



Ageing

Why should one focus on ageing? The first reason is to understand the nature of life span human development in the complex society we live in. Many have negative ideas and perceptions regarding ageing. Some people may feel that it is a dull and unexciting time of life, should you compare it with childhood or adolescence. Others might see ageing as part of death and dying.

The second reason why it is so important to focus on ageing is due to more people living much longer than before. This is creating a variety of new opportunities as well as challenges within our society.

More people also plan to become older themselves and might have older friends and relatives. By focusing on ageing it can help one understand and plan for one's own development and the ageing of others.

Developmental Periods of Ageing

As we develop and grow, we move through different life span development phases. Below is an outline of the different phases as well as some of the task that one is faced with to be able to move on to the next phase.

Early Adult Transition

The early adult transition phase takes place between the ages of 17-22. The main task of this phase is leaving the pre-adult world. This means separating from one's parents and becoming more independent, financially as well as psychologically.

This phase also include giving up certain pre-adult aspects of the self, such as important relationships with adolescent groups, teachers and a range of significant others. Other relationships are modified because the young person is becoming a social adult and the person's self perceptions are also changing. All of these changes can bring a sense of loss and some feelings of fear and insecurity about the future.

Entering the Adult World

This stage last from about age 22 to 28. This is a relatively tranquil period. During this time the person tests the life structure he or she has formed during the early adult transition. It is a period of exploration, of making tentative commitments that can be changed. It is a time of adventure and wonder. However, there is also a need to make choices - establishing an occupation or marriage, and to define goals.

Age 30 Transition

During this period the person reworks part of the life structure that was tentatively constructed during the period of entering the adult world and forms a second structure that forms the basis of the next period.

The essence of this period is the growing sense that change must be made soon: otherwise one will be locked into and out of commitments.

Settling Down

The settling down period from age 33 to 40 is a calmer period than the transitional period of the late twenties and early thirties. This tends to be a period of getting serious – a period in which to decide what is really important in one's life. It is the period of growing beyond the mentor relationship and becoming a full adult instead of an apprentice.

Midlife Transition

The midlife transition begins around age 40 and serves as a link between early and middle adulthood. It has three major tasks:

- o Review and reappraise the early adult era.
- o Modify the unsatisfying aspects of the previous life structure and begin testing elements of the new structure.
- o Resolve major psychological issues introduced by entering the final half of life.

Retirement: A Major Milestone

Retirement is a major turning point in adult development since it is the social milestone marking the shift from middle years to the later years of life. Retirement usually marks the end of full-time work and the beginning of a period of relative leisure. Retirement age is usually placed between the ages of 60-65. However, many different factors are affecting this decision today. People are living longer than before and therefore need to plan financially to be able to support themselves for a longer period of time – this will include planning regarding investments, pension funds etc. as well as the payout dates of these investments.

Another concern, specifically with the HIV/AIDS pandemic, is that the number of people reaching the adulthood phase is decreasing with the older generation having to take care of young children. This in itself plays an important role when making a decision regarding retirement age as many people have to go on working long past their retirement age and they are unable to move on to a period of relative leisure.

Ageing in a South African Context

South Africa is facing an overall ageing of its population, both in terms of the increasing number of older persons (60 years or older) and in terms of making up an increasing proportion of the population as a whole. For the next two decades, the older population is expected to keep on growing more rapidly than other age groups, requiring far-reaching social and economic planning and adjustment.

As older persons have particular individual needs and specific collective requirements from society, the increased numbers and proportions of older persons call for increased

attention to the country's older persons and an increased response towards changing the age structure of the population.

Numbers and Proportions of Older Persons in South Africa

South Africa has one of the most rapidly ageing populations in Africa, and despite the demographic impact of the Aids epidemic, the population is projected to continue ageing over the next two decades.

The country accommodated 3.28 million older persons (60 years and older) during the 2001 population census, accounting then for 7.3% of the total population. These figures make the South African population one of the demographically oldest populations on the continent. South Africa displays similar levels of ageing as those in countries such as Brazil, India, Mexico and Samoa.

It is projected that by 2025, the proportion of older South Africans will increase to 10.5% and the number of older people to 5.23 million. The growth in numbers is expected to occur in each five-year age group above 60, with substantial growth particularly in the number of older women.

These rapidly increasing numbers and proportions of older persons have great implications for the planning of social and health services in South Africa.

Physical and Psychological Changes with Ageing

Some of the most obvious changes with ageing are physical characteristics such as greying or loss of hair, wrinkling of the skin, decrease in height and loss of teeth. Other characteristics also include the decrease or even loss of hearing and sight. These changes can have major effects on the concept of the self and others.

Since these changes are typically associated with aging, they tend to be seen as negative changes in our society. We therefore need to be sensitive to ageism when we focus on these physical changes.

Physical Characteristics

The skeleton is fully formed by the early twenties and there is no change in individual bones after that time, yet there might be slight loss of height in old age because of changes in the discs between the spinal vertebrae caused by changes in collagen over age. The loss of height may also be exaggerated by stooping as a result of muscular weakness.

One of the most apparent changes in old age is the increased paleness, change in texture, loss of elasticity, dryness, and appearance of spots and pigmentation in the skin. The effect of exposure to sunshine appears to be responsible for many of these changes in the skin.

Loss of teeth is a frequent marker of entry into old age. Even though advances in dentistry have prevented much tooth decay and premature loss of teeth in recent years, these

advances do not necessarily reduce the loss of teeth form the other major adult dental problem, periodontal disease of the gum and supporting tissue.

Other changes associated with ageing include the greying and thinning of hair and the changes in the voice, which is usually less powerful due to gradual bodily changes that may limit the capacity and control of expelled air.

Sleep

Changes with sleep patterns have been found with age. Spontaneous interruption of sleep increases with age and the amount of time spent awake in bed increases after the fourth decade. The aged will often compensate for this by spending more time in bed. Although the proportion of REM (Rapid Eye Movement) sleep remains constant until extreme old age, the NREM (Non-REM stage 2 and slow-wave stages 3 and 4) decrease in the elderly. Many elderly persons are therefore troubled by sleep and may seek medical help to assist them to fall asleep.

Sense Organs

Older persons are more likely than younger persons to show decrements in at least four of the five senses as well as the sense of balance. These changes are partly due to the result of higher thresholds of stimulation that are required for perception, suggesting that the sense receptors become less efficient with age. This means that the aged require higher levels of stimulation in vision, audition, taste and smell for the sense receptors to perform as well as a young person's senses. These decrements, especially in vision and hearing, are important to note since they not only influence the individual's ability to function in the physical environment but also can create a kind of sensory deprivation and social isolation that might have important psychological and social effects.

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