ORIGINAL ARTICLE

PSYCHOLOGICAL FEATURES OF MODERN ELDERLY PEOPLE'S ACTIVE LIFE POSITION

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ABSTRACT

The aim: The research is devoted to the analysis of theoretical and empirical determinants of formation of structural components of an active life position of modern elderly people.

Materials and methods: Psychodiagnostic techniques were selected as tools for data collection. Experiment participants were people aged 65-72 years old (total number – 78 people). Data processing was done by means of the computer program SPSS 21.0.

Results: The psychological features of the formation of elderly people's active life position were determined by the fact that more than 50% of respondents had an average level of cognitive development, more than 60% demonstrated a low level of emotional-volitional component and more than 50% were at medium level of motivational-behavioural component. Most respondents' high level of cognitive component development does not correlate with a high level of emotional-volitional component development. The leading role in the formation of elderly people's active life position is played by the motivational-behavioural component.

Conclusions: Based on the theoretical and empirical research of the issue of formation of elderly people's active life position, three structural components of the phenomenon under study were identified: cognitive, emotional-volitional and motivational-behavioural. The results of the experiment suggest that most respondents had medium-low levels of active life position. The main determinant of the elderly people's reduced vitality is their low level of emotional-volitional component development. The research outcomes allowed us to track the dependence of the level of active life position on the motivational-behavioral component.

KEY WORDS: active life position, elderly people, cognitive component, emotional-volitional component, motivational-behavioural component

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INTRODUCTION

The era of computerization, digitalization, technologization, flexibilization is rapidly changing the modern world. Due to various circumstances elderly people are not always able to master information and communication technology. It causes their insecurity and uncertainty, which negatively affects the perception of reality and reduces vitality, facilitates the phenomenon of rumination, stimulates a kind of protest against innovation. As a result, a number of elderly people are characterized by a rejection of personal significance, regret for unrealized life projects, denial and rejection of the fact of transition to a new age category. The process of adaptation to new conditions of functioning and life creation is being complicated. That is why one of the priorities of social policy in Ukraine is the development of effective measures, aimed at the development of elderly people's positive personal attitude to a new social role. Today, there appear new challenges, related to the situation of COVID-19, forced quarantine measures, which lead to the emergence of elderly people's emotional depression, it also slows down their own rhythm of activity. So, the issue of the formation of elderly people's active life position becomes relevant. It is necessary to identify the psychological features of the formation of this phenomenon, determine the degree of its development and research its leading structural components. Numerous modern studies show that the elderly population is characterized by significant diversity. The policy of states should be aimed at creating conditions for people to achieve a positive trajectory of aging, to destroy obstacles that limit the continuation of social participation and contribution of older people, and to use innovative methods of work (World health organization) [1].

THE AIM

The subject of research is elderly people's active life position. Scope of research: psychological features of elderly people's active life position. The aim of research is a theoretical and empirical study of the formation of structural

components of modern elderly people's active life position. ***Objectives of research***: 1) to identify and substantiate levels and indicators of the formation of elderly people's active life position; 2) to record the findings, analyze them and draw conclusions on the psychological features of the development of elderly people's active life position and the degree of its structural components formation.

MATERIALS AND METHODS

Theoretical framework of methodology. According to the classification of the World Health Organization, in our research the elderly people category includes individuals aged 60-75 years old. In order to identify the main problems and the most acceptable ways to organize a work with the elderly people, it is necessary to characterize this age group's socio-psychological features. Most authors (Bobrovska, Bowling, Stephens, Breheny, & Mansvelt) believe that chronological age, which often serves as a criterion for an old age, does not directly affect a person's physical functioning and mental abilities. It depends on a number of factors: lifestyle and standard of living; work and rest conditions; family situation; personal attitude to age changes (Krasnova & Liders) [2, 3, 4, 5]. It happens quite often that psychological "portrait" of an elderly person has negative characteristics. In the intellectual sphere there is a decrease in sensitivity, weakening of the level of short-term and strengthening of long-term memory, slowing of cognitive operations, etc. In the emotional-volitional sphere there is a decrease in determination and purposefulness and an increase in self-doubt. There appear strong uncontrolled emotional reactions, dissatisfaction with themselves and others, fear for their own health and tomorrow, etc. [6]. In elderly people's motivational-behavioural sphere there is an intensification of such traits as pettiness, stinginess, pedantry, irritability, conservatism, lack of initiative, adaptive rigidity to changing or unpredictable situations, helplessness, etc. All these changes are individual, but in case of an active life, some people may not experience them at all, or these changes may be minimal and situational. Cognitive abilities and interests often depend on a person's inner mood, desire for self-development, social well-being.

The results of theoretical analysis allowed us to identify *the components* of the elderly people's active life position, in particular:

1) cognitive component – the emergence and degree of stability of elderly people's cognitive needs, their intellectual abilities, ability to analyze and realistically evaluate their own actions and deeds;

2) emotional-volitional component – the experience of identity, self-esteem of their individual abilities, characteristics and positive self-attitude;

3) motivational-behavioural component – the external side of personal activity, elderly people's ability to be guided by their own goals, motives, attitudes, principles, beliefs, ability to resist the influence of the external environment, predict their own behavioural actions, and function as a full human being.

The degree of formation of elderly people's active life position was identified in accordance with the following ***levels and indicators***:

- *high level* – a stable cognitive interest that arises regardless of external circumstances and requirements; awareness and acceptance of elderly people's own positive and negative sides; striving for independence, activity, achieving the desired, overcoming difficulties in achieving their own goals, which leads to a high life product. These people are flexible in their adaption to changing environmental conditions.
- *medium level* – cognitive interest arises situationally, personal interests are unstable, criticality is manifested selectively, empathy – situationally; activity requires an external stimulus and depends on the positive assessment of others; while solving problematic life situations these people are guided by the motivation to avoid failure and choose trivial ways. They experience difficulties to accept the changes, taking place in the environment, it is difficult for them to adapt to these changes.
- *low level* – insignificant manifestations of cognitive interest, stereotyped thinking, inability to generate ideas, dependence on evaluative judgments of others, criticism and empathy are at a low level, lack of ability to independently plan one's own actions, activity is manifested only in the initial stages of algorithmic actions. They are unable to adapt to the changing conditions of social life.

Study sample are described. The selection of participants of the empirical research on elderly people's active life position was carried out with the participation of members of public organizations, caring for the elderly people, and volunteers. Demographic information about participants was collected by self-report and included data on age, gender, years of study, marital status. The group of respondents included only those who did not have any significant psychiatric or physical illnesses, who received more than 26 points on the assessment of cognitive function according to the MoCA test.

Experiment participants were people aged 65-72 years old (total number – 78 people), marital status – 2/3 of respondents were married, the rest – single, divorced and widowed. The participation of respondents was voluntary. They did not receive any financial donations, but got free psychological counselling from practicing psychologists. The data collection was carried out by trained volunteers, students of the Faculty of Psychology of National Pedagogical University M.P. Drahomanov, Institute of Human of Borys Grinchenko Kyiv University and Bogdan Khmelnytsky Melitopol State Pedagogical University in Ukraine.

According to the pilot research results, two groups of respondents were selected for the empirical stage. 43 respondents maintained an active life position and represented various spheres of professional employment and 35 respondents were retired and voluntarily did not join any sphere of professional activity and were not involved in the process of active social interpersonal interaction. Thus, in our research we managed to involve into the program of empirical study the respondents from different

socio-economic layers, different nature of social activity and emotional attitude to the events. Two categories of elderly people were selected in order to identify differences or similarities in the formation of structural components of their active life position. Empirical data were collected during individual conversations, group workshops on the formation of elderly people's active life position. The research was conducted during October 2019 - March 2020.

Research tools. In order to achieve the research objectives, theoretical and empirical methods, standardization, systematization and generalization of the obtained theoretical and empirical data were used. Psychodiagnostic techniques were selected as tools for data collection. The selection of psychodiagnostic techniques was carried out in accordance with the outlined components of the formation of elderly people's active life position. They allowed us to identify the degree of formation of structural components of elderly people's active life position:

1 – cognitive component – technique of personal self-conception research by S. Panteleev (http://www.miu.by/kaf_new/mpp/082.pdf, http://testoteka.narod.ru/lichn/1/41.html);

2 – emotional-volitional – a technique of diagnosis of personality's social isolation level by D. Russell and M. Ferguson (https://psylist.net/praktikum/adusil.htm); self-actualization test (SAT) by E. Shostrom (scales "Competence in time", "Self-acceptance", "Expectation of support or self reliance") (https://hrliga.com/index.php?-module=profession&op=view&id=1063) ;

3 – motivational-behavioural – a technique of a subjective control level research by J. Rotter (adapted by E. Bazhin and others) (scales "General internality", "Internality in relation to health and disease") (http://personal.in.ua/article.php?ida=186).

Data collection procedure and methods of analysis. The technique of personal self-conception research by S. Panteleev allowed us to reveal the degree of impact of one's own "Me" or external circumstances on the formation of elderly people's active life position. This indicator is a part of the cognitive component of elderly people's active life position. The technique of the diagnosis of personality's social isolation level by D. Russell and M. Ferguson was aimed at the identification of the degree of individual's subjective feeling of loneliness, peculiarities of his or her interaction with others, interpersonal skills development and expression of their own feelings. Technique SAT (self-actualization test by E. Shostrom, adapted by Yu. Alioshin and others) was used to identify the emotional-volitional component of elderly people's active life position.

The technique of subjective control level research by J. Rotter (adapted by E. Bazhin) helped us to assess the level of externality-internality as a multidimensional feature, which components are tied to different types of social situations. These indicators reflect the level of formation of the motivational-behavioural component of elderly people's active life position. Data processing was done by means of the computer program SPSS 21.0

RESULTS

Researchers studied various aspects of this issue, including psychological mechanisms of aging (Bezrukov, Dubiley, & Rushkevich), personal development of elderly people, self-esteem, self-concept and self-identification, personal changes in old age, spiritual development, features of elderly people's life path, cognitive sphere of aging, socio-psychological contacts in old age, in particular, in the family and nursing homes [7,8].

The problem of distinguishing the boundaries of aging is very complex. The boundaries of the periods of maturity and the beginning of aging are blurred and constantly changing. Some scholars generally claim that there are no clear boundaries for old age. Usually, when we talk about the elderly, we are guided by the retirement age, although this age varies greatly in different countries, for different occupational groups, for men and women. According to the World Health Organization, this category includes people aged 60 and over. In geriatrics and gerontology, it is reasonable to believe that the physiological and psychological traits of the elderly change significantly every five years.

The following scheme of age periodization is most widely used in modern science: old age: 60-74 years for men, 55-74 years for women; old age: 75-90 years for men and women; longevity: 90 years and older for men and women. Groups of elderly and senile people differ significantly. The first group is characterized by maintaining a high level of functioning of psychological components. The most significant problems for them are socio-psychological maladaptation and reduced quality of life. At the forefront of the problems for the second group (old age) are problems of a purely medical nature (deteriorating health, the need for third-party care and social support). Sometimes scientists divide people over the age of 65 into the third and fourth ages. The term "third age" itself refers to an active and relatively independent lifestyle, and "fourth age" - the final stage of human life, which involves full or partial dependence on others. This terminology has found wide acceptance in society and is used in scientific research, as it helps to avoid negative emotional coloring of the terms "elderly" and "senile". The onset of old age varies widely. At the same time, most researchers associate the beginning of old age with the sixtieth birthday. In addition, the process of the onset of old age is defined as a long period of life, which proceeds in different ways for different groups of individuals of a given age.

The issue of mastering new competencies by elderly people remains relevant in the 21st century. Research done by Boulton-Lewis, Buys & Lovie-Kitchin proves that elderly person's intelligence is characterized by compensators [9]. It is manifested in the fact that the decrease in the amount of information processing is offset by the increased use of practical functions and everyday intellectual experience (Schaie & Willis) [10]. A research, done by Moody, who studied cognitive development and learning abilities of elderly people, showed that they are

Table I. Levels of formation of components of elderly people's active life position

Levels/ Components	Components of elderly people's active life position (%)		
	Cognitive	Emotional-volitional	Motivational-behavioural
high	12,6	27,1	26,5
medium	54.2	6.2	53.4
low	33.2	66.7	20.1

Note. N= 78

able to learn in a line with the younger generation [11]. In 2002 in order to improve the elderly people's quality of life the World Health Organization proposed a model of active aging through lifelong learning. The effectiveness of this model is proved by the results of research, done by gerontologists (Bowling, Kim & Merriam, Stephens, Breheny, & Mansvelt), who empirically substantiated the relationship between the level of intellectual development and elderly people's vitality [12]. Thus, in the analyzed research works elderly people's active life position is manifested in the following: 1) skills and abilities to adequately correlate external conditions with their own aspirations, goals, motives; 2) awareness and acceptance of the existing system of life values; 3) ability to live an independent, active, socially prosperous and meaningful life; 4) flexibility of adaptation to changing environmental conditions, caused by various social or economic factors.

We have turned the test assessments of psychodiagnostic techniques (mentioned above) into a standard form according to the formula 1:

$$Z=\frac{x-y}{\sigma} \quad (1)$$

Z – standardized indicator of the subject under the research,

x – "draft" indicator,

y – assessment of the subject under the research,

σ – standard deviation.

Standardization has summarized the results of the research according to the relevant structural components of elderly people's active life position. The levels of formation of components of elderly people's active life position are presented in table 1.

As it can be seen from table 1, respondents with a high level of cognitive component development (12.6%) experience more negative emotions about their own social status, do not accept new social roles, sweat it about age and lack of computer competency, they are inclined to experience rumination, scepticism in their evaluation of the present day, they are apathetic and suffer from low self-esteem. Their most commonly used phrases are as follows: "everything was wrong…", "sorry, I didn't have time to…", "if I could go at least ten years back...". A high level of elderly people's emotional-volitional component development (27.1%) was not synchronized with a high level of cognitive component. A majority of respondents of this category is characterized by a low level of cognitive and a medium level of motivational-behavioural components. A characteristic feature of these respondents is an optimistic mood, a completely positive acceptance of themselves and their own behavioural actions; they do not resort to self-reflection and are maximally isolated from negative thoughts or relatives with negative or aggressive life attitudes. Only in two cases a high level of elderly people's motivational-behavioural component development (26.5%) was synchronized with a high cognitive level and a medium level of emotional-volitional component development. An individual conversation with respondents of this category allowed us to single out people, who are focused on success in life, energetic, active, positive and satisfied with the current life situation. Even a lack of certain competency (computer literacy) did not upset these individuals, but on the contrary stimulated them to be more active in a search to increase their cognitive activity.

Thus, the psychological features of the formation of elderly people's active life position were determined by the fact that more than 50% of respondents had an average level of cognitive development, more than 60% demonstrated a low level of emotional-volitional component and more than 50% were at medium level of motivational-behavioural component. Detailed analysis of empirical data showed the facts of incomparability of the *degree of formation of structural components of elderly people's active life position*. Thus, most respondents' high level of cognitive component development does not correlate with a high level of emotional-volitional component development. On the contrary, a vast majority of elderly people with a high level of cognitive component development had a low level of emotional-volitional and a medium level of motivational-behavioural components development.

Thus, the leading role in the formation of elderly people's active life position is played by the motivational-behavioural component, which allows a person to maintain a sufficient degree of positive communicative interaction, positive self-perception, self-support. Providing support to others, these people experience a sense of self-importance, demand and group belonging.

DISCUSSION

Responding to modern challenges and taking into account the WHO's tasks to provide conditions for maintaining elderly people's active life position in our research we have revealed the following issues: a) this problem is a complex, multi-vector and intersectoral in nature and is considered to be one of the priorities of public policy; b) despite a

large number of studies on various aspects of population aging, the issue of formation of active life position has not been given due attention; c) we believe that the policy, dealing with the elderly people, should be based on the principles of an active life position, which contributes to the implementation of a comprehensive long-term impact on various aspects of life of this category of people. It is worth paying attention to the cognitive, emotional-volitional and motivational-behavioural components of elderly people's active life position. However, in the situation of the COVID-19 pandemic, forced self-isolation, fear for one's own life, and inability to socialize, have triggered elderly people's feelings of loneliness and uselessness. In order to avoid the above mentioned feelings, it is important to develop elderly people's IT skills, as it will enable them to use gadgets for communication, distract from depressive thoughts, regain faith in their own abilities and strengthen personal well-being, social support and security in today's transformational society.

We see the prospects for further research in the study of possibilities of using technological applications, aimed at maintaining social contacts between elderly people, which will directly stimulate the preservation of their active life position.

CONCLUSIONS

Currently, life offers new challenges, which require personal activity, motivation, self-sufficiency, resilience, communication and competence. The traditional pattern of elderly people's behaviour is a search for personal significance, which is realized in their active life position. The current way of elderly people's life has been complicated by the pandemic, caused by COVID-19. Based on the theoretical and empirical research of the issue of formation of elderly people's active life position, three structural components of the phenomenon under study were identified: cognitive, emotional-volitional and motivational-behavioural. The results of the experiment suggest that most respondents had medium-low levels of active life position. This age group demonstrated minor manifestations of cognitive interest, dependence of their judgments on others, difficulty in accepting changes in the environment and in mastering modern information technology, concerns and barriers to their use. A high level of cognitive component development without its connection to the emotional-volitional and motivational-behavioural components is insufficient and does not ensure the formation of elderly people's active life position. The main determinant of the elderly people's reduced vitality is their low level of emotional-volitional component development, which reduces the level of interpersonal interaction and behavioural activity. The research outcomes allowed us to track the dependence of the level of active life position on the motivational-behavioural component. Motivation for activity contributes to the search for a personal psychological resource, activation of one's own potential, adaptation and reflection as prerequisites for self-knowledge, self-regulation and active life position.

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