PSYCHOLOGICAL PROBLEMS AMONG RETIRED PEOPLE

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ABSTRACT

Many people experience loneliness and psychological problems in old age, either as a result of living alone or due to lack of close family ties and reduced connections with their culture of origin, which results in an inability to actively participate in the community activities. It has been documented that elderly are more prone to psychological problems and depression is the commonest geriatric psychiatric disorders. In fact the elderly in India face a multitude of psychological, social, and physical health problems. Although work practices are becoming increasingly diverse and flexible, with far fewer people staying in a single job for thirty or forty years, still there are many men retiring today who have been working in one role for many years. For these men, who have not experienced much variation in their daily routine for a long time, such a major change of lifestyle is often very stressful. Although they are more likely to own their homes, those dwellings are more likely to be substandard. They are more likely to be in poorer health than their urban counterparts. Yet, their health and long-term care needs are less likely to be met owing to problems in the availability of health and social services and the obstacles to delivering services in rural areas, including low population densities, limited transportation, and longer travel distances. No one can avoid and escape aging, but most individuals can opt to age productively. Retirement plans and policies should be enabling, allowing executives to address the new adjustments they need to adopt when counting down to retirement.

Key Words: loneliness and psychological problems in old age, social, and physical health problems.

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INTRODUCTION

Aging is a series of processes that begin with life and continue throughout the life cycle. It represents the closing period in the lifespan, a time when the individual looks back on life, lives on past accomplishments and begins to finish off his life course. Adjusting to the changes that accompany old age requires that an individual is flexible and develops new coping skills to adapt to the changes that are common to this time in their lives. The elderly population is large in general and growing due to advancement of health care education. These people are faced with numerous physical, psychological and social role changes that challenge their sense of self and capacity to live happily. Many people experience loneliness and psychological problems in old age, either as a result of living alone or due to lack of close family ties and reduced connections with their culture of origin, which results in an inability to actively participate in the community activities. With advancing age, it is inevitable that people lose connection with their friendship networks and that they find it more difficult to initiate new friendships and to belong to new networks.

Retirement can and should be an exciting time. For perhaps the first time, people have the leisure and freedom to pursue travel or other interests freely, to slow down and ‘smell the roses.’ However, for many men, retirement can be challenging. It is not just adjusting to the loss of a stable work routine and its associated sense of purpose that can be hard. Retirement brings new relationship issues, and for men who do not find new meaningful activities to replace work, there is the risk of boredom and a sense of purposelessness that can lead to psychological problems and other health problems.

The expectancy of life at birth in 2011-16 is projected to be 67 and 69 years respectively for males and females. Between the years 2000 and 2050, the worldwide proportion of persons over 65 years of age is expected to more than double, from the current 6.9% to 16.4%. Around 60% of the 580 million older people in the world live in developing countries, and by 2020, this value will increase to 70% of the total older population. As health care facilities improve in countries, the proportion of the elderly in the population and the life expectancy after birth increase accordingly. This is the trend which has been seen Clinical psychological problems in the elderly are common. Although, numbers of problems in every person’s life but it doesn’t mean it’s normal. Late-life psychological problems affect about 6 million Americans age 65 and older. The likely reason is that the elderly often shows symptoms of psychological problems in different ways. Psychological problems in the elderly are also increased frequently with the effects of multiple illnesses that affect their health status.

It has been documented that elderly are more prone to psychological problems and depression is the commonest geriatric psychiatric disorders. In fact the elderly in India face a multitude of psychological, social, and physical health problems. As age advances there is increased morbidity and functional loss, also presence of a variety of depressive factors and occurrence of varying life events, greatly impact on one’s psychological status, making them more prone to psychological problems. Ageing is a universal process. In the word of Seneca “old age is an incurable disease”, however as Sir James sterling commented “you do not heal old age, you protect it, you promote it and you extend it.” These are in fact the underlying principles of Preventive Medicine. The Bhore Committee had perceived that patients requiring psychiatric institutional treatment would be 2 per 1000 in the country. In 1966, the Mental Health Advisory Committee to Govt. of India suggested a prevalence rate of mental illnesses of 20 per 1000 population with 14 per 1000 in rural areas Psychological problems is among the commonest psychiatric disorder among elderly manifested as major or minor psychological problems characterized by a collection of depressive symptoms. Many studies have indicated severe under-recognition and under-treatment of psychological problems in the elderly, even in developed counties.

Although work practices are becoming increasingly diverse and flexible, with far fewer people staying in a single job for thirty or forty years, still there are many men retiring today who have been working in one role for many years. For these men, who have not experienced much variation in their daily routine for a long time, such a major change of lifestyle is often very stressful.

Psychological problems or mainly the occurrence of depressive symptomatology is a prominent condition amongst older people, with a significant impact on the well-being and good quality of life. Many studies have demonstrated that the prevalence of depressive symptoms increases with age. Depressive symptoms not only have an important place as indicators of psychological well-being but are also recognized as significant predictors of functional health, mental health and longevity. Longitudinal studies demonstrate that increased psychological problems are significantly associated with increased difficulties with activities of daily living. Community-based data indicate that older persons with major depressive disorders are at increased risk of mortality. There are also studies that suggest that depressive disorders may be associated with a reduction in cognitive functions.
Although they are more likely to own their homes, those dwellings are more likely to be substandard. They are more likely to be in poorer health than their urban counterparts. Yet, their health and long-term care needs are less likely to be met owing to problems in the availability of health and social services and the obstacles to delivering services in rural areas, including low population densities, limited transportation, and longer travel distances.

Data from the Social Security Administration indicate that rural elders receive lower average monthly Social Security benefits than those living in urban locations. This reflects the lower incomes and lifetime earnings of rural people before retirement. Moreover, rural elders—poor and average people—receive a higher proportion of their income from Social Security.

CONCLUSION

No one can avoid and escape aging, but most individuals can opt to age productively. Retirement plans and policies should be enabling, allowing executives to address the new adjustments they need to adopt when counting down to retirement. One such policy is phased retirement, whereby individuals can control their own wishes gradually reduction in enjoying time. Age of retirement can have the additional psychological stressed stage to the people who wants to achieved motivational efforts and remain in an increasingly part-time capacity according their capabilities and improved their financial stage.

But the dark side of retiree life, with its ability to detach the individual from the realities of life in social cercal. We dare not forget that real aging comes not when we pass a certain years of life but when regrets take the place of reduction in the life dreams. Worry, doubt, loss of self-interest, and despair are the loss of confidence that destroy an individual’s spirit. We need to go beyond Benjamin Disraeli’s lament that “youth is a blunder; manhood a struggle; old age regret.” Retirement and old age may seem a long way off to many of us. But on the day they come, it will be too late and too short to do anything about them we need to own our own lives now and at every stage we enter; and that kind of ownership requires that we diversify our interests and keep on learning. As Aristotle once said, “Education is the best provision for old age.” In addition to investing in new interests, we need to invest in meaningful relationships and free from any stress. In fact, that is the best investment we can make in our life. If we want to create a pleasant ending to our job life, we must make and developed happy moments during earlier years of life.

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