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# Favoring the Unfavorable Reality: Impact of Social Relationships in Fostering Successful Aging

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#### Abstract

Successful aging has become a critical aspect of research in Gerontology due to the increasing aging population worldwide. In Sri Lanka, where the aging population is rapidly growing, it is important to investigate the factors that contribute to successful aging. Social relationships have been identified as a crucial factor in fostering successful aging. This study the impact of explores relationships in promoting successful aging in Sri Lanka. The study used a qualitative approach to gather data from a sample of 20 elderly aged 60 years and above deploying in-depth interviews. The findings indicate that social relationships have a significant impact on successful aging. Elderly citizens who have strong social relationships have better physical, emotional, and cognitive health than who have those limited social Moreover. connections. the study found that social relationships have a significant impact on the elderly citizens' quality of life and satisfaction,

happiness. Social and support, emotional closeness from family specially from offspring and neighbors positively affect the elderly's overall well-being. However, the study also identified barriers to successful aging, such as culture-bound attitudes about aging, unpreparedness to old age and limited or broken social networks. These barriers can have negative impacts on their well-being. conclusion, social relationships play a vital role in promoting successful aging in Sri Lanka. Elderly citizens who have strong social connections are more have likely to better physical, emotional, and cognitive health, as well as a higher quality of life. This study highlights the importance of social relationships in addressing the challenges of the aging population in Sri Lanka and calls for policymakers to implement programs that foster social relationships among the elderly citizens such as community-based programs that facilitate social connections and support networks for older adults.

**Key Words:** Successful Aging, Social Relationships, Culture-Bound Attitudes, Cognitive Health, Community-Based Programs

## Introduction

Population aging is a common phenomenon across advanced economies and in Asia and the Pacific in East and Southeast Asian economies, but being one of the fastest aging countries in South Asia, aging appears significant for Sri Lanka (Asian Development Bank, 2019). Similar to many developing countries worldwide, Sri Lanka defines elderly population as those who have completed sixty years of age and above. From 1953 to 2003, within a period of 50 years, elderly population has almost doubled in size. In 1981 and 2012, the elderly population was 6.6% and 12.4% of the total population, respectively. During 1981 to 2012, within a period of 31 years which is even less than the gap between 1953 to 2003, the Sri Lankan elderly population has still doubled. It is estimated that one in four Sri Lankans will be elderly by the year 2041 (Maduwage, 2019). Increasing elderly population in Sri Lanka is a consequence of many socio-demographic factors. The low fertility and mortality rates are leading among them while increased life expectancy, specially among elderly women, plays another important role. The Sri Lankan population is growing older and as Asian Development Bank (2019) points out, it will age more rapidly than most of the other developing economies. Sri Lanka's age composition is shifting from a pyramid to a pillar shape. The share of working-age population (those aged 15 to 64) in total population has started declining, and the absolute number of working-age population will also start dropping by 2030. This situation increases the dependency ratio that alarms the potential problems related to fast growing elderly population in Sri Lanka. Late life physical and mental instability worsens the dependency of elderly further as they have to seek support of somebody else in their life. The increased number of elders with physical and mental incapacities increases the dependency while, in return, such elders are undergoing a tragic dissatisfaction in their old age if their socio-emotional needs are not appropriately met.

In this backdrop, the concept of successful aging was identified in the study as an utterly significant concept catering the socio-economic and psychological needs of a large number of vulnerable people from the population who are elderly. Successful aging involves subjective criteria and has a cultural context that is not captured in objective measurements (Romo et al., 2012). Amongst several conceptualizations for successful aging, Rowe and Kahn's (1997) framework has been widely adopted in research. It defines successful aging as "the absence of disease and disability, maintenance of a high degree of physical and cognitive functioning, and meaningful engagement in life. Absence of disease refers not only to absence or presence of disease itself, but also to absence, presence, or severity of risk factors for disease. High functional level includes both physical and cognitive components.

Physical and cognitive capacities are potentials for activity. Successful aging goes beyond potential and it involves activity. While active engagement with life takes many forms, the most concerned two forms are interpersonal relations and productive activity. Interpersonal relations involve contacts and transactions with others, exchange of information, emotional support, and direct assistance. An activity is productive if it creates societal value (Rowe & Kahn, 1997). In the light of this, social support, trust, and reciprocity are crucial for their well-being. Social support is provided by family members, friends, and neighbors who provide emotional and practical support. Trust which is also important is built through long-standing relationships, and reciprocity is demonstrated through the exchange of goods and services within the community.

The measures of successful aging have rarely been included social aspects in the operationalization. It is prominent to comprise the concept including both functional ability and social function. A good social function is as important as health and functional ability in the definition of a full life. Social function referred in this article is the degree to which the individual utilizes the opportunity to be an active participant in social life and the opportunities for self-realization to social interaction. The ability to exchange help and support is also included in social function in the concept of social participation. Further, the limited functional abilities associated with old age can be assisted by a strong social capital. Accordingly, the study attempts to identify the significance of social capital in promoting the successful aging of elders.

# **Objectives**

Amidst many potential areas of study, the research attempted to identify the key socio-economic factors decisive in successful aging and the impact of those socio-economic factors in manipulating the perception of elders about successful aging. As per the research objectives, both social and economic factors were comparatively considered in order to identify to which extent each aspect influence in molding the perception of elders.

## Methodology

The research was qualitative in nature. Therefore, primary qualitative data was collected through in-depth interviews. In depth interview method was deployed as it best fits with the need of collecting data related to attitudes and perceptions. Twenty elders were selected through purposive sampling and the inclusion criteria was being over 60 years and having a late life health limitation. The sample portrays a serious aspect of these challenges as late life disability has been more common

among elderly population. Study was conducted in 205-A GN division located in the industrial-zone of Ja-Ela DS division. Data was analyzed using narrative analysis method.

## **Results and Discussion**

Aging is inextricably linked to several physical, psychological, and social changes throughout human existence. The majority of these changes have negative implications, such as restriction, limitation, inability, dependency and reaching the end of one's life expectancy. Elders who are already getting older resist accepting the changes that come with getting older. Physical impairments and vulnerability to health risks in old age make it even harder for elders to live happy lives. There are numerous ways to alleviate or decouple these pessimisms about old age, including assuring elders' financial stability, altering people's perceptions of old age, and providing social security for the aged at the micro, mezzo, and macro levels. In order to improve the efficiency of the majority of techniques used to manage the demographic impact of the senior population in Sri Lanka, it is important to take into account how older people perceive their experiences of aging with physical limitations.

In general, study portrayed that Rowe and Kahn's (1997) framework for successful aging poses a serious limitation in comprehending how elders view successful aging because their mobility has inevitably been severely constrained due to the physical impairments increasing their susceptibility to other morbidities. Therefore, when examining the perception of successful aging, cognitive functioning and meaningful social involvement are given increased significance and weight. This further particularizes the nature of subjectivity in defining the successful aging and importance of contextualizing the definition of successful aging.

According to the study, findings showed that the social support system and financial resources have a significant impact on how well-equipped elderly people are to handle the challenges of aging. According to elderly people with health challenges, both financial and social capital is essential to ensuring the social aspect of successful aging. From their perspective, being financially able to split the cost of their individual expenses strengthens having a solid social bond within a family.

"Older persons are prone to be viewed by society as beings who are useless. Such inferior treatments become more prevalent when physical impairment and aging are combined. We should therefore make plans for our latter years. It is inevitable that I will reduce myself to becoming a mere

dependent unless I am able to shoulder at least some basic expenses as a family member. As adults, such persons are silenced in the family".

(A respondent)

Given these sentiments, it makes sense that having financial capability is viewed as determinant of a heathy bond with the family. The implication is that elders have made a point of making a deliberate effort to invest in planning and working for it because they value family bonds. The identical family norms in Sri Lankan culture that parents expect their offspring to support and care for them as they age are reflected in this. As a result, in the local context, family is seen as the preferred and authentic support unit for senior care.

Furthermore, elderly people with physical limitations recognize without question that having financial capital is important for living a successful old age. Elderly people with physical disabilities have higher health costs in particular, and they do not want to burden their families because of their health issues.

"The majority of people spend all of their income by middle age. I think it's necessary to have at least some cash on hand to pay for our medical requirements. No matter how good and close I have been to them, my family will feel burdened if they have to pay for all of my expenses. These days, living expenses are difficult. We should make plans to be less annoying if we want a pleasant environment at home."

(A respondent)

Such perceptions suggest that the financial capabilities are valued as to ensure that they are capable of occupying the social statuses they used to enjoy in the family and to avoid or lessen the strain they might bring on the family that safeguard a healthy connection.

In a study on effective aging among older people in Korea who live in the community, Jang has found that individuals who have a positive relationship with their spouse and those who live alone have a higher likelihood of doing so than those who live with their children. In other words, the relationship with a spouse, rather than children, has a greater impact in the family system. However, the results show a divergent propensity for relationships compared to Sri Lankan family standards. The elders show a greater satisfaction of their old age when they are living with their offspring and grandchildren. The result reflects the change in the lifestyle of older adults in Sri Lankan context. Specifically, older adults prefer a dependent relationship with children rather than being separately living on their

own in their later years. Hence, it is necessary to introduce mechanisms to older adults manage their own health and perceive themselves as healthy individuals, instead of depending on their children, for successful aging. When they are residing among their children and grandchildren, the elderly exhibit more satisfaction with their old age. The outcome depicts how expectations and life styles of elderly differ in Sri Lanka from a more individualizing society. Particularly, older people choose to live in a dependent relationship with children rather than living alone or living in an isolation as a couple in their later years. As a result, in order to age successfully, older adults must be empowered to take the control of their own autonomy while making community mechanisms to provide assistance when and where necessary.

It was evident that most of the elders who have worked and become physically restrained in their late life have some savings that they have received from their workplaces. All of them are receiving different economic assistances from the state. As Asian Development Bank (2019) points out, there are several economic assistances in Sri Lanka provided to the elderly. Namely, Social transfers such as *samurdhi*, the government's flagship poverty alleviation transfer scheme, *pin padi*, a public assistance program operated by the ministry of social empowerment and welfare; the senior citizens allowance (*wadihiti saviyata jeshta purawasi deemanawa*), pension schemes such as civil service pension scheme; farmers' pension scheme; fishermen's pension scheme; pensions for the self-employed and retirement schemes for private sector employees such as employees' provident fund (EPF) and approved provident and pension funds are given in order to ensure their late life financial assurance. All the elders in the sample received at least one of the above financial assistances.

"I am a senior citizen allowance recipient" (wadihiti deemanawa). It does not amount to much. However, I can at least offer my grandchildren a little sum of money so they can buy some candy. They really value it, which makes me happy as well'.

"I am relieved that my EPF has some money in it. That was a significant sum. Despite the fact that my kids gave some money, I placed it in my account and used it for my medical expenses. Additionally, they have separate expenses. I can thus help them out financially."

"I am so happy I was in civil service. I have a pension as a result. On the date of my pension, my son drives me to collect money. They would not be able to care for my wife and me if I didn't have a pension, in my opinion. I'm not afraid to say that if we didn't have a source of money like this, not even our own children would take care of us. That is a typical reality."

(A respondent)

Income from work falls sharply after age 60, reflecting the relatively low retirement age norms in the formal sector. Perera (2017) points out that in practical, poverty among older persons is higher than the rest of the population which is a sign that older people have limited income, which makes them vulnerable. Yet, as the study reveals, having some source of financial capital, disregarding the number of financial transfers they receive from state or any other savings they possess, has been considered as an important factor that encourages the elders to live with families who provide emotional and social care to them with dignity and satisfaction. In return, it is accepted that the social capital; specially the primary family care elders retain plays a vital role in upgrading the quality of life leading to successful aging. Perera (2017) validates this contradictory prevalence pointing out that poverty incidence at the national poverty line, though higher among elders compared with the rest of the population, is in single digits. This is largely because most of the elders in Sri Lanka continue to live with their families, so living standards of the older people largely resemble that of the typical household. In this case, financial and social capital is playing a mutually promising role in promoting the successful aging of elders with physical disabilities.

In addition to this, it was firmly believed that the recognition of their social status and the value added to the quality of life are highly dependent upon the social relationships and social interactions elders are engaged in. Even if the elders with health issues possess financial capital that requires for full or partial fulfillment of their health and other expenses, the emotional attachment and care given plays a major role in manipulating the effective utilization of financial capital and health seeking behaviour of them.

"Family is worth more than anything. If I do not have the family to live with, I don't think that I would consider taking care of myself. For whom I should live"

"It's possible to earn money but not to earn people. The love and care we receive as we age is what keeps us alive, not food or medication. I am physically disabled. But my kids keep me mentally strong. They are aware of my efforts to raise them. I am accustomed to spending every morning and evening on the couch at the verandah. My neighbors walk by never forget to greet and share few words with me. That energizes me and makes me feel connected to the world".

(A respondent)

This can be analyzed in the light of life aspirations related to successful aging as the intimate relations are evidently functioning as a push or a pull factor of self-care of elders. According to McLaughlin (2010), the elders who contact their neighbors and friends more frequently and who have a greater number of close neighbors and friends have a higher chance of achieving successful aging. Such social support is a positive resource that an individual can obtain from interpersonal relationships, thus maintaining a social support system in old age is particularly important for older adults who often experience a sense of loss.

Rather than merely having a social capital, the nature of primary relationships that perform care giving is decisive in understanding the perceptions of elders on successful aging. The study clearly reflected the difference of acknowledging the new reality brought by aging between those who have healthy intimate relationships and conflictual primary relationships. Aging causes physical changes that alter elders' situations, and their responses to these changes determine whether elders viewed themselves as successfully aging (Romo et al., 2012). The positive responses revealed in the study were accepting these changes associated with aging and disability, acknowledging that those will continue to grow and welcoming the help of social network as a coping mechanism of adaptation. Those were encouraged by healthy primary relationships that functions as a social capital. In contrast, negative responses include denying the changes happening in relation to aging and disability and perceiving themselves as helpless or useless. Such negative responses are triggered by conflictual primary relationships or not having a stable care network at all. Further, in the absence of a proper care network, perception of elders is governed by the culture bound negative myths and misconceptions about aging and disabilities.

"When I was at my middle age, I was as strong as a horse. I was the one who looked after the entire family. This is something I never anticipated happening to me. When I became disabled (abbagatha), my children simply kicked me out. If this relative hadn't been there, I would probably beg on the street. You guessed it.... this is my karma. I returned to everyone what I had borrowed from them during a former birth. I am currently waiting for death. Who among us deserves to suffer in this way?" "I am not fortunate enough to die peacefully. My mother died at a younger age. We never saw our parents in agony on a bed. I do not believe I have that chance. How many pills do I swallow a day? My ancestors were extremely healthy when they passed away. So, my situation is none other than a payback to a sin. So, I don't hate anybody for not feeling sorry for me".

(A respondent)

Such experiences increase the psyche-physical vulnerability of elders that denies the successful aging experience of them. This leads to frustration and worsened wellbeing while weakening the cognitive functioning of them too. These factors all along reveal the significance of social capital for a successful aging experience of elders.

## Conclusion

Aging is a natural phenomenon. Individuals, communities and state need to be prepared with effective policies, practices and mechanisms to manage successful aging in the most productive and anticipated way. A successful healthy life during old age cannot be achieved in one instance or in one initiation. It is a larger goal to be achieved throughout a complex and carefully planned process at every level. Identifying the demographic patterns of population aging, pathological trends and health conditions along with the psychosocial wellbeing of elders are crucial in ensuring the successful aging experience of elderly. Specially, preparing individuals, communities and national level policy bodies with a need responsive care mechanism is vital in our society. In that mission, understanding elders' perception will help establish common ground for communication among gerontologists, social workers, policy makers, communities, families and respective elders and identify the most appropriate interventions to help elders achieve and maintain the experience of successful aging. As evident in the study, it will be more productive to prioritize empowerment of the social capital of elderly care management while assisting them with financial security as it has many contextual implications in adding meaning to the late life of elders in experiencing their aging. In the interim, relevant professionals should concentrate on developing selfconfidence because it is more beneficial for successful aging than giving older persons merely materialistic help and information by viewing them as simple recipients of social care. In order to enable older adults see their value as independent, capable individuals, pertinent policies should be put in place. Supporting older persons in a way that demonstrates genuine interest in, knowledge of, and acceptance of them while making positive judgments about them can be one of the most effective techniques. It is difficult to develop an extended familycentered social support system because nuclear households are increasingly common. When older adults receive interventions, it is recommended that they be encouraged to participate with their spouse or that the programs should concentrate on strengthening the marital relationship if the partner is available because studies have amply shown that a supportive relationship with a spouse has a positive influence on successful aging both mentally and physically. A strategy for boosting self-esteem should also be built and nurtured, as should various forms of emotional support involving friends, communities, organizations, and experts.

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