. In addition a young adult tries to settle down and start a family life. They are also concerned about various social issues and forming close relationships with one's professional peers and members of community. The duties of a person demand two fold responsibilities which are towards oneself as well as the society.

The stage of young adulthood is characterised by new tasks and challenges in life such as establishing financial and emotional independence and entering into marital relationship. Unemployment and marital discord are two typical crisis conditions during early adulthood.

According to Erickson, this period is characterised by a crisis of intimacy versus isolation. The young adults must develop the ability to form deep intimate relationships with others particularly in marriage. Otherwise, they can become socially and emotionally isolated. Most young adults develop a dream of future accomplishments or a vision of what they want to achieve as a life goal. Such dreams motivate the young adults towards goal directed efforts. Occupational and marital choices and establishment of social and economic independence are some major tasks of early adulthood.

According to Sigmund Freud, adulthood is a time for work and love. Our lives centers around our careers and relationships, leaving less time for anything else.

**Physical Changes (Early Adulthood, Middle Age, Old Age)**

### **1.2.1 Physical Changes**

In this stage, a person may continue to add a bit of height and weight to her teenage frame. The body continues to undergo significant hormonal changes. These changes may make beards grow a bit thicker and the voice to become a slightly deeper and richer. This is the period in which women usually have children so it is the time in which women gain a little weight and finish their full breast development.

#### **The Transition from Adolescence to Adulthood**

The age period from 18 to 25 years has been labeled as “emerging adulthood” as individuals have often left dependency of childhood but have not yet assumed adult responsibilities.

Females reach their adult heights by age 18, and, except for some males who continue to grow in their early 20s, most have reached their adult heights by the age of 21. However, muscles continue to gain mass- especially among males, and both genders continue to add body fat. Average weight gain for both men and women is about 15 pounds.

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## **1.3 MIDDLE AGE/MIDDLE ADULTHOOD**

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In middle adulthood, an important challenge is to develop a genuine concern for the welfare of future generations and to contribute to the world through family and work. This period is aged between 40-60 years of life.

Erik Erickson refers to the problem posed at this stage as generativity versus self absorption. He characterises the middle adulthood as a phase of crisis. Unless a person makes this period of meaningful contribution he or she may become preoccupied with selfish needs and desires. The midlife transition is also the period of turbulence of the forties.

From the period of twenties and thirties, the individual arrives at middle age in the forties and fifties. Middle age is characterised by competence, maturity, responsibility and stability. This is the time when one wants to enjoy the success of job, satisfaction derived from the family and social life. People look forward to the success of their children. Attention gets more focused on health, the fate of children, ageing parents, the use of leisure time and plans of old age.

Midlife is also viewed as a period of creativity and significant contribution to society. It is found that the best works of scientists, writers and artists are produced during the late forties and early fifties.

### **1.3.1 Physical Changes**

Individuals vary in the rate at which the changes occur, all middle aged people notice signs of deterioration in some aspects of their physical functioning. Very often, during the early thirties individuals make a reappraisal of their choices and seek to make specific changes in their career choices as well as their social relations. These experiences are described as “age thirty transition”. In the 40s, for example, there is usually a decline in near vision a condition known as presbyopia. The lens of the eyes become less elastic and loses its ability to accommodate to objects at close range. Reading glasses or bifocal may be required for the first time. The individual

may also notice increased sensitivity to glared-on the windshield of the car, for example, or in brightly lit stores. In their 50s people often find that it takes their eyes longer to adapt to the change in illumination when they enter a darkened theater or when they go outside on a bright sunny day. Some degrees of hearing loss is also found in many people over 50.

Middle adulthood is the second stage of adulthood in which one of the most noticeable change is loss of elasticity in the skin, especially in the face. This results in lines and wrinkles that are seen as one of the first signs of ageing. Most individuals get a little shorter through the years. Hair starts graying, skin is wrinkling, bodies are sagging and teeth are yellowing. Some adults strive to make themselves look younger by having plastic surgery, dying their hairs, wearing wigs, joining exercise programs or taking heavy vitamin doses.

Men usually gain weight in the abdominal region, while women gain weight in the hips and thighs. Strength and flexibility in both genders wane. Men during this period show greater concern towards their health, strength, power and sexual potency.

For women, menopause occurs between the ages of forty-five and fifty. Women usually experience hormonal changes during this period that result in the loss of the ability to reproduce, a process called menopause. Menopause is supposed to be accompanied by some distressing physical and psychological symptoms in women. Both genders may experience graying of the hair or hair may be thin.

### **Self Assessment Questions**

1) Answer the following in True or False:

- i) Young adults are vibrant, active and healthy.
- ii) Young adults tend to get isolated due to crisis.
- iii) Individual add a bit of height during middle adulthood.
- iv) Attention gets focused on health and fate of children during middle age.
- v) Individuals in middle age are unstable.

2) Fill in the blanks:

- i) A decline in near vision is a condition known as \_\_\_\_\_.
- ii) During middle age, there is a loss of \_\_\_\_\_ in skin.
- iii) Women between the ages of 45 and 50, experiences \_\_\_\_\_.
- iv) Early adult's focus on friendship, romance, \_\_\_\_\_ and careers.
- v) Individuals due to crisis, tends to get \_\_\_\_\_ during middle adulthood.

## **1.4 OLD AGE**

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. 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.

### **1.4.1 Physical Changes**

As an individual moves 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 quite obvious to notice. They consists 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. People age biologically at different rates:

Young-old elderly appear physically young for their years.

Old-old elderly appear frail and show signs of decline.

#### **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 4<sup>th</sup> 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.

### Self Assessment Questions

3) Answer the following in True or False:

- i) Old age starts from the age of 50 years. ( )
- ii) Old people have limited regenerative abilities and are more prone to disease, syndromes, and sickness than other adults. ( )
- iii) Young-old elderly appear frail and show signs of decline. ( )
- iv) With ageing, peripheral vision is reduced. ( )
- v) The older heart slows down and is less able to pump blood through the body than the younger heart. ( )

4) Fill in the blanks:

- i) Degeneration of eye muscles and \_\_\_\_\_ of the lens are associated with ageing.
- ii) The skin serves a \_\_\_\_\_ function by buffering us from the environment.
- iii) Regular exercise, such as a daily walk, can prevent \_\_\_\_\_.
- iv) Immune system declines as \_\_\_\_\_ become less effective.
- v) \_\_\_\_\_ is a condition of inflamed, painful, stiff or swollen joints and muscles.

## 1.5 LET US SUM UP

Early adulthood is the stage of our life between the ages of about 20-40 years old, who are typically vibrant, active and healthy, and are focused on friendship, romance, child bearing and careers. It is the first stage of adulthood in which the body physically changes and is one of the hardest times in our lives after teenage years. During the period of young adulthood one sees himself or herself as an autonomous and independent adult. In this period the individual becomes financially less dependent on the parental family. A major development task is during this period is the choice of a career. The stage of young adulthood is characterised by new tasks and challenges in life such as establishing financial and emotional independence and entering into marital relationship. Unemployment and marital discord are two typical crisis conditions during early adulthood.

Females reach their adult heights by age 18, and, except for some males who continue to grow in their early 20s, most have reached their adult heights by the age of 21. However, muscles continue to gain mass – especially among males, and both genders continue to add body fat. Average weight gain for both men and women is about 15 pounds.

In middle adulthood, an important challenge is to develop a genuine concern for the welfare of future generations and to contribute to the world through family and work. This period is aged between 40-60 years of life. From the period of twenties and thirties, the individual arrives at middle age in the forties and fifties. Middle age is characterised by competence, maturity, responsibility and stability. This is the time when one wants to enjoy the success of job, satisfaction derived from the family and social life. People look forward to the success of their children.

Middle adulthood is the second stage of adulthood in which one of the most noticeable change is loss of elasticity in the skin, especially in the face. This results in lines and wrinkles that are seen as one of the first signs of ageing. Most individuals get a little shorter through the years. Hair starts graying, skin is wrinkling, bodies are sagging and teeth are yellowing. Some adults strive to make themselves look younger by having plastic surgery, dying their hairs, wearing wigs, joining exercise programs or taking heavy vitamin doses.

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.

As an individual moves 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 consists 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.

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## **1.6 UNIT END QUESTIONS**

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- 1) What are the physical changes that take place in early adulthood?
- 2) What are the developmental tasks during this period?
- 3) What are the physical changes that take place in middle adulthood?
- 4) What are the developmental tasks of this period?
- 5) What are the physical changes that take place during old age?
- 6) What are the developmental tasks of this period?

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## 1.7 ANSWERS TO THE SELF ASSESSMENT QUESTIONS

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- 1)
  - i) True
  - ii) True
  - iii) False
  - iv) True
  - v) False
- 2)
  - i) Presbyopia
  - ii) Elasticity
  - iii) Menopause
  - iv) Child Bearing
  - v) Self absorption
- 3)
  - i) False
  - ii) True
  - iii) False
  - iv) True
  - v) True
- 4)
  - i) Clouding
  - ii) Protective
  - iii) Constipation
  - iv) T Cells
  - v) Arthritis

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## 1.8 SUGGESTED READINGS

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Stuart-Hamilton, Ian (2006). *The Psychology of Ageing: An Introduction*. London: Jessica Kingsley Publishers

Diane F. Gilmer; Aldwin, Carolyn M. (2003). *Health, illness, and optimal ageing: biological and psychosocial perspectives*. Thousand Oaks: Sage Publications

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## UNIT 2 COGNITIVE CHANGES (EARLY ADULTHOOD, MIDDLE AGE, OLD AGE)

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### Structure

- 2.0 Introduction
- 2.1 Objectives
- 2.2 Early Adulthood
  - 2.2.1 Cognitive Changes
- 2.3 Middle Adulthood
  - 2.3.1 Cognitive Changes
- 2.4 Old Age
  - 2.4.1 Cognitive Changes
- 2.5 Let Us Sum Up
- 2.6 Unit End Questions
- 2.7 Suggested Readings
- 2.8 Answers to the Self Assessment Questions

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### 2.0 INTRODUCTION

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Young adulthood is a time when most of us finish school, find a career we enjoy, and create a family of our own. The cognitive stages during the early adulthood can be discussed as a period of realistic and pragmatic thinking; reflective and relativistic thinking. According to Piaget, he thought that young adults were quantitatively advanced in their thinking (they have more knowledge), however, they are qualitatively similar. He also believed that adults increase their knowledge in a specific area.

In this unit we will be dealing with all the three stages of adulthood and examine the physical, cognitive and other changes that come about. Particularly the focus will be on cognitive development.

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### 2.1 OBJECTIVES

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After going through this unit, you will be able to:

- define and describe the period of early adulthood;
- describe the cognitive changes during early adulthood;
- explain the characteristics of middle adulthood;
- delineate the cognitive changes during middle adulthood;
- define and describe the period of old age; and
- analyse the cognitive changes during old age.

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### 2.2 EARLY ADULTHOOD

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Young adulthood is a time when most of us finish school, find a career we enjoy, and create a family of our own. Physically, it is a time where we are our healthiest and will reach our peak performance. Cognitively, it is a time to grow up and make life decisions.



Socioemotionally, it is a time to take on roles of independence, lifestyles, marriage, and family.

According to Erik Erikson's eight stages of development, this is a time of intimacy vs. isolation. One either gets involved in an intimate relationship or isolates oneself. According to the literature, many areas of development are paramount during early adulthood.

The cognitive stages during the early adulthood can be discussed as a period of realistic and pragmatic thinking; reflective and relativistic thinking. According to Piaget, he thought that young adults were quantitatively advanced in their thinking (they have more knowledge), however, they are qualitatively similar. He also believed that adults increase their knowledge in a specific area.

Between the ages of 35-60, we find vast changes in many areas of our lives. The most obvious changes related to our lifestyle include: physical development and health, career and finances, marriage, and leisure activities. For many, midlife is a time when they start to think about "how much time they have left". Individuals begin to reexamine their lives, their relationships, their work, and even to question the meaning of it all. This process has been referred to as a mid-life crisis. Clearly, middle adulthood is a time change and development.

Middle adulthood is the period in which an individual changes in their cognitive functioning as concerned to their intelligence: crystallized and fluid; information processing and memory; expertise; career, work and leisure; religion, health and coping; and meaning in life.

While the adult years are generally a time of vitality and good health, there are health concerns. The main health problems of middle adulthood are cardiovascular disease, cancer, and menopause. Another major problem that affects health and behaviour is stress. Overall this is a time of major change and development physically and mentally.

During the middle adult years there is a noticeable change in how adults view their careers. By this time most individuals have settled into their careers and between the ages of 40-45 have ceased to advance up the career ladder. In general, job satisfaction and commitment tend to be high and continue to increase into our sixties.

It is also at this time that adults adjust their idealistic hopes to realistic possibilities. This adjustment to attainable goals is dependent on how much time is left before retirement, with retirement planning being a major area of financial concern. These reassessments may lead to stress and sadness over unaccomplished goals, which for a small few may lead to a midlife career change.

Crystallized intelligence improves through middle age and on. The ability to remember and use information acquired over a lifetime is increased, and also depends on education and culture of the individual. An individual is able to use stored information's and process automatically in their daily lives.

Many psychologists believe that fluid intelligence was primarily genetic and that crystallized intelligence was primarily learned. This nature-nurture distinction is probably invalid, in part because the acquisition of crystallized intelligence is affected by the quality of fluid intelligence.

Another financial adjustment that tends to take place for many midadults is the planning for college and setting aside the necessary funds for their children. In response to these growing financial needs and greater free time, due to their children getting older, many women enter or reenter the workforce. In short, this tends to be a time of career and financial readjustment and planning for both men and women.

Leisure holds an important place in helping adults to deal with life experiences. Not only does leisure enhance one's well-being it is also a buffer to the stresses of life.

Early adulthood is the stage of our life between the ages of about 20-40 years old, which are typically vibrant, active and healthy, and are focused on friendship, romance, child bearing and careers. It is the first stage of adulthood in which the body physically changes and is one of the hardest times in our lives after teenage years. One has to deal with so much in this time and it seems to be real time of self search as well as preparation. During this time in our life we find ourselves with a new sense of independence and for the first time in life we really feel free. However, along with that comes a lot of added personal responsibility to both ourselves and others and we really begin to learn more about ourselves as well as others through social interaction.

Young adulthood is a time when most of us finish school, find a career we enjoy, and create a family of our own. Physically, it is a time where we are our healthiest and will reach our peak performance. Cognitively, it is a time to grow up and make life decisions.

### 2.2.1 Cognitive Changes

The cognitive stages during the early adulthood can be discussed as a period of realistic and pragmatic thinking; reflective and relativistic thinking. According to Piaget, he thought that young adults were quantitatively advanced in their thinking (they have more knowledge), however, they are qualitatively similar. He also believed that adults increase their knowledge in a specific area.

#### *Realistic and Pragmatic Thinking*

Realistic thinking means looking at all aspects of a situation (the positive, the negative, and the neutral) before making conclusions. In other words, realistic thinking means looking at yourself, others, and the world in a *balanced* and *fair* way.

Some experts argue that the idealism of Piaget's formal operational stage declines in young adulthood, replaced by more realistic, pragmatic thinking. Schaie argues that adults use information differently than adolescents.

According to K. Warner Schaie, adults progress beyond adolescents only in their use of intellect. We typically switch from actually acquiring knowledge to applying that knowledge in our everyday lives. To support his theory of development, he included the following two stages to describe the cognitive changes in adults:

- *Achieving Stage*

Involves applying one's intelligence to situations that have profound consequences on achieving long term goals, such as those involving careers. This stage of development includes mastering the cognitive skills needed to monitor one's own behaviour. Young adults in this stage will also acquire a considerable amount of independence.

- *Responsibility Stage*

This stage of development begins in early adulthood and extends into middle adulthood. This is the time when a family is established and attention is given to the needs of a spouse and children. Young adults incur social responsibilities, deal with starting a career, and must take on some level of responsibility for others at work and in the community.

According to Labouvie-Vief, there are many changes that take place in the thinking of young adults, including a new integration of thought. Young adults rely less on logical analysis when solving problems. Idealised logic is replaced with commitment, and youth

focus their energy on finding their niche in the work place and society. During young adulthood, logical skills don't decline because cognitive abilities are strong.

### *Reflective and Relativistic Thinking*

William Perry said that adolescents often engage in dualistic, absolute thinking, whereas adults are more likely to engage in reflective, relativistic thinking. The term dualistic thinking is used to describe an adolescents view of the world. Everything is seen in the polar terms or opposites. Examples for this are right/wrong or good/bad.

As youth mature, dualistic thinking is replaced by multiple thinking. They gradually become aware of the diversity of opinion in other people and realise that authority may not have all the answers. Young adults begin to create their own style of thinking, and believe that others are entitled to the opinion they hold and that one opinion is good as anyone's else's. This leads to the next form of thinking, relative subordinate thinking. Here, personal opinions begin to be challenged by others, and a logical evaluation of knowledge is actively pursued. This leads to the final form of thinking, which is full relativism. In this stage of thinking, young adults completely understand that truth is relative, and knowledge is constructed and not given, contextual and not absolute.

Post formal thought is qualitatively different than Piaget's formal operational thought. It involves understanding that the correct answer to a problem requires reflective thinking, may vary from one situation to another, and that the search for truth is often an ongoing, never-ending process. Along with this is the belief that solutions to problems need to be realistic and that emotion and subjective factors can influence thinking.

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## **2.3 MIDDLE ADULTHOOD**

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Middle age is the period of age beyond young adulthood but before the onset of old age. Various attempts have been made to define this age, which is around the third quarter of the average life span of human beings.

In middle adulthood, an important challenge is to develop a genuine concern for the welfare of future generations and to contribute to the world through family and work. This period is aged between 40-60 years of life.

From the period of twenties and thirties, the individual arrives at middle age in the forties and fifties. Middle age is characterised by competence, maturity, responsibility and stability. This is the time when one wants to enjoy the success of job, satisfaction derived from the family and social life. People look forward to the success of their children. Attention gets more focused on health, the fate of children, ageing parents, the use of leisure time and plans of old age.

Middle aged adults often show visible signs of ageing such as loss of skin elasticity and graying of hair. Physical fitness usually wanes, with a 5-10kg accumulation of body fat, reduction in aerobic performance and a decrease in maximal heart rate. Strength and flexibility also decrease throughout middle age. However, people age at different rates and there can be significant differences between individuals of the same age.

Midlife is also viewed as a period of creativity and significant contribution to society. It is found that the best works of scientists, writers and artists are produced during the late forties and early fifties.

The changes that occur from adolescence to young adulthood may be stressful at times, but between the ages of 19 and 30 we are at our prime physically, and our cognitive skills are becoming finalised. Sure, sometimes it seems like we're dealing with a million things all at once and that one of any number of things could change the rest of our lives,

but that's the best part about it. Young adulthood is when (most of us) decide exactly what it is that we want to do with the rest of our lives whether it's raise a family, start a career, or both.

### 2.3.1 Cognitive Changes

Middle adulthood is the period in which an individual changes in their cognitive functioning as concerned to their intelligence: crystallized and fluid; information processing and memory; expertise; career, work and leisure; religion, health and coping; and meaning in life.

#### *Intelligence*

Cognitive development is multidirectional. It gains in some area and losses in others. Cross sectional measures of intelligence show decreases with age. There may be cohort effect of better or more schooling. Longitudinal measures show increase, at least until the age of 50s. It may be inflated due to practice effects and attrition. Cognitive abilities are more likely to increase than decrease, with exception of arithmetic skills, which begin to shift slightly downwards by age 40.

Fluid intelligence refers to our ability to see relationships, use abstract reasoning, and analyse information. Crystallized intelligence refers to our ability to use knowledge, experience, vocabulary, and verbal memory (Horn & Hofer, 1992). Fluid intelligence declines with age, but crystallized intelligence continues to grow as we learn more during middle age.

- *Fluid Intelligence*

Fluid intelligence is the flexible reasoning and is made up of the basic mental abilities such as inductive reasoning, abstract thinking and speed of thinking required for understanding any subject. It is fast and abstract reasoning, in adults, there is a decline with age. It includes nonverbal abilities and nonverbal puzzle solving, novel logic problems; allows best works at age 20s and 30s by mathematicians, scientists and poets.

Fluid intelligence peaks during the early adulthood and then declines ability to apply mental powers to new problems, perceiving relationships, forming concepts and drawing inferences. It declines probably due to changes in brain. These differences might be due to cohort effects related to educational differences rather than to age.

- *Crystallized Intelligence*

Crystallized intelligence is the verbal reasoning that holds across the lifespan which reflects accumulated knowledge and vocabulary. It allows best works at age of 40s, 50s, and older by historians, philosophers, prose writers. It refers to the accumulation of facts, information and knowledge that comes with education and experience within a particular culture.

Crystallized intelligence improves through middle age and on. The ability to remember and use information acquired over a lifetime is increased, and also depends on education and culture of the individual. An individual is able to use stored information's and process automatically in their daily lives.

Many psychologists believe that fluid intelligence was primarily genetic and that crystallized intelligence was primarily learned. This nature-nurture distinction is probably invalid, in part because the acquisition of crystallized intelligence is affected by the quality of fluid intelligence.



Fluid intelligence declines during adulthood, although this decline is temporarily masked by an increase in crystallized intelligence.

IQ tests may lack ecological validity as the reaction time slows down with age and results may be due to physical changes and not cognitive changes.

Robert Sternberg proposed that intelligence is composed of three distinct parts:

- *Analytic / Academic*

It consists of mental processes that foster efficient learning, remembering and thinking. Multiple choice tests, with one and only one right answer reward analytic intelligence. They tend to have an extensive, highly organised knowledge of a particular domain and increase in work satisfaction. There is a greater commitment towards the job. They have greatest physical and psychological well-being. The current middle-aged worker faces more challenges, and increased career challenges lead to career changes. The midlife career changes can be self-motivated or imposed by others.

- *Creative*

Creativity is another important adult skill related to intelligence. Like intelligence, though, it is hard to agree what it is. We know that some kinds of creativity, like writing, peaks during middle adulthood. Creativity and practical intelligence often combine to create people we call experts in their fields, whether repairing cars, farming, writing, or designing a spacecraft.

It involves the capacity to be flexible and innovative when dealing with new situations. Expertise increases in the middle adulthood years. They tend to use the accumulated experience of their life situations to solve problems. There is more creativity and flexibility in their domain than novices.

They prefer to make their own decisions and plans. They prefer their own judgment to that of others and don't tend to back down in the face of criticism or disagreement. They are most resourceful when faced with unique circumstances or problems. They show an imaginative use of many different words. They show more flexibility in their approach to problems, are eager to try new avenues, and are not bound to rules or accepted ideas of the way things work. They show originality and do not often come up with off the shelf solutions.

- *Practical*

It enables the person to adapt his/her abilities to contextual demands. They tend to have a pleasant time after work. They have more time and money to pursue activities and interests. There is decreased rate of heart disease and death due to vacations and leisure. During this time they are preparing themselves for retirement.

### *Information Processing and Memory*

During the middle adulthood the speed of information processing, reaction time, and memory declines. The use of effective memory strategies can decrease the decline.

### *Religion, Health, Coping and Meaning in Life*

Religion and spirituality is an important dimension of life during this stage. A significant increase in religiosity and spirituality is seen during middle age. There is an individual difference in religious interest, as the females show a stronger interest in religion than males do. Positive association of religious participation and longevity is noticed. Religion promotes physical and psychological health and positive functions of religious coping.



According to Victor Frankl, the examining of the finiteness of our existence leads to exploration of meaning in life. Many middle-aged individuals increasingly examine life's meaning.

### Self Assessment Questions

1) Answer the following statements with True or False:

- i) Young Adults is the time of freedom and when they find a sense of independence. ( )
- ii) Piaget thought that young adults are not quantitatively advanced in their thinking. ( )
- iii) William Perry gave views about realistic thinking. ( )
- iv) As youth mature, dualistic thinking is replaced by multiple thinking. ( )
- v) Crystallized intelligence is in peak during middle adulthood. ( )

2) Fill in the blanks:

- i) Creativity involves the capacity to be \_\_\_\_\_ and innovative when dealing with new situations.
- ii) \_\_\_\_\_ refers to our ability to see relationships, use abstract reasoning and analyse information.
- iii) \_\_\_\_\_ means looking at all aspects of situations before making conclusions.
- iv) Cognitive development is \_\_\_\_\_.
- v) Religion and \_\_\_\_\_ is an important dimension of life during middle adulthood.

## 2.4 OLD AGE

**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.”

### 2.4.1 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 optimisation 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.

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.

### Self Assessment Questions

#### 3) Fill in blanks:

- i) The study of the process of ageing and the ageing population is called \_\_\_\_\_.
- ii) Ageism is defined as the \_\_\_\_\_ that occur on the basis of age.
- iii) \_\_\_\_\_ is the memory without conscious awareness.
- iv) \_\_\_\_\_ memory is very long term recall.
- v) \_\_\_\_\_ memory is remembering to do planned activities in the future.

## 2.5 LET US SUM UP

Young adulthood is a time when most of us finish school, find a career we enjoy, and create a family of our own. Physically, it is a time where we are our healthiest and will

reach our peak performance. Cognitively, it is a time to grow up and make life decisions. Socioemotionally, it is a time to take on roles of independence, lifestyles, marriage, and family.

Erik Erikson, a prominent theorist in the field of emotional development, assigns specific goals to different periods of life. Those in early adulthood are said to be struggling with intimacy as opposed to isolation. This refers to the desire for a stable long-term relationship. Those who have achieved intimacy are thought to host a range of positive attributes, such as confidence and acceptance. Alternatively, those in isolation are more likely to fear loneliness and abandonment. Intimacy requires an individual to sacrifice some of his independence for another person. After successfully traversing the struggle of isolation and intimacy, an individual will deal with generativity, which is the desire to improve society for future generations.

Between the ages of 35-60, we find vast changes in many areas of our lives. The most obvious changes related to our lifestyle include: physical development and health, career and finances, marriage, and leisure activities. For many, midlife is a time when they start to think about “how much time they have left”. Individuals begin to reexamine their lives, their relationships, their work, and even to question the meaning of it all. This process has been referred to as a mid-life crisis. Clearly, middle adulthood is a time change and development.

One of the major aspects of middle adulthood are the physical and biological changes that occur in the body. Two of the most noticeable changes are seeing and hearing. Each of these begin to decline in the middle years. One of the physical changes that occur is in height. Most individuals get a little shorter through the years. Also, hair is graying, skin is wrinkling, bodies are sagging, and teeth are yellowing. Some adults strive to make themselves look younger by having plastic surgery, dying their hair, wearing wigs, joining exercise programs, or taking heavy vitamin doses.

While the adult years are generally a time of vitality and good health, there are health concerns. The main health problems of middle adulthood are cardiovascular disease, cancer, and menopause. Another major problem that affects health and behaviour is stress. Overall this is a time of major change and development physically and mentally.

It is also at this time that adults adjust their idealistic hopes to realistic possibilities. This adjustment to attainable goals is dependent on how much time is left before retirement, with retirement planning being a major area of financial concern. These reassessments may lead to stress and sadness over unaccomplished goals, which for a small few may lead to a midlife career change.

Another financial adjustment that tends to take place for many mid adults is the planning for college and setting aside the necessary funds for their children. In response to these growing financial needs and greater free time, due to their children getting older, many women enter or reenter the workforce. In short, this tends to be a time of career and financial readjustment and planning for both men and women.

Adults demonstrate much variation in their intimate lifestyles. Nearly all of us are married at least some time during our adult lives. Many marriages either improve or deteriorate during middle age. If a couple form a relationship appropriate to this new period of life, their marriage will likely grow stronger. But if they cannot adapt to the new conditions of their lives, their marriage may develop problems. Regardless, intimacy, marriage, and family concerns are a priority during middle adulthood. Some specific issues include the empty nest syndrome, late parenting, divorce, sexuality, remarriage, and grand parenting.



**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**.

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.

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.

**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.

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## 2.6 UNIT END QUESTIONS

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- 1) Discuss critically the cognitive changes in early adulthood.
- 2) What are the important cognitive changes that come about in middle adulthood?
- 3) How does old age affect cognitive development?
- 4) Compare age differences in implicit and explicit memory.
- 5) How does each part of information processing system such as the sensory register, short term and long term memory knowledge base etc.?

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## 2.7 SUGGESTED READINGS

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P.J. Whitehouse and G.C.Gilmore (eds) (1989). *Memory, Ageing and Dementia*. New York, Springer

S.L.Willis and J.D.Reid (Eds) (1999). *Life In the Middle* . San Diego, CA, Academic Press.

Lachman, M.E.(Ed). (2001). *Handbook of Midlife Development*. New York, Wiley.

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## 2.8 ANSWERS TO THE SELF ASSESSMENT QUESTIONS

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- 1)
  - i) True
  - ii) False
  - iii) False
  - iv) True
  - v) True
- 2)
  - i) Flexible
  - ii) Fluid intelligence

- iii) Realistic Thinking
  - iv) Multidimensional
  - v) Spirituality
- 3) i) Gerontology
- ii) Prejudice
  - iii) Implicit memory
  - iv) Remote
  - v) Prospective



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## UNIT 3 PSYCHOSOCIAL CHANGES (EARLY ADULTHOOD, MIDDLE AGE, OLD AGE)

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### Structure

- 3.0 Introduction
- 3.1 Objectives
- 3.2 Development During Adult Years
  - 3.2.1 Stage Theories versus the Contextual Approach
- 3.3 Psychosocial Changes During Early Adulthood
  - 3.3.1 Eric Erikson's Theory
  - 3.3.2 Levinson's Seasons of Life Theory
  - 3.3.3 Attachment Patterns and Romantic Relationships
- 3.4 The Family Life Cycle
- 3.5 Psychosocial Changes During Middle Adulthood
  - 3.5.1 Four Developmental Tasks of Middle Adulthood
  - 3.5.2 Individual Differences in Personality Traits
  - 3.5.3 Changing Parent-child Relationships
- 3.6 Psychosocial Changes During Old Age
  - 3.6.1 Stability and Change in Self-Concept and Personality
  - 3.6.2 Relationships in Late Adulthood
  - 3.6.3 Retirement and Leisure
- 3.7 Let Us Sum Up
- 3.8 Unit End Questions
- 3.9 Suggested Readings

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### 3.0 INTRODUCTION

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In this unit we will be dealing with development during adult years. The period of adulthood is marked by society's expectation of performing one's duty as an adult. Some special roles and relationship like family and career are the major milestones of adulthood. While discussing development during adult years stage theories will be put forward to explain the adult years. This will be seen in contrast to the contextual theories. This unit will discuss psychosocial changes during early and middle adulthood and the various changes that come about as one grows older. Finally the unit will discuss the various growth and development issues related to old age.

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### 3.1 OBJECTIVES

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After going through this unit, you will be able to:

- describe the development during adult years in terms of stage vs Contextual theories;
- explain the psychosocial changes during early adulthood;
- delineate the psychosocial changes during middle adulthood; and
- analyse the psychosocial changes during old age.

## 3.2 DEVELOPMENT DURING ADULT YEARS

The spurt of growth during adolescence stabilises by adulthood and the individual looks forward to more concrete roles in the society. The capabilities and behaviours of the individuals continue to change as they grow older not only because of the biological growth process but also because of their understanding and the way they interact with their environment.

In the Indian tradition the period of adulthood is referred to as Grihastha ashram. During this stage an individual enters the social life and accepts responsibilities of family, marriage and entering into one's career. The stages of adulthood have sub periods such as young adulthood, middle adulthood and late adulthood.

Perhaps middle adulthood is best known for the midlife crisis. This is a time of reevaluation that leads to questioning long held beliefs and values. The midlife crisis may also result in a person divorcing his or her spouse, changing jobs, or moving from the city to the suburbs.

Typically beginning in the early or mid 40s, the crisis often occurs in response to a sense of mortality, as middle age persons realise that their youth is limited and that they have not accomplished all of their desired goals in life. Of course, not everyone experiences stress or upset during middle age, instead they may simply undergo a midlife transition, or change, rather than going through the emotional upheaval of a midlife crisis.

Other middle age adults prefer to reframe their experience by thinking of themselves as being in the prime of their lives rather than in their declining years.

The field of life-span development seems to be moving away from a normative crisis model to a timing of events model, so as to explain such events as the midlife transition and the midlife crisis. The former model describes psychosocial tasks as occurring in a definite age related sequence, while the latter describes tasks as occurring in response to particular life events and their timing. In other words, whereas the normative crisis model defines the midlife transition as occurring exactly between ages 40 and 45, the timing of events model defines it as occurring when the persons begin the process of questioning their own life desires, values, goals, and accomplishments.

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 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.

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.

### 3.2.1 Stage Theories Versus the Contextual Approach

**Stage Theories:** Stage theories suggest that all human beings, no matter where or when they live, move through an orderly progression of stages in their development. The individual grows in a systematic process. According to Eric Erikson's eight stages of life, development proceeds through a series of distinct stages, each defined by a specific crisis. These crisis, in return results from the fact that as an individual grows older, they confront new combinations of biological drives and societal demands. The biological drives reflect the expectations and requirements of society for people at different ages.

During adulthood, every individual passes through three major crises. The first of these is the crises of integrity versus isolation. During late adolescence and early adulthood, individual must develop the ability to form deep, intimate relationships with others. This does not simply mean sexual intimacy, rather, it involves the ability to form strong emotional attachment to others. In other words, the first crisis of adult life centers in the capacity to love, to care deeply and consistently with others. People who fail to resolve it successfully will live in isolation, unable to form truly intimate, lasting relationships.

Erikson labeled the second crisis of adult life, that is the crisis of generativity versus absorption. The need for individuals to overcome selfish, self-centered concerns and to take an active interest in helping and guiding the next generation. For parents, such activities are focused on their children. After children have themselves grown up into adults, however, the tendency towards the generativity may involve serving as mentor or guide for members of younger generation, helping them in their careers and lives. People who do not become parents can express generativity by providing help and guidance to young people such as students, younger co-workers, nieces and nephews, and so on. Individuals who successfully resolve this crisis become absorbed in their own lives and gradually cut themselves off from an important source of growth and satisfaction.

Erikson termed the final crisis of adult development as integrity versus despair. Individuals in this stage reach the final decades of their life and look back and analyse themselves with questions like "Did my life have any meaning?" "Did my being here really matter?" If the individual is able to answer "yes" for the questions, and to feel that they have reached many of their goals, they attain a sense of integrity. If, instead, they find their lives to be lacking on such dimensions, they may experience intense feelings of despair. Successful resolution of this final crisis can have important effects on how individuals come to terms with their own mortality, the inevitable fact of death, and on their psychological and physical health during the final years.

According to Erikson and others who view adult development in terms of discrete phases or stages, development during human adult years follows an orderly plan, reflecting the fact that at different times in people's lives, everyone experiences the same problems, events, challenges, or as mentioned crises. The way in which an individual deals with each of these turning points determines the course and nature of people's lives from that point on.

**Contextual Approach:** Contextual theories of development take careful account of many of the differences that exist in one's life and situations. The context and situation of each individual varies a great deal and these in fact account for the individuals to experience the crises in their life differently.



Contextual theories of development hold that it is the context or environment under which a child grows, that is more important than inbuilt mechanisms. These theorists believe that infants and children develop and grow according to the environmental and contextual influences they are exposed to and that these contextual factors are what makes them fully functioning adults or disordered adults. Biological influences are seen as secondary if not completely ignored.

Two of the most important contextual theories were put forward by American psychologist Urie Bronfenbrenner and Lev Vygotsky. According to Bronfenbrenner's theory development is influenced by experiences arising from broader social and cultural systems as well as a child's immediate surroundings. Ecological Systems Theory, also called "Development in Context" or "Human Ecology" theory, specifies four types of nested environmental systems, with bi-directional influences within and between the systems.

This ecological theory of Bronfenbrenner presents the sociocultural view of development which focuses on the changing relations between individuals and the environments in which they live. It consists of five environmental systems ranging from the individual's direct interactions with social agents to the broad-based inputs of culture. The five systems in Bronfenbrenner's ecological theory are the microsystem, mesosystem, exosystem, macrosystem, and chronosystem.

The microsystem in ecological theory is the setting in which an individual lives (Bronfenbrenner 1979). This context includes the person's family, peers, school, neighbourhood, etc. is the immediate environment in which a person is operating. The individual directly interacts with this environment and the latter has a direct impact on a child's biological and psychological development. The key concept is the "direct contact" between the child and the niche. The mesosystem in ecological theory involves linkages between Microsystems. Behaviourists like John Watson and B.F. Skinner defined environment as "any and all external focuses that shape the individual's environment". While environment is extremely important, there are others who are of the view that the individual in addition has an important role to play.

That is, it is not just that he/she gets influenced by environment, but the developing individual is not all passive but actively influences also the environment in which he/she grows up.

### Self Assessment Questions

1) Delineate the Characteristic features of development during early adulthood.

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2) What are the important features of development during midyears and old age?

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3) Describe the stage theory of development.

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4) How does stage theory differ from contextual theory?

### 3.3 PSYCHOSOCIAL CHANGES DURING EARLY ADULTHOOD

Early adulthood is the stage of our life between the ages of about 20-40 years old, who are typically vibrant, active and healthy, and are focused on friendship, romance, child bearing and careers. It is the first stage of adulthood in which the body physically changes and is one of the hardest times in our lives after teenage years. One has to deal with so much in this time and it seems to be the time for self search as well as preparation for the future coming years of old age.

During this time in one's life, people find themselves with a new sense of independence and for the first time in life they really feel free. However, along with that comes a lot of added personal responsibility to both individuals and others and the persons really start learning more about themselves as well as others through social interaction.

#### 3.3.1 Eric Erikson's Theory

According to Erikson, the socialisation process consists of eight phases – the “eight stages of man.” His eight stages of man were formulated, not through experimental work, but through wide - ranging experience in psychotherapy, including extensive experience with children and adolescents from low - as well as upper - and middle - social classes. Each stage is regarded by Erikson as a “psychosocial crisis,” which arises and demands resolution before the next stage can be satisfactorily negotiated. These stages are conceived in an almost architectural sense: satisfactory learning and resolution of each crisis is necessary if the child is to manage the next and subsequent ones satisfactorily. It is like the foundation of a house which is essential to the first floor, which in turn must be structurally sound to support the second floor as it gets built up. Some of the important crises of the adulthood include the following:

##### *Intimacy vs. Isolation*

Intimacy requires that an independent persons give up some of their independence and redefine their identity to include the interests of another person or others in their lives. The adult life is a conflict of intimacy vs. independence, and includes differing needs for connection, fears of abandonment or being overwhelmed, and it's a challenging work in progress.

People who have achieved intimacy are cooperative, tolerant, and accepting of differences. They can accept times of aloneness without fear of loneliness. If there is too great a sense of isolation, there will be fears of forming close ties, due to fears of loss of identity or freedom.

Such people are more competitive than cooperative. They get easily threatened if any person gets too close, and not accepting of another's differences. If there is successful resolution of this conflict, a person can go on to develop generativity, which means

caring for the next generation and helping to improve society. In women, child bearing usually occurs in the 20s and 30s, while contributions to society may occur later. As children come into the picture, values and focus will shift with those demands.

### 3.3.2 Levinson's Seasons of Life Theory

Levinson sought to find a common path of change in adulthood. He believed that there were stages with tasks inherent to each one. He was of the view that each stage began with a transition, lasting about 5 years. Between transitions there are periods of 5 – 7 years that are stable, during which a person builds a life structure.

*Life structure* is the underlying design of a person's life, which involves relationships with significant others and occupations. This structure is designed to harmonize inner and outer demands to enhance quality of life. Early adulthood is the time of greatest energy, contradiction and stress. It is also a time of intense satisfaction, as a person charts his/her own course in love, sexuality, family, occupation, setting life goals, etc.

*Dreams and mentors:* In Levinson's theory, during the early adult transition (age 17 – 22) most people construct a dream, an image of themselves in the adult world that will guide their decision making. The more specific the dream, the more motivating it is. Men's dreams are said to be more individualistic and often entail success in business and career. On the other hand if they include women, their dreams are invariably related to their being supporters of their goals.

*Age-30 transition* serves as a time to reevaluate their life structure. If the person is still single, she/he will begin looking for a partner. Women who had immersed in marriage and child-bearing may begin to assert more individualistic goals. This period can be a real crisis if neither relationships nor occupation is successful.

*Settling down for Men* means focusing on certain relationships and aspirations, and leaving others behind. They try to establish a niche in society consistent with their values: family, wealth, power, achievement.

*Continued instability for Women* occurs as women often get side-tracked from a professional focus by child-bearing and family responsibilities. Most women don't attain the stability that men achieve in the early 30s until middle age.

*The Social clock* is the age-graded expectations that we hold for life events, such as first job, getting married, having children, buying a house, retirement. Women who followed a feminine social clock (marriage and child bearing in the 20s) are considered to be responsible, self-controlled, tolerant, and caring, but do seem to feel their self-esteem decline, and are said to feel more vulnerable as they aged.

Women who followed a masculine social clock (early career development) became more dominant, sociable, independent, and intellectually effective. Women who had not followed a social clock are said to be suffering from self-doubt, feelings of incompetence, and loneliness.

*Close relationships* require finding a partner, building emotional bonds, and learning how to engage in true intimacy with another person.

*Romantic Love* entails finding a partner to share one's life and dreams with. It enhances self-concept and well-being.

*Selecting a mate* usually means finding someone of similar background, age, ethnicity, socio-economic status and religion, in places where people like that congregate. It requires some physical proximity to develop a meaningful relationship.

*Components of love: The triangular theory of love* (Sternberg) suggests love has 3 components: intimacy, passion, and commitment. Intimacy has to do with emotions of tenderness, warmth, concern for others, desire for partner to reciprocate. Passion is the sexual component, as well as romance, which is the physical arousal component.

Passionate love is the stuff of the beginning of a relationship – the courting, sexual attraction. It declines as the partner becomes more known, less idealised. Few long-term relationships maintain this level of attraction.

Companionate love is formed with intimacy and commitment, as partners develop warm, trusting affection and offer caregiving. Solid long-term relationships involve both types of love at different stages. It requires this glue to hold a couple together as the newness of a relationship wears off. Commitment determines if a relationship will survive. Communication of commitment requires warmth, forgiveness, sensitivity, acceptance, and respect.

### 3.3.3 Attachment Patterns and Romantic Relationships

Early attachment patterns predict the quality of later intimate relationships. That early attachment bond sets up an internal working model, or expectations about love figures. It also relates to quality of parenting and attachments formed in those relationships. The attachment is itself of various types which are discussed below:

- i) Secure attachment – those with secure attachments to a caregiver viewed themselves as likable, open to others, comfortable with intimacy, with few fears of abandonment or intimacy. They describe their love relationships as trusting, happy, and the partner as a friend. They were willing to turn to the partner for comfort, and they described satisfying sexual behaviour.

Avoidant attachment – those with an avoidant attachment history (demanding, disrespectful, critical parents) had internal models heavy on independence, mistrusting of partners, and anxious about people getting too close. They believe others dislike them and true love is hard to find or doesn't last. Their relationships are characterised by jealousy, emotional distance, little enjoyment of physical contact. They may become workaholics or engage in affairs to prove their theory that love can't be counted on.

- ii) Resistant attachment – this includes parents who were unpredictable or unfair. These people set up intense relationships characterised by fears of abandonment and smothering of the partner. They experienced extreme highs and lows in a relationship. They have poor boundaries with others, disclosing inappropriately to others too early in the relationship.

Characteristics of the partner also affect romantic relationships. Those partners who feel internal security about themselves fostered security in their partner. So a healthy relationship can help a person from a troubled background overcome some of the deficits of their background.

*Friendships* are usually similar in background, age, interests and needs. Friends offer affirmation and acceptance, support during difficulty. Sharing deep feelings and needs may be more open in a friendship than a marriage, especially for women.

Same-sex friendships are more intimate for women than men. Women enjoy just talking, while men choose to do some activity together, especially sports. Unfortunately men feel competitive with other men, so they describe barriers to deep friendships with other men, in the form of resistance to revealing any vulnerabilities or needs unmet.

Other-sex friendships occur less often and don't last as long as same-sex friendships. Men and women disclose more to women, but women can learn important things about male motivations and taking a more objective stance from a male friend.

Siblings as friends – especially sisters become companions in adulthood. Rivalries from the past subside as sibs develop a different type of supportive relationship. Close sib relationships predict mental health.

#### Self Assessment Questions

- 1) According to Erikson's theory indicate the conflict cum crisis that takes place during adulthood.

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- 2) Put forward Levinson's theory and its features in adult development.

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- 3) What is meant by social clock? How is it important for development in adulthood?

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- 4) Describe attachment patterns and romantic relationships.

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### 3.4 THE FAMILY LIFE CYCLE

This is a sequence of phases in the development of most families. Early adulthood, people live on their own, then marry and bear children. In middle age children leave home, parenting responsibilities diminish and people spend more time and money on themselves if they don't have to care for an elderly parent, finally retiring, getting older, and loss of a spouse.

*Leaving home* happens more often at earlier ages now than in the past. People leave for school, military, and for jobs, so they leave at different ages. Youth in chaotic and disturbing homes leave home earlier to escape the tension. Most leave home to experience



their independence, even though that may mean living with a number of roommates to be able to afford it. If there are financial setbacks, however, most people feel they can return home if they have to.

*Joining of families in marriage* – people are waiting longer to marry today: ages 25 (M) and 27 (W). Marriage represents connection between 2 family systems, with all the traditions and expectations inherent.

Marital roles encompass meals, time together and apart, leisure time decisions, sexual needs, financial decisions. Some of these things are not as emotionally charged as others, but the partners rarely know which topics are potential explosions until they face them. Without good communication and negotiation skills, the openness of the marriage will be compromised.

*Traditional marriages* involve a clear division of labour between husband and wife. Man's responsibilities include economic provision; woman's responsibilities have to do with making a home and providing for children.

*Egalitarian marriages* have spouses relating as equals, with power and authority being shared. Both partners try to balance devotion to work with family responsibilities. Better-educated women expect this sort of marriage. Even so, division of labour in the home may not be equal.

*Marital satisfaction* – Men relate being happier in marriage than women. Being married enhances men's health, due to feelings of attachment, belonging, social support. Women need a certain relationship quality to feel satisfied in a relationship. So women suffer more when the relationship is having problems. Women also suffer under multiple role demands, feel overwhelmed by the needs of all the people in their circle. Women are more willing to work on the relationship through discussion, but men are more willing to withdraw from conflict, leading to frustration in the women.

*Parenthood* has become an active choice for couples, as birth control is available and effective today. There is less stigmatisation for couples who remain childless. The decision to have children is based on financial circumstances, religious values, health concerns. Women with more traditional identities usually choose to have children. Those with high status, demanding jobs choose less often to have children.

Advantages of having children include warmth and affection, the fun that children offer, learning experiences, desire to pass on values, family name, feelings of accomplishment in raising successful children.

Disadvantages of having children include loss of freedom, burdens financially and in being tied down. The conflict between work responsibilities and family also is cited as a problem.

Transition to parenthood occurs in all areas: loss of sleep, new tasks and responsibilities, less time for the couple, increased expenses. The roles become more traditional, even for egalitarian couples, so this can impose frustration on the couple. Loving, supportive marriages can usually manage the strain and will describe themselves as happy. Troubled marriages seem to become more distressed after a baby. Husband's negativity or out-of-control conflict predicts a drop in mother's satisfaction. The greater the difference in caregiving responsibilities, the greater the decline in marital satisfaction after childbirth. Interventions such as group experiences with other couples can get fathers more involved and enhance the father's appreciation of what caregiving entails, increasing affirmation of mother, and satisfaction.

*Career development* aids in establishing a satisfying identity- as adults with satisfying work develop skills, sense their accomplishments, make friends and feel more financially independent and secure.

### *Establishing a career*

Men enter their careers earlier, as soon as they finish school, and they stay in the marketplace continuously. Promotion often seems to depend on job commitment and competitiveness in the worker. Very successful men emphasise their jobs over family responsibilities and leisure activities. Also a sense of self-efficacy makes a difference in promotion. Those people with fears of failure will tend to set lower goals for themselves.

### *Combining work and family*

*Dual-career marriage* are challenging, particularly for women who carry so many role responsibilities- role overload. This links to stress, poorer marital relationships, poorer parenting, and child behaviour problems. It is particularly a problem for people in poorer paying jobs, with fewer options about child care, time off, etc. Career decisions are more flexible for professional people, but moves are difficult, since both careers must be considered. Women are particularly afflicted with overload.

### **Self Assessment Questions**

1) Elucidate the family life cycle during adulthood and related factors.

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2) What are the advantages and disadvantages of having children early?

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3) What are the transitional aspects involved in parenthood?

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4) Discuss career development during adulthood.

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### 3.5 PSYCHOSOCIAL CHANGES DURING MIDDLE ADULTHOOD

#### *Eric Erikson's Theory*

Erikson stated that the primary psychosocial task of middle adulthood—ages 45 to 65—is to develop generativity, or the desire to expand one's influence and commitment to family, society, and future generations. In other words, the middle adult is concerned with forming and guiding the next generation. The middle adult who fails to develop generativity experiences stagnation, or self-absorption, with its associated self-indulgence and invalidism.

*Generativity* means reaching out to others in ways that give to and guide the next generation. In early adulthood it occurs as parents train children and develop a career. In midlife this extends beyond the nuclear family to a community or social group. Now people are trying to integrate their goals with the welfare of the larger world. Generativity includes all things people generate that can outlive them and improve society. Parenting is one way, but there are other ways, such as mentoring in the workplace, volunteering, community involvement, creative endeavors. People need to be needed and feel like their lives amount to something eternal.

There are certain social clock imperatives toward generativity, but there is also an optimistic "belief in the species" that we want to be part of. This means finding ways to be part of improving humanity. The alternative to finding a means to generativity is *stagnation*—becoming self-centered and narcissistic. These people place their own comfort/ security above challenges that include other people. There is a detachment even from their own children, a self-centered focus on what they can get from others, not what they can give, losing interest in being productive at work or developing their talents. Generative people are better adjusted, low in anxiety and depression and high in self-acceptance and life satisfaction. They are more open to others' differences in point of view, have leadership qualities, care about the welfare of others, and care more about their work than financial gain. Fatherhood seems to enhance generativity in men more than women.

*Levinson's Seasons of life* – middle adulthood begins with a transition (40–45), followed by a life structure (45–50). This structure is re-evaluated (50–55) and ends in a culminating life structure (55–60).

*Midlife Transition* occurs around age 40, when people evaluate their success in meeting their adult goals. They are realising there is more time behind them than ahead of them. In response to the valuation of time, they often make big changes in their lives—family, occupation. They may turn inward, focusing on their own needs, instead of allowing themselves to be distracted by the people around them. They seem to re-evaluate everything.

#### 3.5.1 Four Developmental Tasks of Middle Adulthood

Following are the developmental tasks of this stage of development:

- i) Young-Old- seeking new ways of being young and old- giving up some youthful qualities that no longer seem appropriate, and transforming others, finding positive meaning in changes.
- ii) Destruction-Creation. They re-evaluate past hurtful acts- there may be attempts to apologise and make amends, or general attempts to be kinder, more creative, other-focused.

- iii) Masculinity- Femininity. Middle-aged people must find a way to recognise and integrate the masculine and feminine aspects of their personality- men become more empathic/ caring; women becoming more autonomous/ assertive
- iv) Engagement- Separateness. Middle-aged people are trying to find a better balance between engagement with the outside world and their interior needs. Men often pull back from occupational ambition and achievement focus; women may shift their interests from family to job or community and accomplishment.

### *Modifying the Life Structure*

Gender similarities and differences are seen as people try to find a balance between youth and age. They may face life-threatening illnesses, or have to cope with ageing parents' needs. Women often fear the ageing process, as our society places so much emphasis on women's youth and looks as their value. Women will tend to perceive themselves as younger than they are – that gap increases with age. The more people integrate their masculine and feminine characteristics, the more androgynous they become, which is an adaptive approach to life.

*Life Structure in Social Context* is enabled through supports in the environment- poverty, unemployment and lack of personal value subverts this process. Even high-powered careers and great financial success can sabotage self-development, as the focus is on material concerns, not self development.

*Midlife Crisis* was cited by Levinson as people moved to middle adulthood. This is the idea that adults get to a certain point and question their life choices, resulting in a restructuring of the personality. The changes seen were slow and steady. Changes for men may occur around the early forties, but for women may occur in the late 40s and 50s, as they are freer from child responsibilities.

### *Stage vs. Life Events approach*

There is controversy about whether midlife is actually a stage of development, like Erikson described. Many theorists just seen midlife transitions as adaptations to life events- children moving out or having to move back in, parents ageing concerns, retirement. There certainly is no specific age when changes will occur. Most midlife people describe troubling moments that prompt new goals and internal changes.

### *Stability and Change in Self-Concept and Personality*

Possible Selves are all the ideas a person has about what one can become or what one fears becoming. Possible selves generated in the 20s are varied, positive and idealistic. As people age, possible selves become more realistic, fewer in number and more modest, related to competence in the areas already selected. The future no longer seems to hold endless opportunities, so people adjust to cope.

### *Self-Acceptance, Autonomy, and Environmental Mastery .*

People become more introspective as they enter the second half of life. They have often made choices to change their lifestyle to suit their needs.

*Coping strategies.* These include finding the “silver lining” in a difficult situation, planning better ways to handle problems, evaluate alternatives to manage situations, and use humor to express themselves more effectively.

### *Gender Identity shifts in response to shifting proportions of sex hormones*

Women adopt more masculine traits of assertiveness and self-confidence, and men

often become more sensitive, caring, and considerate. People become more androgynous. Men may turn to their relationships as they see they have fewer opportunities to develop influence at work. Women may have taken steps out of a bad marriage and have chosen to be more autonomous and assertive to survive.

### 3.5.2 Individual Differences in Personality Traits

Some people maintain consistent traits over the lifetime, while others adjust in some ways in response to life.

#### *Relationships at Midlife*

This period of the family life cycle is called “launching children and moving on.” In the past it was known as the “empty nest,” but it is no longer seen in such a negative light, even for women. This period may last as long as 20 years before retirement. It also relates to establishing different relationships with children and finding new relationships with in-laws and grandchildren. They also must cope with elderly parents and their needs.

#### *Marriage and Divorce*

Households at this stage are well off economically compared to other age groups. Adults between 45 and 54 have the highest annual income. This can allow for expansion of opportunities to learn, travel, etc. If the marital relationship is shaky, many people choose this time to divorce and start over. At midlife, divorce seems to be more manageable emotionally.

#### *Feminisation of poverty*

This is a trend in which women who support themselves or their families have become the majority of the adult poverty population, regardless of age and ethnic group.

#### *Causes of divorce*

Women who cite poor communication, husband’s substance abuse, husband’s physical or verbal abuse, or their desire for autonomy will adjust better, since it indicates a remnant of self-esteem in spite of the failure. Women who do survive divorce successfully tend to be more tolerant, comfortable with uncertainty, nonconforming, and self-reliant.

### 3.5.3 Changing Parent-child Relationships

This adjustment is more positive when parents have interesting activities of their own, beyond parenting and focus on children. Parents who relinquish authority over their adult children will have more positive relationships with them after they move out. The authoritative parenting style links to better contact after the child leaves home, and better life satisfaction for the parents.

Grandparenthood is such a stage in this age, as it is a relationship with fewer responsibilities and mostly fun. Meanings of Grandparenthood are more significant than people think until they face that transition. The gratifications include:

- Valued elder
- Immortality through descendants
- Reinvolvement with personal past
- Indulgence



Grandparent-Grandchild relationships are somewhat dependent on the age of the child. As the child grows older, the grandparents shift from play to warmth, support, information and advice-giving. The closer the families live geographically, the better chance the children can relate more closely to the grandparents, especially the grandma.

Siblings report declining contact in midlife, but this increases as one or more experience life events. Families gather for weddings, and support one another when a child divorces, or has a baby. Siblings reconnect as their children leave home and they rediscover it's fun to do things together. They often reconnect in response to the parents' illnesses or needs. Sister relationships are usually closer than brother relationships. If only one sibling holds the responsibility for elder care, there can be enormous resentment build up against the other sibs.

Friendships still cleave across genders – men are more likely to bond with men, and women with women. Women seem to have more close friends and offer and get more emotional support than men report. Numbers of friends decline with age, since people get more selective about friendships. If it is a close friendship, though, people will try to maintain it with care. Friendships are sources of emotional support, pleasure and enhance well-being.

### *Career Development*

Job Training is less available to older workers, but if a person wants to upgrade his/her job, training is important. Unfortunately older workers have less supportive supervisors who tend to believe the ageing stereotypes and expect less of older workers.

### *Gender and Ethnicity*

The Glass Ceiling is the unspoken, invisible barrier to advancement to women and ethnic minorities. Women managers are just as effective as male managers – they tend to be more inspiring and considerate than male managers. The current emphasis on team building is perfect for female skills in consensus-building.

Career Change at Midlife – usually they entail leaving one line of work for a related one. Some people find another line of work to find more stimulating work, others to more relaxing, less rigid or demanding work. Drastic job shifts usually signal personal crisis.

Unemployment has been a serious problem in the past 2 years as the technology industry cratered and many jobs went with it. Highly trained and well-paid workers were suddenly on unemployment lines. Middle-aged workers are more affected by unemployment, as they recognise they won't be the most employable, or they won't command the same salary they had before. This can seriously affect a worker's sense of self worth at this point.

### *Planning for Retirement*

This is not always adequate, as people tend to believe they will work as long as they want, but illness or family crisis will sometimes short-circuit this plan. The other aspect of planning has to do with how one wants to spend their time. If people don't develop hobbies, community interests, etc., boredom can trigger depression and hopelessness. Even the idea of relocation requires much thought, since moving to be with children may impact that relationship very negatively.

### Self Assessment Questions

1) Differentiate between generativity and stagnation.

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2) Discuss four developmental tasks of middle adulthood.

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3) Discuss an individual's relation with siblings and friends.

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4) Discuss psychosocial changes in mid adulthood.

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5) What is the importance of Levinson's seasons of life?

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6) Put forward the developmental tasks of mid adulthood.

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7) What is meant by modifying life structure?

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## 3.6 PSYCHOSOCIAL CHANGES DURING OLD AGE

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.

### 3.6.1 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 optimist 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 issues 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.

### 3.6.2 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.

### 3.6.3 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.

#### Self Assessment Questions

- 1) Differentiate between ego integrity versus despair.

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- 2) Discuss reminiscence and life review.

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3) Explain how is spirituality and religion important during the late adulthood.

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### 3.7 LET US SUM UP

During the period of young adulthood one sees himself or herself as an autonomous and independent adult. In this period the individual becomes financially less dependent on the parental family. A major developmental task during this period is the choice of career. Young men and women tend to settle down in a career of their choice. In addition a young adult tries to settle down and start the family life. They are also concerned about various social issues and forming close relationships with one's professional peers and members of community. The duties of a person demand two fold responsibilities which are towards oneself as well as the society.

Perhaps middle adulthood is best known for its infamous midlife crisis: a time of reevaluation that leads to questioning long-held beliefs and values. The midlife crisis may also result in a person divorcing his or her spouse, changing jobs, or moving from the city to the suburbs. Typically beginning in the early- or mid-40s, the crisis often occurs in response to a sense of mortality, as middle adults realise that their youth is limited and that they have not accomplished all of their desired goals in life. Of course, not everyone experiences stress or upset during middle age; instead they may simply undergo a midlife transition, or change, rather than the emotional upheaval of a midlife crisis. Other middle adults prefer to reframe their experience by thinking of themselves as being in the prime of their lives rather than in their declining years.

During the male midlife crisis, men may try to reassert their masculinity by engaging in more youthful male behaviours, such as dressing in trendy clothes, taking up activities like scuba diving, motorcycling, or skydiving.

During the female midlife crisis, women may try to reassert their femininity by dressing in youthful styles, having cosmetic surgery, or becoming more socially active. Some middle adult women try to look as young as their young adult children by dying their hair and wearing more youthful clothing. Such actions may be a response to feelings of isolation, loneliness, inferiority, uselessness, nonassertion, or unattractiveness.

The field of life-span development seems to be moving away from a normative-crisis model to a timing-of-events model to explain such events as the midlife transition and the midlife crisis. The former model describes psychosocial tasks as occurring in a definite age-related sequence, while the latter describes tasks as occurring in response to particular life events and their timing. In other words, whereas the normative-crisis model defines the midlife transition as occurring exactly between ages 40 and 45, the timing-of-events model defines it as occurring when the person begins the process of questioning life desires, values, goals, and accomplishments.

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.

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### **3.8 UNIT END QUESTIONS**

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- 1) Discuss stage versus life events approach.
- 2) What are the differences in individual personality traits?
- 3) Discuss the dynamics of relationship in middle age.
- 4) Discuss the importance and characteristics of grand parenthood.
- 5) What are the psychosocial changes that occur in old age?
- 6) What importance has retirement in late adulthood?

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### **3.9 SUGGESTED READINGS**

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Agich, G (2009). *Dependence and Autonomy in Old Age*. Cambridge university Press, Cleveland

Sigelman, Carol K. & Rider Elizabeth A. (2009). *Lifespan Human Development*. Wardworth, NY

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## UNIT 4 CHALLENGES AND ISSUES IN AGEING PROCESS

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### Structure

- 4.0 Introduction
- 4.1 Objectives
- 4.2 Ageing Process
  - 4.2.1 Ageing Process in Women
  - 4.2.2 Ageing Process in Men
- 4.3 Ageing Issues and Challenges in Early Adulthood
- 4.4 Ageing Issues and Challenges in Middle Adulthood
- 4.5 Ageing Issues and Challenges in Late Adulthood
- 4.6 Let Us Sum Up
- 4.7 Unit End Questions
- 4.8 Suggested Readings
- 4.9 Answer to the Self Check Questions

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### 4.0 INTRODUCTION

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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.

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### 4.1 OBJECTIVES

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After going through this unit, you will be able to:

- define and describe the ageing process in men and women;
- explain the ageing issues and challenges in early adulthood;
- analyse the ageing issues and challenges in middle adulthood; and
- explain the ageing issues and challenges in late adulthood.

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### 4.2 AGEING PROCESS

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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 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.

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.

### 4.2.1 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 anti bodies, 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.

### **4.2.2 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.

**Self Assessment Questions**

1) Discuss the ageing process in females.

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2) What are the important factors associated with ageing in males?

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3) What are the typical health issues associated with ageing ?

### 4.3 AGEING ISSUES AND CHALLENGES IN EARLY ADULTHOOD

Early adulthood is the stage of our life between the ages of about 20-40 years old, who are typically vibrant, active and healthy, and are focused on friendship, romance, child bearing and careers. It is the first stage of adulthood in which the body physically changes and is one of the hardest times in our lives after teenage years.

Neither intimacy nor individual development can exist alone. The birth of a child initiates a human being into a life-long process of mutual adaptation between the child, his or her intimate relationship partners and the broader social environment. Intimate interactions and relationships affect adaptations to the changing needs and stresses that evolve with each stage of development throughout one's lifetime. Intimate interactions from early life serve as the basis upon which relationships later in life are formed. Environmental contingencies to which individuals must adapt are rooted in these relationships. In an attempt to adapt to other people's styles of relating, one must adjust his or her own behaviours.

#### *Maturity*

Children entering adolescence must begin to adapt to the adult world and its institutions while coming to terms with emerging parts of themselves. They discover themselves as having new emotional and sexual needs. As they make these discoveries, adolescents begin to realise the limitations of their parents. Taking responsibility for aspects of their own character requires distancing from authoritative.

#### *Friendships*

Over the course of social development, the role of friends and parents changes significantly. As an adolescent undergoes physical and emotional changes, he or she seeks out relationships that enhance efforts to adapt to new needs and stresses. Adolescents seek to share their thoughts and feelings with those who are experiencing similar changes. Intimate interactions increase between friends during this stage in life because they provide teens with opportunities for self-clarification. Through the formation of co-constructive dialogues between friends, teens can participate together in exploring and constructing selves.

#### *Multiple Selves*

During late adolescence, one must first confront the problem of multiple selves. For the first time, an adolescent realises that his or her personality changes from one situation to

the next. This is the stage of life during which one looks to craft a narrative of the self that provides a sense of sameness and continuity. The importance of intimate friendship and romance formed during early adulthood stems from the valuable and adaptive contribution dialogues made with friends during adolescence. Personality differences can be identified by capacities to form intimate relationships characterised by commitment, depth, and partner individuation based on interactions of early life.

### Self Assessment Questions

1) Fill in the blanks:

- i) Human ageing process involves \_\_\_\_\_ changes on physical, psychological, cultural and social levels.
- ii) Eating fresh vegetables and fruits rich in \_\_\_\_\_ nutrients helps reduce the risk factors for cancer.
- iii) High levels of \_\_\_\_\_ have been associated with prostate cancer.
- iv) Neither \_\_\_\_\_ nor individual development can exist alone.
- v) Joint and bone health issues can lead to \_\_\_\_\_.

2) Answer the following statements with True or False:

- i) Ageing process continues throughout our life.
- ii) Eating right and exercise can keep the ageing process slow.
- iii) The hormonal changes in the body is not concerned with ageing problems.
- iv) Prostate health is a consideration for women once they reach the age of 40.
- v) The ageing process is a natural one.

3) What are the ageing issues and challenges in early adulthood?

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## 4.4 AGEING ISSUES AND CHALLENGES IN MIDDLE ADULTHOOD

Middle adulthood refers to the people whom 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.

### *Physical Appearance*

The changes in physical appearance are some of the most notable parts for many people as they experience middle adulthood physical development. Hair begins turning gray or white as teeth fade from white to yellow. More wrinkles appear, especially on the face, and skin begins to sag.

### *Hearing and Vision*

The ability to hear high-pitched noises disappears during middle adulthood as most people begin recognising hearing loss around 40. Men experience twice as much hearing loss as women during this life stage. Vision also decreases for both sexes as their ability to focus declines, and they need brighter lights to see.

### *Health*

This stage of development generally refers to the diseases experienced by the individuals and the diseases are few infectious yet more chronic. Heart diseases and cancer are the two most common sicknesses for people in midlife period. The experience of health decline is different for men and women. Men are more prone to heart disease, cancer and stroke especially on the incidence that men had experience or are experiencing divorce. For women, non-fatal illnesses like goiter, gout or arthritis and lung and breast cancer. Though death is fewer for females than in males, diabetic cases are inclined on the female's part more than the males. The gain or lost in this domain generally depends on how people take care of themselves while they are still young and capable to do so.

### *Strength and Coordination*

As adults pass through middle adulthood their strength begins to diminish as some of their muscle is replaced with fat. Flexibility also decreases, and the reaction time of individuals in middle adulthood decreases as well.

### *Sexuality*

The start of middle adulthood often signifies the end of a woman's ability to bear children. They proceed to go through menopause during this middle-age stage in their life. Men still possess the ability to reproduce although their fertility decreases in middle adulthood as they age.

### *Disease*

Diabetes, heart disease and cancer are just a few of the common diseases discovered during middle adulthood. While chances are these diseases have been building up in an individual throughout their life, the discovery and treatment of them often occurs when people are in middle age.

### *Relationships during Middle Adulthood*

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.

By middle age, most of the adults are married. Marital satisfaction is often described in terms of a U-curve: People generally affirm that their marriages are happiest during the early years, but not as happy during the middle years. Marital satisfaction then increases again in the later years, once finances have stabilised and parenting responsibilities have ended.

### *Divorce*

Middle adults are not immune to problems in relationships. The reasons for dissolving a relationship are many and varied, just as relationships themselves differ in their make-up and dynamics. In some cases, the couple cannot handle an extended crisis. In other cases, the spouses change and grow in different directions. In still others, the spouses



are completely incompatible from the very start. However, long-term relationships rarely end because of difficulties with just one of the partners. Both parties are usually responsible for the factors that may lead to a relationship's end, such as conflicts, problems, growing out of love, or empty-nest issues that arise after the last child leaves his or her parent's home.

Love changes over time, and such changes may become evident by middle adulthood. The ideal form of love in adulthood involves three components: passion, intimacy, and commitment—termed consummate love, or complete love. This variety of love is unselfish, devoted, and is most often associated with romantic relationships. Getting started is easy; sticking to it is much harder.

For many middle-aged couples, passion fades as intimacy and commitment build. In other words, many middle adults find themselves in a marriage typified by companionate love, which is both committed and intimate, but not passionate. Yet a relationship that has lost its sexual nature need not remain this way, nor do such changes necessitate the end of a long-term relationship. In fact, many middle adult couples find effective ways of improving their ability to communicate, increasing emotional intimacy, rekindling the fires of passion, and growing together. The understanding that evolves between two people over time can be striking.

### *Relationships that last*

Long-term relationships share several factors, including both partners regarding the relationship as a long-term commitment; both verbally and physically expressing appreciation, admiration, and love; both offering emotional support to each other; and both considering the other as a best friend.

Essential to preserving a quality relationship is the couple's decision to practice effective communication. Communication is the means by which intimacy is established and nurtured within a relationship; it helps partners better relate to and understand each other. Communication helps them feel close, connected, and loved.

### *Friends*

Friends offer support, direction, guidance, and a change of pace from usual routines. During this period, life responsibilities are at an all-time high, so having extra time for socialising is usually rare. For this reason, middle adults may have less friends than their newlywed and retired counterparts. Yet where quantity of friendships may be lacking, quality predominates. Some of the closest ties between friends are formed and nourished during middle adulthood.

### *Children*

As adults wait later to marry and start families, more and more middle adults find themselves rearing small children. Middle adults and their adolescent children are both prone to emotional crises, which may occur at the same time. For adolescents, the crisis involves the search for identity; for middle adults, the search is for generativity. These two crises are not always compatible, as parents try to deal with their own issues as well as those of their adolescents.

Parents respond to their children's adolescence in different ways. Some middle adults attempt to live out their own youthful fantasies—sexual and otherwise—through their children. They may try to make their teenage children into improved versions of themselves. For example, some parents may force their teenagers to take music lessons or make them join a sports team, while other parents may insist that their children attend a certain college or enter the family business.

Witnessing their children on the verge of becoming adults can also trigger a midlife crisis for some middle adults. The adolescent journey into young adulthood is a reminder to middle-aged parents of their own ageing processes and inescapable settling into middle and later adulthood.

Middle-aged parents typically maintain close relationships with their grown up children who have left home. Many parents report feeling as if they continue to give more than receive from relationships with their children, including helping with their finances or watching their pets when they are out of town. Still, most middle adults and their grown children tend to value their time together, even as their respective roles continue to change.

### *Parents*

Most middle adults characterise the relationship with their parents as affectionate. Indeed, a strong bond is often present between related middle and older adults. Although the majority of middle adults do not live with their parents, contacts are usually frequent and positive. And perhaps for the first time, middle adults are able to see their parents as the fallible human beings that they are.

One issue facing middle adults is that of caring for their ageing parents. In some cases, adults, who expected to spend their middle-age years traveling and enjoying their own children and grandchildren, instead find themselves taking care of their ailing parents. Some parents are completely independent of their adult children's support, while others are partially independent of their children; and still others are completely dependent.

Children of dependent parents may assist them financially (paying their bills), physically (bringing them into their homes and caring for them), and emotionally (as a source of human contact as the parents' social circle diminishes). Daughters and daughters-in-law are the most common caretakers of ageing parents and in-laws.

Even though the death of a parent is never welcome, some long-term adult caretakers express ambivalent feelings about the event. The grown children of parents dying of a lingering illness, for example, usually do not want to see their loved ones suffer—even if alleviation means death. These children may find themselves hoping simultaneously for a cure and for a peaceful release from the pain that their parent is experiencing.

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## **4.5 AGEING ISSUES AND CHALLENGES IN LATE ADULTHOOD**

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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.

#### **Self Assessment Questions**

3) Fill in the blanks:

- i) Diabetes, \_\_\_\_\_ and cancer are common diseases discovered during middle adulthood.
- ii) \_\_\_\_\_ is often described in terms of a U-curve.
- iii) Passion fades as intimacy and \_\_\_\_\_ build.
- iv) Older skin retains \_\_\_\_\_ fat.
- v) In retirement, depression and \_\_\_\_\_ rates rise.

4) Answer the following statements with True or False:

- i) Men experience twice as much hearing loss as women during middle life stage.
- ii) Women are more prone to heart disease, cancer and stroke.

- iii) Long term relationship requires long term commitment.
- iv) Daughters and daughters-in-law are the most common caretakers of ageing parents and in-laws.
- v) Older people produce more of sweat and oil.

## 4.6 LET US SUM UP

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.

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.

Menopause is the word that immediately comes to the 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 invite many ageing problems. The body starts losing out on bone mass and muscle strength.

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.

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.

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).

Early adulthood is the stage of our life between the ages of about 20-40 years old, who are typically vibrant, active and healthy, and are focused on friendship, romance, child bearing and careers. Intimate interactions and relationships affect adaptations to the changing needs and stresses that evolve with each stage of development throughout one's lifetime. Intimate interactions from early life serve as the basis upon which relationships later in life are formed.

By middle age, most of the adults are married. Marital satisfaction is often described in terms of a U-curve: People generally affirm that their marriages are happiest during the early years, but not as happy during the middle years. Marital satisfaction then increases again in the later years, once finances have stabilised and parenting responsibilities have ended.



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.

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## 4.7 UNIT END QUESTIONS

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- 1) Discuss the ageing process in humans.
- 2) Ageing process in male and female – discuss the differences.
- 3) What are the ageing issues and challenges in early adulthood?
- 4) Discuss the various types of illness one can suffer in middle adulthood.
- 5) What are the issues and challenges in late adulthood?

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## 4.8 SUGGESTED READINGS

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Stuart-Hamilton, Ian (2006). *The Psychology of Ageing: An Introduction*. London: Jessica Kingsley Publishers

Diane F. Gilmer; Aldwin, Carolyn M. (2003). *Health, Illness, and Pptimal Ageing: Biological and Psychosocial Perspectives*. Thousand Oaks: Sage Publications

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## 4.9 ANSWER TO THE SELF ASSESSMENT QUESTIONS

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- 1)
  - i) Multidimensional
  - ii) Antioxidants
  - iii) Dihydrotestosterone
  - iv) Intimacy
  - v) Osteoarthritis
- 2)
  - i) True
  - ii) True
  - iii) False
  - iv) False
  - v) True
- 3)
  - i) Heart disease
  - ii) Marital satisfaction
  - iii) Commitment
  - iv) Less
  - v) Suicide
- 4)
  - i) True
  - ii) False
  - iii) True
  - iv) True
  - v) False