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# Activities and lifestyles of elderly people

#### Streszczenie

Ludzie starsi stanowią zróżnicowaną grupę społeczną pod względem cech kulturowych, statusu społecznego, problemów zdrowotnych, sytuacji ekonomicznej i społecznych, warunków mieszkaniowych i rodzinnych. Stąd także ich różne formy aktywności i style życia. Styl życia większości seniorów można określić jako bierny i monotonny. W niewielkim stopniu uczestniczą oni w kulturze, zdecydowanie częściej oglądają TV czy słuchają radia niż idą do teatru czy kina. Głównym obszarem aktywności osób starszych są: rodzina, telewizja, Kościół. Pozostałe potencjalne sfery aktywności, jak: rozrywka, edukacja, turystyka czy kultura pozostają poza zasięgiem zainteresowań lub możliwości respondentów. Brak innych form aktywności może wynikać ze stanu zdrowia, właściwości charakteru, z wcześniejszego stylu życia, z wzorów kulturowych, lecz może być również wynikiem tych okoliczności, które ograniczają możliwości społecznego uczestnictwa starego człowieka, skłaniając go do pasywności (np. słaba kondycja ekonomiczna emerytów, czy brak wzorów aktywnej starości). W związku z czym brak jest seniorów w przestrzeni publicznej. Ich aktywność w przeważającej mierze odnosi się do przestrzeni prywatnej.

#### Słowa kluczowe:

ludzie starzy, aktywność, styl życia

#### Abstract

Elderly people constitute a social group that is heterogeneous in terms of cultural traits, social status, health issues, financial and social situation, living conditions, and familial ties. This leads to variety in the forms of activity they pursue and the lifestyles they lead. The lifestyle of most seniors can be described as passive and monotonous. They take part in cultural activities to a relatively small degree. They watch TV and listen to the radio much more frequently than they go to theaters or cinemas. The main areas of activity for the elderly are: family, television, and church. Other potential areas of activity, such as entertainment, education, tourism and culture - remain beyond the realm of interests and/or capabilities of respondents. This lack of other forms of activity may be the result of people's health status, character traits, earlier ways of life or cultural models, but it can also be the result of the circumstances that limit the elderly people's opportunities for social participation, leading them to passivity (e.g. the poor economic condition of retirees, or the lack of active elderly role models). Therefore, there is a lack of senior citizens in the public sphere, since their activity predominantly relates to the private sphere.

#### Key words:

elderly people, activity, lifestyle

An elderly person's overall condition, level of activity, lifestyle, needs and expectations depend on a combination of biological, psychological and sociological factors. Elderly people constitute a social group that is heterogeneous in terms of cultural traits, social status, health issues, financial and social situation, living conditions, and familial ties. This leads to variety in the forms of activity they pursue and the lifestyles they lead. As early as during the first half of the twentieth century, Helena Radlińska wrote that old age is modified by one's profession, as well as by education and self-development. "In jobs that require a higher level of education and self development, the onset of old age is delayed" (Radlińska 1947: 12). Anna Zawadzka contends that the earlier phases of a person's life determine the quality and type of his or her activity in later stages of life, creating the possibility of undertaking conscious self-training and self-education. Furthermore, the type of activities in which elderly people engage is influenced by psychosocial factors, such as their personality traits, or – in the case of Polish society – the acquiescence of the employed sector to recreational, autocreative, and leisure activities (Zawadzka 1995: 39–52).

In analyzing activity as an inherent tendency or capacity to act, which is at the root of all behaviour, a means of exploring reality, and understood as a mental property manifested in physical and intellectual undertakings and conditioned by personality factors (Zych 2001: 19), it is not hard to call upon specific theories of activity, exclusion, and continuation. The first of these, formulated by Robert J. Havighurst, asserts that a good old age can be achieved by continuing engagement in various activities, as far as one's health and fitness allows. The theory of exclusion, developed by Elaine Cumming and William Henry, claims that with old age, a person's activity becomes limited, his or her social bonds with others weaken, and so the person withdraws from social life, becoming increasingly self-concentrated. Finally, the theory of continuation, formulated by Warren Peterson, combines elements of the theories of activity and exclusion. It asserts that individual phases of life are extensions of previous phases. When a person goes through the various stages of life, he or she develops values, norms and practices that are rather constant and form part of his or her personality. The key concept is adaptation: it is assumed that an individual approaching old age retains his or her abilities, while adapting to ever-new situations (Atchley 1972).

The theory of activity is based on the concept of education regarding old age, as formulated by Aleksander Kamiński. It involves aiding people in acquiring interests and aspirations, as well as skills and habits that will be helpful in achieving extended youth-fulness and a satisfying lifestyle upon reaching retirement age. Properly education people about old age is the best method to get them to accept it and even look forward to it as a period of life with its own intrinsic charms. The most important factors that prolong one's youth beyond one's sixties, according to A. Kamiński, include useful work and communal interests, accompanied by a monthly pension that does not fall below the poverty line. Other important factors are the state of one's health, diet, physical exercise, hygiene and ability to live with others, because these factors help one cope with the changing environment in which seniors will live (Kamiński 1978).

If activity is synonymous with life and consistent effort adapted to a person's capacity, then it is necessary for proper self-development, allows one to lead a creative and harmonious life, forms the basis for the treatment of many diseases, and slows the ageing process. Activity, regardless of age, provides a sense of satisfaction. However, lack of activity, personal contacts and support from other people creates a sense of inadequacy, which in turn leads to pain, isolation and loneliness. It can also cause loss of acceptance from one's environment, a worsening sense of well-being, and health deterioration. As a result, there is a strong relationship between health and level of activity. According to Bień (Bień 2007) lack of activity can lead to loneliness, social isolation, progressive disability and even premature mortality among the elderly.

Activities, according to Małgorzata Dzięgielewska, can be divided into three types:

- formal regarding participation in social organizations, in politics, in the works for the local community, volunteering, etc.;
- informal consisting of contact with family, friends, colleagues and neighbours;
- solitary which includes watching TV, reading, and developing one's own interests and hobbies.

These activities are determined by such factors as education, family background, health status and level of physical fitness, living conditions, gender, place of residence, and the impact of cultural institutions (Dzięgielewska 2006: 161).

Grażyna Orzechowska categorizes elderly people's activities by field of interest:

- Home/family activities which refers to running a household and participating in immediate family life;
- Cultural activities which include reading, watching TV, listening to the radio and participating in cultural institutions and senior citizens' clubs;
- Professional activities which fulfill the need for recognition, usefulness and suitability;
- Social activities which involve participation in various organizations;
- Educational activities which help older individuals in continuous self-improvement;
- Religious activities;
- Recreational activities such as working on the field, relaxation, physical exercise and favourite activities done for pleasure (Orzechowska 1999: 28–29).

Factors that limit the activity of older people include biological, psychological and socio-economic ones. Among the biological factors the following are noteworthy: deterioration of health; difficulties in movement; the nervous system's being overloaded with different types of stimuli (e.g. noise, stress, monotony or information), which can cause fatigue; poor nutrition, including both vitamin deficiency and excess calories; prescription drug dependence; recreational drug use (Skórzyńska 1999: 131).

Among the psychological factors of aging, the following may also be causes of social isolation: the gradual passing away of relatives and friends; simultaneous loss of confidence and unwillingness to make new connections, leading to a gradual with-drawal from social activity.

Among the socio-economic factors, the most important are: widowhood; the loss of one's professional role due to retirement; low income, which limits participation in social life and various forms of recreation; lack of preparation for old age; a negative attitude towards one's environment. (Łopatyński 1992: 8).

I will now present research conducted in Mazovia.

## 1. Organization of free time

The following research indicates that the respondents are mainly homebound, and the vast majority of their activity is focused around the house. The most persistent habits they had learnt from earlier periods of their lives were watching television or listening to the radio, reading, and meeting with friends and acquaintances.

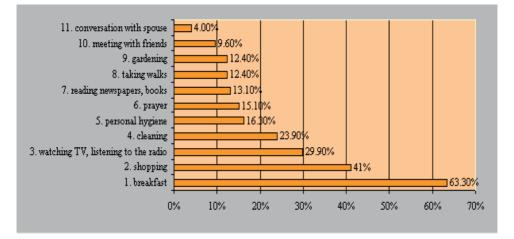


Fig. 1 Activities most commonly performed by respondents on a typical morning1

The research shows that the most common activities of older people on a normal day are meals; i.e. breakfast (63.3%), dinner (66.5%) and supper (26.3%). As can be seen, meals determine elderly people's daily rhythm. Besides eating, the most commonly performed activities in the morning are shopping (41%), watching TV and listening to the radio (29.9%), cleaning (23.9%), ablutions (16.3%), prayer (15.1%), reading newspapers and books (13.1%), taking walks (12.4%), and gardening (12.4%). At noon, respondents indicate that they also spend their time on relaxation (28.7%) and meeting with friends (13.5%). In the evening, the most common activities by far are watching TV and

<sup>&</sup>lt;sup>1</sup>All data presented in the form of tables and figures in the article come from the author's own research.

listening to the radio (81.7%). In addition, respondents eat dinner (26.3%), pray (17.5%), read newspapers and books (17.5%) and talk with friends and family (17.15%).

The vast majority of respondents attend mass on Sunday morning (62.5%). Later, they meet with other family members (61.8%), while in the evening, most respondents spend time watching TV or listening to the radio (76.1%). Just as on weekdays, meals – breakfast (51.8%), dinner (51.8%), and supper (18.7%) – make up an important part of the day.

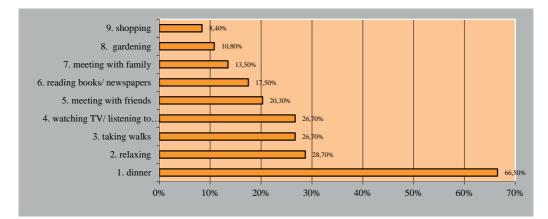


Fig. 2 Activities most commonly performed by respondents at noon

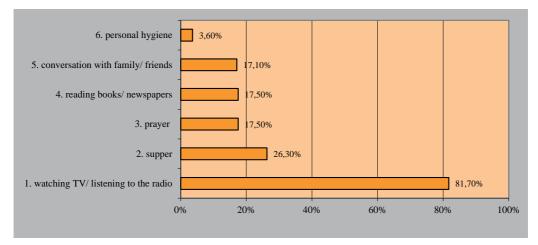


Fig. 3 Activities most commonly performed by respondents on a typical evening

The lifestyle of senior citizens, according to this research, can be described as passive and monotonous. Respondents are involved in culture to a very small degree. They prefer to watch TV or listen to the radio rather than going to the theater or cinema. The main areas of activity for the elderly are family, television, and church. Other potential spheres of activity, such as entertainment, education, tourism, or culture remain beyond the respondents' realm of interests and capabilities. This lack of other forms of activity may be the result of one's health status, character traits, earlier way of life or cultural models, but it can also be the result of the circumstances that limit elderly people's opportunities for social participation, leading them to passivity (e.g. the poor economic standing of retirees, or a lack of active elderly role models).

For the beneficiaries of pensions and welfare, another major factor (in addition to those previously mentioned) that limits access to popular culture (e.g. movies, theaters, concert halls, museums, books and newspapers) is the cost, which is beyond the evershrinking budgets of today's senior citizens. The need for access to popular culture has always been pushed into the background of social needs and economic problems. Thus, institutions and establishments that foster cultural and educational activities, including so-called Universities of the Third Age, may help change the elderly's passive lifestyles.

### 2. Hobbies

When asked about their interests, passions, and hobbies, 33.5% of respondents did not indicate any interest or hobby. For 13.5%, it is gardening, for 12.4% it is reading books, 7.2% said handicrafts, 4.4% said cultural entertainment, and 3.2% said solving

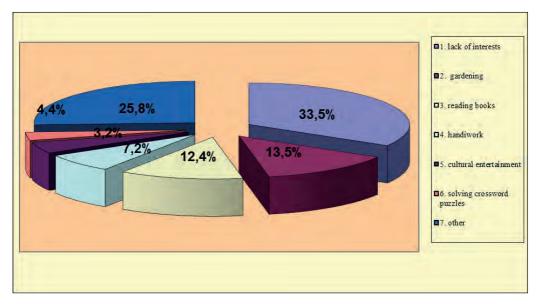


Fig. 4 Respondents' interests, passions, and hobbies

crosswords. When asked about their interests, respondents quoted the following: "I like to go to the forest – I pick whortleberries, wild mushrooms, and dewberries", "I like to sing – I sometimes sing in the parish", "I'm involved in parish life: I like helping those in need, and helping with the renovation of the church", "I have a dog – I take care of him and take him for walks. I also fish and cultivate my garden, because we have

a summer home", "(I enjoy) music, singing and solving crosswords", "(I enjoy) fishing and working in my greenhouse", "(I enjoy) watching TV", "I like working on clocks", "I have a general interest in what is happening in the world; I watch the news, and read the newspaper", "I play bridge and chess", "I am interested in sports: football, handball, track and field", "I make crafts from copper and amber", "I read about recent Polish, Russian, and European history", "I'm interested in my garden and the bees I care for.

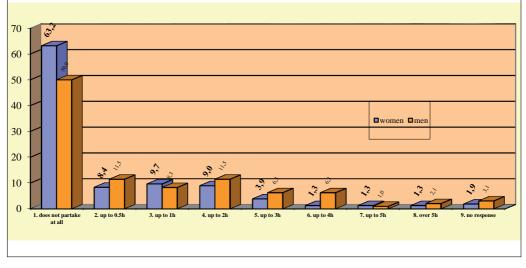


Fig. 5 Time spent on pursuing interests and hobbies by gender (in %)

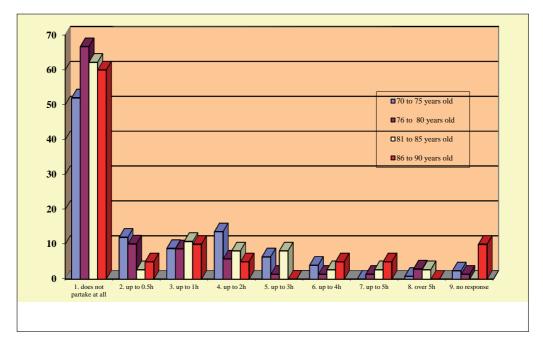


Fig. 6 Time spent on pursuing interests and hobbies, by age (in %)

I have an apiary, where I spend a lot of time", "(I spend time on) home improvement and repairs", "(I spend time on) improving my land: I'm making a pond, creating little paths, and planting","(I enjoy) reading books, especially murder mysteries", "(I've been) stamp collecting for over 40 years", "I like riding bikes", "I specialize in breeding pigeons", "I crochet".

As can be observed, one of the signs of ageing is reduced activity, which in turn leads to malaise, loneliness, boredom, and a feeling of not being needed. Elderly person are often relatively inactive, which makes it less likely that their basic needs, particularly their social needs connected with living among other people, are met.

### 3. Involvement in various aspects of life

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	Membership in organizations, associations etc.					
	Yes		No		Overall	
Type of organization	#	%	#	%	#	%
Veterans' associations	22	8.8	229	91.2	251	100.0
Religious communities and movements	25	10.0	226	90.0	251	100.0
Labour unions	11	4.4	240	95.6	251	100.0
Rural housewives' associations	1	0.4	250	99.6	251	100.0
Political parties	6	2.4	245	97.6	251	100.0
Self-help organizations	5	2.0	246	98.0	251	100.0
Local governments	2	0.8	249	99.2	251	100.0
Community clubs	5	2.0	246	98.0	251	100.0
Senior citizens' associations	15	6.0	236	94.0	251	100.0

Tab. 1 Membership in organizations, associations, etc.

The majority of the respondents (over 90%) do not belong to any organization. Ten percent are members of religious communities or movements, and 8.8% are members of veterans' associations. Eighteen of the respondents were members of the Association of the Living Rosary, eight belonged to the Polish Society of War Veterans, five to the Polish Association of Pensioners and Annuitants, the same number to the Polish Teachers' Union, four to the Society of Fighters for Freedom and Democracy, three to the Catholic Action Association and the same number to parish choirs. Two people were members of the Society of Polish Army War Veterans. The same number of people belonged to the Warsaw Uprisers and the Volunteer Fire Brigade. Respondents also belonged to the Gray Ranks Paramilitary Association, the Polish Army Soldiers' Association, the Grójec Area "Głuszec" Society, the Katyń Family Association, the Work Association for Engineers and Technicians, a community council, and the Polish Accountants' Association.

Commitment of respondents to helping non-family members						
	Yes		No		Overall	
	no.	%	no.	%	no.	%
Volunteering	18	7.2	233	92.8	251	100.0
Charity groups in parishes	28	11.2	223	88.8	251	100.0
Looking after graves	38	15.1	213	84.9	251	100.0
Looking after places of historical significance	20	8.0	231	92.0	251	100.0
Looking after children of acquaintances or neighbours	16	6.4	235	93.6	251	100.0
Helping neighbours	60	23.9	191	76.1	251	100.0
Helping the sick or disabled	37	14.7	214	85.3	251	100.0

Tab. 2 Commitment	of respondents to	helping non-f	family members
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When respondents extended their help beyond their family, they most often helped neighbours (23.9%), looked after graves (15.1%), helped the sick or disabled (14.7%) and looked after children of acquaintances or neighbours. Help towards neighbours or acquaintances mainly took the form of lending money (12.4%). 6.8% of respondents donated money to fundraisers for children in need and the same percentage supported charities. A small percentage of respondents did volunteer work, or took part in initiatives for the local community, sports, or cultural events<sup>2</sup>.

Elderly people have more time than younger people; they possess more knowledge and experience than the latter and could use those attributes to better help themselves and others. However, that is not what is happening. One could imagine that belonging to organizations and performing social or volunteer work would be an important and beneficial part of the elderly lifestyle. However, only a small percentage of the respondents pursue fulfillment in such a manner, even though volunteering and helping others offer possibilities for further growth, allow for the discovery of new interests, and present the means to continue educating oneself and expand one's knowledge. Elderly people most often lean towards spiritual values. Religiosity is related to one's own age and to death, and to the system of moral values a person uses to judge his or her life, as well as the lives of others.

The results of the studies carried out showed that 63.7% of the respondents were people of faith and practiced systematically, 26.3% were unsystematically practicing people of faith, 7.2% were people of faith but did not practice, 0.8% were not people of faith but adhered to religious traditions, and 2% defined themselves as not being people of faith.

As for participation in religious practices, 53.4% of the respondents declared that they participate once a week, 23.1% several times per week, 10,4% once to twice per month and 13,1% a few times per year. Participation in religious practices plays a significant role in the life of the elderly; especially women. Partaking in masses or other

<sup>&</sup>lt;sup>2</sup> Their social engagement is two to three times lower than that of people in western European countries and is usually limited to close family. It is correlated with a low level of trust towards other people; a characteristic of Polish society. This lack of trust cements the passiveness of Polish senior citizens.

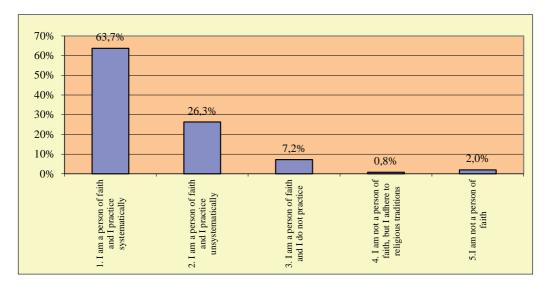


Fig. 7 Attitude towards religion

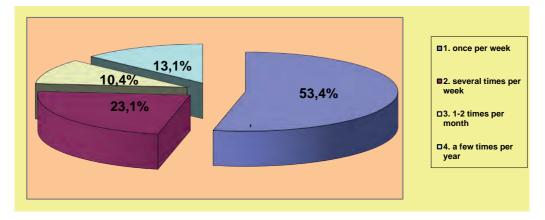


Fig. 8 Frequency of participation

such events and praying the rosary or other prayers take up a significant portion of their free time. Religious practices fulfill not only the spiritual needs of the elderly, but also provide a sense of safety and participation in a community. For some of the respondents, going to church is not only a time for meeting with God, but also with other people. Participation in a religious community gives them the feeling of belonging to a larger group of people that share similar spiritual needs and similar views on key issues.

In conclusion, it is plausible to say that the domain of elderly people is watching TV, listening to the radio, reading, gardening, practicing religion, and participating in family meetings. Few elderly people devote their free time to hobbies and physical activity, going to the theatre, the cinema, museums or restaurants, or participating in cultural events. Hence, it can be argued that the wider participation of elderly people in their

respective communities is inadequate. This applies to different aspects of this participation, namely being active in political or social structures, openness to the problems of other people and readiness to assist in such problems, as well as media appearances. In general, there is a lack of elderly people in the public sphere. Their activity is mostly limited to the private sphere. Those limitations exist due to the presence of formal barriers. What needs to change are social values - both of the elderly and of younger generations, especially of professions and associations that influence public opinion. In urban design, the needs and limitations of the elderly should be taken into greater consideration. In such initiatives it is important not only to consider "stairs and high ledges", but primarily to construct more elderly-friendly architecture that considers the needs and limitations of older people (B. Szatur-Jaworska 2008: 121). The need to combat the passivity of senior citizens was strongly emphasized in the national plan of action in accordance with the European Year of Active Elderly and Intergenerational Solidarity in 2012. Said document delineates goals that are meant to encourage activity in elderly people, for instance active involvement in communities, volunteer work, intergenerational integration and the promotion of active participation in social services for other elderly people (MPiPS 2012: 10).

It may be beneficial to introduce new institutional solutions that would make it easier for elderly people to function socially. For example, in Germany there are senior citizen offices that employ highly qualified personnel to serve the role of partners for elderly citizens. Together, they go over the elderly person's problems, looking for optimal solutions. The main goal of these offices is to strengthen awareness of self-sufficiency, regardless of age and disability. There are community services that provide help with everyday needs such as getting around in a wheelchair, having company on walks, and cleaning one's house or yard. Spaces are also provided in which elderly people can meet, get to know new people and create support groups, under the constant supervision of specially trained staff and volunteers. It is important to note that volunteer work done by senior citizens is practically nonexistent in Poland.

It is obvious that elderly people cannot be grouped into a single category based on age. Hobbies, knowledge, and competence should be the basis of classification. That is why the possibilities offered to the elderly should consist of differentiated services, oriented toward the development of individual needs, easing and simplifying various basic tasks and allowing for self-realization. When considering the difficulties people face in maintaining contact with their community or in finding a place that accommodates their disabilities, one needs to be aware of the danger of the self-isolation of the afflicted parties, also known as auto-marginalization. To counteract this, it is necessary not only to help the elderly prepare for their lives, but to create organizations or institutions that provide an appropriate environment for the elderly to find their place in life.

### References

Bień, Barbara. 2007. "Sytuacja zdrowotna osób w podeszłym wieku." In Grodzicki, T. Kocemba, J. Skalska, A. (eds) *Geriatria z elementami gerontologii ogólnej*, pp. 42–46. Gdańsk: Via Medica.

Cumming, Elaine and Henry, William. 1961. Growing Old: The Process of Disengagement, New York: Basic Books.

Dzięgielewska, Małgorzata. 2006. "Aktywność społeczna i edukacyjna na tle innych typów aktywności." In Szatur-Jaworska, Barbara, Błędowski, Piotr, Dzięgielewska, Małgorzata (eds), *Podstawy gerontologii społecznej*, pp. 161–181. Warszawa: ASPRA-JR.

Havighurst, Robert J. 1948. *Developmental Tasks and Education*. Chicago: The University of Chicago Presss.

Havighurst, Robert J. and Albrecht, Ruth. 1953. Older People. New York: Longmans, Green and Co.

Havighurst, Robert J. 1963. "Successfull Aging." In R. Williams, T. Tibbitts, W. Dondhue (eds) *Processes of Aging*. New York: Atheton.

Kamiński, Aleksander. 1978. Studia i szkice pedagogiczne. Warszawa: PWN.

Orzechowska, Grażyna. 1999. Aktualne problemy gerontologii społecznej, Olsztyn: Wyższa Szkoła Pedagogiczna.

Radlińska, Helena. 1947. Oświata dorosłych. Warszawa: Ludowy Instytut Oświaty i Kultury.

Skórzyńska, Hanna. 1999. "Problemy zdrowotne i społeczne ludzi w podeszłym wieku." In Latalski, M. (ed.), *Zdrowie publiczne*. Lublin: AM.

Szatur-Jaworska, Barbara (ed.), 2008. "Stan przestrzegania praw osób starszych. Analiza i rekomendacje." *Biuletyn RPO – Materiały* 65.

Zawadzka, Anna. 1995. "Uwarunkowania wychowania do czasu wolnego w rodzinie i w środowisku lokalnym ludzi III wieku." *Edukacja Dorosłych* 2–7:39–52.

Zych, Adam. 2001. Słownik gerontologii społecznej, Warszawa: Wydawnictwo Akademickie "Żak".