

VULNERABILITY TO EMOTIONAL PROBLEMS IN OLD PARENTS OF THE CHILDREN LIVING ABROAD

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ABSTRACT

In the present study an attempt was made to find out the vulnerability for emotional problems in old parents of children who have been living abroad since three years or more. In order to study the emotional problems IPAT Depression and IPAT Anxiety scales were administered to 100 old parents of children living abroad and 100 old parents living with their children in Pakistan.

Two hundred participants were divided into two categories, 50 male and 50 female old parents of children living abroad and 50 male and 50 female old parents living with their children in Pakistan, out of which 25 single male parents, 25 single female parents and 50 both male and female parents were selected for both groups. That is the old parents living alone in Pakistan whose children are living abroad and both old parents living with their children in Pakistan. Old age is defined as the people who are 60 years of age and above.

For the statistical analysis the chi-square test was used. All the three hypotheses were significant at $p < .05$ and $p < .001$ level. Results obtained indicate the significant difference between the two groups. The old parents of the children living abroad were found to be more depressed and more anxious than the old parents living with their children in Pakistan.

INTRODUCTION

It is a well known fact that all living individuals will grow old. The process of aging is natural and expected to bring change in human beings. Old age is a major life transition that can be hard for some people. Many people survive and reach old age. The onset of scientific discoveries and methods of health care are making it possible for people to live longer. Old age is becoming more prominent and frequent in the present world. The senior citizens face various problems all over the world. The problems are both physical and mental. It is at this time that old parents need help and physical proximity of their offspring in order to live healthy and active lives.

In Pakistani society the religious and moral values emphasize the children to look after their old parents but with the influx of Western culture and poor economic conditions many children are obliged to go to foreign countries for studies or employment. Hence the old parents remain alone in their home country and start developing psychological problems. According to Henslin (1996) aging is a total life process in which the individual develops from birth till old age.

Erikson and Kivnik (1986) have defined aging as a time when people attempt to make sense of life and to incorporate the choices they have made in the past into a meaningful and satisfying pattern. Failure at this stage leads to despair and success results in that elusive quality known as wisdom.

Ahmad (1982) described that for some, old age is a time of senility, a time of being in the way and for others, aging is associated with the ripening of wisdom, a time of increased usefulness to the community. The self image and perceived image are different for one aging in Asia and one who is aging in the Western World.

Ahmad (1982) suggested that the label of aging has different cultural and environmental connotations. This includes variation such as their locality a city or a

farm and their financial background whether they are rich or poor or somewhere in the middle.

Gorman (2000) explained old age by saying that the aging process is of course a biological reality which has its own dynamics, largely beyond human control. It is subject to the constructions by which each society makes sense of old age. In this world, chronological time plays a paramount role. The age of 60 or 65, roughly equivalent to retirement ages in most countries is said to be the beginning of old age. Other socially constructed meanings of age are more significant such as the roles assigned to older people; in some cases it is the loss of roles accompanying physical decline which is significant in defining old age. Thus, in contrast to the chronological milestones which mark life stages in the developed world, old age in many developing countries is seen to begin at the point when active contribution is no longer possible.

BIOLOGICAL AGING

Biological aging is a gradual unbearable process that cannot be stopped or reversed. Gitelson (1948) described biological aging, as an involution of different organs and systems. It includes alteration in skeletal structure, bones, tendons and joints; structural changes in the heart and blood vessels, reduction in various modalities of sensation, decreased elasticity of the lungs, reduced ventilatory and gonadal function and eventual decline in the efficiency of the perceptual system.

Aging can bring changes in physical, mental, emotional and social well being of an individual. Since these changes are vital for the physical and mental health. Aging becomes a very important factor in the lives of human beings. Whitehead and Grigliatti (1993) suggested that aging is caused by the accumulation of deleterious substances within various cells of the body. The accumulation of these substances interferes with the normal tissue functioning. One such substance is

collagen, a fibrous protein associated with connective tissue. It builds up slowly in most organs, tendons, skin and blood vessels, and it is eliminated gradually. It also stiffens with age. Therefore, tissues containing collagen lose elasticity and cause deterioration in organ functioning.

Eifrig and Simons (1983) said that a number of problems might affect the eye as the adult ages. Timiras (1972) stated that retinal changes almost never occur before the age of 60. According to Corso (1971) the lenses may become less transparent, thicker and less elastic. Sekuler and Blake (1987) said that the most common visual impairment is Presbyopia (farsightedness). In this, the lens becomes less elastic and begins to lose its power of accommodation. This decline commences from age 60. Kornzweig (1980) described a number of diseases that affect vision in old age. Amongst these are cataracts (clouding of the lenses), glaucoma (loss of vision from excess pressure inside the eyes), and macular diseases (of the retina) and damage of the cornea.

An impairment of hearing ability can profoundly affect individual well being. According to Slawinski, Hartel and Kline (1993) hearing impairment can produce hearing difficulties and the perception of speech and environmental sound that can adversely affect functions such as social interactions, maintenance of personal relationships and communicative efficiency.

According to Weiffenbach, Tylanda and Baum (1990) the ability to perceive all four tastes sweet, sour, bitter and salt declines in later life. Turner and Helms (1989) said that the tactile sense declines after the age of 65.

Biological changes and physical weakness can affect the mental health of old people. Jarvik and Cohen (1973) reported that biological changes in almost every organ system make the body weaker and less efficient in handling input from the environment. These symptoms of aging are significant and psychologically it effects upon the personality and behavior of the individual.

The predictable physical changes of late adulthood need not be incapacitating. The important thing is how the individual responds to these changes. Forgetfulness, lack of interest and lack of pleasure are considered normal in old age. It is observed that the aging mind works slowly and certain kinds of memory are more difficult to store and retrieve. According to Poon (1985) a common complaint among older adults is that their ability to remember things is not as good as it used to be.

Alzheimer's disease is the most common form of dementia among older people. It involves the parts of the brain that control thought, memory, and language. According to Kuhn (1999) in Alzheimer's disease, nerve cell changes in certain parts of the brain result in the death of a large number of cells. Mori et. al. (1997) stated that Alzheimer's disease is a disorder characterized by a jumbling of the nerves in the brain and eventually its wasting away.

Older adults who engage in intellectually stimulating activities remain mentally alert. Meer (1986) stated that intellectual decline in late adulthood is not inevitable. Older adults who keep mentally and physically active tend to retain their mental skills as long as their health is good.

SOCIAL AGING

An individual lives in a social environment. Throughout his entire life span he depends upon his neighbors and institutions in the environment for physical and psychological support and stimulation.

Comer (1992) further described the concept of aging as being fixed usually at 65 years. This is used not because of an actual change in an individual, but because societal pressures have defined it as an optimum time of retirement.

According to Lang & Carstensen (1994), and Carstensen (1987, 1991) research shows that as people age they tend to engage in selective social interaction, maintaining only the most rewarding contacts for the investment of precious physical and emotional energy.

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The problems of adjustments faced by the older persons are more or less a result of the aging process. Certain problems arise from the changing role in society. More important than one's chronological age the other important factors are the life events of an individual. Marriage, parenthood, vocational changes, children leaving home and retirement.

Retirement increases social isolation in the individual. The routine of work makes people engage in life activities and as it drops they become socially withdrawn. Some older people are able to replace key members of their social network with other people, either from former friends or by creating new friendships. Rook (2000) describe that older people can compensate for the loss of neighbors and coworkers by finding substitutes for missing network ties, redefining their social needs of developing nonsocial activities such as hobbies or solitary leisure pursuits.

In many cases as elderly parents grow older the filial relationship begins reversing itself. They become dependent on their children as those children once were on them. Many children fail to anticipate the costs and emotional strains that the aging of their parents can precipitate. This can lead to tension and rancor in the relationship. Carstensen (1998), Rook (2000) described that social networks generally become smaller as people age, although many maintain close friendships in later years. Social activity or frequency of interaction also declines as people age.

Some old parents seem to find renewal in their relationship when the nest is empty after the separation of their children. They appreciate the increased free time for their self enhancement, greater involvement with a spouse, hobbies and the community.

According to Barrett (1972) the loss of social reinforcement, professional status and financial stability comes with retirement. At this time, inferiority feelings, reduced motivation and withdrawal from society occur regardless of the age of the individual. An individual becomes an observer rather than an active contributor, and this causes a decreased sense of self worth.

The differences between older adults are created not by the physical and cognitive changes that accompany aging but by life events associated with family relationship and work.

PSYCHOLOGICAL AGING

Psychological aging influences both physiological and pathological aging. Erik Erikson (1959) has described psychological aging as a turning inward of attention and a gradual withdrawal from the outside world.

According to Hoyer and Roodin (1985), psychological age refers to an individual's adaptive capacities that are his or her ability to adapt to changing environmental demands. Individuals adapt to their environments by drawing on various psychological characteristics: learning, memory, intelligence, emotional control, motivational strengths, coping styles and so on. Therefore adults who possess such psychological characteristics in a greater level than their chronological age mates, are considered psychologically young whereas those who possess such traits in a lesser level are considered psychologically aged.

Psychological factors can also become a cause of depression and other emotional problems in old age. Some biological deterioration does occur in the old age. This deterioration puts them at a high risk for development of depression.

Gatz (2000), Zeiss et al (1996) suggested that the best predictors of depressive symptoms in late life are poor health, an accumulation of losses and minimal social support. The onsets of depression in late life include health problems, chronic disease leading to functional disabilities and cognitive impairments associated with dementia.

Physical illnesses also cause depression but enhancing social activities can reduce this. Oxman and Hull (2001) stated that illnesses that caused impairments in routine activities of daily living was found to lead to depression in adults over the age of 60.

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Sometimes older people express depressive feelings in terms of hopelessness, worthlessness and unhappiness and it also affects their families. According to Blazer (1993) a factor making it difficult to diagnose depression in the elderly is that both older persons as well as other family members usually disregard depressive symptoms, believing they are normal for anyone who reaches old age.

There are some other causes that develop depression in old age as aging people lose their jobs, their money, their health and the companionship of their children. Sometimes these losses cause depression in them.

Anxiety is chronic and fills one's day with exaggerated worry and tension, even though there is little or nothing to provoke it. Having this means always anticipating disaster, often worrying excessively about health, money, family, or work. Sometimes it's hard for older people to pinpoint the source of worry. Simply the thought of getting through the day provokes anxiety.

Lang (1977) states that anxiety is a feeling of dread, a nameless fear that distracts the minds and hearts of people of all ages. It is a constellation of physical symptoms, of uncomfortable, troubled feelings and thoughts that may be relatively mild or reach the point of utter panic. It is a reaction of frustration and unresolved anger. It is a response to unbearable stress.

Stein (2001) and Lang (1977) defined the common symptoms of anxiety as: Nervousness, jitteriness, tension, feeling tired, dizziness, frequency of urination, heart palpitations, feeling faint, breathlessness, sweating, trembling, worry and apprehension, sleeplessness, difficulty in concentrating and vigilance.

The unpleasant realities of old age conflict sharply with an individual's deeply ingrained self image. Some individuals seem better able to survive these distresses of old age. According to Smyer (1995) the chronic disease may mean very different things to different individuals. Some are able to maintain their integrity, self worth, and dignity in the face of serious functional losses; others crack and crumble in the face of relatively minor losses. Successful adjustment to old age does

not require one to maintain autonomy and a lifestyle exactly as it was in earlier life.

In today's world the challenges are growing. Improved nutrition and medical care are lengthening life spans but as people age, their physical and mental impairments increase, leading to an expanding need for long-term care.

Many feelings that children have about their parents in their later years are the same that their parents had about them. These feelings were formed in childhood and patterns of relating were established that carried through the years. The intensity and immediacy of those feelings may change as children reach adulthood and move out from homes for a better future and to live independently. While parents remain active and self-reliant, the relationship with them may be pleasant and gratifying or frustrating and abrasive. But when parents get older, feebler, sicker and poorer and are in need of help, it becomes more difficult to maintain an emotional distance. Old feelings from the past can rise up again such as love, compassion, respect, tenderness, sadness and then anger.

Some children are able to develop insight for themselves and for their old parents and move ahead to work effectively on family problems. Others may find themselves in an emotional quandary, unable to mobilize themselves and may overreact and behave inappropriately. Teitelbaum (1992) described that when elderly people lose their ability to remain self-sufficient, some children frequently understand the caregiving responsibilities. For those old parents who are severely impaired, these children often provide direct assistance with tasks like bathing, eating and dressing. Even old people who are not significantly impaired may need help related to shopping, home maintenance and housework. Traditionally and cross-culturally, old parents have relied on their children to take care for them in old-age.

Many older people do not find their children with them to listen to their problems. Some find it helpful to talk to their family physician or religious leaders while others prefer to consult mental health professionals. Finding a source of support during old age can make the aging process easier. It is important for children

to watch out for their parents as they age.

There are many pathways for adults to experience happiness and life satisfaction to successful aging. Some individuals age successfully by staying active and some by striking a unique balance among a variety of roles and responsibilities. Thompson et al. (1993) claim that engaging in social interaction for simple fun and recreation is measurably superior to other forms of social support in helping family members manage the stress of caring for an older relative. Other types of social support, such as direct aid, physical assistance, emotional support and validation of self esteem have been found to be ineffectual in reducing stress. Healthier older people are more likely to be socially and psychologically active.

One of the most unhappy transition points in the relationship between parents and their children occurs when children are on the brink of leaving home. Prior to that time the two generations are part of a single family. Sometimes the process of leaving home is an important part of the transition in children's life for a better future. Whereas in the past leaving home was usually associated with marriage, now their moving out of the parental home is increasingly concerned with a preference for independence. The destination and the timing of young peoples' home-leaving, are both likely to be essential in determining later life opportunities.

In Pakistani society the separation of the children is also devastating for the aging parents. It is unexpected for parents to survive without children and for some older parents it is most difficult to accept. It generates fear of isolation, insecurity regarding their own care, intense guilt and anger over the loss of a lifetime identity as parents. For old parents the separation of a child is as intense as the loss of a spouse. Sometimes in old parents the separation of children leads to intense despair, guilt, anger, anxiety and symptoms of physical illness.

Social interaction occupies a position of considerable importance in the lives of aging people. Much of their waking time is spent in participating and thinking about social activities with relatives and friends. Satisfying social bonds are a primary source of psychological satisfaction and happiness.

In our Pakistani culture successful adjustment with good health in later adulthood is more common among those who take on meaningful roles by volunteering, pursuing a hobby, maintaining a religious affiliation or engaging with grand children. The elderly who continue active engagement with life report higher energy, less depression, and more life satisfaction. There are many pathways of successful aging and adults are encouraged to become actively responsible for initiating healthy behaviors.

In the light of above researches and considering the change in the social network of Pakistan, some of the people prefer to go abroad to pursue their education and job in order to secure their future. This situation inevitably causes agony and stress in the aging parents. The children may send financial support but due to lack of physical proximity the parents do not feel secure and become emotionally disturbed. This is the time when old parents are in the process of physical and emotional decline. They become rigid in their thoughts and cannot change their habits. It is however the responsibility of the younger generation to accommodate their aging parents, especially when they feel alone, depressed and require support from them.

Thus the requirement is to find out all these factors which effect the mental health of old people, so that future generations can be guided to provide necessary psychological and emotional support to their parents.

HYPOTHESES:

In the light of the above theoretical observations and researches the following hypotheses were formulated.

1. The old parents of the children living abroad would obtain high sten scores on the depression scale.

2. The old parents of the children living abroad would obtain high sten scores on the anxiety scale.

METHOD

PARTICIPANTS

Total 200 individuals participated in the present study comprising of 50 old parents of the children living abroad since 3 years or more, with 25 old single female parents of the children living abroad since 3 years or more, 25 old single male parents of the children living abroad since 3 years or more, 50 old parents living with their children in Pakistan, 25 old single female parents living with their children in Pakistan, and 25 old single male parents living with their children in Pakistan. Old age is defined as the people who are 60 years of age and above.

PROCEDURE

To study the emotional problems in old parents of youth living abroad. Different senior citizen institutions, different hospitals and community centers were selected. These tests were administered individually. Most of the participants were acquainted with the English language and those who were not very fluent were explained the words in Urdu. The socio economic level of the participant's family was more than 25,000 Rupees per month.

MATERIAL

In order to study the emotional problems the IPAT Depression scale and IPAT Anxiety scale were administered to the individuals. These tests are widely used in Pakistan and found reliable for the patients.

The tests have a cutoff point of 7. The participants who got more than 7 sten score on these scales were considered depressed and anxious and those who obtained below 7 on these scales were considered normal.

STATISTICAL ANALYSIS

For statistical analysis the chi square test was used because the variables were non continuous.

RESULTS

The results obtained indicate a significant difference between the two groups that the old parents of the children living abroad are more depressed and more anxious than the old parents living with their children in Pakistan.

TABLE NO 1
Level of depression among
old parents of children
living abroad and in Pakistan.

	Old Parents of Children Living Abroad	Old Parents of Children Living in Pakistan	Total
Depressed	31 (22.5Fe)	14 (22.5Fe)	45
Normal	19 (27.5Fe)	36 (27.5Fe)	55
Total	50	50	100

$$\chi^2 = \sum \frac{(F_o - F_e)^2}{F_e}$$

$$\chi^2 = 3.21 + 3.21 + 2.62 + 2.62 = 11.7$$

$$\chi^2 = 11.7$$

$$df = 1$$

Significant at $p < 0.001$

GRAPH A
Level of depression among
old parents of children
living abroad and in Pakistan.

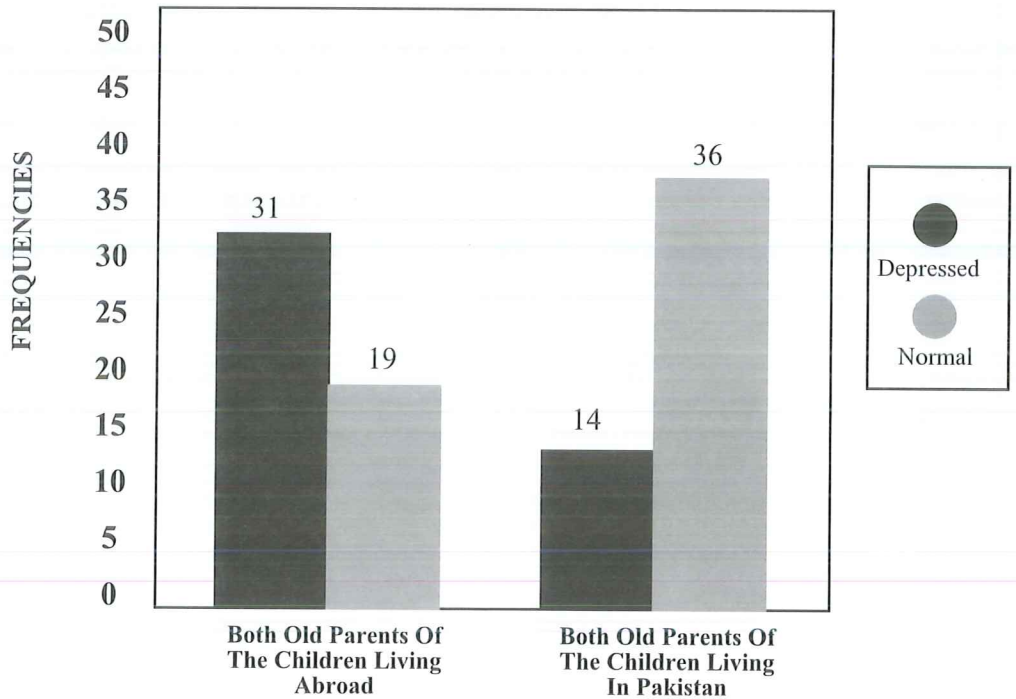


TABLE NO 2
Level of depression among
old parents of children
living abroad and in Pakistan.

	Old Parents of Children Living Abroad	Old Parents of Children Living in Pakistan	Total
Depressed	31 (22.5Fe)	14 (22.5Fe)	45
Normal	19 (27.5Fe)	36 (27.5Fe)	55
Total	50	50	100

$$\chi^2 = \sum (Fo - Fe)^2$$

Fe

$$\chi^2 = 3.57 + 3.57 + 4.5 + 4.5 = 16.18$$

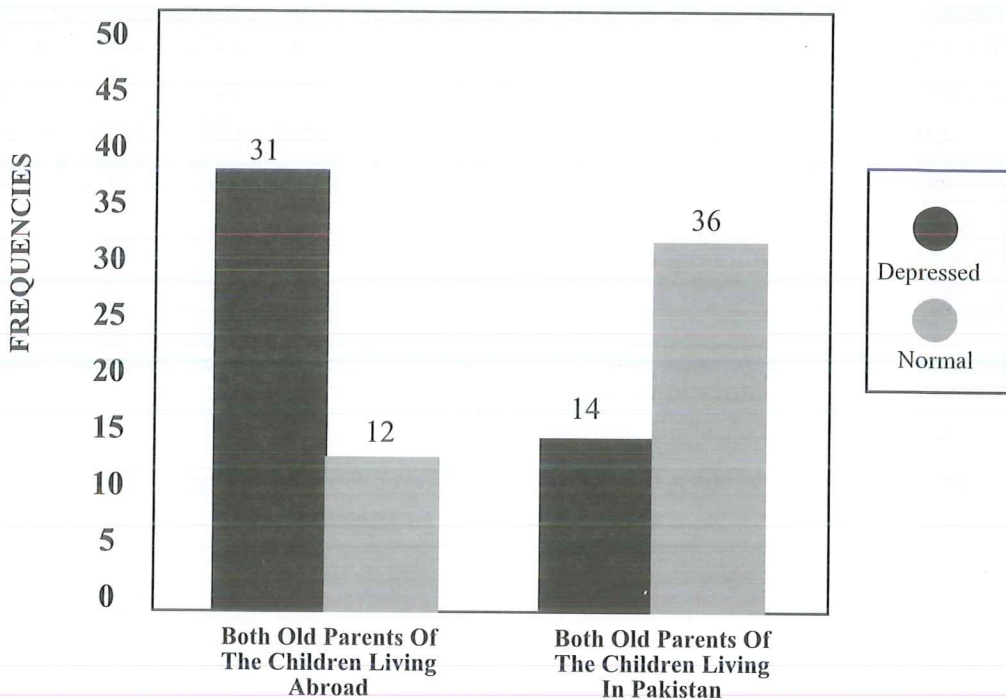
$$\chi^2 = 16.18$$

$$df = 1$$

Significant at $p < 0.001$

GRAPH B

Level of depression among
old parents of children
living abroad and in Pakistan.



DISCUSSION

HYPOTHESIS NO : 1.

The old parents of children living abroad will obtain high sten scores on depression scale.

The results of the statistical analysis are shown in Table No: 1 and Graph A. The chi square $\chi^2 = 11.7$, $df = 1$, $p < .001$. This indicates that there is a significant difference in the two groups. The old parents of the children living abroad have high sten scores on Depression scale than the old parents living with their children in Pakistan.

According to the results it is clear that old parents who live alone without their children are more depressed than old parents whose children are living with them

in Pakistan. In Pakistani culture due to the moral and ethical values most of the children are living with their parents and grandparents in a joint family system. The joint family is a chain of intrafamily and interfamily relationships that are very strong and each member of the family is joined with the members of the entire family. Happiness, affection, care and sorrows are shared with each other. When these families lose their children the parents become isolated and depressed because in old age parents need their children for care just as they cared for their children in their growing years.

Like other developing countries in Pakistan the young children go abroad for higher education but after the completion of their education they get good jobs and other benefits so they do not come back and look after their parents. Sometimes the children get married and then they are not able to come back to their homeland due to the cultural differences since their new family does not fit in the old family system.

In Pakistan another problem is that the people are facing economic crises. Due to the poor economic conditions children want to go abroad as they realize their duty to support their families economically to fulfill the family needs. It has been observed that since the last few decades due to the influx of western culture, the young generation of the country is trying to go abroad in quest of a better future. As they leave their homeland their parents feel insecure and helpless. As parents pay a lot of attention to their children, they need the same response from their children when they really need it in old age but children living abroad do not get enough time to take care of them. Hence those parents who have been living alone for a number of years feel depressed and become emotionally disturbed.

It is the role of the clinical psychologist to treat the emotional problems of old age. Guidance can also be provided to the teenagers so that they can be guided in ways and means of giving the psychological and emotional support to their parents for a happy and healthy old age.

HYPOTHESIS NO : 2.

The old parents of the children living abroad will obtain high sten scores on anxiety scale.

The results of the statistical analysis are shown in Table No: 2 and Graph B. The chi square $\chi^2 = 16.18$, $df = 1$, $p < .001$. This indicates that there is a significant

difference in the two groups. The old parents of the children living abroad have high scores on anxiety scale than the old parents living with their children in Pakistan.

In some parts of the world it is the responsibility of the government to take care of the children's education, food and other necessities but in Pakistan after the birth of a child usually parents take care of the children and support them in their studies and other areas of life. Most of the parents face many problems when their children are growing up but the parents try their best for the fulfillment of the needs of their children.

It is a life span process that every person has to become older. As the children grow up and become independent they want to live their life according to their own life style. On the other hand as the parents grow older they become dependent on their children. It has been observed that there are individuals who need more freedom and they want to provide more opportunities to their own children because they themselves had not received these opportunities from their own families.

In Pakistani culture it can be observed that parents play a vital role in the development of their young children. Due to cultural and ethical boundaries the same responsibilities lie on the shoulders of the children to take care of their old parents. In today's world the media plays an important role in life and unfortunately the children of Pakistan are impressed by the programs telecast on western channels. Children from the eastern culture see more freedom and difference on these channels and they want the same liberty. The influence of western culture makes the children feel inferior which makes them think that there are more opportunities in the western countries rather than in the east. Hence they want to go abroad for better opportunities.

It has also been observed that in the western culture as the children grow up and they become independent, most of them leave their homes and parents. Children from Pakistan go to the foreign countries and adopt the same life style. They do not return home to take care of their old parents. Parents are worried about their life because their children do not support them. Parents expect that in old age their children will support them and take care of them. Unfortunately when the children are not there to take care of these old parents this constant state of worry makes the old parents upset and discouraged.

The young children who live in Pakistan or abroad and keep on supporting their families by visiting them and sending them money, makes their old parents confident and happy. The old parents of such children develop hope and happiness in their lives and show low anxiety on the test.

It is the role of the clinical psychologist to provide directions to the new generation, so that they can give the required amount of emotional support to their old parents.

CONCLUSION

The statistical analysis of the hypotheses shows that old parents of children living abroad have higher sten scores on IPAT Depression and IPAT Anxiety scale than old parents who are living with their children in Pakistan.

Results show a significant difference between the two groups, which indicates that old parents who have children with them in Pakistan are more satisfied with their lives as compared to old parents whose children are living abroad. This research is important and beneficial for professional psychologists. It will also be helpful for the younger generation in understanding the problems of their parents in old age and to provide them with adequate support.

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