

HOME ECONOMICS

GUIDE



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Stress and Physical Condition

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Physical Changes in Aging Part II

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The Social Readjustment Rating Scale*

Reserve capacity or stress is an important concept in the physiology of aging. Many functions are well maintained with increasing age in the unstressed state. Only under stress do the age changes show.

Some changes seen in aging result in decline of homeostatic capabilities or the lack of the body to return to normal after a period of stress or exertion. With aging, it takes more effort for the body to return to normal after a change. Stress, exertion, and change are more intense for older people. For example, old people sometimes die in heat waves because their bodies do not adjust to temperature changes readily.

Change is stressful to the body and makes it more susceptible to disease. A scale has been devised that assigns points to changes. The death of a spouse brings the greatest stress. Divorce is second. The death rate of widows and widowers is 10 times higher during the first year of bereavement than for other people their age. Divorced people have an illness rate 12 times higher than married people in the year following divorce. Several studies show a significant increase in social stress during a 2 year period prior to onset of serious physical illness. When the total stress points in a year is more than 300, according to the scale, most people become seriously depressed or suffer from illness.

Biological changes affect people psychologically. Changes in energy level, ability of the body to recover from stress, and less effective sensory systems affect the ease with which people cope with daily problems. Biological changes associated with normal aging seldom mean people cannot deal with life, but it may require more thought and effort to accomplish at 60 what was done without strain at 30. Good habits that have become a part of life make it possible to continue performing at a higher level. Many people learn to adapt to biological changes by conserving energies and using themselves efficiently. Many watch their health and physical functioning more closely as they get older and seem to know their own body better than the average younger person.

1. Death of spouse	100
2. Divorce	73
3. Marital separation	65
4. Jail term	63
5. Death of close family member	63
6. Personal injury or illness	53
7. Marriage	50
8. Fired from work	47
9. Marital reconciliation	45
10. Retirement	45
11. Change in health of family member	44
12. Pregnancy	40
13. Sex difficulties	39
14. Gain of new family member	39
15. Business readjustment	39
16. Change in financial state	38
17. Death of close friend	37
18. Change to different line of work	36
19. Change in number of arguments with spouse	35
20. Mortgage over \$10,000	31
21. Foreclosure of mortgage or loan	10
22. Change in responsibilities at work	29
23. Son or daughter leaving home	29
24. Trouble with in-laws	29
25. Outstanding personal achievement	28
26. Wife begin or stop work	26
27. Begin or end school	26
28. Change in living conditions	25
29. Revision of personal habits	24
30. Trouble with boss	23
31. Change in work hours or conditions	20
32. Change in residence	20
33. Change in schools	20
34. Change in recreation	19
35. Change in church activities	19
36. Change in social activities	18
37. Mortgage or loan less than \$10,000	17
38. Change in sleeping habits	16
39. Change in number of family get-togethers	15
40. Change in eating habits	15
41. Vacation	13
42. Christmas	12
43. Minor violations of the law	11

The most important part of biological aging is how people feel about themselves and whether they feel they have a part to play in society. The psychology of aging needs more investigation. What happens as people have various capabilities taken from them? Individuals may experience situations where they recognize they cannot do something as well as they used to. They may recognize this but not be able to admit it to themselves. They may use sickness as a defense mechanism when there is no organic problem.

On the other hand, what happens when the elderly are held in high regard as they age? Is it coincidence that in the Soviet Union where there are groups of centenarians, the society honors the aging and holds them in special esteem? Does how people feel about themselves make for longer life?

Issues and Problems

There are several issues related to physical decline of older people. Some problems an individual can solve by their efforts and attitude. Some have no easy solutions. Many problems require change in the efforts and attitudes of society.

What are some of the problems toward which society will need to direct its attention? What are some of the basic rights of older people?

1. In a *youth oriented culture*, many health problems arise from the desire to regain lost youth making the elderly easy prey to medical quacks. How can society help older people accept their bodies as important, but not as the most important part of themselves? How can people begin to place more value on the psychological and intellectual growth throughout the life span? What attitude changes must be brought about first? How will this affect the mass media and advertising? What other health needs exist?

2. *Lack of Esteem*. Aging individuals traditionally have been seen as surplus commodities to be "put on the shelf". Role expectations and norms (things you are or are not supposed to do because you belong to a certain age group, etc.) define and confine people, keeping them from growing. There are misconceptions about what older people are able to do, about the significance of the contributions they can make. Negative attitudes toward the old are damaging to the aging person's feelings about himself and his physical state. Such attitudes prevent opportunities for meaningful contributions of the elderly. How can we become more aware of the strengths and wisdom of the older adult? How can we view growing older as a necessary component of the total process of growth and development? How can we restore the dignity to being old, so people may live all years as fully as possible? What psychological support can be given to increase the sense of physical and psychological well-being of the older person?

3. *Nutrition* problems in persons over 65 are common. Their diets are inadequate in delaying the onset of

some degenerative changes associated with aging. What can be done to correct this?

4. There are physical needs related to *housing*. With aging there is increased need for comfort and convenience. There is less physical dexterity to maintain what they already possess. Although many aged people have chronic conditions, the disability usually is not to the degree that institutionalization is necessary. Only about 5 percent of the aging actually reside in nursing homes or mental hospitals.

Elderly people function best in their usual place of living. They have a greater sense of well-being there. Aged people usually resist being moved out of familiar surroundings. More and more services are needed for enabling them to remain in their own environment. What kind of services can be made available for such older people? How can the high value the aged place on remaining independent be supported? Research shows older people with children keep in physical proximity with at least one child and see the child often whether living alone or not. Most older people prefer to live apart from their children but close enough to see them often.

5. *Living on limited income* affects state of health and attitude toward life. Half of the heads of families over 65 have poverty level incomes of less than \$3,000 a year. Coping with rapidly escalated living costs by most aging people living on fixed incomes is a problem needing attention. Much research indicates the best prevention against a miserable old age is to be able to purchase and practice preventative health care and enjoy a less stressful environment, including freedom from economic pressures. What can be done to assure that the older American has the basic human needs met?

6. *Education*. An increasing number of people are being motivated toward lifelong learning for personal and career development. One great need is education for leisure. Researchers have looked at education and socioeconomic status in relation to health and found people with higher educational-socio-economic status have better health. They probably have more options available to them throughout their life span, including better health care. What are the implications for society? Where and how will the older American find knowledge? How can his wisdom be passed on to other generations?

7. *Transportation* has become recognized as a major problem for those whose physical powers are declining. Some efforts have been made in this direction. What else can be done?

8. *Facing death* is a problem in society about which there has been strange silence. Fear of death is present with many older people. How can there be more widespread understanding of the last phase of life, the shock of bereavement, and the stages of facing death and dying? What can be done to help in personal and interpersonal adjustments?

9. *Continuity* of the aging and younger generation is a problem about which the elderly are disturbed. Alienation from the life around them, especially with the young, might be alleviated by proper attention and would benefit both young and old. How may this be done? What changes will be recognized for maximizing the contribution of both younger and older to the lives of the other for mutual benefits? What are those benefits? How can young people learn about aging and prepare for it in their own lives?

The number of older people in the U.S. is steadily increasing. Bernice Neugarten suggests that because of a reduction in mortality rate, men who reach 65 in 1970 could, on the average, expect to live to 78; but men who reach age 65 in the year 2000 can expect to live to 83 (the parallel figures for women are 81.5 and 86). What philosophy of life will make for successful aging during those years? Such a philosophy can recognize the elements of the tragic inherent in life, yet offer solace for each stage of the life cycle. The philosophy would not seek to keep

one young and ignore the richness and contentment that comes with age. The philosophy would accept the aged as equal human beings in a society where it is morally right and necessary that people at all stages of life have a fair deal, including physical and psychological health and support.

How differently would people age under conditions of affluence, good health, good housing, sociability, and high esteem? There are now over 7,000 centenarians in the U.S. With increased longevity, there will be a need for yesterday's values to change. For example, the values of achievement and success, work, novelty, speed, and youthful beauty are hard on older people and frequently lead to alienation and waste of human potential. Values focusing on meeting basic needs can change the future for older people.

Some traits improve with age. There are positive characteristics of every stage of life and society can improve the later years by working together in a concentrated effort.

**The Social Readjustment Rating Scale was devised by Thomas Holmes, professor of psychiatry, University of Washington.*

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