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TOWARDS AGEING SOCIETIES. EXEMPLIFICATIONS AND CHALLENGES

| Abstract

- ▶ *Goal* – the text presents selected areas of functioning of people 65+ against the background of demographic changes in Europe (taking into account the statistical data of Poland and Lithuania), with particular attention to the life situation of the elderly, quality of life, experiencing widowhood. The study is not strictly comparative. Its aim is to point out the consequences of ageing societies and the resulting challenges.
- ▶ *Research methodology* – the author of the article used the analysis of the literature on the subject, the analysis of existing statistical data and the method of document research.
- ▶ *Score/results* – the data of the European Statistical Agencies (also taking into account the findings of Poland and Lithuania) clearly indicate the process of ageing of societies, emphasizing their current and future (projected) dynamics. The demographic ageing of societies, taking into account the so-called double ageing mechanism (i.e. the emergence of an increasing number of the oldest people in the elderly population), is becoming a real context for our coexistence. On the basis of European, Polish and Lithuanian statistical agencies, I present selected areas of seniors' functioning. In the case of existing quantitative statistical data, I have attempted to compare them in selected areas. I have supplemented the picture of the functioning of seniors with qualitative data, which should be interpreted as specific signals and tendencies. Demographic changes have an impact on the living situation of people aged 65+ and on the quality of their life. The changes bring both: opportunities and threats. Such a situation requires special intervention and preventive measures, which I refer to in the conclusion.

- ▶ *Originality/value* – the article expands knowledge about the aging of societies and its impact on the functioning and quality of the life of seniors. Particular attention was paid to the experience of widowhood and its consequences for the life situation of widowed people.

| **Keywords:** ageing, elderly, quality of life, widowhood.

1. Introduction

Demographic aging of societies is a fact. It is no longer present only in long-term demographic forecasts, but becomes the real context of our coexistence. Observed already in the 70s of the last century, the increasing dynamics of processes associated with the aging of societies now appears to be a significant feature of socio-civilizational changes. Taking into account the mechanisms, scope, course and effects of the ageing process, it should be stated that it is a global process. They include the societies of Europe and other highly developed countries of the world. Against the background of demographic changes in Europe and national demographic trends and forecasts, it is worth pointing out the descriptors of the quality of life and selected spheres of functioning of people 65+, paying particular attention to the life situation of the elderly, including the elderly widowed.

The examples and challenges indicated in the title are visible and felt both in the macro dimension (systemic, migration, economic, legal and medical challenges) as well as in the micro dimension (everyday functioning of widowed people, their health and material condition and housing situation, family and social relationships, experienced difficulties).

I focus my attention on the ageing populations of Poland and Lithuania for several reasons. First of all, the text is an elaboration on the main theses presented at the 10th International Interdisciplinary Scientific Conference entitled “The Place of Vilnius and Warsaw in the Processes of Regional and Euro-Atlantic Integration (Disintegration) – Progress, Challenges, Perspectives”, held in Vilnius on June 1–3, 2023. Secondly, such an opportunity is provided by the profile of this periodical, especially the borderland of north-eastern Poland (neighbouring EU member states - Poland and Lithuania). Furthermore, I would also like to emphasise my personal scientific interests regarding the issues of aging, old age and widowhood.

2. Ageing EU populations

In the light of the European [Eurostat, 2022], Polish [Główny Urząd Statystyczny (GUS), *Urząd Statystyczny w Białymstoku*, 2021] and Lithuanian [*State Data Agency (Statistics Lithuania)*, 2023] reports of statistical agendas, the aging of the population appears as one of the most important demographic processes of the twenty-first century.

The EU population was estimated at 446.7 million on January 1, 2022. The proportion of older people (aged 65 years or older) reached 21.1 percent (an increase of 0.3 percentage points (p.p.) compared to the previous year and an increase of 3.1 percentage points compared to 10 years earlier). The median age of the EU population is also increasing. On January 1, 2022, it was 44.4 years old, which means that half of the EU population was older than 44.4 years. Of course, after the outbreak of the COVID-19 pandemic in 2020, life expectancy fell in the vast majority of EU Member States – from 81.3 to 80.4 years.

We can indicate the aging of the population when 7–10 percent of the population are people over 65 years of age (WHO, 1998).

According to a forecast by the European Statistical Office (Eurostat), the share of old people in 2050 will exceed 30 percent in six EU countries: Portugal (34.6 percent), Greece (33.9 percent), Spain (33.4 percent), Germany (31.8 percent), Slovakia (31.0 percent) and Bulgaria (30.1 percent). In Poland, the share of people 65+ will approach 30.0 percent (Eurostat, 2022).

The demographic forecast assumes that in 2050 in the European Union the number of elderly people will be almost twice as high as of children and young people [Janiszewska, 2015].

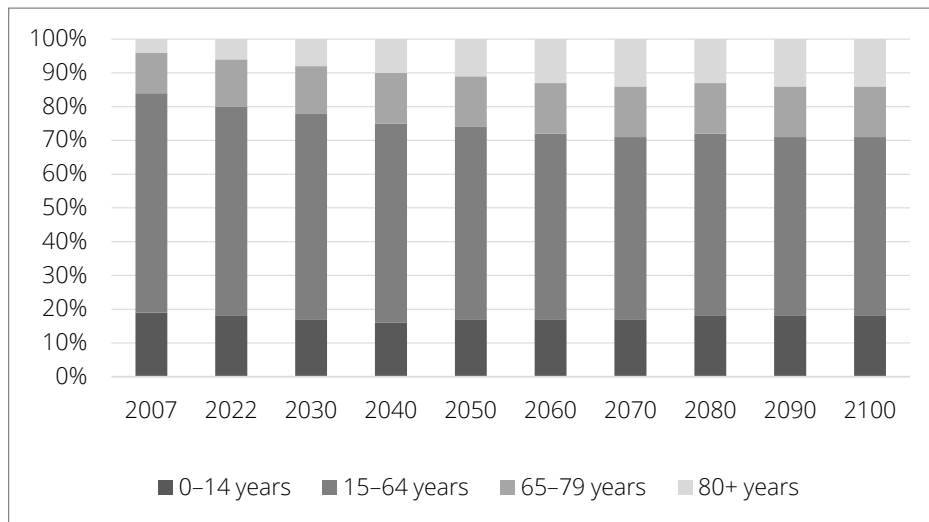
The share of those aged 80 years or above in the EU's population is projected to have a two and a half fold increase between 2022 and 2100, from 6.1 percent to 14.6 percent (see Figure 1).

According to the forecast of GUS (2014) in Poland, in 2035, people aged 60 or more (60+) will constitute almost one third of the population, and in 2050 about 40.0 percent (GUS and US in Białystok, 2021). The projected changes to the proportion of Polish population aged 65 and over by 2035 indicate that the gap between the share of women in this age group will continue to widen (which will increase from 16.3 percent to 26.5 percent) and men (10.6 percent and 19.7 percent, respectively) [Mossakowska et al., 2012].

Attention should also be paid to the process of the so-called double ageing of the population (see Figure 2), expressed by a faster increase in the propor-

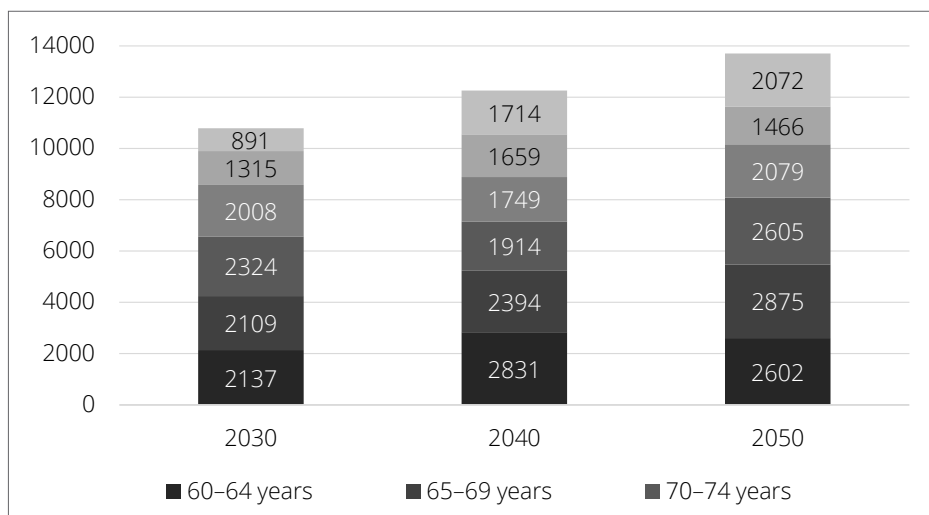
tion of people aged 80 and over than the general population aged 60 and over [Mossakowska et al., 2012].

Figure 1. Population structure by major age groups, EU, 2007–2100 (% of total population)



Source: Eurostat, 2020.

Figure 2. Population aged 60 and over, Poland (in thousands)



Source: GUS, 2021.

It is expected that in 2050 only the youngest group of seniors (60–64 years) will not comparably increase in numbers compared to 2030. The largest number of people will come in the oldest age group, i.e. aged 85 and more. It is forecasted that the number of this group will increase more than 2.5 times compared to 2030.

With regard to Lithuania, the data obtained during the 2021 Population and Housing Census of the Republic of Lithuania [Petrauskienė, 2022] indicate the ageing of the Lithuanian population. Compared to 2011, changes in the distribution of the population by age indicate an ageing population. There is a sharp decline in the population under the age of 30 and an increase in the population in older age groups, especially in the pre-retirement age group (men and women over 54). The number of women over the age of 64 exceeds the number of men by 1.8 times. The rapidly decreasing population and the growing number of elderly people are expected to make Lithuanian society age at a rapid pace. Statistical forecasts [Eurostat, 2020] indicate that Lithuania will be one of the fastest ageing OECD countries. Between 2020 and 2050, the proportion of the population aged 65 or older will increase from 20.0% to 32.0%. This figure is expected to reach 35.7% in 2070. Life expectancy for men will increase to 82.8 years (71.2 years in 2023) and 88.9 years for women (80.9 years in 2023).

Europeans are living longer and enjoying good health longer than at any other time in history. In the coming decades, the proportion and number of older people in societies will increase. This trend has a major impact on everyday life, on society, and announces both opportunities and threats [European Commission, 2021].

3. Demographic statistics: Poland–Lithuania

Despite the differences in the surface area (total land area (Poland 306,230 km²; Lithuania 62,674 km²) and the total population (Poland 37,727,112; Lithuania 2,609,670)¹, the percentage share of the population aged 65+ in Poland and Lithuania is similar (see Table 1).

¹ www 2.

Table 1. Population age structure by major age groups, 2012, 2021 and 2022 (% of the total population)

Country \ Year	2012	2021	2022
Poland	14,0	18,7	19,1
Lithuania	18,1	19,9	20,0
UE	18,0	20,8	21,1

Source: Eurostat, 2020.

Over the last 10 years, it did not significantly differ from the European Union average. However, both countries (also in the EU average) observe an increase in the percentage of people aged 65+ (see Table 2).

Table 2. Increase in the share of the population aged 65 years or over between 2012 and 2022

Country \ Years	2012–2022
Poland	5.1 p.p.
Lithuania	1.9 p.p.
UE	3.1 p.p.

Source: Eurostat, 2020.

In the years 2012–2022 in Poland it increased by 5.1 p.p., in Lithuania by 1.9 p.p., in the European Union by 3.1 p.p. The percentage of elderly people aged 80 and over in the total population should also be pointed out (see Table 3).

Table 3. Share of population aged 80 or over

Country \ Year	2022
Poland	4,4%
Lithuania	5,6%
UE	6,1%

Source: Eurostat, 2020.

In the general population of European Union countries, the percentage of older people aged 80 and over in 2022 was 6.1 percent, in Poland it was 4.4 percent, and in Lithuania it was 5.6 percent.

Interesting data are provided by a statistical web tool A Look at the Lives of the Elderly in the EU Today [Eurostat, 2017] released by Eurostat (the statistical office of European Union) (see Table 4). Originally, it is based on the chapter “An ageing society – focus on the elderly” of the flagship publication *People in the EU: Who Are We and How Do We Live?* [Eurostat, 2015].

Table 4. The lives of the elderly in the EU (example Polish and Lithuania)

The share of the elderly (65 or over) among the total population		
Country/year	1996	2016
Poland	11,2%	16,0%
Lithuania	10,3%	19,0%
UE	14,9%	19,2%

Years that men and women at the age of 65 can expect to live		
Country/year	2015	
Poland	Men 15,7 years	Women 20,1 years
Lithuania	Men 14,1 yearar	Women 19,2 years
UE	Men 17,9 years	Women 21,2 years

The healthy life years that men and women can expect to live at the age of 65		
Country/year	2015	
Poland	Men 7,6 years	Women 8,4 years
Lithuania	Men 5,0 years	Women 5,5 years
UE	Men 9,4 years	Women 9,4 years

The share of the elderly who live alone	
Country/year	2015
Poland	28,2%
Lithuania	45,9%
UE	32,1%

The share of the elderly aged 65 to 74 years who are economically active	
Country/year	2016
Poland	7,7%
Lithuania	13,5%
UE	9,5%

The share of the elderly who travel	
Country/year	2015
Poland	38,0%
Lithuania	25,0%
UE	48,8%

The share of the elderly who use the Internet at least once a week	
Country/year	2016
Poland	23,0%
Lithuania	23,0%
UE	45,0%

Source: Eurostat, 2015 (1).

The share of the elderly (65 or over) among the total population is growing. In 1996 in Poland and Lithuania it was around 10.0 percent. In 2016, it increased to 16.0 percent in Poland and 19.0 percent in Lithuania, thus approaching the EU average (19.2 percent).

In 2015, the life expectancy of men aged 65+ was 15.7 years in Poland and 14.1 years in Lithuania. In the same age group for women, the indicators were more optimistic – in Poland 20.1 years, in Lithuania 19.2 years. These data indicate that old age is feminized, women live longer than men.

Also, the data on healthy life expectancy at the age of 65+ are more optimistic for women. The gender difference is not very large – in Poland it is 8 months, while in Lithuania it is 6 months. In the EU, the average life expectancy for women and men is 9.4 years. These data indicate challenges in the provision of medical services.

Rates are high for the percentage of older people who live alone. In the EU, it is 32.1 percent. In Poland, it is slightly lower and amounts to 28.2 percent. In Lithuania, on the other hand, it is 45.9 percent. The cited data lead to social challenges in supporting the family environment. They also pose a challenge to social services.

Interesting data concern the percentage of older people aged 65 to 74 who are economically active. In the EU this percentage is 9.5 percent, in Poland 7.7 percent, and in Lithuania 13.5 percent. The presented data pose a challenge for the Silver Economy understood as a system of production, distribution and consumption of goods and services aimed at using the purchasing potential of the elderly and satisfying their consumption, living and health needs.

The percentage of elderly people who travel is quite high. Data from 2015 indicated that in the EU every second senior (48.8 percent) went on vacation. In Poland, this percentage was 38.0 percent, while in Lithuania it was 25.0 percent.

Seniors also benefit from technological achievements. Some senior citizens remain somewhat wary of technology and in particular computers and the Internet. However, among them there are so-called "Silver Surfers" (Eurostat, 2015: 154). Data on the percentage of older people who use the Internet at least once a week indicate that almost every fourth senior (23.0 percent) from Poland and Lithuania is active in the Internet. This activity is related to Internet banking, online shopping, reading online news sites, newspapers, news magazines and also using social networks.

4. Quality of life

The above-mentioned selected areas of functioning of the elderly make up their quality of life. The quality of life is influenced by many factors from the external and internal environment of households [Wiśniewska, 2018]. An encyclopaedic approach defines quality of life as "social policy, the degree of satisfaction of material and non-material needs – the fulfilment of standards or the realization of values: biological, psychological, spiritual, social and political, cultural, economic and ecological of individuals, families and communities; It is a concept used in social policy, psychology, medicine, economics and sociology" [www 1].

World Health Organization (WHO) defines the quality of life as "individuals' perception of their position in life in the context of the culture and value system in which they live, and in relation to their goals – expectations, standards and concerns" [WHO, 1998].

It is important to interpret the quality of life “by a multidimensional assessment made by means of internal criteria of the person and socio-normative criteria of the person-environment system” [Halicki, 2010: 51]. They should be considered in the dimension of objective and subjective determinants. The dominant components are most often indicated as socio-demographic characteristics, marital status, physical health, mental health, material situation, physical activity, abuse and neglect, health and social services, interpersonal contacts and the ability to meet the needs [Halicka, Pędich, 2002; Halicka, 2004; Lassota, 2006; Wolańska, 2006]. According to Anna Janiszewska, “if we understand the quality of life as a subjective sense of satisfying needs, then it should be stated that in the case of old people, when considering this concept, certain social problems specific to this age group should be taken into account, which do not concern people at earlier stages of life” [Janiszewska, 2015: 28] or which concern them to a lesser extent. One of the specific problems of old age is the experience of widowhood. It is worth noting that widowhood as one of the negative experiences of old age “affects our well-being more strongly than positive events and can contribute significantly to lowering the quality of life” [Doroszewicz, 2008: 15].

5. Widowhood

Widowhood, according to Piotr Szukalski, is “the most acutely felt event, for it eliminates from an individual’s life someone with whom he or she spent several decades, with whom he or she became close, and whose help he or she could usually count on as a first-line help” [Szukalski, 2013]. The consequence of experiencing such a state is the status of a widow or widower, i.e. a person whose legal marriage ceased to exist due to the death of a spouse.

It is assumed that the loss of a spouse is the most painful event in a person’s life. The death of a spouse causes many difficulties of complex nature. The death of a life partner is associated with the loss of the psychological support, help and care during illness, and, above all, with loneliness and solitude.

“Widowhood is a personal loss in which the surviving spouse often loses a friend, companion, lover, and sexual partner. (...) It is a family loss, associated with the loss of a partner in parenthood or acting as grandparents. (...) It is a social loss, concerning the loss of the status of a person in a relationship to a single person. (...) It is a financial loss due to a possible reduction in income and wealth” [Koren, Lowenstein, 2008: 141].

According to Beata Tobiasz-Adamczyk, “the sense of loss and piercing pain is connected with the lost love, but also with the loss of the whole concept of life, the inability to implement life plans, reluctance to be active” [Tobiasz-Adamczyk, 1999: 153].

Adopting the position of Polish gerontologists, it should be stated that the experience of widowhood by the elderly is an important aspect in their subjective assessment of the quality of life [Kijak, Szarota, 2013]; lonely life for many elderly people is difficult and definitely reduces their level of satisfaction with life [Halicka, 2004]. The consequence of widowhood is a worse assessment of the quality of one’s own life [Fabiś, 2015: 56].

Preliminary results of the 2021 National Population and Housing Census show that there are 2,737,000 widowed people in Poland. Most of them are women – 2,287,600. Men are five times less numerous – 449,400.

Table 5. Widowed people by sex in the 2001–2021 census years (Poland)

Gender	2001	2011	2021
Widowed men	2.9%	3.1%	2.9%
Widowed women	15.1%	15.5%	13.5%
Widowed people	2 907 700 (7.6%)	3 126 800 (8.1%)	2 737 000 (7.2%)
Total population	38 230 100 (100%)	38 511 800 (100%)	38 036 118 (100%)

Source: data from GUS 2013; GUS 2011.

According to the data presented in Table 5, the five-fold difference in widowhood between men and women has persisted for years. This indicates a higher mortality rate for men in this age group and the feminization of widowhood. The changes that took place in 2021 in the structure of the marital status of the population compared to 2011 are particularly visible among women aged 65 and over. Over the decade, the share of widows in this age group decreased by nearly 15 percentage points, from nearly 58% to approximately 43%.

As indicated by the latest Population and Housing Census of the Republic of Lithuania 2021 [Valstybės..., 2022], every eleventh inhabitant (219.4 thousand) was widowed. The number of widowed women was 4.5 times higher than that of men.

Table 6. Widowed people by sex in the 2001–2021 census years (Lithuania)

Gender	2001	2011	2021
Widowed men	3.2%	3.6%	3.1%
Widowed women	17.0%	18.2%	14.2%
Widowed people	298 787 (8.6%)	300 568 (9.8%)	219 400 (7.8%)
Total population	3 484 600 (100%)	3 043 400 (100%)	2 810 800 (100%)

Source: Valstybės..., 2021.

The trend of changes in the proportion of widowed people has been maintained for years and is the same among men and women. The percentage of widows is higher among women than men in all age groups. It should be emphasized that, as in the Polish society, the older the people, the higher the percentage of widows among them. In Lithuanian society, slightly more than one in two women aged 80 and over is widowed (56.0%), and among men – slightly less than one in three (28.6%).

The distribution of the population according to marital status in both Polish and Lithuanian societies is associated with the changes in the age structure of the population.

6. Quality of life and widowhood of the elderly as an area of research

The publication which has been issued by the experts of Statistics Lithuania [Lietuvos Statistikos Departamentas, 2014] is an excellent study that gives a comprehensive picture of the functioning of Lithuanian seniors. It is directly related to the issue of population ageing, taking into account such dimensions as: ethnicity and religious community, households, standard of living, use of information technologies, employment, earnings, health and social protection.

Interesting information on the functioning of older people (65+) in Lithuania is provided by the State Data Agency (Statistics Lithuania), data from 2022. In the light of the documents of this statistical agenda, the ageing of the population appears to be one of the most important demographic processes of the 21st

century. Statistical indicators of the quality of life are based on the data of the survey on income and living conditions. These include statistical information on residents' satisfaction with various aspects of life, frequency of visiting cultural and sports events, cultural objects and reasons for not visiting, communication with relatives and friends, civic activity. Statistical information on the quality of life is used for the analysis of the standard of living of households and measurement of social and cultural activity.

Taking into account satisfaction with various aspects of life, the majority of respondents rate them highly. This is especially true for the satisfaction with personal relationships with relatives, friends (66.0%) and satisfaction with the amount of leisure time (63.1%). The average level of satisfaction was expressed by the respondents towards satisfaction with the household financial situation (54.3%). It should be stated that the level of life satisfaction of individuals was most often described as medium (52.5%). No gender differences were found.

Respondents meet with relatives several times a month (27.9%), but more often (weekly) they contact them by phone or via the Internet (39.5%). They meet up with friends at least once a year (25.7%). Almost every third respondent (35.5%) contacts them weekly by phone or online. Women meet their relatives more often (weekly) than men.

Participation in voluntary activities or active citizenship is negligible. Only 5.0% of the respondents (slightly more often women) participate in official voluntary activities (organized by a charity, religious or other organization or club). Informal voluntary activities are undertaken by 5.1% of respondents. Again, women are slightly more likely to participate - helping other people or animals or taking up other activities, not arranged by an organisation. Civic activities are undertaken by 3.1% of respondents (slightly more often men).

The surveyed people 65+ occasionally participate in cultural or sport events. The financial situation is not an obstacle. The most common given reason was the lack of interest. This regarded activities such as going to cinemas, live performances (theatre, concerts, ballet), cultural objects (museums, art galleries, historical and archaeological sites, etc.), sports events or competitions. There are no significant differences between the sexes.

The majority of respondents (both women and men) described their health as neither good nor bad (from 56.2% to 66.3%, depending on the Income Quintile Group). Day-to-day activities due to medical conditions were limited but not severely in the case of 50.7%. Lithuanian seniors (89.6% women and 83.6% men)

consulted a doctor, especially the general practitioner. A negligible percentage of the population used or received health or social services at home – 5.3%.

Respondents have difficulty performing basic personal care activities. Among both women and men, these were mainly related to bathing or showering (19.9%), getting in and out of a bed or chair (16.4%) or dressing and undressing (14.7%). However, they are properly supported. Seniors also have difficulties in performing household activities. These mainly concern doing occasional heavy housework (66.3%), shopping (35.5%), taking care of or managing their financial matters (28.6%). Occasionally seniors engage in physical activity – usually walk for 30 minutes and more a day (44.5%).

In the Department of Andragogy and Educational Gerontology of the Faculty of Education of the University of Białystok, the life situation and functioning of widowed elderly people in both urban and rural environments has been the object of a thorough analysis. The material is collected on the basis of the case study method and the interview technique. What is more, the results referred to below are not statistical, representative, but only present specific signals that fit into the narrative of the already described nationwide findings.

The experience of widowhood is highly individualized [Flores, 2010]. In most cases, it is a huge, unforgettable loss. However, there are situations in which the death of a partner is treated as liberation in the literal sense (if the common life was influenced by, for example, alcoholism, violence) and in a symbolic sense (release from duties of care for the sick spouse, a sense of greater independence, self-determination).

As a result of the absence of a loved one caused by his/her death, the respondents often feel lonely, but they do not always feel alone. According to the respondents' statements, this is so mainly due to having children, grandchildren, functioning among other people, neighbours. What is more, they undertake activities that fill the emptiness. Very often these are home-centric activities, i.e. watching TV, listening to the radio, reading newspapers, books, pursuing passions (e.g. films, plot, flowers). Widows often focus on other family members, e.g. take care of their grandchildren. A specific remedy in this dimension is the implementation of everyday life chores, i.e. housekeeping, cleaning, washing, preparing meals, walking, garden care and others. In the case of widowed people from a rural environment, the everyday activities are often determined by the seasons. The autumn-winter period in the context of undertaking activity is more difficult to experience due to bad weather and thus forced isolation. In the

city, cultural activities related to visits to cultural institutions are quite often the best remedy for loneliness.

The statements of the majority of respondents show that after the death of the partner, intra-family relationships have not changed. Rather, they are very good or good. This applies both to relationships with limited contact (e.g. telephone contact due to the considerable distance) as well as within a shared household. Family relationships of the majority of the surveyed widowed people are based on the mutual support (financial and spiritual) and are the foundation of a sense of belonging to a family community and of building a sense of meaning in life. Occasionally, the indicated bad relationships are caused by a complicated family situation (such as quarrels) or lack of family members. Contacts are also maintained with the deceased spouse's family (siblings). However, these contacts are of occasional, festive nature. In the rural setting, widowed people mostly rated their neighbourly contacts as good or very good. They receive help in various matters (e.g. household chores, i.e. sawing firewood, mowing the lawn, health care, spiritual support, conversations, sometimes help in dealing with official matters). Of course, relations with neighbours can also be shallow, resulting from unstable, sporadic contacts, based on generally accepted principles of proper neighbourly coexistence.

In the opinion of the surveyed widows from the rural environment, their financial situation deteriorated after the death of their spouse. It is stable but requires financial restraint and saving. The main source of income is a pension. Most of the surveyed seniors do not own the homes in which they live. This is due to the peculiar security of one's existence by means of a notarized transfer of property to children (occasionally to other persons) with a clause of lifetime maintenance obligations to the previous owner of the property.

In addition to material factors, religion and the spiritual sphere are an important element of the quality of life of widowed people. In belonging to a religious community, in prayer, they seek solace and support.

Furthermore, the need to be healthy, fit and accepted and the need to belong, as a means of security, were very often strongly expressed. As for the future, the most common expectations regarded harmony and a sense of family unity, being a support for each other in difficult moments.

None of the surveyed widowed people declared their readiness to enter into a new formal relationship, neither now nor in the future – because of their adult children's opinion, a huge longing for the lost, unique person, advanced age.

The above-mentioned selected areas of functioning of people aged 65 + indicate specific similarities and differences. Domocentric activities dominate, both in terms of household management and participating in culture. For the most part, intra-family relationships are good and quite frequent. In retirement, the economic situation deteriorates. Seniors express their need to be healthy and useful. Low social activity is very common.

The specificity of the life situation results from the conditions of the functioning of health care, social care, pension system and many other state institutions and structures. The perception of older people by younger generations and the place and importance of older people in the social structure are also an important element.

7. Conclusion

The selected exemplifications presented in the text, illustrating the mechanisms and effects of aging societies, generate specific challenges. They are noticed and implemented on many levels, both on a macro and micro scale, both at the global, European, national and local level.

World Health Organization reports [WHO, 2011; WHO, 2015] identify key areas in which measures should be taken to prepare countries and societies for the new demographic structure. Their implementation will require a fundamental change in the perception of the elderly, of ageing and old age [Albert, Freedman, 2020]. They concern the following activities:

- to make the elderly-friendly spaces and places;
- the need to adapt health systems to the needs of older people;
- we need to change our thinking about older people towards seeing them as full members of the community, contributing to their development.

The relevant departments of the European Commission in their studies point to the impact of the ageing population in two dimensions: 1) impact on the labour market, productivity and economic growth, 2) impact on social security and public finances.

As a response to the deepening process of population aging, the directives of the European Commission written in the Report *The Demographic Future of Europe – from Challenge to Opportunity* are being implemented in the member countries of the European Union [Commission..., 2006]. A constructive response to the demographic challenge concern:

- promoting demographic renewal in Europe;
- promoting employment in Europe: more jobs and longer working lives of better quality;
- a more productive and dynamic Europe;
- receiving and integrating immigrants in Europe;
- sustainable public finances in Europe: guaranteeing adequate social security and equity between the generations.

In January 2021, the European Commission published a “Green Paper on Ageing”, thus launching a wide-ranging debate on the topic. The key issues are how to anticipate and respond to the challenges and opportunities of an ageing population, and how to maintain a good quality of life in an ageing society. It is important to note that competence in the field of demographic policy lies largely with the Member States. In turn, the EU is in a position to identify areas that need particular attention, to identify general trends and support action at national, regional and local level.

In 2018 in Poland the Council of Ministers adopted the document *Social Policy Towards the Elderly 2030. Security – Participation – Solidarity* [Rada..., 2018], which was created to define the most important directions of senior policy in the coming years and to organize the activities of public institutions in Poland. The document takes into account the implementation of a number of solutions in the areas of safety, health, prevention of loneliness, active participation in social life, and the need to adapt infrastructure to the needs and capabilities of the elderly. It is also worth mentioning the annual reports of the Ministry of Family and Social Policy entitled *Information on the Situation of the Elderly in Poland* [Ministerstwo..., 2022] outlining the directions of necessary changes in connection with the aging of the Polish society, but also describing the implemented activities in this area.

In Lithuania several strategic documents focused on the needs of an ageing population were released during the last years. The key strategic document including the area of active ageing is the National Strategy for Demography, Migration, and Integration 2018–2030. Integration of the older-age citizens into the society is described as one out of three general aims of this strategy (next to the creation of the family-friendly environment, and the management of the migration flows). Important recommendations for improving active ageing policy are included in the document *Ageing Policies – Access to Services in Different Member States* [European Parliament, 2021]. Annex V of this study

provides an overview of the most recent developments with regards to ageing policies and access to services by older people in Lithuania. It focuses on areas of economic activity, social participation, health and well-being, long-term care, and supportive environments (including housing, transportation, and securing financial independence).

According to A. Labus [2011], population aging is a global trend and it is inevitable, reflecting the civilizational progress of man. It addresses important social, economic and spatial issues. These processes require constant readiness for improvement in the following areas, among others: the social welfare system, the medical care system, the structure of industry, the structure of investment, the structure of consumption, the wealth distribution system, relations between generations, and quality of life.

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