

Importance of Mental Health in the Quality of Life of Older Adults: Reflections from Psychogerontology

Daniel Antonio Muñoz González^{1*}

¹Escuela de Trabajo Social, Instituto Campechano. Campeche, México

*Corresponding Author: Daniel Antonio Muñoz González
Escuela de Trabajo Social, Instituto Campechano. Campeche, México

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Abstract: Mental health defined as the state of emotional, cognitive, psychological, social, and spiritual well-being of individuals. In this sense, older adults, as time goes by, experience situations related to disconnection, abandonment, loss, and, consequently, the disintegration of their social core. Therefore, the objective of this article is to define the importance of mental health in this age group, describing intervention guidelines from a Psychogerontological perspective, with the goal of promoting healthier environments. Finally, the article reflects on the importance of integrating personnel trained in mental health to address the needs of older adults and their families, and to develop strategies for prevention, promotion, and education related to mental health in old age.

Keywords: Mental Health, Quality of Life, Older Adults, Psychogerontology.

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INTRODUCTION

Mental health plays an important role in the quality of life of older adults. Known that illnesses such as depression and dementia significantly affect basic activities of daily living, such as grooming and preparing meals; instrumental activities characterized by taking responsibility for one's own money and communicating via mobile devices; and finally, activities that impede this age group's reintegration into society. However, families and/or caregivers play an important role in this impact, as they are responsible for providing the ideal social and economic conditions to address this problem. Given this situation, it is important to highlight the importance of neuropsychological care as an approach to improving the mental health of older adults, family members, and caregivers involved in addressing the needs of those experiencing the illness.

According to the General Treatise on Health in Human Societies 2024, "quality of life is the result of a constant interaction between economic and social factors, individual needs, emotional freedom, ecological environments, and health and disease conditions, both individually and socially. Referring to the aforementioned, it can be understood that it is made up

of various factors that are part of both individual and social well-being. The author states that quality of life is a concept that integrates various elements, such as the constant interaction between these factors. Thus, living conditions and personal experiences interconnected in a complex way. Furthermore, economic and social factors influence the opportunities and resources available to individuals, while individual needs and emotional freedom directly affect health and disease conditions, playing a crucial role in determining quality of life."

Sánchez A., 2020, mentions that: "Quality of life is a polysemic concept (with several meanings) that refers to the satisfaction of the needs of the population, whether individuals or societies. These can be objective or subjective, and analyzed in time and space. In a positive sense, it produces conditions of well-being, and in a negative sense, it causes individual and social discomfort," the sociologist explained in an interview. (Paragraph 3).

The author explains the complexity of the concept of quality of life, indicating that it does not have a single meaning, but rather several that can vary depending on the context, thus encompassing both tangible and intangible dimensions of human well-being.

They not only affect individual perception but also reflect the social context in which one lives. Therefore, its assessment cannot be understood in isolation, but rather as an interrelated set of elements that, when harmonized, promote comprehensive human development. Furthermore, factors such as education, access to health services, and social cohesion play a crucial role in building an optimal quality of life.

Quality of Life in Older Adults

According to Soria and Montoya (2017, p. 61), "A person's perception of their position in life within the cultural context and value system in which they live, and this with respect to their goals, expectations, standards, and concerns.

It is a broad concept that is complexly influenced by a person's physical health, physiological state, and level of independence, social relationships, and their relationship with their environment."

That is, it is each person's notion of himself or herself. It is undoubtedly varied and distinct, and therefore can change depending on the contexts in which it is questioned. Similarly, when talking about a person's perception of their environment, we can emphasize that quality of life is subjective to each individual because each person attributes a different state of well-being to it depending on the environment to which they are exposed. Something similar occurs with O'Shea Eamon's (2003) conceptualization, which argues that "the quality of life of older adults is a satisfactory life, subjective and psychological well-being, personal development, and diverse representations of what constitutes a good life, and that it should be investigated by asking older adults how they make sense of their own lives, within the cultural context and values in which they live, and in relation to their own life goals."

According to García L. (2023), the older adult population in Campeche, according to the 2020 Population and Housing Census, estimated at 104,000 people aged 60 and over. This figure provides an overview of the size of this age group and highlights its complexity and diversity. Furthermore, mentioned that the Secretariat of Inclusion and Equity for the Community (SEIN), as cited in García L., 2023, has a citizen service module designed to receive and serve these older adults. This module is not only responsible for processing applications but also provides support, suggesting a proactive approach to providing assistance and ensuring that citizens receive appropriate support. The situation of abandoned older adults in San Francisco de Campeche reflects a significant challenge that is part of a broader problem in the region and the country.

The lack of adequate resources, inadequate infrastructure, and barriers to accessing services contribute to a situation in which some older adults may face abandonment or neglect. Local institutions, such as

the DIF (National Institute of Family and Family Development) and the IMEC (Mexican Immigrant Workers' Commissions), are involved in providing care and support to older adults, but available resources may be limited, especially in smaller or less urbanized municipalities. Academic studies and media reports suggest that there is an urgent need to improve care infrastructure and increase support programs to ensure that older adults receive the care and respect they deserve.

Psychosocial Factors That Affect the Behavior of Older Adults

According to the World Health Organization (2022), over time, several social, psychological, and biological factors determine people's mental health. Therefore, many older adults deprived of the ability to live independently due to mobility difficulties, chronic pain, frailty, or other mental or physical problems, so they need support. In addition, older adults may often appear angry, irascible, and upset; these are words that may be used to describe behaviors that are ultimately external expressions of fear, of feeling out of control over circumstances, frustrated in some endeavor, or vulnerable to time.

Among older adults, experiences such as grief over the death of a loved one, financial problems, chronic and/or pathological illnesses, and family abandonment, among others, are more common. All of these factors can cause isolation, loss of independence, loneliness, and anxiety.

How Does this Care Work? Consider the Following Points of Reference:

- The family member should pay attention to any persistent forgetfulness and memory complaints the older adult may be experiencing;
- It is vitally important not to associate memory complaints with the aging process. Timely action is prevention;
- The integration of an expert interdisciplinary care team should be considered, consisting of a neurologist, neuropsychologist, geriatrician, gerontologist, and rehabilitation specialist, to enable evaluation, diagnosis, and an individualized care plan that benefits the patient;
- The clinical neuropsychologist must have solid training in clinical psychology and gerontology, enabling them to ethically and professionally administer tests to assess the cognitive and psychoaffective abilities of older adults;
- Family care and guidance play an important role in neuropsychological care. Therefore, the neuropsychologist must provide clear and truthful information about the problem, thereby avoiding manipulation of information;
- The integration of gerontological centers for patients with depression or dementia is a factor

that can influence the improvement of their emotional, social, and affective relationships;

- Family members and/or caregivers should receive psychotherapeutic care to reduce the emotional exhaustion and frustration associated with this problem and thus help them cope positively with the situation.

CONCLUSION

In conclusion, mental health in older adults is a priority issue when designing public health policies. The role of clinical neuropsychology in this field, in conjunction with gerontology and scientific research, will allow us to continue working on the development of strategies that allow for effective care of older adults and ensure that their mental health and quality of life perceived as the best possible. Intervention within the framework of social issues is multiple and variable. However, from a gerontological perspective, older adults and their family or support groups are the subjects of social intervention. While the social situations or conditions associated with the aging process and the stage of old age are the targets of intervention, this approach ensures that interventions not only improve individuals' quality of life but also address the social factors that influence their well-being.

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