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# THE "EVENING SUN": THIRD AGE AND HEALTH PSYCHOLOGY

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## AGEING SCIENCE AND PERSONALITY EVOLUTION

When talking about the third age, we can either use a chronological criterion (from 60 to 75 years) or a functional criterion (what one does and what one is able to do). In particular, this second meaning is a subject of great interest for the most recent version of the "ageing science". To be more exact: the "science of the advancing age".

In fact, today the potentialities available for people who are more mature in years, are countless to the point that they can become a source of *remarkable positive change*. This moves the traditional boundaries of geriatrics/gerontology (in the past almost exclusively the dominion of the bio-medical sciences with a strong pathological-clinical perspective) towards softer areas, where psychology - particularly the one dedicated to health and wellbeing - is able to make a positive contribution to a fulfilling passage through this "phase" of life. Therefore, this period can be lived as a further "evolution", consequently as a cognitive-emotional enrichment, as well as a preparation for the so-called deferred "old age". Finally, the individual, the person has even more new instruments available to assist them in this evolution.

## THE THIRD AGE: REVOLUTION AND INNOVATION

In the more affluent western civilization, with increased longevity, the so-called "third age phenomenon" is becoming increasingly evident. Laslett (1989) correctly talks about "a fresh map of life: the emergence of the third age".

Gifted with freshness, third age turns out renewed, as the result of a total revolution based on the "continuing education", that leads to an improvement of the cultural processes and to the birth of the "senior" character. The "new elder" is, not seldom, a student (in a broader sense, because he is more educated, and in a specific sense, because he enrolls in institutions that offer courses, programmes, branches of learning, events, etc.: in conclusion, culture).

## THE SENIOR-STUDENT

In the past, when life expectancy was shorter (and the average life was even shorter), the classification was simple: on one side there were the young people (the growth and effectiveness age) and on the other side the "old people" (the declining age with progressive ineffectiveness). The word "elder" (except when old age was supported by physical health and wisdom) had substantially a *negative connotation*: sickness, solitude, absence of self-sufficiency, inability, death.

Today, a new perspective revolutionizes the concept of "old age". The word "senior" points out a specific *positive connotation*. Moreover, there is also a linguistic justification: this concept is not absolute, but comparative. In the Latin language the equivalent of "old person" is

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"senex", whereas "senior" means "older than": consequently, the senior (third age) is more expert, and sometimes even more cultured, than the adult (second age).

Nowadays the word "senior" indicates an elder who is fundamentally healthy and rich in remarkable potentialities, matured by the experiences stored up. And experience is obviously an historical (and not biological) fact, a cultural-acquired (not natural-innate) element, a psychological-subjective (not a physical-objective) fact.

This renewed elder could very well be described as a self-taught person or, better still, as a student attending the Universities of the Third Age or similar institutions (Lazzarini, Morelli, Peirone & Reginato, 1985; Gerardi & Peirone, 1991; Università Primo Levi, 2001; Re, 2004). Reading and gathering information, knowing and using creativity, learning methods to optimize his knowledge: these functions and other typically intellectual and cultural functions, characterize today's elder.

### **THE WELL TEMPERED FREE TIME: AN EPOCHAL CHANGE FOR THE EX-ELDER**

Liberated from the apprehensions of the "obligatory" job, today seniors often enjoy considerable privileges: disposable income, physical health, logistic autonomy, possibility to "have time" (for friendship and affectivity, for sexuality and study, for travels and amusement). The third age, appropriately re-invented and re-formulated, can be lived in a satisfying way. *Time pushes towards quality*: it seems like an advertising slogan, but it's pure reality!

In times past (and increasingly in recent times) the so-called "old age" (term become today narrow and limited) has been also interpreted positively (Lazzarini, 1994; Macchione, 1994; Antonini, 1997; Bengtson & Schaie, 1997; Cesa Bianchi, 1998; Levi Montalcini, 1998; Lucchetti, 1999; Vergani, 1999; Snowdon, 2001; Vecchi & Cesa Bianchi, 2002; Petter, 2003; Cugno, 2004; Di Prospero, 2004; Goldberg, 2005).

In the third millennium, the ex-elder can become "*a subject, a protagonist as well as a self-sufficient, autonomous, active person*". The world has changed. The human being has changed. The increased *life span* brings into consideration of a the third age as no longer the last step of the existential cycle. New phenomena (better life conditions, both material and immaterial) revolutionize the psyche (thoughts, attitudes, emotions, relations). In the "new time" *the new anthropological figure named "senior"* appears.

### **THE SEARCH FOR WELL-BEING**

The "*Third Age*" (purposely capitalized to emphasize its symbolic-planning aspect) - considered in terms of well-being (especially psycho-cultural), and at the same time in terms of attention and tension (positive tension: eu-stress) towards health - is able to "*progress*". The brain (as a biological structure) loses some functions with the passage of time, however at times it can replace them, compensating for them, or even taking them over. This applies even more so to the mind (cognitive-intellectual capacity) and to the soul (emotional-affective-relational capacity). Nevertheless, it is necessary to consciously move in this direction, "constructing culture".

Certainly, it is not all a "bed of roses": however, maturing well, the human being can still gain significant advantages: prolonged time also means greater opportunities for integrating thought and experience, empathy and intuition, emotionality and affectivity. In just one expression: *existential qualitative growth*.

### **YESTERDAY AND TODAY: MODELS IN COMPARISON**

If the old model was "*third age = illness-uneasiness and pessimism*", the new model is "*third age = health-wellbeing and optimism*". The old "old age" is disappearing (at least in the Western World), in favour of a "young third age".

In the old viewpoint "elderly" has a negative connotation: "elderly = old, doting, foolish, and ill / prone to illness". In the recent viewpoint "senior" has a positive connotation. Today's senior is "younger inside himself" than the elderly of yesterday. *The senior is a sound older*

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*person (and not just "old and sick, deteriorated and useless"), a motivated elderly person; active physically, mentally and above all culturally.*

It is not by coincidence that the word "elderly" is less and less liked by the older persons themselves... preferring instead "seniores/seniors", preferring "third age"... Words give witness to the changing times. Until just recently there existed perceptions, experiences, assessments, opinions, prejudices, stereotypes which were primarily negative: "elderly", and even worse the "old old", caused unease. Instead, the new image of the senior is a sign of changes and innovations: third age is perceived as "adult development", as *a further evolution (and not involution) of the adult*. There is still "room for life": achievable aspirations and favourable outcomes.

Today, generally speaking, the senior enjoys good health and has "a zest for life."

The new concept of third age, which held by the senior, is that of a time without age, a new stage of life rich in culture, good health and wisdom. The senior: a new and well balanced older person, without excesses or abuses, does everything in moderation. We are speaking of giving life today and even more so tomorrow, to a sensitive and alert "*senior faber*", capable of constructing and re-constructing himself continually (which is precisely the sense of "*continuing culture and education*").

### **ALWAYS LESS THE ELDERLY, ALWAYS MORE THE SENIOR**

The traditional image - today largely overtaken - describes the elderly /old old in ways that swing between two extremes, both incorrect: the depressive, holier-than-thou (negative) pole, according to which the horrible, ugly old age does exist; and the idealized-maniacal-consoling (exaggeratedly positive) pole, according to which a fantastic, marvellous, beautiful old age does exist.

Between these two extremes lies the modern third age, which is more psychological than physiological. The senior, as "one who is aging", as an older person "with timely injections of youth", as "an alert and motivated" older person, as an older person "well tempered by culture", can live happily for the long time still ahead.

### **ALWAYS MORE COMMITTED**

No longer "abandoned on a sad and solitary bench", nowadays seniors keep themselves busy: their time freed-up is used for cultural events and tourism, to "be grandparents" and do voluntary service, for non over-demanding sports and new amorous interests...

In doing so, they contradict the really important concept of "*disengagement*" elaborated by Cumming & Henry (1961). Now, the senior does not "let things go", does not lose interest, does not retreat into himself, does not limit his existence, does not "let himself go": he, therefore, adopts the "*successful ageing*" principle, as we can read in the works of Havighurst (1963), Baltes & Baltes (1990).

*The elderly tends to disengage himself, while the senior engages.* More precisely: the senior is an engaged older person (actually re-engaged). And cultural activity is his major engagement.

### **THE SENIOR'S DYNAMIC IDENTITY**

Although it is undeniable that a physical decline begins with the third age, it is also undeniable that this phase of decline can be greatly slowed down; at times, even reversed, with mental growth (as well as emotional and affective). In doing so, "*Crónos*" can be defeated: *slowed down, stopped, even reversed...*

The re-activation applies to the body, but even more so to the personality: which is stimulated to change, and to change positively. The much-feared ageing becomes a "virtual reality of the anticipatory type", making possible a not insignificant planning. The third age, understood as "*seniorship*", is a dynamic phenomenon: the personality, anything but static and crystallized, is stimulated to continuous change, often intentional and leading to objectives

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favourable to "development". The identity no longer "in-volves" itself, but rather "e-volves", in the perspective of an education and promotion of health. The roles and the Self adapt themselves to the passage of time (Qualls & Abels, 2003).

Of course, not all elderly have already become "*seniores*" nor do they know how to do so. Not all of them are healthy, calm, good and wise. However it is really the culture, enriched with health psychology, that can avoid frustrations and disappointments, or at least avoid certain pathological and pathogenic excesses. It is by now an established fact that in the ultra-modern civilization "*the elderly are moving to become seniores*". Amongst the many examples, it's enough to mention the enormous proliferation of "Universities for Seniors" (called by different names and with different acronyms, but all substantially going in the same direction). One of the biggest social challenges of today (and of tomorrow), is the possibility of providing all the elderly/seniors with a reasonable and satisfying quality of life.

### **THE HEALTH PSYCHOLOGY FOR THE THIRD AGE**

WHO has for some time already highlighted the positive meaning of "presence of health and wellbeing". "Absence of illness and malaise" (the negative meaning) is not the only sense of "health". The human being, as a person and an individual, seeks a condition of wellbeing (physical, mental, social, environmental, all at the same time), a condition essentially complete, harmoniously and dynamically balanced. The concept of health is expanding: biology, psychology, sociology, ecology and cultural anthropology interface with one another, from the viewpoint of a healthy and serene life style (Gerardi & Peirone, 1989), a *life style* actively aimed at *feeling well / feeling better / feeling better and better*.

In the light of that, the psychology of health incorporates some focal points such as: prevention and treatment of illness, promotion and defence of health, knowledge of the aetiology and diagnosis of illness, analysis of the attention system towards health, elaboration of adequate policies of health. Therefore, taking these foundations posed by Matarazzo (1980), it's all about preventing negativity and promoting positivity (Bertini, 1988).

At this point, "active psyche" and "active brain" meet in a logical way with the concept of "senior" (re-cultured and re-socialized), so that the theoretical fertility and the practical efficacy of health psychology are undeniable, both in general and in the numerous applications in function in the third age (Zani & Cicognani, 2000; Cohen, McCharque & Collins, 2003; Bruchon-Schweitzer, 2005; Grano & Lucidi, 2005; Oblitas, 2006).

No more a necessarily involutinal phase, the third age, in cultivating the dictates of health psychology, looks at ageing in a different way, confronting it to a large extent in advance and with patient reconstruction. In this sense, "culture", "study", "learning", "participation" etc. can present themselves as the symbolic and metaphorical "medicine" of youth.

### **THE SENIOR'S EVENING**

The new concept of the third age sees "*a time without age*": this expression, symbolic and prospective, leads to a time enriched with culture, wisdom and health (Peirone & Gerardi, 2009).

Sunset is a process. It's a slow movement of the sun; it's not a moment in time which suddenly truncates life. The languor and longing caused by the sunset offer space for planning: one can still go ahead. The cut is not sudden, there is a slow fading. The whole process is neither abrupt nor traumatic. Safety and hope still have a place; with serenity one can age well.

With no prejudices anymore nor the many worries of the past, the new third age can be thought as an island substantially tranquil, within the existential archipelago: an island from which, with the calmness deriving from a wise meditation on the sense of life, one can contemplate the setting of the sun: a sunset still long and warm.

The theoretical (and practical!) foundation of the "new elderly" has some well defined characteristics. The "senior" has to be seen as *an actively aware subject*: most of all, *still*

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owning his own existential condition, owning his own psycho-physical life within the culture. As a renewed and transformed subject, physically in good shape as well as "participating and active" from an emotional and cognitive-cultural viewpoint, he considers himself a protagonist of his own well-being aiming towards a holistic balance (as body and mind; as an individual and as society; as nature and culture).

Pulling together the conceptual and methodological threads, the mechanism of the entire cycle of life, complex but also rich in fertile development, can be founded on the following key-concepts:

- *time* (as a changing element, in perennial movement);
- *ageing* (acquisition of age: neutral term, better in comparison to "old ageing");
- *senior* (as a semantic revision of the concept of "elderly": not anymore a limitation, rather an opportunity);
- *third age* (as a functional more than a chronological concept, no more an isolated / ghettoized reality but rather open to dialogue for all the other age brackets);
- *new identity / new identities* (as an existence lived dynamically, no longer in a closed way, but instead openly);
- *psycho-cultural attitude* (as a subjective way of confronting the vital process and consequent increase in value of the information input-output);
- *health psychology* (as the optimal scientific study for researching the state of well-being);
- *soundness, serenity and wisdom* (as main vectors of the life-style, desirable and feasible particularly in the condition of seniorship, interpreted as a resource rather than a problem).

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