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# SUPPORTING DEVELOPMENT IN OLD AGE

## Old Age as a Period of Life

Old age, also called late adulthood, is the period that comes near inevitably to everybody. Although the moment of completing this stage of life is obvious and commonly known, yet it is difficult to define explicitly the exact age that a contemporary person approaches. In literature, the age of 110-120 is pointed at as the maximum length of human life, and reports on hundred-year-old people confirm these calculations (Szukalski, 2005). However, defining the age when a person crosses the so called old age threshold seems much more difficult. Moreover, due to the fact that old age is one of the longest periods in the course of the whole human life (Marchow, 2004), it seems natural that we need to divide it into shorter stages with their own specificity.

In literature, there are adopted varied criteria of old age, and also different stages that occur in this period are enumerated (compare: M. Brzezińska, 2011). A very popular classification is the one which contains three stages: the first stage pertains to fit and active old age, the second one is characterised with deterioration of psychophysical state, and the third stage means longevity. In some sources one may also find attempts at making age frames for these stages. According to World Health Organisation, old age may be divided to:

- $-60^{\text{th}} 74^{\text{th}}$  year of life early old age,
- $-75^{\text{th}}-89^{\text{th}}$  year of life late old age,
- 90<sup>th</sup> year of life and more longevity (Nowicka, 2006; Szarota, 2002).

Klonowicz (1986) refers to job activity of people and thus adopts the notion of a person beyond retirement age, which is related to seizing job activity (from the 60<sup>th</sup> year of life for women and from the 65<sup>th</sup> year of life for men). After passing this border there is real old age (up to the 79<sup>th</sup> year of life) and ripe old age (from the 80<sup>th</sup> year of life).

A. Brzezińska (2006) also links the beginning of old age with the process of retiring. She observes, however, some difficulties in defining the age border. Due to some differences in the age of retirement, A. Brzezińska states that it is not possible to define explicitly the time of entering the period of old age. Moreover, the pension reform in Poland (increasing retirement age to 67 years old) causes, that previous suggestions about the age when a person crosses the so called old age need to be actualized.

Although varied frames are adopted to define the beginning of old age and there are different proposals of periodisation of this period, yet the moment of entering old age is very individual. Apart from the time of retirement, mentioned by A. Brzezińska (2006), there are other factors that influence beginning of old age, these are for example: level of physical and mental fitness of an organism, previous life style, economical conditions, an image of an old person in a given society, external pressures to withdraw, an offer of activities for the elderly (especially in the context of seizing job activity).

### **Life-span Orientation**

For many years researchers studying human development have focused upon the periods of childhood and youth. The previously dominating biological paradigm assumed that persons who reach their biological maturity approach the top of their mental abilities as well (Straś-Romanowska, 2001; Tyszkowa, 1988). In the later stages human life was perceived as stable (Tyszkowa, 1988).

This approach led to treating development as a process of one-way, lasting and irreversible changes. It was assumed that development was common, predictable, and consistent with chronological age (Straś-Romanowska, 2001). Developmental changes were only of progressive character (Straś-Romanowska, 2001).

Researches on old age were started as early as the 19<sup>th</sup> century (cf. Baltes, Reese, & Lipsitt, 1980; Birren, 1961 a,b). Among important publications on this period there are enumerated works by Charlotte Bühler, James E. Birren, Jack Botwinick. However, incorporating the remaining life stages (including old age) to developmental psychology was started only at the turn of the 60s and 70s of the previous century. A crucial role in the development of the new approach was played by the First Conference of *Life-Span* Psychologists, which was held in Mont Chateau Lodge in West Virginia in 1969.

Psychologists of the new *life-span* orientation (led by Paul Baltes) revised the notion of development, reformulated the subject of their studies, and made foundations for the pluralistic approach in researches on human development. Their field of interest encompassed development of a person in the course of whole life, from birth up to death. They gave attention to developmental transformations in psyche of an adult, including old age as the last phase of adulthood. In order to

distinguish developmental psychology held within this formula from the traditional approach, it is called 'developmental psychology in the course of life', 'lifespan developmental psychology', or 'human development psychology' (Baltes, 1987, 1997; Stuart-Hamilton, 2006; Tyszkowa, 1988).

It is assumed in the new approach that ontogenetic development is a process that lasts all life (Baltes, Reese & Lipsitt, 1980). Developmental changes which occur in the course of whole life are based not only biologically, but they present a result of constant transactions between an individual and changing individual, cultural, and historical contexts (Staudinger & Bluck, 2001). An individual selects developmental contexts, introduces some changes there, and the contexts evoke changes in the individual (Baltes, 1997). Thus, development is a multidimensional and multidirectional process that contains both progressive changes (profits) and regressive ones (losses).

Development is influenced by different factors: age, developmental tasks that are related to age, a historical period, civilisation conditions, an individual history of a person. The number of these factors in the course of one's life leads to the fact that developmental changes in particular mental functions may occur according to different patterns (Baltes, 1987). Changes that result from the biological structure of an organism, also called universal changes, are the least vulnerable to modification (Boyd & Bee, 2006). Development of individuals is also dependent on life experiences that result from belonging to a particular cohort (a group that experiences the same historical events) and to a specific culture. Developmental changes that result from different group experiences are not universal, they present the so called common group changes (Boyd & Bee, 2006). Another category of changes is formed by those that result from individual, unique experiences. An important role is played by both random incidents and events that result from personal decisions of individuals.

Such way of understanding development applies also to the period of old age, which is no more related to regress only. The respective researches become focused upon psychological resources of an old person. There are analysed both limitations associated with this period in life and developmental capabilities that occur. It is also indicated that such changes as regress, disintegration, decline, loss, and disappearing are elements of the restructuring process in each phase of life. Aging in all the dimensions (biological, mental, social) constitutes an experience that is present at each stage of life (Turner & Helms, 1999).

# Aging of a Society

One of the important reasons for the growth of interest in the period of old age is related to the observed changes in the number and age structure of populations in numerous countries (compare: Finogenow, 2011). On the basis of participation

of the elderly in a given population, the so called demographic old age is defined, and this classification is based mainly upon chronological age of a person. A demographically old society is a population which includes more than 12% of people aged 60 and more, or more than 7% of people aged 65 and more (according to the United Nations norms the border age is 65). Moreover, it is assumed that if there is more than 7% of people aged 65 and more in a given country, this means that the country exceeds the so called old age threshold, whereas after reaching more than 10%, the country becomes referred to as advanced in age (Orzechowska, 2001). According to the Eurostat (Eurostat Yearbook, 2010) dates from the year 2010, between 1960 and 2005 the world population more than doubled (from 3 023 to 6 512 million). Prognoses for the next years indicate that the tendency will be maintained. It is forecasted that in the year 2050 the number of people in the world will increase up to 9 140 million. A markedly lower growth was noted in the same years in the European countries (from 604 to 729 million). According to the respective prognoses this weak growth tendency will be maintained only to the year 2020, when the population of Europe will start to diminish slightly, to 691 million in the year 2050. In the countries that belong to the European Union the growth of population number was even lower (from 402.6 to 497.4 million), and according to the respective prognoses, in the year 2050 it will reach 505.7 million.

There would be nothing alarming about maintaining growth at a similar level, if the subsequent generations were replaced. However, maintaining the number of population at a similar level results from changes in the age structure of inhabitants.

According to the data presented in a report by World Health Organisation in the year 1999, there lived in the world about 580 million people aged above 60, the majority of them (355 million) in well-developed countries. It was forecasted that in the year 2020 the number of old people would exceed 1 milliard. The worst situation applies to the most wealthy countries (700 million), where old people will constitute about 30% of the whole population (Straś-Romanowska, 2000b); this situation will hold true also for the countries of the European Union.

According to the prognoses for the population of the European Union that were presented by Eurostat in 2010 (Eurostat Yearbook, 2010), the proportion of those who work professionally to persons aged 65+ will diminish from 4:1 in the year 2008 to 2:1 in 2060. It is supposed that persons aged 65 and more will constitute about 30% of the EU population, as compared to 17% in the year 2008. Statistics that apply to Polish society<sup>5</sup> also show a growth of percentage of the retired in the whole population, and prognoses for future<sup>6</sup> indicate that the tendency will still grow.

<sup>&</sup>lt;sup>5</sup> The Statistical Yearbook of the Republic of Poland (1991, p. 41; 1996, p. 51; 2001, p. 101; 2006, p.195, 197; 2010, p. 219, 221).

<sup>&</sup>lt;sup>6</sup> The Statistical Yearbook of the Republic of Poland (2010, p. 233).

Aging of the societies in Europe is a result of numerous factors. Advances in medicine and better living conditions contribute to lengthening of an average time of human life. Persons born during the so called after-war 'baby-boom' exceed the border of retirement age. A decrease in the number of births during a year is noted – from 11.9 million (in the years 1960-1965) to 7.4 million (in the years 2000-2005). In the period between 2000 and 2005, the birth rate in Europe (the number of births for 1000 inhabitants) was the lowest among all continents and it equalled 10.2 (the mean rate in the world was 21.2). An average number of children born by a woman diminished from 2.6 (in the years 1960-1965) to 1.4 (at the end of the 90s), and it was maintained at a similar level up to the year 2005 (Eurostat Yearbook, 2010).

## **Developmental Changes in the Period of Late Adulthood**

Developmental changes in the period of late adulthood appear in many areas (compare: Stuart-Hamilton, 2006). Changes at the external level are the easiest to observe. There appear wrinkles and the skin becomes less flexible, hair turn grey, and posture becomes more hunched.

Internal changes occur in the nervous, blood circulation, digestive, respiratory, muscular-skeletal, urinary, hormonal, and immunological systems (compare: Bień, 1997; Perry et al., 2006). With age, the functional potential of the heart and lungs becomes lower, blood circulation in brain decreases, bones become more brittle, the mass and strength of muscles diminishes, the immunological system becomes weaker. As a result of the ongoing changes, the time that is necessary to perform varied everyday activities becomes longer and the need to have a rest increases. The changes lead to more frequent and more dangerous diseases, with some sex-related differences in this area. Men suffer from diseases that endanger their life more often, whereas women suffer from chronic diseases more often and they declare more complaints.

There are changes in functioning of the senses as well (compare: Stuart-Hamilton, 2006). As a result old persons react to stimuli more slowly and they often do not get full data about their external environment. This leads to the risk of greater dependence on other people and the general level of functioning becomes lower (compare: Carabellese et al., 1993; Oleś et al., 2002; Spinelli et al., 1998).

The period of late adulthood abounds in transformations in cognitive and personality functioning (Coleman & O'Hanlon, 2004; Lazarus & Lazarus, 2006). However, at the level of mental abilities there occurs a markedly greater differentiation. Moreover, some of the ongoing changes are difficult to define explicitly as positive or negative ones.

The decreased efficiency of senses and longer reaction time are often compensated by the elderly with their knowledge and experience. The observed slowdown in functioning allows for less violent engagement, better thought-out and balanced expression of one's opinions, deeper differentiation between significant and non-significant matters, understanding, and goodness (compare: Braun-Gałkowska, 2006).

Although for many years it has been commonly believed that intellectual level becomes lower with age, this view is questioned nowadays (Stuart-Hamilton, 2006). Research results indicate that some intellectual abilities may be maintained at a good level, and sometimes they may be even developed up to advanced old age. Mental fitness depends also on previous intellectual activity of an individual and on old age stage (Birch & Malim, 1999). In a majority of persons mental fitness is maintained at a similar level up to the age of about 60 (Cavanaugh, 1997; Marcinek, 2007). In the phase of early old age (up to the 75<sup>th</sup> year of life) changes are small and difficult to observe. Only later in a majority of people there appears deterioration in a majority of cognitive abilities, especially in those which apply to speed and skills that were not trained (Boyd & Bee, 2006).

The negative influence of age relates mainly to the tasks in which fluid intelligence is applied, e.g. simple reaction time, operational memory and episodic memory, spatial abilities, reasoning, sight searching. Arithmetic, sight, and spatial abilities submit to deterioration to a small extent. The greatest changes occur in the area of abstract and logical abilities (Marcinek, 2007; Steuden, 2009). There are also areas in which achievements depend on age to a small extent. A similar level is maintained for: operational memory, prospective memory, recognition, verbal intelligence, language functions (naming, word fluency, understanding, counting), praxis (compare: Stuart-Hamilton, 2006; Turner & Helms, 1999). Thus, it turns out that verbal abilities related to knowledge, vocabulary, and skills of using them, seem the most stable ones (Verhaeghen et al., 2006).

Some favourable changes that occur with age are related to problem-solving strategies. As compared to young people, the elderly approach social situations and situations that demand interpreting life experiences, in a different way. In problem situations they use the so called post-formal thinking, which is characterised with accepting more than just one correct solution, accepting paradoxes and ambiguities, considering one's limited influence on the course of events. While thinking in the post-formal mode, it is coming to the point where the spheres of emotions and logic become combined, which allows the elderly for more effective overcoming difficulties in everyday life, leads them to patience, humility, and deliberation (Cavanaugh, 1997; Steuden, 2009).

Studies on personality in the elderly consist in comparing their traits with those in the younger ones or recording changes that occur in a longer time period. Sometimes, there is observed an increase in mildness, patience, understanding, creativity, but also in obstinacy, avoiding risk, unwillingness to changes, and a decrease in flexibility and emotional life. Yet, the up to date results do not allow for an explicit definition of personality traits in old age (compare: Brzezińska, 2011; Cavanaugh, 1997; Steuden, 2011; Szatur-Jaworska et al., 2006). This is because they are influenced by truly diverse factors: personal, environmental, and cultural ones, as well as life experiences, readiness to accept social transformations, the skill of accepting oncoming limitations, or the skill of making a realistic evaluation of oneself and one's possibilities. Long-term studies do not display changes in the basic dimensions of personality (McCrae & Costa, 2005), yet they indicate some changes in the achieved traits (Straś-Romanowska, 2002).

Considering developmental changes in the period of late adulthood leads to the question about positive aging and how it should look like. The process of aging is often defined as a gradual decline in physical and mental fitness up to death. According to this approach positive aging consists in accepting and skilful adapting to these limitations (e. g. Chapman, 2005). Whereas, Rowe and Kahn (1987) indicate that optimum aging means lack of marked diseases or complaints, a high level of cognitive functioning, maintaining high engagement in social life.

It seems, however, that avoiding diseases in old age is impossible. Moreover, a majority of old people who suffer from chronic diseases or experience a decrease in their physical or mental abilities claim that they grow old in a positive way (e. g. Stawbridge, Wallhagen & Cohen, 2002). An attempt at integrating the varied approaches is found in the contemporary approach in which it is claimed that aging is an individual process that depends on traits of a particular person, and positive aging is a result of numerous variables (Baltes & Baltes, 1990; Kaplan, 1994, 2003).

The presented considerations on developmental changes in the period of aging and old age draw attention to the existing discrepancy between treating old age as 'the height of one's individuality' (Garret, 1990), in which a truly great differentiation among particular old persons is assumed, and a highly homogenous image of needs, expectations and life styles in the elderly, which is often presented in literature and reflected in the existing stereotypes of old age.

It is also noted that there is a need to consider both the changes which consist in deterioration of some functions in an aging person and those which consist in an increase. According to Kowalik (2000), only a holistic approach to old age, with focusing to its progressive character, presents a thorough and realistic description of the phenomenon.

## **Old Age - the Time of Paradoxes**

Researches who deal with the period of late adulthood point to a paradoxical character of development in an aging person (e.g. Straś-Romanowska, 2000a). It is the mere consideration of some developmental possibilities in this period which

seems paradoxical. The period of aging is typically linked to a regress, a decrease in varied functions, disappearing of life functions and activities, that is a negation of what is typically associated with the process of development.

Studies that are conducted within the life-span approach indicate that developmental changes in the period of late adulthood are not only multidimensional (biological, personal, and psychosocial spheres) but multidirectional as well. Focusing attention to this variability renders it possible to notice that some of the changes are progressive, while others are of a regressive character. This leads to formulation of a diverse, asynchronic, and individualised image of the process of aging and personality of an old person, an image that is difficult to present as a universal pattern for everybody.

The main paradox of the age of late adulthood lies in a clash of two opposite processes, two aims that are mutually exclusive. In the period of aging a person experiences very clearly the coexistence of regress (and losses that are related to it) in some areas and progress (and accompanying gains) in some others. On the one hand, the fitness and regulatory processes submit to deterioration. Yet, on the other hand, there grows dynamics of cognitive and experience processes. Focusing upon these areas may be found in ego psychology (Erikson, 1968) or existential psychology (Frankl, 1984). These trends are focused upon directing one's activity to personal and experience dimensions, to internal experiences of individuals, also in the time of aging and old age.

Another paradox that is related to the period of late adulthood relates to considering optimum conditions for proper aging. This diversified approach may be found in the two major theories of successful aging. In the theory of activity (Neugarten, Havighurst, & Tobin, 1968) the process of aging is referred to as a social phenomenon, in which changes in social roles that are played result in emerging and gathering of tensions related to the concept of self. Personality adaptation of an old person is strongly related to his/her self-esteem, which is formed due to one's own status, roles, social interactions, and observations of the surroundings (Kofta & Doliński, 2000). Thus, the authors suggest activity up to the oldest age, as great as possible and fit to an individual situation. According to the theory of activity, a normal process of aging allows a person for maintaining his/her up to date life involvement. People who grow old in an optimum way remain active and present in social life, after retiring they get involved in some substitute activities and they start new friendly relations (Straś-Romanowska, 2000b). Due to maintaining activity from the former periods, they can still feel necessary, they have a chance to preserve the sense of competence and their self-esteem, they can rejoice in their life.

On the contrary, in the theory of disengagement/withdrawal by Cumming and Henry (1961) it is assumed that old people limit their activity and their social links become weaker. The withdrawal is referred to as a natural need of a person in the period of late adulthood, which is important for achieving mental balance and for

further development of personality (Straś-Romanowska, 2000b). It is accepted by an aging person, thus it allows the person for well-being. The style of life that results from this need has been called 'rocking chair style' and it is assumed that the style favours introspective analysis of memories and still unsolved conflicts, reinterpretation of past experiences and discovering new meanings.

The two contrary ways of optimisation of the process of aging, which are proposed in the presented theories, result in two contrary motivational tendencies in an aging person: either to live according to the previous model, to make every effort to maintain one's activity at a similar level, or to limit the up to date activity, to withdraw from some areas of functioning, and to direct one's attention inside.

On the one hand, the occurrence of some negative changes in old age results in focusing one's attention to fitness and competence dimensions, which may lead to a negative perception of oneself, focusing on losses and more difficulties in realising life plans. In this case, individuals do not want to accept the oncoming limitations and undertake tasks that exceed their possibilities, they invest a lot of personal resources to maintain the passing image. Such an approach may lead to despair and increased fear of death (Erikson, 1968).

On the other hand, in some cases it is also withdrawal (e.g. too early withdrawal caused by a disease) which can lead to some adaptation problems, such as lack of an idea how to live further (Birch & Malim, 1998). The difficulties may become deeper if social environment is deserting an old person simultaneously, they may also result in social isolation and weaker relations also with the closest ones. This leads to focusing attention upon oneself mainly and becoming indifferent to every life matter, it also exerts a destructive influence on self-esteem and the sense of internal control.

A significant contribution to the considerations on aging adaptation and the role of activities that are undertaken by a person, was made by subsequent theories in which elements from varied ideas were combined. A special attention is deserved by the following ones: the theory of selective optimisation with compensation by Baltes and co-workers (Baltes & Baltes, 1990; Freund & Baltes, 1998; Lang & Carstensen, 1994), the theory of oscillation between assimilation and accommodation by Brandtsätdter and co-workers (Brandtsätdter & Greve, 1994), the theory of social and emotional selectivity by Carstensen (Carstensen, 1991; Carstensen et al., 1999), the theory of geotranscendence by Tornstam (1989, 1999). The authors stress great plasticity of a human being in the process of adapting to old age. Their assumptions do not render it possible to define explicitly the most optimum way of adaptation for all aging people. The adaptation process is influenced by experiences, different ways of living one's life, and many other factors that contribute to the complex character of human life. Some old people may draw satisfaction from activity, while others may be satisfied with limiting it. An old person's activity may be not only maintained or limited, it may change its character as well. It is also stressed that due to human ability to evaluate and define one's preferences, every person may choose the way of adapting which is the most optimum one for the person.

The paradoxical character of late adulthood is also linked to a complex, ambiguous, and inexplicit attitude towards old age. As it was written by Cicero: 'We all want to live up to old age, but when it comes, we protest against it'. On the one hand, at different occasions we all wish each other to live 'a hundred years', but on the other hand, we perceive old age and old people in a negative way. This is reflected in varied euphemistic names for the period, e. g. 'advanced age', 'golden age', 'the autumn of one's life', 'senior age', 'the third age', 'ripe age'. The names allow for avoiding the word which is associated in a negative way (old age) and render it possible to soften its negative overtone.

Stereotypes, prejudices, and related discrimination of people because of their age is called with the term *ageism* (Nelson, 2003). Attitudes towards the elderly which are expressed there are most often painful and harming. According to the stereotypical image, an old person is not able to live in a self-dependent way. The image of old age is related to being decrepit, sensitive to diseases, repugnant, and unproductive. Some demands related to the necessity of constant care and help, and sometimes nursing and rehabilitation, are also stressed (Nelson, 2003).

The negative image of an old person contains also focusing upon some unfavourable changes in the sphere of social functioning. The aged are perceived as conservative and resistant to changes, they are said to have stiff habits, and what is more, to tell the younger ones what to do all the time. The examples are the stereotypical images of old women (Cieślik et al., 2005): a city old woman (a prying neighbour in a block of flats), a church old woman (who goes to all possible services), a fighting old woman (fights to get place in a queue or a seat in a bus).

There are also the so called positive prejudices to old age in which it is suggested that an old person requires some special care, help, exceptional treatment. Although they are meant to favour the elderly, yet the prejudices often lead to their infantilisation, to limiting their independence, activity, and autonomy. As a result of such treatment, seniors often adopt the forced image and become more and more passive and dependent on others (Nelson, 2003).

A relatively recent image of old age is the stereotype of 'new old age', which has been observed in the recent years (Ratkowska, 2006). According to this stereotype, an aged person is joyful, fit, independent, sociable, he or she has got broad knowledge and rich experience. Such a person is shown with youth attributes like trainers, a bicycle, elegant clothes etc. At present, this image is sometimes used in media, which results mainly from noticing that seniors may constitute an attractive target group for politicians, entrepreneurs, health service (e.g. Kożuch, 2006; Ratkowska, 2006; Woszczyk, 2005).

The negative attitudes to old age that are presented above are linked to another paradox which is present in contemporary reality. Youth and what is related to it are referred to as the greatest value. Strength, fitness, physical attractiveness, readiness to take risk, openness to changes, flexibility, brilliance, and go-getting energy, are highly valued. Young people are focused upon future, activity, progress, and changes. Old age, which is in contradiction with youth, is often deprived of all these attributes. Aged persons frequently aim at stabilising their external environment, they turn to the past, to their memories. Thus, when facing active and colourful youth, old age becomes repulsive, depressing, something that ought to be eliminated.

However, old age is a natural period in life, which is experienced by a predominant part of population. A majority of those who become mature, start adulthood, or are at the height of their career at present, will most probably live to old age. In this context, it seems paradoxical that they create such a future in which there is no place for the elderly. They create such a future in which there will be no place for its creators after they cross the symbolic threshold of old age.

#### Supporting Development in the Period of Late Adulthood

Supporting development is meant as all activities which are displayed both by a particular individual (towards himself/herself) and by other persons towards this one and which are aimed at facilitating the developmental process in the person, facilitating realisation of developmental tasks (Harwas-Napierała, 2000).

Development in varied spheres is supported starting from the first moments of a child's life. In the period of childhood, responsibility for supporting development belongs to a large extent to other persons – parents, care-givers, tutors etc. (Harwas-Napierała, 2000). Activities performed by adults apply both to intellectual and emotional development and to forming some habits, for instance health behaviours (Zadworna-Cieślak & Ogińska-Bulik, 2011). As we grow up, a greater role is attributed to one's own activities. As we enter the period of adulthood, responsibility for development of a particular person starts to belong mainly to this person (Harwas-Napierała, 2000). A special role is played by one's own activity that is aimed at undertaking new roles and tasks. Whereas the role of other persons is limited mainly to inspiring an adult to undertake this activity.

Old age is the period when a gradually growing role is played again by other persons. A gradual decrease in physical fitness, outdated competencies of a person, lack of new skills that make functioning in the developing reality easier (e.g. lack of computer skills, lack of foreign languages skills; compare: Finogenow, 2011) often lead to growth of tension, anxiety, and the sense of being ill adapted. In the context of the ongoing changes, supporting development in the elderly starts to depend to a large extent on the younger generations. Yet, the longer and longer time of human life results in the situation that this responsibility belongs to a growing extent to grandchildren, and not to children (Marchow, 2004).

As it was in the earlier developmental periods, supporting development in the period of late adulthood is directly related to natural developmental changes and tasks that are posed for an individual. Erikson's theory presents a study of developmental changes that are manifested one by one in an individual's life. Each stage brings a specific crisis, which a person must solve in an accurate time to reach proper development of his/her personality. Old age is referred to as the last developmental stage, when a person faces the psychosocial crisis: ego integration versus despair. The task to be realised by a mature person is to achieve life wisdom as a result of a positive life assessment.

Ego integration (a positive solution to the conflict that is typical for this age) is linked to the sense of meaning and usefulness of one's own life, and leads to reaching life wisdom and full maturity. It is based upon acceptance of manhood and one's own existence as something necessary and unique. Achieving integration is equivalent to being convinced about a value of one's own way of life, independently from being conscious that it could have passed differently.

However, if a person is not able to accept his/her own up to date life, then the person cannot accept the fact of the finiteness of his/her existence. Such persons would like to start everything from the beginning, but at the same time they know that life is too short. This results in a grief over life mistakes and lost chances. The state of despair is characterised with an increased fear of death, perceiving one's own life as lacking any meaning and purpose, the sense of sorrow and disappointment. Achieving integration is possible under condition of positive solutions to conflicts from earlier developmental stages, as it is the time when their specific assessment is being made.

It is also in the theories by Havighurst, Levinson, and Peck (after: Turner & Helms, 1999) that each developmental stage is linked to some definite developmental tasks. Managing the tasks presents a basis for an individual's adaptation to a given period in life. Among the tasks that an aging person faces, a special role is given to the necessity of dealing with lowering of immunity to diseases, decline in the ability to recover, and growth of physical complaints and pains. The authors focus upon the change in social status, which is related to retiring, and the need of finding oneself in new roles, with a simultaneous resignation from the previous ones. The possessed energy must be directed towards new roles and new tasks. One of the key tasks in this period lies also in the acceptance of inevitability of death and the related necessity of adopting a new life perspective.

Despite varied tasks that are enumerated in the theories of aging, many activities directed towards the elderly come down to helping and taking care only. These activities are of course necessary in valuable in many situations, yet limitation to these forms of influence only does not favour personal treatment of old persons (Ober-Lopatka, 2007). The activities are focused mainly on seniors' deficits, and they ignore old people's resources and developmental potential. Whereas supporting development should engage an aged persons actively in solving their own problems, guarantee the sense of control over their own life, and reinforce the sense of stability and continuity of their own life. It ought to be focused on more than improving their material and everyday quality of life.

Supporting development in the period of old age may be realised in diverse forms. One of them lies in providing aging people with possible most thorough knowledge on mechanisms of aging, difficulties and crises that appear at this time. Understanding what is going on strengthens the sense of control over one's own life (Finogenow, 2008). Moreover, knowledge on mechanisms of aging allows old persons for preparing to the subsequent changes, and also for reducing the sense of anxiety about the future.

Supporting development in the aged consists also in helping them make a positive life assessment. It happens sometimes that old persons find it difficult to get their thoughts in order, to organise their past experiences and memories, and to find a meaning in the passing life. Accompanying them in going through their own way of life may facilitate accepting their up to date life, earlier decisions and their consequences. Some help is needed sometimes also in analysing relations with the closest ones, repairing weakened relations, or even making up with those who are important but have been for some reasons rejected. Moreover, it is truly significant to create conditions in which the aged could accept the fact of finiteness of their existence and could get ready for their own death, which should be accompanied with finding a meaning in the remaining time of their life.

Supporting development in the elderly may be also realised in an indirect way, by means of some activities directed towards other people. One of the areas concerns undertaking activities that promote a change in social, often negative, image of this age group. It seems important to create a positive attitude to the aged, to build the attitude of respect by showing the role of the elderly in a society and culture.

Moreover, educating young people about developmental regularities of the final period in life seems really important. On the one hand, it is aimed at making it easier to understand some behaviours and attitudes of the elderly, which could lower anxiety and hostility to this age group. On the other hand, education in this area prepares those who are young at present to the changes they will experience in future. Preparing to old age starts as early as in youth and it lasts all life.

An interesting example of a broader scale activities is found in the GALM programme (*Groningen Active Living Model*; Stec, 2007), which is realised in the Netherlands. It is aimed at stimulating physical activity in persons who enter old age (those aged 55-65) and who lead a sedentary mode of living. The programme is based upon the assumption that elaborating the habit of physical activity in the earlier stage of life may constitute a preventive factor against stagnation and lack of physical activity at the next stage.

No matter what is a character of activity that is focused upon supporting development in the elderly, it seems exceptionally significant to apply an individualised approach. Old age is the most diversified period in life. It is not possible to talk about a certain old age, it is possible to talk about old age of a particular person only. There are no homogenous patterns of experiencing old age, and there is no one universal pattern of adapting to this period.

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