

CIÊNCIAS SOCIALMENTE APLICÁVEIS E HUMANIDADES:

SABERES, PRÁTICAS E HORIZONTES DE INVESTIGAÇÃO

JESÚS RIVAS GUTIÉRREZ
(ORGANIZADOR)

VOL II



EDITORA
ARTEMIS
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PRÓLOGO

El volumen II de **Ciencias Socialmente Aplicables y Humanidades: Saberes, Prácticas y Horizontes de Investigación** reúne en un libro ponencias elaboradas por autores de América Latina, Europa y Asia producto de investigaciones que interpretan y dialogan con algunos de los desafíos más críticos y urgentes del Siglo XXI como lo es las prácticas educativas en contextos diversos, sostenibilidad y calidad de vida, diversidad y justicia social, transformación digital y vida organizacional en donde se refleja una diversidad de enfoques y tradiciones académicas que convergen en una misma dirección: comprender las realidades contemporáneas desde diferentes perspectivas y al mismo tiempo proponer horizontes innovadores y transformadores.

El primer eje, **Educación, Políticas del Conocimiento y Prácticas Formativas**, concentra análisis que problematizan los procesos de enseñanza-aprendizaje, la formación docente, las políticas lingüísticas, los currículos, las metodologías de intervención y las disputas simbólicas en torno a la producción del conocimiento. Este eje reafirma la educación como un campo estratégico para la transformación social y cultural, la emancipación de los sujetos y la construcción de sociedades más justas y democráticas.

El segundo eje, **Sostenibilidad, Territorios y Calidad de Vida**, reúne trabajos que presentan los desafíos y dificultades en las relaciones entre desarrollo, crecimiento, medio ambiente, turismo, productividad, envejecimiento, abandono social y soberanía territorial y alimentaria. Los textos que integran este eje evidencian la centralidad del territorio como espacio de disputa y poder, de pertenencia e identidad, de producción de sentidos y construcción de alternativas sostenibles para la mejora de las condiciones de vida de las poblaciones.

El tercer eje, **Género, Diversidad y Justicia Social**, aborda temas fundamentales relacionados con las desigualdades estructurales que atraviesan, diferencian y dividen a las sociedades contemporáneas. Las reflexiones aquí reunidas enfrentan los prejuicios, las discriminaciones, las interseccionalidades y los mecanismos sutiles de reproducción de las desigualdades, al mismo tiempo que evidencian estrategias de resistencia, reconocimiento y transformación social.

El cuarto eje, **Transformación Digital, Gestión Organizacional e Innovación en Empresas**, reúne contribuciones orientadas a la comprensión de las organizaciones empresariales en contextos complejos, dinámicos y atravesados por la incertidumbre. Este eje articula aspectos sobre gestión, pertenencia e identidad organizacional, cultura institucional, liderazgo, procesos de cambio, clima organizacional e innovación

empresarial e institucional, tanto en el sector privado como en el público, con especial atención a las instituciones educativas y a las organizaciones insertas en entornos de rápida transformación tecnológica.

Al articular estos cuatro ejes, esta obra evidencia la riqueza, la diversidad y la potencialidad de las Ciencias Socialmente Aplicables para interpretar los fenómenos laborales y sociales en su diversidad y complejidad y al mismo tiempo proponer caminos posibles de intervención, innovación y transformación.

Esperamos que estos trabajos contribuyan al fortalecimiento del pensamiento crítico, al diálogo múltiple e interdisciplinario y al avance de la comprensión de las diversas realidades locales, regionales, nacionales y globales, así como al fortalecimiento de mayor número de investigaciones comprometidas con la educación como práctica transformadora, con el desarrollo sostenible, la justicia social y la innovación organizacional.

Deseamos al lector una lectura interesante, reflexiva, provocadora e inspiradora.

Jesús Rivas Gutiérrez

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QUALITY OF LIFE AND ABANDONMENT: PERCEPTIONS OF OLDER PEOPLE ATTENDING A GERONTOLOGICAL MODULE

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ABSTRACT: Aging is a process where biopsychosocial transformations experienced because of time and lifestyles. In this sense, abandonment is a problem that in many cases affects old age. The objective was to know the perception of quality of life in informants who experience abandonment. To do this, the method to use is interpretive and phenomenologically oriented; a semi-structured interview and the WHOQOL-OLD Questionnaire applied to 10 informants of both sexes with an age range of 65 to 82 years. The results highlight a good quality of life with non-material elements, prioritizing aspects such as emotional balance, inner peace and the

sense of belonging, in addition, the relevance of having solid family and social networks so as not to feel alone. It is necessary to design and execute social programs to promote the quality of life of this age group.

KEYWORDS: quality of life; abandonment; perceptions; older people; health center.

1. INTRODUCTION

Population aging is a global phenomenon that brings with it numerous challenges, especially in the area of care for older adults. In Mexico, this situation has become particularly relevant. According to data from the National Institute of Statistics and Geography (INEGI 2021), in 2020, 12.3% of the country's total population was 60 years of age or older. This segment of the population faces a number of significant problems, among which abandonment within their family environment is one of the most critical. Abandonment of older adults refers to the lack of attention and care they should receive from their family members or caregivers, which sometimes results in a notable decline in their quality of life.

Some authors, such as Ballesteros, have pointed out that economic and social

factors play a determining role in this phenomenon. The WHO (2023) reveals that one in six older adults suffers mistreatment, often at the hands of their own caregivers, highlighting the seriousness of this problem. Furthermore, family structure and dynamics have changed considerably in recent decades. The growing number of nuclear families, the migration of young people to urban areas in search of better job opportunities, and the lack of robust public policies supporting family caregivers have contributed to the increase in elder neglect. Loneliness and isolation are direct consequences of this situation, affecting not only the physical health of the elderly but also their emotional and mental well-being.

According to the World Health Organization's (WHO) 2018 annual report, as cited in (Cecarini, 2021), 29 countries worldwide have a median life expectancy exceeding 80 years. In the Americas, Canada leads with 82.2 years, while in Latin America, Chile leads with 80.5 years. Regarding average life expectancy in the region, the countries above the 75-year threshold are Costa Rica with 79.6; Cuba with 79.1; Panama with 77.8; Uruguay with 77; and Mexico with 76.7.

The quality of life of older adults is not the problem, but the loss of healthy life years is, a consequence of health and social security systems not being prepared to provide independent living and long-term care to those who need it, according to the World Health Organization (WHO), 2024. Personal perceptions of quality of life can differ significantly from objective assessments of the environment, and capturing this subjective perspective is essential for identifying areas for improvement in care. Therefore, the objective of this research was to understand the perception of quality of life among older adults experiencing abandonment who attend a primary care health center.

2. METHOD

An interpretive phenomenological design employed, using semi-structured interview data analysis, participant observation, and active listening.

3. PARTICIPANTS

Ten older adults, aged 65 to 82 years (seven women and three men), were interviewed. They were beneficiaries of the Dr. Patricio Trueba y de Regil Hospital Clinic in the city of San Francisco de Campeche. The inclusion criterion was that key informants be functionally able to be interviewed and experience abandonment by their families. The exclusion criterion was that older adults' not experiencing abandonment by their families be excluded.

4. INSTRUMENTS

The World Health Organization Quality of Life-Old (WHOQOL-OLD) questionnaire is a WHO-validated instrument for determining quality of life in older adults (Madeira's et al., 2011). Semi-structured interview: consisting of open-ended questions for analyzing the following categories: positive perception of quality of life, negative perception of quality of life, and life satisfaction.

5. PROCEDURE

The research protocol submitted to the academic committee of the School of Social Work at the Campeche Institute for validation. Once validated, it also submitted to the research committee of the Dr. Patricio Trueba Clinic Hospital of the ISSSTE (Institute for Social Security and Services for State Workers) for implementation at that healthcare facility. After approval, elderly beneficiaries attending the gerontology module invited to participate. They informed about the research objective and, if interested in voluntary participation, asked to sign the informed consent form. Subsequently, they contacted by telephone to schedule an hour-long interview and instrument administration session. Following the interviews, they received feedback on the identified risk factors affecting their individual quality of life, as well as guidance on coping with negative experiences related to abandonment. They also informed about the activities the institution designs and carries out to benefit and integrate older adults.

6. DATA COLLECTION TECHNIQUE

A semi-structured questionnaire designed, and the WHOQOL-OLD questionnaire administered to understand the perceptions of older adults experiencing abandonment regarding their quality of life. Informants who visited the gerontology module informed about the activity and invited to participate in the research. This activity took place from January to October 2024.

7. DATA ANALYSIS

Content analysis of the interviews and questionnaires performed to identify positive experiences, negative experiences, and life satisfaction for each informant.

8. ETHICAL CONSIDERATIONS

Informants asked to sign informed consent forms to participate in individual interviews at the hospital clinic. Complete confidentiality guaranteed, and the objective of the research, in which they agreed to participate, explained to them.

9. RESULTS/FINDINGS

The following presents the results of the perceptions regarding the quality of life of elderly people experiencing abandonment who attend the gerontology module of the ISSSTE hospital clinic. The three main dimensions of the study that emerged from the interviews: positive perception of quality of life, negative perception of quality of life, and life satisfaction.

10. POSITIVE PERCEPTION OF QUALITY OF LIFE

The General Treatise on Health in Human Societies (2024) maintains that quality of life is the result of a constant interaction between factors such as health, social relationships, individual needs, and emotional conditions. This approach clearly reflected in the interviewees' experiences. Below, they describe their positive perceptions related to quality of life.

"The most important thing for me is being at peace with myself and being surrounded by the people I love. That gives life a sense of quality, beyond material possessions." (Interviewee 1)

"It's not so much about having money or luxuries; it's about having peace, health, and feeling that you're not alone, being able to have a conversation now and then, feeling that someone is listening to you, that they care." (Interviewee 2)

"I used to think it was about having a nice house, a loving family, not having to worry about anything, but now, with time, I realize that quality of life is simply being alive." (Interviewee 3)

"For me, it's about living in optimal conditions, with a certain level of comfort; it's about having balance, being well both physically and emotionally." (Interviewee 4)

"For me, quality of life is about being at peace, in balance. It doesn't mean having everything, but rather feeling satisfied with what you have." (Interviewee 5)

"My children, my friends, they give me the strength to keep going every day." (Interviewee 6)

“I really enjoy going out with my friends, doing fun things, and especially traveling to see my children and grandchildren. That family connection brings me so much joy and makes me feel that, despite the distance, we are still united.” (Interviewee 7)

“Sometimes, small things give me satisfaction, like remembering a funny anecdote with my husband.” (Interviewee 8)

“For me, quality of life is having someone to share my days with and, above all, being well and in good health, even if you don’t have many things. Just being well is enough.” (Interviewee 9)

“My friend is my greatest support right now. Her presence gives me strength and reminds me that all is not lost.” (Interviewee 10)

By analyzing the participants’ responses and linking them to theories on quality of life, it can be observed how their perceptions reflect key elements of quality of life, such as emotional well-being, physical health and personal satisfaction, which are also mentioned in the studies of authors such as Veenhoven (1994), cited in Putallaz P., (2016), the General Treatise on Health in Human Societies (2024), and Fernandez B, (cited in Aguilar J. et al., 2011). First, Veenhoven describes life satisfaction as the degree to which a person evaluates their life positively. This reflected in several of the interviewees’ responses, such as interviewee 1, who points out that “being at peace with oneself and being surrounded by the people one loves” is what gives meaning to their life, and considers that quality of life goes beyond material possessions. This response is in line with Veenhoven’s idea, since the person values personal relationships and their emotional well-being more than any material aspect.

On the other hand, interviewee 2 mentions that the key to quality of life is “having peace, health, and feeling that you are not alone,” highlighting the importance of human relationships and emotional well-being, which also connects with Veenhoven’s theories on how emotional aspects and the perception of satisfaction influence quality of life. Like this interviewee, other participants, such as interviewee 5, emphasize the importance of “being at peace and in balance,” and interviewee 9 points out that “having good health” is enough to feel good about their life, even if they do not have many material resources. These comments show that, for the participants, quality of life closely linked to emotional and physical well-being, elements that Fernandez B. (cited in Aguilar J. et al., 2011) also considers fundamental when talking about quality of life.

Fernandez B. (cited in Aguilar J. et al., 2011) also highlights that mental state, perceived health, and functional abilities are key factors in assessing quality of life. This aligns with the participants’ responses, especially those who mention that quality

of life is not about having everything, but about “feeling satisfied with what one has,” as interviewee 5 states. This suggests that life satisfaction depends on accepting what one has, rather than on material accumulation. Similarly, interviewee 3 highlights a shift in their perception of quality of life, moving from prioritizing material achievements to simply valuing “being alive,” which reflects a reconceptualization of quality of life as a matter of health and existence. Although the interviewees do not explicitly mention functional abilities or independence in daily activities, several allude to the importance of physical and emotional well-being, which connects with the notion of autonomy that Fernandez B. links to quality of life, as interviewee 4 points out.

11. NEGATIVE PERCEPTION OF QUALITY OF LIFE

Abandonment, both emotional and physical, is a recurring theme in the interviewees' responses and presented as one of the main sources of suffering and a decline in the quality of life of older adults. Analyzing the negative perceptions expressed by the participants, it is possible to identify several factors that negatively influence their well-being, as reported by the interviewees.

“I think abandonment is something that is very far removed from my reality. I wouldn't know how to describe it or how to feel it because I've never experienced it.” (Interviewee 1)

“It hurts a lot. It is like feeling that you are no longer important to anyone, as if you no longer have any value. Abandonment isn't just physical, when you're left alone, but also emotional, when no one cares about you, not even to know if you're okay.” (Interviewee 2)

“Honestly, I don't know if I have anything that gives me satisfaction. Sometimes I remember the times with my children, when they were little, when I was doing well, before everything went to hell, but today... I don't know.” (Interviewee 3)

“It's like leaving something or someone out in the cold, without offering them the attention or care they deserve.” (Interviewee 4)

“It's when someone stops mattering to you and you simply decide to ignore them, as if they didn't exist.” (Interviewee 5)

“Family should be a person's pillar of support at that stage of life, not something to be abandoned. They aren't objects you can throw away.” (Interviewee 6)

“Young people are so immersed in technology, in their own problems and activities, which they often forget about older adults. They don't think about them, they don't

realize how important it is for us to have companionship and attention at this stage of life..." (Interviewee 7)

"After my husband died, I started to feel truly excluded. I feel like they have their own lives, their own families, and I no longer have a place in theirs. It's painful, especially because I always tried my best to give them the best." (Interviewee 8)

"Society is moving too fast, and older people are being forgotten, just like young people today who don't even respect their elders." (Interviewee 9)

"I wouldn't know how to describe it, but it's clear to me that they don't understand; they just see us as a burden." (Interviewee 10)

Interviewee two offers a particularly stark perspective on emotional abandonment, stating that "it hurts a lot; it's like feeling like you're no longer important to anyone, like you have no value anymore." This feeling of not being valued, or even of being forgotten, is an experience that profoundly affects self-esteem and the perception of one's own worth.

Interviewee six underscores a crucial aspect of abandonment: the lack of family support. According to their testimony, "family should be a person's pillar at that stage of life; you shouldn't turn your back on them. They're not some object you can throw away." This statement reflects the expectation that family should be a vital support system during old age. However, when that support network weakens or breaks down, the older adult experiences a sense of helplessness that can be devastating to their well-being. Fernandez B.'s theory states that psychosocial factors, such as family support, are fundamental for a quality life. The lack of support or family abandonment can generate feelings of exclusion and loneliness, drastically reducing life satisfaction.

On the other hand, interviewee eight recounts his grief following his husband's death and his feeling of exclusion from his family. He feels that his children, having formed their own families, no longer have a place for him, which is especially painful given the effort he made for them in the past. He expresses how, over time, older adults perceived as a burden by their relatives, reinforcing the perception of being unnecessary or even a nuisance, as interviewee 10 mentions. Similarly, interviewee nine mentions that "society moves too fast, and older people are forgotten," which highlights the feeling that older adults being marginalized in a society that prioritizes youth and dynamism.

Similarly, the same interviewee also points out that "young people today don't even respect their elders," highlighting a lack of recognition and respect for older adults, which contributes to their isolation and loss of their place in society. Finally, from a different perspective, interviewee 1 mentions that abandonment is something "outside of his

reality” and that he does not know how to describe it because he has never experienced it. This suggests disconnect with those who go through situations of abandonment, which often leads society to minimize or ignore the needs of older adults. The lack of empathy and understanding of what it means to be ignored or marginalized is another factor that aggravates the situation of older adults, creating an emotional void that profoundly affects their perception of life.

Finally, the analysis of negative perceptions of emotional and social abandonment among the interviewees reveals how these aspects profoundly affect the quality of life of older adults. The interviewees’ responses, aligned with theories on quality of life, show that abandonment, both physical and emotional, and social exclusion are factors that diminish life satisfaction and well-being in old age. The participants’ experiences suggest that the lack of emotional and family support, social disconnection, and invisibility in modern society are crucial issues that addressed to improve the quality of life of older adults.

12. LIFE SATISFACTION AND ASSOCIATED FACTORS

The analysis of the responses provided reveals a clear relationship between the concepts of life satisfaction and happiness, as proposed by Bilbao et al. (2007) in Murillo J. (2014). According to this perspective, subjective well-being is composed of two main elements: life satisfaction, which based on long-term judgments, and happiness, which related to immediate emotional experiences. The responses provided by the interviewees allow us to analyze how both components interact.

“What satisfies me most now is having raised my children, seeing them well, that they are educated, that they are prepared for life.” (Interviewee 1).

“The only thing that gives me satisfaction now is being able to remember the good times with my children, my grandchildren.” (Interviewee 2).

“What satisfies me most is the moment when I am sober, even if it is for a short time, and I realize that I can still think clearly.” (Interviewee 3).

“What satisfies me most is being well, in good health, and above all, being close to my family and my children.” (Interviewee 4)

“I don’t need much; just knowing that I can enjoy these moments and that I’m in good health.” (Interviewee 5)

“My greatest satisfaction knowing I have a supportive family.” (Interviewee 6)

“What satisfies me most these days is being able to talk to my children, even if it’s just on the phone, and see them when I can.” (Interviewee 7)

“It gives me joy when my grandchildren call me, even if it’s just for a few minutes.”
(Interviewee 8)

“I also find some peace when I see photos of my parents or when I remember happy moments from my childhood.” (Interviewee 9)

“I also enjoy the moments when my children call or visit me, even if they’re brief.”
(Interviewee 10)

In this vein, life satisfaction reflected in the long-term evaluations that the interviewees make about their lives, highlighting achieved goals and significant relationships. For example, Interviewee 1 mentions that his greatest satisfaction is having raised his children and seeing them well prepared for life. This response indicates a deep appreciation of a personal achievement that has a lasting impact on his perception of well-being. Similarly, Interviewees 6, 7, and 10 find satisfaction in family relationships, whether through constant emotional support, phone calls, or brief visits. These elements reflect a trans-situational stability, a positive judgment about family connections over time.

On the other hand, the emotional and affective component of happiness manifests itself in specific and meaningful experiences that the interviewees value in their daily lives. For example, Interviewee 3 describes his satisfaction in experiencing mental clarity during moments of sobriety, highlighting the importance of specific moments that generate a temporary sense of well-being. Similarly, Interviewees 8 and 9 find happiness in small interactions such as calls from their grandchildren or in memories of their childhood. These responses emphasize how fleeting moments and immediate emotional connections contribute to a sense of peace and joy.

A recurring theme in the responses is the emphasis on family, which appears as the central axis of subjective well-being. Both in long-term assessments and in immediate emotional moments, family ties emerge as the primary source of satisfaction. Furthermore, health and the ability to enjoy the present also appear as important factors for some interviewees, such as Interviewee 4, who values being in good health and close to their family, and Interviewee 5, who highlights the importance of enjoying the present moment in good physical condition.

In conclusion, the responses reflect an integration between the cognitive and emotional components of subjective well-being. While life satisfaction based on lasting achievements and meaningful relationships, happiness driven by specific moments and immediate experiences.

13. DISCUSSION

This research, which explored the perception of quality of life among older adults at the “Patricio Trueba de Regil” Clinic Hospital, revealed a complex landscape where emotional, social, and physical factors interact crucially. The findings highlight that subjective well-being in old age is profoundly influenced by satisfaction with interpersonal relationships, health status, and perceived social support, aligning with theoretical approaches that emphasize the importance of these elements in quality of life. In other words, participants associated a good quality of life with non-material elements, prioritizing aspects such as emotional balance, inner peace, and a sense of belonging. This demonstrates that, while material conditions are relevant, they are not the determining factor for perceived well-being. Furthermore, the importance of having strong family and social networks emphasized, these relationships recognized as essential sources of emotional support and a sense of purpose. However, abandonment, both physical and emotional, emerges as one of the greatest factors in the decline of quality of life. This phenomenon described as an experience that generates isolation, loss of self-esteem, and disconnection from the social environment, significantly affecting the perception of well-being, feelings of invisibility and devaluation, linked to a perception of social exclusion. This highlighted as a central problem requiring urgent attention. On the other hand, protective factors also identified that help mitigate the negative effects of abandonment: maintaining meaningful relationships, valuing personal achievements throughout life, and the ability to enjoy life present moments were recurring themes in the participants’ narratives, suggesting that quality of life can be enhanced by strategies that strengthen these elements, regardless of external circumstances. These results support the theories of Veenhoven (1994), Fernandez B. (cited in Aguilar J. et al., 2011), and the General Treatise on Health in Human Societies (2024), which highlight the importance of emotional satisfaction and interpersonal relationships as pillars of quality of life. Similarly, Veenhoven (cited in Putallaz, 2016) emphasizes that life satisfaction is deeply linked to emotional well-being and the perception of meaning in life. This perspective is reflected in the interviewees’ statements, who emphasize that emotional peace and family relationships are essential to their well-being.

14. CONCLUSIONS

It was found that understanding older adults’ perceptions of their quality of life allows for the identification of key factors that directly impact their well-being, such as emotional support, family and social relationships, and their assessment of their health

status. When these factors are deficient, they can negatively affect their lifestyle and contribute to isolation and social exclusion. Based on the results obtained, an intervention project based on the biopsychosocial model proposed. According to Calvo (2023), the biopsychosocial model is essential for understanding the dynamics of abandonment in older adults, as it addresses not only physical conditions but also emotional and social needs, which are determinants of their perception of quality of life. This will allow for an effective and holistic approach to addressing the needs of older adults in situations of abandonment. This initiative recognizes the complexity of the factors that affect their quality of life, integrating biological, psychological, and social dimensions into its approach, by prioritizing interaction among these groups, the project seeks to create an environment that fosters the well-being of this population, integrating strategies that promote the strengthening of family networks, including recreational activities. It also includes awareness workshops for family members and caregivers, with the aim of promoting empathy towards older adults, strengthening family ties, social interaction, and the development of meaningful relationships. In this sense, base the project design on an interdisciplinary approach to ensure an improvement in the quality of life of older adults, especially those who are abandoned.

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