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ANDRAGOGICAL PERSPECTIVE ON QUALITY OF LIFE IN OLD AGE

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Summary. This theoretical study deals with the issue of education and activation of seniors (geragogy) in the context of current demographic changes, which fundamentally transform the age structure of society. The aim of the thesis is to define the role of andragogy in the process of supporting the quality of life in the post-productive age based on a critical analysis and synthesis of professional literature. The text analyses in detail the bio-psycho-social determinants of aging and defines educational strategies that serve as the prevention of social exclusion and cognitive decline. Special attention is paid to the connection between physical activation and mental training and to the reflection of the phenomenon of ageism in institutional care. The study also discusses the legislative framework of social services in the Czech Republic and the ethical aspects of activation, including the senior's right to autonomy. The conclusions confirm that conceptual geragogic intervention is an essential tool for fulfilling the concept of successful ageing and preserving human dignity.

Keywords: andragogy, geragogy, education of the elderly, active ageing, quality of life, ageism, cognitive training, social services, lifelong learning, demographic revolution.

Introduction

Contemporary society is undergoing a fundamental transformation that is unprecedented in the history of mankind. This process, often referred to as the "demographic revolution", fundamentally changes the age structure of the population and poses new challenges for the social sciences. Aging is no longer just an individual destiny but is becoming a dominant social phenomenon that requires a comprehensive solution. As stated by Rabušic (1997), Czech society must come to terms with the fact that seniors make up an increasingly important part of the population, and it is necessary to overcome stereotypes that marginalize old age.

Andragogy, as a science of adult education, is gaining key importance in this context. It cannot be reduced only to vocational training in working age; It must encompass the entire life path of a person. The aim of this thesis is to prove because of a theoretical analysis that education and activation are not an extension in the elderly, but a necessary condition for maintaining the quality of life and autonomy. We start from the assumption that aging is a process that can be actively modified. Government documents such as the *National Programme for Preparation for Ageing* (Ministry of Labour and Social Affairs, 2024) confirm this trend and emphasize the need for lifelong learning and intergenerational solidarity.

Demographic bases and transformation of society

The basic framework for understanding the issue of educating seniors is hard data. According to current data from the Czech Statistical Office (2023), life expectancy is increasing, which entails the need to redefine the length and content of post-productive life. It is not just about "adding years to life", but above all "adding life to years". Alan (1989) points out in his sociological analysis of life stages that the traditional division of life into the preparation phase, the productive phase and the rest phase is blurring. Old age becomes a full-fledged, active stage with its own development potential.

However, this shift is confronted with the unpreparedness of social structures. As Havlík (2008) points out in the introduction to sociology, the social status of seniors is often threatened by the loss of their professional role and economic standard. Society tends to perceive seniors as a homogeneous group, but this is a mistake. Seniors are a highly differentiated group with different needs, health status and educational aspirations.

Theoretical definition of the aging process

To effectively set up educational and activation processes, we must first understand the phenomenon of aging itself. It must be understood multidimensionally – as an intersection of biological, psychological and social changes.

Biological aspects of aging

From a biological point of view, aging is an irreversible process that is genetically encoded, but at the same time strongly influenced by external factors. Austad (1997) explains the *evolutionary and physiological mechanisms of aging in his publication Why We Age*, emphasizing that the rate of wasting of an organism is not the same in all individuals. This opens space for prevention.

Hocman (1985) adds that aging begins practically from birth and is a continuous process of change. In the elderly, these changes are manifested by a decrease in functional reserves of organs, slowing down metabolism and changes in the musculoskeletal system. Pacovský (1981), as the doyen of Czech gerontology, defines gerontology as a set of knowledge about aging and old age, distinguishing between physiological (normal) and pathological aging. It is crucial to realize that many of the problems that we automatically attribute to old age are the result of illness or inactivity, not of age itself (Pacovský, 1990).

The concept of "healthy aging" is developed by Bortz (1995), who argues that a person has the potential to live a healthy and active life until a very old age (the so-called natural hundreds) if he adheres to the principles of an active lifestyle. This is crucial news for geragogics – aging is not just a passive waiting for the end, but an active process that we have largely in our hands.

Psychological aspects and developmental psychology

The psyche of an aging person undergoes specific changes. The psychology of lifelong development, which was elaborated in a modern way by Gruss (2009), refutes the myth of the impossibility of learning in old age. Neuroplasticity of the brain is preserved, although it requires other methods of stimulation.

Old age is also a period of balancing. Říčan (1990) in his work *The Way of Life* describes this period as a stage of the search for integrity and meaning. If a person is unable to come to terms with his own past and accept the finitude of life, he is in danger of despair. Gregor (1990) aptly notes that "growing old is a skill". It is an art that we must learn to be able to gracefully accept the changes that are coming.

Sociological view and the phenomenon of old age

The social dimension of old age is defined by how society perceives seniors and what place it assigns to them. Haškovcová (1990) analyses old age as a social construct in her key monograph *The Phenomenon of Old Age*. He points out that the calendar age is only a mathematical data, while the actual age is determined by the functional state and social context.

An important topic in social gerontology is the so-called ageism – discrimination because of age. This term, defined in many sources, including the electronic encyclopedia Wikipedia, which describes prejudices that lead to the exclusion of seniors from social events. Ageism manifests itself in language, in the attitude of the authorities, but also in the internalized attitudes of the elderly themselves, who resign from activity under the impression that "it is no longer worth it".

Geragogics

In response to the above biological and social changes, geragogics is formed. It is a discipline that specifically deals with education in old age. It is not only about the transfer of information, but about comprehensive care for the personality of the senior.

The role and anchoring of geragogics

Geragogy stands on the border of pedagogy, andragogy and gerontology, it is a multidisciplinary field that integrates knowledge from many sciences. The goal of geragogy is not performance, but experience, maintaining competence and social inclusion. As we will see in the next part of the thesis, education of seniors plays an irreplaceable role in the prevention of dementia and social isolation (Veteška, 2017).

Geragogy in the context of theory and practice with the education of seniors

Functions and objectives of education in the post-productive age

To understand the meaning of education for seniors, it is necessary to define its basic functions. These are fundamentally different from education of working age, where the qualification and economic function dominate. In geragogy, the focus shifts to cultivation, social and preventive functions. The key taxonomy

in the Czech environment was already defined by Livečka (ed.) (1979) in his pioneering work *Introduction to Gerontopedagogy*. He established four basic functions that are still considered axiomatic in professional literature:

1. Preventive function: Its essence is preparation for aging, which should begin in middle age. The aim is to equip individuals with competencies to manage involutionary changes and prevent adaptation failure.

2. Anticipatory function: Closely related to prevention, it focuses on anticipating future changes in social roles (e.g. retirement, widowhood) and preparing for them.

3. Rehabilitation function: Education serves as a tool for maintaining and restoring mental and physical strength. Cognitive training can work as a rehabilitation of memory functions.

4. Strengthening (stimulating) function: It supports the interests of seniors, their social integration and a sense of usefulness, thus strengthening overall psychological resilience.

This classification is further developed by Petřková and Čornaničová (2004), who emphasize that the education of seniors is not a homogeneous process, but must reflect individual educational needs and limits (Haškovcová, 2010). It complements the functions with a communicative and intergenerational dimension, where education serves as a bridge between generations and a tool against social isolation.

Psychodidactic specifics and andragogical approach

Educating seniors requires a specific didactic approach that respects changes in the cognitive area. As Beneš (2003) states in the publication *Andragogika*, adult education must be based on the life experiences of the participants. A senior is not a "blank slate", but a bearer of crystalline intelligence and rich experience on which to build.

From a psychological point of view, as described by Farková (2002) in *Introduction to Adult Psychology*, it is necessary to consider changes in motivation. While in children the motivation is often external (grades, parents), in the elderly, the dominant motivation is intrinsic (intrinsic) – the need for social contact, interest in the field or saturation of cognitive needs.

Jesenský (2000a, 2000b) draws attention to the necessity of a so-called comprehensive approach, especially if we work with seniors with disabilities (gerontagogics of the handicapped). Didactic methods must be adapted to a slower psychomotor pace, worse sensory perception (sight, hearing) and reduced memory inculcation. Emphasis is placed on clarity, repetition and a safe, stress-free environment.

Švec (2005) adds in his definition of basic terms in pedagogy and andragogy that the goal is not performance, but the process itself. Education in old age has a self-realizing and therapeutic character. As Švec (2009) states in methodological works, feedback and evaluation of programs are also important so that they meet the real needs of the target group.

Institutional forms of lifelong learning

The implementation of geragogical activities takes place in a wide range of institutions. Mühlpachr (2009) structures *these forms in Gerontopedagogy* from highly organized to informal leisure activities.

Universities of the Third Age (U3V)

The flagship of senior education is the Universities of the Third Age. This concept, originated in France in the 1970s, has become a global phenomenon. In the Czech Republic, universities (e.g. Charles University, Masaryk University) offer programs that allow seniors to investigate the academic world without pressure to pursue a career.

Studying at U3V has a distinct social-inclusive characteristic. Participants not only gain new knowledge, but also become part of the academic community, which strengthens their self-esteem. The Ministry of Labour and Social Affairs (2024) has repeatedly emphasized the importance of U3V for active ageing and the promotion of mental health of the population in its strategies.

Academy of the Third Age and Active Ageing Clubs

For seniors who do not prefer an academic environment, there are Academies of the Third Age and Active Ageing Clubs. These institutions, often established by municipalities or non-profit organizations (e.g. the Czech Red Cross), offer less formal education. The content of the courses is usually languages, memory training, computer work or health prevention.

Štilec (2004) in his book Active *Lifestyle Program for the Elderly* emphasizes the importance of these local centers, because they are often more accessible to seniors (geographically and financially) and offer stronger community ties. Clubs serve as a "second home" and to prevent loneliness.

Activation in residential facilities

A specific chapter is education and activation in homes for the elderly. Here, geragogics is intertwined with occupational therapy and social care. Klevetová and Dlabalová (2008) in the publication *Motivational Elements in Working with the Elderly* point out that even in institutional care, it is necessary to activate clients, not just "treat" them. Passivity leads to rapid decline (hospitalism).

Activation programs in homes (e.g. DS K, 2024; DS Ú, 2024) include reminiscence therapy (work with memories), music therapy, art therapy or fitness exercises. The aim is to maintain the remaining competence and dignity of the client for the rest of his life. Web portals of social service providers (Social Services Prague, 2024) illustrate the diversity of these offers, from memory training to physical activities.

Motivation and Barriers in Senior Education

The success of the educational process depends on motivation. In their book Living with the Elderly, Pichaud and Thareau (1998) describe the barriers that prevent seniors from engaging in activities, often psychological (fear of failure, shame, low self-esteem) or social barriers (lack of finances, poor transport accessibility).

The role of an andragogist is to remove these barriers. It is necessary to create an inclusive environment where failure is perceived as part of learning, not as a failure. Motivation can be supported by the visibility of the results (e.g. an exhibition of art therapy products) or social appreciation. Klevetová and Dlabalová (2008) emphasize that the greatest motivation is the meaningfulness of the activity – the senior must see that what he or she is doing makes sense for him or for others (Šimek, 2025).

Health determinants of education

The Challenge of Neurodegenerative Diseases

The ageing of the population brings with it an increased prevalence of chronic diseases, which have a major impact on the ability to learn about and quality of life. In the context of geragogy, dementia syndromes pose the greatest challenge. Mühlpachr (2009) points out that dementia is not an isolated disease of one person, but a phenomenon that affects entire families and places enormous demands on the social system.

Dementia as a barrier and goal of intervention

Dementia is a syndrome resulting from a brain disease, usually of a chronic or progressive nature. Jirák and Koukolník (2004) in their monograph *Dementia* define this condition as a disruption of many higher cortical functions, including memory, thinking, orientation, comprehension and the ability to learn. It is crucial to distinguish between common age-related forgetfulness and a pathological process.

The most common form is Alzheimer's disease, which accounts for 50–60% of all cases. Jirák, Obenberger and Preiss (1998) describe in detail two forms of this disease: the early form (beginning before the age of 60, genetically determined) and the late form. The disease manifests itself in a creeping way – from short-term memory disorders through phatic disorders (aphasia, apraxia, agnosia) to a complete loss of self-sufficiency.

Other types that an andragogist or activation worker must distinguish are vascular dementia (associated with vascular events), Parkinson's disease with dementia or Lewy bodies. Koukolník and Jirák (2004, cited by Mühlpachr, 2009) also draw attention to rarer forms, such as Creutzfeldt-Jakob disease or dementia in Huntington's disease.

Prevention and non-pharmacological approaches

Although dementia is irreversible in advanced stages, education plays a vital role in preventing and slowing progression. Brangdon and Gamon (2009) in the publication *Don't Let the Brain Age* present evidence that cognitive training and lifelong learning create a so-called cognitive reserve.

Nutrition and lifestyle also play an important role. Mühlpachr (2009) mentions the protective effect of substances such as folic acid, B-complex vitamins or omega-3 fatty acids. Movement stimulates blood circulation in the brain and neuroplasticity, which is in line with the theses of Křivohlavý (2009) on the psychology of health.

Legislative and social framework of care

Education and activation of seniors are not only an expression of good will, but are legislatively anchored in the social care system of the Czech Republic.

Social Services Act

The basic pillar is Act No. 108/2006 Coll., on Social Services. This Act defines the obligation of social service providers to provide not only basic care, but also educational, educational and activation activities. The aim is to prevent social exclusion and promote self-sufficiency.

The law distinguishes between social counselling, social care and social prevention services. In the context of residential services (homes for the elderly), activation is a mandatory part of quality standards. Venglářová (2007) points out in her book *Problematic Situations in Care for the Elderly* that the fulfilment of the letter of the law in practice encounters personnel and financial limits, which can lead to formalism (Oláh a Šimek, 2024).

The role of family and community

State care cannot fully replace natural social ties. Rheinwaldová (1999) emphasizes the *irreplaceable role of the family in Modern Care for the Elderly*. Intergenerational solidarity and contact with loved ones are crucial for the mental well-being of a senior. If the family fails or is absent, there is a risk of social isolation and depression.

Pichaud and Thareau (1998) describe the dynamics of coexistence with the elderly and warn against "overcare" that deprives the elderly of autonomy. Active ageing requires the senior to remain a valid member of the community, not just a passive recipient of care. This opens up space for volunteering and community centers, as described by Social Services Prague (2024).

Methods of activation in practice

The specific form of activation must be based on the individual needs of the client. Walsh (2005) offers a wide range of activities in his collection *Group Games and Activities for the Elderly*, from reminiscence games to simple physical activities. The goal is not performance, but experience and social interaction.

Movement and relaxation techniques

In addition to classic exercise, alternative methods also work well. Butzbach (2004) mentions reflexology as a method of health promotion. Štilec (2004) recommends walking, swimming or exercising on chairs, which is safe even for less mobile seniors. Regularity and adequacy of the load are important.

Cultural and artistic activities

Art therapy, music therapy and bibliotherapy (reading therapy) are powerful tools of geragogy. In her personal testimony *Diary of an Old Lady, Šiklová (2003)* shows how important intellectual and cultural activity is for the preservation of identity. Reading, visiting theatres or listening to music is not just "entertainment", but cognitive training par excellence.

Ethical dilemmas and the future of geragogics

The previous chapters outlined the possibilities and methods of educating seniors. However, it is necessary to subject contemporary practice to critical reflection and to place it in a broader ethical and societal framework (Oláh a Šimek, 2024).

Activation versus the right to rest

The dominant discourse of contemporary gerontology is "active aging". Gruss (2009) and Štilec (2004) rightly highlight the benefits of activity. However, in the practice of social services, this pressure can lead to a new form of pressure, where a senior who does not want to participate in organized activities is perceived as "problematic" or "uncooperative".

Mühlpachr (2009) and Venglářová (2007) draw attention to the thin line between motivation and manipulation. Andragogy must respect the autonomy of the individual, including the right to passivity or solitude, which Šiklová (2003) does not necessarily describe in her reflections as loneliness, but as a space for contemplation. It is necessary to distinguish between apathy (a manifestation of depression or dementia) and a conscious choice of peace, which is in accordance with the life strategy of the senior (Šimek, 2025).

Taboo topics in education

Geragogics often avoids topics that are taboo in society, although they are crucial for the quality of life of seniors. One of them is sexuality in old age. Dessaint (1999) points out the prejudices that desexualize

the elderly, even though the need for intimacy and touch does not disappear. Education for staff and family members in this area is insufficient.

The second key theme is the finiteness of life. In the publication *Counseling for Survivors, Špatenková (2023)* emphasizes the need for education in the field of thanatology. Seniors often need space to share fears of death and process the loss of partners. Říčan (1990) adds that coming to terms with finitude is the main developmental task of old age. Ignoring these topics in activation programs leads to superficial care.

The intergenerational gap and the role of technology

Rabušic (1997) and Alan (1989) warned of the risk of intergenerational conflict due to the aging of the population in the last century. Today, this conflict is also moving to the technological level. The digital divide is a real factor in social exclusion.

The courses on working with PCs and the Internet, mentioned in the offers of DS K (2024) and Social Services Prague (2024), are not only about technical skills, but about maintaining communication channels with the younger generation and authorities. However, Petřková and Čornaničová (2004) warn against a technocratic approach (Šimek, 2025). Technology is supposed to serve people, not the other way around. Education in this area must be patient and individualized, often using the "seniors teach seniors" method, which relieves stress.

Institutional limits and ageism in practice

Despite the existence of strategic documents (Ministry of Labour and Social Affairs, 2024), practice still encounters structural ageism. There is a shortage of qualified andragogists in social service facilities, and care is often provided by overburdened staff who may perceive activation as an additional burden. Chronic workload, time pressure and insufficient psychosocial support can further reduce the quality of care and increase the risk of burnout among professionals (Šimková & Šimek, 2025). Klevetová and Dlabalová (2008) emphasize that the motivation of the staff is as important as the motivation of the clients. Without supervision and further professional education, there is a risk of burnout syndrome and a slide into routine, impersonal care, which is also criticized by Haškovcová (2010).

Personality factors and health psychology

The success of geragogic intervention is limited by the personality of the senior citizen psychological studies (Farková, 2002) show that traits such as rigidity or lability are accentuated in old age. Křivohlavý (2009) in *Psychology of Health* proves that optimism and resilience are predictors of longevity.

The task of an andragogist is not to "remake" the personality of a senior, but to find such forms of education that resonate with his lifelong setting. For some, it may be manual activity within the framework of occupational therapy (Baláž, 1970), for others it may be intellectual stimulation at the University of the Third Age.

Conclusion

The presented theoretical study addressed the issue of education and activation of seniors, geragogy, in the context of the current demographic revolution, which is transforming ageing from an individual fate into a dominant societal phenomenon. Based on the analysis of the literature and the legislative framework, several key conclusions can be drawn.

First, the ageing process must be understood multidimensionally, as the intersection of biological, psychological and social changes. The study confirmed that education in post-productive age is not an additional luxury, but a necessary condition for maintaining quality of life, preserving cognitive functions and preventing social exclusion. In this context, geragogy performs irreplaceable preventive, rehabilitative and strengthening functions.

Second, institutional forms of lifelong learning, such as Universities of the Third Age, academies and activation programmes in homes for the elderly, including memory training and art therapy, play a fundamental role in supporting successful ageing and in building cognitive reserve, which may help slow the onset of dementia.

At the same time, the study pointed to the ethical and structural limits of current practice. Critical reflection revealed the persistent risks of ageism and the need to avoid manipulative pressure toward activity. Full respect for the autonomy of the senior, including the right to rest and privacy, remains essential. Future andragogical intervention must also address taboo topics, such as sexuality in old age, the finiteness of life and the challenges associated with the digital divide.

In conclusion, care for older adults does not consist only in meeting health and material needs, but above all in humanizing the approach and supporting mental development until the end of life. Investment in the education of the oldest generation is therefore not only a service to seniors themselves, but also an investment in the cohesion and maturity of society as a whole.

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