

Social Inclusion of the Elderly as an Indicator of the Quality of Life

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Социалната включеност на възрастните хора като индикатор за качеството им на живот

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Abstract

The article analyzes the quality of life of elderly people aged over 55 years in Bulgaria concerning their social inclusion in society; the analysis is based on a representative social survey of people aged 55+ entitled “Study on the Quality of Life of People Aged 55+ in Bulgaria”, conducted in 2022 by the Institute of Philosophy and Sociology at the Bulgarian Academy of Sciences. One thousand thirty respondents were surveyed. In the article, the quality of life of elderly people in terms of their social inclusion is studied through objective and subjective indicators. The survey results indisputably show that, by objective indicators of social inclusion of elderly people, the degree of social engagement of people aged 55+ in Bulgaria is not exceptionally high; such engagement consists, above all, of frequent social contact with close relatives, friends and neighbors, and assisting relatives, friends, and neighbors. The levels of social inclusion fall sharply regarding formalized social participation in volunteer activities for various organizations or even attendance at cultural events and interest clubs. However, we find that in terms of subjective assessments, the level of social engagement of elderly people corresponds fully to their needs and expectations for a whole and meaningful life, which thus makes satisfaction with the degree of social inclusion as a subjective indicator of the quality of social life, a factor that links the two levels of quality of life – individual and social. Thus, although objective indicators of social inclusion of elderly people in our country do not always indicate high levels of social engagement, subjective satisfaction with social inclusion points to a quality of life at the social level that fulfills the conditions for social cohesion and integration of elderly people in the life of society.

Keywords: quality of life, elderly people aged 55+, social inclusion, objective and subjective indicators of quality of life

Резюме

В настоящата статия се анализира качеството на живот на възрастните хора над 55 години в България в аспекта на тяхната социална включеност в живота на обществото на основата на резултати от проведено от Института по философия и социология при БАН национално представително за хората на 55+ години емпирично социологическо изследване на тема: „Изследване на качеството на живот в България на лицата на възраст 55+ години“, осъществено през 2022 г. с 1030 респонденти. В статията качеството на живот на възрастните хора в аспекта на тяхната социална включеност се изследва чрез обективни и субективни индикатори. Резултатите от проведеното изследване по безспорен начин показват, че на ниво обективни показатели за социална включеност на възрастните хора, степента на обществена

ангажираност на хората над 55 години в България не е особено висока, като тя се изразява най-вече в чести социални контакти с най-близкия роднински, приятелски и съседски кръг и оказване на помощ и подкрепа на роднини, приятели и съседи. Когато става дума за някаква степен на формализация на общественото участие под формата на осъществяване на доброволческа дейност за различни организации или дори посещение на различни културни мероприятия и клубове по интереси, нивата на социална включеност рязко падат. Оказва се обаче, че на ниво субективна оценка, постигнатото ниво на социална ангажираност на възрастните хора отговаря напълно на техните потребности и очаквания за пълноценен и изпълнен със смисъл живот, превръщайки по този начин удовлетвореността от степента на социална включеност в обществото, като субективен показател за качеството на социалния живот, в обвързващ двете нива на качеството на живот фактор – това на индивида и това на обществото. По този начин макар обективните показатели за степента на социална включеност на възрастните хора у нас не винаги да индикират високо ниво на социална ангажираност, субективната удовлетвореност от степента на социална включеност позволява да говорим за качество на живота на ниво общество, покриващо условията за социална кохезия и интеграция на възрастните хора в живота на обществото.

Ключови думи: качество на живот, възрастни хора на 55+ години, социална включеност, обективни и субективни показатели за качество на живот

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Quality of Life

Quality of life has ever been a compelling issue for people. At the theoretical level, quality of life marks the transition from modern industrial to postmodern, post-industrial, "post-materialistic" society. It arose as an alternative to the concept of predominantly material and economic growth and involves the idea of the emancipation of humans from the excessive domination of material values in society, asserting the principle that, at the already achieved level of economic development, what is most important is not the number of commodities available in society but the quality of people's lives; not how much, but how well; and that in addition to property, money and material objects, people must achieve knowledge, a good education, interesting jobs, and quality recreations, successful personal development, a good family and social life. A good society is one in which people have a good quality of life. The task of a good society is to provide an environment, possibilities, and social structures for developing the striving for individual happiness (Campbell, 1981).

The study on quality of life is assumed to have been initiated by U.S. President Lyndon B. Johnson's 1964 program speech on "The Great Society" (1964). In it, he emphasizes the need to achieve a quality of life for people and society and to introduce concrete social indicators that measure it. Thus, from the beginning and to this day, the problems of quality of life have been interwoven with the problem of creating and using a system of social indicators that measure that quality.

The concept of quality of life is widely used by urbanists, politicians, economists, sociologists, psychologists, and other researchers; due to its complex nature, each field of science breaks it down differently and uses it for a different purpose (Gerson, 1976). In this connection, the three foremost specificities of the concept are: first, that it refers to situations in the lives of individuals in a micro and macro-perspective; second, that the concept is multifaceted, wide in range, to overcome the prevalent until then, limited, one-dimensional economism that gives priority to income and material conditions; third, it includes objective and subjective indicators for the following six key areas and social dimensions: 1) employment, 2) economic resources, 3) family life, 4) social life and social involvement, 5) health and health services; 6) knowledge, achievements in education and learning.

In Bulgarian sociology, prof. Nikolay Tilkidjiev (2009) gave a widely used definition: "Quality of life is an integral indicator of the condition, achievements, and success of an individual,

his family, the community and society, as well as of activity at various levels of management” (p.116).

Quality of life is a generalized concept that implies ample information on how people live and perceive their lives. Put concisely, quality of life is related to the well-being of people in society.

The research on the quality of life has developed from the registration of mainly objectified facts to the study of people’s subjective (intellectual-emotional) perceptions, experiences, motivations, expectations, moods, norms, attitudes, values and value orientations, assessments, and self-assessments. Attention has gradually been redirected towards subjective well-being, life satisfaction, and happiness indicators. The distinction between objective and subjective indicators of quality of life determines two contrary approaches to its study. The first is the Scandinavian or Swedish, welfare approach, which focuses entirely on the objective resources and conditions for a good life, i.e., on welfare research, the proponent of which is Robert Erikson (2019). This approach asserts the division of indicators not into objective and subjective but into descriptive and value-related indicators, assuming the former to be more reliable (Allardt, 1976). The second is the American approach that follows the tradition of Thomas, W., & Znaniecki F. (1996) and is mainly represented by A. Campbell (1981); here, an individual's subjective well-being (and, foremost, satisfaction and happiness) is assumed to be the ultimate goal of social development and the measure of the quality of life (Andrews, & Withey, 1976; Colby, 1987; Diener, 1984).

In addition to the opposition objective vs. subjective indicators or descriptive vs. value, studies on quality of life also distinguish between the practical approach, based on studies of the degree to which the individual's basic desires and needs are fulfilled, vs. the approach that takes into account the development of the personality, the formation of needs, qualities, values in people (the human action/agency approach).

Another significant distinction is that between levels: the quality of life of individuals, their families and households, local communities, and society. While well-being and satisfaction characterize the quality of life of individuals, the two main dimensions of quality of life in society are, on the one hand, social cohesion, integration (reduction of inequality, division, fragmentation, social exclusion, including unemployment, crime) and, on the other hand, social sustainability - the levels of environmental, social and economic capital (Noll, 2002; Fahey, Nolan, & Whelan, 2003).

To summarize, the generic concept of quality of life has three basic dimensions:

1. Objective living conditions;

2. Subjective well-being, which includes a cognitive component, self-assessment of life satisfaction as a whole and in its basic areas (healthcare, education, employment, family and community life, leisure), and an emotional component: self-assessment as to one's level of happiness or anxiety;

3. The societal quality of life, measured by indicators for cohesion and sustainability - H. H. Noll (2002), R. Veenhoven, (2000), etc.

This article is devoted to the quality of life of elderly people in Bulgaria (aged 55+) from the perspective of their social inclusion in society. Elderly people are an essential and increasingly significant component of modern society's economy, culture, and life. This raises many questions as to the best ways to ensure that the elderly will be socially included and active participants in the life of modern society and make their contribution to its development. Social inclusion is an essential element of the quality of life of elderly people and an indicator of their capacity for an active way of life. But it is also an indicator of society's quality of life insofar as it illustrates society's potential to use the capacity of its oldest members so that they may continue to benefit society at this stage of their lives. In other words, it illustrates society's potential in terms of cohesion and sustainability. Bulgaria has a National Strategy for the Active Life of Elderly People in Bulgaria (2019 - 2030), which regulates the calculation of the active life index for elderly people, based on four specific areas of activity: occupation, social participation, independent and secure life in good health; creation of capacity and of a favorable environment for the active life of elderly people. These areas are broken down into 22 indicators of active life. Social inclusion and participation are important components of the National Strategy for Active Life of Elderly People in Bulgaria (2019-2030).

Research Methods

The social inclusion and participation of elderly people in social life in Bulgaria as an indicator of the quality of life will be presented here through a quantitative survey conducted by a team from the Institute of Philosophy and Sociology at BAS in 2022 in which the author has participated. The survey was entitled "Study on the quality of life of people aged 55+ in Bulgaria" and included 1,030 respondents. It is a nationally representative study of the country's population aged 55+. The indicators with which the quality of life of elderly people in Bulgaria was studied are in harmony with the indicators defined by the National Strategy for Active Life of Elderly People in Bulgaria and with the indicators of the European quality of life survey (EQLS) and the European social survey (ESS).

Social Participation/ Inclusion

The inclusion of elderly people in social life has been studied in this survey through several groups of indicators:

- A. Unpaid volunteer work (done in the last 12 months) for different types of organizations:
- Organizations for social services and volunteer/public services (e.g., organizations for assistance to elderly people, children, disabled persons, and other persons in need);
 - Educational, cultural, sports, or professional associations;
 - Civic movements (e.g., environmental protection, civil rights protection) or charitable organizations (e.g., raising funds, participation in campaigns);
 - Other volunteer organizations.

The results in Table 1 indicate a low engagement of elderly people in unpaid volunteer work.

Table 1.

Doing volunteer work

Organizations	Every week	Every month	Less often/Occasionally	Never	Don't know	No response
Social services and services on a volunteer/social basis (e.g., organizations assisting elderly people, children, disabled people, or other people in need)	0,6%	1,1%	6,1%	91,5%	0,2%	0,6%
Educational, cultural, sports, or professional associations	1,3%	2,9%	5,7%	89,7%	0,2%	0,3%
Civic movements (e.g., environmental protection, civil rights protection) or charitable organizations (e.g., raising funds, participation in campaigns)	-	1,7%	6,8%	90,3%	0,4%	0,8%
Other volunteer organizations	0,2%	1,3%	5,4%	91,1%	0,9%	1,1%

Note. All tables are made by the author as a research participant of this nationally representative survey on the quality of life.

The table shows that elderly people doing free volunteer work for various organizations represent very small shares: 6.1% of the elderly do unpaid volunteer work for organizations that offer social services on a volunteer/public basis; 5.7% of the elderly do unpaid volunteer work for educational, cultural, sports or professional associations; 6.8% work as volunteers for civic movements; and 5.4% of the elderly do free volunteer work for other organizations. Moreover, these are the figures for volunteer work done less than once a month or only occasionally. The

percentage of people doing such work more often than that is minimal, below the statistical significance threshold, and hence negligible. By contrast, those elderly people who have never engaged in unpaid volunteer work range from 89.7% to 91.5%, depending on the kind of organizations referred to. This is an exceptionally low social participation of people aged 55+ in Bulgaria in free volunteer work for various social organizations.

B. Inclusion in various types of political activity. The situation is almost the same concerning political participation and engagement in various kinds of political activity, such as:

- a) Attendance of meetings of trade unions, political parties, or politically active groups;
- b) Participation in protests or demonstrations;
- c) Signing petitions, including by electronic mail or online;
- d) Establishing contact with a politician or government representative (apart from ordinary contact related to the normal use of public services).

As shown in table 2 the survey results show a low degree of engagement of elderly people in activities of a political nature.

Table 2

Participation in activities of a political nature

Activities	Yes	No	Don't know	No response
Attendance of meetings of a trade union, political party, or politically active group	8,8%	90,2%	0,6%	0,5%
Participation in a protest or demonstration	2,6%	96,3%	0,6%	0,6%
Signing a petition, including through e-mail or online	5,0%	92,7%	0,8%	1,5%
Making contact with a politician or government representative (apart from ordinary communications related to the routine use of public services)	6,7%	91,9%	0,6%	0,8%

Over 90% of people aged 55+ have not engaged in activities of a political nature during the last 12 months: 90.2% have not taken part in a meeting of a trade union, political party, or politically active group; 91.9% have not made contact with a politician or government representative (apart from ordinary contacts related to the normal use of public services); 92.7% have not signed a petition, including through e-mail or online; and 96.3% have not participated in a protest or demonstration. Those who have engaged in such activities represent small percentages,

ranging from 5% to 8.8%, and the share of participants in a protest or demonstration (2.6%) is even below the statistical significance threshold, so this type of political participation of elderly people is negligible.

C. Activities related to caretaking and support, which include several types of activities:

- a) Care for and/or raising the respondents' children;
- b) Respect for and/or increasing the respondents' grandchildren;
- c) Care for disabled persons or sick family members, neighbors, or friends of the surveyed persons under the age of 75;
- d) Care for disabled persons or ill family members, neighbors, or friends of the surveyed persons aged 75 or more.

The results in Table 3 show considerably higher degrees of social engagement on the part of elderly people.

Table 3

Engagement in activities related to caretaking and support

Activities	Every day	Several days a week	Once or twice a week	Less often	Never	Inapplicable	Don't know	No response
Care for and/or raising your children	5,3%	2,7%	1,4%	12,7%	38,5%	37,9%	0,7%	0,9%
Care for and/or raising of your grandchildren	5,0%	7,7%	10,2%	28,4%	21,5%	26,9%	-	0,4%
Care for disabled persons or sick family members, neighbors, or friends under the age of 75	3,5%	1,5%	1,2%	7,0%	41,2%	44,5%	0,4%	0,7%
Care for disabled persons or sick family members, neighbors, or friends aged 75 or over	7,7%	3,2%	4,6%	7,8%	36,5%	39,7%	0,2%	0,4%

The table shows that a total of 22.1% of people aged 55+ (the sum of the percentages for the answers “Every day”, “Several times a week”, “Once or twice a week,” and “Less often”) engage in care for and rearing of their children; half of them, i.e., 51.3% are involved in care and rearing of their grandchildren; 13.2% - in care for disabled persons or sick family members, neighbors or friends aged under 75; and 23.3% - in care for disabled persons or ill family members, neighbors or

friends aged 75 or over. The smaller percentages of people engaged in care and rearing of their children, care for disabled persons or sick family members, neighbors or friends under, at, or over the age of 75 is accounted for by the fact that this kind of care does not apply to elderly people whose children are already mature and can care for themselves, or who do not have disabled persons or sick family members, neighbors or friends to care for. As the table shows, there are 37.9% of cases for which care or rearing of children does not apply, 44.5% of cases in which care for disabled persons or sick family members, neighbors, or friends aged under 75 does not apply, and 39.7% for which care for disabled persons or ill family members, neighbors or friends aged 75 or over does not apply. In any case, the table illustrates the fact that the degree of engagement of elderly people aged over 55 in activities related to care and support in the family or the close circle of friends is considerably higher, and, highest, compared with engagement in activities related to public support and participation in public life, such as volunteer activities or activities of a political kind. It may be said that the inclusion of elderly people in social life occurs foremost through activities supporting the family and the closest circle of friends and neighbors, and to a far smaller degree, through more abstract and mediated support such as volunteer work or political activity.

Creating a favorable environment for the active life of elderly people as a precondition for social inclusion and civic engagement

The creation of a favorable environment for the active life of elderly people in terms of their social inclusion was studied in the framework of the survey through analysis of two indicators:

1. Internet use;
2. Participation (including distance) in some form of training not related to acquiring an educational degree/degree of professional qualification, such as training courses, seminars, lectures, private lessons, etc.

The survey results in Table 4 show that a substantial share of elderly people (44.4%) use the Internet daily or nearly every day. But a considerable percentage of them (36.6%) never use the Internet.

Table 4

Internet use

Every day or nearly every day	44,4%
At least once a week but not every day	14,0%

Table 4*Internet use (cont.)*

Less than once a week	4,0%
Never	36,6%
Don't know / Can't say	0,7%
No response	0,3%

The table data indicate that more than half of the elderly (58.4% - the sum of “Every day or nearly every day” and “At least once a week but not every day”) regularly use the Internet; this is a precondition and indicator of the possibility of elderly people to be socially included and lead an active social life. At the same time, a considerable share of elderly people (36.6%) never use the Internet; in today’s world of digital communication, this considerably restricts their possibilities for active participation in social life and maintaining a high level of social inclusion.

As for the second indicator, participation in training not related to acquiring an educational degree or degree of professional qualification as a way of maintaining a high level of social inclusion, the results are somewhat discouraging, as only 3.5% of the surveyed persons indicate participation in such training in the last four weeks, while 96% say they have not participated in any form of activity (Table 5).

Table 5

Participation in some form of training not related to acquiring an educational degree or degree of professional qualification, such as training courses, seminars, lectures, private lessons

Yes	3,5%
No	96,0%
Don't know / Can't say	0,2%
No response	0,2%

These results illustrate the strongly restricted use of options for continuing education and lifelong learning by elderly people, given that this is a precondition for improving their quality of life and active participation in social life.

The social life of the elderly in terms of social inclusion

The social life of elderly people has been studied in this survey through analysis of several indicators:

- a) Frequency of direct contact with family members or relatives living outside the household;
- b) Frequency of contacts by telephone, the Internet, or mail with family members or relatives living outside the household;
- c) Frequency of direct contact with friends or neighbors;
- d) Frequency of communications by telephone, through the Internet, or by mail with friends and neighbors;
- e) Frequency of contacts with friends, relatives, and colleagues without obligation to maintain such contact;
- f) Visits to cultural events and institutions, historical monuments, and folklore events;
- g) Participation in interest clubs.

Table 6

Frequency of direct or indirect contact with family members, relatives, friends, and neighbors

How often do you have contact:	At least once a week	Less often than once a week	At least once a month	Less often than once a month	Never	Don't know / Can't say	No response
Directly (face to face) with members of your family or relatives living outside your household	50,0%	16,6%	12,7%	18,4%	1,2%	0,7%	0,3%
By telephone, Internet, or mail with members of your family or relatives living outside your household	71,5%	16,2%	5,5%	2,7%	2,6%	1,2%	0,3%
Directly (face to face) with friends and neighbors	66,6%	21,6%	6,9%	3,2%	0,8%	0,5%	0,4%
By telephone, Internet, or mail with friends and neighbors	54,6%	24,5%	9,1%	4,7%	4,3%	2,2%	0,6%

As regards relations with family members and relatives living outside the respondent's household, the survey results show a high level of social connectedness: 50.0% of the surveyed persons have direct contact at least once a week with their close ones, and 71.5% have contacted by telephone, the Internet or mail at least once a week. Considerably smaller shares have contacts less

than once a week, at least once a month, or less often. But it indicates that those who never have contact with friends or relatives, whether the direct or indirect, amount to very small shares, below the statistical significance threshold.

Direct contacts with neighbors and friends, as well as contacts with them by telephone, the Internet, or mail, show a high level of social connectedness: 66.6% of elderly people communicate at least once a week directly with neighbors and friends, and 54.6% - by telephone, the Internet or mail. In this case, the shares of those who never have contact with neighbors and friends, directly or indirectly, are very small, 0.8% and 4.3%. The higher percentage of people who indicated they never had contact with their neighbors and friends by telephone, the Internet, or mail is probably because these people do not usually use these means of communication and not that they do not have contacts at all; this is confirmed by the fact that a much smaller share, 0.8%, indicate they never have connections with their neighbors and friends directly.

All this indicates a relatively high level of social connectedness among elderly people aged over 55. This conclusion is confirmed by the data regarding the frequency of contact with friends, relatives, and colleagues when there is no obligation to maintain such contacts (Table 7).

Table 7

Frequency of contact with friends, relatives, and colleagues without obligation to maintain such contact

Never	0,9%
Less often than once a month	12,7%
Once a month	8,4%
Several times a month	15,1%
Once a week	12,2%
Several times a week	28,1%
Every day	19,5%
Don't know / Can't say	2,6%
No response	0,4%

As evident from the table, again, a very small share (below the threshold of statistical significance) of elderly people (0.9%) indicates they never have contact with friends, relatives, or colleagues. At the same time, 59.8% (the sum of answers "Every day," "Several times a week", and "Once a week") indicate a relatively high and stable level of social connectedness with the closest circle of relatives, friends, and colleagues.

Another indicator related to the social life of elderly people is their visiting various cultural events and institutions, historical monuments, folklore events, etc. (Table 8).

Table 8

Visits to various places and events in the last 12 months

Cinema, theater, opera, ballet	10,8%
Musical, song, or dance concerts	10,4%
Galleries, museums, historical monuments, archaeological sites	13,1%
Festivals, gatherings, and festivities, including free of charge	18,7%
Other (café, restaurant)	1,4%
I have not visited any	43,5%
No response	2,2%

Notably, only approximately one-tenth of the elderly people attend or visit various cultural events and institutions, such as cinema, theater, opera, ballet, musical and dance concerts, art galleries, museums, historical monuments, and archaeological sites. A somewhat higher share attend festivals, gatherings, and festivities (18.7%), probably because these are usually held locally and are free of charge, which makes them more accessible. But it is also true that nearly half the elderly people aged 55+ (43.5%) have not attended cultural events in the last 12 months; this indicates the restricted social life of elderly people in this respect.

The participation percentages of elderly people in various interest clubs in the last 12 months are also low (Table 9).

Table 9

Participation in interest clubs in the last 12 months

Sports club	2,0%
Musical group	3,0%
Dance Company	1,3%
Amateur theatrical activity	0,6%
Organized tourism	8,8%
Other interest clubs (ladies club, spiritual circle, yogi club, club for disabled people, cooking club, hunting party)	18,8%
I have not participated	65,5%

The data in the table clearly show that approximately one-third of the elderly people (34.5%) participate in some interest clubs (the sum of all answers, except for the answer “I have not participated”), while 65.5% have not participated in any clubs during the last year.

All the results indisputably show that the social life and inclusion of elderly people aged 55+ in Bulgaria is limited to the closest family circle or circle of friends and neighbors and consists mainly in informal contacts with close people and providing assistance and support to relatives, friends, and neighbors. As regards some degree of formal participation in terms of volunteer activities for various organizations or even attendance of different cultural and interest clubs, the levels of social inclusion, in this case, drop sharply. Confirming this conclusion is the fact that when asked where they usually have social contacts, more than half the elderly people indicate places of an informal kind: "at home or in front of the home" (34.2%) and “in parks and yards” (30.3%). Only 20.6% of the surveyed persons indicated an institutional environment, such as a pensioner’s club, and 13.3% indicated other locations of an institutional or formal kind, such as cultural centers, libraries, stores, cafes, or restaurants (Table 10).

Table 10

Places of social contact between elderly people

At home/in front of the home	34,2%
In parks and yards	30,3%
In a pensioner’s club	20,6%
In cultural centers/libraries	7,3%
Elsewhere (cafes, restaurants; stores, market places; excursions)	6,0%
Don’t know / Can’t say	1,5%
No response	0,1%

So far, we have mainly analyzed the objective indicators of the quality of life of elderly people in Bulgaria from the perspective of their social inclusion and social engagement. Besides the objective ones, the subjective indicators of social engagement are also important; the personal self-assessment of elderly people regarding the degree of their social inclusion is essential.

The survey results for elderly people in Table 11 show a high degree of self-assessment that they are socially integrated and included at the local level, in the region where they live, and in

society as a whole.

Table 11

Sense of social inclusion

Sense of social inclusion	Fully agree	Agree Somewhat	Neither agree nor disagree	Disagree Somewhat	Fully disagree	Don't know / Can't say	No response
I feel close to the people in the region where I live	37,4%	39,9%	15,6%	4,7%	1,1%	0,7%	0,7%
I feel excluded from society	0,8%	2,6%	9,1%	24,3%	61,7%	0,6%	0,9%

We see that 77.3% of the elderly people (the sum of answers “Fully agree” and “Agree somewhat”) feel close to the people in the region where they live, and 86% (the sum of answers “Fully disagree” and “Disagree somewhat”) deny feeling excluded from society. Thus, although the objective indicators of social inclusion of elderly people do not always register high levels of integration and participation in social life, the subjective self-assessment and sense of elderly people are that their need for integration is fulfilled. Related to this is their positive self-assessment as to the degree to which their lives are full of things that interest them: for more than half, 53.1% (the sum of the answers "All the time," "Most of the time," and "More than half the time"), life is interesting and full of things that interest them. Notably, only 3.1% are utterly dissatisfied with their lives and entirely deny that they are full of things that interest them (Table 12).

Table 12.

Self-assessment of daily life

Self-assessment	All the time	Most of the time	More than half the time	Less than half the time	A small part of the time	Never	Don't know	No response
My daily life is full of things that interest me	11,7%	20,5%	20,9%	22,5%	17,4%	3,1%	1,8%	2,1%

Thus, the satisfaction of elderly people above the age of 55 in Bulgaria with the degree of their inclusion and integration in society, as a subjective indicator of the quality of their social life,

connects the two levels of quality of life – that of the individual and that of society – showing that, although the indicators for social inclusion of elderly people do not always register a high level of social engagement, their subjective satisfaction with their degree of social inclusion allows us to conclude that their quality of life at social level meets the conditions for the social cohesion and integration of elderly people in the life of society.

Conclusion

To conclude, it may once again be said that, judging by the objective indicators of social inclusion of elderly people above the age of 55 in Bulgaria, their degree of social engagement is not very high and mainly consists of frequent social contact with the closest circle of relatives, friends, and neighbors. We find, however, that in terms of the subjective assessment of social inclusion, the level of social engagement of elderly people fully matches their needs. Most probably, the fact that they are in constant close contact with relatives, friends, and neighbors, i.e., with their closest circle, is the cause of their satisfaction, the lack of a sense of exclusion from society, and the feeling that their lives are full of interesting things. Thus, at the individual level, the degree of social inclusion fully corresponds to their needs and expectations for a whole and meaningful life. At the societal level, there is still more to be done to increase the motivation of elderly people for more active inclusion in social life and enable them to use more fully their potential to benefit and in the interest of society.

References

- Allardt, E. (1976). Dimensions of welfare in a comparative Scandinavian study. *Acta Sociologica* 19(3), 227-239.
<https://doi.org/10.1177/000169937601900302>
- Andrews, F., & Withey, S. (1976). *Social indicators of wellbeing: American perceptions of quality of life*. Plenum Press.
DOI: 10.1007/978-1-4684-2253-5.
- Campbell, A. (1981). *The sense of well-being in America: Recent patterns and trends*. McGraw-Hill.
- Campbell, A., Converse, P. E., & Rodgers, W. L. (1975). *The quality of American life*. Institute for Social Research.
- Colby, B. N. (1987). Well-being: a theoretical program. *American Anthropologist*, 89(4), 874-895.
<https://doi.org/10.1525/aa.1987.89.4.02a00080>
- Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95(3), 542–575.
<https://doi.org/10.1037/0033-2909.95.3.542>

- Erikson, R., Hansen, E., Ringen, S., & Uusitalo, H. (2019). *Welfare trends in the scandinavian countries*. Routledge.
<https://doi.org/10.4324/9781315488295>
- Fahey, T., Nolan, B., & Whelan, C. (2003). *Monitoring quality of life in Europe*. European Foundation for the Improvement of Living and Working Conditions. Office for Official Publication of the European Communities.
- Gerson, E. M. (1976). On quality of life. *American Sociological Review*, 41(5),793-806.
<https://doi.org/10.2307/2094727>
- Johnson, L (1964). *Great Society Speech* . Teaching American History
<https://teachingamericanhistory.org/document/great-society-speech-2/>
- Noll, H. (2002). Social indicators and quality of life research: background, achievements and current trends. In N. Genov (ed.), *Advances in Sociological Knowledge over Half a Century* (pp. 168-206). ISSC.
- Thomas, W., & Znaniecki, F. (1996). *The Polish peasant in Europe and America: A Classic Work in Immigration History*. University of Illinois Press.
- Tilkidzhiev, N., & Dimova, L. (Eds). (2013), *Blagopoluchie i doverie: Balgariya v Evropa?* [Well-being and trust. Bulgaria in Europe?] Iztok-Zapad.
- Veenhoven, R. (2000). The four qualities of life: ordering concepts and measures of the good life. *Journal of happiness studies*, 1(1), 1-39.
DOI:10.1023/A:1010072010360