



Factors that affect the quality of life of the retiree

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ABSTRACT

Retirement involves a major restructuring of the functions that define the space of a person's life and, therefore, requires flexibility and adaptability to the new conditions. "Retirement can be seen as a transition that involves the extension, redefinition and change of roles. The extension of the time for retirement, it is an event that will allow a temporary process and that requires making decisions, implementing and carrying the consequences". The centrality of work in relation to other elements, such as the family, in the definition of self-awareness is very different from one person to another, which implies that the transition to retirement may require different levels of self-restructuring.

The pre-retirement preparation stage coincides with a progressive clarification of attitudes about retirement and a planning of the time and manner of retirement from working life. At the time of retirement, the plans are more detailed, but the attitude tends to degenerate into anxiety and despair over the loss of their work activity. Of course, the retirement preparation phase has a different personal meaning depending on the individual history and the centrality of the work activity performed. Retirement means the loss of social contacts, but the degree of loss is still unclear, both in terms of the extension of the social network, as well as the quality of support received. Social support should be considered to distinguish the different sources

(family, friends, etc.) and the different types of social support (emotional, instrumental, etc.) that affect the quality of life of the retiree considering the aspect of the physical activity, health, education, food, intellectual activity, psychosocial activity among other factors or important aspects in the retiree.

INTRODUCTION

It is recognized that with the advancement of the age at which the labor departure occurs, the social network system in which the person is tends to change. According to the theory of social support of Kahn and Antonucci (1980), during the life cycle the individual must abandon different activities, which involve different social relationships. From a subjective point of view, according to the authors, social networks can be divided into three concentric circles that are characterized by proximity and degree of trust with an individual: in the inner circle are the people closest to the subject (for example , parents, spouse, children, etc.), while in the middle circle there are people with whom the subject shows a fairly deep relationship, whether they are friends, relatives or co-workers; finally, in the outer circle are the acquaintances, with whom the person relates superficially at work or leisure. The transition to retirement implies the adjustment of the social network to the second and third circle, and the relationships that characterize the person's close circle remain generally more stable (Aranda & Pando, 2013)

1. STAGES PRIOR TO RETIREMENT

Human Aging

Biological process by which living beings grow old, which involves a series of structural and functional changes that appear over time and are not a consequence of diseases or accidents. "Aging is a gradual process of degradation of the human organism." (Marinero, 2015)

Aging or senescence is the set of morphological and physiological modifications that appear as a consequence of the action of time on living beings, which implies a decrease in the ability to adapt in each of the organs, devices and systems, as well as the responsiveness to the harmful agents that affect the individual. (Marinero, 2015)

Stages of human aging

The ears and large noses of old humans are sometimes attributed to the continuous growth of cartilage, although the most likely cause is gravity. (Marinero, 2015).

Although the external characteristics of aging vary depending on the genes, and from one person to another, some general characteristics of human aging can be cited: (Marinero, 2015).

- Sleep disturbance.

- Loss of agility and reflex reaction capacity.
- Degenerative joint diseases.
- Appearance of cognitive disorders.
- Loss of the ability to associate ideas.
- Increased distension of muscle support tissues due to the effect of terrestrial gravity (breast drop in women, loss of muscle tone).
- Progressive loss of muscle strength and vitality.
- Increase in blood pressure.
- Increase, in men, of prostate volume, with cancer risk.
- Decrease in immune responses.
- Reduction of skin collagen, appearance of wrinkles and sagging.
- Progressive loss of the senses of taste, hearing and vision.
- Progressive loss of libido, andropause in men, menopause in women.

Decrease in work capacity

Work capacity “a mechanism that allows to determine the percentage of affectation of the set of abilities, skills, aptitudes and / or potentials of physical, mental and social order, which allow the individual to perform in a habitual work” (Marinero, 2015).

The qualification of the loss of work capacity is a right that every person in the retirement process has and that have an impact on the quality of life and to the extent that constitutes the means to access the guarantee and protection of other fundamental rights such as health, social security and the minimum vital, since it allows establishing what kind of benefits the retiree is entitled to and who suffers from an illness or suffers an accident, whether of work origin or common risk.

The regulations governing the issue of occupational hazards provide that when an accident or occupational disease occurs (previously mentioned occupational accident and illness), the retiree has the right to receive the corresponding health services, as well as the economic benefits that may take place in accordance with the consequences of the illness or accident, such as temporary disabilities, temporary disability benefits, partial permanent disability or disability pension depending on the severity of the loss of work capacity. It also provides such regulations that, in case of death, the beneficiaries of the affiliate can claim the survivor’s pension and the funeral aid. Well, to establish whether an individual has the right to recognition of any of the

aforementioned welfare or financial benefits, the qualification of the loss of work capacity is required. (Prevent, 2017)

Work stress

Stress is defined as a physiological reaction of the organism to a situation that the person perceives as threatening; It is an automatic response necessary for survival. When this natural response appears in excess, there is an overload of tension that affects the whole organism, and causes the appearance of diseases and health disorders that prevent the normal development and functioning of the human body.

Work-related stress is described as a series of physical and psychological reactions that occur when workers must face occupational demands, which do not correspond to their knowledge, skills or abilities. The worker's reactions to stress can include physiological, emotional, cognitive and behavioral responses: (Requeiro, 2019).

- Physiological reactions: increased heart rate, blood pressure and muscle tension, sweating, increased production and secretion of adrenaline, and shallower breathing more frequently.
- Emotional reactions: fear, irritability. Depressive mood, anxiety, anger and decreased motivation.
- Cognitive reactions: decreased attention, reduced perception field, forgetfulness, less effective thoughts, reduced ability to solve problems and learning.
- Behavioral reactions: decreased productivity, increased consumption of cigarettes, drugs and alcohol, making mistakes...

What produces stress?

The stressor in the work environment is an aspect that the worker perceives as harmful and chronic, feeling it as a 'threat' that triggers a set of physiological and psychological reactions. In general, labor stressors could be divided into four categories: (Requeiro, 2019).

- Physical work environment and contents of the position held.
- Task performance, interpersonal relationships and career development.
- New technologies and other organizational aspects.
- Work-family relationships (both aspects do not combine).

The professionals most likely to be stressed by work are empathic, sensitive, 'human' people, with excessive professional dedication, idealists, altruists, obsessive, enthusiastic, prone

to coronary heart disease and cardiovascular disorders, and likely to identify excessively with the rest. (Botica, 2018).

Psychological changes in the human being

Throughout lives many events occur that we are not always prepared to assume or do not know how to do it and that, consequently, cause us various alterations and excessive suffering. On many occasions, when difficulties arise, it is when we realize that something is preventing us from reaching our goals and objectives, but we have been dragging a form of behavior that harms us for some time. Sometimes we are absent while life passes around us and we feel like the emptiness takes hold of our interior and we no longer know who we are, then comes the tiredness, sadness or anxiety that overwhelms us.

Human beings go through a series of psychological changes in every sense of the word, since one day we can be well and the next day bad, we are dissatisfied with life and with everything it gives us. But psychological changes occur in a strange way, depending on the environment in which we live or the different types of people around us, how they treat us, the way others see us; but we must also have a self-control, know how to act and know how to handle the different situations that arise, and if we already have a serious problem that we cannot control, we must put ourselves in control with the doctor so that he can follow up and help us solve the problem.

In life we have to learn to differentiate the good from the bad, also learn to value what we have and really know who we are, what we want from life and what we can expect from it. If we are not prepared to face it in our retirement process, we feel helpless and this causes serious disorders in our lives and affects our loved ones in some way. That is why it is important to share with our close relatives some aspects that bother us, that affect us and that are necessary to express in family or with close friends to de-stress and to carry out our lives the best way.

2. RETIREMENT AS A PROCESS

Retirement, as it is understood, is a process that begins before the age of 60, before the moment of exit from the labor market, and that lasts until that moment, with different phases that we could fundamentally characterize from the concepts of anticipatory socialization in the pre-retirement phase, of coping at the time of retirement and the different phases of adaptation through which the retiree passes.

Is retirement the gateway to old age?

Historically both concepts and situations have been closely related. The beginning of old age was the cause in part of retirement and its justification: the workforce for tasks based on physical effort had lost capacity over the years and the proximity of old age, so it was dispensed with of it, giving way to young people to that labor market. (Leturia, 1998)

Over the years, the improvement of living conditions, working conditions and health care, has determined an increase in longevity and life expectancy, of 75 and 85 years respectively for men and women in Western societies.

The immediate consequence of this phenomenon implies a large increase in the population over 65 years of age, which also presents a better health and psychosocial situation, also due to the benefits of the self-described «welfare state».

Nowadays, retirement is not getting old, since in most cases these people still have several years, up to ten or fifteen, in which they can present excellent socio-sanitary characteristics, being from that moment when they appear «Stigmas» of old age. Thus a category of «old young people» appears to be differentiated from the «old old men». (Leturia, 1998)

3. QUALITY OF LIFE

How does the quality of life affect the retiree?

It is especially problematic for some retirement preparation programs to be more prepared for old age than for the change in employment status, because the socio-cognitive effect for its participants. (Mendizabal Limon, 2017)

We all have an idea of what quality of life can be. We all know how we would like to live, what we would like to have, in what kind of places to live, what health to have. We can say that there is an idea, a vulgar, popular perception of the concept that we intend to define.

The quality of life designates the conditions in which a person lives that make their existence pleasant and worth living, or fill it with affliction. It is an extremely subjective concept and closely linked to the society in which the individual exists and develops. (Mendizabal Limon, 2017)

According to the World Health Organization (WHO), the quality of life is:

The perception that an individual has of its place in the existence, in the context of the culture and the value system in which the person lives and in relation to its objectives, expectations, norms, and restlessness. It is a very broad concept that is complexly influenced by the physical health of the subject, its psychological state and level of independence, social relations, as well as its relationship with the essential elements of its environment.

The term leads us to a proposal of human well-being, not only based on economic indicators, but we must also consider the distribution of wealth, income and the evaluation of different areas of human life to determine how well people live .

It is not only necessary to know what I have, but how I live with what I have, how capable I am of conceiving and leading my life, knowing about the possibilities and opinions of work,

legal and political rights and duties, knowing what freedoms I have, how family and gender relations are structured. (Rodriguez, Castillo, Terol, & Carmen, 2014)

The quality of life of an individual as the «global relationship established between positive stimuli (favorable, pleasant ...) and negative stimuli (adverse, unpleasant ...) in the course of its social life, in its interrelationships with the other people in the community and with the total environment in which the individual lives, that is, in the exercise of social values». The basic areas would be: functional capacity, social functions, intellectual functions, emotional state and economic situation. (Leturia, 1998).

Among the factors that influence the elderly to have a greater or lesser feeling of well-being, we can highlight the health, both perceived and objective, the lifestyles, the realization of plans towards the future, the achievement styles, the social support, depression and some sociodemographic factors.

Life satisfaction is an indicator of psychological well-being. Vital satisfaction is understood as the assessment or response of a cognitive type that people make on their own lives, or what is the same, the global assessment of their own existence based on the comparison between aspirations and achievements. Satisfaction is greater when achievements approach aspirations and decrease when they move away. (Leturia, 1998).

Lifestyle

It is impossible to talk about lifestyle without framing it within the concept of way of life, since both determine the way in which man develops within society and his relationship with the health-disease process. Both concepts, mode and lifestyle, begin to be the object of medical sciences in the second half of the twentieth century, from the moment when the concept of health is resized, therefore, the concepts of health determinants are also resized. (Vives, 2007)

The different age groups in which life cycle periods are distributed are not watertight compartments that have remained immovable throughout history and between different civilizations and cultures. Rather, they have been subject to great elasticity, surrounding themselves with attributions and segments in accordance with the circumstances and interests of each type of social organization and at any given time. Each historical period has had a specific significance and requirements for each age.

Thus, for example, the prototypical values of youth, traditionally estimated as mere transit or learning for a later adult life, have become an autonomous value, capable of prestige with its single imprint -as a kind of King Midas again- to the rest of the ages. And on the reverse path, old age, previously considered a source of prestige and wisdom, is stigmatized in its specific traditional values, oriented in the same way by that imprint of collective juvenilization.

A determining factor in this process has been the increase in longevity or life expectancy, as well as in its qualitative conditions, leading to an extension of youthful age.

By lifestyle we mean, in a generic way, those cognitive, affective-emotional and behavioral patterns that show some consistency over time, under more or less consistent conditions and that can become risk or safety factors, depending on their nature. (Vives, 2007)

Benefits of physical activity in the elderly

The benefits of physical activity for the elderly population are summarized at the physiological level, in a favorable effect on the following human body systems: cardiovascular, skeletal, respiratory and endocrine. We can affirm that, exercise reduces the risk of premature death, the risk of cardiovascular diseases, hypertension, colon cancer and diabetes mellitus, among other benefits. In addition, the regular practice of physical activity seems to decrease the incidence of depression and anxiety, improving mood and ability to perform daily tasks throughout the life cycle. (Martinez & Andujar, 2009)

We can summarize the benefits of physical activity in older people, in the following aspects:

Increases VO₂ Max (Maximum oxygen consumption or aerobic capacity), improving their functional capacity and reducing fatigue in the activities of daily life: walking, climbing Stairs, going shopping.

It lowers blood pressure (or normalizes it, if applicable), due to the opening of capillaries less peripheral resistance - achieving elasticity in the arteries, and facilitating the loss of sodium and chlorine from sweat.

It causes a reduction in resting heart rate, and better perfusion plus oxygen to the heart muscle, which reduces the incidence of myocardial infarctions.

Improvement of respiratory capacity by increasing vital capacity, “pulmonary” elasticity, strength in the respiratory muscles, which favors the evolution of respiratory disorders typical of aging. Decreased total cholesterol, triglycerides and LDL cholesterol (“bad”) and increased HDL cholesterol (“good”), which prevents and improves arteriosclerosis. (Martinez & Andujar, 2009)

PERSONAL REFLECTION

In relation to the retirement stage that is the subject of this article, that is, the retirement preparation phase, this study has produced some interesting results that I want to share.

In anticipation of a voluntary retirement, the abandonment of work is seen as an opportunity to recover time, to cultivate the interests and social relationships sacrificed by the

commitments that had been acquired in the course of life both in the labor as well as in the personal aspect.

This study shows the effect of anxiety about the loss of social identity, due to the abandonment of the social function of companies and the forecast of the effects of adjustment to the retirement age, prefiguration in which you wish to retire, which confirms the effect of the decisions related to retirement, whether it is time or not, whether a person is prepared or not, or whether is the time or not.

The effect of an important resource such as social support, regarding the establishment of expectations for retirement, in particular, the regulation of anxiety before withdrawal is assessed. Regarding social assistance received from sources in the workplace, retirement planning can be included among the variables related to the world of work. The results of this study highlight the important role played by the support provided by the superior: in fact, this is crucial to motivate participation in their work, but, unlike what is supposed, it also shows a direct effect on the size of anxiety about the loss of social identity due to retirement.

There is an important contribution of the family in the regulation of the level of anxiety for retirement. In particular, the support of family members seems to reduce the fear of loss of social identity, since the family is a fundamental link in support of the retiree or pensioner in aspects related to understanding, new standard of living and family environment with affection, esteem and basic moral values in the development of the human being and necessary in life, once the decision to retire or retire is taken.

It is important to highlight that the family plays an important role in the life of the retiree, especially when an old age is reached, due to the loss of strength or possible diseases that overwhelm them and that it is necessary to support them in a longer time and in person with careful attention to walk them, talk, take care of their medicine, spend some time in recreation, perform some exercises in company and find a way to live in family gatherings that allow the retired or elderly feel important and identified with their values as an adult with a lot of respect.

Another very important element is the unconditional support of friends of the same age and some young people who like to share stories, experiences and experiences of the long life carried out by the retiree through afternoon meetings in public and comfortable places, in favorable environments to talk without noise, or risks of being run over or that jeopardize their integrity as a senior citizen, in addition to being able to read a book or article of great interest that allows them to spend time and feed other colleagues from the elderly or the family circle.

Another interesting aspect is that the retiree according to his or her economic possibilities can visit some places inside the country or outside the country to satisfy itself improve his

quality of life and then share with close friends, relatives about that new lived experience that will stimulate others who will retire and therefore old age.

BIBLIOGRAPHY

- Aranda, C., & Pando, M. (2013). Conceptualización del apoyo social y las redes de apoyo social. *IIPSI- Facultad de Psicología, Guadalajara, México*.
- Botica, I. F. (16 de Diciembre de 2018). Fundación del Corazón.com. Retrieved from *Fundación del Corazón.com*: <https://Fundación del corazón.com>
- Chieza, R. &. (2008). Prepararse para la jubilación: el papel del apoyo social de la gestión de la ansiedad. *Revista de psicología del trabajo y de las organizaciones*.
- Leturia, A. F. (1998). Jubilación y calidad de vida. *Esp. Geriatr Gerontol*.
- Marinero, Z. E. (12 de Septiembre de 2015). *www. Envejecimiento Humano*. Retrieved from *www. Envejecimiento Humano*: <https://www.wikipedia.org>.
- Martinez, M. L., & Andujar, C. A. (2009). Condición física y salud: Un modelo didáctico de sesión para personas mayores. *Revista Internacional de medicina y ciencias de la actividad física y el deporte*.
- Prevenir, c. (5 de Mayo de 2017). *prevenir.com.es*. Retrieved from *prevenir.com.es*: <http://www.prevenir.com.es>
- Requeiro, A. M. (9 de Julio de 2019). *www. uma.es*. Retrieved from *www.uma.es*: <https://www.uma.es>
- Rodríguez, M. J., Castillo, G. y., Terol, J. A., & Carmen, M. (2014). *Calidad de Vida. Bibliomedia Editores*.
- Vives, I. A. (2007). *Estilo de Vida Saludable: Puntos de vista para una opción actual y necesaria. Policlínico docente mártires de calabazar*.