

INTERPRETING THE LIFE QUALITY CHANGES IN UKRAINIAN ELDERLY POPULATION

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Introduction. According to WHO forecasts, by 2050, the number of elderly men and women will have been 2 billion. Compared to the demographic data of 1950, the number of 60-year-old people will be magnified tenfold. Nowadays, the need to support independence, increase the level of social activity, improve the quality of life of the elderly is especially urgent. Due to the expectation of a high level of well-being in the elderly age and the direction of government policy towards reducing health care costs, the new ideas for solving the physical, psychological and social problems of elderly people cause significant interest.

The aim of the study was to analyze the life quality of elderly people and compare it with the data of different age group.

Material & methods. Sample consisted of 150 elderly people, $M=65.2\pm 4.3$ years). Data of scientific literature and own results for the persons of mature age ($n=450$, age - 24-60 years) and young age ($n=988$, age - 15-17 years; $n=759$, age - 18-22 years) were used for the comparison. The evaluation of health-related quality of life was conducted with the SF-36 survey. The respondents were asked to answer questions referring to the last 4 weeks. Summed raw scores were transformed to 0-100 scale. Physical component of quality of life includes the results of Physical Functioning Scale, Role Limitations due to Physical Problems Scale, General Health Scale, and Bodily Pain Scale; Vitality Scale, Social Functioning Scale, Role Limitation due to Emotional Problems Scale, Mental Health were included to Mental Component.

Results. The quality of life of Ukrainian respondents is one of the lowest and similar to the data of patients with severe chronic diseases from other countries. Such data indicate significant problems with the functional state and limitations of daily activities.

The value on the Physical Activity Scale is 74-94 points, Physical Role Functioning Scale - 73-95 points. The indexes are lower ($p<0.01$) than adolescences, but no difference was indicated between the data of elderly person and adults. A significant difference ($p<0.01$) were found only in relation to the Physical Activity Scale.

The results of the survey indicate significant problems with the functional state of Ukrainian respondents and its restrictive impact on daily activities. The values of life quality for most scales are critical (Emotional Role Functioning Scale - 44,0 points, General health Scale - 51,4 points, Bodily Pain - 52,2 points). The indexes of the Mental Health Scale, Social Activity Scale, and Viability Scale are higher (in the range from 55.6 to 60,4 points). The scale value of Mental Health of elderly people does not differ from adolescents and adults ($p<0.01$). There is no statistically significant difference between the indicators of the scales Physical Role Functioning, Bodily Pain, Viability, Emotional Role Functioning in adults and elderly people ($p<0.01$).

Conclusions. Low values of the quality of life of different age groups confirm the negative tendencies that are the result of the initially low values of well-being at the young age. Low indicators characterizing the general psychological component of the well-being of the elderly can testify to certain negative social and cultural trends in Ukrainian society - age discrimination, which results in the negative perception of natural age changes, limitation of activity of the elderly people, their dependence on younger members of the family.