SOCIOLOGICAL PERSPECTIVES ON ELDERLY QUALITY OF LIFE IN THE CONTEXT OF ACTIVE AGEING DEBATES. CASE STUDY: IAȘI COUNTY

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Abstract

Nowadays, population ageing has become a global phenomenon and Romania is also facing it. In this context, international organizations, such as United Nations or World Health Organization, are paying more attention to public policies that support an increased social participation among the elderly, taking as premise that engaging in various activities could improve third age people's quality of life. Starting from defining a series of concepts such as active ageing, social participation or quality of life, I made a brief secondary statistical analysis, from a demographic perspective, based on Eurostat projections regarding the evolution of Romanian population. Furthermore, I presented some of the results of an empirical approach conducted in Iaşi County, in 2015, on a sample of 710 people, over 65 years. The sociological study was funded by EEA Grants 2009-2014, the NGO Fund in Romania, as part of the project "Elderly home care", implemented by St. Damian Association, Iaşi City. The aim of the research was to identify the main social needs and issues experienced by the elderly. Thus, the main problems identified are related to health status, poor financial situation and the presence of strong loneliness and social useless feelings.

Keywords: elderly, ageing, active ageing, social participation, quality of life

Résumé

De nos jours, le vieillissement de la population est devenu un phénomène mondial auquel la Roumanie est également confrontée. Dans ce contexte, les organisations internationales, telles que les Nations Unies ou l'Organisation Mondiale de la Santé (OMS), accordent plus d'attention aux politiques publiques favorisant une participation sociale accrue des personnes âgées, considérant que diverses activités pourraient améliorer la qualité de leur vie. En commençant par définir une série de concepts tels que le vieillissement actif, la participation sociale ou la qualité de vie, j'ai fait une courte analyse statistique secondaire, d'un point de vue démographique, basée sur les projections d'Eurostat concernant l'évolution de la population roumaine. Cependant, j'ai présenté certains résultats d'une approche empirique menée dans le département de Iaşi en 2015 sur un échantillon de 710 personnes, plus de 65 ans. L'étude sociologique a été financée par EEA Grants 2009-2014, le fonds des ONG en Roumanie, dans le cadre du projet « Soins à domicile pour personnes âgées », mis en œuvre par l'Association *St. Damian*, Iaşi. Le but de la recherche était d'identifier les principaux besoins sociaux et les problèmes rencontrés par les personnes âgées. Ainsi, les

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principaux problèmes identifiés sont liés à l'état de santé, à la mauvaise situation financière et à la présence d'une forte solitude et de sentiments d'inutilité sociale.

Mots-clés: personnes âgées, vieillissement, vieillissement actif, participation sociale, qualité de vie

Rezumat

În zilele noastre, îmbătrânirea populației a devenit un fenomen global, cu care se confruntă implicit și România. Pe acest fond, organizațiile internaționale, precum Națiunile Unite sau Organizatia Mondială a Sănătătii, acordă o atentie sporită politicilor ce vin în sprijinul cresterii participării sociale a vârstnicilor, avându-se drept premisă faptul că implicarea în diverse activităti contribuie la cresterea calității vieții în rândul persoanelor de vârsta a treia. Pornind de la o o serie de definiții ale unor concepte precum îmbătrânire activă, participare socială sau calitatea vieții, am realizat o succintă analiză statistică secundară, dintr-o perspectivă demografică, asupra proiectiilor Eurostat privitoare la evolutia populației României. Totodată, am prezentat o parte din rezultatele unui demers empiric realizat în anul 2015 pe un eșantion alcătuit din 710 persoane, cu vârsta peste 65 de ani din județul Iași. Studiul sociologic a fost derulat în cadrul proiectului "Îngrijirea vârstnicilor la domiciliu", finanțat prin granturile SEE 2009 - 2014 în cadrul Fondului ONG în România si implementat de Asociația Sf. Damian (Iași). Principalul obiectiv al cercetării a constat în identificarea principalelor nevoi și probleme sociale resimțite de vârstnici. Astfel, principalele probleme identificate tin de starea de sănătate, situația financiară precară și de prezenta sentimentelor de singurătate și inutilitate socială.

Cuvinte cheie: vârstnic, îmbătrânire, îmbătrânire activă, participarea socială, calitatea vieții

1. Introduction

The population ageing, recorded by international reports (UN, 2017, WHO, 2015) and demographic studies, is a global reality which is involving a multitude of challenges to the social protection schemes (Rebeleanu and Şoitu, 2012) and therefore is important to establish successful, coherent and cohesive measures, strategies and public policies to harness the potential of older adults (Zaidi *et all.* 2017). According to the World Health Organization, most nations of the world have accepted that the onset of "Third Age" coincides with the chronological age of 65 years. Generally, many definitions have been developed in order to capture the main characteristics of "advanced age". The chronological factor is the most used in defining "Third Age", even if it has been criticized. Nowadays, there are references to "old-young", aged between 65 and 75 years and "old-old", aged above 75 years, or even about Fourth Age, especially in France, aged over 80 years (Bucur and Maciovan 2003). Often, because of their age, the elderly are exposed to social vulnerabilities. Among most cited factors which influence older

adults` life we can identify "socioeconomic status, deprivation, social support, social isolation or exclusion, social networks, social engagement, mastery and sense of control over life circumstances, social capital, and social cohesion" (Şoitu 2015, 74). In this context, the concept of "social participation" is increasingly being discussed in the research field focused on older adults. Elderly "social participation" comprises four fundamental dimensions: *voluntary activities* carried out in organized frameworks by providing unpaid voluntary work, *care to children or grandchildren* (at least once a week), *care to older adults or disabled relatives* (at least once a week) and *political participation* (Zaidi *et all*. 2013).

The social participation is often linked to the term of "active ageing", adopted by World Health Organization in the late 1990s and which is conceptualized as "a process of optimizing opportunities, participation and security in order to enhance quality of life as people age" (WHO 2002, 12), although "there is no consensus on its actual meaning" (Boudiny 2013). As we can see, active ageing is strongly related to "quality of life" concept, defined by M. P. Lawton (1991) as "a multidimensional evaluation, by both intrapersonal and social-normative criteria, of the person-environment system of an individual in the past, current, and anticipated time" (p. 6). In brief, quality of life is reffering to "the general satisfaction with life or its components" (Gerino *et all.* 2015). G. Netuveli and D. Blane (2008) have argued that despite the number of multidisciplinary research centered on quality of life topic are relatively few.

2. Demographic projections on ageing in Romania

In order to draw a perspective on population ageing phenomenon, I made a brief review of demographic projections and statistics at national level (Romania) and local level (Iași County). Without intending to cover all subjects on this topic, this analyze could offer a possible contextualization and justification of the need for empirical approaches focused on elderly.

Eurostat's baseline population projections released in February 2017 highlight the Romanian demographic decline, estimating that the total number of population will decrease from 19,87 millions in 2015 to 16,33 millions in 2050. However, the downward trend of Romanian population will be maintained until 2080, when Eurostat is projecting 14,53 millions residents. In this context, the inhabitants aged above 65 years will increase significantly from 3,37 millions in 2015 to 4,87 millions in 2050, which

means that the elderly will account no less than one third of the total population. Also, the number of centenarians (aged above 100 years) will increase 30 times, from 1558 in 2015 to 46532 in 2080, the equivalent of a small city. Another statistical fact emphasized through Eurostat's baseline projections is that median age of romanian population will reach a maximum threshold in 2040 - 48,8 years, almost 8 years higher compared to the current period (41 years) and 2 years higher compared with European Union (28 countries) 2040's estimations (46,6 years).

2.1. Demographic facts about Iași County

According to Romanian National Institute of Statistics (INS România), in the past years the population of Iași County decreased by about 38 thousand people, from 826 thousand in 2008 to 788 thousand in 2016. However, during the same period, the number of elders increased by 10 thousand, reaching 116 thousand people aged above 65 years. Within 31 years (between 1985 and 2016), the life expectancy in Iași County increased by more than 5 years, from 70.33 years (1985) to 75.61 years (2016). The only drop in life expectancy was recorded between 1990 and 1995. After 1995, a steady evolution of this demographic indicator is visible.

Demographic indicator	Year			
	1985	2008	2016	
Total population	784133	826552	788547	
Total population over 65 years	-	106378	115909	
Life expectancy (years)	70.33	74.02	75.61	

Table 1. Statistics regarding Iași County population.

Source: National Institute of Statistics (own data representation)

Briefly, through this secondary data analysis, based on official statistics, I pointed out that population ageing in Romania, associated with its sharply decrease, has become more visible in public space and public debates and poses many societal challenges like "an increasing pressure for the active population and significant changes on the labor market and in social benefits sector" (Netedu 2017, 295). In order to better manage such a reality, along with the statistics analysis, the policy maker should also focus on the elderly perceptions research regarding their lives and quality of life. Based on their voice and views, the society could better understand elder social role and needs.

3. Research method and objectives

In the third part of this paper, I present some key features regarding the methodology of a quantitative sociological research conducted in 2015 in Iaşi County, on a sample (N) of 710 elderly aged above 65 years. The method used in survey data collection was face-to-face interview. Also, in order to select the respondents, it was used the itinerary method, among the main stratification criteria having: age – divided on two major target groups, 65-75 years and over 75 years, gender – male/ female, and residential environment – urban/ rural.

This research had three main objectives:

- (a) To identify major concerns among the elderly from Iași County.
- (b) To measure some aspects related to self-perceived quality of life among elderly from Iaşi County.
- (c) To evaluate elderly perception on their potential social role, in the context of ageing process.

4. Socio-demographic profile of respondents

In short terms about respondents' socio-demographic profile, out of the total number of elderly questioned, 43 percent were males and 57 percent were females. Also, as for the residential environment, 39 percent were living in rural areas and 61 percent were residing in urban areas. The age of respondents was between 65 years and 95 years, while the average age of sample was 73,5 years and the median was 72 years.

Socio-demographic variables		% [N=710]
Gender	Male	43%
	Female	57%
Residential Enivironment	Rural areas	39%
	Urban areas	61%
Age	65-75 years	62%
	Above 75 years	38%

Table 2. Socio-demographic characteristics of studied population

5. Results

Data analysis was carried out using SPSS ® Statistical Software. In order to study topics like self-perceived quality of life among elderly, health and financial issues among elderly, I used descriptive statistics.

5.1. Self-perceived quality of life among elderly

The qualitative Eurobarometer focused on poverty and social exclusion among European Union (EU 28) older adults (2010) provides information on a wide range of daily-life issues which elderly have to face with. Against this background, the main problems mentioned are related to health status and poor health services, living conditions and cost of living, social insecurity, lack of interest shown by society towards their lives and experiences and so. Thus, one of the main objectives of the survey which is presented in this paper, was to analyze a few aspects that are relating to self-perceived quality of life among interviewed elderly from Iaşi County. Most of respondents declared they are satisfied with their living conditions (89 percent).

How satisfied are you with your?			Partially dissatisfied	Very dissatisfied
Health status	5%	41%	38%	15%
Financial status	5%	46%	36%	12%
Living conditions	29%	60%	9%	3%

Table 3. Satisfaction degree regarding health status, financial statusand living conditions among elderly (N=710)

5.2. Health issues among elderly

The survey emphasized through an open-ended question that the biggest problem of questioned elderly is related to their health problems (45 percent). Though, almost three quarters (72 percent) mentioned they were suffering from an illness, the most common being associated to heart conditions, diabetes, osteoporosis, arthritis and so, or severe disability, while 53 percent of them said they had been diagnosed with it for more than ten years (chronic diseases). The chi-square test revealed that were significant differences between self-perceived health status and residential environment [χ ²=36,536, df=1, Asymp. Sig. (2-sided)=,000], meaning that rural elders

are less satisfied with their physical condition, even though the percentage of those reporting an illness (71 percent) is relatively close to the percentage reported in the urban areas (75 percent).

5.3. Financial issues among elderly

Even if the number of questioned elderly dissatisfied with their financial situation (49 percent) was almost equal with those satisfied (50 percent), is interesting to analyze declared monthly expenditure on drugs and food in relation with their average revenues (879 lei¹). On average, an elderly person mentioned that is spending 161 lei on pharmaceuticals and 316 lei on food, which means that almost 54 percent of their revenue are spent on such products. The study revealed there are major discrepancies between the average pensions earned by questioned elderly who were living in urban areas and those who were residing in rural areas, but by practicing subsistence agriculture rural elders were spending less money on food. In additon, the poor financial situation was the second concern mentioned by a seventh of all interviewed elderly.

Average	Value	Share of average income	N	Residential Environment	
				Urban	Rural
income (pension)	879 lei ²	-	675	1057 lei	614 lei
expenditure on drugs	161 lei	18%	609	167 lei	151 lei
expenditure on food	316 lei	36%	594	392 lei	190 lei

Table 4. Average income and expenditure on drugs and food of among elderly

Though, performing a chi-square test of association between residential environment and satisfaction degree regarding financial status, we didn't observe any difference between the two extracted sub-samples [χ ²=1,813, df=1, Asymp. Sig. (2-sided)=,178].

¹ In 2015, the average pension was 892 lei. Source:

http://www.insse.ro/cms/sites/default/files/com_presa/com_pdf/pensii_2015r.pdf [29.10.2017].

² Equivalent of 197,75 euro. In 2015, the exchange rate average (Euro, RON) was $1 \in = 4,4450$ lei. Source: http://www.bnr.ro/Cursul-de-schimb-3544.aspx [29.10.2017].

5.4. From social exclusion to social participation. Active ageing and solidarity between generations

Almost one of ten questioned elders (9 percent) complained some aspects related to loneliness, social exclusion and feelings of losing their social role. Regarding "loneliness",10 percent had no one to ask for help when they were facing certain difficulties and 3 percent had invoked divinity as their only hope to overcome daily life issues. On the other hand, is important to mention that in the moments when they had a difficult period, the surveyed elderly were using to seek help from relatives (69 percent), even if, in some analyzed cases, the family members did not live with them.

In addition, one third had the perception that society is not respecting them. Along with aging process, the elderly might feel "useless" within sociey, being practically exposed to social exclusion. Following the field observations made during the survey, it can be said that for a part of thirdage respondents the concept of "society" had relatively unclear meanings. For example, in isolated rural communities such as Vladomira (Trifesti) and Săveni (Gropnița), the respondents assessed the respect given by "society" in terms of their limited social networks, which in turn influenced some of their views. The elderly who were dissatisfied with the manner in which society are treating them, were asked, through an open-ended questiond, to argue their opinion. Thus, some thought that society regarded them as "useless" "old-fashioned", "a burden" and also as "a generation no longer valued". On the other hand, the collected arguments had focused on social protection services devoted to them, which were considered inappropiate with their needs. Generally, even though the data analysis took into account relevant socio-demographic variables, like gender, residential environment, income or age, there were no major perceptions differences (statistically significant) between sub-samples.

According to an World Bank report which is promoting active aging in Romania (June 2014), the increase of elderly "social participation" level could raise their quality of life. Thus, are mentioned informal activities – interactions with neighbors and friends – and formal activities carried out in organized frameworks – senior clubs, volunteer programs and so. In fact, many studies have shown there is a strong link between the social participation degree and the welfare of individuals (Walker 2012). In this regard, one of the highlights of this research aimed to identify the way in which the elderly believe they could be useful to others and to society. One fifth of respondents mentioned they could provide "moral" support by giving advice or communicating with other people. This group of subjects is followed by those who said that still could be useful in terms of "physical labor" or performing various household chores (6 percent). Also, 5 percent of respondents claimed that were able to provide general support or to take care of grandchildren and 4 percent confessed they could be useful through their intellectual and practical experience and knowledge.

In 2011, was conducted the last (chronologically) Special Eurobarometer focused on "active ageing". For Romania, the report notes that the elderly believe they can contribute to economy and to society as employees, consumers, volunteers, and also by providing care and financial support to their relatives. Also, active aging is considered as a basis for strengthening *solidarity between generations* which is an EU objective enshrined in Article 3 of the Lisabon Treaty. According to the report entitled *The EU Contribution to Active Ageing and Solidarity between Generations* (2012), this goal "means that older people can take charge of their own lives and contribute to society – and allows more to be done for those elderly people who depend most on the support of others" (p. 3). Thus, the intergenerational solidarity principle is generally accepted in almost every society and, after all, the young generation has a natural obligation to support the elderly, since many achievements are due the contribution of today seniors (Netedu 2016).

6. Conclusion

In conclusion, the biggest issue among the elderly is related to their health condition. During the study, they did not hesitate to criticize the way in which health care services are organized. The rural elders had pointed out they had to travel long distances to dispensaries or that they had to schedule their visits in advance because the family doctors program is irregular, mostly serving at the same time several different village communities. Another major concern among the elderly was related to poor financial situation. Last but not least, even though the surveyed elderly felt they could be useful to society through the activities they might undertake and social participation, some of them were feeling rejected by it. Although, following discussions recorded in the field observation notes during the survey, it has been revealed that, in some cases, the elderly claimed they can not aspire for more due their age or status. However, not in a few cases, divinity was mentioned, the respondents saying they are fully satisfied with "what God gives them".

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