



Psychological Dynamics in Late Adulthood: A Study of Physical, Sexual, Career, and Socioemotional Aspects

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Abstract

Introduction to The Problem : Late adulthood is a phase of life filled with challenges due to the complex changes in physical, sexual, career, and socioemotional aspects. This stage is often overlooked in conventional psychological approaches, yet it is crucial to understand it holistically. **Purpose :** This study aims to explore the psychological dynamics of the elderly, highlighting various changes and their impact on the well-being of individuals in late adulthood. **Design/methods/approach:** This research employs a qualitative approach with a literature review method, analyzing 48 sources consisting of books and articles from various academic databases to develop a thematic synthesis. **Findings :** The study indicates that the elderly experience physical decline and motor function deterioration, sexual adjustment shifting from biological satisfaction to emotional affection, a career orientation shift toward reflection and the search for meaning, as well as emotional challenges such as loneliness, depression, and identity crises. Social and spiritual support play a crucial role in maintaining the well-being of the elderly. **Research implications/limitations:** The limitation of this study lies in the absence of field data, meaning the findings cannot be broadly generalized. However, the results provide a valuable theoretical perspective that can serve as a foundation for the development of psychosocial interventions. **Originality/value :** This study offers a holistic understanding of the elderly as individuals who continue to develop psychologically, while also opening opportunities for further empirical and contextual research.

Keywords: Late adulthood; psychological dynamics; physical changes; sexuality; career; socioemotional aspects.

Introduction

Psychological dynamics in late adulthood reflect the various complex changes in physical, sexual, career, and socioemotional aspects that individuals face in the later stages of life. These changes experienced during old age are part of the lifelong human development process, from birth to death. These transformations not only affect the biological aspects but also influence how the elderly think, feel, and interact with their surrounding environment. Therefore, a deep understanding of individual development in late adulthood is crucial, both for scientific and practical purposes, in order to address issues related to the well-being of the elderly.

In classification terms, the World Health Organization (WHO) categorizes the elderly into several age groups: elderly (60-74 years), old (75-90 years), and very old (over 90 years) (Moh Hanafi et al., 2022). The Indonesian Ministry of Health defines the pre-senile elderly as ages 45-59, senior citizens as 60 years and older, and those at risk as individuals who are 70 years or older. Meanwhile, according to Law No. 13 of 1998 on the Welfare of the Elderly, individuals aged 60 years and above are considered elderly (Hidayanti & Purnami, 2008). This classification indicates that the elderly stage spans a wide and diverse spectrum, so understanding the needs and characteristics of each age group is crucial.

Physically, the elderly experience a decline in bodily functions that affects their independence. Sexual function and potential also decline due to hormonal changes and health conditions, impacting intimacy and psychological well-being. In late adulthood, careers are no longer seen as a means to achieve material success or professional development, but rather as a form of self-actualization, social contribution, and reflection on life's journey. Emotionally, the elderly may experience positive emotions such as gratitude, but they are also vulnerable to negative emotions such as loneliness or anxiety due to the loss of social roles, a partner, or deteriorating health. Socially, there is a shift as the elderly tend to lose active roles in society, which can lead to feelings of being unwanted unless supported adequately.

Several studies have examined the psychological aspects of the elderly. Hurlock states that a series of physical, social, and psychological changes experienced during the aging process require individuals to be prepared (Afrizal, 2018). The effects of these changes will determine whether an elderly person will successfully adapt or not. Havighurst suggests that the developmental tasks of old age include adjusting to declining physical strength and health, adapting to retirement and reduced family income, coping with the death of a spouse, forming relationships with peers, and adjusting to social roles (Afrizal, 2018). Nurani et al. state that elderly individuals who experience positive psychosocial development tend to understand their roles in life, have the initiative to maintain physical and mental health, and can build good social relationships (Herman et al., 2023).

This study aims to comprehensively review the psychological dynamics experienced by the elderly, focusing on four main aspects: physical, sexual, career, and socioemotional aspects. Understanding these dynamics is expected to provide both theoretical and practical foundations for supporting and empowering elderly individuals holistically.

Literature Review

The elderly represent the final stage in the journey of life, marked by a decline in the body's ability to adapt to environmental stress, weakened resilience, and increased sensitivity to various

conditions (Efendi & Makhfudli, 2009). The World Health Organization (WHO) defines 65 years as the beginning of the aging process, categorizing individuals as elderly. At this stage, individuals generally begin to face various health issues that require prompt and coordinated management. WHO classifies the elderly into four categories: middle age (45-59 years), elderly (60-74 years), old elderly (75-90 years), and very old, which is over 90 years (Astutik et al., 2017).

According to Indonesian Law No. 13 of 1998 on the Welfare of the Elderly, in Chapter I, Article 1, Clause 2, it is stated that elderly individuals are those aged 60 years and older. Everyone will go through the aging process, and old age is the final stage of human life. At this stage, individuals typically experience a decline in physical, mental, and social aspects, eventually losing the ability to perform daily activities optimally. For most people, old age is often viewed as a less enjoyable period of life.

From various definitions of the elderly, it can be concluded that old age is the final stage of adulthood, starting around the age of 60 and lasting until the age of 120. This stage is the longest period in the human development cycle, lasting approximately five to six decades. Old age is also the concluding phase in life, where individuals generally experience gradual decline in physical, mental, and social functions.

The aging process is marked by the gradual decline of the body's biological functions. According to Creath Davis (in Paende, 2019), aging begins in the 30s and includes changes such as wrinkles, reduced muscle strength, and weakening of the sensory system. Hurlock (in Jahja, 2011) identifies four main factors influencing physical development: the nervous system, muscles, endocrine glands, and body anatomy. These physical changes directly impact the quality of life if not accompanied by proper care and adaptation to these changes.

Sexual changes in the elderly are closely related to hormonal decline and reproductive function. Climacteric in men and menopause in women lead to physiological changes that can affect sexual activity. Rubin (in Hurlock et al., 1991) asserts that sexual desire can persist as long as physical conditions permit. In addition to physiological factors, psychological factors such as embarrassment, family support, and emotional closeness also influence the sexual interest and behavior of the elderly (Priyantini & Dwiharini, 2012).

Career changes in the elderly are closely tied to retirement. Turner & Helms (1987) state that retirement is a major transition from work roles to new social roles. Elderly individuals who are not psychologically prepared for retirement are vulnerable to identity crises. According to Pradono (2009), there is a negative relationship between self-adjustment and anxiety in facing retirement—the better the self-adjustment, the lower the anxiety. Zohar and Marshall (2000) emphasize the

importance of spiritual intelligence as an inner strength in responding to this transition with a wiser and more positive attitude.

Emotionally, the elderly are in a stage of reflecting on their lives. Those who can accept their achievements and failures positively will feel peaceful and happy. However, those who cannot may be prone to depression, anxiety, and despair (Monks et al., 2006). In social aspects, role changes such as retirement and the loss of a partner can lead to decreased social interaction. Family support becomes vital in preventing social isolation and loneliness (Rozali, 2010). Maslow also emphasizes that the need for love and acceptance remains important in old age, and its inadequacy can trigger emotional maladjustment (Iskandar, 2022).

According to Havighurst (in Hurlock et al., 1991), most developmental tasks in late adulthood are more focused on the individual's personal life aspects rather than involvement in the lives of others. Some of the developmental tasks include the following:

a. Adjusting to the decline in physical strength and health

This situation is often understood as an effort to adapt and shift roles previously held, both in the domestic and social environment. The elderly are expected to find new activities that can replace the old roles that once took up a significant portion of their time during their productive years.

b. Adjusting to retirement and the reduction of family income

At this stage, the elderly have typically entered retirement and are no longer actively engaged in work, so their source of income is limited to pension funds or financial assistance from their children.

c. Adjusting to the death of a spouse

Many elderly individuals need to prepare and adapt to the possibility of losing a spouse. Events like the death of a husband are often a significant challenge, as it may lead to a decrease in income, the emergence of risks associated with living alone, and the need to adjust to a changed lifestyle.

d. Forming relationships with suitable individuals

In late adulthood, individuals tend to form relationships with other elderly people as a way to cope with the loneliness that arises from children growing up and no longer being active in the workforce after retirement.

e. Establishing a satisfying physical life arrangement

With the awareness of declining health and bodily functions in late adulthood, individuals make efforts to maintain and adapt daily activities that support their health, such as regular exercise and following a regular diet.

f. Adjusting to social roles flexibly

In late adulthood, individuals experience a shift in their roles in life. Because they have more experience than younger generations, the elderly are often asked to provide opinions, advice, or criticism. However, their involvement in social life tends to decrease, generally due to physical limitations.

Regardless of differences in social status, gender, or other variables, there are certain conditions that can be considered as supporting factors for achieving happiness in late adulthood (Hurlock et al., 1991). Some of these include:

- a. A pleasant attitude towards old age develops as a result of previous positive contact with elderly individuals in earlier years.
- b. Pleasure that has been fulfilling from childhood through adulthood.
- c. Freedom to achieve the desired lifestyle without external interference.
- d. A realistic attitude towards reality and the acceptance of physical and psychological changes that come with inevitable aging.
- e. Acceptance of one's current self and life conditions, even if they are below the expected conditions.
- f. Having the opportunity to reinforce satisfaction and establish a lifestyle accepted by the social group to which they belong.
- g. Continually participating in meaningful and engaging activities.
- h. Being accepted and respected by the social group.
- i. Feeling satisfied with one's current status and past achievements.
- j. Being content with marital status and sexual life.
- k. Good health without chronic health issues.
- l. Enjoying recreational activities specially planned for the elderly.
- m. Enjoying social activities with relatives, family, and friends.
- n. Engaging in productive activities, whether at home or voluntary work. Having sufficient financial resources to meet all needs and desires.

Based on the previous explanation of the factors that support elderly happiness, it can be concluded that a positive attitude towards old age is typically formed from pleasant interactions with the elderly in earlier years. Pleasurable experiences from childhood through adulthood also help shape a positive view of aging. Moreover, a realistic attitude and acceptance of the unavoidable physical and psychological changes due to the aging process are crucial. Elderly individuals who remain involved in productive activities, whether at home or through voluntary work, tend to have a higher level of happiness.

Methods

This study is a qualitative research with a library research method. Library research is a research activity carried out by collecting information and data found in libraries, such as reference books, previous similar research findings, articles, notes, and various journals related to the issues to be solved (Milya Sari, Asmendri, 2020).

The data in this study were obtained through the exploration of primary and secondary sources, including books and scholarly journal articles from various academic databases such as Google Scholar, Crossref, Garuda, and Sinta. Data collection was carried out by applying relevant keywords such as "Late Adulthood," "Psychological Dynamics of the Elderly," and "Elderly Development." These keywords were used to filter high-quality references from online sources with academic credibility. The inclusion criteria included articles discussing "human development in late adulthood," studies that were not limited by the publication date, and publications from journals indexed nationally or internationally. Meanwhile, books and e-books were used to strengthen the theoretical foundation, with no limitations on publication years, though content relevance was still considered. In total, this study used 48 references, consisting of 29 scholarly journal articles without time limitations and 19 books and e-books without publication date restrictions, while still considering content relevance.

In this study, the researcher plays the main role as the instrument in the data collection and analysis process. Data collection was carried out systematically with task division clearly structured among the four researchers to enhance the effectiveness and efficiency of the data collection and analysis process. Data were collected by clearly and systematically dividing tasks so that the research could proceed optimally, resulting in valid data and high-quality scholarly articles.

The data analysis in this study used a content analysis approach. This approach involves careful and systematic examination of material to identify patterns or themes within it (Hidayati S, 2024). The analysis process begins with collecting relevant data related to the research topic, particularly concerning human development in late adulthood. Once all data were collected, the researcher then conducted data reduction, summarizing and sorting which data were appropriate and which were not. The selected data were then simplified and classified into several main themes, such as physical changes in the elderly, sexual aspects, the role and meaning of careers in old age, and the social and emotional dynamics of the elderly. Each summarized data was analyzed using an interpretive approach, understanding the context and key messages of the referenced content. Through deep understanding, the researcher formulated initial, tentative findings, which were then organized into thematic synthesis forming the basis for drawing final conclusions. Conclusions

were drawn objectively based on the consistency of findings from various sources, thus providing a comprehensive and relevant understanding of the issues under study (A. Hidayat et al., 2025).

Result and Discussion

A. Physical Development

Biologically, everyone reaches their peak development during adulthood. Following this, human growth undergoes changes that lead to a decline. Creath Davis states that aging is a gradual process of decline, where around the age of thirty, one is not young one day and becomes old the next day. Appearance is one of the most common ways older adults notice signs of aging, such as a decline in bodily functions, weakened resistance to diseases, impaired vision, and changes in hair, such as graying and thinning, as well as rough, wrinkled skin on the face, neck, arms, and hands. Furthermore, internal body changes occur as well. Therefore, aging affects the entire body, not just visible parts (Paende, 2019).

The human body is a complex and remarkable system of organs. All of these organs begin to develop when the baby is still in the womb. In terms of physical development, Kuhlen and Thompson identified four components that influence an individual's physical growth: (1) the nervous system, which greatly affects the development of intelligence and emotions; (2) muscles, which affect the development of strength and motor abilities; (3) endocrine glands, which produce new behavioral patterns, such as the urge to participate in physical activities appearing during adolescence; (4) body anatomy, including height, weight, and proportions (Jahja, 2011).

"Older adult" is an abbreviation for "lanjut usia," referring to someone who is elderly, typically over the age of sixty. Due to the physical and mental changes that occur with aging, elderly individuals often require special attention in terms of health, social, and well-being. The well-being and quality of life of this age group are often the primary focus of policies and social programs (Bancin et al., 2023).

1. Physical Development

As individuals age, the human body undergoes various natural changes, including skin that begins to wrinkle or posture that starts to bend. Moreover, various bodily functions tend to decline. Almost every aspect of the elderly's life is affected by the aging process, from physical condition, health, to mental capabilities. Understanding these changes is crucial for providing proper care and attention to maintain the health of the elderly.

a. Skin becomes dry and wrinkled:

The skin undergoes various changes with age, making it appear drier, wrinkled, and more prone to damage. While the outer skin layer (epidermis) becomes thinner,

collagen and elastin production, which are responsible for maintaining the skin's strength and elasticity, decrease. As a result, the skin becomes less firm, more easily torn, and wrinkles appear. Additionally, sebaceous glands secrete less oil, especially in women after menopause, leading to dry skin that is often itchy.

b. Decline in other sensory functions:

As individuals age, other sensory functions begin to decline. By their 50s, the ability to smell and taste gradually decreases. Sweet and salty tastes are more affected by the physical changes in the elderly than bitter and sour tastes. However, weakened nerve endings in the nose and thinner, drier nasal lining lead to a decline in the sense of smell.

c. Slowed digestive function:

Compared to other parts of the body, the digestive system generally does not experience as many issues in older age. Although the esophageal muscles weaken, food can still move into the stomach smoothly. The stomach empties food more slowly and its capacity decreases. Additionally, entering old age often brings difficulty digesting milk because the body no longer produces lactase enzymes as before. Constipation can also result from slowed bowel movements as people age.

d. Decreased bone density:

This is one of the signs of aging. According to *Therapeutic Advances in Musculoskeletal*, aging causes a decrease in the composition, structure, and function of bones, increasing the risk of osteoporosis. Osteoporosis in the elderly is marked by a reduction in bone mass, density, and strength, making bones fragile and more prone to fractures. Due to the decline in estrogen levels, women after menopause experience this condition more frequently. Absorption of vitamin D and calcium may also decrease.

2. Motor Development

Motor development in late adulthood is an important component that determines their ability to live an independent and quality life. However, motor abilities often decline with age. This decline directly impacts the independence and quality of life of the elderly (Lawton & Brody, 1969). This condition is usually influenced by a combination of physical, psychological, and social factors, each contributing to the elderly's motor abilities.

Psychologically, motivation and self-confidence are crucial for the elderly to remain active in daily activities. This aligns with Bandura's self-efficacy theory, which states that belief in one's own abilities leads individuals to engage more in physical activity. Older individuals tend

to avoid physical activity, which actually worsens their motor abilities as their motivation declines. According to McAuley and Blissmer, lack of motivation can lead to a lower quality of life (McAuley & Blissmer, 2000).

Social factors are crucial in supporting the elderly's motor development. Through involvement in physical and mental activities, social support from family and communities has been shown to improve the elderly's quality of life. According to Bowling (2005), social isolation can lead to a decline in motor abilities and overall health, while social engagement encourages the elderly to remain active. This underscores the importance of social interactions in maintaining mobility and balance in the elderly (Aeni & Gustiawati, 2024).

a. Decreased appetite:

The elderly often experience difficulty swallowing or a reduced appetite, which can lead to malnutrition and significant weight loss. Therefore, it is essential to provide proper nutrition care instructions and methods to increase food intake. To meet the nutritional needs of the elderly, it is crucial for families and healthcare providers to assist (Pilgrim et al., 2015).

b. Loss of muscle mass:

The reduction in muscle mass and body strength is caused by a decrease in physical activity, as well as reduced growth hormone and testosterone, which are responsible for muscle formation. The loss of muscle fibers, which enable quick movements, causes movements to become slower. However, the loss of muscle mass due to aging is typically only around 10-15% throughout life. It is not aging alone that causes more significant loss, but rather illnesses in old age or less physical activity. One clear sign of significant muscle mass loss is an elderly individual becoming thinner. These changes are signs of aging (Niswatin et al., 2021).

3. Factors Affecting Physical and Motor Changes in the Elderly

In old age, individuals undergo many physical and mental changes, as well as a decline in several functions and abilities they previously had. Memory, hearing, vision, muscle weakness, emotions, cognition, social interaction, spirituality, physical appearance, and biological dysfunctions are some examples of bodily changes. Additionally, as they age, they will experience social changes such as losing family members, retiring from work, changes in economic status, and an inability to socialize.

a. Physical Changes

As people age, all systems in the body undergo significant changes, including the endocrine system, cardiovascular system (leading to longer heart activity), respiratory

system (which experiences a decreased capacity to cough and inhale air), nervous system (resulting in reduced responsiveness and sensitivity to touch), gastrointestinal system (leading to reduced kidney function, constipation, and appetite loss), and the genitourinary system (which sees a decrease in capacity).

An elderly person's functional status affects their ability and behavior as an individual in performing daily activities. One of the main signs of illness in older adults is a disruption in their physical and psychosocial functional status. When the elderly experience functional decline, the disease and its severity are usually linked. However, various factors ultimately affect their functional ability and well-being. Age, physiological health, cognitive function, psychosocial function, and stress levels are components influencing the functional status of the elderly (Yaslina et al., 2021).

b. Motor Changes

In old age, individuals tend to become more egocentric, suspicious, and more possessive of what they have. They want to maintain their rights, belongings, power, and role in their family and community. Several components can influence cognitive changes in older adults, including (Maghfuroh et al., 2023) :

- 1) Physical Changes: Physical changes in the elderly primarily affect sensory organs.
- 2) Overall Health: The general health of the elderly can influence cognitive changes.
- 3) Level of Education: The educational level of the elderly can affect cognitive changes as it influences coping mechanisms, views, and insights.
- 4) Heredity: Genetic diseases can affect overall health.
- 5) Environment: The environment indirectly affects cognitive changes in older adults.

B. Sexual Development

Sexual development in late adulthood is an important aspect, as adjustments in this area are often challenging. Many elderly individuals believe that a decline in sexual desire or the onset of impotence is a natural condition that accompanies aging. This belief is typically associated with changes in the neuroendocrine system that occur alongside their physical decline (Hurlock et al., 1991). However, many elderly people engage in sexual activity not solely for sexual satisfaction but rather based on mutual care, affection, and a desire to please their partners, not for personal gain (Priyantini & Dwiharini, 2012).

Research on sexual behavior in late adulthood indicates that both men and women in their 60s and 70s still engage in sexual relations, although less frequently than in their younger years

(Pfeiffer et al., 1968). If an individual is in good health, their sexual activity tends to decline gradually, not suddenly. According to Rubin (in Hurlock et al., 1991), sexual activity does not automatically cease simply because someone has reached a certain age.

Several factors can influence sexual interest and behaviour in the elderly, with the most influential being psychological and physiological factors, both of which play significant roles in shaping an individual's sexual response in later life (Hurlock et al., 1991). According to Kartinah and Sudaryanto (in Sudargo et al., 2021), some psychological factors include:

- a. Taboos/Embarrassment
- b. Negative attitudes from family and society
- c. Fatigue and boredomLoss of a spouse
- d. Sexual dysfunction and hormonal changes or other psychological issues..

Physiologically, menopause in women and climacteric in men mark reproductive cessation. Menopause in women and a decrease in gonadal function in men are the leading causes of various physical and hormonal changes during this period. Men generally experience two significant effects: a decrease in secondary sexual characteristics such as a higher-pitched voice, reduced facial and body hair growth, and weakening of muscles, leading to a reduction of perceived masculinity. For women, physical attractiveness tends to decrease after menopause. Moreover, climacteric also affects sexual function in men. Despite physical decline, this does not always lead to a decrease in sexual desire (Jahja, 2011).

Therefore, it can be said that sexual development in late adulthood does not disappear but changes in form and intensity. Intimacy, affection, and emotional closeness become more dominant than physical sexual activity. Thus, it is essential to acknowledge and understand the sexual needs of the elderly as part of their quality of life and psychological well-being.

C. Career Development

In late adulthood, career development undergoes a significant shift in orientation compared to previous stages of development. The decline in income due to retirement, coupled with difficulties in obtaining or retaining employment resulting from physical limitations, competition with younger workers, and the lag in adapting to technological advancements, often leads the elderly to feel marginalised and disconnected from their social environment (Rumawas, 2021). Physical decline in older people also contributes to a reduction in productivity, which can ultimately result in job loss or career cessation (Agustin & Adelawardiyansyah, 2024). Elderly individuals who fail to adjust to these conditions tend to lose motivation, develop a negative self-image, feel useless, and experience a crisis of meaning and purpose, which can ultimately lead to

severe stress (Afrizal, 2018). In this context, retirement is not only the end of a job but also an essential psychological transition (Lahdenpera et al., 2022).

In Japan, many elderly individuals choose to remain professionally active through activities such as becoming consultants, starting small businesses, or engaging in social activities (Cahyani, 2021). These activities are not solely income-driven, but serve as a means to maintain self-esteem, achieve self-actualisation, and find meaning in life. This can serve as a valuable lesson for both the government and citizens in Indonesia. According to Hurlock (1991), in old age, individuals often evaluate their life journey and career, assessing whether the life they have lived holds sufficient meaning. This aligns with Erik Erikson's stage of "ego integrity" in his theory, which states that elderly individuals who can accept their life with peace and gratitude will achieve inner peace (Chen et al., 2021).

1. Work Environment Conditions

In late adulthood, both men and women often face difficulties in maintaining or obtaining employment, not due to a lack of ability, but because of limited job opportunities available (Djamhari et al., 2020). Even though they may still want and be capable of working, opportunities for older people to be hired or change jobs are minimal. When they do find work, the job tends to be monotonous, non-challenging, and not aligned with their skills, leading to decreased job satisfaction. Elderly individuals are also rarely given opportunities for strategic positions or promotions, as these are prioritized for younger workers.

This situation leads many elderly individuals to occupy low-paying positions and feel undervalued by others, even their own families (Setiawan et al., 2015). Even those who continue to work may feel they are just "passing time" until retirement, without any hope for career advancement. This dissatisfaction is further exacerbated by stronger economic pressures compared to previous years. While there is support such as social security and pension funds, these aids may not be sufficient to tackle the economic and social challenges they face (Hurlock et al., 1991).

Adapting to work and family life becomes increasingly difficult because the elderly have limited control over their environment (Widyatiana, 2017). Unlike younger generations who can actively manage their lives, older people have little control over how their children treat them or how they are cared for in old age. Attitudes toward work also affect their ability to adapt socially. On the other hand, even though most elderly individuals still have good physical conditions, the decline in physical strength and the risks of certain diseases further limit their daily activities and impact their quality of life.

There are two significant risks associated with working in old age: being prohibited from working and being forced into retirement. Both of these risks significantly impact personal self-esteem and can lead to feelings of worthlessness and futility.

a. Prohibition from Working

One of the most significant risks for the elderly is being prohibited or hindered from continuing to work, even though they still want to remain active. This barrier arises as job opportunities decrease with age, leading to higher unemployment rates among the elderly, while younger workers feel their prospects are brighter, and various regulations or physical constraints force retirement at a certain age. Research by Pradono (2009) revealed a negative relationship between the ability to adjust and anxiety levels before retirement. This means that the better an individual can adjust, the lower their anxiety about facing retirement.

b. Retirement

The second major risk that the elderly face related to work is retirement itself. Even though many elderly individuals prepare for retirement, they remain vulnerable to an identity crisis. This crisis arises from the drastic role change of transitioning from being an active, busy, and enthusiastic worker to someone who feels aimless and lost. A negative attitude toward retirement can seriously impact health, reduce physical condition, and, in some cases, even accelerate premature death (Hurlock et al., 1991).

2. Facing Retirement

Retirement is the process of stopping work and no longer receiving income from one's professional role. According to Turner & Helms (1987), retirement is the separation of an individual from their job and the beginning of new roles in life. Retirement marks the end of an individual's involvement in work, which has been their family's source of livelihood. Schwartz (in Hurlock et al., 1991) describes retirement as a transition from an old lifestyle to a new one, which involves changes in roles, values, and lifestyle.

According to research by Widiastuti (2009), anxiety before retirement is generally caused by the uncertainty felt by employees, especially because there are still many responsibilities to be addressed. In reality, many individuals feel fearful about facing retirement. This fear then triggers anxiety in someone about to enter this phase. Anxiety is subjective, meaning each individual has different levels of anxiety. However, anxiety can affect an individual's mindset. A negative mindset about retirement can lead an individual to be pessimistic about facing it (Suardiaman, 2011).

Pessimistic attitudes in individuals facing retirement require appropriate solutions to prevent negative views of this phase. One solution is spiritual intelligence, as it provides peace both spiritually and emotionally. Zohar and Marshall (2000) explain that spiritual intelligence is the ability to face and solve life's problems by placing behavior and life in a broader context of meaning. By continuously thinking positively about life's challenges, it is not impossible for someone to overcome these challenges. Spiritual intelligence can become the foundation for forming a wise and balanced approach to life.

D. Social and Emotional Development

Late adulthood is the final stage in the human life span, marked by significant changes physically, psychologically, and socially. During this time, individuals often face various transitions, such as declining health, reduced physical function, and changes in social roles within family and society. Furthermore, many elderly people experience loss, whether of a spouse, peers, or other family members, which directly affects their emotional life. These changes and losses can trigger feelings of loneliness, anxiety, and even depression if not accompanied by adequate social and emotional support. This is where social and emotional development in late adulthood becomes critical (Nurhazlina Mohd. Ariffin, 2021).

Individuals who can adjust to changes, remain active in social environments, and maintain meaningful relationships tend to have better psychological well-being. Healthy social interactions and stable emotional support have been shown to improve the overall quality of life in the elderly. Therefore, it is important for individuals, families, and society to understand that late adulthood is not the end of everything, but rather a phase of life that also requires attention, respect, and proper preparation. Social and emotional development during this time is just as crucial as physical health, as both are interrelated and contribute to how one lives their later years with peace, happiness, and meaning. Some aspects of social and emotional development in late adulthood include:

1. Social Development

a. Social Roles and Adjustment to Changes in the Elderly

Elderly individuals must adjust to various changes in social roles, such as retirement, the loss of a spouse, and changes in family and societal status. Moreover, as they age, they experience physical and mental changes that affect how they interact with others. Experiencing a decline in physical ability, for example, can make them unable to engage in many social activities. Therefore, it is essential to adjust to these new conditions so that the elderly still feel valued, find meaning in their social life, and

maintain the quality of their social relationships despite facing various difficulties (Rozali, 2010).

b. Social Relationships and Family Support for the Elderly

In Indonesia, the elderly are considered to receive social support from their families and communities. Most family support alleviates the burden on the state, but this family support is not always stable (Suardiawan, 2011). The family is the primary source for fulfilling an individual's emotional needs; the more emotional support there is within the family, the happier and more content they feel. As elderly individuals lose friends, spouses, or family members, many experience a reduction in their social network. However, those who remain active in social activities such as arts groups, sports, or other social clubs, and maintain strong relationships with their families, tend to have better quality of life and psychological well-being. They are better able to avoid loneliness and find meaning in daily life through ongoing social interaction.

c. Challenges of Isolation and Loneliness

Declining physical condition, loss of social roles, and lack of attention from the environment lead many elderly individuals to experience reduced social interaction (Herayayuk S, 2012). This often results in feelings of loneliness, low self-esteem, and even anger. Loneliness is a common experience in aging and is often associated with poor mental and physical health. Loneliness is a negative response arising from an individual's perception of being isolated due to unmet expectations for the quantity and quality of social relationships they desire (A. A. Hidayat et al., 2022). Loneliness is often linked to old age due to several losses the elderly may experience, such as declining health, changes in social status, and the loss of friends or a spouse (Hermawati & Hidayat, 2019).

Loneliness can be divided into two distinct dimensions: emotional loneliness and social loneliness. Emotional loneliness refers to the feeling of an individual who feels a lack of adequate relationships and desires companionship from others. Meanwhile, social loneliness relates to the network or social connections an individual has. Aspects of social loneliness include friendship, boredom, passivity, relocation, and rejection from the surrounding environment. On the other hand, aspects of emotional loneliness include intimate relationships, loss of attachment figures, emptiness, and abandonment by family members.

Both forms of loneliness can affect various aspects of life, including a decline in the quality of social relationships, a reduction in physical function and independence,

and the emergence of psychological disorders. Therefore, it is important for the elderly to adapt to the changes they encounter. A good adjustment can help them remain socially active and reduce excessive feelings of loneliness.

d. Independence and Self-Esteem in the Elderly

In old age, it is important for seniors to remain independent so they can feel satisfied when their needs are met. They also need to have the ability to earn a living and meet their own needs (Priyanto, 2017). One crucial component of the psychosocial well-being of the elderly is their self-confidence. The ability to perform daily tasks independently, without relying on others, not only boosts self-esteem but also contributes to a greater sense of happiness in life. Feelings of worth and self-confidence can be damaged if there is excessive dependence on others for daily activities (Herman et al., 2023). As a result, it is essential to create an environment that supports the independence of the elderly, whether through facilities, family support, or empowerment programs, so they can continue to feel valued and meaningful.

2. Emotional Development

a. Self-Reflection and Ego Integrity

In late adulthood, individuals experience distinct emotional changes that are closely related to an evaluation of the life they have lived. Erik Erikson stated that at this stage, individuals are in the phase of ego integrity versus despair (Suardiawan, 2011). Ego integrity is a condition where a person can peacefully accept their past life with gratitude, including the reality that death is approaching. Ego integrity also means accepting oneself, being thankful for their fate, and loving the parents who brought them into the world (Monks et al., 2006).

Individuals who successfully achieve ego integrity will accept their life with a sense of peace, despite its ups and downs, and will be able to face the reality that their life is nearing its end. On the other hand, if an individual feels that their life is full of regret and they have not achieved what they had hoped for, they are at risk of experiencing despair and hopelessness. This process requires deep self-reflection, supported by active involvement in both social and personal life. Sources of ego integrity are diverse, ranging from political activities, fitness programs, to good relationships with grandchildren or close family members (Suardiawan, 2011).

b. The Need for Affection and Acceptance

A person's emotional condition can be reflected in the level of happiness they experience. One of the factors that plays a role in achieving happiness is the fulfillment

of the need for affection from the social environment. In the hierarchy of needs proposed by Abraham Maslow, affection is categorized as a fundamental need essential for an individual's psychological well-being. Maslow also suggested that an individual's inability to meet the need for love and affection could become a significant factor triggering emotional disturbances and difficulties in psychological adjustment (maladjustment) (Iskandar, 2022). Therefore, the presence of consistent attention and affection from family and the social environment is a crucial aspect in supporting the emotional well-being of the elderly. Insufficient fulfillment of this need in old age poses a risk of causing various psychological problems, such as depression, anxiety, and feelings of low self-worth and insignificance.

c. Decline in Emotional Regulation Abilities in the Elderly

As individuals age, they often experience a decline in their ability to regulate emotions. From a scientific perspective, emotional regulation refers to directing emotional energy toward more appropriate emotional outlets. Data from the National Institute of Mental Health indicates that the most common mental disorders in the elderly are depressive disorders, cognitive disorders, phobias, and emotional instability (Priasmoro et al., 2022). In daily life, the elderly sometimes exhibit unstable emotions. These emotions can be positive, such as feelings of gratitude and affection toward family, but they can also be negative, such as anger, sadness, or frustration when facing various limitations.

According to research (Mardiyanti, 2016), many elderly individuals experience difficulty in controlling their emotions, especially when the reality they face does not align with their expectations. For example, there may be a desire to maintain control over their possessions, but they must entrust them to family members due to physical and psychological limitations, or a desire to remain independent in daily activities even though their physical abilities have declined. Health problems and the decline of sensory functions also limit daily activities, triggering negative emotions such as frustration, anxiety, or sadness.

d. Depression

Depression is one of the most common psychological disorders experienced by individuals in late adulthood. It is a type of emotional disorder characterized by feelings of being overwhelmed, deep sadness, loss of happiness, feelings of worthlessness, uselessness, lack of life motivation, and a pessimistic outlook on the future (Suardiaman, 2011). Depression can stem from prolonged sadness and loneliness, such

as the loss or death of a spouse or emotionally close individuals, as well as long-term physical suffering and illness. In the elderly, depressive symptoms can manifest in various forms, ranging from a gloomy mood, slowed thinking and actions, anxiety, loss of appetite, decreased interest in things that were once enjoyable, to the emergence of physical complaints. Generally, elderly individuals with depression tend to express more physical complaints than emotional ones. This makes depression difficult to recognize, as the complaints are often mistaken for purely physical problems. As a result, treatment for depression is delayed because its symptoms are not promptly detected.

Conclusion

The literature review shows that late adulthood is a complex phase of life, marked by various physical, social, emotional, and career changes. The decline in physical function and changes in social roles, such as retirement, often trigger identity crises and feelings of uselessness. However, elderly individuals who are able to adapt and find new meaning in life tend to have a better quality of life. Socially and emotionally, the elderly are vulnerable to isolation and loss, which can impact their mental health. In this regard, family and environmental support are crucial for maintaining the psychological well-being of the elderly. A holistic approach that includes spiritual, social, and psychological aspects has proven to be important in helping the elderly face their later years more positively.

Therefore, systematic efforts in the form of policies and empowerment programs for the elderly, focusing on retirement preparation, strengthening spirituality, and community support, are necessary. Further empirical research is also needed to enrich understanding and develop more effective interventions in supporting the quality of life for the elderly.

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