

Inspiration of Erikson's Psychosocial Development Theory on Elderly Education in China

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Abstract: China's aging population is a pressing issue, with a growing percentage of individuals aged 65 and older. This essay delves into the implications of this demographic shift on various aspects of Chinese society and explores strategies to address the challenges posed by an aging population. It highlights the importance of sustainable development, health, and well-being of aging and underscores the role of education and training for the elderly in achieving broader societal goals. Drawing from Erikson's theory of psychosocial development, the paper proposes an integrated approach to Chinese elderly education that can enhance the well-being of the elderly, contribute to societal development, and provide a roadmap for addressing China's aging challenges. The paper emphasizes the need for a comprehensive understanding of the elderly's educational needs and the importance of lifelong learning to navigate the complexities of an aging population successfully. Ultimately, this research offers practical and applicable insights into the intersection of psychology, education, and societal development in the context of China's aging population.

Keywords: Aging, China's Elderly Education, Developmental Psychology, Life Cycle, Life Long Education

1. Introduction

China's aging population has become more severe in recent years. A ten-year study of China's population found that by 2021, there will be 20,056 million people aged 65 and older, representing 14.2% of the total population, an increase of 0.7 percentage points from the previous year [1]. A country has an aging society if 7% or more of its population is 65 or older; a deeply aging society if 14% or more of its population is 65 or older. According to the Statistical Bulletin on National Economic and Social Development from the National Bureau of Statistics, 14.9% of China's population is 65 or older, indicating an aging population[2].

China's economy, society, politics, culture, science, and technology have grown due to population fluctuations. They have also stressed the systems of the social, medical, and aging services [3, 4]. The United Nations Madrid International Plan of Action on Ageing [5] forecasted that developing countries will live in urban areas with less than half of the urban population by 2025, worsening China's older population issues.

How to resolve these issues? The Asia Pacific Intergovernmental Conference on the Fourth Review and Evaluation of the Madrid International Plan of Action on Ageing stressed "sustainable development goals" and "building a society for all ages"[2]. The conference noted that sustainable

development, health and well-being, and care for aging people are major action goals. Knowledge, education, and training for the elderly can help achieve sustainable development goals in economic, cultural, social, and political areas.

From the perspective of developmental psychology, the above concepts align with the concept of the "life cycle" presented in Erikson's social psychological development theory. Therefore, this paper will focus on combining Chinese elderly education with Erikson's theory, to highlight the sustainability of education itself and the profound significance of Chinese elderly education for the elderly and society, providing an executable direction for China's future aging challenges.

2. Theoretical Framework

Erikson divides a typical person's life, from early childhood to late adulthood, into eight developmental periods. People encounter and conquer new obstacles (crises) at each stage. The success of each stage depends on the early stages' tasks being completed. Future difficulties can arise if the person is unable to accomplish this stage of the challenge. However, every crisis is not necessarily catastrophic but offers increased vulnerability and enhanced potential [6]. Individuals who are adept at handling crises will grow up in healthy ways [7].

2.1. Eighth Stage: Integrity vs. Despair (Over 65)

Age-related decrease in senior people's physical, psychological, and health circumstances requires commensurate changes and adjustments, creating a psychological tension between self-adjustment and despondency. When seniors reflect on their lives, they may bid farewell to the world or drag themselves toward death. Self-adjustment—accepting oneself and reality—is transcendent wisdom. Someone with self-control over depression can achieve wisdom, which Erikson defines as "treating life and death with a detached attitude." How the elderly view dying affects how their descendants acquire trust. Thus, connecting the eighth and first levels at the beginning and end creates a life cycle [8,9].

3. The Living Status of the Elderly in China

3.1. Elderly-care Patterns in China

When it comes to the choice of elderly care model, China still tends to be traditional. There are differences in elderly care service models between urban and rural areas.

So far, Chinese cities have three main elderly care models: home-based, community-based, and institutional. Elderly persons living at home receive specialized community care services such as daily care, housekeeping, healthcare, and spiritual comfort to solve everyday life problems. Community nursing service refers to the elderly who live at home and can go to the community day care center for relevant professional nursing services, such as establishing schools for the elderly, a market for elderly talent, legal aid, and shelter. Seniors living in residential care facilities receive 24-hour, large-scale, one-stop expert services for maintenance and rehabilitation [10]. Home-based elderly care is the most common, with the highest proportion of elderly people. Institutional elderly care is the lowest, at 5%, and community elderly care is between the two, at 10% [11].

In the current rural elderly care model, there are three main types: land elderly care (obtaining partial economic income through land resource management), family elderly care, and collective elderly care (rural collective organizations provide support for childless and disabled elderly people). Among them, due to the concept of "filial piety" practiced in traditional Chinese culture, the home-based elderly care model still dominates [12].

3.1.1. The Living Status of Elderly People in Rural China

The phenomenon of empty nests among the elderly in rural areas is serious, and low educational attainment is a major reason. Overall, their psychological condition is not optimistic. A study using a sample of elderly people living independently in rural Wenzhou (n =536) demonstrated that their subjective well-being was poor. This is positively correlated with low income and low education factors [13]. Another study suggests that a significant proportion of rural elderly people often feel lonely, with a lack of recreational activities being a major factor, which can lead to mental health problems [14]. However, research on the health-related quality of life (HRQOL) of elderly people in rural China has been conducted using the Social Support Rating Scale (SSRS). It was found that older adults with higher levels of education scored higher. This reflects the role of social support in improving the quality of life of the elderly [15].

4. Education for the Elderly in China

China is actively developing elderly education. In 2016, China released the "Elderly Education Development Plan (2016-2020)", which pointed out the need to expand the supply of educational resources for the elderly, expand the development channels for the elderly, and promote the sustainable development of elderly education. According to data released by the Ministry of Education, there are currently 62000 universities and elderly education institutions across the country. Although the enthusiasm and demand for learning among the elderly have increased compared to before, the current system of elderly education related facilities is still incomplete, resulting in an imbalance between supply and demand [12].

Some studies have shown that the overall willingness of Chinese elderly people to lifelong learning is not high. Firstly, high-income elderly, young elderly, and highly educated elderly are the main groups participating in education. Due to the small number of these groups, the coverage of elderly education is limited [16]. Secondly, the development of elderly education in small cities is relatively slow, and education for the elderly has not received real attention. This leads to a lack of awareness among many elderly people about elderly education, resulting in a low participation rate. However, the lack of richer cultural activities among the elderly can lead to a more empty mind and a greater tendency to develop negative emotions [17].

In addition, there is a strong correlation between regional differences and willingness to learn. A survey sampled elderly people from four provinces in China (n=976) and ultimately found that respondents from urban areas had a strong willingness to participate in elderly education, accounting for about 42%. They believe that elderly people should persist in lifelong learning, 'never too old to learn'. On the contrary, only about 14.9% of elderly people in rural areas agree with this view, while 45.7% of people believe that rest and entertainment should be the main focus of elderly life [18].

5. Integrating Elderly Education with Erikson's Theory

5.1. Life Cycle and Lifelong Education Theory

The view of lifelong education is that education is the sum of various trainings that people receive throughout their lives. This means that it spans the entire human life cycle, carrying out different educational activities at all stages of human development (from infancy to old age) and in all aspects. In addition, education also spans many fields, such as school, family, and society, and its ultimate goal is to maintain and improve the quality of an individual's social life [19]. Erikson's theory has periodicity and continuity, believing that the next psychological stage can continue the previous psychological stage in time and space [20]. This is consistent with the perspective of lifelong learning theory.

5.1.1. The Ninth Stage and Life Cycle

5.1.2. The Last Two Stages of Life

In the eighth stage, wisdom is considered a mature and specific force in the elderly, explaining "the wise and transcendent attention to life itself when facing death itself" [21]. For this power, the elderly can apply it to new fields through their own creativity and productivity. In particular, older adults can use their creativity to solve challenges to regain their independence and can use the knowledge and abilities they have gained from productive activities in their early years to address new health-related concerns that come up as they age [22]. For the elderly, their autonomy needs to be respected. In other words, they care about their role in society and hope to be seen as independent, self-directed, self-governance, and spiritually autonomous [23]. In daily life, healthy elderly people can self-manage (individuals can control or reduce the impact of diseases on their physical health in necessary daily tasks) [24]. They can solve practical problems, propose implementation plans conduct evaluations, and participate in a dynamic learning process [25]. An early American study described the group of "young elderly people". It holds that this group of senior individuals and their spouses have recently retired, have decent economic and educational circumstances, have plenty of free time, and are physically and psychologically vibrant. They appear politically active and contribute value to community services [26]. Due to disparities in national situations and cultural backgrounds, this group definition does not apply to Chinese senior people; nonetheless, it can still demonstrate that well-maintained elderly people can pursue self-worth and create output.

The concept of the "ninth stage" has been proposed in relevant research. In this concept, integrity and despair remain the last tasks, but the added eighth stage occurs during a continuous period between elderly involvement and resignation. Resignation means that there are no new activities or continuing an old one, which will make the elderly lose their sense of significance in participating in personal development. This stage applies to the elderly aged from 80s to 90s [27]. The dilemma that elderly people always face is the low participation in survival caused by the interruption of family life. This lack of important participation leads to sustained despair and stagnation. For the elderly in the ninth stage, this dilemma will become even more significant. Maintaining faith and humility seems to be the wisest approach when the body's control and autonomy weaken [21].

However, the weakening and loss of autonomy are not only related to the decline of physiological functions. If the elderly are exposed to a turbulent and unstable environment, such as losing friends and spouses, poor health, changing their residence to an institutional environment, etc., it will make it difficult for them to adapt, lose the ability to make choices and increase social isolation and pressure. In such a situation, they are unable to maintain their autonomy well and need to rely on themselves to meet their own needs [23]. Tracing back to the source, if an environment can be provided for the elderly to showcase their personality and life experience value, allowing them to have a comprehensive sense of autonomy, then their sense of identity and self-esteem will not be "adapted" and have a comprehensive sense of autonomy [28]. This is precisely the support that society needs to provide [23].

5.1.3. The Generational Connection in the Life Cycle

The generational connection plays an undeniable role in the development of the life cycle. Erikson [6] notes that while discussing the relationship between adult integrity and infants, healthy children's elders who possess sufficient integrity and do not fear death will also not instill fear of life in their offspring. Correspondingly, youngsters living in a viable culture will acquire specific inspiration from the elderly in the eighth and first stages of their relationship, as well as expectations and ideas for their experiences in later life [21]. An early experiment that collected and summarized the life

trajectories of every family member in a third or fourth-generation family as a sample demonstrated that older persons had a deep comprehension of human development themes, and can have a significant impact on the family [26]. Therefore, it has been proven that there may be meaningful interactions between the beginning and end of life.

To avoid disappointment and meaningless outcomes without impacting the formation of relationships, elderly people still need to learn. Learning can bring them creativity, self-worth, and a sense of achievement, while group and community activities can also provide them with social support. Thus, in their later years, they can still maintain mental health and a sense of integration into life [20].

6. Reminiscence Therapy

Reminiscence therapy emphasizes the importance of socialization and activities, which is believed to have significantly improved the psychological and living conditions of the elderly. It is extended from Erikson's theory of psychosocial development and emphasizes how to relieve the negative emotional problems of the elderly due to physical decline, weakening of social functions, and death [29]. A related study deems that the deepening of self-integration in life is the theme of development in old age [30]. Therefore, this therapy focuses on this theme, helping the elderly find new meaning in their lives through psychological and spiritual intervention [30].

In practical cases, there is a similarity in the spiritual needs of elderly people in Chinese nursing homes and those from village to residence. For example, the relationship between the elderly in nursing homes is cold and there is a lack of recreational activities, resulting in many negative emotions and a low sense of self-identity [29]. In villages, the elderly are often in a state of social isolation, and their emotional needs are ignored, which also leads to a crisis of self-identity and sense of belonging [31]. Research has shown that cultivating hobbies and communicating with others can encourage the elderly to adapt to society and achieve further self-integration in life [29,31,32]. This is similar to the purpose of elderly education. For instance, by studying traditional Chinese opera and red songs (revolutionary songs), Grandma Wang at the nursing home regained her self-esteem and was able to face life more positively [29]. Another study has established a "Life Review" group for empty nest elderly people who have been relocated from their villages, organizing activities such as "beating drums to pass flowers", exchanging their family experiences, drawing portraits of each other, and performing their talents. Subsequently, the Self Identity Scale (SIS) developed by Oakes and Prague was used to demonstrate the reliability and validity of improving the self-identity dilemma of elderly people who have relocated to rural areas [33]. Treating in groups is beneficial for cultivating interests and hobbies through interaction, improving emotional disorders such as depression, and enhancing the self-worth and life satisfaction of the elderly [34,35].

7. Discussion

Regarding the high incidence of psychological and disease problems among the elderly in China, the existing literature focuses more on the imperfect medical system, insufficient medical resources, or lack of support from family and neighbors; while on the topic of education, existing research is more relevant to children and young people. All in all, there is a lack of in-depth exploration of geriatric education from a psychological perspective. Education is not only meaningful to young people, but also affects the elderly; at the same time, education has continuity and affects not only the elderly themselves, but also future generations. Therefore, geriatric education is important. Future research can explore the importance of geriatric education from a psychological perspective, combining theories in the fields of cognitive psychology, developmental psychology, and social psychology with geriatric education in China, summarize the different needs of contemporary Chinese geriatrics for

education from experiments and existing literature, and integrate national conditions into it. It is suitable for the current Chinese elderly education model, thereby promoting the enthusiasm of the elderly to learn.

8. Conclusion

In conclusion, the aging population in China has brought challenges and opportunities to the country. To effectively address these challenges, priority must be given to sustainable development, healthcare, and education for the elderly. Integrating Erikson's theory into elderly education can provide a valuable framework for promoting lifelong learning and happiness in later life. In addition, promoting intergenerational connections and implementing memory therapy can create a more fulfilling and supportive environment for Chinese elderly people. As the country continues to address the complexity of population aging, these methods are crucial for ensuring the well-being of elderly citizens and the overall prosperity of society.

References

- [1] Wang, P. (2022, January 18). *The total population maintains growth and the level of urbanization steadily improves*. National Bureau of Statistics. http://www.stats.gov.cn/sj/sjkd/202302/t20230202_1896587.html
- [2] *Statistical Bulletin of the National Economic and Social Development of the People's Republic of China in 2022 - National Bureau of Statistics*. (2023, February 28). [Wwww.stats.gov.cn](http://www.stats.gov.cn). http://www.stats.gov.cn/sj/zxfb/202302/t20230228_1919011.html
- [3] Fang, E. F., Scheibye-Knudsen, M., Jahn, H. J., Li, J., Ling, L., Guo, H., Zhu, X., Preedy, V., Lu, H., Bohr, V. A., Chan, W. Y., Liu, Y., & Ng, T. B. (2015). *A research agenda for aging in China in the 21st century*. *Ageing Research Reviews*, 24, 197–205. <https://doi.org/10.1016/j.arr.2015.08.003>
- [4] Lu, J., & Liu, Q. (2019). *Four decades of studies on population aging in China*. *China Population and Development Studies*, 3(1), 24–36. <https://doi.org/10.1007/s42379-019-00027-4>
- [5] ESCAP. (2022). *Aging populations in Asia and the Pacific, 2002 Madrid International Action Plan on Aging 2002 and 2030 Agenda for Sustainable Development: synergies, indicators and data*.
- [6] Erikson, E. H. (1963). *Childhood and society*. Vintage.
- [7] Hopkins, J.R. (2000). Erikson, E.H. In A. Kazden (Ed.), *Encyclopedia of psychology*. Washington, DC & New York: American Psychological Association and Oxford University Press.
- [8] Feng, X. (2020). *Discussion on Erikson's Theory of Psychosocial Development*. 2, 48–49.
- [9] Parke, R. D., Roisman, G. I., & Rose, A. J. (2019). *Social development (3rd ed.)*. John Wiley & Sons, Inc.
- [10] Wu, J. (2022). *Problem and prospect: Exploration of China's urban mode for supporting the elderly*. *Jiangnan Academic*, 41(5), 73–83. <https://doi.org/10.16388/j.cnki.cn42-1843/c.2022.05.007>
- [11] Gao, C. (2017). *Who should you ask when you need someone to support you when you grow old?—Re-examination of the elderly care service model under the new situation of population and family structure*. *Gansu Social Sciences*, 6(3).
- [12] Li, J. (2022). *Realistic needs and supply strategies for elderly education in China*. *Distance Education in China*, 5, 26–33.
- [13] Zhou, Y., Zhou, L., Fu, C., Wang, Y., Liu, Q., Wu, H., Zhang, R., & Zheng, L. (2015). *Socio-economic factors related with the subjective well-being of the rural elderly people living independently in China*. *International Journal for Equity in Health*, 14(1), 5. <https://doi.org/10.1186/s12939-015-0136-4>
- [14] Shen, S., Li, F., & Tanui, J. K. (2011). *Quality of life and old age social welfare system for the rural elderly in China*. *Ageing International*, 37(3), 285–299. <https://doi.org/10.1007/s12126-011-9130-3>
- [15] Lu, S., Wu, Y., Mao, Z., & Liang, X. (2020). *Association of formal and informal social support with health-related quality of life among Chinese rural elders*. *International Journal of Environmental Research and Public Health*, 17(4), 1351. <https://doi.org/10.3390/ijerph17041351>
- [16] Wang, G. (2015). *Problems existing in china's elderly education and some suggestions for solutions*. *Continue Education Research*, 3, 16–17. <https://doi.org/10.3969/j.issn.1009-4156.2015.03.006>
- [17] Chen, L. (2023). *Analysis on the current Situation and countermeasures of elderly education in China*.
- [18] Wu, Z., Wang, L., & Deng, L. (2023). *Research on strategies for constructing the elderly education system under the background of an aging society: a survey report on the current situation of elderly learning in four provinces and cities*. *Journal of East China Normal University(Education Science Edition)*, 41(6), 78–91. <https://doi.org/10.16382/j.cnki.1000-5560.2023.06.007>

- [19] Sun, X., & Sun, T. (2021). Research on lifelong education based on Erikson's psychosocial development theory. *Advances in Social Science, Education and Humanities Research*, 582. <https://doi.org/10.2991/assehr.k.211011.047>
- [20] Lei, Y. (2020). Exploring the educational significance of the principle of gradual and orderly progress from the perspective of Erikson's psychosocial development theory. *Shanxi Youth*, 11, 259–261.
- [21] Erikson, E. H. (1982). *The life cycle completed*. W.W. Norton.
- [22] Perry, T. E., Ruggiano, N., Shtompel, N., & Hassevoort, L. (2015). Applying Erikson's Wisdom to Self-Management Practices of Older Adults. *Research on Aging*, 37(3), 253–274. <https://doi.org/10.1177/0164027514527974>
- [23] Graves, S. B., & Larkin, E. (2006). Lessons from Erikson. *Journal of Intergenerational Relationships*, 4(2), 61–71. https://doi.org/10.1300/j194v04n02_05
- [24] Clark, N. M., Becker, M. H., Janz, N. K., Lorig, K., Rakowski, W., & Anderson, L. (1991). Self-Management of Chronic Disease by Older Adults. *Journal of Aging and Health*, 3(1), 3–27. <https://doi.org/10.1177/089826439100300101>
- [25] Lorig, K. R., & Holman, H. R. (2003). Self-management education: History, definition, outcomes, and mechanisms. *Annals of Behavioral Medicine*, 26(1), 1–7. https://doi.org/10.1207/s15324796abm2601_01
- [26] Neugarten, B. L. (1979). Time, age, and the life cycle. *American Journal of Psychiatry*, 136(7), 887–894. <https://doi.org/10.1176/ajp.136.7.887>
- [27] BUGAJSKA, B. E. (2016). The ninth stage in the cycle of life – reflections on E. H. Erikson's theory. *Ageing and Society*, 37(6), 1095–1110. <https://doi.org/10.1017/s0144686x16000301>
- [28] Rodin, J., Schooler, C., & Schaie, K. W. (Eds.). (2013). *Self directedness: Cause and effects throughout the life course*. Psychology Press.
- [29] Wang, C. (2019). Study on life review in the elderly spiritual comfort: a case from L nursing home. College of Humanity & Law, Huazhong Agricultural University.
- [30] Marcia, J. E. (2002). Identity and psychosocial development in adulthood. *Identity*, 2(1), 7–28. https://doi.org/10.1207/s1532706xid0201_02
- [31] Butler, R. N. (1974). Successful Aging and the Role of the Life Review*. *Journal of the American Geriatrics Society*, 22(12), 529–535. <https://doi.org/10.1111/j.1532-5415.1974.tb04823.x>
- [32] Zhong, Y., & Liu, W. (2020). The application of nostalgia counseling techniques in elderly case work. *Aged Social Work*, 30, 23. <https://doi.org/10.3969/j.issn.1674-3857.2020.30.016>
- [33] Cheng, L. (2023). Empirical study on the reconstruction of self-identity of village-to-residence elderly with life review therapy. *Heilongjiang Science*, 14(11), 28–30. <https://doi.org/10.3969/j.issn.1674-8646.2023.11.009>
- [34] Chiang, K.-J., Lu, R.-B., Chu, H., Chang, Y.-C., & Chou, K.-R. (2007). Evaluation of the effect of a life review group program on self-esteem and life satisfaction in the elderly. *International Journal of Geriatric Psychiatry*, 23(1), 7–10. <https://doi.org/10.1002/gps.1824>
- [35] Korte, J., Bohlmeijer, E. T., Cappeliez, P., Smit, F., & Westerhof, G. J. (2011). Life review therapy for older adults with moderate depressive symptomatology: A pragmatic randomized controlled trial. *Psychological Medicine*, 42(6), 1163–1173. <https://doi.org/10.1017/s0033291711002042>