

## Commentary

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# Aging in Social and Biological Part: Attitude to the Environment, Physical Condition and Social Activity

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## Description

Ageing is the biological consequence of a multitude of molecular and cellular damage that accumulates over time. Although it is now understood that biological aging alone does not serve as a unifying factor for older people, it is also true that there are potentially powerful groups of older people who are beginning to become more aware of their social status. Age-related biological changes in the human body have an impact on mood, attitude toward the environment, physical health, social activities, and elder status in the family and community. The term "psychical ageing" describes how human consciousness and his ability to adjust to aging.

This causes one's physical and mental abilities to gradually decline, their chance of illness to rise, and eventually their demise. These changes are only tangentially correlated with an individual's age in years, and they are neither linear nor consistent. The variety observed in later life is not coincidental.

The psychological and social aspects of an elderly person's existence are linked to their perceptions of dignity, regardless of whether they are independent seniors or weak, dependent, and nonself-sufficient sick. A person's sense of dignity in old age can be seriously threatened by social invisibility and lack of acknowledgment, which is why older inpatients tend to be more concerned about loss of dignity. Therefore, attitudes regarding aging and associated ideas like "quality of life" and "positive aging" are linked to dignity in old age. Claimed that maintaining one's dignity is essential to aging comparing the concept of dignity to other facets of older individuals' life, such their perspectives on aging, might put this claim to the test and provide valuable information.

In addition to enabling people to pursue what matters to them, supportive social and physical surroundings also help people maintain their ability. Examples of supportive surroundings include areas that are convenient to stroll about, have safe and accessible public transportation, and buildings. When creating a public health response to ageing, it's critical to take into account strategies that may support recovery, adaptability, and psychological development in addition to those that address the losses that come with becoming older. Multidimensionality should be used to characterize successful aging.

Developmental psychology defines SWB and life satisfaction as one of the vital requirements for good aging, as was previously indicated. One area or dimension of SWB is life fulfilment, which is the assessment of one's own life and circumstances. It strikes a balance between what is considered the "ought life" and "real life." If there is no discernible difference between the results of these two tests, the person will have a high level of life satisfaction.

A constructive contribution to the development of dignity might be made by assessing older individuals' views regarding aging and investigating the variables that may impact such sentiments. There may be favourable effects on one's health and quality of life. To the best of our knowledge, however, little research has been done in Europe on the connection between views toward aging and older persons' subjective evaluations of their dignity. There was just one research (by the authors of this publication as well) that looked at older individuals opinions regarding aging and quality of life. According to the study's findings, older people's views on aging in the context of psychological losses were predicted by factors such as dignity.

### Conclusion

Thus, this study examined the attitudes about aging that older individuals who live at home and those who are hospitalized differ from one another, as well as whether or not dignity and other particular criteria are predictive of attitudes toward aging in these two populations.

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