

The Difficulties in Social Communication of Elderly People in Romania

Georgeta STOICA-MARCU

*Associate Professor, PhD, Universitatea Ovidius from Constanța, Romania,
daniella_gsm@yahoo.com*

ABSTRACT: Communication in social processes means that all the social phenomenon also imply a social communication process, whether it is about a relationship, interaction, exchange, exerting power, control or influence by the communities, by groups, by structures, or by social functions. In our case, the elderly are a social category very vulnerable people with many social communication problems. The social communication disorder can result in many problems for elderly people, including difficulty participating in social settings. Social structures are stabilized interactions, in which communication processes intercede directly and sometimes decisively, formatively or destructively; as such, you can say that communication is a cultural and socio-communicational ensemble (Stoica-Marcu 2013, 128). The social communication difficulty includes difficulty in interacting with family, friends other people around them and social isolation in the different moments of social necessity.

KEYWORDS: communication, communication processes, social communication, elderly people

Introduction

"Essential in the aging process is its dependence on time," said Dr. Postelnicu Dimitrie (1984, 26). "The organism ages with time in all its components: senescence is a complex phenomenon, which results from a whole series of processes that take place in the body" (Albu 1984). Aging (Gusioc 1984, 26) must be studied and understood not only through synthetic optics, as a widespread biological phenomenon, but also from an analytical point of view, through its impact on the different "mechanisms" (morphofunctional systems) of the organism. It is also necessary for the fact that aging does not occur as quickly in all systems, it is asynchronous, this asynchronism being conditioned by several general and individual factors and intervening differently not only chronologically but also quantitatively and qualitatively.

Content

The study of aging at the level of various systems is also a condition of understanding the particularities and diversity of the pathology that accompanies aging, this way of approaching the problem being a necessary way to affirm at the level of different medical specialties the geriatric aspects and the geriatric interpretation of these specialties both from a nosological point of view and from a prophylactic and therapeutic point of view.

According to Law 17/2000, art. 1 para. 4, the elderly are the persons who have reached the retirement age established by law, this is the definition of the elderly person (Law no. 17/2000). The notion of aging designates, first of all, an individual phenomenon, that of the incidence of age, in its biological and psychological dimensions on the individual, from his

birth to death (Bălașa 2006, 79). Due to the phenomenon of population aging, there is a constant and rapid growth of the elderly population, the socio-economic consequences of this phenomenon affecting our country.

The aging of Europe's population is gradually increasing and Eurostat data warns that a reduction in the annual "potential growth" of European GDP could be achieved, from the current 2-2.5% to 1.5% in 2025, until to 1.25% in 2040. According to a 2005 European Commission study, "the ratio of the population under the age of 15 to the age of 65, on the one hand, and the population between the ages of 14 and 64, on the other hand, it has gone from 49% in 2005 to 66% in 2030. In particular, in the period 2005-2050, the number of people in the 55-65 age group (older workers) will increase by 8.7%, while the number of individuals included in the age group 65-79 (the elderly) will reach 44%, and the number of very old people (at least 80%) will increase by a percentage of 18% (European Parliament 2008). Relevant factors are a low birth rate, a progressive increase in life expectancy and an increasing number of people over the age of 65, in the context of that post-war generation called the baby boom that will increase the number of elderly people.

According to studies by the Italian National Institute of Statistics in Europe (2021), people under the age of 65 were 20.5% in 2010, 23.3% in 2020 and will be 27% in 2030, and in 2050 the percentage will be 33.6% (<https://www.tuttitalia.it/statistiche>). Japan will have over 1,000,000 longevity over 100 years by 2050. Old age is the condition that characterizes a particular age group, that of people over 60 (Fontaine 2008). Larousse's dictionary of psychiatry (1993) defines old age as the last period of life, corresponding to the normal result of senescence. Senescence is the term used as a synonym for aging, and senility is the term used as a synonym for pathological aging.

Old age cannot be precisely defined, as this concept does not have the same connotation in all societies. In many parts of the world, people are considered old as a result of certain changes in their activity or social role, such as when someone becomes a grandfather, or when due to aging, a person is forced to perform different tasks or slow down thing.

In general, the age of 65 is associated with the onset of old age. In the world, the number of people over the age of 65 is growing strongly, mainly in developing countries. This situation is a positive symbol of increasing the quality of life, but at the same time it creates a series of demands and problems to be addressed in order to avoid serious socio-economic consequences in the future (Bătrân 2021).

Marta Roxana Mureșan stated - and rightly so - that lately, as a result of the increase in life expectancy and more and more complex problems faced by national economies, the aging of the population is a social problem particularly important. The correlation with the tendencies of the demographic processes and the forecasts for the next decades increase the reasons for concern and require finding solutions to preserve, at least, some conditions of dignity for the years of old age (Mureșan 2012, 1).

According to a 2016 study, approximately 1.5 million elderly people in Romania are affected by loneliness (Onofrei 2016). It is expected that in the future there will be a slow decline in population due to the negative natural increase, for this reason Romania is expected to have 16 million inhabitants or less in 2050, in other words an aging and aging population with each passing year as the statistics below show. This is not just about us. The situation is equally critical in Russia and Japan.

Psychosocial aspects specific to the elderly

Aging is not a state, but a process of gradual and differential degradation, it is a set of phenomena, which occur as a result of the end of the development phase and which involve changes from a biological and psychological point of view. However, the aging process manifests itself differently, the individualization being determined by: the degree of autonomy; physical degradation; psychological degradation; emotional and mental state; the

possibility of behaving, such as involvement in community life, how to cope with the loss of social roles due to the death of acquaintances and life partner, how to adapt to new social roles (Bătrân 2010, 40).

Morpho- and psycho-physiological changes, which characterize the aging process, lead directly or through their consequences to profound changes in the social relationships of the elderly individual, both in intra-family relationships and in his general social relationships.

Family solidarity relationships can be affected somewhat by material difficulties, by the wrong mentality of the family group regarding the duties towards the elderly, by a selfish attitude of adults, or by a feeling of embarrassment, helplessness, in the case of the elderly with severe disabilities.

Many of the conflicts of a multi-generational family, with a negative effect on the health status of the elderly could be avoided if the family in question had a proper education, a mentality favorable to the situation of the elderly. Solidarity is better preserved, the rural type family, better preserving the roles and statutes of the elderly in the family. This is because, in general, the family relationships of those living in urban areas are degraded, by a precarious financial situation, by the fact that the elderly often have to live with adult children in a small apartment, they are affected by urbanization and industrialization.

Once the elderly person retires from professional activity, there is a restriction and a loss of previous responsibilities, which leads the elderly to focus on his relationships with his family, in the opinion of Bogdan (1992, 297). The aging process, including the main issues involved in each stage of the process and psychological and social theories on aging, provides considerable space for deepening the needs of older people, as well as social policies for the protection of the elderly.

One of the most significant indicators in terms of the quality of life of the elderly is the state of health. It is obvious that once an elderly person is in poor health, they run the risk of losing their autonomy. There are people who reach very old age with a high degree of autonomy precisely because they maintain their health, but health is influenced by a complex of factors, which is why both individuals and family and society have a duty to ensure quality life (and not only in old age, but from a young age) (Mureșan 2012, 19).

In the opinion of the author Marta Roxana Mureșan, the differences between the elderly in terms of health status, level of schooling, degree of professional training or lifestyle contribute to the inhomogeneous group image. The deficient classification of the elderly in an age category, being assigned to them the roles of active adults but also of passive, useless people who have nothing to give in exchange, makes it difficult to substantiate a budget or social policies that make it possible development of social assistance services adapted to the needs of the elderly, especially since there are no studies and records on income, habitat conditions, resources in the formal system at the local level, as well as the degree of involvement in the informal environment (Mureșan 2012, 15).

Europe's population is experiencing rapid change. The good news is that Europeans are living healthier and longer lives. Thanks to decades of peace, health insurance, medical progress and better living and working conditions, people are now enjoying a longer and more active pension in greater numbers. Life expectancy has increased tremendously.

In the case of men, the average life expectancy, which in the 1900s was 43 years, is expected to reach 82 in 2050. In the case of women, the life expectancy, which was 46 years, is expected to increase to 87 years in 2050. Most of the children who will be born in Europe from now until 2025 will live 100 years. At the same time, healthy life expectancy and access to health services continue to vary considerably from one income group to another and from one region to another.

Longevity will have a profound impact on public policies and social services, beyond the health and care sector, starting with the education system and reaching the need for housing and mobility services adapted to the elderly. An aging population can be a source of

new jobs, resulting in the rapid development of the social economy sector, whether it is recreation or care. However, it also creates new requirements that must be met. Today we already see that almost one in three people over the age of 65 live alone and that no less than two in three people over the age of 75 depend on informal care, usually provided by their closest relatives. One in six older people lives in poverty, with women at risk of low pensions being older women who have not worked long enough, according to the European Commission's report on the White Paper (European Commission 2017).

In general, the aging of the population also brings up the issue of equality between generations. There is currently a real risk of a gap between the younger and older generations, which is reflected in the decision-making process, welfare, material security and access to housing, but also in the distribution of the financial and budgetary burden of to an aging company is shown in the same report (European Commission 2017).

The situation is worrying even if our elderly people will reach 100 years in the near future - as the statistics show, how many of our young people today remain in the country for contributions to the Romanian pension system ?!

The elderly benefit from Law no. 17/2000 with subsequent amendments regulating their access to social and medical assistance services. The national social assistance system was initially described by Law no. 705/2001 and redefined according to Law no. 47/2006, which established the organization, functioning and financing based on the European principles of social assistance in order to promote the process of social inclusion.

Currently, the national social assistance system, regulated by Law no. 292/2011 - Law on social assistance, is defined as the set of institutions, measures and actions by which the state, represented by central and local public administration authorities, as well as civil society intervene to prevent, limit or eliminate the temporary or permanent effects of situations that may generate marginalization or social exclusion of the individual, family, groups or communities. This long-awaited law overturned a lot of outdated ordinances that were not adapted to EU law. According to the general framework of active aging in the EU, Romania considers that the main elements of the concept are: 1) longer and healthier life; 2) increasing the level of employment at older ages; 3) increasing the social and political participation of elderly groups; 4) decreasing the dependence of the elderly; 5) improving long-term care services (Social Worker 2018, 6).

In Romania, as in other EU countries, care for the elderly has a special role. The elderly are protected by the legislation in force through a series of social protection measures. In the situation of the elderly person alone or whose family cannot provide, in part or in full, its care and maintenance, the state intervenes by providing social assistance benefits and social services appropriate to the strictly individual needs of the elderly person. Morpho- and psycho-physiological changes, which characterize the aging process, lead directly or through their consequences to profound changes in the social relationships of the elderly individual, both in intra-family relationships and in his general social relationships. Family solidarity relationships can be somewhat affected by material difficulties, by the wrong mentality of the family group regarding duties towards the elderly, a selfish attitude of adults, or a feeling of embarrassment, helplessness, in the case of the elderly with severe disabilities.

Many of the conflicts of a family with several generations, with a negative effect on the health of the elderly could be avoided if the family in question had a proper education, a mentality favorable to the situation of the elderly.

In general, families no longer respect the previous status of the elderly, this leading to the loneliness of the elderly, to his isolation. It is observed that in the rural environment, the ties, intra-family, solidarity are better preserved, the rural family, better preserving the roles and statutes of the elderly in the family. This is because, in general, the family relationships of those living in urban areas are degraded, by a precarious financial situation, by the fact that the elderly often have to live with children and adults in a small apartment, they are affected

STOICA-MARCU: *The Difficulties in Social Communication of Elderly People*

by urbanization and industrialization. Once the elderly person retires from professional activity, there is a restriction and a loss of previous responsibilities, which leads the elderly to focus on his relationships with the family (Bogdan 1992, 297). The time that families give to people Dependent, which they have in the family, can often involve giving up work or other activities, including leisure.

Conclusion

Dr. Constantin Bogdan draws attention to the current trend of the Romanian family, especially those in urban areas, to force the institutionalization of the elderly, due to restricted living conditions, the impossibility of permanent supervision of the elderly with mental disabilities, but also due to thoughts of children or grandchildren who do not agree that death, illness, disability and with them old age are part of life. Often, one of the family members leaves the job to provide the necessary care for the dependent elderly person; most carers are the spouses of dependent elderly people, their own state of health can be altered, while carers of younger ages often experience symptoms of severe depression. In addition, home care services provided by family members do not amount to the quality of services provided by professionals trained in the field.

References

- Albu, Ion. 1984. *Biologia și vârsta [Biology and age]*. Cited in Gusioc Vladimir-Iuliu/ *Biologia vîrstelor și lupta împotriva bătrâneții [The biology of ages and the fight against old age]*. Bucharest: Stiinta pentru toti Publishing House.
- Bălașa, Ana. 2006. *Revista de asistență socială [Social Work Review]* no 2-3. Bucharest: Polirom Publishing House.
- Bătrân, Dorin. 2010. "Îmbătrânirea, un proces ireversibil" [Aging, an irreversible process]. *The Public Administration and Social Policies Review*, Year I, No. 3 / June 2010, Arad.
- Bogdan, Constantin. 1992. *Elemente de geriatrie practică [Elements of practical geriatrics]*. Bucharest: Medical Publishing House.
- European Commission 2017. "White paper on the future of Europe." http://publications.europa.eu/resource/cellar/397b6165-71ac-11e7-b2f201aa75ed71a1.0007.01/DOC_1, accesat la data de 28.09.2021.
- European Parliament. 2008. *Demographic deficit in Europe*. <https://www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//TEXT+IM-PRESS+20080414FCS26499+0+DOC+XML+V0//RO>. accessed on September 28, 2021.
- Fontaine, Roger. 2008. *Psihologia îmbătrânirii [The psychology of aging]*. Iași: Polirom Publishing House.
- Gusioc, Vladimir-Iuliu. 1984. *Biologia vîrstelor și lupta împotriva bătrâneții c*. Bucharest: Stiinta pentru toti Publishing House.
- Italian National Institute of Statistics in Europe. 2021. "Statistiche demografiche." <https://www.tuttitalia.it/statistiche/> accessed on September 28, 2021.
- Larousse Dictionary of Psychology (ed. in romanian). 1993. Bucharest: Universul Enciclopedic Publishing House.
- Legea no 17/2000 on social assistance for the elderly, republished in 2007 in the Official Gazette, Part I no. 157 of March 6, 2007. http://www.dreptonline.ro/monitorul_oficial/monitor_oficial.php?id_monitor=327, accessed on September 28, 2021.
- Mureșan, Marta-Roxana. 2012. *Vârsta a treia între autonomie și vulnerabilitate [The Third Age Between Autonomy and Vulnerability]*. In PhD Thesis Summary. Cluj Napoca: Universitatea Babeș-Bolya. https://doctorat.ubbcluj.ro/sustinerea_publica/rezumat/2012/sociologie/muresan_marta_roxana_ro.pdf.
- Onofrei, Nicoleta. 2016. "România, o țară a bătrânilor singuri. Tinerii nu iau legătura cu bunicii nici măcar o dată pe săptămână, chiar dacă au fost crescuți de aceștia" [Romania, a country of lonely old people. Young people do not contact their grandparents even once a week, even if they were raised by them]. https://adevarul.ro/news/societate/romania-tara-batranilor-singuri-tinerii-nu-iau-legatura-bunicii-macar-data-saptamana-fost-crescuti-acestia-1_57e9319e5ab6550cb8030242/index.html, accessed on September 28, 2021.
- Postelnicu, Dimitrie. 1984. Cited in Gusioc Vladimir-Iuliu, *Biologia vîrstelor și lupta împotriva bătrâneții [The biology of ages and the fight against old age]*. Bucharest: Publishing House Știința pentru toți.

- Social Worker. 2018. "Social assistance." *The Ministry of Labour and Social Protection of Romania*. http://www.mmuncii.ro/j33/images/Documente/Legislatie/Asistentia-sociala-2018/HG_566_2015_la_18-01-2018.pdf, accessed on September 29, 2021.
- Stoica-Marcu, Georgeta. 2013. "Communication in the social processes." In *Studies on literature, discourse and multicultural dialogue*. Târgu Mureş: Arhipieleag Publishing House XXI, p.128 https://issuu.com/iulian63/docs/ldmd_1_-_communication_and_pr, accessed on September 10, 2021.
- Wikipedia. 2021. *Batranete [Old Age]*. <https://ro.wikipedia.org/wiki/Bătrânețe>, accessed on September 28, 2021.