

# Gerontology: Meaning, Scope and Implications for Adult Education

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## Abstract

The study of older adults is a recent field of study and as such, has not been given its proper place in the human society. The older or the retired adults are in most cases regarded as people who have exhausted all their potentials of live during their services at their various places of work. They can no longer make meaningful contributions to the development of the society. This paper makes a case that adult education has a role to play in making people understand and appreciate the fact that the older or retired adults can still contribute meaningfully to the betterment of the human society. They should as well appreciate the message coded in gerontology. The paper discussed the concepts of ageing and its perspectives, gerontology and its implications to adult education. The paper concludes that adult education could be used in minimizing the ageing challenges of the older adults by providing them with appropriate programmes of guidance and counselling that will help in integrating and assisting them to cope with the declining organ functions of the body and contribute meaningfully to the betterment of the society.

**Keywords:** Gerontology, Ageing and Adult Education.

## 1. Introduction

Most people are not comfortable to hear that they are ageing or growing old. This is simply because it tends to suggest advance in age, decline of organ function, and loss of flexibility, hearing and vision decline, lessen of muscular strength, flexibility of the skin and blood vessels, appearance of wrinkles on the skin etc. But it is a known fact that the process of maturation and ageing in living organisms (human beings) are inevitable because life cycle continues and is not reversible until death comes. Ageing, should be conceived as a natural stage of development which comes when it should come. Ageing comes about as a result of the cessation of cell division that takes place in human beings.

Today, ageing and anti-ageing have become a global phenomenon and the endless struggle against becoming old, the refusal to accept changes in the body and the millions of money spent on cosmetic and plastic surgery all point to the fact that nobody wants to get old. However, ageing just like death, is inevitable. No matter how you try to conceal it, it will definitely manifest with time. Osunde and Obiunu (2005) stated that ageing goes beyond biological change. It includes physical, mental, social, and intellectual decline. All these negative indicators which show decline in the functions of body organs due to ageing make the adult person feel uncomfortable to be associated with ageing. This feeling affects the adult person emotionally, and psychologically. The ageing population (the retired and the retrenched adult person) need relevant adult education programmes to enable them cope and adjust to changing and challenging conditions of their lives and to enable them feel they are still relevant in human society. Such adult education programmes should be able to motivate the retired adult and make him feel that he can still learn new tricks in order to continue to exist comfortable in human environment or society. Osunde and Obiunu (2005) stated that for elderly adults to say they are too old to learn make them shun their responsibilities as active members of the society.

## 2. Perspectives of Ageing

The ageing process can be viewed from three major perspectives; namely, biological ageing, sociological ageing and psychological ageing.

- ❖ **Biological Ageing:** This is usually associated with decline in the regulation and proper functioning of the vital organs of the body. However, not all people experience decreased organ function in the same proportion. Some individuals have healthier hearts at age 80 than others do at age 60.
- ❖ **Sociological Ageing:** This is usually how a person relates with others in the society. In sociological ageing, personal or attitude and interaction within the community are used to assess a person's maturation and ageing. As a person ages socially, he/she calculates his/her utterances, limits the use of

vulgar language, prunes relationship to mature friends, changes his/her mode of dressing, reduces nocturnal clubs. As a person ages socially, he/she tends to be guided by the norms of the society to which the person belongs.

- ❖ **Psychological Ageing:** Jegede (2003) stated that the indices of psychological ageing include feelings, motivation, memory, emotions, experience and self-identify. For instance, people who had intention of traveling abroad may decide to jettison the idea and contribute to the growth of their own economy. Psychological ageing is heterogeneous and continuous as an individual passes through life. Cavanaugh (1993) in Osunde and Obiunu (2005) divided ageing into three viz, the primary ageing, the secondary ageing and the tertiary ageing.
- ❖ **The Primary Ageing:** Primary ageing is considered as the normal process which has nothing to do with illness. It simply involves changes in the biological, social and psychological domains. These occur due to tear and wear of vital organs of the body.
- ❖ **The Secondary Ageing:** This process is associated with different kinds of terminal illness which prevent normal functioning of the individual.
- ❖ **The Tertiary Ageing:** This occurs when there are losses brought about by death or disasters like war(s) on a family member or close friends that could lead to a gradual decline in the proper functioning of the individual.

### 3. Gerontology

Gerontology is derived from two Greek words “geron” which means “old man” and “logos” which means “discourse” or “study”. Gerontology is the study of the phenomenon of old age. It is the study of the social psychological and biological aspects of ageing in an adult person. Gerontology is distinguished from geriatrics which is the branch of medicine that studies the diseases and care of the elderly person. The elderly adult deserves intensive medical attention as he continues to grow old.

The Oxford Mini-reference Dictionary defined gerontology as the study of ageing. The new Webster's Dictionary of English Language (1994) edition, defines gerontology as a study of the phenomenon of old age. Also, the encyclopedia on ageing (volume 2, 297-298) defined gerontology as the scientific study of ageing and older population. As the adult advances in age, the need for gerontology becomes necessary. Contemporary gerontology concerns itself with the ageing population. Considering the above definitions and explanations, gerontology encompasses the following:

- i) Studying the physical, mental and social changes in people (adults) as they age.
- ii) Investigating the ageing process itself (biogerontology).
- iii) Investigating the interface of normal ageing and age related diseases (geroscience).
- iv) Investigating the effects of our ageing population on our society; including the fiscal effects of pensions, entitlements, life and health insurance and retirement planning.
- v) Applying knowledge to policies and programmes; including a macroscopic perspective i.e. (running a nursing home).

These five scopes of gerontology can simply be referred to as multidisciplinary. This is so because there are a number of sub-fields in it, as well as psychology and sociology. The field of gerontology is relatively a late developed field of study. This simply means it is a recent field of study. This made it possible for it to lack structural and institutional support required. However, the huge increase in the elderly population in the post industrial western nations made gerontology to become most rapidly growing field of study. Currently, gerontology is a well paid field for many all over the world.

#### 3.1 Branches of Gerontology

The following are the branches of gerontology which are embedded in its scope discussed above.

- ❖ **Biogerontology:** This is a sub-field of gerontology that studies the biological process of ageing. It is composed of the interdisciplinary research on biological ageing, causes, effects and mechanisms in order to better understand human senescence. Some biogerontologists like Leonard Hayflick, have worked to show that aging is a biological process which we are far from controlling. They are also known as conservative biogerontologists. They have predicted that the life expectancy figures will peak at about the age of 85 (88 for females and 52 for males). Although this figures are not static. They may continue to rise or decrease.
- ❖ **Biomedical gerontology:** This is also known as experimental gerontology or life extension. Life extension is a sub discipline of biogerontology that endeavours to slow, prevent and even reverse ageing in both humans and animals by curing age-related diseases and showing the underlying processes of ageing. Some biogerontologists are at intermediate position, emphasizing the studying of the ageing process as a means of mitigating ageing – associated diseases. They claim that maximum life cannot be altered.

- ❖ **Medical gerontology:** This branch of gerontology studies the biological causes and effects of ageing, medical and biogerontology are considered by many scientists to be the most important frontier in ageing research (Gracia 2010).
- ❖ **Social gerontology:** This is a multidisciplinary sub-field of gerontology that specializes on studying and working with older adults. Social gerontologists are responsible for educating, researching and advancing the broader causes of ageing in older adults by giving informative presentations, publishing books and articles that concerns the ageing population, producing relevant films and television programmes and producing new graduates in colleges and universities.

#### 4. Challenges and Implications of Gerontology to Adult Education

UNESCO (1976) as reported in Nzeneri (2010:10) gave a generally acceptable definition to adult education as:

The entire body of organized educational process whatever the content, level and method, formal or otherwise, whether they prolong or replace initial education in schools, colleges and universities as well as apprenticeship, whereby persons regarded as adults by the society to which they belong develop their abilities, enrich their knowledge, improve their technical or professional qualifications and bring about changes in their attitude and behaviour in the two fold perspectives of full personal development and participation in balanced and independent social, economic and cultural development.

The above definition is broad and encompassing in the sense that it does not only define adult education but also defines its content and scope (Onyenemezu 2012).

Eheazu (1998:4) observes that adult education in recent times has been misconceived to mean night school by many who lacked understanding of its meaning and nuances. This misconception poses as a very big challenge to adult education practitioners. In his effort to clarify this misconception, Eheazu (1998) defines it as “some specific functional training/vocational programmes required by adults (who now constitute the illiterate, unskilled, semi-skilled or semi-professional labour force) to remedy not only their educational deficiencies but also meet the needs of their various occupations whether as farmers, artisans or employees of corporate/private organizations”. He further defined adult education as “any form of alternative education that would reorientate them and modify the attitudes in order that they embrace new and progressive ways and actions that would improve their income, living standard and contributions to societal development as well as bring about in them desired changes in their behaviour”.

The challenge of poor public perception of adult education as night school as noted by Eheazu (1998) is considered as a serious challenge to adult education in Nigeria (Onyenemezu 2012).

However, it is a known fact that it is not only the individual ageing adults that are challenged by ageing problems but also the adult education practitioners, policy makers and the entire society (Onyenemezu 2012). Hilgard (1977) and Ukpong (2000) noted that declining physical strength tend to limit ones activities and debilitating illness which can make individual adults feel demoralized and helpless in the programme. The older adults are now faced with challenging situations of retirement, more idle hours and less income which is likely to lead to poor self-concept and lower self-esteem which is illness of its own. These challenges require adult education for people (both the older adults and the younger ones) to be conscientized about the roles adult education can play in their present situations.

Freire (1970) perceived adult education as “conscientization” which involves liberal education, extension and mass education, aesthetic, moral and cultural education programmes. Older adults should not be treated the same way the younger ones should be treated, but rather they should be treated differently if their interest and enthusiasm for learning are to be motivated and sustained to enable them adapt or adjust to their current challenges of life and any coping adult education programme designed for them (Nzeneri 2000). Fasokun (2006) and Onyenemezu (2012) observed that adult education is concerned not with preparing people for life, but rather with helping/assisting adults to live more successfully as useful and acceptable members of their societies and contribute meaningfully to the development of those societies.

Adult education makes the older adults to be on the better ways of managing the remaining years of their life endeavours more comfortably and joyfully. Nzeneri (2000) in his study on the retired and the retrenched in Port Harcourt observed that not one of the members of these groups was satisfied by being retired or retrenched; and each claimed to be unprepared for this situation. He noted that this group of adults require

awareness and coping programmes of adult education to enable them adapt or adjust to their current situation of life.

Obviously, there are life challenges to the ageing population. The older adults facing these challenges require proper adult education programmes that should provide them with appropriate guidance and counselling services that will assist them cope with the declining organ functions of the body. Olowookere (2003:30) noted that:

There is need to improve quality of life and prevent or reduce dependency in an ageing population. Increasing age is associated with increasing risk of disability eg hearing and vision. Ageing is associated with loss of bone tissues, reduction in muscle mass, reduced respiratory functions, decline in cognitive function, rise in blood pressure and muscular degeneration which pre-disposes to conditions such as hear diseases, dementia, and blindness.

Physical challenges to the adults ageing population are experienced both internally and externally. Internal changes involves decline in functions of the bones, muscles, cells, heart and brain, while the external challenges are obviously observed in the face or body appearances. Wrinkles on the face and skin, hair colour from black to gray etc. The challenges and changes that take place in human beings are progressive in childhood and adolescence periods and regressive or declining in adulthood (Nzeneri 2000).

According to Ibeh (2001), statistics show that within the ages of 24 to 32, the human body reaches its maximum size and strength and these are influenced by the amount of nutrient, rest, stress, and exercise and health conditions. He also noted this period as the time the body maintains a balance between the building of body tissues and their wearing down. The process of ageing beings when the rate at which more cells die than the rate at which they are produced or replaced. Hence between the ages of 32 and 45; the tissues of the body experience reduction in elasticity (Ibeh 2001).

## 5. Conclusion

Adult education attempts to minimize the ageing challenges of the adults by providing them with programmes of appropriate guidance and counselling that will assist them cope with the declining organ functions of the body. One of the basic assumptions of adult education is the believe in the adaptability and educability of human beings irrespective of their age, socio-economic and political responsibilities (Akinpelu 1981). Human nature is not static but dynamic, hence adults at whatever age can still learn for adaptability and being relevant in the society. The older adults are confronted with a lot of challenges ranging from physical, psychological, social and declining functions of the body due to ageing which is inevitable and irreversible. These challenges could be overcome by adult education making them see ageing as a normal and natural phenomenon in the human life cycle. Gerontology and adult education should be seen as compliments in taking care of the plight of the older or retired adults. They should provide suitable educational programmes for proper adjustment and improvements of older or retired adults in their various societies.

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<http://www.gsw.org/wikipedia.com>

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