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*I Continue to Enjoy Life:*¹ **The Threatened Value of Old Age and the Discovery of Its Meaning**

The article addresses the value of old age as a criterion for seeking the meaning of life. Such an approach contradicts not only contemporary postmodern culture, which emphasizes vitality and youthfulness, but also the utilitarianism that dominates contemporary secular ethics. Specifically, this approach considers human life in terms of quality of life, which results in an arbitrary refusal of some quality and the simultaneous right to exist. In this regard, the personalistic approach in bioethics that Pope John Paul II's teaching, life, aging, and death exemplify affirms that old age is an inalienable sphere of the value and sanctity of human life.

Key words: old age, ethics, quality of life, value of life, meaning of life, John Paul II.

Introduction

The postmodern world in which we live is characterized by the rejection of traditional values and certainties as well as the adoption of new, ever-changing points of reference. Among these values and references points are adulation of the body, health, youth, and beauty, which can be clearly seen in the popularization and promotion of phenomena such as yoga, diet fads, jogging, fitness, and caring for one's external

¹ This part of the title comes from Pope John Paul II's *Letter to the Elderly*, 17. See footnote 16.

appearance. From this point of view, the traditional message that promotes the value of human life, including life in its final stage known as old age, is, according to many, an outdated and insignificant topic.

Given postmodern thinking about old age, it is worthwhile to examine this issue in the context of the Catholic Church's teachings on the value of old age, which is an integral part of the broad yet fundamental subject of the meaning of human life.

The Economy, Medicine, and Man

Health policy issues clearly reveal that medicine has always clashed with the economy.² This is due to the fact that health care providers generally require physicians to make decisions based on the interests of a single patient. As a result, medical ethics is reticent to accept any ethics based on the common good. On the one hand, it seems that dialogue between the economy and medicine is impossible, particularly when economics, with its limited resources, aims at protecting the health of the community as a whole, while medical ethics, on the other hand, inclines physicians to do what they can for individual patients. In this situation, is dialogue (or at least discourse) possible in order to work toward an agreement? Should physicians focus on the good of the community as the main way to achieve its optimal health? If they do this, however, then people would immediately complain about mismanagement and the danger of failing to perceive how every sick person is a unique human life.

Someone might ask whether or not the good of the individual, even when it is opposed to economics, can be sacrificed for the good the community. Or, can the end of medicine be the good of the community, even if this means marginalizing or excluding the necessary care of a single individual patient? These are the kinds of questions that concern both societies and politicians, since the economic burden of care, which has been transferred to the public sphere by the welfare state, has become intolerable.

² For works that discuss the relationship between medicine and economics see, for example: K. Opolski, G. Dykowska, and M. Możdżonek, *Zarządzanie przez jakość w usługach zdrowotnych* (3rd Edition) (Warsaw: Wydawnictwo CeDeWu, 2011); K. Opolski and K. Waśniewski, *Zarządzanie jakością i ryzykiem w usługach zdrowotnych*, (Warsaw: Wydawnictwo CeDeWu, 2011); P. Dolan, and J.A. Olsen, *Dystrybucja usług medycznych. Zagadnienia ekonomiczne i etyczne* (Warsaw: Wydawnictwo CeDeWu, 2008); M. Ostrowska, *Finansjalizacja w ochronie zdrowia* (Warsaw: Wydawnictwo CeDeWu, 2016).

There are many reasons for this current state of affairs, including, among other things, the demographic changes and social phenomena that occurred during the 1960s and 1970s. During this time, the sexual revolution resulted in a voluntary reduction in fertility, an increase in women working outside of the home, a crisis in the family neglected by politicians and legislators, and the rise of the worship of health. This state of affairs has required new strategies to reform the health care system. Before directives can be implemented, it is necessary to note that every reform creates these directives based on a particular philosophy.

According to those who provide feedback and insight on these issues, there are only two hypothetical solutions to the problem of healthcare reform: 1) transferring public healthcare to the private sector, and 2) effectively rationing healthcare benefits. Here, however, a simple but dramatic questions arise: who should receive healthcare benefits? Are there enough benefits for everyone? Or, can only the weakest receive them? Such questions focus especially on people in either the earliest stages or the final stages of life. These issues are relevant because society is increasingly aging and dramatic because quantitative observations are now being evaluated in light of qualitative information, such that quality of life is now becoming the new criterion according to which the value of life is determined.³

Aging Societies and Quality of Life of the Elderly

The life expectancy of a people is a widely recognized indicator of a society's health. A long life expectancy means that the average person experiences all stages of development: infancy, childhood, youth, adulthood, middle age, and old age. Old age is usually 65 years and older. Nowadays, most people in developed countries, including Poland, reach and live into old age.⁴ According to UN projections, this demographic reality will continue to progress to the point that Europe's population will shrink. In other words, between 2000 and 2050, Europe's population is projected to decline by 16%, while the

³ See, for example, J.J. Walter, "Life, Quality of," in *Encyclopedia of Bioethics*, Vol. 3, ed. S.G. Post (New York: MacMillan Reference USA, 2004), 1389; E. Schockenhoff, *Etyka życia. Podstawy i nowe wyzwania*, 12th Edition, trans. K. Glombik (Opole: 2014), 364.

⁴ W. Pędich discusses this topic extensively in the article: "Uwagi dotyczące specyfiki badań populacji ludzi starych," *Gerontologia Polska* 6, nr. 2 (1998): 3.

elderly population (age 60 to 69 years) will increase by 17%.⁵ Longer life expectancy, which is essentially positive, brings up the question of the quality of life of the elderly and whether they will spend old age in good or bad health.⁶ This issue also has an economic dimension, which is the reduction of the cost that society must pay to cover care for people affected by disability. The health of the elderly is particularly valuable because it indicates whether or not they will live active and independent lives, which is important not only to the elderly individual, but also to his or her family and to society.

If people are living longer, then it is necessary to wonder whether they will pass their later years in good health or in senility. In other words, what kind of quality of life will the elderly have? The prevalence of this issue can be explained, among other things, by the popularity of the so-called Q-mark, or quality certification (e.g., ISO systems). Although the term “quality of life” was originally applied to things such as consumer goods (“useful matter”), highly developed countries now use this term in relation to people. Today “quality of life” refers primarily to human life as such.

While moral norms of the time did not change so rapidly, the scientific progress that ensued from the 1960s onward made it possible for scientists (and medicine) to directly interfere in the sphere of human life. Consequently, the scientific manipulation of human life resulted in the creation and promotion of a higher standard of living, which was (and continues to be) accompanied by the belief that it is permissible to eliminate and marginalize life in other situations (i.e., euthanasia, abortion).⁷

Modern bioethics, which is considered a the moral management of human life, provides two basic solutions:

- 1) the **sanctity of life ethic**, according to which holiness is not strictly theological, but is also expressed in excellence, fullness, inviolability, and sacredness. From this perspective, the phenomenon of human life is of fundamental value in and of itself.
- 2) the **quality of life ethic**.

This dualism points to two alternative schools, two different visions of reality, and two different philosophical traditions. Bioethics based

⁵ See. P Szukalski, “Proces starzenia się społeczeństw Europy; spojrzenie perspektywiczne,” *Gerontologia Polska* 6, nr. 2 (1998): 51-55.

⁶ Ibid.

⁷ See, for example: W. Chańska, *Nieszczęsny dar życia. filozofia i etyka jakości życia w medycynie współczesnej* (Wrocław: Wydawnictwo Uniwersytetu Wrocławskiego Sp. z o.o., 2009).

on **quality of life** is rooted in the tradition of the modern Enlightenment; its origins are in: scientism, deism, agnosticism, immanentism, mechanistic materialism, and utilitarianism. This approach is secular and agnostic. According to quality-of-life bioethics, *life itself* is not the criterion of choice, but rather *quality of life* (well-being and the consequent ability to realize individual and group plans). According to this framework, the principle of quality of life can be modified and revised through democratic social dialogue, meaning that the majority (and not truth) decides what quality of life means. In quality of life ethics, the principles of utility and benevolence are the deciding norms that ensure that activities that satisfy as many people as possible, while minimizing harm, are promoted.

When used as the criterion for evaluating human life, the concept of quality of life is morally dangerous because it enables people act according to the logic of discrimination and exclusion. For example, people may decide based on subjective and relative preferences whether a life is worth living or not worth living due to its “low quality.” Needless to say, this approach to life is “unfriendly” toward those who are chronically ill, disabled, and dying and is symptomatic of the “culture of death.” It is logically anti-life.

The radical opposite of bioethics based on of quality of life is bioethics based on the sanctity of life. Sanctity of life is often identified with metaphysical personalization, which the views and teachings of St. John Paul II beautifully express. A philosophy based on the sanctity of life recognizes that all bioethical solutions should be morally objective and base their norms on human nature.⁸ This approach opposes the “democratization” of bioethics, meaning that it does allow a person to be dealt with according to social consensus. For, the human person has always had an objective value independent of social contracts. Ultimately, bioethics based on quality of life creates a reality that can become a real nightmare, where the protagonists become victims of the systems that they create. Ethics based on the sanctity of life, on the other hand, inevitably prevents situations where an individual is one day classified by the democratic will of the majority as a “risk to the group” and subsequently condemned to be euthanized or refused palliative care. Since, however, such erroneous and sinister perspective is the criterium of quality of life, it is important to take a moment to focus on its opposite: sanctity of life.

⁸ See, for example: A. Bartoszek, “Moralne aspekty ‘jakości życia’ w opiece paliatywnej,” *Śląskie Studia Historyczno-Teologiczne* 35, no. 2 (2002): 309–330.

Time and the Meaning of Life in Old Age

Human life has objective value. Yet, the experiences of human life are marked by various dynamics and subjective feelings. Practically every person experiences that time passes subjectively more slowly and thoughtlessly during the first half of life. During this time, life seems infinite. However, during the second half, life passes more quickly, and man thinks more in terms of how much time he has left. In this way, time is understood as limited and finite, and man's experience of the particular dimensions of time changes.

During old age, memories from the past grow more vivid. Most often, these memories are of positive events, but also failures, disappointments, disasters, jobs, resignations, and physical and emotional injuries. One's memory of the first "half of life" is a record of experiences that must be "segregated and restrained," maintained and restructured. Forgetting or choosing "not to remember" these memories is a conscious process, through which "humble acceptance" changes their meaning. Not only can these memories be neutralized, but they can also be transformed into something positive and, therefore, contribute to a person's actual development.⁹

John Paul II spoke and wrote distinctly about the role of the categories of memory in his book *Memory and Identity: Conversations at the Dawn of a Millenium*: "Paul Ricoeur spoke of remembering and forgetting as two important and mutually opposed forces that operate in human and social history. Memory is the faculty which models the identity of human beings at both a personal and collective level. In fact, it is through memory that our sense of identity forms and defines itself in the personal psyche."¹⁰

The positive dimension of memory suggests that memory disorders are a negative phenomenon. Changes in one's perception of time as well as past and present relationships affect a person's experience of the present. Consequently, one becomes disturbed by the feeling that time is passing by quickly and that there is not always enough of it. The experience of the present and of the basic dimension of time becomes limited to and expressed in the "absence" of or the superficial presence of the "here and now," i.e., in a reckless and temporary existence. A person's ability to live properly in the present moment is one of the most important factors in his development. This ability also

⁹ See W. Stinissen, *Wieczność pośrodku czasu* (Poznan: Wydawnictwo W Drodze, 1997).

¹⁰ John Paul II, *Memory and Identity: Conversations at the Dawn of a Millenium* (New York: Rozzoli, 2008), 144.

essentially enriches a person's inner experience of the integration and involvement of his personality. A. Bloom recommends that: "There is absolutely no need to chase time to catch it. Time does not escape from us; time is running towards us. Do you anxiously await the next minute that appears on your path? Are you completely unaware of it—unaware that it will come? Regardless of your efforts, the future becomes the present, so it is unnecessary to skip from the present to the future. We just have to wait for the future to arrive, and, in this respect, we can be totally still yet move in time, because it's time to move [...]. The mistake we often make with respect to our inner life is to imagine that, if we hurry, then we will end up in the future earlier."¹¹

Middle age essentially brings new opportunities to deepen one's experience of time and take advantage of it. This means accepting time, its passing, and the fact that one is in the middle of one's life and, therefore, better able than before to appreciate the present moment and move forward toward life's fulfillment with hope and peace. This peace, however, is dangerous because with it comes the realization that one will die. L. Boros explains that life crises arise because "death in all its forms concentrates itself in human existence."¹² While death is present in its own way throughout subsequent stages of life, the issue of death also arises during middle age. This is a time when the body begins to slow down. Many people experience how their physical health begins to decline, and some individuals might even experience something that they would call an "encounter with death." At this stage of life, man is caught between fear and acceptance of death, which entails specific attitudes and feelings such as discouragement, passivity, and despair on the one hand, or joy in life and fulfillment on the other hand.

Fear of death and returning to the past are very characteristic of modern man—he who "holds on tightly to youth" and strives to "remain eternally youthful."¹³ While this is one way of resolving the problem of aging, it is also an attitude that hinders an individual's personal development—it is "a pathetic substitute for that which brightens the self."¹⁴

The acceptance of one's own death as a real and essential fact of life, or transforming fear of death into a difficult acceptance of death, strengthens a person, his interior integration, and his sense of security.

¹¹ A. Bloom, *School for Prayer* (London: Darton, Longman and Todd, 1999), 55.

¹² L. Boros, *Okresy życia* (Warszawa: 1980), 5.

¹³ A. Grün, *W połowie życia. Półmetek życia jako duchowe zadanie* (Tyniec: Wydawnictwo Benedyktynów, 1995), 57

¹⁴ *Ibid.*

Acceptance of death is a source of peace and wisdom that changes how one views the world and himself, his attitudes toward others, and the inner substance of his involvement in the world. The acceptance of death requires existential courage to be and to live.¹⁵ The person and the life of John Paul II show us what the courage to live, the courage of humility, and the ability to enjoy life look like.

Pope John Paul II was 79 years old in 1999 when he wrote his remarkable religious and cultural message on aging, otherwise known as his *Letter to the Elderly*.¹⁶ As he remarked, “As an older person myself, I have felt the desire to engage in a conversation with you. I do so first of all by thanking God for the gifts and the opportunities which he has abundantly bestowed upon me up to now. In my memory I recall the stages of my life, which is bound up with the history of much of this century, and I see before me the faces of countless people, some particularly dear to me: they remind me of ordinary and extraordinary events, of happy times and of situations touched by suffering. Above all else, though, I see outstretched the provident and merciful hand of God the Father.”¹⁷

As a man of entrustment, the Pope was aware that his attitude contradicted the culture of the modern world. Precisely old age, passing away, and ultimately one’s attitude toward death are particular topics of cultural dispute. Insofar as the modern mechanized world strives to maximize productivity, it simultaneously ceases to be aware of the ways of life. For this reason, it is unpopular to reflect on man’s passing from this life. Consequently, man’s fear of death manifests itself in many ways: in self-defense mechanisms, construed fictions, and self-deception. This hidden fear is made manifest in man’s attempt to silence or underestimate death.¹⁸ Society puts death out of site by creating utopias and subterfuge. It diminishes signs, space, and time—elements connected with the reality of death: “Anti-tragic by nature, society questions the relationship between man, death, and

¹⁵ P. Tillich, *The Courage to Be* (Connecticut: Yale University Press, 2000).

¹⁶ John Paul II, *Letter to the Elderly* (Vatican City, Italy: Libreria Editrice Vaticana, 1999) https://w2.vatican.va/content/john-paul-ii/en/letters/1999/documents/hf_jp-ii_let_01101999_elderly.html (10.20.2017). Hereafter abbreviated *LE*.

¹⁷ *Ibid*, 1.

¹⁸ See J. Makselon, “Psychologia wobec postaw śmierci,” *AK*, Vol. 94, no. 3 (1980): 400; Rosalind Haywood, “Attitudes to Death in the Light of Dreams and Other ‘Out-of-Body’ Experience,” in *Man’s Concern with Death*, ed. A. Toynbee (New York: McGraw Hill, 1969), 186.

time. This attitude is at the very heart of the human plight.”¹⁹ In addition to attempts to hide or camouflage death, “thanatocrats”—that is, physicians who use modern medical technologies to alter the actual moment of death by stimulating the body’s mechanical impulses that, otherwise, would not be able to work on their own—manipulate it.

The complexity of the problem of man’s attitude toward death is due to a number of seemingly distantly related factors.²⁰ The entire personality of man plays a decisive role in his experience of death. Whether conscious or unconscious, fear is one of the elements of man’s psychic relationship to death. The intensity of one’s fear in the face of death is obviously proportional to how far this experience has advanced. The concept of “deliberate dying” is extremely important from a practical point of view: “Being aware of one’s impending death assumes, in the strictest sense, that the person knows the date and manner of his death are approaching (or he knows the probably date and manner of his death).”²¹

However, man’s attitude toward death is not only a matter of his personal experience, personality, and temperament, but also the result of his philosophical outlook on life.²² For example, according to Martin Heidegger, who defined human life as an existence oriented toward death (*Sein-zum-Tod*), the elements of a negative-optimistic attitude are part of the phenomenon of existence. This certainty gives rise to the fear that man can and should overcome, thereby making him free toward death. To be reconciled to the finality of human existence is the condition of an “authentic” life. “Once we fully and realistically accept [death], then it will not longer be something which happens

¹⁹ B. Ronze, *Antytragiczność-czyli człowiek traci swoją śmierć* 4, no. 2 (Poznan: Wydawnictwo W Drodze, 1976): 3.

²⁰ Several factors shape a person’s attitude towards death, particularly his: cultural context, individual experiences related to his development, worldview, current state in life, psychological resistance to stress, lifestyle (i.e., practical preferences of values, the likelihood of his own death or the death of someone close to him). See. J. Makselon, “Psychologia wobec postaw śmierci,” 401.

²¹ *Ibid.*

²² Hence the variety of psychic and intellectual attitudes towards the problem in question. In general, one can divide a person’s attitude towards death into negative-passive or positive-active. Epicureanism and stoicism belong to the former. See S. Kowalczyk, *Podstawy światopoglądu chrześcijańskiego* (Warsaw: Ośrodek Dokumentacji i Studiów Społecznych Warszawa, 1979), 121.

to us (coming upon us, as it were, externally and as a meaningless destruction of our endeavours).”²³

Another way to approach death is to strive to explain this phenomenon. Here Hegelianism and Marxism deserve particular attention. In Hegel and Marx’s understanding of death (and overcoming fear of death), they recognize the ontological and temporal priority of the collective before the individual, which implicitly accentuates the common character of human immortality. However, while the fate of humanity is connected with its future, this naturalistic eschatology raises serious objections because, for instance, “the human person is not an anonymous moment of his generation, and one human generation can not be considered as a preparatory phase for the next generation.”²⁴

John Paul II’s reflection leads to the field of Christian morality that is based on Christian philosophical thought and considers the terror and fear that arises from one’s awareness of death as a call and a challenge. It demands a conscious, fully human, and Christian attitude toward these phenomena. It requires bravery. Christian perseverance does not deny, but overcomes fear.²⁵

John Paul II was specifically fascinated by the passage of time: “Beyond single events, the reflection which first comes to mind has to do with the inexorable passage of time. ‘Time flies irretrievably,’ as the ancient Latin poet put it. Man is immersed in time; he is born, lives and dies within time. Birth establishes one date, the first of his life, and death another, the last: the ‘alpha’ and the ‘omega,’ the beginning and end of his history on earth. Christian tradition has emphasized this by inscribing these two letters of the Greek alphabet on tombstones. But, if the life of each of us is limited and fragile, we are consoled by the thought that, by virtue of our spiritual souls, we will survive beyond death itself. Moreover, faith opens us to a ‘hope that does not disappoint’ (cf. Rom 5:5), placing us before the perspective of the final resurrection.”²⁶

The Pope’s reflection is not a direct polemic with cultural trends that grapple with the perspective of death and passing while ignoring

²³ N. Smart, “Philosophical Concepts of Death,” in *Man’s Concern with Death*, ed. A. Toynbee, 34.

²⁴ S. Kowalczyk, *Rozumienie*, 380. See J. Alfaro, *Chrześcijańska nadzieja i wyzwolenie człowieka* (Warsaw: Instytut Wydawniczy PAX, 1975), 167: “If it exists, then the future of humanity cannot be man’s achievement. The future of history must be not a historical future, but rather a transcendental future in relation to history.”

²⁵ See S. Olejnik, *Etos*, 67.

²⁶ John Paul II, *LE*, 2.

the issue of old age. Rather, St. John Paul II explores biblical narratives about old age. On the one hand, his thinking is characterized by existential realism and, on the other hand, by the optimism of faith. Specific biblical figures, who are advanced in age and are particularly valuable in biblical teaching with regard to the topics of passing, old age, and death include: Abraham and Moses; Elizabeth and Zechariah; Simeon and Anna; Nicodemus, who belonged to the Sanhedrin; and Apostle Peter, who had to move from Israel to Rome when he was old. Pointing out the important role that the elderly play in the history of Salvation, Pope John Paul II concludes: “Thus the teaching and language of the Bible present old age as a “favourable time” for bringing life to its fulfilment and, in God’s plan for each person, as a time when everything comes together and enables us better to grasp life’s meaning and to attain ‘wisdom of heart.’ ‘An honourable old age comes not with the passing of time,’ observes the Book of Wisdom, ‘nor can it be measured in terms of years; rather, understanding is the hoary crown for men, and an unsullied life, the attainment of old age’ (4:8-9). Old age is the final stage of human maturity and a sign of God’s blessing.”²⁷

Unsurprisingly, the Pope compares the wise, biblical view of old age with modern culture. He once again emphasizes modern culture’s ambivalent attitude toward old age. Summarizing the twentieth century, Pope John Paul II notes: “Not all has been bleak. Many positive aspects have counterbalanced the negative, or have emerged from the negative as a beneficial reaction on the part of the collective consciousness. Yet it is true too — and it would be both unjust and dangerous to forget it! — that unprecedented sufferings have affected the lives of millions and millions of people.”²⁸

The modern world’s ambivalent assessment of the past indicates all the more the importance personal witness of the elderly, who are “guardians of our collective memory.” As Pope John Paul II points out, “Elderly people help us to see human affairs with greater wisdom, because life’s vicissitudes have brought them knowledge and maturity. They are the guardians of our collective memory, and thus the privileged interpreters of that body of ideals and common values which support and guide life in society. To exclude the elderly is in a sense to deny the past, in which the present is firmly rooted, in the name of a modernity without memory. Precisely because of their mature

²⁷ Ibid, 8. See also A. Tronina, “Biblia o ludziach starszych,” *Vox Patrum* 31, Vol. 56 (Lublin: Wydawnictwo KUL, 2011): 231-239.

²⁸ John Paul II, *LE*, 3.

experience, the elderly are able to offer young people precious advice and guidance.”²⁹

This topic clearly points to the wisdom of the Pope’s message. It shows a culture that depends on “know how” knowledge the value of a wisdom that increases with life experience. At the same time, the Pope was deeply aware that it is impossible to solve the problem of the meaning of aging, human weakness, and death only by pointing out the value of the wisdom that comes from life experience. Therefore, he shares that the most precious way to look at old age is through the lens of the hope through which the life, death, and resurrection of Jesus Christ are revealed: “Christ, having crossed the threshold of death, has revealed the life which lies beyond this frontier, in that uncharted ‘territory’ which is eternity. He is the first witness of eternal life; in him human hope is shown to be filled with immortality.”³⁰

John Paul II himself was simultaneously a “guardian of collective memory” and a living witness of the hope found in the Suffering, Crucified, and Risen Jesus Christ. This allowed the Pope to write a very personal and expressive testimony in his *Letter to the Elderly*: “I find great peace in thinking of the time when the Lord will call me: from life to life! And so I often find myself saying, with no trace of melancholy, a prayer recited by priests after the celebration of the Eucharist: *In hora mortis meae voca me, et iube me venire ad te* – at the hour of my death, call me and bid me come to you. This is the prayer of Christian hope, which in no way detracts from the joy of the present, while entrusting the future to God’s gracious and loving care.”³¹ One year after this letter was published, John Paul II also organized a meeting with the elderly during the celebration of the Great Jubilee. During this meeting, he said the following:

²⁹ Ibid, 10.

³⁰ Ibid, 15.

³¹ Ibid, 17. See also the Pope’s John Paul II’s Testament on March 6, 1979: “‘Watch, therefore, for you do not know on what day your Lord is coming’ (Mt 24: 42)—these words remind me of the last call that will come at whatever time the Lord desires. I want to follow Him and I want all that is part of my earthly life to prepare me for this moment. I do not know when it will come but I place this moment, like all other things, in the hands of the Mother of my Master: *Totus Tuus*. In these same motherly hands I leave everything and Everyone with whom my life and my vocation have brought me into contact. In these Hands I above all leave the Church, and also my Nation and all humankind. I thank everyone. I ask forgiveness of everyone. I also ask for prayers, so that God’s Mercy may prove greater than my own weakness and unworthiness.” http://www.vatican.va/gpII/documents/testamento-jp-ii_20050407_en.html (10.20.2017)

Precisely as so-called “senior citizens”, you have a specific contribution to make to the development of a *genuine “culture of life”* - *you have, we have, because I also belong to your age group* - witnessing that every moment of our existence is a gift of God, and that every season of human life has special treasures to put at the disposal of all.

You yourselves can experience how time spent without the disturbance of so many occupations can encourage a deeper reflection and a fuller dialogue with God in prayer. Your maturity also spurs you to share with those who are younger the wisdom accumulated with experience, sustaining them in their effort of growth and dedicating time and attention to them at the moment when they are opening themselves to the future and seeking their own way in life. You can accomplish a truly precious task for them.

Dear brothers and sisters! The Church looks to you with great esteem and trust. *The Church needs you!* But civil society also needs you! This is what I said a month ago to the young people, and what I say today to you, to us, elderly people! The Church needs us! But civil society also needs us! May you be able to use generously the time you have at your disposal and the talents God has granted to you in being open to assisting and supporting others. Help proclaim the Gospel as catechists, leaders of the liturgy, witnesses of Christian life. Devote time and energy to prayer, to reading the word of God and to reflection upon it.³²

In a mechanized world characterized by utilitarianism, pragmatism, and quality of life, people reluctantly speak about old age. And, when they do speak about it, it is only in reference to the determinants of social life. Against this background, the teaching of the Church, which has the inestimably valuable personal testimony of John Paul II in his message to the elderly, clearly distinguishes itself from the modern avoidance of old age. Taking into consideration the paradigm of the value of human life, St. John Paul II points out the elements of old age that cannot be measured economically but that are, nevertheless, the invaluable legacy of mankind. Clearly, his teaching in no way depreciates vital values. Rather, it gives them a new meaning, inscribed by the process of passing into eternity. The Pope’s statement, which serves as part of the title of this submission, expresses this reality: “Despite the limitations brought on by age, I continue to enjoy life. For this I thank the Lord. It is wonderful to be able to give oneself to the very end for the sake of the Kingdom of God!”³³

³² John Paul II, introduction to “The Gift of a Long Life,” given on September 17, 2000 during the Jubilee of the Elderly, https://w2.vatican.va/content/john-paul-ii/en/homilies/2000/documents/hf_jp-ii_hom_20000917_jubilee-elderly.html (10.20.2017).

³³ John Paul II, *LE*, 17.

UMIEM CIESZYĆ SIĘ ŻYCIEM ZAGROŻONA WARTOŚĆ STAROŚCI I ODNAJDIWANIE JEJ SENSU

Artykuł podejmuje zagadnienie wartości starości w ludzkim życiu jako kryterium poszukiwanego sensu życiowego. Takie ujęcie pozostaje w kolizji ze współczesną kulturą naznaczoną postmodernizmem, akcentującym witalność i młodość, oraz z dominującym w etyce laickiej podejściem utylitarystycznym. Oznacza ono rozpatrywanie życia ludzkiego w kategoriach jakości życia (quality of life), co powoduje arbitralne odmawianie niektórym owej jakości a zarazem prawa do istnienia. Pojęcie personalistyczne w bioetyce, wyrażane nauczaniem, ale i świadectwem życia, starzenia się i umierania św. Jana Pawła II stanowi w tym kontekście afirmację starości jako niezbywalnej sfery wartości/świętości życia ludzkiego

Słowa kluczowe: starość, etyka jakości życia, etyka wartości życia, sens życia, Jan Paweł II.

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