

## POSITIVE AGEING: HANDLING MISCONCEPTIONS ABOUT OLD-AGE

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### **Abstract**

*Often times, ageing is viewed as a problem, disease or affliction; a period of rejection and loneliness. As such, huge amounts of money are spent to wall off ageing. This negative view of ageing has been fuelled by a number of misconceptions about old age. This paper examines these misconceptions and how to handle them with a view to ageing positively or gracefully. Attempts are made to separate facts from fiction. The paper suggests an attitude shift from the traditional concept of ageing, towards conscious, robust, successful or positive ageing; whereby ageing is viewed as a fruitful, active, productive, natural part of life cycle.*

### **Introduction**

Ageing is a complex concept. This is due to the dynamic nature of factors (physiological, cultural, social, economic, political and psychological) that affect the ageing process in man or woman. These factors also vary from one person to another.

In African societies, the desire for longevity is apparent; as evidenced by prayers for long lives, offered for babies at naming ceremonies, couples at wedding ceremonies, celebrants at birthday parties, house-warming ceremonies etc. Ironically, many detest the visible ageing signs that begin to manifest as they grow older. For instance a 60 year old woman may be preoccupied with maintaining a youthful appearance of a 30 year old woman. Serious attempts are made to mask the visible signs of ageing or to deny ageing outrightly. In line with this, Daniel (2004) posited that the signs of denial and anxiety over ageing are visible in every aspect of our lives. Attempts made at combating or postponing the ageing effects include the use of expensive cream to maintain good skin or colour the hair as well as expensive tummy (stomach) surgeries to keep in shape or plastic surgeries to remove wrinkles, change facial appearance or some body parts. Also, some women deny growing older by celebrating 21<sup>st</sup> birthday anniversaries several times; while some men prefer to claim younger ages at work in order to postpone their retirement. Growing older is conceived as a crime.

In this paper therefore, an attempt is made to examine anxieties/fears/misconceptions about old age and how to handle these misconceptions in order to pave way for positive ageing. It is aimed at separating facts from fiction.

## **Phases of Development in Adulthood**

Determining the **on-set** of ageing is a difficult task. Ageing is a natural process that cuts across adulthood, though the ageing effects seem to be more prominent at the latter years of an individual's life. For the purpose of this paper, the seven (7) stages of adult development, posited by Bromley (1974) and Alao (1983) will be considered here:

### ***Phase one: Early Adulthood (20-25 Years)***

At this stage, the individual begins to assume the position of an adult. He acquires social roles like the right to vote, work, marry, raise a family or develop himself in his chosen career or business ventures.

### ***Phase two: Middle Adulthood (25-40 years)***

This is a period when the individual consolidates his occupational, family and public roles. He attains the peak in his intellectual output. Slight deterioration in biological processes is noticed.

### ***Phase three: Late Adulthood (40-60 years)***

It is also called "middle-age" period. Actually, societal expectation at this period is high. The middle-aged man is expected to have firmly established himself in terms of his marital, occupational, economic etc. responsibilities since it is also said that "a fool at forty, is a fool forever". Also, a significant reduction in biological capacities is noticed. Menopause sets in. A decline in sexual function may be experienced.

### ***Phase four: Pre-Retirement (60-65 years)***

Decline in physical and mental capacities become more prominent and steady; such as changes in appearance, stamina, speed, sexual vigour. The individual begins to put together plans for retirement; though sometimes due to human resource problems, he may still occupy key position in his workplace.

### ***Phase five: Retirement (65-70 years)***

The individual retires (disengages from his main occupation). This affects his standard of living, daily routines and social activities. With increasing difficulties in going about his daily activities, he withdraws from some social functions. Where the individual is still strong and agile, he actively participates in carrying out some traditional rituals/rites or acquiring chieftaincy titles.

### ***Phase six: Old-age (70 years and above)***

This is from 70 years to senescence. At this period, incapacitation from frequent old age related illnesses may necessitate withdrawal from social activities. He relates more to his family and friends. The individual may become senile.

**Phase seven: Terminal stage (Tanatology)**

It is the final stage of adulthood. It is the "dying stage". Kidd (1973) opined that physiological functions needed to sustain life finally break down. The end result is death.

From the foregoing, old-age period is classified as 70 years to senescence. However, in recent times, age 65 is identified globally as the borderline between maturity and old-age (Daniel, 2004).

**Misconceptions about Old-age**

There are a number of misconceptions about old age. Some of these misconceptions originate from our observations of some old peoples' negative experiences like stroke, arthritis etc leading to the conclusion that old age should be feared. Sometimes, children are influenced by the fairy tales they hear or watch on television and so develop stereotypes about ageing.

One misconception about old age is the fear of a drastic decline in mental function. According to Daniel (2004), a single myth about aging that most symbolizes our dread, is the assumption that our memory will inevitably decline in old age. The elderly are often perceived as forgetful people who are unable to think for themselves. As such, the ability of the aged to take decisions is sometimes frowned at. The younger relations may force their opinions on them.

However, mental decline in old-age is not as bad as sometimes portrayed. A 15-year longitudinal study of older people in Gothenburg, Sweden showed that cognitive abilities were intact in almost all who had reached age 81, although speed at rote memory was observed to have declined (Daniel, 2004). Old people forget things but forgetfulness is not limited to old age period. A young man that forgets things is excused on the ground that his mind is full of so many things. When the aged forget things, the blame is on his age. Ageing does not mean loss of intelligence (though certain chronic diseases e.g. Alzheimer's disease, may interfere with normal intellectual functioning). In actual fact, the desire to acquire new intelligence may decline in old-age. Ageing hinders the transfer of information from short term memory (STM) to long term memory (LTM). The implication is that for the aged, new information has to be presented slowly and repeatedly. Verbal fluency and naming may also decline in old-age, but many "seniours" or aged people are still as sharp as ever. Performance of physical exercises, engaging in intellectual activities, good nutrition and effective management of stress will help the brain to age well.

Secondly, many people dread old-age because of the belief that it is a problem- a period characterized by loss of health; a dead-end in which the individual becomes inactive (cannot actively participate in social functions). The aged are not in tune with contemporary lifestyles and so should be segregated from the society or abandoned in "old peoples" homes.

This is a misconception in that ageing is not all about illnesses or inaction. There are “individual differences” in ageing. In reality, some seniors may be incapacitated as a result of ill-health, but there are many seniors that are presidents of their nations or hold key positions in the society. Growing older brings psychological changes that may lead to poor health, if not checked. A significant check is to maintain good immune system. Chandra (1992) found that feeding elderly people with nutritional supplements for one year improved their immunity (they had less infections when compared with those not given supplements). Also, maintaining healthy lifestyle; eating vegetables, fruits, vitamins and reducing salt intake can help to prevent or treat some chronic diseases like cancer, hypertension etc (Leis, 1991; Johnson & Kligman, 1992). Moreover, old age should not be seen as a problem but as one of the stages of human development. Old age has its own challenges just like any other stage of development and proper adjustments need to be made at each stage.

Thirdly, there is the misconception that an old man/woman should not work (especially after retirement). He should relax, sleep, eat and do nothing. Often, aged or retired people desire to work but are persuaded not to.

This is a social creation of old-age (not by choice). Loss of job (e.g. via retirement) causes feelings of ineffectiveness, lack of social contacts, isolation, boredom and eventually depression. Seniors should be encouraged to work as long as their minds and bodies permit. Mental health researchers opine that people involved in work even after retirement are “mentally healthier than those in full retirement” (Upadhyay, 2002).

Fourthly, there is the misconception that old-age and depression go hand-in-hand. Many people think depression is not avoidable in old age or that the aged is often depressed.

However, it should be noted that not all people get depressed in old age. Some become depressed in old-age for these reasons:

- **Physiological-** depression may set in as a result of an illness like “stroke” or the side effects of certain drugs used.
- **Psychological-** e.g. as a result of death of a loved one; adjustments to retirement life and relationships with family members.
- **Social-** e.g. as a result of loneliness, financial problems or lack of basic needs like good food, housing etc

The fact is there are many people that are well advanced in years and are enjoying perfect mental health. Feinson (1985) discovered that, generally, psychological distress did not increase with age for those over 65 though an increase in anxiety with age was noticed. If depression occurs in old age, it can be treated, just as it can be treated at any stage of life.

Fifthly, in some African cultures, old people generally are labeled “witches” or people in possession of wicked supernatural powers. Consequently, some people refrain from paying visits to the village to avoid contact with the aged. Stories of wickedness or fairy tales passed on from

generation to generation help to fuel this misconception. The 'unkept' or 'haggard' physical appearances of some old people and some 'weird' behaviours they put up also account for this misconception.

It is inappropriate to assume that all old people are witches. There are many elderly people (especially educated ones) that keep neat appearances and serve as mediators between two people quarrelling in the family. With increased house-help or nanny problems, many elderly parents, especially women, are brought into their married children's homes, to serve as nannies. Such close contacts result in better understanding of the aged. On the other hand, some very young people (children), today, are alleged to be 'witches' too. It is no longer peculiar to old age. But then, witchcraft (if affirmed) could be "treated" by making appropriate referrals.

### Towards Positive Ageing

Misconceptions about old-age portend danger for the aged. His/her attitude is affected or damaged. He/She may begin to feel insignificant, frail, feeble and dependent on others. He/She is robbed of his/her capability to take decisions. It has been found that a very important ingredient for healthy ageing is *attitude*- possessing good, positive attitude towards life (The Psychology of aging, 1998).

Positive ageing is concerned with maintaining positive attitude towards growing older. It is about making the old-age period a positive growth phase of life. The essence of positive ageing is the replacement of traditional notion of old-age as a period of general decline in physical and mental capacities, with a modern notion that sees old-age as a productive, active, healthy and positive period. This is the *new trend* in Psychology of old-age. Ageing is viewed as an opportunity and NOT a problem. Older people should respond actively and NOT passively to ageing. They should engage in activities that help give meaning to life, based on their interests e.g. sports, game hunting and stamp collecting.

The following principles are recommended for ageing positively:

1. Participating in stress-free physical and social activities.
2. Engaging in suitable work or job e.g. contract or part-time work/business.
3. Maintaining healthy eating habits.
4. Observing adequate rest.
5. Reading or studying to remain active intellectually.
6. Observing safety rules in day-to-day activities.
7. Having a positive mind-set (e.g. smile often).

It is hoped that imbibing these principles will help the aged to properly handle misconceptions about old-age and learn to love growing older or ageing positively.

## Conclusion

Misconceptions about old-age make many to dread ageing. Proper ways of handling these misconceptions and positive ageing principles were outlined towards a more rewarding old-age. More importantly, those yet to reach the old-age bracket (baby boomers) could begin to approach old-age with a more relaxed and positive attitude. Old-age then becomes an asset rather than a liability.

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