

SENIORS ABOUT AGEING AND OLD AGE – AN EXAMPLE FROM POLAND

ABSTRACT

Ageing of the population is an important phenomenon in the society, it is also the normal process of time-related change which begins with birth and continues until death. These changes include how a person feels and functions with respect to physical or mental competences. We can use numerous measures and classifications to analyse the advancement level of the ageing of society. The quality of ageing and the way of experiencing old age translate into seniors' activity and activation, and that very often depends on their health and the level of independence. Active lifestyle makes an individual feel needed, free and independent, he/she has the sense of belonging to smaller and bigger social groups, thus, the process of experiencing old age becomes delayed. The lack of activity has its consequences in the sense of loneliness and social isolation, or even premature death.

KEYWORDS: *old age, ageing, activity, anxieties, expectations*

INTRODUCTION

The more and more visible process of ageing societies is contributing to the growing interest in the problem of old age, particularly with regard to the social perception of old age itself and to the related complex process of ageing. Contemporary old age is really varied in terms of age, sex, education level, and first of all in terms of health and independence level, thus, the way of

experiencing it is very individual. However, one can indicate some trends and tendencies which accompany this process. At present, seniors prepare better and better to go through old age, more and more often they take advantage of various forms of activity, owing to which they can face the consequences of ageing and experience their old age more and more consciously. This paper attempts to analyse the indicated aspects, considering seniors' attitudes towards the discussed problems. It is a set of theoretical deliberations consistent with the literature of the subject and empirical deliberations collected based on generally available statistical data and the author's own research findings. The presented research is of an exploratory nature and the paper is of a cognitive nature, it aims at diagnosing the factors of activity of the elderly and defining their anxieties and expectations related to old age and ageing.

OLD AGE PERIODISATION

In recent years in Poland, we have been able to observe dynamic changes in the population age structure, which are the consequence of the prolongation of average life expectancy and persistent low fertility level. The changes are a result of the transformations in fertility and death rate, which naturally translates into an increase in the percentage of people aged 60 and above, and thus we are facing the population ageing process (Linz and Stula, 2010, pp. 3-4). Demographic changes, consisting in the transformation of the population structure into a much older population, are visible in each European Union (EU) member state, where the share of population aged 65 and above is growing. Over the last 250 years, all societies in Europe have experienced the transition from reproduction with high intensity of births and deaths to reproduction with low fertility and death rate (Szukalski, 2006, p.13). For many researchers the changes are treated as the most important processes of the 21st century from the point of view of economy, family, and social life (Sattersten and Trauten, 2009, pp. 455-469).

Ageing and old age are two different notions which, contrary to common belief, are not easy to define. One could think that everybody knows what old age is and what ageing consists in but when we come to details, definition

problems start to occur. It results from the richness of contents and perspectives from which they are analysed. The first is treated as a phenomenon, a stage of life, whereas the other one is a process. Old age as a stage, a state in human life is static, whereas ageing is treated as a development process and is a dynamic phenomenon. Old age is a consequence of the ageing process characterised by changes in three fundamental areas: the biological, mental, and social one. Ageing is an irreversible, long-term process which develops gradually, as a result of which new mechanisms occur in the body, enabling to maintain an individual alive in new conditions. Initially, the social ageing stage takes place, which is understood as a stage of life when an individual's professional activity stops, and they stop playing professional roles (Rembowski, 1984, p. 24). Then, professional roles should be naturally replaced by new family and social roles.

Population ageing is a complex process, in consequence leading to demographic old age consisting in an increase in the percentage of people representing the oldest age groups in the population, 60 years old and above (Holzer, 1999, p. 151). In the literature of the subject the age of 60 (the WHO) or 65 (the UN, Eurostat) is adopted most often as chronological old age. Numerous measures and classifications are used to analyse the advancement level of the ageing of society. According to the UN criterion, the old population is assumed to be one in which the share of population aged 65 and above exceeds 7%, whereas the percentage over 10% means the stage of advanced old age. Another measure of the advancement of the ageing process is also the median age that is interpreted as the age half of the population has not reached yet and the other half has already reached. For Poland, the value of this measure will go up from 40.1 years old in 2020 to 52.5 years old in 2050. In the division into sex, it is predicted that in 2050 the median age will be 54.8 for women and 50.1 for men (GUS, 2014, p. 127), which indicates that the Polish society is growing old very fast, and it will be one of the oldest societies in Europe. This statement is additionally confirmed by the current data of the Central Statistical Office (GUS, 2022, p. 4), according to which in the 2021 median age was 42 years old, 40.4 for men, 40.4 and 43.6 for women.

In the coming years, the percentage of elderly people in the total population will grow substantially, as a large part of the post-war baby boomers will achieve

the retirement age. The increasing number of the senior population in society contributes to the fact that we can look at the process in the micro-scale, when old age will be analysed as another stage in human life. The population ageing process is often perceived as a real social threat, especially when the permanence of the relationship between biological age and physical and mental independence of the body is assumed (Szukalski, 2008, p. 44). However, it should be remembered that the rising life expectancy should be accompanied by the slowdown of the ageing process, especially at the individual level, the result of which is the later experience of events traditionally identified with old age. In other words, proper preparation to old age can reduce the pace of ageing at the individual level. At the same time, also the approach to ageing in the macro-dimension is transformed, where we observe the transition from the category of threat or risk arising from ageing to the category of a challenge (Lee, 2016, p. 59). This challenge will be first of all the ability to use knowledge, professional, social and family experience of the elderly. Therefore, the dynamic growth of the elderly population does not have to translate automatically into the growth of burdens (Pang and Warshawsky and Weitzer, 2008).

More and more often, elderly people prefer a different style of ageing than their peers in previous decades, but contemporary seniors are an extremely varied population in terms of demographic and social characteristics. Attention is also paid to different lifestyles of elderly people, from totally passive to those actively participating in family, social or professional life. However, it should be remembered that the ageing style depends on the abilities of an individual and accompanying conditions. I mean primarily the acceptance of old age in the individual dimension and the ability to experience it, as well as the social acceptance of senior citizens to which social support will be necessary (Kawińska, 2021, p. 151).

Social support is needed to people in any age, however, elderly people need it much more often, and this need increases with the loss of independence, as a result of the biological ageing of the body. The sources of the support are sought primarily in the resources of social networks created by family members, friends, neighbours (so-called primary source of support), or some institutions, self-help groups (so-called secondary source of support). Senior citizens should have the possibility to fulfil their own needs independently as long as possible,

yet due to the progressing ageing process doing some activities is not possible to on one's own (Szatur-Jaworska and Szweda-Lewandowska, 2016, pp. 14-15).

An increasing number of elderly people in population is the reason for which they are more noticeable today but equally often they are assessed through the prism of stereotypes and wrong convictions (Szatur-Jaworska and Szweda-Lewandowska, 2016, pp. 14-15). Such uncertainty and fear of social acceptance affect the subjective assessment of seniors' life and the way they experience their old age (Staś-Romanowska, 2004, pp. 263-292). The consequence of the fear of old age and panic fear of passing away (often one's own) is the concern about worsening health, psycho-physical fitness, dependence on the assistance of others and the limitation of freedom in everyday life. It is also accompanied by the fear of the lack of social acceptance and the sense of losing importance, which arises from the cessation of professional activity. Leaving the labour market has its consequences in the reduction of income of the household, which is a difficult experience for many old age pensioners (Szatur-Jaworska, 2000, p. 187). In addition to the worsening health, leaving the labour market and limiting their participation in social life, senior citizens are afraid of the loss of independence and excessive dependence on the help of others. Old age is also associated with loneliness resulting from the children becoming independent, widowhood, the loss of relatives and friends who move out or die (Schmidt and Boland, 1986, pp. 255-260).

ACTIVE OLD AGE AND ACTIVE AGEING OF POLISH SENIOR CITIZENS

The quality of ageing and the way of experiencing old age translate into seniors' activity and activation, and that very often depends on their health and the level of independence (Paul and Teixeira and Ribeiro, 2017). In the literature of the subject activation is often understood as the totality of activities aimed at the inclusion of an individual in the participation in different areas of life, that is conducting active lifestyle. Activation in such a dimension will be aimed at developing in seniors the ability to become elderly people and the ability to find proportions between the necessity to resign from the

areas of previous activity and not give up and the continuation of active life (Schmidt and Boland, 1986, pp. 255-260).

At the same time, activity may be also understood as a synonym of life, as the condition of the proper functioning in family, society and the state, that is as the ability to take actions (Dzięgielewska, 2006, pp. 160-164). Undertaking activity in the environment is influenced by numerous factors, among which a significant role is attributed to:

- education – the higher the education, the higher the level of activity;
- relations in the family environment – activity depends on personality, family, background, contacts with nearer and more distant family members;
- health and fitness level;
- sex – women are the majority in the elderly population, and they undertake activity more often;
- place of residence (country, city), which translates into the accessibility of institutions activating seniors and their offer.

According to the World Health Organization (WHO, 2002, pp. 19-32), the active aging model encompasses six groups of determinants:

1. availability and use of health and social services (e.g., health promotion and prevention; continuous care);
2. behavioral determinants (e.g., exercise and physical activity; drinking and smoking habits; feeding; medication);
3. personal determinants (biology and genetics, and psychological characteristics);
4. physical environment (e.g., safety houses, low pollution levels);
5. social determinants (e.g., education, social care);
6. economic determinants (e.g., wage, social security).

This group is complemented by two crosscutting determinants—gender and culture. In this model the key elements of active aging are:

- autonomy, which is the perceived ability to control, cope with, and make decisions about how one lives on a day-to-day basis, according to personal rules and preferences;

- independence, which refers to the ability one has to perform functions related to daily living, i.e., the capability of living in the community with no and/or little help from others;
- quality of life;
- healthy life expectancy, which refers to how long people can expect to live in the absence of disabilities.

The main pillars of the model are participation, health, and security (Bárrios, 2015).

When discussing issues related to activation and activity of senior citizens, we should also mention active old age and active ageing. Active old age (previously also called “successful ageing” in the literature) is the ability to participate in social, cultural life, time to develop interests, broaden knowledge, maintain and establish interpersonal contacts. The basis of active ageing is deepening one’s interests and the longest possible maintenance of physical and mental fitness, which favours the longest possible independence (Gryglewska, 2006, pp. 47-50).

Social activity of elderly people is a proof for the capability of further guidance of one’s development and striving for values giving a greater sense to human existence. One of the ways of conducting the active ageing policy is the development of the activity of support centres (Fields and Anderson, 2014), which include day care centres, senior clubs or Third Age Universities (UTW). The main role of such centres will be to maintain and develop skills necessary for independent and active life and to organize assistance in the social environment in the cooperation with family, social groups, organisations and other institutions.

According to the Central Statistical Office (GUS) data published in 2018, elderly people are more and more willing to participate in forms of cultural activity organized by cultural centres, clubs and community centres. Of people aged 60 and above, 31.8% were characterized by active participation in the activities of different clubs and sections, and over a year their number increased by 7.3%. Elderly people also use various courses organized by cultural centres, clubs and community centres. In the studied year almost 18.5 thousand people aged 60 and above completed courses organized by the aforementioned cultural institutions, constituting 18.4% of their total graduates. The highest numbers

of seniors completed foreign language courses (nearly 5.5 thousand people) and computer courses (more than 5.4 thousand people). However, it should be pointed out that the forms of activity seniors take part in often depend on the place of residence and the local availability of the offer (GUS, 2020).

Senior citizens are also active members of libraries and make up more than 14% of the total number of readers. Senior clubs and Third Age Universities (UTW) conducted by the discussed institutions were very popular among elderly people. The UTW mission is to activate senior citizens through, among others, education, science, broadening knowledge and the development of students' interests, as well as to arrange ways of spending free time and enable to meet new people. In 2019 in Poland in the structure of various organizations 640 facilities of this type conducted such activities. Of students, 86.3% were people aged 61 and above. The most numerous groups of their participants were younger seniors (61–75 years old), whose participation in the analysed period was 70.3% of the total number of participants, and people aged 76 and above constituted 16.0%. 84.3% of the students were women and old age pensioners, 87.8%, as well as people with secondary level education, 50.5%. Educational, activating and integrating activities were in 96.0% lectures and seminars, especially concerning medicine and health, culture and art, as well as nature and tourism (GUS, 2019).

One of necessary elements of keeping satisfactory health and functional fitness of seniors is sport and physical activity. Over one-fourth of people aged 60 and above took part in sports and physical recreation classes, and 49.6% did exercise systematically, that is at least once a week. The main motive for doing sport or recreation for seniors was pleasure and entertainment. That was the reason for doing sport or physical recreation for 40.5% seniors, whereas 31.7% of elderly people doing sport did it for health, because of doctors' recommendations, and 21.0% to keep fit and maintain proper silhouette. Out of sports and physical recreation classes, seniors most often chose cycling (64.6% of elderly people do sport and physical recreation). Also, jogging and Nordic walking were very popular, as well as general physical activities and those improving fitness, and swimming. 27.4%, 19.8% and 18.2% seniors doing sport and physical recreation took part in those classes, respectively (GUS, 2019).

EXPECTATIONS AND ANXIETIES RELATED TO OLD AGE

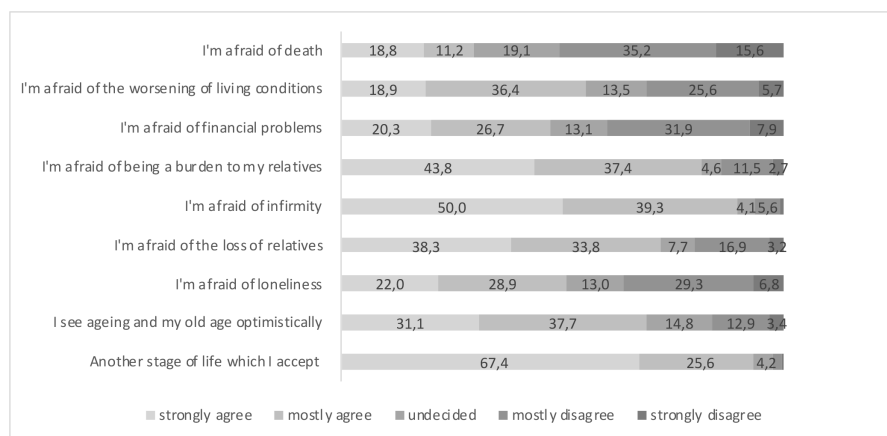
In the part concerning expectations and anxieties related to old age, I will refer to my own research^[1] conducted in 2019. Statistical observation covered 453 people aged 60 and more living in the Warmińsko-Mazurskie Voivodeship. What distinguishes the surveyed group was the fact that all the respondents were carers of dependent people. It was a deliberate research intention, due to which, while analysing old age and ageing, the respondents could share both their own experiences and observations resulting from caring for dependent seniors. The selection procedure was based on intentional choice, meeting the above criterion, thus guaranteeing the study's exploratory nature. Purposeful selection does not guarantee the sample's representativeness, but in this case, it becomes a premise for a better understanding of the studied population. What distinguishes the surveyed group is their diverse activity and willingness to develop their own competencies in this area by participating in training in the field of caring for a dependent senior. The presented study was conducted during such training, which increased the spectrum of exploration. Additionally, the recommendation of the quantitative research methodology itself was based on the assumption that the empirical process would provide information, enabling the description and explanation of the research problem, which oscillated around the issues raised.

The method used during the research was a questionnaire, which the respondents themselves filled in. Statistical analysis was carried out on the SPSS/PASW Statistics data matrix, enabling tabular reports to be created for detailed analysis. The proposed research tool made it possible to create cross rates taking into account metric variables and essential questions, increasing the cognitive spectrum of the researched issues. Tables of empirical frequency of indication distributions and contingency tables were used as a classic data analysis and reduction method.

Considering all the circumstances and conditionings related to ageing, it seems positive that in great majority of the surveyed seniors, old age is primarily another stage in life, which is proven by 67.4% opinions strongly accepting this condition and 25.6% mostly accepting it. What is more, a great majority optimistically look into the future when assessing their old age,

where 31.1% strongly see their old age and ageing in this way, and 37.7% are mostly convinced about it. On the other hand, the greatest anxiety is caused by the awareness of the loss of independence, which is pointed to by 50.0% of respondents who strongly agreed, and 39.3% who mostly agreed with the statement. On losing independence there is a necessity to use the support of others and this is also something the surveyed seniors are afraid of, of which 43.8% are very afraid of being a burden for others, and 37.4% are moderately afraid of it.

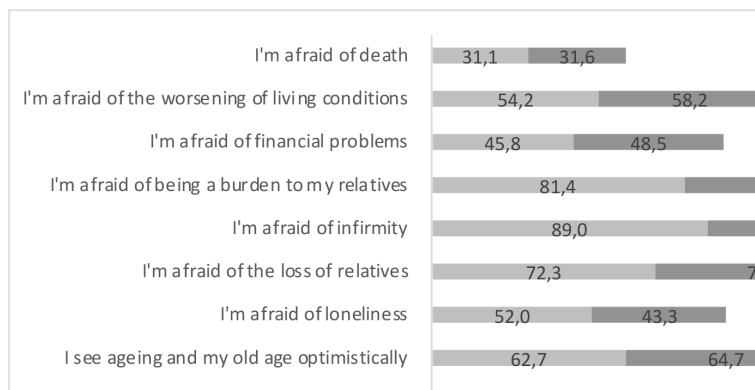
Table 1. Expectations and anxieties related to old age in respondents' opinions (in %)



Source: own study

Taking into consideration the fact that on average women live longer than men, sex as a differentiating variable indicates a little different perception of old age. It turns out that women more often than men accept old age as another stage in life (the distribution of responses 94.2% for women and 87.3% for men), but their attitude to it is not as optimistic as in men (62.7% to 64.7%). Women are also more afraid of loneliness, the loss of relatives and being a burden to others, whereas men report fears related to the worsening of the living conditions and financial problems.

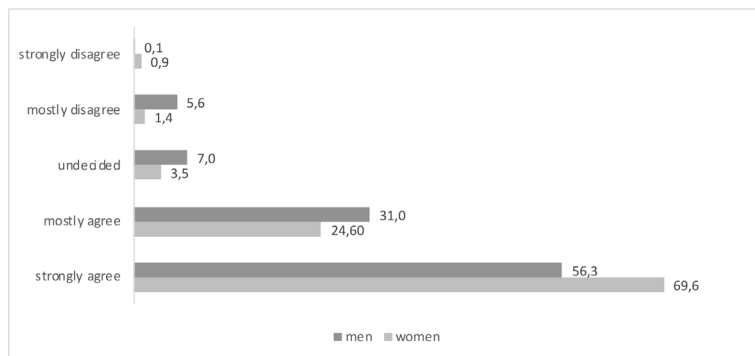
Table 2. Expectations and anxieties related to old age in men's and women's opinions according to the totality of opinions strongly agree and mostly agree (in %)



Source: own study

A detailed analysis considering strongly agree and mostly agree responses enable more exact indication of differences in perceiving old age by women and by men. The acceptance of old age as another stage in life was the response women agreed more strongly with, which is seen in the level of strongly agree responses, which is 69.6% (56.3% men gave such responses). Mostly agree answers distribute inversely, where for men we have 31.0% and for women 24.6%.

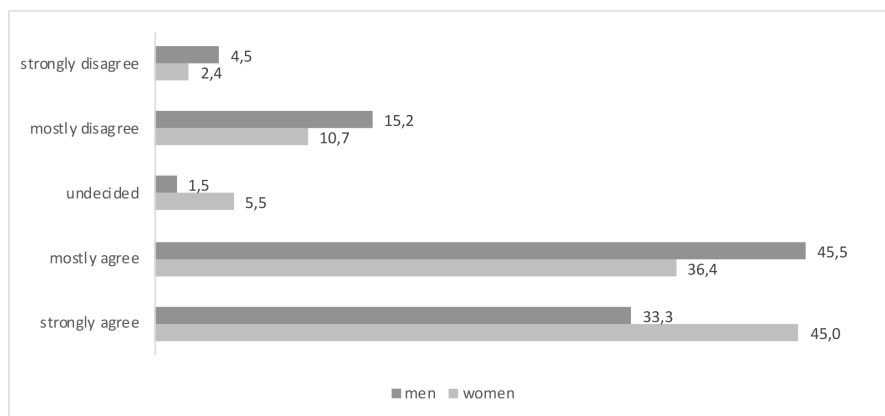
Table 3. Another stage in life which I accept in women's and men's opinions (in %)



Source: own study

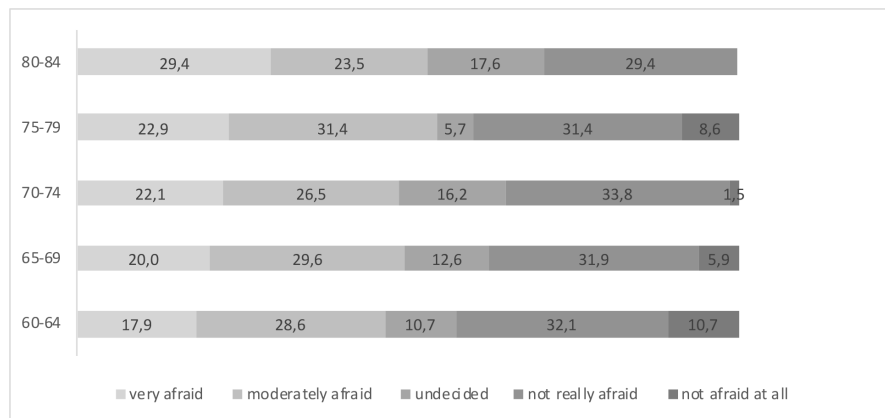
In the general statement that in old age I will be a burden to others, the differences between men's and women's anxieties were only 2.6%, but detailed differentiation in the opinions strongly agree and mostly agree are a proof for the differentiation of female and male attitudes towards old age. For 45% women a serious problem in old age is the fear that they will be a burden to others, in the case of men such a fear was expressed by 33.3% respondents. At the same time, men were more cautious in expressing such a fear, much more often than women giving the mostly agree response (women 36.4%, men 45.5%)

Table 4. The fear that I will be a burden to relatives in men's and women's opinions (in %)



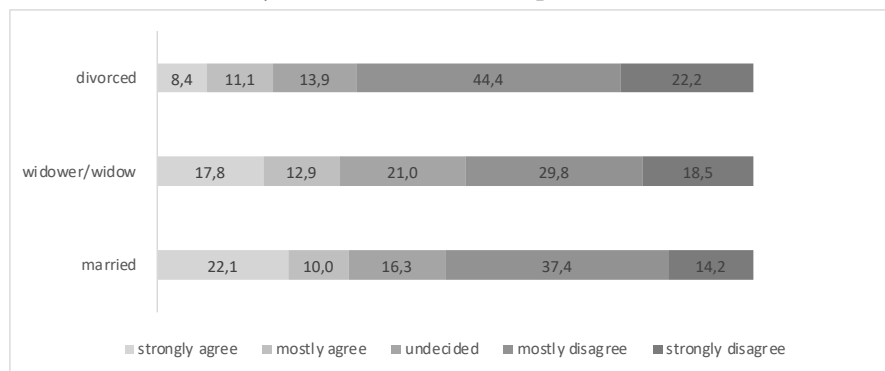
Source: own study

One of the crises experienced in old age is the loss of relatives and the sense of loneliness. As it turns out, the fear of loneliness in old age increases with seniors' age, which can be observed when analysing the research findings with regard to the respondents' age variable. People aged 60-64 in 17.9% are strongly afraid of loneliness in old age, and for people aged 80 – 84, the level of such responses was 29.4%.

Table 5. Fear of loneliness by respondents' age (in %)

Source: own study

An important variable differentiating seniors' attitudes towards old age was their marital status, which is particularly visible when assessing their fear of death. Married people are much more afraid of death than divorced people (the distribution of very afraid responses was 22.1% and 8.4%). It can prove a bigger sense of responsibility for sharing life with spouses and their life after our death, which in the case of divorced people does not play such a significant role.

Table 6. Fear of death by the marital status of respondents (in %)

Source: own study

CONCLUSIONS

Active lifestyle makes an individual feel needed, free and independent, he/she has the sense of belonging to smaller and bigger social groups, thus, the process of experiencing old age becomes delayed. The condition of the active participation of seniors in social life is their health, the level of fitness and independence. Additional factors conditioning the activity level is also an individual's living environment, openness and possibility of social contacts. People actively participating in social life are characterized by higher life satisfaction, which also translates into its quality. In the era of ageing society and dynamically growing population of old citizens, the development of the activity theory must be expected. In addition to the fact that they are more satisfied with life, active senior citizens enjoy better mental and physical health, thus, they maintain independence longer (Halik, 2002, pp. 34-39).

On the other hand, the lack of activity has its consequences in the sense of loneliness and social isolation, or even premature death. Bad health, a difficult financial situation, limited forms of spending free time arise from passive lifestyle, which translates into focusing only on oneself and one's problems and constant emphasising inconveniences of life (Halik, 2002, pp. 34-39). Over the whole life an individual experiences the process of transformations which teach that one should be prepared for the new, no matter what it will be like. The ageing process itself is very individualised, it has a lot of dimensions and, as it turns out, subjective psychological and social indicators responsible for the quality of life may be more important than biological age (Okła, 2006, pp. 29-38).

It also translates into the perception of one's own old age and the expectations and anxieties resulting from it. Contemporary seniors, particularly those who are still trying to participate actively in life, optimistically look into the future and treat old age as another stage in life. However, they fear most often of infirmity arising from the loss of independence, and, what follows, being a burden to relatives. Entering old age is often associated with a revaluation of everyday life, reorganising tasks, and setting goals. On the one hand, these are expectations resulting from the possibility of taking on a new family and social roles (Bojanowska, Kawińska, 2020, p-78), openness to maintaining and creating new peer contacts, adapting to financial constraints, or coping

with crises. At the same time, concerns related to old age have already been presented in the research. In all this, we must also remember that in the case of the elderly, the role of the family as the basic institution providing support, assistance, and care will decrease. Because although today we are dealing with a four-generation family, at the same time, we observe the disintegration of a multi-generational family, the nature of bonds is transformed, and the intensity and frequency of family contacts decrease. According to the Central Statistical Office (GUS) forecasts, by 2050, the potential support indicator, defined as the number of people aged 15 to 64 per 100 people aged 65 and over, will fall almost three times – from 468 in 2013 to 169 in 2049. At the same time, the parental care ratio, defined as the number of people aged 85 and more per 100 people aged 50 to 64, will increase almost five times – from 8 to 38. Therefore, we can assume that the way of experiencing old age will depend both on the seniors and the conditions and opportunities that accompany this process. Moreover, in all this, we must remember and care for the special dignity of the elderly. First, it is the dignity rooted in being a human person, regardless of the degree of independence and activities undertaken.

Based on the analysis conducted, we can suppose that the way of experiencing old age will depend both on seniors themselves and the conditions or opportunities which accompany this process. The conducted activity, in the professional, social or family dimension will certainly favour the quality of ageing, and the experienced changes accompanying this process will be easier to accept.

REFERENCES

- Bojanowska, E., Kawińska, M. (2020), *Personalistyczna wizja starości*, Warszawa, p. 78.
- Dzięgielewska, M. (2006). Aktywność społeczna i edukacyjna w fazie starości, in: B. Szatur – Jaworska (eds), *Podstawy gerontologii społecznej*, Warszawa, pp. 160 – 164.
- Fields, N., Anderson, K. (2014). The Effectiveness of Adult Day Care Services for Older Adults, *Journal of Applied Gerontology*, 33(2), pp.130-163.
- Gryglewska, B. (2006). *Prewencja gerontologiczna*, in: T. Grodzicki, J. Kocemba, A. Skalska, *Geriatrya z elementami gerontologii ogólnej*, Gdańsk, pp. 47-50.
- Halik, J. (2002). Sytuacja ludzi starych w Polsce. Podsumowanie, in: J. Halik (eds), *Starzy ludzie w Polsce. Społeczne i zdrowotne skutki starzenia się społecznego*, ISP, Warszawa, pp. 34 – 39.
- Holzer, J.Z. (1999). *Demografia*, Warszawa, p. 151.
- Kawińska, M. (2021). O starzeniu się z perspektywy społecznej i demograficznej, in: O. Kotowska – Wójcik. M. Luty-Michalak, J. Wróbleśka-Skrzek, B. Olszewski (eds), *Gaudium et spes – powinność współczesnego człowieka. Księga dedykowana Profesorowi Andrzejowi Ochockiemu*, Poznań, p. 151.
- Okła, W. (2006). *Psychospołeczne uwarunkowania jakości życia osób starszych w rodzinach własnych i w domach opieki społecznej*, in: S. Steuden, M. Marczuk (eds), *Starzenie się a satysfakcja z życia*, Lublin, pp. 29–38.
- Rembowski, J. (1984). *Psychologiczne problemy starzenia się człowieka*, Poznań, p. 24.
- Settersten, RA. Jr, Trauten, M. (2009). Handbook of Theories of Aging, in: V. Bengtson, M. Silverstein, D. Putney, S. Gans, (eds). New York: Springer; 2009. pp. 455–469.
- Schmidt, D., Boland, S. (1986). Structure of perceptions of older adults: Evidence for multiple stereotypes. *Psychology and Aging* 1, pp. 255-260.
- Staś – Romanowska, J. (2004). Późna dorosłość. Wiek starzenia się, in: B. Harwas-Napierała, J. Trempała (eds.), *Psychologia rozwoju człowieka. Vol. 2. Charakterystyka okresów życia człowieka*, Warszawa, pp. 263 – 292.
- Szatur-Jaworska, B. (2000). *Ludzie starzy i starość w polityce społecznej*, Instytut Polityki Społecznej, Wydawnictwo UW, Warszawa, p.187.
- Szatur-Jaworska, B., Szweda – Lewandowska, Z. (2016). Wsparcie społeczne i jego uwarunkowania, in: B. Szatur-Jaworska, P. Błędowski (eds.), *System wsparcia osób starszych w środowisku zamieszkania*, Warszawa, pp. 14-15.
- Szukalski, P. (2006). Procesy starzenia się ludności – przyczyny, etapy, konsekwencje, in: T. Grocki, J. Kocemba, A. Skatulka (eds.), *Geriatrya z elementami gerontologii ogólnej. Podręcznik dla lekarzy i studentów*, Gdańsk, p. 13.
- Szukalski, P. (2008). Polscy seniorzy w przyszłości, in: *Polska w obliczu starzenia się społeczeństwa*, PAN Komitet Prognoz Polska 2000 Plus, Warszawa, p. 44.

NETOGRAPHY

- Bárrios, MJ. (2015). Active Ageing: A Policy Framework in Response to the Longevity Revolution, *Forum Sociologico*, Serie II, 26/2015 <https://doi.org/10.4000/sociologico.1228>.
- GUS. (2014). Prognoza ludności na lata 2014-2050, Warszawa. <https://stat.gov.pl/obszary-tematyczne/ludnosc/prognoza-ludnosc/prognoza-ludnosc-na-lata-2014-2050-opracowana-2014-r-,1,5.html> (access 14.01.2022).
- GUS. (2020). *Sytuacja osób starszych w Polsce w 2019 r.*, Warszawa. <https://stat.gov.pl/obszary-tematyczne/osoby-starsze/osoby-starsze/sytuacja-osob-starszych-w-polsce-w-2019-roku,2,2.html> (access 14.01.2022).
- GUS. (2020). *Uniwersytety Trzeciego Wieku w roku akademickim 2017-2018*, Warszawa. <https://stat.gov.pl/obszary-tematyczne/edukacja/edukacja/uniwersytety-trzeciego-wieku-w-polsce-w-2018-r-,10,2.html> (access 14.01. 2022).
- GUS. (2022). *Polska w liczbach 2022*, Warszawa. <https://stat.gov.pl/obszary-tematyczne/inne-opracowania/inne-opracowania-zbiorcze/polska-w-liczbach-2022,14,15.html> (access 09.11.2022).
- Lee, R. (2016). Handbook of the Economics of Population Aging, University of California, Berkeley, CA, p. 59. <https://www.sciencedirect.com/science/article/abs/pii/S2212007616300025> (access 14.01.2022).
- Linz, K. Stula, S. (2010). Demographic change in Europe – An Overview, Institut für Sozialarbeit und Sozialpädagogik e.V, Frankfurt, pp. 3-4. http://www.sociopolitical-observatory.eu/uploads/tx_aebgppublications/Working_Paper_no_4_Observatory_Demographic_change_in_Europe_Overview.pdf (access 10.01.2022).
- Pang, G., Warshawsky, MJ., Weitzer, B. (2008). The Retirement Decision: Current Influences on the Timing of Retirement Among Older Workers, Watson Wyatt Worldwide Technical Paper. <http://www.watsonwyatt.com/research/pdfs/2008-WT-0018.pdf> (access 10.01. 2022).
- Paúl, C., Teixeira, L., Ribeiro, O. (2017). Active aging in Very Old age and the relevance of Psychological aspects, *Front. Med.*, 30 October 2017, Sec. Geriatric Medicine, <https://doi.org/10.3389/fmed.2017.00181>
- WHO. (2002). Active Aging: A Policy Framework. Geneva: World Health Organization, pp. 19-32. <https://extranet.who.int/agefriendlyworld/wp-content/uploads/2014/06/WHO-Active-Ageing-Framework.pdf> Retrieved on 16 January 2022.

ENDNOTES

- ^[1]The research *Postawy seniorów wobec starości i społecznych uwarunkowań starzenia się*, was conducted by E. Bojanowska, M. Kawińska.