Editorial Note on Gerontology

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Editorial

Gerontology is the study of aging and older adults. The science of gerontology has evolved as longevity has improved. Researchers in this field are diverse and are trained in areas such as physiology, social science, psychology, public health, and policy. A more complete definition of gerontology includes all of the following:

- Scientific studies of processes associated with the bodily changes from middle age through later life;
- Multidisciplinary investigation of societal changes resulting from an aging population and ranging from the humanities (e.g., history, philosophy, literature) to economics; and
- Applications of this knowledge to policies and programs.

The Difference Between Gerontology and Geriatrics

Gerontology is multidisciplinary and is concerned with physical, mental, and social aspects and implications of aging. Geriatrics is a medical specialty focused on care and treatment of older persons. Although gerontology and geriatrics have differing emphases, they both have the goal of understanding aging so that people can maximize their functioning and achieve a high quality of life.

Challenges Faced By the Aging

Unlike previous generations, those moving into their senior years are enjoying the benefits of innovations in healthcare and knowing more about preventive actions to take to avoid many health problems.

Still, there are issues that those in aging services management will face in helping those who are 65 and older. They include:

- Obesity, which has grown into an issue facing the young and old alike
- Alzheimer's disease
- Dementia
- Diabetes
- Dealing with chronic pain

For those with an interest in helping others and a desire to work with older Americans, the field of gerontology offers many opportunities.

However, experts generally break down aging in older adults into five basic stages:

- Independence.
- Interdependence.
- Dependency.
- Crisis management.
- End of life.

Independence (AKA, They Really Don't Need Help)

The vast majority of older adults choose to stay in their own home during this stage of the normal aging process because, quite simply, they can.

During this stage of independent living, seniors can handle pretty much all of their needs and affairs on their own. This includes transportation, finances, health care needs, and more. No common activity of daily living should be too taxing. Mental and physical activity may experience a minor decline, but not enough to impact their lives.

Basically, age-related changes are minimal. They're likely in good health. They're self-sufficient and able to handle their own errands. And their quality of life is typically quite high.

If you looked at the aging process by decade, independence would include mostly people up to their 60s and 70s. With a smaller number of lucky seniors in their 80s — or even older!

While those in this group may not need help, this is a good time to sit down with them to talk. Evaluate their living situation. Plan for the future. And make any changes that seem necessary.

Take note of any existing medical issues that may be a risk factor and get worse with age, such as cardiovascular disease, heart disease, obesity, and high blood pressure.

The earlier you make plans for healthy aging at home, the better.

Crisis Management and End of Life (AKA, Medical Help Is Necessary)

By the time the vast majority of people reach these last two stages of the normal aging process — crisis management and end of life — they need more or less round-the-clock care. And possibly quick access to more robust health care facilities. Because of this, they tend to be in assisted living facilities, nursing homes, or even hospice care.

Just like the dependency stage, many seniors reach these last two starting in their late 70s. However, some may find themselves here earlier. While others might not enter it until much later in their life span.