# Ministering to the Aging

[Wisconsin Lutheran Child and Family Service] by Tina M. Rains

The mention of the word aging stirs a variety of feelings and emotions within us. Old age is a time of life that is feared by many. We attempt to picture ourselves in the future and wonder what these years will bring for us. As with all the developmental stages in life, transitions create challenges and changes. But beyond these challenges lie opportunities for growth and self-fulfillment.

There are almost as many different attitudes associated with the aging process as there are people who are growing older. Children are in a rush to grow up while adults are wishing to slow down the hands of time. It's interesting to note how attitudes about birthdays change throughout our lives. Children eagerly anticipate them, young adults contemplate their meaning and midlifers try to forget them while their friends taunt them with "over-the-hill" parties. In old age birthdays are marked as accomplishments. Despite the many views and attitudes about aging, one thing is for certain—we are all aging. This is part of God's plan for his people.

It is a fact that American society is getting older. The percentage of people 65 and older has been increasing over recent years and continues to grow (AARP, 1990). In the United States the over 65 population increases at a rate of 1600 people per day, and represents 12.5% of the population (AARP, 1990). With continued population growth, advancements in the medical sciences and rising life expectancy, we will be forced to address the new challenges that accompany these trends.

The purpose of this presentation is to help inform pastors about the issues which are of concern for the aging and their families. I will begin by presenting stereotypes and attitudes about aging, followed by drawing a profile of an older American, and then focus on the losses that occur as a person reaches later life. This presentation will conclude with some practical suggestions on how to better understand and minister to your aging parishioners and their families.

My career as a social worker began at Wisconsin Lutheran Child and Family Service in the health care facility. For two years I worked with approximately 80 elderly residents and their family members. It was a wonderful experience to learn about the many issues which are of concern to the aging population. Presently I am employed as a family and individual therapist in the social service division of WLCFS. I continue to have opportunities to assist Christian families in facing the challenges of adjusting to the realities of old age.

As pastors, you also have the opportunity to work with people who are approaching later life. Studies have shown that 97% of all persons over the age of 65 report having religious affiliations (Moberg, 1990, p. 29). Religion has been shown to have profound effects on an individual's adjustment to aging, and frequently a pastor is a primary contact person.

The later years of life are, for many, a time of enjoyment and happiness. It is not unusual to find people in their eighties and nineties doing the same things as those a decade or two younger. The anxiety of growing old may be worse than the event itself. A 1985 survey found that three out of four elderly people surveyed found life to be better than what they expected (Council on Aging, 1985). Although the majority of this paper focuses on the losses in later life, I need to stress that this stage of life can hold many blessings as well. Being old does not mean that life is no longer enjoyable! We need to view it as part of God's time of grace for us.

### **Stereotypes of the Aging**

Earlier in our history older people were looked upon with greater esteem and honor. Their years of experience provided knowledge, wisdom and insight, and they enjoyed the respect of others. However, times have changed. Contemporary society values youth and beauty; youthfulness and fresh new ideas are highly desired.

Madison Avenue hype emphasizes looking and feeling young. Billions of dollars are spent each year on advertisements for cosmetics, beauty aides, clothes, cars and entertainment which are designed to help people appear young. Billions more are spent on purchasing these products which allure and make promises they can't keep. People continue to search for Ponce de Leon's unattainable "fountain of youth." Even Christians get caught up in this quest for eternal youth.

It has been estimated that one fifth of the American population suffers from gerontophobia—the fear of growing old (Collins, 1980, p. 275). It is apparent that many people, Christians included, do not want to acknowledge themselves growing older, so they cope by denying aging in themselves and by avoiding those who are aged. Collins (1980) suggests that "perhaps to justify their disinterest in old people, young persons tend to perpetuate myths about the disadvantages of the later years" (p. 275).

Closely associated with these stereotypes is a concept known as ageism. Ageism refers to discrimination and prejudice leveled against individuals solely on the basis of their age. Unfair, and very often demeaning, stereotypes are attached to the aging person. Marguerite Kermis (1984) summarizes the ageist stereotypes that are widely believed in our culture:

- 1. The elderly are all alike.
- 2. Old people are poor.
- 3. The elderly are all depressed.
- 4. The elderly are all sick.
- 5. The elderly are a drag on everyone else.
- 6. The elderly can't function in society.
- 7. All old people live alone.
- 8. Old people all die in institutions.
- 9. All old people become senile.

This list paints a pathetic, one-sided view of aging. Age prejudices do exist. They are passed on by the population in general as well as by the aged themselves. The media does little to promote a positive image of the elderly, but rather has perpetuated the idea that the elderly are sick, depressed and physically impaired. The American Association of Retired Persons (AARP) is directing efforts toward increasing understanding and acceptance of the aged. The elderly need to be seen as a heterogeneous population, with individual personalities and lifestyles. More exposure to the aging and an increase in our knowledge about the later years are needed to break ageist stereotypes.

## A Profile of Aging Americans

Whereas stereotypes often cloud our understanding of the aging population, statistics can provide a clearer and more realistic picture. The statistics to follow have been compiled by AARP unless otherwise noted.

The population of 65 years and older numbered 31.2 million in 1991. They represent 12.6% of the population and are the fastest growing age group in the United States. Broken down further, there were 18.7 million women and 12.6 million men—a sex ratio of 149 women for

every 100 men. What this means for women is a higher incidence of widowhood, economic loss and loss of social support.

The average life expectancy in 1980 was 73.6 years, up from 70.8 years in 1970, and a drastic increase over the average of 49 years in 1900.

In 1990 older men (over 65) were nearly twice as likely to be married as older women—77% of men, 42 % of women. There are five times as many widows over 65 as widowers. This is due to a combination of longevity of the female, and the fact that females usually marry older men. Men and women over 65 do marry and remarry; however, a major obstacle to marriage is the attitude of grown children. If children feel the marriage will jeopardize their inheritance, or if they simply do not understand their parent's need for companionship, they often object to the marriage.

Older people tend to have stable living arrangements and many live in the same place for more than 20 years. The majority of older noninstitutionalized persons (67%) live in a family setting and about 30% live alone. One out of every four aging adults live with adult children.

Despite stereotypes of lonely, cast-out elderly, a 1984 study found that four out of five older persons had living children. Of these, two thirds (66%) lived within 30 minutes of a child. Sixty-two percent had at least weekly visits with children and three fourths (76%) talked on the phone at least weekly with their children.

Against popular belief, a small minority of the elderly live in institutions. Only five percent of the sixty-five and older population lived in nursing homes in 1985.

#### The Losses in Later Life

People of all ages experience loss in their lives. What makes loss so significant in later life is that it often occurs within a short time period and with greater intensity than in earlier life. These losses occur at a time when a person's physiological reserve and opportunities for replacement, substitution and gratification are at their lowest (Rzetelny, 1985, p.141).

Loss can be defined as giving up or having something of value taken away. The older person is deprived of valued attributes, relationships and property at an increasing rate and intensity which is overwhelming at times and often threatening. The cumulative threat of, or actual decrements of energy, functional capacity, status, roles, financial resources, mobility, beauty, opportunities, and control disrupt the older person's well-being. Their loss is based on deprivation in the present as compared to the past. The intensity of the loss is based on the value which the individual placed on that which is lost. Avoiding losses, delaying them, adjusting and accepting losses can be overwhelming. Yet coping with loss remains the most significant developmental task of the aging process.

The case which follows has been slightly changed to maintain confidentiality; however, it accurately depicts the more common losses that occur in later life. As you read, think about the losses and how each contributes to further loss.

Edna is 79 years old and was widowed approximately six months ago. She is a diabetic and has glaucoma which has severely impaired her vision. Edna suffers with severe arthritis which limits her ability to walk. She relied on her husband for emotional support and assistance with her daily care. He transported her to the doctor, took care of the grocery shopping, and picked up prescriptions. For a short time after his death Edna's daughter stopped in daily to care for Edna. This was only a temporary solution, as her daughter has her own job and family responsibilities. Edna's family assisted her in selling her home and disposing of items which she would no longer need. Edna moved to a

community based residential facility where she had a room to herself and received assistance with daily cares which she could not perform alone.

Edna's losses were many and included physical, social and emotional factors. The outward losses included a loss of health, loss of spouse, and loss of home and property. Underlying the obvious losses included the loss of independence, loss of control, loss of companionship, loss of diversion and the loss of self-esteem. Edna's situation may appear extreme, yet the losses she experienced are not that far from the norm. What's more significant is the "snowball effect" where as one loss occurs others then follow.

Rzetelny (1985) breaks down the losses of later life into four categories which include: (1) the aging process, (2) health, (3) illness and (4) environmental losses. I will elaborate on each category in more detail.

1. The Aging Process. The aging process consists of a host of natural changes that occur as we grow older. Our bodies begin to wear down and our energy levels decline; these changes are individual in nature, and are not due to disease and illness. It is a gradual process which takes place over the years.

Some of the changes include a decline in strength and loss of physiological reserve, cellular changes which decrease organ functioning, psychomotor impairment and joint degeneration as well as changes in sensory perception and function. Physical changes include dry and wrinkled skin, age spots, and graying thinning hair.

**2. Health—Illness and Disease.** As individuals age they generally become more troubled by disease and illness. Nearly 90% of all older persons suffer from a chronic, or incurable, disease. Chronic conditions are four times more prevalent in the elderly than any other age group (Eliopoulos, 1987, p. 26).

Not only do aging adults have to deal with chronic illness, but they also deal with chronic impairments which add to their burdens. Blindness, hearing impairment/deafness, or an impairment of some body part increase in prevalence with age. Various kinds of injuries, especially accidental falls, are a major cause of impairment.

The leading causes of death for the 65-and-over group for both males and females are heart disease, cancer and stroke. One significant difference between males and females in cause of death is suicide. Older males have the highest suicide rate in the country, and these rates increase with every decade of life. Suicide rates for older females also need to be taken seriously. Although their rates are less than males, older females are twice as likely to take their lives as are their younger counterparts (Esberger & Hughes, 1989, p. 326).

The loss of health at any age is frightening; however, this fear increases in the elderly when they are coping with other losses related to aging in general. Recovery time for illness increases as we age. Because physiological reserve is limited, it takes time to gain strength. An illness can trigger other losses as well, such as loss of mobility, loss of independence, loss of social contacts, and loss of self-esteem. This is not hard to believe as almost half of the elderly have illnesses that interfere to some degree with their ability to engage in normal activities of daily living.

**3.** The Death of Others. The loss of a spouse or significant other is not the only cause for grief in the aged; it is, however, the most profound (Esberg and Hughs, Jr., 1989, p. 288). The loss of significant people results in grief and is particularly stressful for the aged person because similar relationships are unlikely to be established in the future. Thus, the void is very difficult to fill. Each loss deprives the person of a source of caring and of a support system. The importance of quality relationships in the lives of aging people cannot be over-estimated.

For the elderly in particular, the loss of a significant person could mean major changes in the life of the survivor. Consider my earlier example of Edna who lost her husband. Because she was dependent upon him for her daily care, after his death she needed to be institutionalized. Her loss represented a change in her pattern of living, as well as the loss of human companionship and intimacy.

Experiencing the death of family members and friends can often bring aging adults face-to-face with the reality of their own mortality, which can further add to their grief. The aging need to express their grief as they work through the process of bereavement. They need to be encouraged to continue living their own life by keeping up with routine tasks and by communicating their feelings with supportive people who can assist in reducing the older person's feelings of abandonment and loss. Aging Christians need the same kind of support. Their faith in the Lord and their joy in the heavenly reward given to their loved one provide a great sense of comfort and confidence in their God. Yet, the drastic severing of their human bond brings great loss and disruption to their lives. We need to be sure therefore to provide both the Scriptural comfort and emotional support they need.

**4. Social and Environmental Losses.** The social and environmental losses are defined as the loss of roles and status, of authority, of income and of self-esteem. Retirement can contribute to loss in any of these areas.

Retirement causes major role changes in later life. Many people adjust with ease; however, there are many more who experience difficulty with the changes. Our identity is based partly on what we do for a living, so with retirement some people feel as though their identity is gone. Attached to our roles at work include a sense of knowledge, status and self-worth. Loss of work-related friendships and acquaintances leave a void, and time previously at work needs to be filled with new activities. For many, retirement also brings a lower income, a reduced standard of living, and adjustment to a retirement pay scale which often fails to keep pace with the rate of inflation (Collins, 1980, p. 267).

Other roles are changed by retirement as well. The stress of the adjustment can either strengthen or weaken a marital relationship. Some spouses welcome retirement, and others fear the change. Change can mean more time to spend together, adjustment of leisure time activities and new delegation of household tasks and responsibilities. For men, adjustment to retirement may be especially difficult, because their self-esteem and worth as people are most often linked with their need to be providers and to feel useful and needed.

Women's self-esteem and sense of self-worth is also linked with the need to contribute and be productive; however, women are more likely to link their self-esteem to physical appearance. Younger women receive considerable esteem for their physical appearances, but when advancing age reduces attractiveness, their self-concepts are diminished in ways that do not occur for most men. Relationships are an important aspect of women's lives and because women tend to live longer than men, their chances of being widowed are much greater. There seems to be a double standard when it comes to dating and marriage for older women. Older men receive social approval for dating or marrying younger women; however, older women are more limited to the company of same age or older men. Because women can be expected to live longer and healthier lives than men, they tend to live out the later years of their lives with other women.

Rapid advancements in technology and industry also tend to alienate the older population from familiar ways of performing tasks at home as well as in the workplace. Their sense of mastery over things in their environment diminishes, and society's progress can be frightening and overwhelming for them. Even a simple task such as making a phone call can be an upsetting

experience with all the button-pushing, recorded messages and confusing codes. Their sense of value and self-worth can decrease rapidly as they feel that they no longer have anything worthwhile to contribute to society. They feel as if they have moved from a window of opportunity to a closed door; from "anything's possible" to being left behind with few choices.

Roles within families also begin to change as people reach advanced ages. Poor health in the elderly particularly leads to a need for them to rely on others. Adult children, or other younger family members, assume responsibility for the management of their parent's or older relative's affairs. Frequently this reversal of roles leaves the person being cared for feeling out of control, angry or worthless. The fear of being dependent is the most pervasive and disturbing thought with which the elderly contend. The need of increasing assistance can be damaging to their self-esteem. When a person can no longer manage their personal affairs without assistance, their will to live can diminish quickly. It is important for adult children or other caretakers to be aware of these feelings, and to do what they can to keep the older person as informed and involved as they are able to be.

In summary, change and loss are major issues of aging. This is not all bad. What we also need to remember is that many people experience happiness and enjoyment into the late stages of their lives. Insight into the dimensions of losses can increase not only our awareness, but also our understanding and sensitivity to their special needs. Although the challenges of growing old are difficult, it is comforting and reassuring to know that God is always faithful. Lamentations 3:32 states, "Though He brings grief, He will show compassion, so great is His unfailing love."

# **Counseling the Aged**

The aging population is in need of qualified, caring people to assist in this final stage of life. Pastors are very often a primary contact person for people in distress. The older population is more likely to talk to their pastors about specific problems or issues rather than contact a professional therapist. Therefore, you may be called on to provide or even to initiate a great deal of counseling to the aging in your congregations.

I urge you to take some time to consider and evaluate your own personal beliefs, stereotypes and prejudices about the elderly. These attitudes will permeate all your interactions with the aging, and it is necessary to examine those beliefs in order to provide older Christians with loving help. We as humans tend to categorize people, items and ideas as a way to understand the world in which we live. However, we need to guard ourselves from stereotyping people unfairly.

Although the scope of aging issues and concerns that you may be asked to assist with is wide and varied, some common themes exist. These themes include preparing for death, resolving unfinished business, dealing with grief and defining roles and responsibilities of family members.

#### **Preparation for Death**

Ideas regarding older persons' views about death are rooted in theories about aging and development. Eric Erikson's eight stage theory of psychosocial development asserts that the final stage of life is Integrity vs. Despair. Integrity is the goal of old age and is defined as the awareness that one has come full circle and is satisfied with the outcome of life and thus prepared to accept death. The older person who fails to achieve a sense of integrity in their life is despairing, according to Erikson. These people would like another chance to live their lives in order to correct past mistakes. They see death as an event that cuts life prematurely short. Regret,

depression and sadness characterize the old person who is not able to successfully resolve this last psychosocial crisis of Integrity vs. Despair.

The term death triggers a variety of thoughts and feelings in people. Younger people often assume that when people are old they will just accept death's impending arrival. This is not necessarily true. The quote on my devotional desk calendar today reads "What's to be done? Everyone wants to go to heaven, but nobody wants to die." Although Christians believe in eternal life through faith in Christ's life, death and resurrection, there may be many who are still doubtful and afraid.

Death is perceived as a loss by many Christians. The loss of human life also means the loss of our bodies as we know them, facing unknown events that occur after death, the loss of opportunity to complete plans here and be with our families, and the worry about how surviving family members will manage without us.

In order to offset thoughts about death, older people commonly engage in reminiscing. I think many of us can remember when our parents or grandparents told us a story that began with the words, "Back when I was young..." Reminiscence as social interaction links the older generations with the young. Themes of memories include the need to remember being loved in the past and to feel loved today. Old people can benefit from our willingness to listen to their recollections which have made their lives meaningful.

In helping older Christians prepare for death, life reviews and reminiscing may be helpful. A life review is a recalling of past experiences and a re-evaluation of them, with the goal of understanding how these experiences have shaped their lives. Life reviews "serve as a compass to measure one's position in life for only when we understand where we have been can we decide where we wish to go" (Adams, 1979, p. 45).

As elderly people engage in life reviews, it is also important to keep in mind that not all life experiences have been pleasant. Reviews can cause anxiety and anger or generate guilt and sorrow.

An elderly person could come to a conclusion that life was meaningless or worthless, which could lead to depression or suicide.

#### **Unfinished Business**

Upon the completion of a life review it is very common for people to initiate changes and settle "unfinished business." Unfinished business generally consists of mending relationships, completing tasks that were started but never finished, settling estates, and trying to make "right" the wrongs of the past. The purpose of settling unfinished business is to make peace with one's self and with one's life prior to death.

People make peace in many ways. Some examples include making a long distance trip to see relatives that one hasn't seen in many years, making arrangements to meet with an estranged family member, forgiving someone who caused hurt, writing a will or giving away cherished possessions to meaningful people, or requesting God's forgiveness for sins of the past.

There are some people who have the insight and ability to tie up the loose ends in their lives, but others may not know where to begin or how to go about these tasks. Others may know what needs to be done, but no longer have the opportunity to carry out their plans due to a variety of circumstances such as health, financing, lack of information or death of significant people. This powerlessness may lead to depression and anxiety.

Pastors can help by providing spiritual and emotional support. It is important for the older person to talk about what has happened in the past, but it may also be necessary for you to gently encourage the individual to move forward so that growth and change can take place. When people dwell on the past which cannot be changed they become powerless over the future. Not all people will resolve their unfinished business. In those instances it may be necessary for them to work on how they can cope, to accept how God has directed their lives, and how he continues to do so.

## **Dealing with Grief and Depression**

Grief and mourning are natural responses to any loss, not only death. For many older people, there are continuous losses and they may not even recognize what loss they are grieving about. Reactions to loss are as varied as people and personalities, and if we are to assist the elderly in any way, it's necessary to recognize individual differences in views about grief and death.

Grief is a personal and very complex experience. In many cases it may take years to resolve, and in some cases it is never resolved. When grief work is not completed, underlying feelings can often grow into depression. Depression is by far the most common emotional problem of late life (Rzetelny, p. 144).

The symptoms of depression occur in many forms:

- fatigue and loss of energy
- frequent physical complaints
- insomnia or hyperinsomnia
- diminished ability to think or concentrate
- recurrent thoughts of death or suicidal ideas
- feelings of worthlessness
- sudden weight gain or weight loss
- loss of interest in pleasurable activities

When dealing with depressed people it is important to encourage them to talk about their feelings. Show an interest and a willingness to listen by asking questions and urging them to make their needs known. Pray with the individual and assure them that God will neither leave them nor forsake them, and affirm God's power to heal and restore. If depression continues and severely affects an individual's life, an evaluation by a physician should be recommended.

### **Changing Family Roles**

Families of older people also describe the stress, worry, fear and anxiety that their aging counterparts feel, but from a different perspective. Children who had depended on their parents now begin to take additional responsibilities as their parents depend more on them. Roles in the family system may change, depending upon how much assistance mom or dad may need. It is vitally important to remember that this is not "role reversal," but a change in role responsibilities. Role reversal would imply that adult children take the role of parent, and aging parents now take the role of children. Elderly parents do not need to be parented, however, they may require assistance in some areas of their lives.

Family members may need to be reminded that aging adults have the right to make decisions which affect their lives; however, if they are no longer capable, adult children and other concerned family members may be called upon to assist. Decisions about health care, supervision, transportation and finances are just a few examples. This decision-making can be

overwhelming, especially if it causes conflict between family members. It is extremely difficult to make rational decisions when emotions are running high. Guilt is a large but improper motivator for decisions which are made in response to a parent's need.

Many Christian families struggle with this guilt when making the decision of where their elderly parent will live when they can no longer live alone, or who will provide care. These decisions are not easy or simple when one has to consider time away from employment and financial loss, as well as responsibilities to their own family.

People provide care out of love, but there may be other underlying reasons as well. Be aware of caregivers who play the role of "rescuer," trying everything in their power to take away all the pain for their relative or desiring to make everything perfect. There are some adult children who feel that something was lacking in their relationship with their parents and now attempt to make up for this to reduce guilt. Others try to parent their parents, treating them as if they are children.

Caregiving is a rewarding experience for those who are up to the challenge and sincerely desire to perform the role. On the other hand, it can be extremely physical and emotionally demanding. Watching a person whom you love become old can trigger many emotions about your own aging process. It can also help a person appreciate the time they do spend with their aging loved one.

If I had one impression to leave with you of my work with the families of aging adults, it would be their desire to do what's best for their relative, without consideration for their own needs. These families often need guidance in setting limits so that they can assist their aging parent and yet live a life of their own.

Whether being a caregiver means taking mom to the grocery store weekly or providing dad with total care around the clock, these people need support and a place to vent their feelings. There are a variety of support groups for caregivers available in the community.

# **Closing Comments**

Elderly Christian people have many issues to address as they continue to age. They need to be assured that there are Christian friends who care and who are willing to assist them. It is my prayer that the information within these pages will be useful to you as you serve your Lord, your families and your congregations. Although this information focused on many negative consequences of aging we should remember God blesses us throughout our lives and that elderly people can experience contentment, peace and joy as an aging child of God.

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