THE AGING PROCESS *

Comilda S. Weinstock, Ed.D.
Assoc. Research Scientist
N.Y. State Dept. Of Mental Hygiene
Adj. Ass't. Professor
Teachers College, Columbia Univ.

* Paper presented at the Frederic D. Zeman Center for Instruction, The Jewish Home and Hospital for Aged In-Service Education Course for Activity Leaders in Nursing Homes. April 19, 1971.
The aging process defined in a shorthand manner means an irreversible downhill course with the passage of time. With increasing age, one becomes increasingly vulnerable to illness and infirmity, sources of emotional support and gratification dry up, the individual loses his capacity to adapt to his environment, his capacity to overcome the stresses of everyday living. The eventual and inevitable consequence of the aging process is death.

To be a bit more specific let us look at what exactly is going downhill. We know that vision and hearing deteriorate with age. After the age of 40 the individual is prone to accumulate fat. The elderly person fatigues more easily. Chronic arthritis, cardiovascular disease, cancer and diseases of the nervous system become predominant and represent a serious problem of treatment and rehabilitation. In aging, the muscle undergoes alteration, often becoming flabby. Skin wrinkles and dries out. Circulation diminishes, causing poorer response to high or low temperature changes. There is an impairment in old people's ability to adjust to environmental temperatures, demonstrated by heat prostration which happens more frequently among the old than among the young.

As aging progresses, the individual becomes less adept at fine movements. There is a slowness in reaction time - a reduction in agility.

Theories of aging are so numerous as to make it impossible to discuss even a limited portion of them. However a few major ones are important to mention if only to help us in our perspective as practitioners.

The hereditary influence on the aging process has been studied by many investigators. I'm sure you all know about the centenarian being interviewed on the occasion of his 101st birthday and, after he has told the reporters how he owes his long life to sexual abstinence, no drinking and no smoking, there is a loud commotion on the front porch. The centenarian promptly sits up in bed and angrily informs one and all that that's his father rolling home
drunk again. Scientists engaged in the study of genetic determinants of aging would agree that your best guarantee of a long and healthy life is to choose two long lived parents.

Aging has also been defined as a biological process which causes increased susceptibility to disease. There is evidence that the accumulation of harmful products of normal metabolism over time is a cause of aging. There are theories of 'wear and tear'. Each stress to which an individual is subjected takes its toll, and the organism ultimately wears out.

Finally there are those who hold that aging has multiple causes. First, there is the initial genetic variability in the organism. Second there is the destructive effect of the environment. Third is the accumulation of changes or chemical damage these changes incapacitate or kill individual cells and eventually cause a decline in physiological capacity.

How does all of this affect those of us who work with the elderly. Firstly, we must recognize that along with the individual decline that takes place in any one older person, there is a society in which these declining capacities are being viewed and reacted to.

The essential differences between the modern family system and the pre-industrial family have been discussed and pointed out by many social scientists. Functions which were formerly attached to the family are now transferred to institutions external to the family. Tasks formerly carried out at home have been taken over by industry and trade. Since the introduction of compulsory school attendance, education, which was formerly obtained at home is increasingly delegated to public institutions. As the services of social welfare increase, the former benefits of familial solidarity and social security have been taken over by officially organized institutions. Hospitals, old-age home, social welfare and charitable organization care for and treat sick and old
people. Therapeutic measures can be successfully applied only by experts in special institutions. People now expect to take full advantage of these modern facilities. The aged can't expect any more optimal care and treatment at home.

Because of the modern situation, the family is a unit of two generations. Every family member who does not contribute to the existence of the family by outside employment must become an economic burden to the family.

Self-pity and hypochondriacal complaints of the elderly can become difficult to tolerate. The retired and financially dependent parent is felt to be a burdensome responsibility. If the negative aspects of old age play a predominant role, the elderly person will be pushed aside by the younger generation, will become isolated and considered an intolerable responsibility. An old person can thus be institutionalized when he does not need it and then forgotten by the younger generation after a certain length of time.

There is some truth to the observation that elderly persons frequently feel the necessity to be left alone, that they become less social minded and more interested in their own emotional, spiritual and intellectual life and that they frequently consume considerable time in thinking of their bodily ailments. However, they invariably feel ambivalent about their solitude. They realize that many activities of young people are undesirable for them and out of their domain. The majority of elderly citizens have less interest in the parties, dances, sports and nightly amusements of importance for the younger generation. They are aware that they are in need of more sleep, of greater periods of rest and relaxation than younger people. They nonetheless resent being excluded from the younger generations plans and interests on very many occasions to be left more or less completely to their
own devices. Their wish to encounter younger people halfway and to find some common goal and interest has often been rejected. Many old people desperately reach out to meet younger people but without success because of misunderstanding and lack of empathy on both sides.

A factor of very great influence on the emotional and physical processes of aging is our cultural attitude toward the aged individual. Our century is a century of youth. We are all directed toward social and economic goals, are driven by an irresistible force to achieve them. We live in a world of continuous competition and we work compulsively and strenuously to improve our social position and maintain it. We are overburdened with work, leaving little or no time for recreation, for relaxation and sometimes not even for sleep. We lose our connection with the beauty of the natural world and with the rhythm of life. Music, art, literature are a waste of time. We find little relaxation in family life. We sometimes lose the feeling of being human and do things mechanically without interest. Then, as the end of our life comes nearer we are exhausted and have the feeling we really haven't lived at all.

In such a world of tension, compulsion work and competition, elderly persons are considered a burden. They know it, they feel it, they see it and hear it and are unhappy and dejected.

Especially appropriate in this connection is a study on the relationship between social attitude toward aging and the delinquencies of youth. The author, a psychiatrist, points out the connection between our lack of respect toward the elderly person and indeed, our attitudes of rejection, intolerance, impatience, hostility and annoyance with the elderly parents or grandparents and the increase of juvenile delinquency. Children who can't identify with father or grandfather, who consider elderly parents useless and burdensome, who laugh about Senior Citizens, and who grow up without parental support and
without ethical judgements are frequently in a state of rebellion. A culture where life experience and wisdom are held in no esteem, where parents and grandparents are not felt to be examples of goodness and personal worthiness and where authority is rebelled against because it is not considered important must create simultaneously an atmosphere of freedom without limits, of wanting without boundaries, of egocentricity. When the child does not learn to look upon the elderly as an object of respect, then the door is open for rebellion and disobedience. The conclusion is that our own cultural attitude is therefore partially to blame for the increasing delinquency of our children.

Finally, the aging process cannot be viewed without including the feeling of economic insecurity from which so many old folks suffer. Old people have to live protected from the most urgent needs of our daily life. Public welfare helps, but this help is not always given willingly and effectively, often causing emotional blows and loss of self-esteem. Special housing projects, hospitals, rehab and recreation centers are needed with an accent not on welfare but rehabilitation. Most elderly persons can still do useful and meaningful work if they find understanding for their problems. They might work more slowly and finish a task far later than a young person would, but they are often able to work with great exactness. In Switzerland, many watchmakers are older people because of their greater experience and patience. In the U.S. we use their skills as furmakers and tailors. You need no reminders of the great contributions by the elderly in politics, art, philosophy and science. Michelangelo, Churchill, Ghandi, Toscanini, Einstein, Schweitzer and Grandma Moses.

These are people, who in spite of old age, have been able to create things. We need not take a pessimistic attitude in regard to elderly persons. They do not have to regress, show their deterioration, or be considered
useless. They can offer something younger persons do not possess; something that comes only with the process of aging. Wisdom, patience and life experience which should and can be utilized for the benefit of all of us.