PLS PUT EACH RESPONSE BELOW EACH STUDENTS WORK. I SENT YOU 6 STUDENTS WORK. FOR THIS ASSIGNMENT YOU HAVE TO READ EACH STUDENT WORK AND RESPONSE TO WHAT THEY ARE SAYING. 50 WORDS

Student 1 geno1

**STEPHANIE H**

The theories of aging attempt to explain the phenomenon of aging as it occurs over the lifespan. These theories have been categorized into 3 groups: biological, social, and psychological theories. This discussion will focus on the wear-and-tear theory, which is one of the biological theories. As the name suggests, the wear-and-tear theory posits that aging is a result of the accumulated effects of wear and tear on cells and tissues and that “longevity is affected by the genetic components as well as by the care provided” (Miller, 2019, p. 51). Simply put, aging occurs because cells and tissues have vital parts that wear out, and like in a machine, when they wear out, there is a decline in function which results in the death of these tissues and eventually the body. Wear and tear in the body are usually caused and exacerbated by a variety of factors such as continued use, ordinary insults and injuries of daily living to cells and tissues, stress, disease, smoking, poor diet, and alcohol abuse (Miller, 2019, p. 51).

An example of the wear-and-tear theory of aging in my community can be seen in Mr. N, a member of my church. Mr. N is 76 years old and suffers from osteoarthritis in his hands and wrists. Osteoarthritis is a degenerative joint condition that is most common in adults who are 65 years and older (Chen et al., 2017). This age-related disease is a perfect case of how wear and tear bring about the aging process. Before he retired, Mr. N worked as a barber for 35 years. As a barber, his job required him to perform repetitive hand movements while bearing the mechanical load of tools such as hair clippers. This repeated action over the years created constant wear and tear on the joints and bones and led to the progressive loss and destruction of articular cartilage which cannot be regenerated. This, in turn, provoked the development of osteoarthritis in his hand and wrists. Mr. N’s situation is exemplary of how continued use contributes to aging through wear tear. The accumulation of damaged cells in Mr. N’s hands and wrists caused a decline in function that is associated with aging.

My response

Various theories define the phenomenon of aging. You have discussed wear-and-tear theory with the help of the example of Mr N. It is correct that people face issues due to the type of work they do in their early life. However, it is important to notice the family history of the individuals because people face the same aging issue that their ancestors had.

Student 2 gen0 1

**CHINEDU CHIA**

I have a lot of experience with older adults within the church community. They are highly active in community service events, fundraisers, and food drives that are hosted by the church. Although they steadily increase in age, their cognitive and social skills continue to remain in optimal shape. Based on the theories presented within the textbook, I have come to realize that the older adults within my community are in close connection to the Activity Theory. The activity theory, was developed by the social gerontologists of Havighurst and Albrecht. They developed a theory that emphasized the relationship between successful aging and remaining socially and psychologically fit if they stay engaged in life (Miller, 2015, p.55).

The older adults within my church community have shown strong examples on the validity of the activity theory based on their actions. Because the value they have for their religious beliefs, their fellow church members, and everything else that is important to them, it does not matter if they are 75 or 25 years of age. They are cognitively active when it comes to activities that allow them to volunteer their services, such as clothing drives or volunteering at a local soup kitchen and being selfless as this overall improves their life satisfaction. Overall, the Activity theory supports altruistic attitudes that improve life satisfaction, positive affect, and quality of life for older adults (Cattan, Hogg, & Hardill, 2011).

My response

From different aging theories, you have discussed the activity theory. It considers the activities of the people which affect them physically and psychologically in later life. You highlighted the fact that people linked to the church and more devoted towards the religious beliefs rather than their age by becoming selfless. In other words, activity theory considers selfless attitudes as a crucial factor for aging issues.

Student 3 geno 2

**FAUZIA NASRA**

I work as a caregiver so I do have certain clients that I go to once or twice a week. There is one client I have that I run errands with almost every week. We go to the grocery store, doctor's appointments, gym, bank, etc. When I first met her she was unable to walk independently without the assistance of ambulatory aids ( wheel chair or walker) or without my help. I met her over a year ago, but today she is able to ambulate without depending on me too much for assistance.  She is still depend on a walker, but she has come such a long way over the last year. When I go to her house she offers to drive her own car to get to her destinations and I could not be more proud of her. When I visit her at her house she goes to the bathroom on her own and she cooks her own meals. She also has a treadmill in her living room, so whenever she is in the mood to exercise she uses it. When my client and I go grocery shopping, she does use the disability carts because she tends to get a little tired when she walks for a long period of time. She tries to take small walks around her neighborhood to help enhance her mood and to allow her to get exercise when she does not want to go to the gym. Around the time I first started working with her she did have a physical therapist to help assist her with activities of daily living and exercise, but now she is able to do all of those activities on her own. I do assist her when it comes to getting out of her car and bringing her walker close to her, but she can pretty much do everything else on her own. I am so amazed by the progress she has made over the last year, and I can not wait to see how much more she improves in the future.

MY RESPONSE

You have shared the experience with an old lady who was not able to walk on her own. However, she is now recovered and do lots of stuff without asking for others help. Through this example, I understand one thing that self-care is most important for health. Doctors or physicians can guide people and provide medication but people have to take care of themselves without any selfless attitude.

STUDENT 4 gneo 2

**LINDA A**

 In most cases, nurses will tend to perceive the elderly in terms of their physical or mental dependency. For instance, an elderly patient in a hospital suffering from dementia will need more help from caregivers. The medical condition makes the individual to forgetting things. This individual needs a lot of care since their level of dependence is high. At times the elderly person forgets his/her way to the restrooms and thus the caregiver will be required to spend most of the time with the patient. However, the patient is mostly able to accomplish small tasks such as brushing his/her teeth and feeding themselves. Despite this, the individual will have a communication problem.

             This patient will struggle to achieve independence as the care provider tries to train them to acquire certain skills. Communication is a crucial aspect since it provides a platform for the caregiver and the patient to understand each other and make progress. Sometimes the elderly patient is unusually quiet and other time he tends to talk a lot. This is usually not easy for the caregiver since the patient always appears to be unpredictable and hence ensuring the patient’s safety is always their first priority (Downs & Bowers, 2014). The patient usually has a hard time adapting to the environment and hence usually rely on the care provider to move around the premises. In other settings such as at home, the patient may tend not to do much. However, they try to blend in through the use of memory aids such as diaries, calendars, memory books and schedules of the daily routines.

            These items help the elderly individual to go about his daily activities more efficiently. This elderly person will also tend to avoid places with many people such as social gatherings and the church due to the fact that they may result in acting impulsively towards other people. However, despite all these challenges, he always tries his best to reduce dependability through trying to accomplish simple tasks every day.

My Response

You have discussed the issue of dementia where the patient often forgets things. Communication is indeed an important element to provide help but when the patient faces issues in communicating it increases difficulties for the caregiver. With age, memory gets weaker and older adult face difficulties while performing daily tasks. Therefore, much attention and care are needed towards older people of the family.

STUDENT 5 IDIS

**ASHLEY EN**

Chronic illnesses and disability among children are perceived differently in various culture. The diversity in perception affects the attitudes to the problem, treatment, and care that should be accorded to these children. Chronic illness and disability are often perceived as punishment in most cultures (Anastasiou, Kauffman & Michail, 2016). The perception attributes these health issues as consequences of actions committed by parents or a family. The person, ancestor or family of the person with the disability or chronic illness is often considered to have sinned or failed to observe certain taboos leading to a curse. Some cultures perceive these health issues as something that is ‘running in the blood’ of the family (Anastasiou, Kauffman & Michail, 2016). The curse in the family will continue to manifest through children born in the family. In Indian culture, disability has often been associated with transgression in the previous life (Anastasiou, Kauffman & Michail, 2016). The culture believes in reincarnation, and the cause of disability is a punishment for living a sinful life.

The reaction and explanation of the children’s chronic illness are affected by religious beliefs and parental philosophies. For religious families, they attribute the chronic illness as a test from God and will pass with time (Ray, 2016). The beliefs urge family members to care for the patient and continue praying so that they can receive healing. Parental philosophies often force parents to question their ways and why such health problems affected the family. The chronic illness is seen as a test on parenthood and the ability of the parent to care and give the best to the ailing patient (Ray, 2016). These perceptions lead to a different reaction with some choosing to do their best to care for the patient or engage in activities that will help the ailing children to end their suffering.

MY RESOPNSE

You have discussed an interesting aspect of the society where people link illness and disease of the children with the sins of the family or God is testing the parents. These kinds of beliefs increase health issues in society. People curse the parents or elders family instead of paying attention to the children. The religious belief in this aspect somehow plays a negative role for better health.

STUDENT 6

**EMMACULATE A**

Different cultures believe that chronic illnesses and disability in children are caused by different things. What is common among most cultures is that they perceive this as a sign of punishment. This is following a curse that might have followed the family from a higher being, due to sins committed or even going against certain taboo.  Other cultures believe that giving birth to such a child portrays the way the gods or the supreme beings are angry at someone, perhaps because of something displeasing they did (Andrews & Boyle, 2008).

In some cases, there are some disorders which the medical practitioners believe that are simply inherited. Therefore, they strive to determine who the initial carrier was so as to understand the situation and how to go about it. However, some communities take this as a way of investigating who committed a mistake or a sin that led to the generational curse (portrayed through the sick child) and therefore, fail to cooperate with the medical practitioner (Lipson, 1988).  The Latinos also have an explanation for the chronic illness and disability; a combination of hot and cold leading to an imbalance, which the individual must strive to create the balance to become normal. Others like the Mexican American catholic believers believe that such children are a gift from God for people who have cared for the disabled in the past. This is a more positive thought of the situation (Andrews & Boyle, 2008).

**Describe how the parental philosophic and religious beliefs affect their reaction to, or explanations for, the child's chronic illness and/or disability.**

For a parent who believes that the cause of the disability and chronic illness of their child is a curse, then they give explanations that try to fit their thoughts to suit certain perceived curse. This affect the way they bring up the child and in most cases, the child is feared by everyone in the family and in the society. They engage in traditional acts of trying to undo the curse. For those who believe in God and think that it is a blessing, they continually pray for the child and thank God for it.

 Response:

The disease can be inherited but it does not mean child inherit the sins or karma of the family. People believe that the disability of a child is the curse of God stop them to go for medical practitioners. If this belief comes from the parents it becomes more difficult for the child to come from the issue. With time child starts believing his parents thoughts and adopt different traditional acts to undo the curse rather than going towards medical treatment.