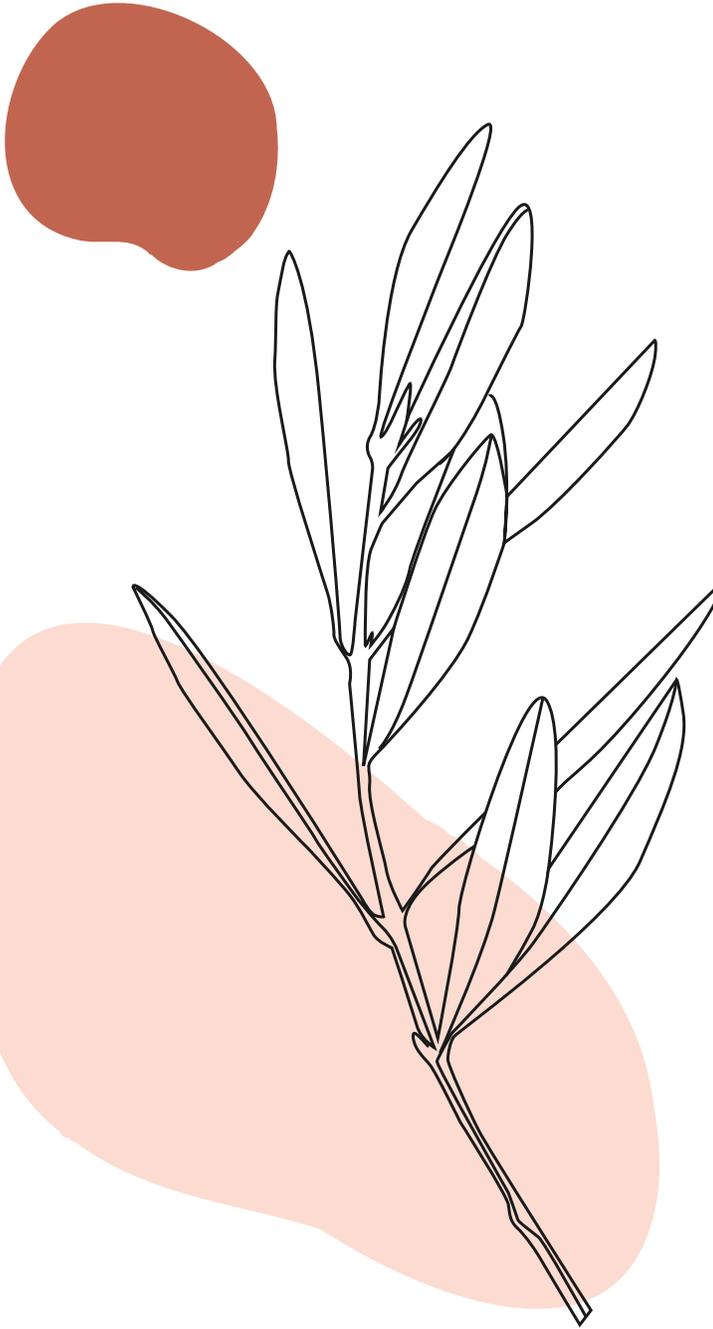




Psychological changes of Elderly Women

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وَقَضَىٰ رَبُّكَ أَلَّا تَعْبُدُوا إِلَّا إِيَّاهُ وَبِالْوَالِدَيْنِ إِحْسَانًا ۗ
إِمَّا يَبُلُغَنَّ عِنْدَكَ الْكِبَرَ أَحَدُهُمَا أَوْ كِلَاهُمَا فَلَا تَقُلْ
لَهُمَا أُفٍّ وَلَا تَنْهَرْهُمَا وَقُلْ لَهُمَا قَوْلًا كَرِيمًا

“Dan Tuhanmu telah memerintahkan supaya kamu jangan menyembah selain Dia dan hendaklah kamu berbuat baik pada ibu bapakmu dengan sebaik-baiknya. Jika salah seorang di antara keduanya atau kedua-duanya sampai berumur lanjut dalam pemeliharaanmu, maka sekali-kali janganlah kamu mengatakan kepada keduanya perkataan “ah” dan janganlah kamu membentak mereka dan ucapkanlah kepada mereka perkataan yang mulia.” (QS. Al-Isra’: 23)

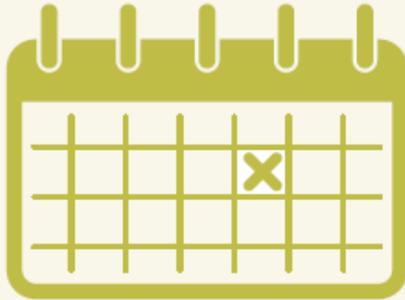
(Sumber <https://rumaysho.com/26511-jangan-berkata-uff-ahh-kepada-orang-tua.html>)

Overview

Work can be a struggle

45%

of women say they feel their menopause symptoms have had a negative impact on their work



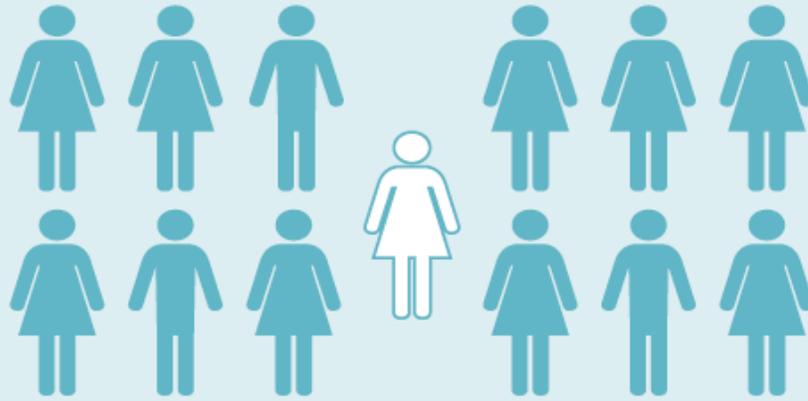
47%

who have needed to take a day off work due to menopause symptoms say they wouldn't tell their employer the real reason



(Three quarters of women* in the United Kingdom say that the menopause has caused them to change their lives and more than half say it has had a negative impact on their lives.)**

Social lives can take a back seat



Over **33%** of women feel less outgoing in social situations

32% of women feel they are no longer good company

23% of women feel more isolated

Partners are left feeling helpless

38%

of partners say they feel helpless when it comes to supporting their partner through the menopause



28%

of partners say they often end up having arguments "because they don't understand what she is going through"

Sex can be off the menu

51%

of women say that their menopause had affected their sex lives



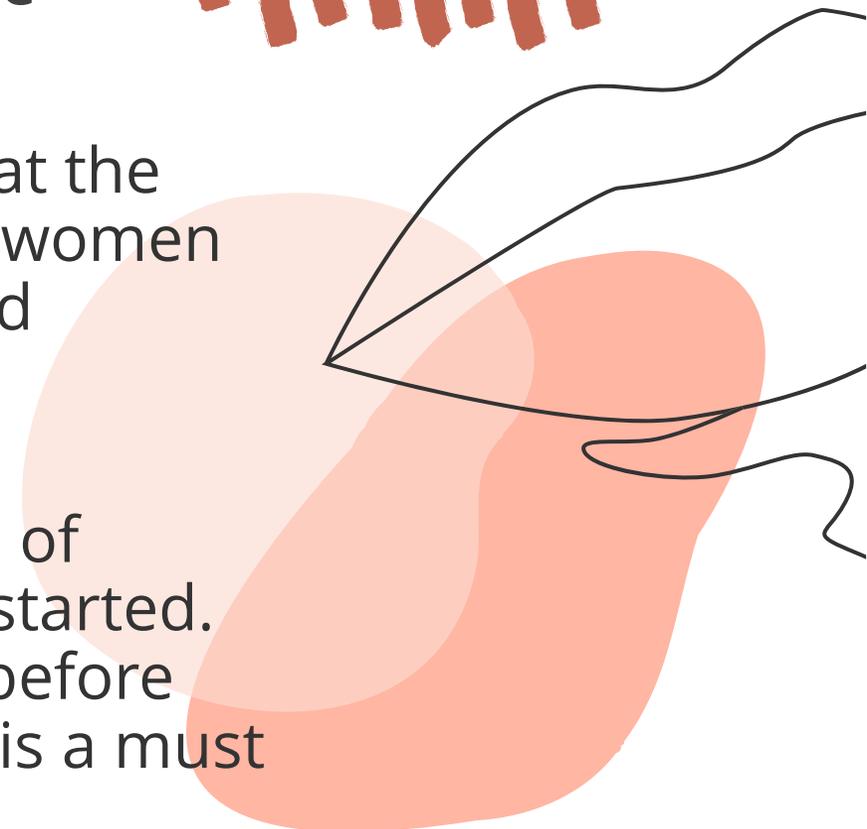
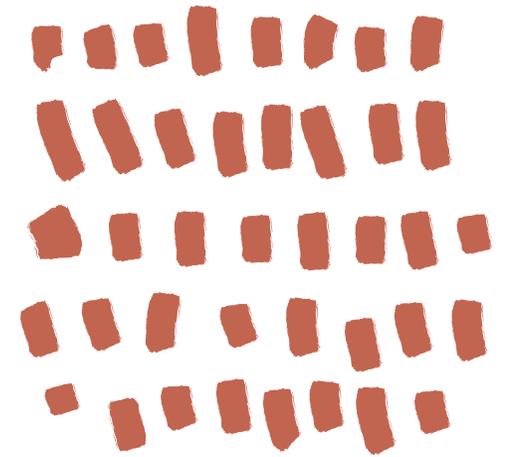
42%

of women also say they just didn't feel as sexy since experiencing the menopause

Introduction

The difference between climacteric and menopause

- during the premenopausal period, the impact that the decrease in estrogen has on the health status of women must be assessed and, if it is pertinent, we should indicate lifestyle changes, hormonal therapy, hypolipidemic drugs, etc.
- It does not seem proper to wait for the cessation of menstrual bleeding before some intervention is started. The decay of women's health starts many years before menopause and prevention of its consequences is a must for us the midwives.



Menopause vs Climacteric

- The **climacteric** is a transitional period between the reproductive age and old age that spans several years before the last menstrual period and several years after that
- Globally, the term menopause is much more frequently used than climacteric but, before we use either one, we should consider that 'menopause' is referring to a specific event, the cessation of menses, and 'climacteric' to gradual changes of ovarian function that start before the menopause and continue thereafter for a while (Blumel et.al., 2013)

Most elderly people seems to be most vulnerable to psychological dysfunction when they experience change.

Affective function refers to the mood, emotions (such as happiness, sadness, fear, pain, anger, and confusion).

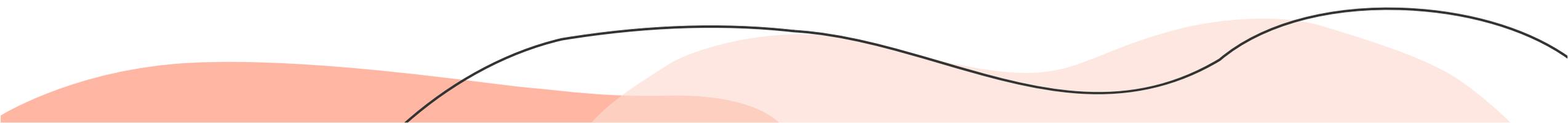
Cognitive function refers to memory, learning, and intelligence

Cognitive and affective functioning affects the person's self-esteem.

Affective functioning

- It is influenced by the way an individual views the world and self.
- A positive view of self and surrounding environment promotes positive expression of mood and emotions.

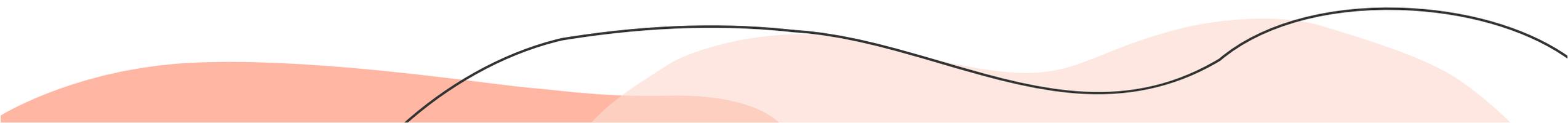
Cognitive functioning

- Intelligent, learning, attention and memory are all related to cognitive functioning and how well the mind is able to reason and make sound judgments.
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Self Esteem

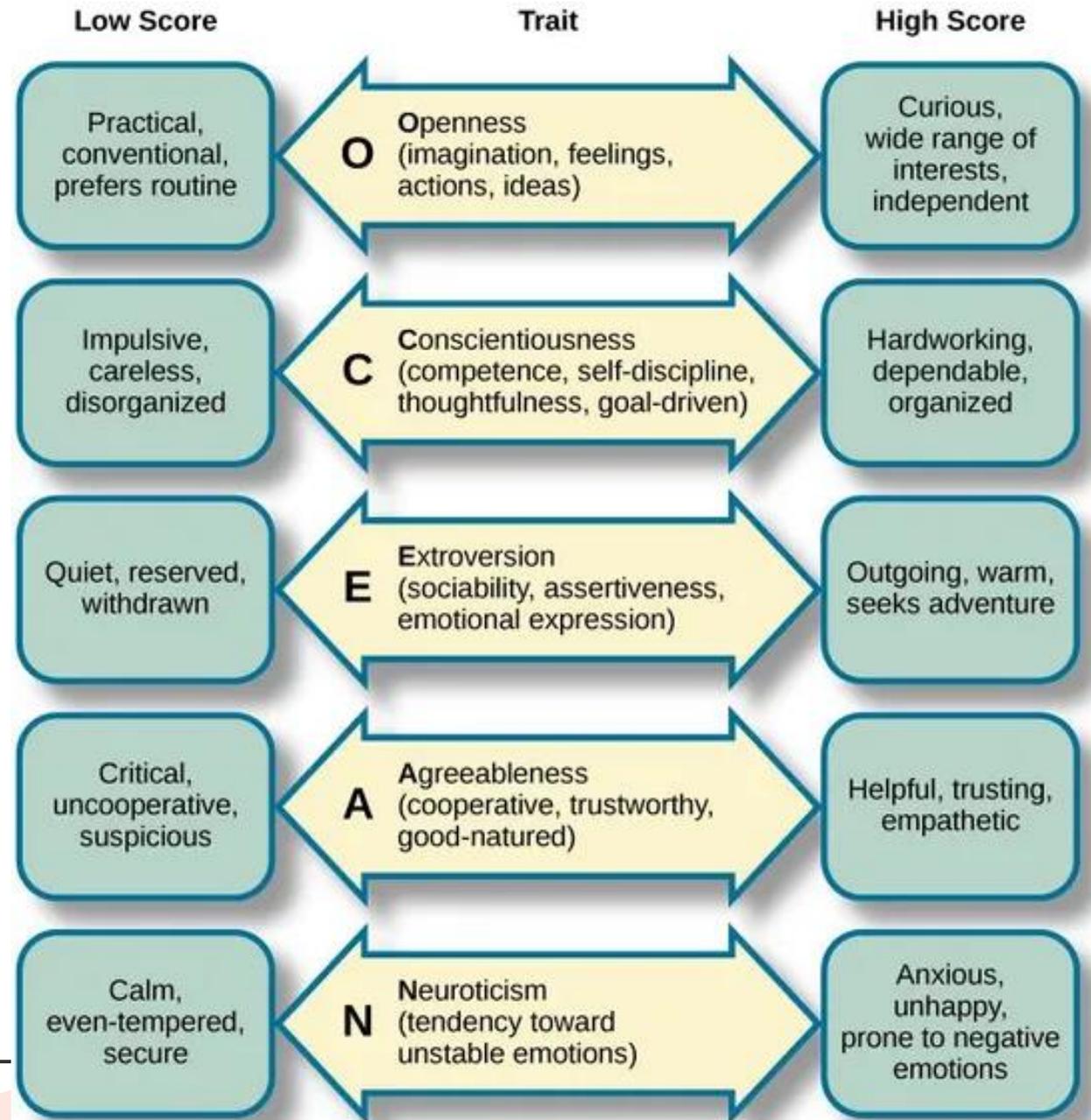
- It is the way a person views himself/herself.
- A positive view of self promotes health and enables the person to cope better with the changes and challenges of growing older.

Factors contribute to decrease self-esteem:

- Age related changes.
 - losses that occur with aging
 - Chronic diseases.
 - Increased dependency .
 - Function impairment.
 - Lack of control over the person environment
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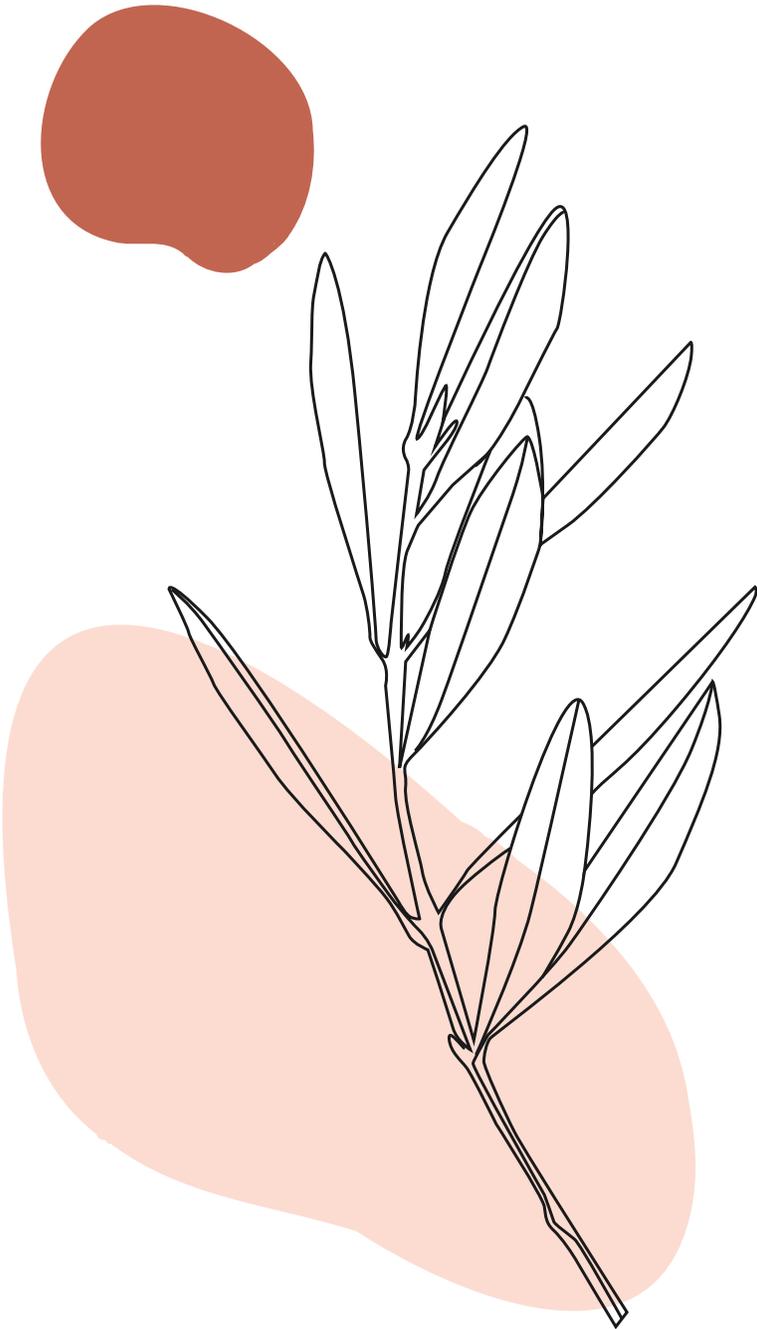
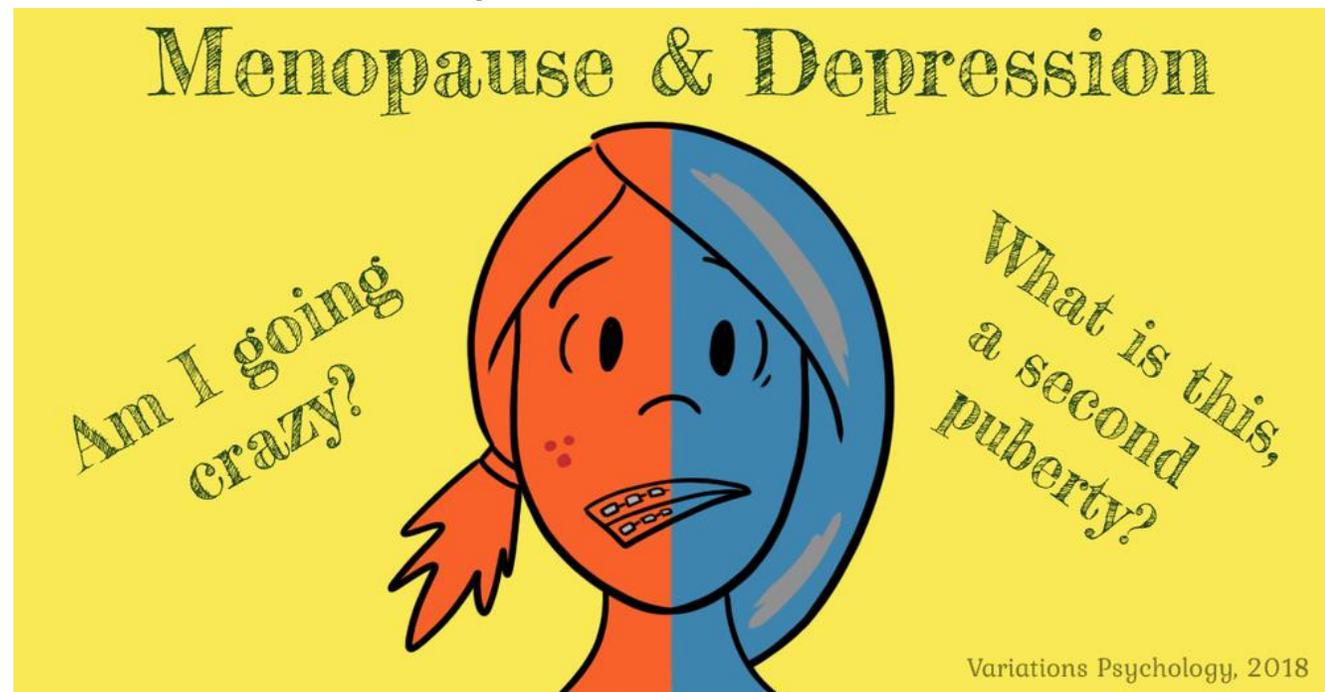
Personality

- The basic personality does not change as a result of aging process.
- The personality will be consistent with that of earlier years.
- Each trait represents a continuum. Individuals can fall anywhere on the continuum for each trait.
- The Big Five remain relatively stable throughout most of one's lifetime.
- They are influenced significantly by both genes and the environment, with an estimated heritability of 50%.
- They are also known to predict certain important life outcomes such as education and health.



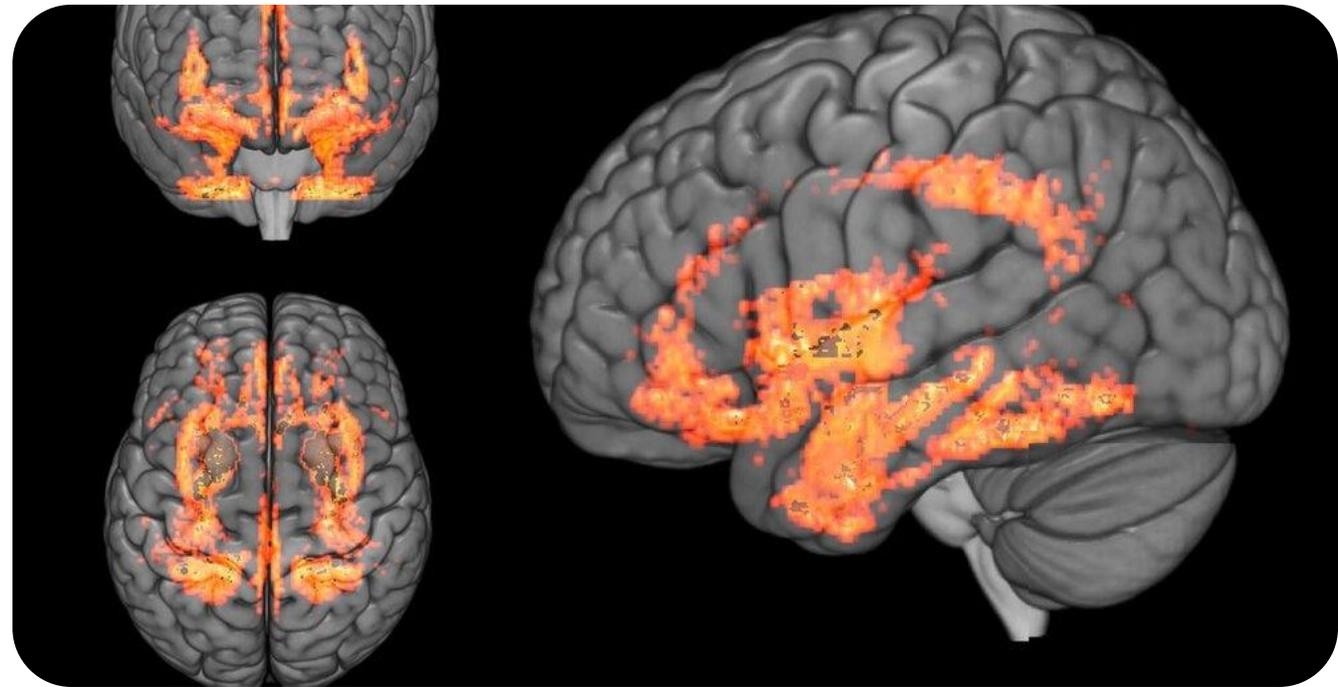
Interesting facts- Depression

- Depression occurs 16-65% of elders living in the community.
- Depression including: sleep disturbance, lack of interest, feelings of guilt, lack of energy, decreased concentration and, loss of appetite.
- Losses can lead to depression.



Intelligence

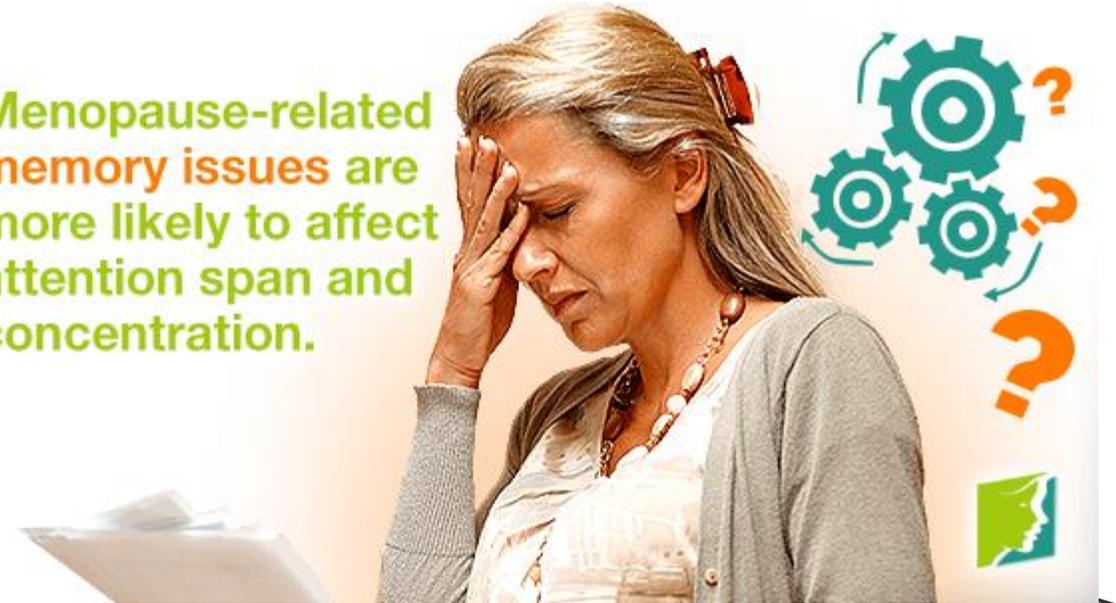
- Intelligence is a mental alertness and includes the ability to learn new material, make wise decisions, and deal with stressful situation.
- Intelligent does not become less with age.
- IQ test performance of older adults may be hindered because of sensory deficits or the stress of being tested. These factors must be considered when assessing



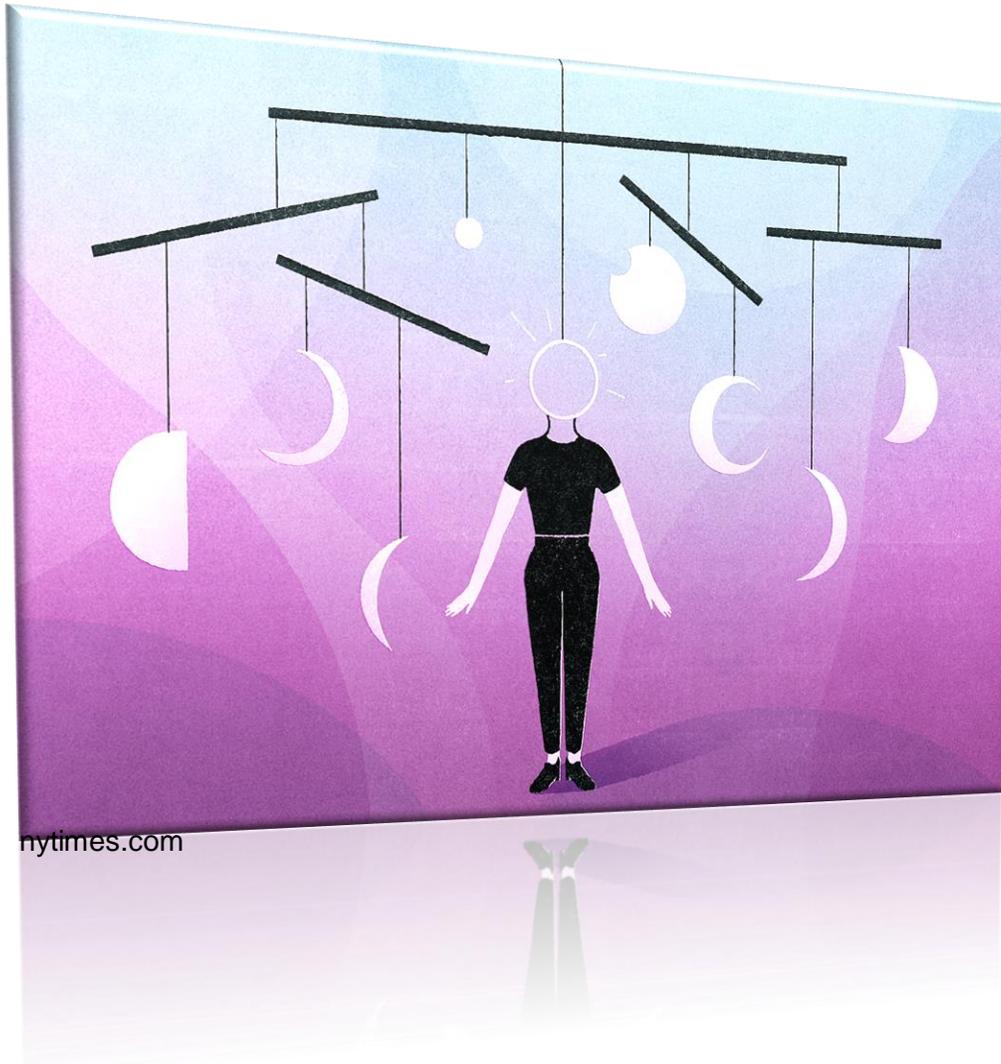
Memory

- Recent memory is defined as a recall of items learned more than a few minutes earlier, e.g. the day's new events, what was eaten for breakfast, the date. Recent memory generally declines with age.
- Remote memory is defined as a recall of items learned many years earlier, e.g. the dates of wars, names of presidents, remote memory does not experience significant change with age.

Menopause-related memory issues are more likely to affect attention span and concentration.

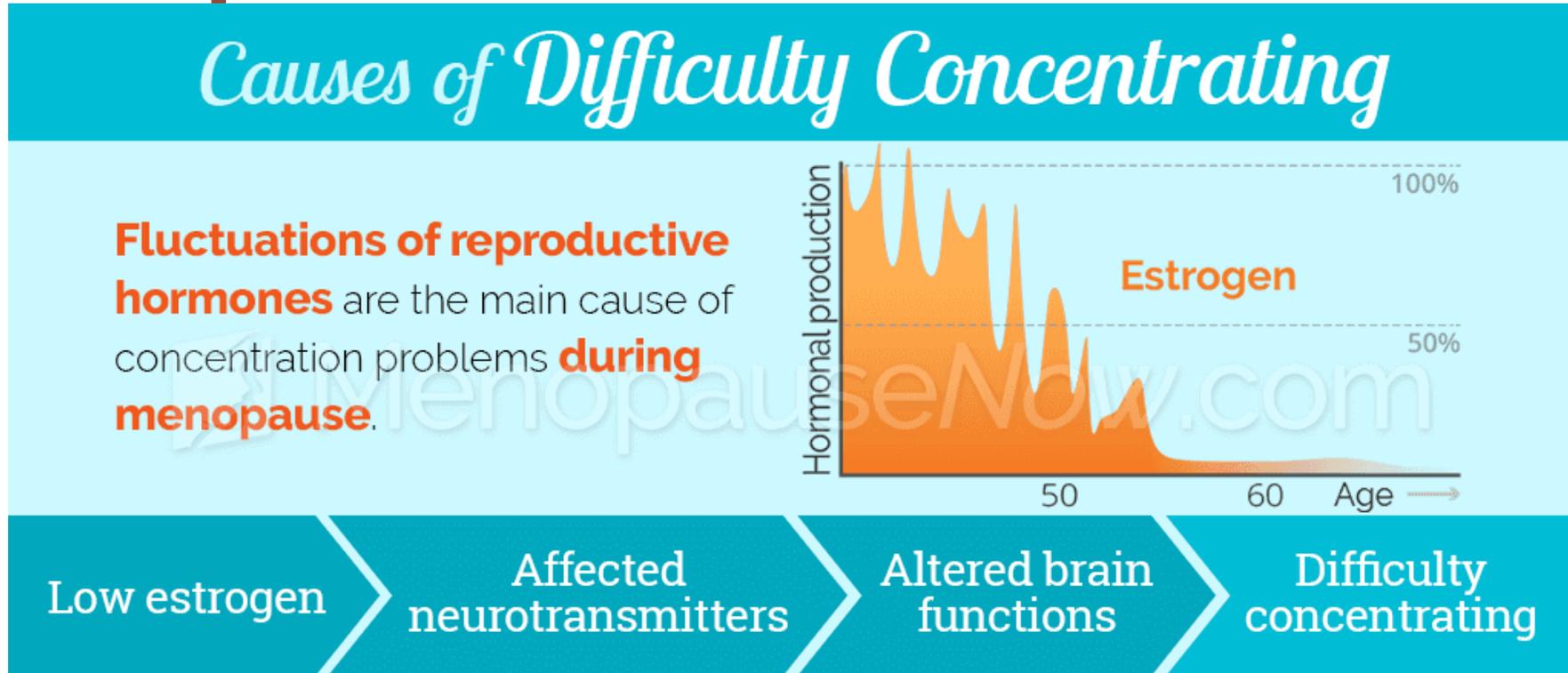


Learning



- Learning is the acquisition of new knowledge or skills.
- The ability of the mind to learn and retain new information remains unaltered, particularly when mind is stimulated through regular use.
- The ability to solve complex problems decline with age.
- Hearing and visual deficits related to aging process can affect learning.

Attention span



- There is decrease in vigilance performance.
- Vigilance performance is the ability to retain attention longer than 45 minutes.
- The elderly is more liable to distract (divert) attention by irrelevant information and stimuli.
- Deficits in attention may affect learning and memory.

Social changes



mainlinehealth.org

- The social changes that come with life are change in life style, loss of other family members, neighbors and friends.
- The main social problems, which confront elderly persons, are:
 - social isolation
 - finance
 - loneliness
 - rejection and loss of purpose in life.
 - deterioration in housing standard and poor nutritional level.

Retirement

- A change in work role comes with retirement.
- It changes the way time is managed and daily activities are carried out.
- Retirement alters identity, status, financial problem, lack of self-satisfaction and self-esteem and sometimes friendships.



Widowhood



northwestprimetime.com

- A common event that alters family life for the aged is the death of a spouse.
- The spousal role composed of many sub roles, such as companion, sexual partner, confidante, cook, house-keeping, and care provider.
- Loss of spouse is a highly stressful experience. Death of a spouse affects more women than men because most older men will marry again .

Loneliness

- Loneliness is the feeling of emotional isolation, being locked inside oneself and unable to obtain the warmth and comfort from others.
- Any loss that creates a deficit in intimacy and inner personal relationships can lead to loneliness.



Role change

- Numerous role changes occur with the aging process, but the transitions expected by most elders are related to the work role and the role of spouse or partner.
- In some culture, women need to take over the childcare role of their grandchildren.



smithsonianmag.com

Multiple losses

- Aging is associated with major physical, psychological and sociologic losses as well as a reduced ability to adapt and compensate for stressors.
 - Loss of job (retirement)
 - Loss of status
 - Change role
 - Loss related to normal age-related changes
 - Decreased income
 - Increase expenditure on medical services
 - Loss of significant person
 - Loss of housing
 - Decreased the ability to adapt and compensate for stressors
 - Limitations impose as a result of multiple chronic diseases

Awareness of mortality

- Widowhood, death of friends, and the recognition of declining functions make older person more aware of the reality of their own death.
- Attitudes about death vary with aging.
- The elderly tend to think and talk about death, but they find the prospect of death less frightening.



Psychosocial problems



- Poor adjustment to role changes
- Poor adjustment to lifestyle changes
- Family relationship problems
- Grief
- Low self-esteem
- Anxiety and depression
- Aggressive behavior
- Loneliness
- Isolation
- Problems with sexuality
- Elderly abuse
- Withdrawing and having a negative attitude toward life in general

Tasks for successful of aging

1. Adjusting to declining health and physical strength.
2. Adjusting to retirement and reduce income
3. Adjusting to death of a spouse.
4. Establish associations with others in the same age.
5. Maintaining a satisfactory living arrangement.
6. Adapting to changes in social roles.



thelifeadventure.co

Midwives' role to promote psychosocial adaptation

The **psychosocial assessment** is an essential component of the overall health assessment

INTERNATIONAL CODE OF ETHICS FOR MIDWIVES

The code addresses the midwife's ethical mandates in keeping with the Mission, the International definition of the Midwife, and standards of ICM to promote the health and well-being of women and newborns within their families and communities. **Such care may encompass the reproductive life cycle of the woman from the pre-pregnancy stage right through to the menopause and to the end of life.**



Intervention to enhance mental alertness

Allow the client to do as many tasks for himself as possible.

Encourage use of the mind in problem solving.

Encourage use of numbers and calculations.

Encourage creative activities (e.g. painting, story telling).

Encourage the discovery of new talents and abilities.

Intervention when taking care of women with short memory loss

Identify yourself each time there is an interaction with the client.

Give instructions in simple, direct terms.

Repeat instructions several times.

Explain every thing that is happening, even if the client does not seem to understand.

Perform only one activity at a time.

Report any sudden confusion.

Intervention when teaching new information

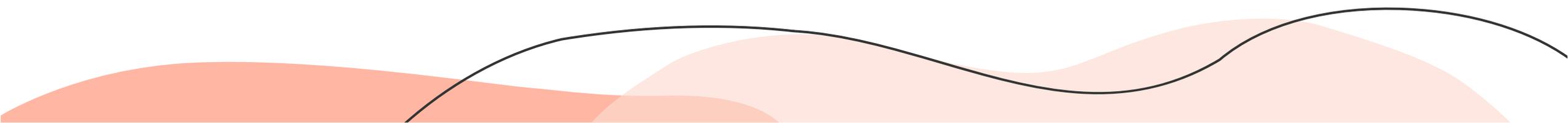
Assess current knowledge.

Evaluate for any visual or hearing deficit. Make sure the hearing aid is working or glasses are available, if indicated.

Determine the person's ability to learn.

Identify any language barrier.

Determine if the information to be taught is thought to be important or relevant to the elderly person.



Cont.

Begin by reviewing familiar information and then move to new information.

Teach the spouse or family member as well as the elderly person if possible.

Plan teaching over several days, with small increments of information presented at one time.

Actively involve the client in the learning process.

Allow time for feedback to evaluate knowledge

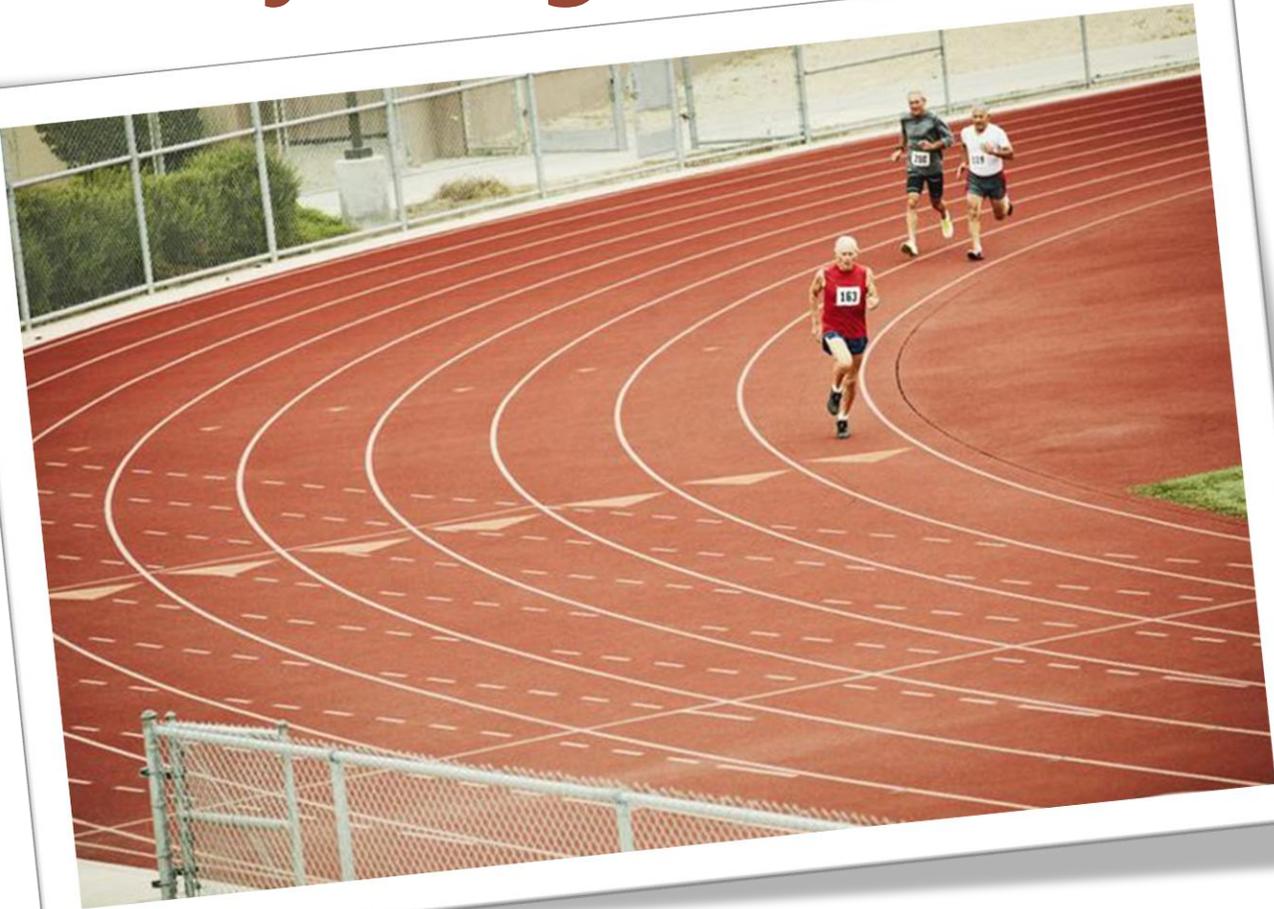


Intervention to increase self-esteem

- Develop a trusting relationship
- Treat the elderly with dignity and respect
- Allow sufficient time for the performance of daily activities of self-care
- Encourage verbalization
- Practice active listening
- Give positive reinforcement for progress.
- Use reminiscence therapy (encourage the elderly to recall or remember past events).
- Be alert for opportunities to include the patient in decision making.
- Use verbal and non verbal communication
- Encourage socialization.



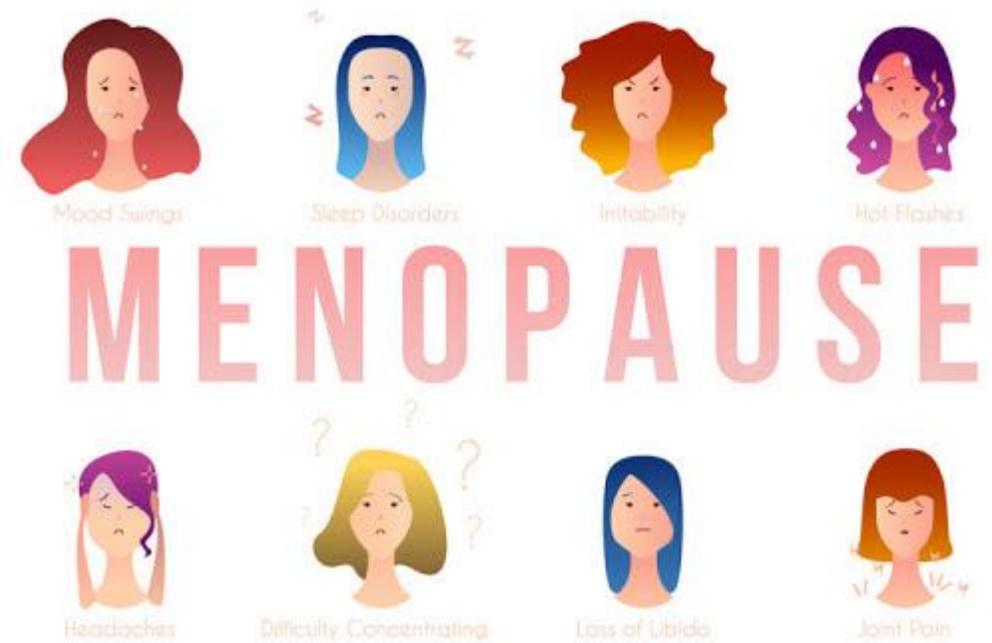
Adjusting to retirement



- It is easier if activities that will become prominent after retirement are begun during the working years.
- Therefore, adjustments to retirement are influenced by pre-retirement plan and engaging in other activities before withdrawing completely from their work.

Facilitating maximum independence

- Make sure that the person has access to all necessary assistive devices and personal accessories.
- Allow enough time for the person to perform tasks at her or his own place
- Make sure that the environment has been adapted as much as possible to compensate for sensory losses and other functional impairments.



Conclusion

Q.S Hud:15-16 bahwa semakin bertambah usia semakin lemah tangan menggenggam, kedua

Q.S Al Isra: 72 pandangan mata semakin kabur ,

Q.S Al Lukman: 22 perasaan jika sudah tua semakin sensitif

QS Al Imron :145 semakin tua gigi kita semakin berkurang, berguguran silih berganti, memungkinkan ompong,

QS An-nisa: 78 Nikmat kekuatan tulang dan sendi pun berubah, muncul rematik, asam urat dan mudah lelah,

QS Al Imron: 185 rambut berubah warna dari hitam ke putih

QS Al An'am: 32 hati semakin sepi karena



Questions & answers

