Chapter 4

Aging, Quality of Life, and Social Support

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ABSTRACT

The present chapter presents an intertwined view on aging, quality of life and social support. Aging is a sensitive process of transformation from a young age structure to old age. It is a pressing problem for many countries in this century. Therefore, attention to needs and problems of this age has an importance. The domains that need more attention in elderly is both quality of life and social support in their life. Though social support and quality of life have received much attention in studies of the psychological issues of older adults but still researches are needed in special attention at the intervention level.

INTRODUCTION

Aging is a global issue and continuously been increasing from the second half of the last century. It is a process where the proportion of old person increases than that of the proportion of children (Shettar, 2013). The World Health organization (WHO) defines people aged 60-74 years are elderly. In 1980, UN recommended 60 years as the age of transition for the elderly. Presently, India ranks with large elderly population amongst the countries of the world and researchers have come up with the statistics by United Nations (UN), 2011 that India’s elderly population at age 60 and above shows an increase from about 105 million (or about 8% of total population) in 2011 to 376 million (or 22% of total population) in 2051 and to 622 million in 2100 (or 37% of total population). The proportion of elderly persons in the population of India rose from 5.63% in 1961 to 6.58% in 1991 (Irudaya, Rajan, Mishra, & Sharma, 1999) and to 7.5% in 2001. It rose to 8 million by 21 million in 1991 from 1961 and 29 million in 2001. The growth rate among differences cohorts of elderly such as 60, 70, and 80 above during the decade 1991-2001 was much higher than the general population growth rate of 2% per annum during the same period.

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DEFINITIONS OF AGING

There are several aspects that define aging from its own perspective. Aging actually is not a unidimensional concept and people can age in different ways giving rise to different sets of definitions of aging. The two most commonly used definitions are chronological age and functional age. Chronological age is based on time and refers to numbers of years, month or days passed by an individual since birth when used to demarcate limits for functions like voting, issuing driving hence, or for retirement. The underlying assumptions are that the chronological age is a barometer of the ability to perform certain functions. Functional age is a measure of how well a person can function in the physical and social environment as compared to other people of same age. It has three components: biological, psychological, and social. It is apparent that even though chronological age not is an indicator of an individual’s level of functioning, yet it is linked with aspect of functional age in some way. Demographers and sociologists sometimes categorized the population in three groups (Carey, 2003) as follows: Aged 55-65 as young old (b) Aged 66-85 as old (c) Aged 85 years and above as oldest old. These categorizations have to be re-evaluated in different cultural contexts depending on the life expectancy for that specific cultural group.

AGING AND THEORIES OF AGING

Aging is a multi-dimensional change that includes changes within physical, psychological, as well as social aspects. It can be described as progressive deterioration of the physical and mental functions resulting in a simultaneous decline in both the capacity if the body to maintain homeostatic balance as well the adaptability of the individual to various stressors and thereby increasing the chances of illness and morality. However, not all individuals age in a similar way. In biological terms, aging is a dynamic process that represents the molecular, biochemical, physiological, and structural changes that take place in individual following the end of growth (Dey, 2003). Life is a continuous growth. It begins from infancy to old age and a process through childhood to adulthood and ultimately terminates with the death of an individual (Bhatia, 1983). In general, old age is related with deterioration of physical and mental capacities at a specific chronological age which is usually considered at the age of sixty. The truth about aging is that it is natural and universal process. It is not at all a crisis which hits us suddenly and abruptly in the middle age. It is a continuous unfolding cycle of change that begins to operate even before our birth (Oberoi & Dey, 1991). The process of aging is as old as life. According to the biological point of view, the wear and tear, the building (anabolic) and break down (catabolic) of cells (metabolic process) in the body starts early in the life, even in the prenatal period and continues all through life. However, in the later years of life, the replacement or repair gradually slows and become inefficient. The catabolism (debit) predominates over (credit). Wear and tear becomes more visible in its gross form. Though, Ramamurti (2008) has pointed out the factors, that contribute to ageing may be not only at the genetic level, but also in the body system, the metabolic process, the environment and life style or may be disease included.

Theories of Aging

Psycho-social theories, however, help in identifying the degree and the nature of psychosocial factors associated with changes across the adult life course as well as providing a measure of the extent of frus-