THEORETICAL AND CONCEPTUAL FRAMEWORKS FOR UNDERSTANDING THE PROCESS OF AGEING

Amandeep Singh

Assistant Professor in Sociology

Department of Evening Studies- MDRC

Panjab university

Chandigarh

ABSTRACT

A theory serves as the conceptual roadmap for study. The process of building theories enables us to comprehend and account for factual observations (Webster, 2003). The present study makes an attempt to understand the problems of elderly with the help of theoretical perspectives. The study tries to understand the problems of elderly proven by different theoretical frameworks. The study in relation to the quality of life of the elderly tries to understand the problems faced by them. The theoretical understanding in this study is organized along with many dimensions.

KEYWORDS: Ageing, QOL (Quality of Life), Life course, Feminism.

INTRODUCTION:

A theory serves as the conceptual roadmap for study. The process of building theories enables us to comprehend and account for factual observations (Webster, 2003). Ageing theories have a very long history in human thought, at least as far back as the Gilgamesh epic, which was written in Babylonia around 3000 B.C. (Achenbaum, 1998). The wisdom and suffering connected to grey hairs were discussed in Hebrew and Christian Scriptures. Even though Aristotle may have been the first to describe old age as being chilly and dry, the rising body of knowledge from evolutionary biology serves as a basis for modern beliefs about how the body ages.

Although there isn't a "one size fits all" or single "great" theory that adequately explains ageing, there are several smaller theories that serve as helpful guides for interpreting data and comprehending the world around us. In order to support interpretative assessment, methods and theory are actually inexorably intertwined. Therefore, if knowledge building about social aspects of ageing is to be cumulative, systematic, and gradual, it is vital to analyze the theoretical views that are most frequently cited for the creation of explicit explanations in accounting for empirical data (Bengtson, 1997).

While developing a grand, all-encompassing "theory of ageing," as was the goal in the 1950s and 1960s, is no longer worthwhile, there are now a number of theories that represent different facets of the ageing process and offer alternative perspectives on and explanations for age-related phenomena (Bengtson, 1997).

It is generally defined notion that quality of life has emerged from a number of disciplinary viewpoints, including sociological, biological, psychological, economic, and environmental (Park, 2005). There is no universal agreement on what quality of life may be defined as (Bowling, 2001; Walker, 2002), and the idea is essentially open-ended (Mollenkopf and Walker, 2007). According to researchers, one's overall sense of life satisfaction is determined by their mental alertness, and one's quality of life is defined as their level of health, wealth, and happiness. Quality of life is a multidimensional evaluation of one's current life circumstances that includes physical, mental, emotional, and spiritual dimensions (Schalock, 2000; Bose and Shankardass, 2000).

Theoretical understanding in this study is organized along the following dimensions:

Humanistic or cultural theories of ageing: According to humanistic or cultural theories of ageing, a variety of social and cultural elements may have an impact on an elderly person's sense of purpose, meaning, and wellbeing in life. Through interpersonal connections and social interactions, the sense of purpose and wellbeing is construed as either good or negative. According to Krause (2009), it's critical to pay attention to one's sense of purpose in life as they age because research reveals that having a strong sense of purpose in life may have a negative impact on one's health and wellbeing.

Social Constructionist Perspectives of ageing: Social sciences have a long history of micro-level study that emphasizes social behavior and human agency within larger social institutions. Examples of this heritage include symbolic interactionism (Mead, 1934), phenomenology (Berger and Luckmann, 1966), and ethnomethodology (Garfinkel, 1967). Social constructionism uses hermeneutic approaches, the science, and methods of interpretation, continuing an even older tradition established by Max Weber (1905/1955). Constructionist theories place a strong emphasis on their desire to comprehend how societal concepts and social institutions affect individual processes of ageing. Through an examination of how societal meanings of age and self-conceptions of age develop through negotiation and discourse, these theories address the situational, emergent, and constitutive characteristics of ageing (Passuth & Bengtson, 1988, p. 345). Ageing theories that focus on social construction stress how social reality changes over time to reflect the various life circumstances and social responsibilities that come with maturation (Dannefer and Uhlenburg, 1999; Kuypers and Bengtson, 1973). Key ideas in social constructionist theories of ageing include social meaning, social reality, social relationships, attitudes toward ageing and the elderly, life events, and timing.

Phenomenological gerontologists: Phenomenological gerontologists shed light on theories about how these problems are perceived by those who age, identifying significant eras in their life histories, and how people deal with challenges and their quality of life. Johnson (1976; Gubrium and Lynott 1983). Elderly people's own reflections, thoughts, and experiences are significant in order to obtain a deeper grasp of what daily living

means to them (Morse et al., 2009), and grounded theory aids in deepening comprehension of what is happening in a specific situation (Malterud, 2003).

The life course perspective: According to Neugarten (1972), the life course approach emphasizes the relationship between the lives of older people and the socioeconomic and historical environments in which they are living (Dannefer and Kelley-Moore 2009). It alludes to age-graded living patterns that are ingrained in social structures and are prone to historical change (Marshall and Mueller, 2002). As a theoretical viewpoint, it offers a framework for analyzing generational categories, the various paths that people take to get from adulthood to old age, how these paths change over time, how each is ingrained in culture and interpersonal relationships, and how structural processes of social change shape them all (Marshall, 2009). In exchange for assistance, the elderly parents build their social standing by giving to their kids, accepting their children's goodwill in the future. Children's support to the elderly will be reciprocated or compensated when they will enter their old age. (Kim and Rhee, 1999). Karma, which in Sanskrit means "activity," refers to the whole of one's deeds, whether good or evil. According to Ramamurti and Jamuna (1993), the idea of karma is deeply rooted in Indian society and offers support and consolation to the elderly when they feel helpless. According to Chandra (1996), Indians adapt to the changing environment and become active in the present in order to receive karmafal (result of action) in the future. They believe that deterioration in old age is inevitable and that suffering is the result of past mistakes (Shah, 1993).

Functionalist perspective: The functionalist perspective of disengagement (Cumming & Henry, 1961) holds that older people gradually withdraw from social participation, responsibilities, relinquish social statuses and roles, and are relieved of the social pressures relaxing normative expectations, a conflictual notion holds that social barriers to engagement, not elders' desires, are the cause of the elderly's declining rates of interaction. This demonstrates a link between routine activities and relationships that maintain physical and cognitive functioning, promote self-esteem and identity affirmation, and provide a network of social support and social relationships for overall QOL (Quality of Life) (Atchley, 1971) in order to achieve a state of equilibrium (Finchum & Weber, 2000).

Activity theory: In an effort to address the problems with disengagement, activity theory (Havighurst et al., 1963) claims that the reason for diminishing rates of interaction is not the preferences of older people but rather social barriers to involvement. As a result, quality rather than quantity of interactions predicts psychological well-being in old age. For senior people, the loss of certain roles due to retirement or widowhood compels them to seek replacements that will keep them active and occupied. According to Havinghurst, Neugarten, and Tobin (1963), Bowling (2005), Shkolnik, Weiner, Malik, and Festinger (2001), a person who is 70-year and above, ages successfully is someone who maintains their level of activity by substituting new responsibilities and activities.

Feminist gerontologists: Critical feminists make reference to culturally relevant ways of thinking about ageing, and feminist gerontologists make important arguments illustrating how feminization of ageing and intersectional discrimination affect opportunities and services resulting from sex-based differences in access to education, employment, health care, financial resources, social support, and legal protection (Casalanti, 2009).

Person-environment fit theory: The Person-Surroundings Fit Theory (French et al., 1974) examines how older persons interact with their environment or society. Additionally, it suggests that because of rapid technological advancement, elderly people may feel restricted and may avoid social situations. Functioning is influenced by a person's biological, psychological, and social resources, as well as by environmental factors, environmental traits, and the "fit" between persons and their ever-changing settings. Quality of Life is likely to be impacted when demands from social and physical settings outweigh an individual's resources due to changes in the environment or the individual (Lawton, Weisman, Sloane, & Calkins, 1997).

While, according to the family systems theory of human behavior (Albrecht, 1954), the family is seen as an emotional unit that absorbs complicated family relations and can provide social support for the elderly.

Retrospective theory: Retrospective theory emphasizes how standards connected to things like race, religion, ethnicity, caste, and gender have an impact on early socialization and cultural traditions. Role conflict, role ambiguity, role confusion, role strain, and role loss are concepts relevant to this theory. The weakening of intergenerational relationships as a result of industrialization and urbanization is explained by the modernization and ageing theory.

The socioemotional selectivity theory: (Carstensen, 1992) proposed that older persons systematically shape their social networks so that potential social partners meet their emotional demands. As people age, social networks get pickier. Older people place a greater emphasis on social interaction's capacity to regulate their emotions and favor partnerships that are both emotionally satisfying and of high quality.

Modernization theory: According to the modernization theory (Cowgill and Holmes 1972), the level of industrialisation and the condition of the elderly are inversely associated. Economic changes produced new occupations, which caused the elderly to lose their jobs, income, and status. Urbanization played a role in the dissolution of the extended family, which also resulted in weaker family relationships and less respect for senior family members. However, rather than signalling a decline in respect for the elderly, these developments could be seen as signs of greater egalitarianism and individualism. It is also extremely debatable whether older people's position in all countries was indeed as high as the modernization theory claims.

According to the buffer hypothesis, a person's weak social connections and limited interaction leads to confusion and a rise in their propensity for sickness (Caplan&Caplan, 2000; Cassel, 1976). According to this notion, social support shields a person from environmental shocks and serves as a buffer.

Direct impact theory: According to the direct impact theory, friends and family can provide practical and financial support to lessen and/or prevent some stressful life events, foster a sense of community and positive reinforcement, and increase overall happiness. Therefore, those receiving such assistance are probably to have less physical and mental issues (Dalgard&Tambs, 1997).

Based on Bowlby's (1981) attachment theory, the interactionist theory of loneliness (Weiss, 1973) integrates the social and emotional components of loneliness into one paradigm. According to one theory, loneliness was brought on by a combination of lacking an "attachment figure" and having a weak social support system, and how lonely a person felt depended on their personality type. According to Wenger et al. (1996), social loneliness (i.e., social isolation) is an objective state that does not necessarily produce loneliness, and the conditions characterized as causing loneliness are not always bad ones, therefore other elements must be involved in producing the state of loneliness. These various theoretical stances show how the subject of loneliness has been studied in various ways and what, in various studies, the term "loneliness" may signify. Only a small number of research explicitly state their theoretical underpinnings when addressing loneliness.

Cognitive theory: The focus of cognitive theory is on how people react to and experience loneliness, and it also acknowledges the significance of social circumstances, which are what determine how people feel about their loneliness. It is understood that promoting self-esteem and social abilities might reduce loneliness. According to the interactionist viewpoint, people subjectively assess the quantity and quality of their emotional and social isolation because it results from a confluence of their lack of an adequate social network and an attachment figure. According to certain theories, a person's personality type influences how lonely they feel. Additionally, social loneliness is an objective state that may not always result in loneliness. (Victor et al. 2003).

Other theories about ageing include learned helplessness (Abramson, Seligman, and Teasdale, 1978), conflict theory of ageing (Hooyman & Kiyak, 2011), network theory (Antonucci, 1990), and the political economy of ageing approach (Simmons, 1945). The family system (Wenger, 1996; Antonucci, 1990, etc.). The importance of theory has been shown on a number of levels by the rich range of explanatory frameworks that have arisen at the micro and macro levels of analysis. Not only is theory crucial for preserving the history of social gerontology, but it is also crucial for explaining and comprehending age-related research (Bengtson, 1997).

CONCLUSION:

The present study reveals that the social and cultural factors may have an effect on elderly people's sense of well-being and of their ability to live meaningful lives. According to study, having a strong sense of purpose in life may be detrimental to one's health and happiness. The elderly believe that suffering comes from previous transgressions and that deterioration in old life is inevitable. Theories of ageing that emphasize social construction emphasize how social reality shifts through time to reflect the diverse life situations and social responsibilities that come with age. According to the functionalist theory of disengagement, senior citizens eventually stop taking on new roles and obligations. Activity theory contends that social impediments to

participation, rather than the choices of older people, are to blame for the declining rates of interaction in an effort to solve the issues with disengagement. As a result, psychological well-being in old age is predicted by interaction quality rather than quantity. According to the Person-Surroundings Fit Theory, elderly individuals may feel constrained and avoid social interactions because of how quickly technology is advancing in our culture. Thus, the study reveals that quality rather than quantity of interactions predicts psychological well-being in old age.

REFERENCES

Abramson, L. Y., Seligrnan, M.E.P., & Teasdale, J. 0.(1978). Learned helplessness in humans: Critique and reformulation. Journal of Abnormal Psychology, 87, 49-74.

Achenbaum, (1998). In Binstock, R.H, George, L.K. San Diego (ED.). Handbook of aging and the social sciences. 4th ed. CA: Academic Press. pp. 229–253.

Albrecht, R. (1954). The parental responsibilities of grandparents. Marriage and Family Living, 16(3), 201-204 Retrieved from http://onlinelibrary.wiley.com

Antonucci, T.C. (1990). Social supports and social relationships. In R.H.B in stock and L.K. George (Eds.), Handbook of Ageing and the Social sciences, 3rd ed. New York: Van Nostrand Reinhold

Atchley, R. (1971). Retirement and Leisure Participation: Continuity or Crisis? The Gerontologist, 11(1), 13-17. Audinarayana, N. (2012). Rural Elderly in India: Perspectives and Issues, B.R. Publishing Corporation. Retrieved from http://books.google.co.in/books/about/Rural_Elderly_in_India.html

Bengtson, V. L., Burgess, E. O., & Parrott, T. M. (1997). Theory, explanation, and a third generation of theoretical development in social gerontology. Journal of Gerontology: Social Sciences, 52, S72–S88.

Bose, A., and Shankardass. M.K. (2000). Growing Old in India: Voices Reveal, Statistics Speak, B. R. Publishing Corporation.

Bowling, A. (2005). Ageing Well: Quality of Life in Old Age. Oxford University Press, McGraw-Hill International.

Bowling, A and Windsor, J. (2001) Towards the good life: a population survey of dimensions of quality of life, Journal of Happiness Studies, 2: 55–81.

Caplan, G., & Caplan, R. (2000). Principles of community psychiatry. Community Mental Health .36(1),3957–24

Carstensen, L. (1992). Motivation for social contact across the life span: A theory of socioemotional selectivity.

Nebraska Symposium on Motivation 40: 209–54. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/

Casalanti, T. (2009) .Theorising feminist gerontology, sexuality and beyond: an intersectoral approach' in Bengston, V.L., Gans, D., Putney, N.M. and Silverstein, M. (eds.) Handbook of Theories of Ageing, Second Edition, Springer PublishingCompany, New York, pp. 471-85.

Cassel, J. (1976). The contribution of the social environment to host resistance. The Fourth Wade Hampton Frost 397 Lecture. American Journal of Epidemiology, 141(9), 798–814.398

Chandra, V. (1996). Cross-cultural perspectives: India. International Psychogeriatrics, 8;3, 479-481.

Cowgill, D.O. (1972). The Role and Status of the Aged in Thailand. In D.O.Cowgill and L.D.Holmes (ed.), Aging and Modernization (New York, AppletonCenturyCrofts), pp. 91-101

Cumming, E. and Henry, W., (1961). Growing Old: The Process of Disengagement. New York: Basic Books. Retrieved http://journals.cambridge.org/

Dalgard, O. S., & Tambs, K. (1997). Urban environment and mental health: A longitudinal study. British Journal of Psychiatry, 171, 530–536.

Dannefer, D. and Kelley-Moore, J.A. (2009). Theorizing the life course: new twists in the paths' in Bengston, V.L., Gans, D., Putney, N.M. and Silverstein, M. (ed.) Handbook of Theories of Ageing, Second Edition, Springer Publishing Company, New York, pp. 389-411.

Dannefer and Uhlenburg, (1999). Paths of the life course. in Handbook of Theories of Ageing, Second Edition, edited by Bengston, V.L., Gans, D., Putney, N.M. and Silverstein, M. Springer Publishing Company, New York, pp. 487-98.

Finchum, T., & Weber, J. (2000). Applying continuity theory to older adult friendships. Journal of Aging and identity, 5(3), p159-168.

French, J. R. P., Jr., Rodgers, W., & Cobb, S. (1974). Adjustment as person-environment Fit. In G. V. Coelho, D. A. Hamburg, t J. E. Adams (Eds.), Coping and adaptation. New York: Basic Books.

Havinghurst, R., Neugarten, B., and Tobin, S. (1963). Disengagement personality and life satisfaction in later life. in R. Hausen, R., (ed.) Age with a Future (pp. 419-425). Copenhagen: Munksgoard

Hooyman, N. R., &Kiyak, H. A. (2011). Social gerontology: A multidisciplinary perspective (9th ed.). Upper Saddle River, NJ: Pearson

Kim, C. S., & Rhee, K. P. (1999). Living arrangements in old age: Views of elderly and middle-aged adults in Korea. Hallym International Journal of Aging, 1(2), 94-111

Krause, N. (2009). Meaning in life and mortality. Journal of Gerontology: Social Science,64B, 517-527.Retrieved from http://www.researchgate.net

Kuypers, J. A, and Bengtson, V. L. (1973). Competence and social breakdown: A social psychological view of Aging. Human Development 16(2), pp 37 – 49

Lawton, M. P., Weisman, G. D., Sloane, P., & Calkins, M. (1997). Assessing environments for older people with chronic illness. Journal of Mental Health and Aging, 3, 83–100. Press.

Marshall, V.W. (2009). Theory informing public policy: the life courses perspective as a policy tool in Bengston, V.L., Gans, D. Putney, N.M. and Silverstein, M. (ed.) Handbook of Theories of Ageing Second Edition, Springer Publishing Company, New York, pp. 573-93.

Marshall, V.W. and Mueller, M.M. (2002). Rethinking Social Policy for an Aging Workforce and Society: Insights from the Life Course Perspective. CPRN Discussion Paper No. W/18, Canadian Policy Research Networks, Ottawa.

Mollenkopf, H., and Walker, A., (2007). Quality of Life in Old Age: International and Multi-Disciplinary Perspectives, 4: 31 of Social Indicators Research Series. Springer.

Neugarten (1972) from Psycho-Social Aspects of Aging in India by Paramjeet Kaur Dhillon. New Delhi: Concept Publishing Company.

Park, N., & Seligman, M.E.P. (2005). Orientations to happiness and life satisfaction: The full life versus the empty life. Journal of Happiness Studies, 6(1), 25-41

Passuth, P.M. and V.L. Bengtson. (1988). Sociological Theories of Aging: Current Perspectives and Future Directions. In J.E. Birren and V.L.Bengtson (Eds.), Emergent Theories of Aging. New York: Springer.

Powell, J.L. (2006). Social Theory and Ageing, Rowman and Littlefield Publishers, Lanham, MD.

Ramamurti, P.V. & Jamuna, D. (1993). India. In E.B. Palmore (Ed.), Developments and Research on Aging: An international handbook (pp 145-158), Westport, CT: Greenwood Press.

Schalock, Robert L (2000). 'Three Decades of Quality of Life', Focus on Autism & Other Developmental Disabilities,15: 2, p. 116

Shah, V. P. (1993) The Elderly in Gujarat. Project Report: Department of Sociology. Gujarat University Ahmadabad.

Shkolnik, T., Weiner, C., Malik, L & Festinger, Y. (2001). Effects of Jewish religiosity of elder Israelies on their life satisfaction, health, function and activity, Journal of Cross-Cultural Gerontology, 16, 201-219.

Simmons, Leo (1945) .The Role of the Aged in Primitive Society, New Heven: Yale University Press from www.wileyonlinelibrary.com

Walker, A. (2002). European Forum on Population Ageing Research/European Group on Quality of Life Extending quality of life in old age (EQUAL) Geriatrisk Klinik, Bispebjerg Hospital, Bispebjerg Bakke 23, 2400 København NV, Denmark.

Webster, N. (2003). Webster's new American dictionary. New York: HarperCollins.

Weiss, R.S.(1973). Loneliness: the experience of emotional and social isolation. Cambridge, Mass: MIT Press. Retrieved from http://cas.umkc.edu/casww/sa/Relationships.htm

Wenger GC, Davies R, Shahtahmasebi S, Scott A.(1996). Social isolation and loneliness in old age: review and model refinement. Ageing Society. 16: 333–58.

Victor, C., Bowling, A., Bond, J. and Scambler, S. (2003). Loneliness, Social Isolation and Living Alone in Later Life. GO Findings 17, Growing Older Programme, University of Sheffield, Sheffield.

