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## Study of the Quality of Life of the Older Generation: a Regional Experience\*



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**Abstract.** The increase in life expectancy in Russia along with low fertility has led to the fact that the age structure of the population has undergone significant changes: the proportion of children in the total population was continuously reducing, while the share of people over 60 was growing. Such transformations have multiple impacts, ranging from the issues of financial provision of pension systems, functioning of the labor market to the change in the value orientations of society. The growth of socio-demographic groups of elderly people leads to the fact that it is becoming increasingly important for the socio-economic development of territories, thus facilitating research in the field of studying its

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resource potential and quality of life. The paper is devoted to the study of components of a “subjective” quality of life of the specified group of the population. The authors present conceptual approaches to the problem of an “ageing” society and specifics of studying the quality of life of the elderly. The paper substantiates the importance of sociological assessments in the study of issues typical of the elderly. The authors show the place of Russia in the international ranking of the Global AgeWatch Index and its position for all the four particular indices. Based on the findings of a sociological study, the authors highlight major problem areas that hinder the improvement of the quality of life of the elderly population, and put forward possible ways to level them. The paper considers the main normative legal acts that regulate the activities of federal and regional authorities in ensuring the decent quality of life of this socio-demographic group. The authors discuss several social projects (taking the Vologda Oblast as an example) that aim to improve the living conditions of the elderly, highlight the problems associated with the implementation and scientific substantiation of the relevance of these projects. The conclusion is made concerning the necessity of constant monitoring of the quality of life of the older generation at the regional level that, with proper management approach and accounting in strategic planning, will provide effective regulation of socio-economic development of territories in the context of population ageing.

**Key words:** quality of life, the elderly, secondary socialization, monitoring research.

The transformation of the demographic structure in Russia and in some developed countries is due to population ageing. The increase in the proportion of the elderly inevitably involves change in the social space, increasing the burden on the working population, and aggravating financial problems of the pension system. Society and economy will have to adapt to the changes: first, it concerns the attitude of society toward the elderly in general (“the concept of old age”), toward their role and place in society and economy, and second, it concerns institutional and infrastructural transformations that implement the principles of the society of equal opportunities for this socio-demographic group.

Population ageing is a global process, which nevertheless has significant territorial differences. Somewhere this demographic phenomenon emerged quite a long time ago and was of a moderate nature (in the countries of continental and Northern Europe), in other places the rates of increase in the proportion of older people were more rapid (Eastern Europe and Russia), in some regions this process has not yet begun (African countries located to the south of the Sahara). The values of major factors of population ageing such as fertility, mortality and migration can differ radically. Anyway, differences in the development of the process of population ageing have a definite impact on economic and social policy related to older citizens in the local area.

Even within one region of Russia, not all areas are homogeneous in socio-economic and demographic terms. The major cities of the Vologda Oblast such as Vologda and Cherepovets differ in many ways from its other municipal formations (hereinafter – MF) not only in population but also its age structure, fertility and mortality, migration, etc. For example, the proportion of older people in Vashkinsky District is 11 percentage points higher than in Vologda (29 and 18%). Accordingly, a system of activities carried out in each MF to implement the policy in relation to the elderly may differ both quantitatively and qualitatively, which affects the choice of instruments and mechanisms in achieving common goals and objectives.

Thus, the aim of the present paper is to study the quality of life of older people (within the framework of the sociological approach) and to analyze the demographic policy in the field of its provision.

#### **Conceptual approaches to the problem of an “ageing society” and the quality of life of the elderly**

The problem of rapid population ageing at a global scale is widely discussed at the highest level since the second half of the 20th century. However, still there exist opposing views regarding the manifestations and consequences of this process, which range from the recognition of population ageing as a worldwide achievement that opens new prospects in all spheres of life of

society to hypotheses about the exceptionally destructive nature of the process.

A famous French demographer Alfred Sauvy in his book “Théorie générale de la population” describes the ageing process as the most measurable, most consistent in its development, most adapted to forecasting, and most severe in its consequences [15]. Drawing an analogy with the ageing of an individual, we can say for sure that society, just like this individual, will change its “appearance” and values, although it is still not clear in what form it will be manifested. Thus, Polish demographer Edward Rosset was one of the first to point out the fact that society affected by population ageing is prone to innovation not only of a demographic nature, but also social, economic, political and psychological innovation [11]. It should be noted that both scientists were rather cautious in their statements concerning the possible consequences of demographic ageing.

There exist some opinions that are more elaborated. In 1996, a famous American economist L. Thurow in the book “The Future of Capitalism: How Today’s Economic Forces Shape Tomorrow’s World” noted that for the first time in the history, in society, there would emerge very large groups of economically inactive older people, who would continue to receive most of their income from the state and increase the already high cost of social security [27]. In his opinion, they burden the welfare

of the state, undermine the financial component, and threaten the investments that all societies need to make to ensure their future.

Thurow is right in pointing out that now the government is required to pay more attention to the problem of the elderly. There is an unspoken social contract, according to which parents care about their children and the society (the collective taxpayer) will take care of the parents. But the number of older people is increasing, which leads to an increase in the burden on the able-bodied members of society. However, Thurow did not consider an important feature: the achievements of modern medicine not only affect the overall growth of a person's life expectancy, but also his/her ability to prolong labor activity.

There is another issue, which can conditionally be called "generation gap". The findings of a research conducted in the late 1990s by American scientists K. Edwards and J. Wetzler are a telling example of this [22]. They argue that young people consider the elderly as a potential threat, they feel anxiety toward them, which is caused by those factors that accompany ageing (weakness, fatigue, possible physical disability). Edwards and Wetzler confirmed this hypothesis by their research, and they believed that the perception of the elderly as the threat was being overcome and the anxiety of the young was reduced if young people initially perceive themselves as part

of the group to which the elderly also belong and to which the young will belong to in the future.

Sociology and social gerontology consider several comprehensive theories of ageing, the main figure of which is an elderly individual and his/her role in public life (*Tab. 1*) [1; 13; 21; 23].

These theories affect the issue of adaptation of elderly people who have to readjust themselves under the conditions of institutional transformations. In fact, we are talking about secondary socialization. After "retirement", the circle of contacts narrows, former social roles disappear, economic activity reduces considerably. This is largely due to changes in the system of motivation of an individual throughout his/her life. Scientific papers published before the 1990s often point out that society shows disrespect for old age. An especially large amount of research is devoted to the negative stereotyping of the elderly, the phenomenon of ageism. All these factors lead to the fact that the threshold of retirement becomes an invisible barrier that splits the society. In this case, we can speak of "old age" as a conditional subculture that is based on the sense of community of older people and a gradual distancing from other social groups.

In the context of the above, the quality of life is becoming increasingly important for the formation of a humanistic social policy in connection with the need to adapt to new conditions of life in old age [4].

Table 1. Sociological theories of ageing society and the role of the elderly person in it

Name of a theory	Authors	Essence
Disengagement theory	E. Cumming, W. Henry, M.D. Aleksandrova	The gap between the individual and society takes place shortly after retirement, the elderly person mechanically continues to maintain old ties, inquires what is going on at work. The amount of information he/she receives is reducing, the range of his/her interests is narrowing, and the activity is falling.
Activity theory	M. Maddox	The main aspect is a positive relationship between the level of activity and life satisfaction. Activity theory suggests that older people should be involved in the life of society, this should mean that the more active people are, the more satisfied they are.
“Ageism”	R. Butler, M. Meade, L. Feuer, J. Mandel, D. Gutman, K. Victor, I.S. Kon	The concepts of social discrimination and rejection of people of older age groups by younger age groups.
Subculture of ageing theory	A. Rose	The theory assumes that discrimination against older persons and their sense of community give rise to the subculture of old age. In practical terms, A. Rose proposed to create villages, residential houses, residential care facilities for seniors.
Happy old age model	M. Baltes	Built on the idea of filling in the losses in old age by positive selection processes, compensation and optimization.
Socioemotional selectivity theory	L. Carstensen	The theory considers the relationship between the changes in terms of narrowing social contacts throughout life as a result of changes in the motivation system.

The concept of “quality of life” is usually used to characterize how fortunate the situation in life is for certain individuals as members of a particular social group. In the 1970s, a concept of a “binary” quality of life was developed: it deals with the objective and subjective quality of life [20]. This was the beginning of a still dominant understanding of the psychological component (personal perception) only as people’s subjective evaluation of their quality of life in general or some of its aspects [5]. The criteria for objective assessment of the quality of life are found in existing standards related to people’s needs and interests, according to which one can objectively estimate the

degree of satisfaction of these needs and interests. In this case, the following criteria are assessed: financial welfare of an individual (standard of living), state of health, living conditions, family situation, etc. From the theoretical viewpoint, the “quality of life” means that each person in the course of his/her life acquires his/her own life experience; therefore, different people assess the quality of their life in different ways. At that, the concept of “quality of life” as a whole is or its individual sectors are often associated with the concepts of “happiness” and “life satisfaction” [5]. In the present paper we will adhere to the following definitions: the quality of life is a sociological concept that

refers to a set of necessary and sufficient conditions for the realization of subjectively determined decent human life in a society [10]. It operates within the concept of social inclusion of the elderly and other categories of the population, the concept of society of equal opportunities, without denying the existence of subjectivity in the assessment and perception of “well-being” of life.

#### **Sociological approach to the evaluation of the quality of life of the elderly**

The world practice of research into the subjective side of the quality of life confirms the importance of using sociological methods. For example, the study of the quality of life using the SF-36 questionnaire is a universally adopted, highly informative, sensitive and economical method for assessing the health status of the population as a whole and that of individual social groups. The method provides the quantitative assessment of human life – the physical, psychological and social functioning of an individual [9].

Russian scientists E.V. Davydova, A.A. Davydov, M.N. Alferova, V.P. Babintsev, A.A. Belov, A.A. Garmashev, S.V. Zainchkovskaya, M.S. Salimov, etc. consider it necessary to combine the objective and subjective methods (particularly sociological) in measuring the quality of life. Sociological research methods allow us to evaluate important aspects of how people assess their own well-being (e.g., self-assessment of their health, relationships

with others, values, etc.) that complement and compensate for the objective indicators of the quality of life.

The results of the study of individual aspects of the quality of life of older people can be found in the works of the World Health Organization [28], the United Nations Department of Economic and Social Affairs [29]. One of the most informative and scientifically sound is a global study Global AgeWatch Index and its accompanying ranking of countries by quality of life and well-being of older people [25]. The index is calculated according to the method of an international non-governmental organization HelpAge International on the basis of statistical data and results of surveys obtained from national institutions and international organizations, and accumulated in the United Nations Population Fund (UNFPA).

The ranking is based on a statistical analysis of 13 indicators of the quality of life and well-being of the elderly in four main domains:

1. Income security (assesses people's access to a sufficient amount of income, and the capacity to use it independently, in order to meet basic needs in older age). Includes the coverage of pension income, poverty rate in old age relative welfare of older people and GDP per capita.
2. Health status. Includes health, life expectancy after 60 and the psychological well-being.

3. Capability. Includes the level of employment, level of education and duration of active life after 60 years.

4. Enabling environment (older people want to have the freedom of choice to live an independent life). Includes social connectedness, safety, civic freedom and access to public transport.

According to the Global AgeWatch Index, in 2015, Switzerland (90.1 points) was the best country for the elderly (*Tab. 2*). The top ten included South European countries (Norway, Sweden, Iceland)

and the countries of continental Europe (Germany, the Netherlands), Canada, USA, UK and Japan. The data presented in the table indicate that the quality of life of the elderly in the European Union, and other developed countries is much higher than, for instance, in the BRICS countries.

Russia was on the 65th place in this ranking with a score of 41.8 points. And it is worth mentioning that there were positive changes in the index of the quality of life of older people: in 2013, Russia ranked 78th (30.8 points). It is noteworthy that there is

Table 2. Global AgeWatch Index rankings and values on the whole and for individual indicators, 2015

Country		Rank and value		Income security		Health status		Capability		Enabling environment	
		Rank	Value	Rank	Value	Rank	Value	Rank	Value	Rank	Value
Leaders	Switzerland	1	90.1	27	77.3	2	81.3	2	75.0	1	83.7
	Norway	2	89.3	2	89.4	16	73.5	1	76.3	4	80.1
	Sweden	3	84.4	7	83.5	12	75.2	5	65.6	6	79.4
	Germany	4	84.3	15	80.9	11	75.6	3	68.4	11	78.6
	Canada	5	84.0	10	82.9	4	80.3	10	61.2	9	78.9
	Netherlands	6	83.0	5	85.9	13	74.8	12	59.6	5	79.6
	Iceland	7	81.8	4	86.6	8	78.2	18	54.5	10	78.8
	Japan	8	80.8	33	75.1	1	83.9	7	62.7	21	75.0
	USA	9	79.3	29	76.3	25	70.1	4	65.7	17	76.8
	UK	10	79.2	14	81.5	27	69.3	20	53.6	3	81.8
	...										
BRICS countries	China	52	48.7	75	39.2	58	46.5	39	37.8	28	71.8
	Brazil	56	46.2	13	81.5	43	57.4	58	29.9	87	54.6
	<b>Russia</b>	<b>65</b>	<b>41.8</b>	<b>30</b>	<b>76.2</b>	<b>86(!)</b>	<b>27.1</b>	<b>25</b>	<b>48.4</b>	<b>82(!)</b>	<b>55.5</b>
	India	71	37.9	72	45.9	87	27.0	55	30.1	52	65.3
	South Africa	78	35.0	19	79.5	89	25.9	69	25.9	83	55.0
	...										
Outsiders	Mozambique	94	4.5	84	22.8	94	18.9	94	4.5	96	45.1
	Malawi	95	4.1	96	5.6	95	18.8	84	19.0	94	48.4
	Afghanistan	96	3.6	83	23.3	96	7.1	91	12.1	95	47.0

Source: Global AgeWatch Index. Available at: [www.helppage.org/global-agewatch/](http://www.helppage.org/global-agewatch/)

a significant differentiation of places that Russia occupies in the rankings according to private indices. For instance, if by the level of income security of the elderly it ranks 30th and is at about the same level as the US, Japan and Switzerland, the by health status it ranks only 86th, i.e. belongs to the group of the least developed countries. According to the Global AgeWatch Index, Russia has a high level of education and employment of the elderly (25th position), but the enabling environment is estimated as being very low (82nd place).

Thus, the results of the research conducted by HelpAge International help identify the main issues in the quality of life of older people in modern Russia:

- poor health;
- adverse social environment.

Let us pay attention to the fact that the status of pensioner as the person who no longer works predetermines with a high probability his/her low financial security [3]. For example, according to the data for 2014, the replacement ratio (the ratio of the size of the pension to average wage) in Russia amounted only to 36% (in the U.S. – 90.5%, in Switzerland – 56%) [18]. The high position of Russia in the ranking of the Global AgeWatch Index at the level of financial security is due to the fact that the Russian legislation allows for the opportunity to continue employment and receive pension benefits at the same time. The need for additional earnings is one of the reasons that compel older people to

continue to work after they have retired: in 1997–2012, the share of working old-age pensioners in Russia increased from 25.5 to 37.7%, respectively [12]. A higher level of education of “new” pensioners is also a significant factor in the growth of labor activity among retirement age people. However, in the vast majority of cases, the level of financial security of the elderly becomes lower, and cross-country differences are determined only by the magnitude of this reduction.

The purpose of the present paper is to study two other important components in the quality of life of older generation, namely, health and a supportive social environment. Considering the second criterion, we focus on the study of the structure of social ties as one of the most important elements of subjective well-being of older people [6]. Both components have a direct impact on the possibility of continuing employment (which, consequently, leads to an increase in the purchasing power of the elderly and an increase in pension capital) and social activity of older persons.

Given the importance of using sociological methods in studying the quality of life, the Institute of Socio-Economic Development of Territories of RAS conducted a research into the quality of life of older people in the Vologda Oblast in 2015. The survey was conducted with the use of the questionnaire survey, the quota sampling by gender and age, with the proportional distribution of the units

of observation (*Tab. 3*). Sample size was 1,500 people over the age of 50, sampling error did not exceed 5%. The questionnaire consisted of eight blocks of questions to assess different aspects of the quality of life of older people, including their health status, system of values and social relations.

The block of questions aimed to identify the respondents' satisfaction with their health status was formed on the basis of the standard SF-36 questionnaire. Domestic and foreign studies indicate a link between life satisfaction and high self-rated health: physical health significantly predicts satisfaction with the quality of life [16]. The data obtained during the survey indicate that only 22% of the respondents rated their health as "excellent" and "good" (*Tab. 4*).

As people get older, the percentage of positive ratings concerning the state of their health significantly reduces: from 35% in the population approaching retirement age (50–59 years old) to 5.5% in people over the age of 70.

Although the average life expectancy in women at retirement age is much higher, they are more pessimistic in their assessments of their health status than men are (the share of answers "mediocre" and "very poor" is 18 and 29%, respectively). As experts assume, the reasons why women assess their health as being poor include not only social and psychological factors, but also a much wider prevalence of chronic diseases in women than in men, which also has a significant negative impact on the quality of life and

Table 3. Distribution of respondents by gender, age and place of residence, persons

	Men, years					Women, years					Total
	50-54	55-59	60-64	65-69	70 and older	50-54	55-59	60-64	65-69	70 and older	
<b>Vologda Oblast</b>	<b>155</b>	<b>148</b>	<b>116</b>	<b>54</b>	<b>108</b>	<b>183</b>	<b>192</b>	<b>165</b>	<b>85</b>	<b>294</b>	<b>1500</b>
Vologda	32	31	27	13	22	45	48	41	22	62	343
Cherepovets	36	32	25	13	27	47	46	41	23	70	360
<b>Districts</b>	<b>87</b>	<b>85</b>	<b>64</b>	<b>28</b>	<b>59</b>	<b>91</b>	<b>98</b>	<b>83</b>	<b>40</b>	<b>162</b>	<b>797</b>
Including city	28	29	23	10	19	34	39	34	16	56	288
village	59	56	41	18	40	57	59	49	24	106	509

Table 4. Distribution of answers to the question: "How would you assess your health?", %

Answer option	Total	Sex		Age, years				
		Men	Women	50-54	55-59	60-64	65-69	70 and older
Excellent	<b>1.5</b>	2.4	1.0	3.8	1.2	1.7	0.0	0.3
Good	<b>20.7</b>	26.4	16.9	36.7	29.5	15.0	13.4	5.2
Mediocre	<b>53.7</b>	50.0	56.0	47.2	52.9	64.1	59.9	50.0
Poor	<b>16.3</b>	12.7	18.7	6.4	8.7	10.5	17.6	36.1
It is difficult to answer	<b>7.8</b>	8.5	7.4	5.8	7.8	8.7	9.2	8.4

the formation of assessments of their own health, despite relatively high indicators of life expectancy [16]. In turn, men over the age of 60 are much more susceptible to cardiovascular diseases than women in the same age category [19].

Women see a doctor more often than men: one woman in five among those polled goes to a medical institution not less than once a month, while among men – only one in ten does. Probably one of the reasons for

the greater duration of the period of survival in retirement age for women is their greater medical activity, which allows them to take timely measures to prevent disease and preserve health.

The questionnaire asked to assess the truth of some statements regarding the health status of respondents. Thus, according to one in five people among those aged over 50 (20%), he/she is more susceptible to disease compared to others (*Tab. 5*). Women

Table 5. Distribution of answers to the question: "To what degree is each of the following statements right or wrong in relation to you?", %

Answer option	Total	Men	Women
<i>I think I am more susceptible to disease than other people</i>			
Definitely right	<b>3.7</b>	2.9	4.2
Mostly right	<b>16.7</b>	15.1	17.7
I don't know	<b>45.7</b>	45.6	45.7
Mostly wrong	<b>22.9</b>	23.6	22.4
Definitely wrong	<b>11.1</b>	12.9	10.0
<i>My health is not worse than that in the majority of my acquaintances</i>			
Definitely right	<b>8.8</b>	10.5	7.7
Mostly right	<b>36.4</b>	34.2	37.8
I don't know	<b>41.1</b>	40.8	41.3
Mostly wrong	<b>10.4</b>	10.8	10.1
Definitely wrong	<b>3.3</b>	3.6	3.1
<i>I expect my health to deteriorate</i>			
Definitely right	<b>1.6</b>	1.7	1.5
Mostly right	<b>16.9</b>	14.7	18.4
I don't know	<b>57.5</b>	56.4	58.2
Mostly wrong	<b>16.5</b>	18.1	15.4
Definitely wrong	<b>7.5</b>	9.0	6.5
<i>My health is excellent</i>			
Definitely right	<b>2.9</b>	4.2	2.0
Mostly right	<b>18.3</b>	22.5	15.6
I don't know	<b>37.7</b>	38.6	37.1
Mostly wrong	<b>25.7</b>	22.9	27.5
Definitely wrong	<b>15.4</b>	11.7	17.8

agree with this statement more often than men (22 and 18%, respectively). With the increase in age, the share of people who consider themselves to have more illnesses than others also increases: the proportion is 12% in the group of persons aged 50–54, and the proportion is 29% in the group of those older than 70. About half of the respondents (45%) agree with the statement that their health is not worse than in the majority of their acquaintances, and one in five people (21%) believes that in general his/her health can be called excellent. When speculating about the future state of their health, 18.5% of the respondents expect that it will deteriorate. And here women are also slightly more pessimistic than men (20 and 16%, respectively).

Two-thirds of the older people who participated in the survey (66%) point out that occasionally their physical and emotional state prevents them from active communications with others, visits to relatives, etc. This again confirms the fact that poor health of older generation represents a significant limiting factor in the process of communication with even the nearest environment, and this has a negative impact on social relations and, in extreme cases, can cause desocialization.

The system of cultural and moral values developed in the old people's environment is an important factor influencing the subjective quality of life of the elderly. Thus, a monitoring survey of public opinion conducted by ISEDT RAS in 2014 that

applied the value survey developed by Milton Rokeach has shown that the values of older residents of the Vologda Oblast differ little from the values of other socio-demographic groups (*Tab. 6*). Good health, material prosperity, happy family life and the presence of loyal friends – these are the specific terminal values that are most important according to most respondents. Significant age difference acts less importance for the elderly. This is because for most people in retirement the value of leisure prevails over the desire to continue working, which is probably due to the quality of working life, labor activity (for example, high levels of stress, violation of the regime of work and rest, not by vocation, professional burnout, etc.).

In the system of abstract values of older people the first place is occupied by wisdom, which is reflected in the maturity of judgment when making important decisions. Higher places in comparison with the values of the population of the region as a whole are occupied by altruistic (care about other people's happiness) and aesthetic (contemplation of the beauty of nature and art) values. Worldly wisdom and an altruistic orientation serve as a base for one of the most important functions of the social group of older people – the transfer of life experience to younger generations. This function is carried out mainly in the family circle. Nuclearization of family relations that becomes more and more widespread in Russia reduces the possibility

Table 6. The system of values of population of the Vologda oblast according to the method of M. Rokeach, 2014

TERMINAL VALUES	Average for the Vologda Oblast		Older people	
	Average score	Rank	Average score	Rank
Concrete (ranked according to the average score for the Vologda Oblast)				
Health (physical and mental well-being)	4.36	1	4.30	1
A comfortable life (a prosperous life)	4.35	2	4.20	2
Family security (taking care of loved ones)	4.31	3	4.03	3
True friendship (close companionship)	4.08	4	3.87	4
Interesting job	3.72	5	3.12	8
A sense of accomplishment (lasting contribution)	3.68	6	3.38	5
Social recognition (respect and admiration)	3.62	7	3.32	6
An exciting life (a stimulating, active life)	3.56	8	3.30	7
Pleasure (an enjoyable, leisurely life)	3.45	9	3.01	9
Abstract (ranked according to the average score for the Vologda Oblast)				
Mature love (sexual and spiritual intimacy)	3.96	1	3.63	2
Inner harmony (freedom from inner conflict)	3.88	2	3.61	3
Wisdom (a mature understanding of life)	3.82	3	3.80	1
Freedom (independence, free choice)	3.70	4	3.42	6
Development (self-cultivation, continuous physical and mental improvement)	3.62	5	3.41	7
Happiness of others (well-being, development of other people and population in general)	3.62	6	3.52	4
Cognition (an opportunity to expand one's education, outlook, culture intellectual development)	3.61	7	3.40	8
A world of beauty (beauty of nature and arts)	3.51	8	3.47	5
Creativity (possibility to engage in creative activity)	3.29	9	3.04	9
Source: ISEDТ RAS public opinion monitoring data, October 2014.				

of communication between relatives, which is a risk factor for loneliness and desocialization of the elderly [14].

Communication processes and social relationships are the most important factors in the secondary socialization of the elderly. According to the survey, in general, older people are satisfied with relations in family and with friends (67%). However, the older a person gets, the lower the level of his/her satisfaction. The reason is that when an

individual grows old, the circle of contacts narrows considerably, and many older people are faced with the problem of loneliness. The results of a study of the quality of life of older people in 2015 show that 9% of the respondents consider themselves lonely, a little more than 40% of the respondents occasionally feel lonely (*Tab. 7*). There is a growing number of lone residents: if at the age of 50–59 this share is 11%, then at the age of 60–69 it is 22%. The next and most

Table 7. Distribution of answers to the question: "How often do you feel lonely", %

Answer option	Total	Sex		Age, years				
		Men	Women	50-54	55-59	60-64	65-69	70 and older
Constantly	9.1	6.3	10.9	5.2	4.6	8.0	9.9	17.0
Sometimes	40.7	35.9	43.7	35.9	42.5	44.3	44.4	39.3
Virtually never	36.8	40.2	34.6	43.7	39.0	35.5	34.5	30.4
It is difficult to answer	13.5	17.6	10.8	15.2	13.9	12.2	11.3	13.4

significant increase is observed in people aged over 70, when this indicator increases to 37%. And this happens more often among women, because in the majority of elderly couples men pass away before their female partners. According to foreign studies [26], married people, regardless of age, assess the level of their well-being higher than unmarried ones [24]. The issue of loneliness is to the greatest extent common among two polar age groups: adolescents and the elderly. Moreover, adolescents are faced with this phenomenon even more often than the elderly; however, its causes differ for these two groups [17]. For instance, in adolescence, the emergence of feelings of loneliness is more often caused by personal characteristics of an individual and his/her behavior, while in old age this problem falls into the category of social issues caused by the breakdown of previous social relationships, as well as the stereotyping of the socio-demographic group of older people.

Loneliness among the elderly is mostly a system-wide phenomenon emerging under the action of an invisible barrier that conditionally divides human life into periods "before retirement" and "after retirement". Thus, an increased importance is attached

to the existence of regular communication and maintaining intergenerational ties. Our survey shows that pensioners socialize mostly with their neighbors and children (39.5 and 31% of the respondents noted that it is possible to communicate with them every day). One-fifth of the respondents (21%) communicate daily with their grandchildren. Older people communicate more seldom with their other relatives (about 3.5% of retirees do it every day), friends (7%) and work colleagues (10%). From this we can conclude that social contacts of pensioners are mostly limited to their immediate environment (immediate family members and neighbors), and this is where their main social ties manifest.

Another factor that has a rather significant impact on how the elderly perceive their well-being is their confidence that they can still be useful to society. More than one third of the respondents (36%) think they are not of any use to the state and society, and only 28% think otherwise. However, with regard to their family, about 78.5% of the elderly point out their usefulness. More than half of the respondents (54%) believe that they do good to their friends, colleagues and neighbors.

On the whole, the study confirms the relevance of many of the issues concerning the quality of life of the elderly (low assessment of their own health, loneliness, breaking social ties). The combination of these phenomena has a negative impact on how the elderly perceive their environment and their own well-being, and in some cases it can evoke the feelings of “uselessness” and frustration. The authorities should direct their efforts to the solution of these problems through the development and implementation of the measures, among which the priority ones, in our opinion, are as follows:

1. Improvement of the system and principles of providing social services to the elderly with the aim of ensuring decent living conditions and better health. It is necessary to focus on the promotion of ideas of health-preserving (self-protective) behavior among people [7]. We believe that this direction can be successfully implemented if the federal and regional levels adopt the concept for active longevity, the purpose of which includes the formation of personal responsibility for one’s own health, and the acquisition of knowledge and skills for a long and active life.

2. Development of effective and less expensive ways of working with older people. In the conditions when their number increases continuously, the expenditure part of the federal and regional budgets on many items will also increase (including social services expenditures). In this case,

one of the ways to improve the functioning of the social service system can be a gradual transition to in-home elderly care. Support within the family and family relations are crucial for older people; therefore, government support can be directed toward strengthening family relationships. It is necessary to consider the possibility of introducing preferences for people who care for their elderly relatives: for example, providing flexible working arrangements or financial compensation of a part of potential earnings.

3. Establishment of favorable conditions for the secondary socialization of the elderly, which will shorten considerably the period of adaptation of pensioners to new conditions. These measures should be implemented through the establishment of communication between older people and other age groups (both at the level of the whole society and at the family level) in order to prevent social and cultural “gaps” between them. This function can be performed by cultural and leisure centers for the elderly; these institutions, as shown by a successful experience of such an institution in the city of Vologda (“Care” center), promote re-socialization of the elderly and help them maintain their active lifestyle.

4. Introduction of training in gerontology for the professionals who work with older people: health workers, teachers, specialists in the reactionary sphere and the sphere of leisure. Working with older

people requires appropriate skills and should aim to support emotional well-being for the prevention and control of loneliness, identity, social relations and participation in social life.

Regional and municipal authorities bear the main functional load in the sphere of formation of specific areas and programs of demographic policy and allocation of available resources for its implementation. The most important function is to adopt strategic documents taking into account the specifics of the municipality.

#### **Shaping social policy in the interests of the elderly in an ageing population**

The increase in the intensity of demographic ageing and the decline in the working-age population in Russia cause a growing concern in the ruling circles. Socio-economic policy in these conditions should simultaneously aim to maintain a decent standard of living and quality of life of older persons and create conditions for the implementation of the resource potential of this population.

In this regard, according to the Decree of the President of the Russian Federation Vladimir Putin, in 2015, the Ministry of Labor developed a draft “Strategy of actions in the interests of elderly citizens until 2025”, which aims to define the principles, objectives and priorities of the state policy with regard to the older generation. The strategy is a document of the federal level, the main goal of which is to create a unified system of measures recommended for

implementation in the regions. In turn, when regional authorities develop the measures, they should take into account the specifics of the concrete subject of the Russian Federation, its economic, social, cultural, geographical, religious and other distinctive features.

The main areas of governmental social policy with regard to the elderly are reflected in the orders of the President of the Russian Federation that he gave after the meeting of the Presidium of the State Council of the Russian Federation (the List of instructions of the President of the Russian Federation “About the development of the system for social protection of senior citizens” dated August 5, 2014 No. PR-2159). They concern the application of the differentiated approach to the definition of the forms of social support for the elderly, to the development of modern forms of social services and alternative forms of care, to the development of conditions for leisure activities for the elderly, computer training, development of the social services market. These tasks are implemented in the region through the activities under the state program “Social support of the Vologda Oblast citizens for 2014–2018” and strategic plans and programs of the Department for Social Protection of the Vologda Oblast population.

The issues concerning the quality of life of older people remain a subject of discussion of the Vologda public. For instance, on April 1, 2016 in Vologda, a round table

“Active generation: solving tasks – changing lives!” was held on the basis of the “Foundation for support of civil initiatives” in the framework of the charity program “Active generation” (sponsored by Elena and Gennady Timchenko Foundation). The event presented the results of the program in 2015, and the projects that received support from the Fund and that are being implemented on the territory of the Vologda Oblast:

- “Psychological assistance in overcoming grief and bereavement in the elderly” (Vologda);
- “Organization of safe activity for older people”. The booklet “Home alone” and “Social courier” (town of Totma);
- “Mobile veterinary clinic” (Vologda Oblast);
- “Theatre studio “Neunyvai-ka (stay positive)” (Cherepovets);
- “Creating a comfortable environment for the residents and the disabled elderly in the Monastery of St. Nilus of Sora” (Kirillovsky District).

It is difficult to overestimate the importance of all these projects in working with elderly population in the Vologda Oblast. But several problems still exist. Although the project organizers initially do not attempt to cover the maximum possible number of people, the scale of the activities appears to be low. Probably, one of the reasons is the lack of funding (the amount of grant funds allocated varies in the range from 50 to 100 thousand rubles), which prevents

the expansion of the coverage. However, the most important problem, in our view, is to substantiate the projects scientifically. The whole system of programs should be based on the results of scientific research that identify and reveal priority issues in the quality of life of older people. Programs and projects to improve the living conditions of the elderly implemented on the territory of the Vologda Oblast aim to solve the problems identified, in particular, in the course of the studies conducted at ISEDT RAS. Nevertheless, some of them have not been addressed. For example, promoting the employment of elderly population. ISEDT RAS research held in 2015 shows that one in five unemployed pensioners in Vologda (20%) is willing to undertake any kind of work, if such an offer arrives. It is impossible to ignore the fact that 13% of the interviewed elderly people encounter age discrimination in employment [2]. Of course, employment is first and foremost the object of attention of regional authorities. But the business community and non-profit organizations (NPOs) may also have a significant effect on the change in the situation (e.g. introduction of customized jobs for the elderly; introduction of a system of internships for pensioners with the right of conclusion of the employment contract, etc.). In our opinion, when developing a project, the priority should be given to a comprehensive analysis in the area under consideration, which, however, requires an information base.

In order to identify the problems of the elderly on time, it is necessary to carry out a constant monitoring of the quality of their lives.

The most famous studies that monitor the standard of living and quality of life are the “Russian monitoring of economic situation and population health at the NRU HSE” (conducted since 1992), “Parents and children, men and women in a family and society” (was conducted by the Independent Institute for Social Policy in 2004–2011), monitoring studies carried out by VtSIOM and others.

Following the meeting of the Presidium of the State Council of the Russian Federation (the List of instructions of the President of the Russian Federation “About the provision of a comprehensive monitoring of the socio-economic situation of the elderly, including the identification and consideration of all older people in need of social services” dated November 27, 2010 No. Pr-3464GS, i. 2), the executive authorities of constituent entities of the Russian Federation were instructed to carry out a monitoring of the standard of living and quality of life of older people and adopt measures based on the results obtained that would help raise their standard of living. However, such studies targeted directly at the problem of the quality of life in this socio-demographic group, are not numerous. All the studies are carried out at the regional level and are often non-recurrent. Examples of such studies are the

Study of the socio-economic situation of elderly citizens in the Sverdlovsk Oblast (carried out in 2012 by the Ural Institute for Social Education (branch) of the Russian State Social University in Yekaterinburg), and the “Comprehensive monitoring of the socio-economic position of older people in the Samara Oblast (carried out in 2012 by Business Group Ltd. upon the order of the Ministry for Social-Demographic Development of the Samara Oblast).

One of the most elaborated research, from a scientific point of view, is the “Comprehensive monitoring of the standard of living and quality of life of elderly citizens of the city of Moscow” conducted in 2011 by the Institute for Retraining and Advanced Training of Managers and Specialists in the Social Protection System of the City of Moscow (GAU IPK DSZN) according to the instruction of the Department for Social Protection of the City of Moscow. It meets the social monitoring requirements such as appropriateness, continuity, periodicity, comparability, objectivity, predictability, and considers objective and subjective indicators that characterize and the quality of life of older residents.

At the same time, the data to be collected and the choice of the spheres of life to be surveyed basically depend on the current system and the forms of statistical observation and do not fully conform to the recommendations of the Health Ministry of Russia. The procedure of collecting data and reporting the monitoring data is not uniform

and it is determined by the normative documents of the executive bodies of Russian Federation subjects. Due to this fact, it is necessary to work out a common form for monitoring studies to create the conditions for a comparative analysis across all regions of the Russian Federation.

In our opinion, the experience of monitoring studies at ISED T RAS and its study “Quality of life of the elderly in the Vologda Oblast” create all the necessary conditions for the formation of long-term monitoring of the quality of life of older people in the region. The results of the monitoring will help, first, trace the dynamics of change in old people’s assessments of their quality of life; second, evaluate the effectiveness of activities held in the Vologda Oblast and aimed to improve the living conditions of senior citizens; third, set out strategic directions in the sphere of regulating the socio-economic development of the region in the conditions of population ageing.

In conclusion we should point out that population ageing is not just a demographic process reflected in the increasing proportion of older people, but it is a phenomenon that causes structural change in practically all the spheres of public life. The concept of “ageing society” implies a change in the socio-cultural paradigm, the revision of the attitude toward the elderly as a disadvantaged group. In the context of demographic ageing, the resource potential of this part of the population becomes

a critical aspect of sustainable socio-economic development of territories. In this connection, of special importance is the study of the problems of the quality of life in this socio-demographic group. The studies that have been conducted, including those based on subjective assessments given by older people themselves, confirm the relevance of many of the issues typical of old age, such as: poor health condition, “breaking” social ties, and a feeling of loneliness. Together, these phenomena build the very “invisible barrier” that separates older people from the rest of society and divides life into “before” and “after” retirement. In most cases, the consequence is a further decline in physical and social activity of older people, which certainly is an obstacle to the implementation of their resource potential. The solution to the above problems should be a priority for federal, regional and municipal authorities responsible for improving the quality of life of older citizens. The choice of directions and measures to improve the policy in relation to the elderly should be based on the data of the monitoring studies of the quality of life of older generation, and this is what the majority of Russia’s regions, including the Vologda Oblast, lack. In general, it should be noted that the region is experiencing positive change in the sphere of work with older people: the normative-legal base is being improved, new projects are being developed. In our opinion, in the future, regional authorities, socially

responsible businesses and NPOs need to focus on the promotion of employment of the retirement age people, because this

socio-demographic group has huge resource potential, which, unfortunately, has not yet been disclosed.

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