

# [Jordan hand](https://assignbuster.com/jordan-hand/)

[](https://assignbuster.com/)[Life](https://assignbuster.com/essay-subjects/life/), [Death](https://assignbuster.com/essay-subjects/life/death/)

Jordan Hand AGER 4550 Prompt 3 The Issues of Longevity While we may struggle to find the fountain of youth, the fountain of extended old age seems to be right around the corner. New possibilities of extended longevity have risen much debate and question considering the vast amount of positive and negative effects it could have. Though we are able to use science to see how we age, it is still a mystery as to why. Scientist approach this question very simply, is aging an effect of our environment? Or do we come out of the womb with internal biological processes that age us? Though we can not answer the question “ why" as a whole, we do have many theories and ideas that explain some aspects of the aging process. One is the wear-and-tear theory, which is exactly what it sounds like. The use and abuse of anything causes damage, though most of the time this damage is not noticeable, we are constantly inflicting harm upon ourselves, sun exposure, poor diet, bad posture, etc. Luckily the body is made up of millions of cells which immediately begin to repair the damage, and though most of the time our bodies are able to repair the injuries, the quality continuously goes down until we are incapable of rebuilding. Then there is the idea that aging is simply inevitable, scientifically our body is required to work in a specific way in order to be functional, yet these required functions may also bring us harm. The problem seems to lie in the design, an example given in Moody’s Aging: Concepts and Controversies, explains that the way our bodies burn oxygen in metabolism, produces by-products that are toxic to our bodies. The inevitability idea is that the changes that come with age are simply effects of required body functions. The human lifespan is generally 85 years, give or take 15, this statistic seems to suggest that no one lives to be much older than 100 years. This is not true, there have been thousands who have lived to be much older than 100, the longest any human has ever lived was 122 years. Though it can not be precise, science assumes the maximum human lifespan to be around this, 122 years. Scientist have been investigating the idea of increasing longevity and raising the maximum human lifespan for decades, though there are theories, the actuality of this possibility is still unknown. Scientist have proven successful in extending the longevity in lab animals, using simple dietary restrictions scientist have been able to increase the lifespan in rodents and primates up to 40%. The method consist of cutting 40% of calorie intake, while still providing necessary nutrients. It is unknown whether or not this method would be successful in humans, but if it were to, it’s been estimated to add 30 years to a human lifespan. There have been other laboratory experiments using genetic manipulation that have proven to successfully extend lifespans, but are still in the early stages of development. At first glance, the idea of living longer than expected seems like a good thing, after all isn’t that what we are all trying to do? Well, this may not be the case, lets consider some of the negative aspects of extended life. Most of our physiological functions begin their steady decline around the age of thirty, and by the time we hit old age our bodies will have already lost much of their abilities to repair and defend themselves. Even in our sixties, twenty years before the end of our current life expectancy, we are extremely susceptible to chronic illness and disease. It varies person to person, but the quality of life begins to significantly drop many years before we die, and when extending longevity you are essentially lengthening your bodies weakest years. What happens after you outlive the current life expectancy of 85 years? You continue to grow frail, and will exceed the morbidity levels of current lifespans. Living longer does not mean living healthier, the issue with longevity is that you are lengthening the weakest years of your life rather than the strongest. Society today is far from prepared to handle the changes that would need to be made to support an extended maximum lifespan. Excluding different social interactions, and emotional connections to the lifespan, what about the systematic institutions set in place by our societies that are based on life expectancy? The standard age of retirement would have to be re-established, probably in relativity to the new life expectancy. Our judicial system would be affected, it would have to be decided upon whether “ life in prison" was still a fair punishment now that criminals are living X amount of years longer. Then if it was ruled un-fair, how many years would compare equal to the previous life sentence? Social Security and Medicare would also be dramatically affected by the increase, and a new age of “ senior citizenship" would have to be set. I believe that at the rate we are aging currently, 85 is the perfect age for life expectancy. We live just long enough to effect society with our views, discoveries, and opinions, and that we die quickly enough for our values to be instilled in later generations but not set in stone. We are able to teach a younger generation what we believe in, and our death prevents the our ignorance from being upheld restricting societal growth. Society is only able to grow and age if we allow the constant birthing of ideas, values, and children. Prompt 1 Aging and the Social Responses As we age many things change, our bodies, our relationships, our economic situations, and our lifestyles in general, but we have a very (possibly overly) systematic view on aging in our society, our social model of aging if you will. We have all of these theories that explain that everyone should act certain ways at certain ages, we assume different levels of respect for everyone based on age rather than worthiness. You could say that we almost define someone by their age rather than their achievement’s, personalities, or behaviors. We have constructed social normalities that regulate everything from one’s recreational activities, to medical treatment, to social support. I question though, are these instilled rules of aging accurate? Can we really predict, and analyze the social and emotional behaviors of an entire age group? According to Aging: Concepts and Controversies it is the social structure’s that may change with age that cause someone to change their patterns in leisure participation, not aging itself. The research of Harry R. Moody states that as long as an older person is able bodied their leisure patterns will not change all that much, and those still in the labor force use their time very similarly to young people. It is not until someone reaches the “ oldest-old" (85 years and above) that their time usage changes all that drastically, and this is impart due to loss of companions, and physical disabilities. I don’t believe that there are many social responses to the changes in leisure participation, because according to studies the change in participation among the elderly is very minimal. With those age 85 or older I do believe there are more social responses, but I believe they rely mostly in ones self. The oldest-old may experience feelings of loneliness, and may question their self worth as they see themselves approaching death. Aside from the oldest-old though, there are very little social responses to changes in leisure participation. I was surprised to discover that the participation differences between the middle aged, and the old are so minimal. Considering I have been brought to believe that with retirement, and old age, comes drastic lifestyle changes, stereotypical images of golfing, fishing, and book clubs come immediately to mind, discovering that the free time gained from retirement is generally filled with television and other media leaves me feeling disappointed and mislead. As we all know, when we age we begin to require more medical attention than we once had. We suffer with general wear and tear, our immune systems decline, and we are struck with diseases. Though some of these things will require more trips to the hospital than others they all have a major impact on our social environments. First and foremost, monetarily speaking, depending on what ails us we could be spending more money on co-pays, and prescriptions, than our families and/or hobbies. We spend our lives attempting to develop and maintain a specific lifestyle, but when we get older suddenly a portion of our budget is no longer being spent on what we want or enjoy, but on medical services. What is this newly directed budget taking away from? Is it groceries? Club memberships? Family? What about the time we are spending maintaining our aging bodies? We are taking away from the time we used to spend on other things. I believe this is a big part of the disengagement theory, the elderly could find themselves becoming disengaged from society, not because they are just “ too old, " but because they are loosing their time and their money, and depending on their conditions, their abilities to be an active member of society. We are led to believe that with old age comes feelings of abandonment and loneliness, but Harry R. Moody has gathered facts to show that this is yet another inaccurate stereotype of the old. Over 50% of Americans over the age of 65 are married, an equal amount have at least one sibling, and around 75% of the old are grandparents. So many American seniors have an immediate familial support system to help them as they progress from old, to old-old, to oldest-old. Support can be anything from an occasional phone call, to a daughter sitting along her elderly father’s bedside helping him differentiate between medications. As we discovered earlier, there is little change in the leisure activities of the old, so it is assumed that one would have maintained a network of friends to rely upon as well. We are encouraged to believe that it is our moral obligation to offer support to our friends and family, and particularly our elders, this has resulted in a vast availability of support networks offered to the old. When I look at myself, and in-vision my aging process I feel both excitement and fear. I have always respected and admired the “ young-old" those who were active, and still trying new things even well into their old age. Growing up I watched my grandparents become terminally ill, and slowly leave their house less and less, until they were no longer able to. I always wondered how different their behavior might have been had they not been sick. In one aspect I look forward to reaching my old age, I hope I am healthy and active, to be looked upon as wise, and respected. On the other hand I have met very few elderly people who were not eventually diagnosed with a detrimental disease, and having never been around anyone who remained healthy after reaching 70 years, I struggle to imagine myself at an age I would so like to experience. I am only now twenty one years old, I eat well, exercise semi-frequently, and I am already beginning to see my body change and age in negative ways. I have begun to develop arthritis in my hands, I constantly feel the aches of where I have previously been injured, and I’m slowly starting to see spider veins in my legs. I fear that these troubles are only the beginning, of a long, hard road of aging. In my studies I am beginning to see that the generalized behaviors of age groups I have been raised to expect may simply be that, generalizations. We can predict the biological steps of aging, but I am not sure that we can base our sociological theories on age alone. Even when acknowledging age stratification, there are still many factors that affect a persons lifestyle with age, be them social, physical, or environmental they must be included in determining social behaviors. Prompt 4 The Theories of Aging Sociologist have developed many theories regarding the aging process in attempts to explain why we all have similar experiences that seem to come with age. Children, adolescents, adults, these terms define more than just our ages and bodies, they define who we are. Our attitudes and behaviors also change by what we feel is appropriate for our age group. Society will not accept us if we do not " act our age," we have a strict set of norms for these age groups, and they must be followed. This is the basis of age stratification, or the separation of society by chronological age groups and distinctive characteristics. We believe that in life things happen in a specific order at a specific time, this social timeline ideology is called the social clock. It means that we are socialized to believe life happens in a time line, we get married in our twenties, we become settled in our careers in our thirties, retire in our sixties, and we dis-attach from society as we age from there. This is called the disengagement theory. The disengagement theory of aging is the idea that it is normal, functional, and beneficial for older people to become separated from active roles in society. The theory sparks my interest simply because being “ disengaged" can mean a variety of things. The first thing that comes to mind when thinking about the elderly becoming disengaged is retirement, but it is more often than not that when people are no longer focusing on work, they begin spending more time with other activities such as family or leisure. So is this really becoming disengaged or is it simply shifting your engagement from one position to another? The textbook Aging: Concepts and Controversies mentions that disengagement may not necessarily refer to the outward behavior of the elderly either, but the inner attitudes towards life. But what does it mean to become inwardly disengaged? I believe it is the mental processes behind outward disengagement, whereas one might continue to work in their later years, but no longer feel mentally connected, they may feel a loss of interest, its as if they continue on going through “ the motions". I believe the disengagement theory is contradicted by the theories of continuity and activity though. Assuming that one is considerably heathy, and able-bodied, these theories state that rather than disengaging, the elderly will continue to live their lives as they always had. The continuity theory states that people are inclined to maintain as much as they can, the same habits, personalities, and styles of life that they had developed in earlier years. The theory explains that unless ones body renders them unable, they will make efforts to stay the same. The activity theory has similar values, “ the more active people are the more likely they are to be satisfied with life. " After understanding these theories I believe that society disengagement only occurs when one is limited by negative effects on the mind or body. Of the theories mentioned I feel that I can currently relate with the activity theory the most. I believe we are all on a constant search for something to occupy our time, that boredom not only creates a mental plateau, but an overwhelming sense of dissatisfaction. The human desire for pleasure must stimulate this hunt for constant occupation and activity, for even the hunting gives us a sense of satisfaction.