

Why Is Old Age So Difficult?

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INTRODUCTION

Old age is a condition in life; it is not tied to a specific age. In the modern context, a few of us find old age in our mid 50s, while it does not catch up with a privileged minority until we are in our mid 80s. For most, at least the initial signs arise between our mid-60s and our mid 70s.

WHAT IS DIFFERENT ABOUT THE OLD AGE STAGE IN LIFE?

All life stages before Old Age involve ups and downs in the many areas of our lives. In these life stages, we expect that we can recover from the downs and that the “ups” can and will be reclaimed and exceeded as the norm.

By contrast, in Old Age, we encounter progressive physical, mental, emotional and social losses with at best partial or temporary recovery.

LOSS IS THE DOMINANT THEME OF OLD AGE

Our losses can be sudden and dramatic or gradual and persistent; but in both cases, our view of the future does not include the expectation that we will recover to our previous capability norms. Instead, the prognosis is that the future will bring further degradation. Individually these losses are troubling, but because they are frequently occurring simultaneously in many aspects of our lives, the collective effect is very dejecting. In this context, it is nearly impossible to escape the fact that our death is the looming end point.

AREAS OF LOSS

Physical Losses

In spite of our commitment to exercise and walking, our stamina wanes and we fatigue more easily in Old Age. Periodic balance and light headedness problems often occur. Falling becomes an ever greater concern. Our knees, hips, backs and shoulders complain more to the point of replacement and arthroscopic “clean out” surgery, but positive results are predominately temporary. As our movements and activities become more and more limited, we shrink in height, bend over, and use canes and walkers. We nap more and more until our sleeping schedule begins to resemble that of a young child. Gradually our world shrinks until it is difficult to leave our homes. Finally we find ourselves taking various medications to relieve the pain of simply making it to the bathroom and back to our beds. In the end, we are bed ridden.

Progressive loss of physical vitality is common in Old Age.

Space, Territory and Possession Losses

As our physical activity level diminishes, our spacial and territorial world shrinks. We make our way from frequent world travelers to occasional regional visitors to local appointment commuters to assisted transport seniors. We move to smaller and smaller residences, and as we do so, we shed more and more of the things associated with our identity. Finally, our wallet/purse and our bed clothes define us in a semi-private room in a nursing home.

Progressive loss of space and possessions is common in Old Age.

Sensory Losses

The acuity of our various senses – especially sight and hearing – diminish. Far sightedness, cataracts, glaucoma restrict our activities dependent on good vision while our hearing degrades in spite of various aids, finally rendering basic speech communication a struggle.

Progressive loss of sensory capability is common in Old Age.

Mental Losses

Reflection at Different Scales

In youth and adulthood, we are so busy with the duties and efforts to pursue our goals in life that there is little time for reflection. As the extent of our involvement in our world diminishes in Old Age, we typically find ourselves with a lot of “spare” time, and spare time invites reflection. In this context, we have plenty of opportunity to assess our personal past and to consider our future. Our reflections can also consider the past and present conditions of our communities and societies as well as the global human species. Reflection at these different levels can be gratifying or concerning but with realistic reflection regarding our personal future in Old Age likely to be quite disconcerting. If we regard the state of our families and surrounding communities and societies as positive, this can help to offset our misgivings at the personal level. On the other hand, to the degree that we see the condition of these “others” as problematic, this situation can easily compound our personal apprehensions. And presently, the state of humanity socially and ecologically is far from encouraging at nearly all scales.

Personal Level Issues

Occasionally forgetting names and words in Old Age can be annoying, but when these events are known to be precursors for descent into various degrees of dementia, it is concerning. And most of us elders 1) are acquainted with friends or neighbors who are experiencing this problem and 2) have family histories that include relatives who have suffered significant mental decline in Old Age. Besides potentially failing memory and intellect, we are aware that our

personality can change radically in Old Age from being pervasively amicable to being seriously belligerent and having to be restrained and/or continuously sedated. Such a totally unpredictable, potential prospect is truly horrifying.

Progressive loss to varying degrees of mental functions is common in Old Age, and the greater opportunity for reflection in Old Age can magnify this issue at both the personal and societal levels.

Social Losses

In Old Age, our social domain unfortunately shrinks along with the other areas of our lives. We are born alone and wake up with a rap on our butt. We die alone exhaling our last breath. The problem is that all the time in between we invest our entire being in the value of relationships with others. Then in Old Age, we experience the progressive disconnect of interaction with more and more of those others – first substituting phone calls, then emails, and finally a birthday or seasonal greeting. Typically our social contacts begin to shrink with retirement and continue to recede slowly with progressive physical and territorial limitations. Relatively early in our adult life, high mobility and the pursuit of individual opportunities severely limit most of our extended family contacts. These same forces – along with a high divorce rate – have distributed our children and grandchildren far and wide geographically. The result is that for a great many of us, we see our adult children and grandchildren only on occasional visits. So, most of us can't count on our children for our immediate needs as we work our way through Old Age, and our friends – mostly of our same vintage – may be willing but are not really able to assist – except in the very short term. Often relatively isolated, older couples tend to depend heavily on one another, and the loss of one can be devastating for the other.

Under these overall social circumstances in Old Age, we see our social relations both dwindle and leave us increasingly isolated and alone until all that is left is a bed either in a semi-private room in a nursing home or in an ICU unit. Apart from hired assistants, periodic visits – mostly from our immediate family members – are the extent of our contact with our prior, extensive social world. It is as if in old age, we are given a return ticket to the totally enclosed womb that birthed us. If we are very lucky, a devoted spouse is there at our death replacing our mother at our birth. But, unfortunately, it is the case that the great majority of us die alone or among strangers.

Multiple and progressive social losses are common in Old Age. Of course very few of us who make our way through Old Age will suffer all of the losses identified above. But those of us who endure are likely to encounter many of these losses before one of our major terminal diseases – cardiovascular disease or cancer – eventually causes our deaths.

OPTIONS FOR ADDRESSING THE OLD AGE CHALLENGE

- 1) The Protagonists: Fight like hell against every downgrade right to the end.
- 2) The Pragmatists: Accept the inevitable while you
 - a. Make reasonable efforts to retard the descent
 - b. Pursue whatever functions and positive opportunities remain.
- 3) The Deniers: Adopt one or more of the several available forms of denial:
 - a. Dive into keeping yourself so busy doing “something” that you can ignore many of the losses as they collect,
 - b. Promote your prior fame and/or current fortune to support your image of prior vitality/importance in the face of your degrading condition,
 - c. Nip – Tuck – Botox your exterior to maintain a youthful appearance so others can continue to accept you as “The Way You Were,”
 - d. Consume every drug and supplement that claims to support retaining your current state or returning you to earlier stage physical and mental capabilities,
 - e. Commit to one of the many religious belief systems, and based on faith alone view death not as the end condition in life but as either a new beginning [reincarnation] or a door to an everlasting life in an ideal world of the soul.
 - f. Adopt the spiritual perspective of Universal Oneness which denies that separation among “things” exists and renders the experience of loss itself as illusory. The problem: Where does Universal Oneness come from?!

We humans are really good at denial and avoidance because often in life we must plow our way through threatening or difficult circumstances in order to survive or succeed. But we also engage this denial strategy when we encounter matters we just don't want to deal with – like our decline in Old Age to eventual death. Those around us are constantly offering: “Cheer up,” “Look on the Good side,” “Appreciate what you Have,” “Find something Positive to do,” “Get over it,” “Move on.” As if, somehow, if we alter our perspective, our reality changes.

CONCLUSION

In Old Age most of us who make it that far will probably adopt the Pragmatist Position - #2 and sustain it with the input of various denial options – as needed. But, whatever route we take to deal with the challenge of Old Age, realistically there is no truly satisfactory resolution for the underlying problem of multiple sources of escalating loss that collectively leave us more and more isolated and alone at exactly the time that our most significant encounter with uncertainty – death – is moving ever closer.

This is Why Old Age is So Difficult