INVOLVING OLDER PEOPLE AFTER RETIREMENT IN SOCIETY AND FAMILY F. N. Mocanasu

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Abstract:

In recent years sociologists believed that for individuals withdraw from active life was an event with exclusively negative consequences, recent research has shown that especially when seniors are in good condition and have adequate income they feel satisfied with the changes of retirement. In some fields (education, medicine) they can continue their work a few years in the private sector.

In the society we live competence should be a key factor that makes people to be open or not to social change and not to age discrimination. Currently, to biological and psychological aging are added social aging that leads the individual to social exclusion, because, unfortunately, old age often came to be associated by others, with the disease, impotence, conservatism, lack of discernment, irritability and dependence on others.

Older people are often treated with contempt and looked that overall they represent a wealth of society.

Often society associated aging with loss of sensory capacity, with changes in mobility and retirement; however, some researchers have shown that for most older people, these changes are not so burdensome, nor so obvious as one might imagine.

Keywords: active life, change, discrimination, degree of competence, social aging, retirement, addiction, contempt.

The significance of social problems is neither clear nor obvious to all people living in a country. From this point of view, some individuals may feel that this is a harmful or undesirable condition, but other will appreciate that this is a benefit to society. Such is the paradigm of retirement; it is a recognized social and legal problem but also supports extensive debate on the need for retirement from older age or younger, usefulness of those people or their exclusion from the labor market and their adaptability to new social conditions of family, friends and former coworkers. Interpretation of this social problem, thus involving different perspectives, even conflicting because some consider a solution for reducing unemployment and creating new jobs while others consider it a social problem for both retirees and those who take their place and are deprived of experiences.

The event most often associated with old age is retirement period or period of time when the individual retires from active professional life. Retirement brings many changes in the individual's life some with negative character and other with positive character. For people who have acquired a certain routine of life the effects of retirement can be felt more severely than those who have not activated permanently in the same professional field. No matter how they are perceived in society, retirees still feel useless, stigmatized, discriminated against and removed from society.

Therefore, for a better assessment it should be given the response for two questions:

• Who defines this social problem?

• What criteria are used to define this?

The answer is for both points of view that changes over time as any social problem is subjected to the processes of social change. The answer to the first question related to retirement pathology at the second one concerns the theories of aging.

• Pathology of retirement

Always either for women or men, retirement from activity is a turning point in the existence of individual, a stress that can accelerate pre-existing illnesses, generate more and ultimately could damage the individual's mental state, so its defined a pathology of withdrawal, a "disease of retirement"¹, a real morbid entity. There are currently two trends, both pros and cons, first seeks the biological and social potential of the elder and second follows the limit age of retirement, for releasing jobs needed to younger generations.

To view the first trend we can say that people who have had extra-concerns, maintain a better social balance. So for people who are allowed by profession, to continue the activity beyond retirement age (people of culture, art, science). For men the retirement stress is higher, worse than women, having also domestic concerns. Men have often a neurosis retirement, which may include a psychic death², professional death. The attitude towards those who are to be retired should be individual because each individual is unique in his own way. Existing reactions are balanced, optimistic and pessimistic, even catastrophic. Retirement signifies loss statuses, roles and personal dignity. The most outstanding female problems before retirement age related, concur with climacteric period.

Other important factors worthy taken into account are profession and urban or rural environment. Therefore in rural areas, the shock is not serious because cessation is not complete and sudden. Very active people, especially those in urban areas, if they do not find other interests and activities, supports hard retirement. This is why preventing pathology of retirement must be made in advance through courses of pre-retirement integration in communities work where persons that will retire will integrate more easily. Psychological preparation is essential because it is essential to combat the feeling of hopelessness. The solutions are:

- Growing physical movement and exercise intellectual
- Organizing free time
- Possibility of integration in community activities, cultural, sports, household, craft.

So the answer to the question of **who defines this social problem?** - After we showed that pathology of retirement leads within each habitat of the retirees because it has different reactions and ways of integration and acceptance of the new status also different. Changes are on two levels:

• Changes in their family status:

- a. children leaving the house where they lived with their parents;
- b. restricting housing conditions, possibly moving house;
- c. leaving their home to live with one child;

d. sometimes conflicting relations between generations (misunderstandings own children or grandchildren);

e. conflict situations between partners marital status negatively influences behavior pensioner;

- f. death of a partner and loneliness;
- g. material reduction in revenue;
- h. sometimes obliged to accept a move to a care institution for the elderly.
- Change in employment status

¹Apahideanu Octavian,(2001) Social assistance for elderly people, Publisher Eftimie Murgu, Resita,p.88

² Balasa, Ana, Health(1997) - essential component of quality of life of the elderly, Quality of Life, Romanian Academy Publishing House, Bucharest, Year 18, No. 3-4, 2007, page 62.Boudon, Raymond, Treaty of sociology, Humanitas, Bucharest, p.62

- Loss of social position, the financial situation or prestige;

- Lack of motivation to live.

• **Theories of aging:**There are two categories:

A. Genetic theories³:

Gene theory argues that the body has one or more genes that become active aging to with age and decrease the survivability of the organism.

Researchers have found two such genes responsible for some period of youth and others that determine functional decline and structural degradation of the genes. This certain types of genes give rise to two theories;

• The error theory argues that in time may occur proteins that leads to altered protein dysfunctional cells, i.e with time in DNA synthesis accurs errors that may affect biological function.

• **The theory of planned** or biological clock theory which assumes that there is a specific store genetic information about the life of the cells of the body or the whole body.

B . Non-genetic theories⁴: it is assumed that there are 3 kinds of non-genetic theories:

• Immunological theory

Claims that the body has cells that are able to distinguish the self from nonself or otherwise modified by the appearance of the cells, the body's own cells fight modified cells.

The elderly increased frequency of autoimmune diseases: rheumatoid arthritis, thyroiditis and growing infections by lowering the body's resistance.

• Theory of connective tissue

Connective tissue containing collagen, elastin and pseudo-elastin. The amount of collagen decreases with age, which plays an important role in tissue elasticity. Due to aging tissue dehydration elastin calcification occurs in the elderly and this calcification may occur in the heart valves, major blood vessels, the epicardium and endocardium. From them appears a series of manifestations of dehydration and calcification:

• skin is less elastic and drier, thus becoming unsightly;

- tendons get dried and may be easily broken, for this reason frequently appears fracture;
- teeth become vulnerable and fall;

• artery walls become less elastic even to stiffness with the risk to tearing, there are so many strokes;

• gastro-intestinal tract leading to loss of elasticity decreased mobility \rightarrow constipation.

• The theory of free radicals

Argues that there is a free radical with a momentary existence and can react with other substances leading to cell destruction that is located in.

The answer to the second question, what criteria are used in this definition? - Depends on the physical and psychological changes specific to third age but are very difficult supported by many young people and older people.

• Statistics and interpretations in paradigm of retirement

The data presented in this paper are taken from statistical documents and analyzes of research conducted at the Institute for Quality of Life Research and the National Institute of Statistics of *Romania*⁵, and from Eurobarometer⁶ - studies based on data from national surveys organized and published by EUROSTAT.

³ Bogdan Constantin,(1992),Elements of geriatric practice, Medical Publishing House, Bucharest, p.104 ⁴Idem, p.109

⁵ John Mărginean,(2011) "Quality of Life in Romania 2010" Națiional Institute for Economic Research, Research Institute for Quality of Life, Institute Kirițescu Costin, p.192

⁶ "Social Report IRQL after 20 years: Options for Romania", Romanian Academy, National Institute of Economic Research, Research Institute for Quality of Life, 2010,p.64

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Studies in this area and the many problems it generates the retirement have led people to move the sample answers that individuals are willing to leave the labor market in old age against speculations that the answers would be totally different. In **Romania**⁷ at a rate of 40.3% respondents **agree to retire later** because it scares them that are inactive socially and revenues are decreasing than that they are going to work at an older age.

In all EU countries the population agreed that approaching retirement is as above and Romania was allied to the countries in the European Union. Although they fear diseases that they will be dependent on a precarious financial situation and of other family members are making individuals to want a later retirement. Obviously is the desire of retirement people to be socially active and independent.

Proposals

By respecting these rights, seniors can remain active for longer in society and benefit from a healthier lifestyle and dignity.

On the other hand, the retired doesn't mean the lack of activity. Many of those who retire take care of others (most often parents, partners or grandchildren) or volunteer - work much less visible, often neglected in our society. We must not forget that the return to simple things, everyone needs to be loved, to find alternatives to inactivity of retirement is part of everyday life.

Develop strategies to promote active aging and solidarity between generations will be intense in the period 2010-2020, remaining one of the main themes work on the EU agenda. In many EU countries already are programs adapted to developed professional skills held by older people⁸ to be easily integrated into the labor market or to remain active longer. Perhaps the secret of this active aging is solidarity between generations, as a society with more elderly people should not be a burden but should be seen as a way for young people to build on the capacity, power and useful work experience of older people on one hand and the way to feel active in the society in which they belon

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⁸ "The new European strategy for growth and employment (2020): objectives, instruments for monitoring the implementation, the institutional resources and implementing rules," Romanian European Institute, Project SPOS 2010-Strategy and Policy Studies, p.33

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