

PSYCHOLOGY FOR HEALTH AND SOCIAL CARE

APPLYING PSYCHOLOGICAL PERSPECTIVES IN HEALTH AND SOCIAL CARE

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The definition of psychology

Psychology is the science way to investigate the intelligence and how human act towards one another. It can be describe as way of how people feel and think in the world. This involved the growth from child, infant, adolescence, adulthood, older age and how human being struggle with mental health at one time in life and it also includes many aspect of study like the health, social behaviour, cognition, emotion, personality, social interaction, and clinical. The first psychology laboratory was opened in 1879. The objectives are to look for result that are real not a just an opinion that is incomplete (McLeod S. A., 2019).

Having defined the psychology, there are so many stages of human development and one is going to be discuss which is late adulthood age. Late adulthood can be classified into three because life expectancy has enlarged in the last 100years; late adulthood covers different age variety, so it is shared into categories such as the “young old” (65-74years), “old old” (75-84years), and “oldest old” (85+ years old). The still working, married, active and fairly healthy are classify as young old and it is similar to middle aged adult. The old old have medical issues and daily problems; and the oldest old are vulnerable and needs long term care. The stages of human are totally different in brain abilities and social connections. Their psychological needs are different and also nutritional needs. To be healthy psychologically, human must endeavour to complete the psychosexual stages successfully. If a stage is not complete mental deformity can occur (Lumenlearning).

Physical development in oldest old (85+years old)

Growth in late adulthood automatically influences the appearance, sensation and brain abilities. Changes that appear in late adulthood include the beginning of dull sense, wrinkles skin, age spot growth “called Liver spot”, memory loss, hair turns gray and thin, less elasticised skin and thin, hearing and vision decrease, muscle system reduce and immune system gets weak toenails become thick and hard (Harcourt, 2020). The rate at which people age and how it affects their view in life is different from one person to another. The late adulthood (85+ years old) depend mostly on people for assistant; there is limit to what they can do by their self. Some of the late adulthood is battling with one sickness or the other; hereby they need a long term care and may be living in a nursing home. What the late adulthood are likely to have is more experience of life, wisdom, understanding and patience, worth of life despite the physical changes that may happen.

At a particular time, late adulthood affect the eye lenses, it discolour and becomes firm, interfering with the ability to see and read. Most elderly would have been blind without the corrective glasses. Hearing diminish, loss the ability to sense high- pitched sounds, and this may lead to the ability to hear properly. The late adulthood hereby think otherwise about the people whom they think are whispering or talking about them, rather than accepting faith of hearing loss.

During late adulthood, most elderly start to notice sudden reduced response time to their impulsive events. Aside changes in appearance and boring in memory, body action becomes slow and the abilities to kick start it continue to decrease with the elderly.

Adulthood also affect sexuality negatively. Older female vagina lubrication produces less and become less stretchable because female hormones levels are reduced. For the older men they are unable to get erections and orgasms unlike the young men. This may be cause by low level of the testosterone and smaller amount secretions from the ornament sex glands. Similarly older men have less to discharge or waiting time before they gain back their erection and may last more.

The physical difference in adulthood does not mean to stop having sex; they find sex slower and extra bodily than young ones. In fact, adulthood female calm down during sex because there is no fear of pregnancy (Harcourt, 2020), (Lifespan).

Theories

There are some psychological theories that are related to lifespan development such as

Freud's theory of psychosexual development

Erikson's theory of psychosocial development

Piaget stages of cognitive development

Kohlberg's theory of moral development

The two older adulthood psychosocial theories that are related to the essay are going to be discuss below;

Erikson's theory of psychosocial development

Was name that rings bell in the parenting magazines? Erikson was Neo-Freudian psychologist who established lots of the essential doctrines of Freudian theory but enhance his own and viewpoint. Erikson theory of psychosocial advancement revolved on what is branded as epigenetic principle, which recommends that human being pass through a chain of eight stages. Each stages we face a difficulty. When overcome the difficulty, we develop psychological power or behaviour character that assist us to become confident and healthy being.

Erikson's theory of psychosocial development gives us an approach to see the progression of an individual through a whole lifespan. There is limit to it like all the theory. Erikson has not specifically mentioned the way to settle conflicts." Neither" does he "detail" how you move starting with one phase then onto the next (Lewis, 2020), (McLeod S. A., 2018).

Erikson's Stages of Psychosocial Development

Approximate Age	Psychosocial Crisis/Task	Virtue Developed
Infant - 18 months	Trust vs Mistrust	Hope
18 months - 3 years	Autonomy vs Shame/Doubt	Will
3 - 5 years	Initiative vs Guilt	Purpose
5 -13 years	Industry vs Inferiority	Competency
13 -21 years	Identity vs Confusion	Fidelity
21- 39 years	Intimacy vs Isolation	Love
40 - 65 years	Generativity vs Stagnation	Care
65 and older	Integrity vs Despair	Wisdom

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(Picture from <https://www.psychologynoteshq.com/erikson-stages>)

Over 65 years old (Ego integrity vs. Despair)

The adulthood is a stage of reflection. This stage of development is the last till death. Human being thinks back on what they have achieved. Older adulthood, who are pleased with their reflection, experience a fulfilment and those with unproductive lives feels loss or unaccomplished living, “we feel dissatisfied with life and develop despair”, “often leading to depression and hopelessness”

Achievement at this stage would quick the balance of skill. Shrewdness empowers an individual to think back on their existence with a feeling of completion, and in addition acknowledge demise unafraid. Intelligent individual do not regarded by a stable state of ego integrity, however they practice both personality “integrity and despair”. Therefore, old age described by both ego truthfulness and depression as unpredictable states that should be changed (Mcleod S. A., 2018).

Freud's theory of psychosexual development

Psychological developments of childhood take place through five stages of psychosexual:

Sigmund Freud's Psychosexual Stages

Stage	Age range	What happens at this stage?
Oral Stage	0-1 year old	Children derive pleasure from oral activities, including sucking and tasting. They like to put things in their mouth.
Anal Stage	2-3 years old	Children begin potty training.
Phallic Stage	3-6 years old	Boys are more attached to their mother, while girls are more attached to their father.
Latency Stage	6 years old to puberty	Children spend more time and interact mostly with same sex peers.
Genital Stage	Beyond puberty	Individuals are attracted to opposite sex peers.

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(Picture from <https://www.psychologynoteshq.com/freud-psychosexual-development>)

The stages stand for “fixation of libido on a different” part of body. An individual develop “physically” some part of body become significant as “sources of potential frustration (erogenous zone)”, enjoyment or equally.

Sigmund Freud accepted life revolve around nervousness and enjoyment. Freud accepted that all nervousness is caused by development of sexual energy and that all pleasure comes as of its discharge.

First five years of life development are imperative to the formation of adulthood. If an individual can resolve differences or conflicts, they proceed to the next point of growth. But if something goes wrong, Freud thought they will remain stuck.

There are two reasons for people to get stuck according to Freud believed: (a) If individual are unable to meet up with their stage of developmental needs. Or (b) the stage of developmental are sufficiently meet up and they would not like to leave the condition.

The two reasons can lead to what Freud call “fixation” on the erogenous region related with the stage. The Freud’s theory is going to be base on the genital stage.

Genital stage

This begins from 12years and up or puberty until death (genital stage) and it is the stage of Freud psychosexual development. This is the point at which an individual starts to have hard sexual interest in the other gender.

Critically, Freud theory is not good at predicting (which is part of science goals) but good at explaining behaviour (which is part of science goals).

For this fact, his theory is “unfalsifiable” - it can neither be established valid or discredited. His interpretation may have also display research unfairness – Freud just decided on data which uphold his hypotheses, disregarded statistics and all other explanations.

On the other hand, Fisher and Greenberg (1996) challenge that Freud's theory should be checked concerning explicit theories instead of overall. Freud's thoughts of oral and butt-centric characters to need more help of evidence (Brito, 2020) (McLeod S. , 2019).

The psychological perspectives of older adult

Emotional Pattern

Individual stage of development has to do with their enthusiastic knowledge or the way they decide to react to difficult situation, as opposed to their age. At this stage the immune system is not active as it was previously to guard against diseases. Aging transform into declines, no matter the hopes and the efforts made.

In fact, totally mature grown-ups can have a low development level. That is the reason you may meet a lot more youthful individual who appears to be smarter than their years.

Their aging difference need be adjusted. Various types of emotional difficulties might grow if they fail to adjust effectively. For this reason, it is worth to engage the older adulthood on how to adapt to these passionate changes to prevent them from having more serious mental sickness (Legg, 2020) (Dr kiau, 2016).

Cognition Pattern

The investigation of psychological changes in the older adulthood is mind boggling. Academics shows that by the age of 70years and above the ability to remember things 30mins after listening is 75 per cent of the total remembered by the young ones. The older adulthood remembers contents by recognition than not having the cues of the, also this competence is usually very much held through life.

“However, the signs of cognitive decrease changes that are linked with older adulthoods are: Decrease inductive reasoning / slower problem solving, diminished spatial orientation, Declines in perceptual speed, Decreased numeric ability, Losses in verbal memory, and few changes in verbal ability”.

Behavioural Pattern

One unchangeable unavoidable truth is that individuals change constantly, regardless of how old they get. Maturing brings a course of physical and enthusiastic changes, which can prompt an variety of conduct changes that can baffle or stress a more recognized older adulthood's friends and family. Individuals age diversely and experience maturing contrastingly dependent on heredity, way of life, and mentalities.

Changes in older adulthood include - grumpiness, detachment, changes in character, unsocial practices and language trouble can be essential for the infection. Conduct and character frequently change with dementia.

Research Article

This is based on older adulthood living with dementia.

Introduction: Proof demonstrates that early discovery and the executives of dementia care can improve results. Survey varieties for the care of dementia depend on cycles illustrated in scientific rules by the BC Ministry of Health.

Technique: A residents-foundation review group search of area-residence elders utilizing patient-level regulatory information. Rules estimated: research facility testing, imaging, remedies, total assessment, directing, and authority reference.

Result: More established patients were more averse to get guideline-consistent clinical consideration. Patients in higher pay classifications had higher chances of accepting advising (certainty span or CI 1.13–153) and referring (15.1 CI 1.18–1.95) contrasted with those of lower pay. Over a fourth of the associate got an antipsychotic (28%) or non-suggested benzodiazepine (26%). People living inside "rustic" wellbeing specialists or individual with low pay were bound to get antipsychotic cure.

Conclusion: Examples of disparity by age and pay may flag obstructions to mind, especially for the supervision of dementia care process (ASSOCIATION, 2015).

Conclusion

A psychology perspective makes people to know more about human behaviour and how to cope with their societal aspect health wise. It makes us to recognize and how to work well with the service user and also the care assistant. Psychology perspective in health and social care has made it possible to understand people's growth from one age to another. With this report more knowledge and skills have been learnt on how to relate with people on different age group. It has shed more light on life span.

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