The paper highlighted the various pains undergone by elderly people in our neighborhood. Theories of ageing were well explained and its implication on social work was also buttressed. The paper elucidated relevant areas professional social workers will be needed to discharge their functions, especially in the rural areas of Opobo/Nkoro Local Government Area. The demand for government to provide adequate health facility to the poor and vulnerable is duly emphasized considering the plight of the elderlies in the society.

**Keywords:** Physical Changes, Theory, Pains and Elderlies.
INTRODUCTION

The pains of the Elderly and the implication of social work:

Pains can be described as excruciating feeling as a result of physiological disequilibrium or disorganization of body's state of health. However, according to Collins, (2006); pain is a feeling of great discomfort at any time. On the other hand, Elderly can be defined as a polite way of saying someone is old. An Elder can also be defined in terms of cultural background of any Nation. The elders in this study are those within the ages of 65 through 80 years and beyond.

Old age is the final stage of the process of ageing before death (Onyeze, 2010). This is the stage in life when the skin wrinkles, hair turns white, and is gradually lost, the body organs deteriorate (for instance, seeing and hearing diminished and reflexes slow down). According to Onyeze, (2010), these effects of physical ageing are easily noticeable even before the age of 50, though the effect of ageing on people is a highly individualized phenomenon depending on aquatic differences as well as variances in life experiences and habits causing body wear and tear to be variable. It is also believed that no star athlete is known to retain his and her title beyond the age of 50. This is because by 50 the effect of Ageing would have significantly taken its toll on the human body no matter what. According to Roesnfield, stated that human body at 50 commences gradual decaying of senses, locomotive power, memories etc as inevitable processes of growing old.

Oyiogu, (2007) enumerated manifestations of the old age into physiological changes as follows:

- Reduced strength and work capacity as well as fatigue.
- Frequent malfunctioning of body organs.
- Loss of memory resulting in difficulties in remembering names of people and places.
- Owing to reduced supply of essential hormones in the body, some internal body actions either slow down or stop, resulting in drastic slowing of healing such as in the case of fracture and effective control of the amount of sugar absorbed into the blood, resulting in certain diseases being common amongst the elderlies, such as diabetes, high blood pressure, etc, change in the reproductive system manifest in woman with the setting in of menopause, and in men with decline in sexual propensity. However, experts have continued to insist that sexual drive in both male and female does not cease. It should be emphasized here that desire to be loved and cherished continues to be strong.

PHYSICAL CHANGES:

At the stage of old age, impaired vision sets in and the eye may lose its sensation to color. Clear perception becomes more difficult to achieve. There is also impaired hearing in many cases particularly with regard to sound frequency, loss at body balance resulting in the need for use of walking stick. Apart from the
above, there are cases of wrinkles appearing on hand and feet, as well as on the face, and the head appears reduced in size, and is often bald and or turning whitish or gray. Although it should be mentioned here that gray hair is not an effective index for measuring age as young people also grow gray hairs as well for various causes.

**THE PROCESS OF AGEING:**

Ageing is an on-going process from the cradle to the grave. It does not come over night. It is a gradual process that runs paripassu with gravity tile growing finally giving has for ageing (Okoye, 1998). According to Bromley 1908, “it is not generally realized that even in early life and through the juvenile period, the processes of ageing are taking place. Bromley, (1978) pointed out that "life beyond the juvenile period is a combination of adult ageing and adult development in which the cumulative efforts of ageing eventually preponderate".

Although, the issue of ageing is gradual and almost un-noticed in time, yet it constitutes a serious threat to the ageing and the aged. According to Agate (1979) ageing really does not matter to the elderly themselves, for it begins significantly to affect the performance of their daily tasks and can ever spoil enjoyment of their usual pleasures despite the fact that they seem healthy people when tested by doctors using their methods of clinical examination.

**AGEING AND VEGATABLE PROCESSES:**

With ageing, salivary flow and gastric juice supply decrease and these make the ageing to develop less efficient digestive functioning. However, ageing does seem to affect the digestive system very adversely. According to Bromley, digestive system is relatively robust and not seriously impaired by ageing, except for the increased risk of pathology common to all physiological system.

According to (Okoye, 1998), kidney malfunctioning indicates some step increase with ageing and if not effectively arrested, may affect the brain and finally may lead to abnormal behavior manifestations usually observed in the elderly. According to Okoye, the rate at which people normally use oxygen when they are resting is referred to as the basal metabolic rate. And it has been observed that this metabolic rate decreases with age and this is because with ageing there is gradual but steady decrease in the number of body cells. This diminishes activities in the liver and muscle regions, as well in the secretion of thyroid glands. It is interesting to note that the temperature of a given habitat affects the level of individual longevity. According to Bromley (1978). “… cold conditions appear to slow down metabolism and prolong life, while high temperatures have the opposite effects. Bromley (1978) however observed that all-in-all temperate climate increases the level of human life expectancy much more than would be the case in tropical or cold climates.

With ageing, there is impairment of glucose tolerance as a result of decreased sensitivity of specific
pancreatic cells to changes in the level of blood sugar—a function associated with homeostatic balancing. Ageing persons usually experience reduced respiratory efficiency arising from lower cardiac output, reduced volume of air in the lungs and poorer supply and spread of oxygen. A decline in the rate and the regularity of the rhythm of the heart is usually observed in a humans nearing the age of 60. Akin to this, is the observation that as ageing sets in, there is overall decline in the level of responsiveness of the autonomous nervous system and physiological functioning of the ageing person leading eventually to diminished arousal level of emotion. Besides, as a person older, he experiences gradual build-up effects of loss of cortices which in turn adversely affects the level of emotional responsiveness of the ageing person betraying itself in lowered intensity and short lived nature of his emotional manifestations.

Visual and auditory acuities decline with the age of an individual but auditory decline is more gradual and less noticed than visual decline. Greater hearing loss occurs in men than in women and noticed more on the left ear than on the right ear, as ageing sets in. with ageing, the individual’s taste-buds in the tongue begin to decrease in number. This is also true of olfactory bulbs. Thus the ageing person becomes insensitive to sugar and salt. Decline in gonadic functioning of both men and women are observed as ageing occurs. To women this is signaled by onset of menopause around the late forties (depending though on individual differences). In men (at a much later age than women) climacteric, (the male counterpart of female menopause) occurs. Sexual activities continued to be performed by ageing persons; however, there is a gradual reduction with age as regards the frequency of these sexual activities.

PEOPLE’S PERCEPTION OF THE AGED:

Who is elderly and who is not depends to a large extent on the society where they belong. In a society where few persons reach the age of 60, those who make it up to 50 are regarded as old. Stanley (1978) states that in Soriano of Bolivia, life is harsh that those who survive forty are worn out and considered old.

According to him in Eskimos an old man is considered old when he and she are no longer productive and become a burden to society. For these Eskimos, such a person is expected to die for the good of the group. However, in Ainu of Northern Japan it is different they neglect their elderly without compassion, allowing them to live but in utter disrespect and impoverishment. Although in Aranda of Australia, it is totally different. Their elderlies are said to be revered and preserved for great secrets of life. The entire whole, depending on how the various societies of the world see their elderlies, they have equally adopted varying practical solutions to deal with the problems posed by these old people in their different societies. Simone (1973) categorized societies according to the manner in which they help solve their problems as follows;

- Those who kill them
- Those who leave them to die
- Those who give them a minimum to support to life
Those who make provision for them

In the case of Opobo/Nkoro Local Government Area which comprised three major districts namely: Opobo Town, Nkoro Town and Queens Town. In these rural areas, life expectancy is at low ebb such that villages in these communities have no standard health care and a regular medical health care and physicians. Elderly people bear their own fate. And so the pains they encountered are better imagined than experienced. No wonder we have high rate of adult mortality. Again, elders in these local government areas are highly respected and they are regarded as custodian of culture. Especially they perform rituals during burials, traditional culture display and they act as priests to traditional religion programme unlike the previous perceptions of elders; in this local government area mentioned, the older adults are honored. Although they witness various pains of the elderly and is common to rural areas.

EMPOWERMENT FOR DIVERSE POPULATION OF ELDERLY PEOPLE:

Working with the elderly is very “complex and demanding; given the range of needs of this population, the various subgroups of at risk. Elderly people, especially considering multiple roles, social workers must undertake to address their needs (Zuniga, 1995). Again, Cox and Persons (1994) stressed that an empowerment orientation of practice “can assist older people to utilize their strengths, abilities and competencies in order to mobilize their resources towards problem solving and ultimately towards empowerment.

POLITICAL STRUGGLE AGAINST BECOMING ELDERLY:

Though, a lot of scientists state radical life extension delaying and stopping ageing are achievable, there are still no internationally or national programmes focused on stopping ageing or unradical life extension. In 2012 in Russia, and then in USA, Israel, and Netherlands the longevity political parties started. They aimed to provide political support to anti-ageing and radical life extension research and technologies and want to ensure fastest possible and at the same time soft society transition to the next step-radical life extension and life without ageing that will make possible to provide the access to such technologies to the most of currently living people (Wikipedia, 2012).

BASIC THEORIES OF GETTING OLD:

Genetic theories: This refers to accumulation of damage to DNA in the cell or genes that can lead to its loss of integrity and early cell death which may include the following Accumulative wastes. Theory of wear and tear and somatic mutation theory, which implied ageing which cause damage to the genetic integrity of the body cell.
Non-biological theories:

Disengagement, activity, selectivity, and continuity theories

**Disengagement theories:** explains the separation of old people from acute roles in society which according to Cumming and Henry is normal and appropriate. Although this theory has witnessed several criticism. From research the elderly who become detached from society are those who were initially reclusive individuals that such disengagement is not purely as a response to ageing (free encyclopedia, 2012).

**Activity theory:** Maintain that elderly adult should maintain well-being and getting involved in social activity and keeping active in response to society calls. Elderly are expected to perform minor activities.

**Selective theory:** this strike a middle point between activity and disengagement theory that it will benefit older people to become more active in some aspects of lives.

**Continuity theory:** stipulates that ageing people maintain as much as they can, the same habits, personalities and style of life, that they developed in earlier years.

The above studies of theories will no doubt add impetus to understanding of the pains of the elderly. This pain suggests the common problems confronting the elderly people or the aged. Besides the above, are some biological theories as;

**Waste Product Theory:** For a living organism, waste materials are produced in the body. Under normal circumstances these waste materials are eliminated through the normal process of excretory system. If the waste products are left to accumulate in the body for long, un-eliminated, then toxic situation will be generated-a situation which eventually will lead to general weakening of the body organs and eventual poor performance of various organs of the body. This situation will therefore lead to a general debility of the body and will make the overall body to age.

**Stress Theory of Ageing:** Exposure to harsh and difficult environments and to the ups and down of urban and technological setting generate lots and lots of stress. Since stress lowers the general body tone and causes homeostatic imbalance and disequilibrium. It makes the individual susceptible to ageing.

**Cellular Theory of Ageing:**

This theory regards the human cells in the body as being made to serve the individual effectively up to the end of normal reproductive functioning. Beyond this point, no guarantee is given that the cells will continue to function effectively, hence at this point, these weakened cells find it difficult to cope with the normal demands of the whole body mechanism and this quickens the onset of ageing in the affected
individual.

THE PAINS OF THE ELDERLIES:

Ageism, discrimination in employment, poverty, retirement, elderly abuse, Living condition and family variables transitional issues and lean financial resources, as well as health challenges just to mention a few.

Ageism: In the context of this paper implies handling negative images of and attitudes towards people simply because they are old. It is similar to sexism or racism, which involves prejudice towards discrimination against people who fit into certain category.

Discrimination: It is all normal experience for employers to fix limit to certain job selection to the detriment of the adults. This attitude of the employee labour raises dust amongst the elders

Poverty: poverty rate for the elderly vary widely depending on gender, race, ethnicity, marital status rage. In fact people are more likely to be poor if they are female for instance, color, single, and age 55 is old (Mouney, et al 2012).

Retirement: Breeds sorrow to most elderly people reason is that, retirement benefits are never paid when due. Retirees are owed several billions, some of them may die in cause of processing their retirement benefits. Most often than not the money meant for the retirees are embezzled or diverted to another social needs. Retirement might sound good to many, but is often require quite an adjustment; retirees must cope with a new way of life.

Health care: This is another area of concern. The older people seek more medical care than the young ones and elderly people very often have long term illness and they take long time to recuperate. The elderly spend three times as much on health care than younger population group (Mouney et al. 2012).

Elderly abuse: The physical and emotional abuse of elderly people is receiving increased public attention, it refers to the inflicting or emotional harm and taking advantage of elderly people financially or neglecting them (ignoring the fact that medical treatment is needed) (Hooyman and Kiyak, 1999).

Problem of Engagement:

The ageing person who has been actively engaged in one occupation or the other has a sort of got conditioned to work situation and is activity-oriented. If he or she retires at the retirement age, and is immediately cut off from his or her usual work activities and routine engagement, and is not engaged in an alternative activity-oriented job or occupation, he or she may release into a psychological state technically
referred to as ‘disengagement’ due to inactivity.

**Depression and Ageing:**

Depression has been defined as feelings of helplessness, hopelessness, inadequacy and sadness (Wolman, 1975). Normal individuals occasionally experience some sort of depression as a result of exposure to some disheartening phenomenon. At ageing period, some people become victims of involutional depression symptomized by a mood disorder, characterized by worry, anxiety, agitation and insomnia, often with guilt feelings (Wolman 1975).

**Estrangement:**

One of the psychological problems of the ageing person is estrangement. Estrangement is a psychological state of an individual symptomized by overall confusion about the environmental setting in which the individual finds himself or herself. A victim of estrangement complains of being a queer place even though he or she is still in the same usual habitat where he or she has been living in.

**Faculty Identification of Persons:**

The ageing person may have bouts of confusion in his or her perceptual judgment and makes very embarrassing identification errors about even persons who are really closely related to him or her. In some cases, an ageing mother who is a victim of faulty sanctification may refer to her son as her brother or her husband. She may refer to her daughter as the other woman.

**Soliloquy and Ageing:**

As the elderly person becomes psychologically isolated, he or she loses psychological contact with people around him for reasons already discussed above. Because the short term memory storage center has become dysfunctioning and the ageing person is operating with the long term memory storage center has become dysfunctioning and the ageing person is operating with the long term memory storage centre, he or she therefore recalls early past experiences and remembers his or her childhood or school-day associates (dead or alive) and begins to talk to them as though they are physically present-before him or her (Okoye, 1998).

Apart from the above seemingly frustrating life experiences, elders undergo one severest pain in life, although not every elderly person experience same magnitude of problems. Reason is that some of the elders are well off themselves, or they have wealthy children who can cater for them. On the other hand there are elders who neither have the means or wealthy children to cater for them, consequently these Elders suffer more than others mentioned for the foregoing and even die before the ripe time. Another painful
phenomenon is the issues of name calling as; 'you old man or woman', this consequently, most of times, provoke the elderly who now perceive this insult as to their persons. Besides certain chronic sicknesses associated with old age, coupled with the inability of the aged to exert ‘influences’ as when they were young posed treat to their life situation and made them sad often. But that is normal and it is route everybody must experience in life if you are aged.

ELDERLY PEOPLE OFTEN MUST DEAL WITH DECREASED POWER IN MANY WAYS:

Firstly physical health tends to decline as people age, so the elderly must very rely increasingly on supportive help to survive. Secondly, most elderly people always experience “a modest impairment of short time memory, a decrease in speed of learning, a slowing of reaction time and some degree of mild forgetfulness”. (Cox and Parsons, 1994). Thirdly, it is also believed that these elderly often experience loss of support system as their peers, health declines. And just as mentioned previously the retirement may require adaptation on the elderly part and learning of new adjustment strategies. And finally, the elderly may encounter age discrimination by younger people based on prejudicing stereotypes such as an emphasis on physical, mental and economic weakness. More so, the elderly feel uselessness when they realize that they are not employable (Kivist-Ashman, 2007).

ROLES OF THE SOCIAL WORKERS:

Social workers link resident, without side services when needed. And perhaps a resident needs access to library holding or wheelchair, capable transportation or requires now glasses, hearing aid, or wheelchair. In nursing homes, social workers counsel residents when needed, helping them cope with illnesses and deteriorating function, deal with emotional problem, enhance social skill, and make decisions. Social workers can be useful in educating residents and their families about complicated medical conditions and treatments. The workers can also assist residents and their families in making financial decision. Such as applying for public assistance or a pension, contracting lawyers, or discussion and of life issues such as funeral arrangements (Kivist-Ashman, 2007).

In addition, social worker according to Cox and Parson (1994) can listen carefully to what clients are saying and work to understand what they mean. Cox and Parsons (1994) explain “that engaging in and drawing out the emotions of elderly clients and helping them frame their situation in view of past experience and events are effective listening techniques”. It is advises that the elder should be allowed to be independent and make choice freely on their initiative hence that will enhance or promote positive relationship. Even beyond the above social workers help clients identify their coping skill and their ability to implement planned change indeed services of social workers is endless as regards to services to mankind.
IMPLICATION FOR SOCIAL WORK:

As in services for children and families there exists a continuum of care for the elderly ranging from supplementary services for people in their homes to intensive residuals case (Kirst-Ashmah, 2007). It is not wrong to note that the primary valued stressed when working with the elderly is (Autonomy). It is necessary that social workers should ensure that elderly individuals are kept independent and autonomous as possible for as long as possible. The three possible services are long term care through home health, and community services, discharge planning in hospitals, and service provision in nursing homes.

**Long term care:** Is health personal care and social services delivered on a sustained period of time to persons who have lost or never achieved some capacity for self care. It may be continuous or intermittent and it strives to provide care in the least restrictive environment (Kane, 1987).

**Home-Based Service:** In this case social worker in the broker role link clients to services and the case manager role oversee and coordinate service provision. Home-based service or home care is the types of assistance provided to people in their own homes.

There may also be an “Informal support Network” refers to system of individuals who provide emotional, social, and economic support to a person in need. The family is the primary and preferred source of support. This occurs for old people in United State of America.

However, in the Africa settings an extending family may do the function or House help. Although in Extremely case, it is the duty of social worker who understands family dynamics, group processes, community organization and volunteer management, they possesses knowledge and skill to intervene in variety of ways within an informal network (Kropt 2000 P2).

**Community-Based Services:** this is service provided outside the home in the community which in variably form another dimension of the formal support network. In a scene the social workers performs variety of functions such as providing health care to meeting psychological and social needs of the poor (kropt, 2000). The social worker should get involved in a number of activities apart from the mentioned functions. They may focus on these adult day care, Hospices, senior centers, congregate meal program and senior home repair and maintenance programs. (Krist Ashman, 2007). In Africa, especially Nigeria social workers will highly be needed, apart from their direct services, in Rehabilitation centers and Internally Displaced Persons (IDPs) camps, and in schools and medical centers.

**Mushroom Meal and Longevity:**

Edible mushrooms of various brands have had a history of prolonging life. The tortoise which is known for longevity has been found to depend very heavily on mushrooms. However, care must be taken not
to eat poisonous types of mushrooms as these can kill instantly; therefore, social workers should guide her/his client in what type of mushrooms are edible.

**Fasting and Longevity:**

Metchnikoff’s research studies on Bulgarians as regards their renowned longevity and not taking their full meals per day. Christ fasted for forty days and forty nights and point out “Man does not live by bread alone”. Recent researches have proved that fasting, after all, may even elongate life rather than shorten it. It depends! On the other hand, over-eating may shorten life rather than elongate it. It all depends on your mode of and quality of eating (Okoye, 1998).

**CONCLUSION**

It is the objective of this paper to point out several pains that elderly people undergo that make some of them die in their early old age especially those who never had children of their own or necessary home assistance. Therefore it is necessary for those of us who are professionals to volunteer our services and render those skills, knowledge and evidenced-based experience we have acquired to the formal and informal recipients for the development of rural areas and country at large. The government should act fast by providing health facilities, necessary financial allowance, and posting of social workers to all the local government areas of Rivers State. This will enable them offer necessary assistance to the elderlies before they go home, otherwise, the fate of those elderlies living long enough will be a mirage. Especially, elderlies in Opobo/Nkoro Local Government Area of Rivers State like others in Rivers communities will be grateful to government embark on sensitization programme on improving the well-being of the rural poor.

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