



Message from the Guest Editor Special Issue

Dear Readers,

The English-language international day of the Gerontology Days International Scientific Conference took place on October 17, 2025.

The conference provided an opportunity to present scientific and professional achievements related to the field of gerontology, as well as to promote cooperation and the sharing of best practices. The event included presentations of research results achieved to date, discussions of experiences with effective methods, and the identification of new, joint development directions.

The social and health challenges arising from demographic changes can only be effectively addressed with complex solutions based on cooperation across professional fields and national borders. Recognizing this, Hungarian and international experts in gerontology, researchers, students and professionals working in the fields of education, social services and healthcare gather every year at events organized by the Faculty of Health Sciences, University of Debrecen.

This time, the conference was supported by MEC_24 sub-programme MEC_SZ_24 of the "Scientific Patronage Call" under ID number: MEC_SZ149415 "International Gerontology Conference". This funding has made it possible for us to personally host international speakers. Their personal presence facilitated shared thinking and could lay the foundation for cooperation. Some of the invited guests have already been partners of the faculty – from the United States, Russia, Turkey, Poland, and Slovakia — but in recent years, additional professional relationships have been established with researchers and professionals from Malta, Poland, Syria, Pakistan, Romania and Germany, among others, who accepted the invitation and presented their latest scientific findings.

This cultural diversity is also reflected in this abstract publication, which contains summaries of the English-language presentations.

Ágnes Bene, Secretary of the Conference, Editor of Conference Issue

Appx.

The abstracts of Section 9 can be found in the Vol. 16 (2024): Conference Issue.



Szerkesztői előszó

Kedves Olvasók,

A Gerontológiai Napok Nemzetközi Tudományos Konferencia angol nyelvű nemzetközi napja 2025-ben október 17-én zajlott. A konferencia lehetőséget biztosított a gerontológia területeihez kapcsolódó tudományos és szakmai eredmények bemutatására, az együttműködések fejlesztésére, a bevált gyakorlatok megosztására. Sor került az eddig elért kutatási eredmények ismertetésére, a hatékony módszerek tapasztalatainak megvitatására, valamint új, közös fejlesztési irányok kijelölésére.

A demográfiai változásokból adódó társadalmi és egészségügyi kihívások csak olyan komplex megoldásokkal kezelhetők hatékonyan, amelyek szakmai területeken és országhatárokon átívelő együttműködésekre épülnek. Ezt felismerve gyűlnek össze évről évre a gerontológia hazai és nemzetközi szakértői, kutatók, hallgatók, valamint az oktatási, szociális és egészségügyi területen dolgozó szakemberek az Egészségtudományi Kar rendezvényein.

2025-ben a Konferencia megrendezését a MEC_24 kódszámú „Tudományos Mecenatúra Pályázat” MEC_SZ_24 kódszámú alprogramja támogatta, MEC_SZ 149415 azonosító számon „Nemzetközi Gerontológia Konferencia”. Ez a pályázati forrás tette lehetővé, hogy személyesen lássuk vendégül a nemzetközi előadókat.

A meghívott vendégek egy része már korábban is együttműködő partnere volt a karnak – az Egyesült Államokból, Oroszországból, Törökországból, Lengyelországból és Szlovákiából – de az elmúlt években további szakmai kapcsolatok is kiépültek többek között máltai, lengyel, szír, pakisztáni, román és német kutatókkal, szakemberekkel, akik elfogadták a meghívást, és bemutatták legújabb tudományos eredményeiket.

Ebben az absztrakt kiadványban, ami az angol nyelvű előadások összefoglalóit tartalmazza, megjelenik ez a kulturális sokszínűség.

Bene Ágnes, a Konferencia titkára

Megjegyzés: A 9. Szekció Absztraktjai megtalálhatóak a 16. évfolyam Konferencia Különszámában.



Longer male life in the Mediterranean - Older men's roles, habits and leisure activities in Malta

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Keywords: Malta, older man's longevity, garage culture

Most aging societies are characterized by gender differences, i.e., a predominance of women among those aged 65 and over, and especially among the oldest elderly. This trend can also be observed in Malta. While in Hungary the gender balance breaks down among the over-50s (with slightly more men in earlier age groups), in Malta this phenomenon is observed at the earliest among the over-75s.

The aim of the research is to explore the characteristics of longer life among Maltese men.

Method: The research method was interviews. In the first stage, we interviewed elderly Maltese men (n=7) and foreign adults who had been living in Malta for more than a year (n=11).

Results: The research revealed several components of the activity of elderly Maltese men. The respondents reported on the diverse roles played by older men in their local communities. In addition to traditional grandparental roles, such as looking after their grandchildren, they also volunteer in local sports clubs and community events, with activities appropriate to their age and abilities. A characteristic feature of their voluntary activities is that they almost always carry them out in groups. Older men are also active in advocacy, as members of local, national, and international organizations.

Groups of older men in Malta can often be seen not only in coffee shops and bars, but also in front of their homes, talking, laughing, or crying, hugging each other. They do not refrain from expressing their emotions in public.



In Maltese communities, it can also be observed that elderly men spend long periods of time in groups in their open garages. The large garage is a common meeting place for elderly men. This garage culture may be one of the components of the long active life of Maltese men.

In the next phase of the research, we are planning to involve additional study participants. We also intend to provide a detailed description of the garage culture phenomenon observed among Maltese men.

Research ethics permission: EPKEB-2025-137

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Health status of persons aged 65+ - cross-sectional study

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Keywords: health, older adults, health care, long-term illness, subjective health status

Introduction: The aim of the research was to describe the health status of older adults in the South Bohemian Region using selected indicators.

Methods: A descriptive and cross-sectional study was chosen. The study included 403 individuals (65+) selected by quota sampling. The sample is representative in terms of gender, age, and region. Quantitative research strategy using a questionnaire.

Results: The largest proportion of respondents (40.2%) stated that they suffer from one long-term illness, while another 38.0% reported more than one, the remaining 20.1% do not suffer from any of them. A statistically significant relationship was demonstrated between the incidence of long-term illness among respondents and their age, marital status, housing situation, and education.

Discussion and Conclusions: Seniors living in residential facilities, widows/widowers and divorced respondents had worse results than seniors living in a household with another person. Loneliness and loss of meaning in old age can cause spiritual distress and lead to poor health conditions. In order to ensure the sustainability of the current healthcare system, it is necessary to support volunteering and other public programs promoting healthy lifestyles for seniors; sufficient number of primary care providers; sufficient number of field social services; decent financial security and sufficient contributions for care.

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A new Precedent in Health Cooperation to Make an Assessment Model of Total Demand for Health Service

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Keywords: health cooperation, health demand, health data prediction, health demand model

Working in a team greatly improves health cooperation and helps propose innovative solutions for health issues. Furthermore, a multidisciplinary team has more overlapping roles defined by communication and troubleshooting. However, demand for health services is significant as it is related to the social aspect of citizens' health status in a country. Since it is significant, the current study focuses on a very important problem, which is the possibility of estimating the total social demand for health services through public-private sectors cooperation in third world countries, represented by Syria. Moreover, it endeavors to propose a model for estimating the total social demand for health services in the public and private sectors.

Methodology: The descriptive analytical approach was used, and the data were collected through cooperation between a team of health experts in various fields, depending on the available secondary data, interviewing, and the observation and estimation of the primary data. The model design includes dividing the total demand into six dimensions, which are (demand for hospitals; for health centers; for medical clinics; for dental clinics; for pharmacies; and demand for laboratories).



Results and conclusions: Health collaboration plays an important role in designing the proposed model and getting the missing health data needed. Moreover, the social factor contributes effectively in the structure of demand for health services, wherein customs lead to a high demand for pharmacies. On the other hand, the Syrian economic crisis has a significant impact on the structure of demand for health services, as the demand for pharmacies and then public hospitals has increased due to the high cost of treatment and the lack of a health system in the country.

Finally, the current study highlights the differences in the structure of demand for health services between developing and developed countries, as well as the social and economic effects on demand for health services, and emphasizes the important role of health cooperation in various fields.



Weaving threads of care: Examining extended family support for aging in rural Ghana

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Keywords: aging, elder care, family support, social change, Ghana, rural community

Globally, societies are experiencing a significant increase in the population of older adults, a demographic shift that presents both opportunities and challenges. This transformation is particularly pronounced in developing countries such as Ghana.

In Ghana, the extended family has historically functioned as a primary source of support for older adults, offering financial, material, social, emotional, and spiritual assistance. This tradition, rooted in cultural values such as filial piety and respect for the elderly, fosters a collective sense of duty and belonging. However, modernization is challenging the sustainability of these established support systems. Migration of young people from rural villages to urban centers has reduced the number of available caregivers in rural areas. As a result, many older adults are left with unmet daily needs due to the dispersal of family members. Economic hardship and poverty further exacerbate these challenges, making it increasingly difficult for remaining family members to provide adequate care. Caregivers often prioritize the needs of their immediate families, which can increase the vulnerability of older adults. Modernization and globalization are influencing social values in rural Ghana, with western ideals and individualism becoming more prevalent. The traditional sense of duty to the extended family is diminishing, giving way to a focus on the nuclear household. This shift increases the risk of loneliness, financial hardship, and limited access to essential care and services for many older adults in rural Ghana.

Methodology: This analysis is based on qualitative research and content analysis of scientific literature addressing ageing, family relationships and support systems in rural areas of Ghana. A

review of academic studies, government documents, and community reports identified key themes and patterns that influence elder care in these communities. Particular emphasis was placed on studies that highlight the perspectives of older adults and caregivers through interviews, group discussions, and ethnographic observation, providing insight into their daily experiences.

Synthesis of Findings: Current results indicates that rural Ghana is undergoing significant change. Although the extended family continues to play a crucial role in elder care, its capacity is gradually diminishing. The primary responsibility is increasingly falling on immediate family members, placing considerable strain on families. Economic hardship and limited opportunities hinder the ability to meet basic needs such as healthcare, food, and shelter. The scarcity of formal support systems exacerbates these difficulties. Nevertheless, family and community connections continue to provide essential emotional support and a sense of belonging. Most older adults prefer to age in place with their family, and there is minimal interest in institutional care.

Discussion: These findings highlight the need to strengthen family-based care while addressing the underlying economic challenges in rural Ghana. Effective solutions should be tailored to local contexts, leveraging existing strengths and traditions. Adopting western models of elder care without adaptation is unlikely to succeed, as such approaches may conflict with the values and needs of these communities.

Implications for Practice/Policy: To effectively support older adults, policies and social work initiatives should prioritize family-centered approaches, providing families with the necessary resources and training to deliver high-quality care. This includes financial assistance, affordable healthcare, medical supplies, and caregiver education. Community-driven programs are also essential for maintaining social connections, promoting activity, and supporting elders through social groups, intergenerational activities, and home-based care. Addressing poverty and economic insecurity requires comprehensive strategies, including investments in sustainable agriculture, support for small businesses, expansion of job training programs, and access to microfinance. All support systems should respect local traditions and values, collaborating closely with community leaders, healers, and elders to ensure program relevance.

Examining the effects of physical activity on the impact of older people's bereavement in ELSA data

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Keywords: bereavement, physical activity, mental health

The loss of a loved one and consequent bereavement and grief have a negative impact on physical and mental health and can cause high stress levels.

Given previous evidence for a positive impact of physical activity on mental health, and specific wider benefits for older adults this quantitative longitudinal study examined the relationship between physical activity, bereavement and mental health among older people. It also explored whether physical activity moderates the relationship between bereavement, depression, quality of life and life satisfaction.

The study had a longitudinal quantitative design and analysed four waves from the English Longitudinal Study of Ageing (ELSA). The study hypothesised that physical activity would moderate the impact of bereavement on depression, quality of life and life satisfaction. The final sample included 518 (155 male, 363 female) participants. Matched married participants (N=259) were compared with the bereaved participants (N=259) whose marital status changed from married to widowed in a consecutive wave. Hierarchical multiple regression analysis was used to examine whether physical activity was associated with levels of mental health outcomes in the sample and whether physical activity moderated the impact of bereavement on depression, quality of life and life satisfaction.

The results showed that bereaved participants experienced lower levels of life satisfaction and quality of life compared to continuously married participants. Bereavement was a significant



predictor for depression and life satisfaction and physical activity was a significant predictor for quality of life. In addition, physical activity participation before bereavement was linked to lower levels of depression after loss. However, physical activity did not moderate the relationship between bereavement and mental health variables.

The outcomes highlighted the complex relationship between physical activity, bereavement, depression, life satisfaction and quality of life and add evidence that bereavement is positively associated to depression and negatively associated to life satisfaction and quality of life. To explore whether physical activity moderates the relationship between bereavement and mental health more research is needed. As the results suggest that increased physical activity participation before bereavement predicted decreased depressive symptoms after loss, future research exploring this association can help to understand the relationship between previous life experiences and physical activity participation during grieving.



Climate Change and Older Adults: Health Challenges and Practical Solutions in Healthcare

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Keywords: climate change, extreme weather conditions, healthcare, adaptation strategy

Theoretical Background and Health Challenges

Climate change has emerged as a pressing public health concern worldwide, with its effects already visible across multiple sectors. As societies age, a growing number of older adults are becoming directly exposed to the adverse health consequences of climate-related events. The first part of this presentation outlines the primary threats facing the elderly in the context of a changing climate.

The increasing frequency and intensity of heatwaves pose a particularly severe risk. Thermoregulation declines with age, and many older adults take medications - such as diuretics or beta-blockers - that impair heat tolerance. The European heatwave of 2003 resulted in over 70,000 excess deaths, most of which occurred among older populations. Similar events are projected to become more common and more deadly in the coming decades.

Air pollution, particularly fine particulate matter (PM_{2.5}) and ozone, is another growing concern. These pollutants worsen respiratory diseases such as COPD and asthma, and contribute to cardiovascular complications - both of which are prevalent in older age. Exposure to polluted air triggers oxidative stress and systemic inflammation, which further compromise the health of vulnerable individuals.

Climate-sensitive infectious diseases are also spreading into new geographic regions due to rising temperatures and changing ecosystems. The elderly are especially at risk due to immunosenescence, the natural weakening of the immune system with age. Emerging threats such as West Nile virus and zoonotic infections now pose increasing risks in Central Europe as well.



Nutrition and water security are under threat as well. Drought, soil degradation, and unstable food supply chains lead to increased prices and reduced access to essential nutrients. Older adults - already at risk of malnutrition due to physiological, functional, and socioeconomic factors - are disproportionately affected. At the same time, clean water shortages and contamination events heighten the risk of dehydration and renal dysfunction, particularly during heatwaves.

The mental health impacts of climate change are also significant. Natural disasters like floods, fires, and storms can cause trauma, anxiety, and depression. Older adults, especially those living alone or with cognitive decline, are highly vulnerable to social isolation and mental health deterioration. “Climate anxiety” and fear about displacement or loss of independence are emerging phenomena in this age group.

Finally, *healthcare systems* themselves are increasingly strained by climate-related stressors. During heatwaves and emergencies, hospitals and emergency departments face surges in patient numbers, while staff and infrastructure are often underprepared to handle the added burden. Older adults typically require more time- and resource-intensive care, which intensifies these pressures.

Practical Adaptation Strategies for Healthcare in a Changing Climate

Understanding these challenges is not enough-adaptation and preparedness are essential, especially within healthcare systems. The second part of this presentation focuses on actionable solutions that healthcare professionals, institutions, and communities can implement to protect older adults.

A top priority is the implementation of **early warning systems** that can notify vulnerable populations and their caregivers in advance of extreme weather conditions. In primary care, heatwave protocols should be established to identify high-risk patients, adjust medications if needed, and promote fluid intake and cooling measures during high temperatures.

Improving the thermal resilience of living and care environments is equally crucial. This includes installing shading, natural ventilation, air conditioning, and improving insulation in homes and care facilities. Urban planning should prioritize green spaces, shaded public areas, and accessible cooling centers, especially in neighborhoods with high proportions of older residents.



Training and raising awareness among healthcare professionals is vital. Medical and nursing curricula, as well as continuing education programs, should incorporate modules on climate-related health risks. These include recognizing signs of heat exhaustion, dehydration, respiratory distress, and exacerbation of chronic conditions. Cross-sector collaboration with social workers and caregivers can also improve outcomes.

Public education and patient communication play an essential role. Older adults and their families should receive practical guidance on staying safe during heatwaves - such as staying hydrated, dressing appropriately, and recognizing warning signs of illness. Health professionals should also explain how climate factors might influence chronic disease management and medication safety.

Community-based approaches are critical to reaching isolated or immobile elderly individuals. Municipal and civil organizations, together with primary care teams, can coordinate home visits, welfare checks, and targeted outreach during climate events. Examples of good practice include phone check-ins during heat alerts, or establishing climate-friendly senior centers that offer safe, cool spaces.

Intersectoral cooperation between the health and social sectors is essential. Protecting older adults cannot rely solely on hospital-based care. A coordinated response - including accessible home care services, social outreach, and age-friendly community design - is needed to support adaptation and healthy ageing in a warming Earth.

Conclusion

Climate change is not only an environmental or economic crisis - it is fundamentally a public health issue, especially in ageing societies. Preserving the health and dignity of older adults amid climate challenges requires proactive prevention, community involvement, and resilient healthcare systems. By implementing practical, evidence-based strategies, we can reduce harm and promote a safe, healthy, and empowered later life for current and future generations.



Perceived barriers and enablers to outdoor mobility among older adults in the Nordic Arctic Region

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Keywords: outdoor mobility, Arctic, Finland, Sweden, Iceland

Background

Little is known how older people move outdoors in the Arctic region, challenged by long and snowy winters, vast distances, underdeveloped transportation systems, and remote community facilities. This presentation examines the perceived barriers and enablers of older persons to engage in outdoor mobility and activities.

Materials and Methods

A cross-sectional postal questionnaire (2024) collected 811 responses from 70+ year old residents of three regions of Finland (Lapland, Kainuu, Northern Ostrobothnia), two northernmost regions of Sweden (Norrbotten, Västerbotten), and overall Iceland. Of those, 732 respondents (51% women, 49% men) provided data for this presentation. We ensured the compatibility and comparability of national subsets. Ethical permissions were received. The authors applied to the national data registers and obtained addresses of random older adults. Data analysis was conducted through *content analysis* using NVIVO 14 software, focusing on counts, frequencies and percentages as well as interpreting and understanding data.

Results

For barriers, 595 people provided input (52% women, 48% men). The most popular response was “No barriers” highlighting subjective healthy status of random sample and likely satisfaction with



the living outdoor environment. Other outdoor mobility barriers can be divided into three themes: personal (health complications, laziness or loneliness when it comes to go out, fear of falling or lack of time); community driven (maintenance issues with the living environment as well remoteness or absence of infrastructure, services and facilities); and environmental (bad and risky weather conditions during long and snowy arctic winters). The variation and uniqueness in responses were higher for *enablers* (684 persons, 50% women, 50% men), forming five main themes: activities outdoors; promoting health; infrastructure, roads and public spaces; mobility with aid, including appropriate clothing; nature and weather. The most common response about enablers is to exercise recreational outdoor activities, maintain healthy lifestyle as well as roads and infrastructure well maintained in winter.

Conclusion

By alleviating the effects of the barriers and promoting the enablers, Arctic older residents can be better supported in their paths to age healthily. More longitudinal studies are needed to study how to promote outdoor mobility as key part of healthy ageing in the Arctic conditions and establish the causality of the findings.

Health literacy and active ageing among the population 65+ in the South Bohemian Region in the Czech Republic

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Keywords: health literacy, active ageing, population 65+, Czech Republic

Introduction

Czechia is still experiencing an ageing population trend. The medium variant of the 2023 Projection (CZSO, 2023) suggests that by the end of the 2050s, the proportion of elderly (i.e. people aged 65 and over) should reach three and a quarter million people. However, this projection does not provide information about the quality of life of these people, which is mainly dependent on their health status. The ageing process is associated with losing the body's functional reserves and, therefore, with an increased susceptibility to several diseases, is generally well known. The results of the European Health Survey from 2019 indicate that 75% of people aged 65 and over suffered from a long-term illness or health problem. Age increases the percentage of people who experienced an illness or health problem logically (ÚZIS, CZSO, 2019). Practice suggests that health, health potential, and self-sufficiency are essential for quality of life. Therefore, it is necessary to actively focus on mapping the level of health literacy of this population group and supporting healthy old age and ageing with an emphasis on intergenerational dialogue and coexistence (Barger, Kociánová, eds., 2023).

Objective

The paper aims to outline the problematic health literacy of the Czech population aged 65+ in the context of active ageing.



Methodology

The presented data are based on a qualitative research survey conducted using semi-structured interviews. Informants were selected using snowball method. The research population consisted of residents of the South Bohemian Region aged 65 and over, who were oriented to place, time, and person and agreed to conduct a semi-structured interview. The size of the sample contained a total of 30 informants who were determined by the criterion of theoretical saturation. Individual interviews were transcribed verbatim into MS word and analysed using open, axial, and selective coding.

Results

Health is an important attribute for the target group and is necessary for healthy ageing. To maintain health, a certain level of health literacy is necessary, which must be constantly developed. Healthy ageing is associated primarily with self-sufficiency, the possibility of an active life and an active way of spending free time. Increasing age is a factor that is closely linked to the increasing incidence of diseases (including pain). As a result, this significantly affects the perspective of healthy ageing. In the context of increasing health literacy, communication is an important factor, which has its own specifics in old age. Based on the analysis of the interviews, problematic areas of health literacy in the target group were further identified, which impact active ageing and the quality of life of these people. These areas are: stroke; prevention of obesity; care of the lower extremities; prevention of cardiovascular diseases; prevention of cancer; prevention of stress and mental hygiene; balance exercises – 10 minutes a day to strengthen fitness and health; walking – a natural and important part of our lives; movement in water – swimming and other activities; cycling – an excellent choice for our health; sports games – recreation for body and soul; active old age and aging; the importance of preventive examinations in the context of health care.

Conclusion

It turns out that despite the nationwide educational activities implemented so far, there are areas of health literacy among the target group that are problematic. For planning future educational



activities, it seems essential to examine the level of knowledge in this area and the preferences and regional peculiarities that could affect the implementation of interventions.

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Frailty as the Cornerstone of Elderly Care: Strategies for Early Detection and Intervention

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Keywords: frailty, elderly care, screening, interventions, Central/Eastern Europe

Background

Frailty is increasingly recognized as a cornerstone of elderly care. It represents a multidimensional syndrome of vulnerability that increases risks of disability, hospitalization, institutionalization, and mortality. Frailty is not an inevitable consequence of ageing and can be delayed or mitigated through early detection and intervention.

Objective

This review synthesizes recent evidence on frailty, with particular attention to its prevalence, methods of early detection, intervention strategies, and system-level considerations, while highlighting implications for Central and Eastern Europe.

Methods

A systematic literature review was conducted in PubMed, Medline, CINAHL, and Google Scholar (2003-2025). Eighteen studies met inclusion criteria and were appraised using CASP checklists. Findings were synthesized narratively across four domains: prevalence, screening, interventions, and health system integration.

Results

Frailty prevalence ranged from approximately 7-12% among community-dwelling adults aged 65 years and older to nearly 40% in hospitalized patients in low- and middle-income countries. Community-based studies also showed frailty rates of around 20-25%, with strong links to falls and functional decline. Early detection was supported by validated instruments such as the



Edmonton Frailty Scale, the Timed Up & Go test, the Dynamic Gait Index, and comprehensive geriatric assessment. Intervention strategies, particularly those combining resistance training, nutritional support, counselling, and interdisciplinary care, consistently improved independence and reduced adverse outcomes. Multisystem approaches, such as structured exercise, were shown to be especially effective. If this is seen as a system it can be said that barriers to implementing frailty care included limited resources and staff training, while facilitators included leadership support, coordinated pathways, and the integration of personalized management into primary and hospital care.

Conclusion

This review positions frailty not only as a clinical condition but as a strategic framework for organizing elderly care systems. For Hungary and the wider Central/Eastern European region, integrating frailty screening into primary care and hospital workflows is an urgent priority. Recognizing frailty as a cornerstone of ageing policy can reduce preventable decline and support healthier, more independent ageing.



Interpersonal communication style towards hospitalized seniors - study report

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Keywords: hospitalization, communication style, non-partnership egocentric communication style

Introduction

Interpersonal relationships that occur during the care process should take into account the subjectivity of the older person, and care should be individualized. The style of interpersonal communication between a nurse and an older patient may have a crucial impact on the course of hospitalization and therapy. It is therefore worth examining the communication styles applied in everyday nursing practice towards patients.

Aim

The aim of the presented study was to determine which communication style is used in interactions with older patients. The study also examined to establish whether there is a relationship between the nurse's communication style (partnership-oriented or non-partnership-oriented) and the patient's age, level of care needs, and mental capacity.

Material and Methods

The study was conducted in 2025 in hospital wards in the Lubusz Voivodeship. The research method was observation of the communication styles used by nurses during their interactions and daily care activities with hospitalized patients. A self-designed observation sheet was used for data collection.



Conclusion

During care activities, nurses most frequently use a non-partnership egocentric communication style.

The non-partnership egocentric style is applied in relation to patients who are highly dependent on nursing care (third level of care categorization).

The partnership style is used with patients requiring the least amount of care (first and second level of care categorization) during medical procedures.

Nurses do not apply the non-partnership allocentric style during care and medical procedures.

The findings indicate the need to expand the observational method to a broader group of nurses and patients.



Physiotherapy in Semmelweis University Geriatrics Clinic and Center for Nursing Sciences

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Keywords: physiotherapy, geriatrics, nursing

The increasing global population of older and very elderly individuals poses significant challenges to healthcare systems, particularly in delivering efficient and sustainable care. Aging is associated with a variety of physiological changes, including reduced bone density, muscle strength, and motor coordination, often accompanied by joint stiffness — all contributing to an increased risk of falls and fractures. Regular physical activity is vital in preserving and restoring functional abilities necessary for daily life. Moreover, exercise reduces the severity and risk of age-related diseases and offers considerable benefits for elderly patients with chronic conditions.

Common geriatric conditions include musculoskeletal, neurological, and cardiovascular disorders, alongside mental health issues, balance impairments, and chronic pain. Practicing physiotherapy in a geriatric setting presents unique opportunities and challenges. While aiding older adults in regaining mobility and independence is deeply rewarding, physiotherapists often encounter physically demanding tasks, complex medical profiles, and emotional strain. Thus, geriatric physiotherapy requires a specialized set of skills and clinical expertise.

This research aims to highlight the essential role of physiotherapy and share professional experiences gained at a geriatric and nursing care Center. It emphasizes both the advantages and challenges faced by physiotherapists, with a specific focus on the application and outcomes of various therapeutic techniques, including Proprioceptive Neuromuscular Facilitation (PNF), Bobath concept, Constraint-Induced Movement Therapy (CIMT), passive movements, mobility and muscle-strengthening exercises, as well as balance and gait training in elderly patients.

The Center comprises two nursing units, one internal medicine unit, one active geriatric unit, and one chronic care unit, with a total capacity of 90 beds. Patients range in age from 45 to 97 years, with the majority presenting neurological and neurodegenerative disorders such as stroke, Parkinson's disease, multiple sclerosis, and Alzheimer's disease, alongside musculoskeletal conditions like pertrochanteric fractures and hip or knee total endoprostheses.

Clinical observations indicate that physiotherapy interventions result in notable improvements in muscle strength, coordination, mobility, balance, cardiopulmonary function, psychological well-being, and overall quality of life.

In conclusion, physiotherapy plays a crucial role in restoring function, reducing pain, and improving the quality of life in elderly populations. Its integration into geriatric and nursing care facilities represents a growing field that demands specialized training and offers vast potential for professional development.

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Are We Listening to Elders? Intergenerational Wisdom as a Protective Factor Against Bullying in Diverse Academic Spaces

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Keywords: intergenerational wisdom, bullying prevention, higher education, resilience, diversity, inclusion

Bullying remains one of the most persistent challenges in educational and academic environments, exerting a wide-ranging impact on students' psychological well-being, physical health, and academic achievement. Among international and multicultural student populations, the risk is even more pronounced, as experiences of cultural difference, language barriers, and social exclusion often intersect to heighten vulnerability. Much of the existing research on bullying focuses on peer-to-peer interventions, resilience training, and institutional anti-bullying policies. While valuable, these approaches tend to overlook an underutilized protective factor: the role of older generations, whose accumulated wisdom and life experience can serve as powerful resources for younger individuals navigating adversity.

This study explores the concept of intergenerational wisdom as a protective factor against bullying, situating the discussion within gerontological frameworks of active aging, generativity, and resilience.

From a gerontological perspective, older adults embody accumulated forms of experiential knowledge, emotional regulation, and conflict resolution skills derived from diverse life trajectories. Erikson's theory of psychosocial development underscores generativity, the drive to guide younger generations, as a key developmental task in later life. Similarly, Baltes and Staudinger's (2000) model of wisdom conceptualizes it as an "expert knowledge system

concerning the fundamental pragmatics of life” (Baltes and Staudinger, (2000:122) emphasizing judgment, tolerance, and empathy. When embedded in structured intergenerational programs, this form of wisdom has the potential to buffer young people against the psychosocial harms of bullying.

Recent empirical evidence supports this claim. For example, intergenerational reminiscence programs have demonstrated significant improvements in empathy and perspective-taking among younger participants, while simultaneously reducing loneliness and enhancing life satisfaction among elders. Reverse mentoring initiatives, such as “the Cyber Seniors” model, have shown measurable reductions in ageist stereotypes, while fostering self-efficacy in both age groups. Community-based reminiscing projects, where adolescents engage in structured storytelling sessions with older adults, report outcomes such as increased resilience, identity anchoring, and improved conflict-resolution skills. Collectively, these findings indicate that intergenerational contact contributes not only to healthier aging but also to stronger social integration for younger participants.

Bullying, particularly in multicultural academic spaces, is often linked to processes of “othering,” where differences in race, culture, language, or age become stigmatized. Intergenerational wisdom offers a corrective lens: by normalizing diversity through lived narratives, it situates difference as a source of knowledge rather than exclusion. Elders often embody histories of adaptation, migration, or resilience in the face of discrimination, providing students with tangible strategies for coping with adversity. Such exchanges align with Allport’s contact hypothesis, which asserts that sustained interaction under conditions of equality reduces prejudice. In this case, equality of exchange, students offering technological skills while elders share life wisdom, creates a balanced, reciprocal model of learning that fosters respect and inclusion.

The protective value of intergenerational wisdom operates across three main mechanisms:

Cognitive: Older adults offer interpretive frameworks and reflective narratives that help younger students reframe negative experiences such as bullying.

Emotional: The emotional regulation strategies demonstrated by elders promote calm, resilience, and tolerance in stressful situations.



Social: Intergenerational engagement enhances students' sense of belonging, mitigating isolation and social fragmentation often associated with bullying.

This paper contributes to the growing body of gerontology - informed interventions by highlighting the role of intergenerational engagement in higher education. It proposes an integrative model in which intergenerational wisdom functions not only as a protective factor for young students but also as a contributor to active and meaningful aging for older adults. The model emphasizes reciprocity: students gain coping mechanisms and resilience, while elders achieve generativity and social connectedness. In multicultural academic spaces, where generational, cultural, and linguistic diversity converge, this dynamic holds particular promise.

By reframing elders as active contributors to academic life, rather than passive recipients of care, we challenge ageist assumptions and expand the conversation on bullying prevention. This approach underscores the value of embedding intergenerational programming, such as storytelling workshops, mentoring circles, and shared cultural projects, into the fabric of universities and educational institutions. For educators, policymakers, and social workers, integrating gerontology into bullying prevention strategies provides a novel pathway toward more inclusive, resilient, and connected learning environments.

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Older people in the structure of local society - results and experiences of the panel survey in Nyíregyháza

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Keywords: aging, precarity, panel study, Hungary, urban sociology

The aim of the presentation is to explore the situation of the elderly based on the results of an urban panel study. The lecture examines the position of older people in local society in three areas: their distribution across income strata representing positions in the social structure, the possibility of precarity among the elderly, and their subjective health status.

The presentation also addresses the theoretical and conceptual issues related to these three areas. Based on the literature, old age is a relative concept, with three main approaches and dimensions identified in definitions: chronological (Neugarten, 1974; Baltes & Baltes, 1990), biological-functional, and social-cultural (Laslett, 1995). It can also be observed that in the literature, the ideal of active, quality aging has replaced earlier passive perspectives (Rowe & Kahn, 1997).

The presentation investigates income-based stratification, a widely used approach in sociology. Empirical research indicates a high proportion of “middle strata” within these categories. Tóth István György also emphasizes that the relative share of the income-based middle strata is relatively high in Hungary (2016). A third interpretive framework is linked to the theory of the precariat (Standing, 2011; Fónai & R. Fedor, 2023). The term “precariat” derives from the words *precarious* and *proletariat* and denotes a growing social class, emerging in recent decades, positioned at the bottom of the class-based hierarchy of contemporary capitalism (with several “sources,” one of which is the elderly). Its fundamental characteristic is labour market insecurity and vulnerability, which developed as a crisis of welfare capitalism.

The presentation analyzes the results of a panel survey launched in 2008 by the Faculty of Health Sciences of the University of Debrecen, conducted in Nyíregyháza across six waves of data collection. The panel's sample remained relatively stable during the initial period of research, with "panel attrition" becoming noticeable only after 2018, a trend further intensified by the COVID-19 pandemic. Nevertheless, due to statistical weighting, the results provide a reliable picture of the situation of the city's population. The survey examined household composition, income and labour market characteristics, as well as the educational attainment, health status, and social networks of household members. The database also included an age variable, enabling comparisons between different age groups.

The six survey waves show that the income position of the elderly is relatively favourable — they belong to the city's middle strata — and their exposure to precarious processes is low, partly due to the limited extent of elderly employment. However, they assess their subjective health status as poor. A linear relationship can be observed between age and the evaluation of health: with advancing age, individuals increasingly perceive their health as worse.

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The role of balneotherapy in helping older people take advantage of new job opportunities

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Keywords: balneotherapy, employment, activity in old ages, spa

Introduction

Maintaining and supporting the physical and mental health of older people is not only in the interest of individuals, but also of the community, as active and healthy older people are able to continue participating in the labor market, volunteering, and fulfilling family roles. Balneotherapy is a therapeutic method that has been known and used for centuries, playing a key role primarily in the treatment of musculoskeletal problems, rehabilitation, and the prevention of chronic diseases. This is particularly important for the older generation, among whom degenerative joint diseases, rheumatic complaints, and mobility limitations are more common. The aim of our research was to explore the experiences and attitudes of elderly people using two different spas in Szabolcs-Szatmár-Bereg County and how this relates to maintaining labor market activity.

Method

The research was conducted at two different spas. A total of 120 people with musculoskeletal disorders were interviewed using a semi-structured questionnaire. Most of the respondents received social insurance-supported treatment. The questionnaire contained partially identical questions, allowing for comparative analysis based on certain key questions.

Results

The majority of the patients surveyed were of retirement age, and a significant proportion of them were repeat spa users. The vast majority of respondents said they would recommend the treatments



to others, and a large proportion rated the effectiveness of the services as “completely useful.” The differences between visitors to the two spas were mainly in their attitude to treatment and additional activities (e.g. exercise, cycling). The proportion of female respondents exceeded that of males at both locations.

Conclusions

The results support the health-preserving role of spas among the older age group. Regular spa visits not only bring symptomatic relief, but can also contribute to maintaining the activity and independence of the elderly. This is particularly important in maintaining opportunities for participation in the labor market and community involvement. In the future, it would be worthwhile to further investigate the role of balneotherapy in the region in the context of elderly care and health policy using a standardized questionnaire and involving more spas.



Resilience Amid Crisis: The Impact of COVID-19 on Older Adults in Jordan - Challenges, Interventions, and Policy Innovations

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Keywords: COVID-19, Jordan, social resilience, health systems, aging policy

Purpose

The COVID-19 pandemic was not only a global health crisis but also a profound social and humanitarian challenge. Older adults, particularly those living with chronic illnesses and limited access to healthcare, were the most severely affected. In Jordan, where adults aged 60 and above represent 5.7% of the population, the pandemic revealed both systemic gaps and remarkable resilience.

This presentation seeks to explore the lived realities of older Jordanians during the crisis, the national and community-based responses that emerged, and the lessons that can guide future gerontological policy and practice.

Problem

Even before the pandemic, Jordan's elderly population faced multiple vulnerabilities: such as high rates of non-communicable diseases, limited pension coverage, and barriers to digital engagement. COVID-19 exacerbated these conditions. Over 60% of COVID-19-related deaths in Jordan occurred in people aged 60 and above. Curfews and overburdened hospitals restricted access to care, while limited digital literacy, with only 4.6% of those aged 65 and above using computers, left many elders unable to register for vaccines or access telehealth. Beyond physical health, the pandemic intensified isolation, loneliness, and economic insecurity, placing older adults at the intersection of multiple risks.



Approach

This presentation takes a multi-sectoral perspective, drawing on data from government reports, WHO and UNICEF initiatives, NGO programs, and local community responses. The analysis combines demographic insights with case-based examples of grassroots action. Initiatives such as mobile vaccination units, youth-led helplines, intergenerational technology support, and expanded home-based healthcare programs are highlighted to illustrate how health-, social care, and civic solidarity intersected during the crisis. By weaving together quantitative evidence and qualitative accounts, the presentation aims to humanize statistical trends and give voice to the resilience of Jordan's elderly population.

Results

The findings reveal a dual narrative of vulnerability and innovation. Health outcomes exposed the urgent need for geriatric-focused training and development of age-sensitive healthcare systems. Mental health challenges were widespread: older adults reported heightened depression, loneliness, and cognitive decline.

Yet community-driven programs such as the “*Sanad initiative*” (volunteers making weekly phone calls to isolated elders) and “*Virtual Majlis*” cultural sessions over WhatsApp and Zoom provided emotional lifelines. Economically, many older adults have experienced a sudden loss of income from informal work, forcing reliance on borrowing, savings depletion, or family assistance. In response, the National Aid Fund expanded cash transfers to 85,000 families, while NGOs coordinated food and medicine deliveries. Institutional care homes, initially sites of outbreak and fear, saw improved infection control and dignity-preserving measures after intervention from the Ministry of Social Development, UNHCR, and the Red Cross.

Importantly, the pandemic spotlighted the digital divide: while elders struggled with online systems, innovative youth-elder partnerships and the distribution of simplified devices provided practical bridges to inclusion.

Conclusion

COVID-19 magnified both the fragility and resilience of Jordan's older population. The crisis underscored the need for structural reforms in healthcare, social protection, and digital inclusion.



Lessons learned have already informed Jordan's National Strategy on Older Persons (2025–2030), which prioritizes universal pension system, integration of geriatric care, community-based services, and intergenerational solidarity. Moving forward, the challenge is not merely to prepare for the next crisis but to embed age-friendly principles into everyday governance, public health, and community life.

Older adults are not passive recipients of care; they are central to the fabric of Jordanian society. By addressing their needs with dignity and foresight,

Jordan and the international community can ensure that aging is associated with resilience and opportunity rather than vulnerability.



Adapting the WHO Age-Friendly Cities Framework to Address Challenges in Kenya's Urban Informal Settlements

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Keywords: World Health Organization's Age-Friendly Cities , WHO AFC, Kenya, urbanization

Kenya's rapidly growing and ageing population, and the urbanization presents urgent challenges and opportunities for creating urban environments that truly support older adults. The World Health Organization's Age-Friendly Cities (AFC) framework outlines eight essential domains — such as transportation, housing, social participation, respect, and health services — that aim to promote well-being, dignity, and inclusion of older people worldwide. However, while this global framework has been influential, it often overlooks the realities of informal settlements, where many older adults in Kenya's urban areas reside and face complex challenges like inadequate infrastructure, limited access to healthcare, poverty, and social exclusion.

With Kenya's elderly population projected to more than double by 2050, the country faces the critical task of adapting policies and urban planning approaches to meet the needs of this demographic trend. Although Kenya has enacted progressive policies, including the 2014 National Policy on Older Persons and Ageing that recognizes the rights and dignity of older adults, the implementation of these policies remains inconsistent, particularly in the slums and informal neighborhoods of cities like Nairobi and Mombasa. These informal settlements, characterized by insecure housing, limited basic services, and high population density, present unique barriers that are not fully addressed by existing frameworks.

This literature review focuses on these urban centers and their informal settlements to identify key barriers and opportunities in applying age-friendly strategies within Kenya's unique socio-



economic and cultural context. It proposes a modified, context-sensitive framework that integrates the challenges of informality, the importance of intergenerational support networks, and the need for realistic, community-driven policy implementation. This tailored approach seeks to bridge the gap between global age-friendly ideals and the on-the-ground realities of Kenyan cities, ensuring that older adults are not only visible but actively supported to participate fully in urban life.

By aligning international frameworks with local contexts and highlighting the specific conditions of informal settlements, this review aims to foster more effective, culturally grounded, and practical strategies that enhance the quality of life, social inclusion, and economic participation of Kenya's older urban residents. Ultimately, the goal is to help Kenyan cities become truly age-friendly and sustainable in the face of rapid demographic and urban transformation.



Unmet care needs of older patients with maxillofacial diseases:

A cross-sectional study

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Keywords: need assessment, nursing care, older patients, unmet needs

Introduction

Recognizing and addressing unmet care needs is essential for enhancing the quality of healthcare and social support. For patients with maxillofacial diseases who often face complex physical, emotional, and functional challenges, these unmet needs can significantly impact their recovery, well-being, and quality of life. Despite the unique vulnerabilities of this patient group, current research in Slovakia remains limited, particularly concerning their specific care requirements.

Aim

The aim of this study is to investigate the prevalence and patterns of unmet care needs among hospitalized patients with maxillofacial diseases, and to identify the factors that contribute to the presence of these unmet needs within this specific patient population.

Methods

Data were collected between April and October 2024 using the Camberwell Assessment of Need Short Appraisal Schedule-Patient (CANSAS-P), 2nd edition. The sample included 100 patients aged over 60, hospitalized in a selected department of maxillofacial surgery.

Results



The most common unmet needs were related to sexuality (39.0%), intimate relationships (33.0%), and finances (46.0%). These were significantly influenced by age, perceived health status, presence of chronic disease, hearing impairments, mobility limitations, difficulty swallowing liquids, insertion of a nasogastric tube or percutaneous endoscopic gastrostomy, breathing difficulties, and impaired verbal communication ($p \leq 0.05$).

Conclusion

The findings of the study revealed that unmet needs are frequently present among patients hospitalized in the maxillofacial surgery department and are shaped by various factors. These results underscore the necessity of adopting a personalized approach in nursing care, tailored to the individual circumstances of each patient. From a clinical perspective, the study highlights the urgent need to strengthen nursing interventions that proactively address these unmet needs, thereby enhancing patient outcomes and satisfaction with care.



Physical Activity and Healthy Aging

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Keywords: healthy aging, physical activity, cognitive health, chronic disease prevention

Purpose

The purpose of this study is to examine the role of physical activity in promoting healthy aging, focusing on its impact on physical, cognitive, and psychosocial outcomes in older adults.

Problem statement

Population aging is accompanied by an increased prevalence of chronic diseases, frailty, functional decline, and cognitive impairment. Sedentary lifestyles exacerbate these issues, yet a significant proportion of older adults remain insufficiently active due to physical limitations, environmental barriers, and low awareness of the benefits of exercise.

Approach

This study integrates evidence from peer-reviewed studies published between 2018 and 2025, including interventions involving aerobic training, resistance exercise, balance and flexibility training, and multicomponent programs targeting adults aged 60 and above.

These results have been published in prestigious journals such as British Journal of Sports Medicine, Ageing Research Reviews, International Journal of Nursing Studies, and Journal of Clinical Medicine, incorporating both global health guidelines and large-scale cohort studies.



Result

The evidence consistently shows that regular physical activity improves muscle strength, balance, cardiovascular fitness, and bone density, thereby reducing the risk of falls, fractures, and mobility limitations.

Mental benefits include enhanced executive function, memory, and reduced risk of dementia, with positive effects noted in both healthy older adults and those with mild cognitive impairment.

Psychosocial outcomes such as reduced loneliness and improved mood are particularly associated with group-based and peer exercise programs.

Multicomponent and resistance-based training show long-term benefits, with some interventions maintaining gains in muscle strength and functional ability for up to four years.

Conclusion

Physical activity is a basis of healthy aging, delivering benefits that preserve independence, prevent chronic disease, and enhance quality of life. Healthcare providers should advocate for personalized and culturally tailored exercise programs, supported by policy frameworks that increase accessibility and adherence. Integrating physical activity promotion into community health initiatives and geriatric care plans is essential to meeting the needs of rapidly aging populations worldwide.



Political participation of retired people towards a future for all ages – from Portugal to Europe

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Keywords: political participation, rights advocacy, retirees, Portugal

In this presentation, I will present the project ‘Sowing a future for all ages’, developed between August and December 2024 by a Portuguese association made up exclusively of retired people. The project focused on demanding rights from political decision-makers, in an exercise of full citizenship and effective political participation.

One of the central objectives of this project was to contribute to the design of public policies that improve people's lives, taking into account the expectation of a ‘Europe for all ages’ that promotes participation, autonomy, and well-being. In addition, the aim was to stimulate discussion and raise critical awareness of the challenges faced by older adults in Portugal in relation to the guarantee of their fundamental rights. The project aimed to engage Portuguese political actors, namely MEPs elected by Portugal in 2024 to the European Parliament, and to involve older and retired people living in Portugal and others with an interest in the challenges and issues of ageing.

In this project, the members of the association organised and facilitated debate sessions on the rights of older people and fighting ageism in four Portuguese cities, in which around 280 people participated. As part of this project, a publication about ageing in Portugal was also produced, based on the themes of the Manifesto proposed by AGE Platform Europe during the 2024 European elections. Meetings with five MEPs elected by different Portuguese parties, belonging to three European political groups, were also held. These meetings took place during a visit held by members of the Association's Board and the expert who had supported the project, in the European Parliament (in November 2024), complemented by subsequent meetings in Portugal.



Well-being among the Elderly - challenges for social policy

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Keywords: well-being, social policy, Poland, quality of life

The aim of this presentation is to explore the multidimensional concept of well-being among older adults and to identify the factors that can either support or threaten it. In the context of an aging society, the issue of quality of life in late adulthood is gaining increasing importance — not only from an individual perspective, but also systemically — as a challenge for social policy, healthcare, and local communities.

Well-being is understood here as a complex construct encompassing physical well-being (somatic health and functional capacity), psychological well-being (emotional balance, sense of purpose, autonomy, self-esteem), and environmental well-being (living conditions, access to social support, healthcare systems, infrastructure, and culture that promote and dignified aging). Special attention is given to the role of psychological well-being as a protective factor against exclusion, depression, and declining life satisfaction.

The presentation will also address threats to the well-being of older adults, including social pathologies such as elder abuse — physical, psychological, financial, or through neglect — which remain under-recognized and marginalized both in public discourse and institutional practice. The issue of age-related stereotypes (ageism) and their negative impact on self-worth and agency in older adults will also be discussed.

Furthermore, selected programs implemented in Poland aimed at enhancing the quality of life of the elderly will be presented — ranging from educational and integrative initiatives to psycho-



preventive interventions. Simple yet effective techniques for supporting psychological well-being will be outlined, with an emphasis on their applicability in everyday caregiving and community settings.

This presentation seeks to frame old age as a life stage that, when appropriately supported, can be characterized by meaning, relationships, and dignity — not merely by decline and dependence.



Forever Vital: Redefining Age, Well-being, and Quality of Life

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Keywords: Pakistan, Co-Creative Ageing, co-creative ageing ecosystem

Pakistan is entering a demographic transition with one of the fastest-growing ageing populations in South Asia. Despite this shift, ageing in Pakistan is predominantly framed through a medical and welfare lens, emphasizing dependency, decline, and family-based care. Existing paradigms — successful, active, and healthy ageing — prioritize physical independence and social participation but overlook the creative, collaborative, and intergenerational capacities of older adults. This study introduces Co-Creative Ageing, a conceptual framework that reimagines later life as a period of creativity, contribution, and co-production of value alongside younger generations.

Aim

The **objective** of this research is to conceptualize a culturally grounded, socially responsive model of positive ageing in Pakistan, highlighting how collaborative engagement, storytelling, and purposeful micro-contributions can foster well-being, meaning, and legacy. Addressing a significant research gap, this work challenges deficit-based narratives of ageing by positioning elders as active agents of social innovation.

Methodology

Using a qualitative exploratory methodology, the study synthesizes international gerontology literature and integrates insights from semi-structured interviews conducted with older adults, social workers, and community organizations in Lahore and Karachi.



Results and conclusion

The findings indicate that Pakistan's collectivist culture, strong family values, and emerging digital access create fertile ground for intergenerational innovation, digital legacy projects, and creative ageing programs. The proposed framework offers meaningful implications for policy, universities, NGOs, and social enterprises, encouraging the development of co-creative ageing ecosystems that enhance well-being, strengthen social cohesion, and leverage elders as national assets rather than dependents.



Ageing in Two Worlds: Policy and Culture in Pakistan and Hungary

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Keywords: ageing policy, long-term care, cultural norms, ageism, Pakistan, Hungary

Background and Purpose

Pakistan and Hungary are at different stages of population ageing, yet both face challenges in balancing family caregiving and formal support. This study explores how national ageing policies and cultural attitudes shape elder care in these contexts.

Methods

A comparative review of policy documents, official statistics, and peer-reviewed literature from 2014 – 2025 was conducted. Key indicators included the proportion of older adults (65+), long-term care (LTC) provision, care practices, and societal perceptions of ageing.

Results

Hungary is an “aged” society ($\approx 21\%$ aged 65+ in 2024), while Pakistan’s population is younger ($\approx 4.3\%$ aged 65+) but ageing rapidly. In Hungary, most older adults receive care at home ($\approx 75\%$), yet LTC funding ($\approx 0.7\%$ of GDP) and workforce limitations restrict services.

Pakistan’s support system is fragmented, relying primarily on families, with limited national infrastructure despite provincial Senior Citizens Acts. Culturally, caregiving in Pakistan is strongly influenced by kinship, whereas in Hungary, ageism and mixed societal attitudes affect care outcomes.



Conclusions

Differences between policy and cultural expectations influence elder-care quality. Strengthening formal LTC in Pakistan and addressing ageism and resource gaps in Hungary could improve older adults' well-being. Aligning cultural values with supportive policies is essential for sustainable ageing in both countries



Ageing Without Care? The Healthcare Insecurity Among the Elderly in Nigeria

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Keywords: ageing, healthcare insecurity, elderly, Nigeria

This paper provides a review of studies of the healthcare insecurity experienced by the elderly population in Nigeria, focusing on social isolation, economic struggle, inadequate healthcare, and the potential lack of governmental support.

Nigeria, like many developing countries in the world, is experiencing a demographic shift marked by a rapid increase in its elderly population. Adults who are 60 years and above are not accorded the necessary healthcare support that is accorded to maternal and child health. In Nigeria, the population of the elderly has seen a rise from 2.9% in the year 2020 to 3.05% in the year 2024, and they are most likely vulnerable to long-lasting conditions, which include diabetes, cancer, cardiovascular diseases, and other age-related health problems.

It can be said that there are significant differences in access to healthcare, where older Nigerians often face persistent insecurity, poor geriatric services, and cultural prejudices that further complicate their health situation and make them dependent on their families or informal care, such as community support.

The problems the older generation face in the insecurity of healthcare are rooted in systemic negligence, poor infrastructure, as well as a lack of sufficient doctors who specialise in genetic care.

Despite contributing to society through their taxes and community development, Nigeria's older population remains financially vulnerable due to inadequate regulation, low health and social spending, and systemic corruption.



This summary study concludes that there is an urgent need in Nigeria to re-examine health policies and develop regulations that support inclusive reforms, better governance, and investment in the well-being of older people in order to promote security and dignity in old age.



Someone makes videos and gets the money for it' - Agency of Older TikTokers in Digital Capitalism

Edit Paulo

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Keywords: Goffman's dramaturgical model, online persona, TikTok, visual and verbal video analysis

The capitalist operations of today have been described in various forms in literature, and while each concept highlights different aspects of this operation, they all agree that large tech companies are the biggest beneficiaries of this transformation, capable of influencing market dynamics and consumer behaviour. Technological development has enabled the emergence and advent of social media platforms, allowing users to intentionally present themselves and engage with narrower and broader audiences, which has resulted in the proliferation of online personas. However, these online personas often align with existing social norms regarding primary axes of social stratification to achieve high publicity.

What options are available for users who are not the primary target group due to their age?

Given current demographic trends, the number of older internet and social media users is steadily increasing. Although older adults are not typically viewed as content creators, several studies have explored their presence on various platforms. TikTok, a relatively new and sometimes controversial platform, has recently begun to attract scholarly attention regarding its use by older users as well. However, it remains a rather hostile online environment, where ageist stereotypes target older adults, the platform's algorithm disfavours them, and consequently, their content's popularity can never match that of younger content creators.

By what means can someone considered an older content creator gain publicity?



This study examines how content creators over sixty construct their online personas on Hungarian-speaking TikTok.

Is it possible to categorise and typify them?

How do these personas reflect the experience of ageing?

What different social roles do they emphasise as part of their online persona?

This research uses a framework based on Erving Goffman's dramaturgical model to examine the short TikTok videos, supplemented by visual and verbal video analysis and discourse analysis.

Five distinct online personas were identified as constructed by older content creators, each with different goals, themes, tools, and reflections on ageing. Gender issues emerged as a key finding of the research, as did how these TikTokers engage with the platform's capitalist dynamics. The findings show how older adults, on a platform usually considered a playground for younger generations, can practice agency, and explore the extent to which they break away from stereotypical depictions of ageing.



Rewriting Female Ageing: Positive Later-Life Narratives in Post-COVID Cinema from the Global North

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Keywords: COVID 19, Post-COVID, narrative cinema, positive ageing,

Ageing has surged as a central theme during the COVID-19 pandemic, gaining visibility in social and cultural discourse and narratives. This new cultural attention opened space for an in depth analysis of how later life is framed within narrative cinema, particularly for women. This paper centers on a qualitative study of different aging representations in a selection of three post pandemic films from the Global North, *The Life Ahead* (Edoardo Ponti, 2020), *Good Luck to You, Leo Grande* (Sophie Hyde, 2022), and *The Miracle Club* (Thaddeus O’Sullivan, 2023), examining how these construct female ageing through narrative structure, aesthetics, and character development. This analysis considers how these films connect with broader discourses of care, resilience, and social engagement in the aging process for female subjects,

Along with the qualitative study, a supporting quantitative section is included to help highlight patterns in gender and screen time, in order to contextualize newer representational trends that contribute with positive ageing. The findings in this study suggest that recent films increasingly try to resist dominant traditional decline based frameworks, offering instead portrayals of middle aged and older women as complex, agentic, and socially engaged. The selected narratives thus reframe ageing and later life not as a period of social isolation and loneliness but as one characterized by complexity. This study positions contemporary cinema as a site where post-COVID age norms are both reflected and reimagined. The paper argues that such narratives play a significant role in challenging ageist assumptions and help expand cultural imaginaries of ageing women. In doing so, it contributes to interdisciplinary conversations on ageing, media, and post-pandemic cultural production.



Preventive aspects of addictions in old age

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Keywords: addictions in old age; hidden occurrence; preventive options; supportive groups

Around the world, increasing numbers of individuals are abusing drugs and alcohol in their later years.

Evidence suggests that the current “Baby Boom” cohort of aging adults, born from the mid-1940s to mid-1960s, abuses alcohol and psychoactive prescription medications at a higher rate than previous generations did. The “Baby Boomers” generally have more favorable attitudes towards substance use, and in their lifetimes, have had easy access to and increased reliance on prescription medication.

Alcohol and drug use among older or elderly patient has received relatively little attention clinically and in terms of research initiatives. Identifying addictions in the elderly can be challenging, since substance abuse in older people is frequently hidden. The health effects of substance use in the geriatric population can be more dangerous than in younger substance abusers. Chronic health conditions and prescribed medications can increase the adverse effects of substance use.

One of the most commonly abused substances alongside tobacco, misuse of alcohol is often a hidden phenomenon.

Treatment for substance abuse in elderly people may consist of brief interventions, Cognitive Behavioral Therapy, contingency management, motivational enhancement therapy, family and community based treatment mutual support, 12-step therapies, and residential treatment facilities. Programs should consider the special needs of elderly people including medical and social service needs.

Evidence for best practices in the older population is lacking.



At the same time, we would like to confirm the importance of spiritual aspects during the everyday care of the elderly and in the alleviation of possible addictions. Our conclusions are also confirmed by our own pilot study, which we conducted in 2024 during the survey of caregivers of the elderly. Another example is the spiritual content of the 12-step treatment used within the framework of AA. Our experiences with a support group open to elderly caregivers of relatives living with dementia, which has been running continuously for 16 years, are as follows: The group, which takes place within the framework of the “Bálint” therapeutic group, has a strong preventive potential in terms of the development of possible dependencies. It strengthens the self-esteem of the participants and the effectiveness of coping of the caregivers with significant stress resulting from the treatment of relatives.

Conclusion

As demographics change, cases of geriatric addictions are more frequently encountered in clinical practice. Substance abuse can complicate all aspects of the aging process physical and mental health. As clinicians, we can improve our skills at diagnosing and treating substance abuse in the elderly as we increase our awareness of the scope of this problem and gain better understanding in this important area of practice.



Self-care behaviour and illness perception in older adults with heart failure in outpatient care

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Keywords: EHFScBS-9, heart failure, illness perception, self-care behaviour, older adults.

Background

Heart failure (HF) is a highly prevalent condition among older adults and associated with a high risk of mortality within one year. Self-care (SC) activities improve health outcomes and reduce hospitalisation and mortality rates in patients with HF.

Objective

The study assesses the self-care behaviour in older adults with HF and its relationship to illness perception.

Methods

The European Heart Failure Self-Care Behaviour Scale (EHFScBS-9) and the Brief Illness Perception Questionnaire (B-IPQ) were used in this study. Pearson correlation and linear regression analyses were conducted to assess associations between variables.

Results

In a sample of 105 older adults with HF (mean age 74.03 ± 7.75 ; 61.0% women), the mean self-care score was 58.10 ± 20.20 (minimum 13.89, maximum 100.00).

The highest scores were observed in the areas of taking medication as prescribed, following a low-salt diet, and consulting a doctor or nurse in the event of dyspnoea or swelling of the feet. A lower



level of self-care behaviour was associated with a lower level of disease understanding, higher levels of negative emotions, and a stronger belief in the effectiveness of drug treatment. These factors explained 15.5% of the variability in self-care behaviour among older adults with HF ($F = 3.38, p < 0.01$).

Conclusions

Consistent monitoring of patients' self-care abilities and illness perception, along with targeted interventions to enhance understanding and reduce negative emotions, appears to be effective in improving self-care among older adults with HF.

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The burden on informal caregivers caring for a family member

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Keywords: burden, home care, quality of life, informal caregiver, care recipient

Caring for geriatric patients is becoming an increasingly common phenomenon today. For caregivers, it represents a period characterized by many changes, which often place a burden on their lives.

Aim

The main objective of the study was to determine the level of burden on home caregivers caring for chronically ill geriatric patients. The main objective was divided into sub-objectives: to determine the time demands of home care for chronically ill patients, the quality of life of home caregivers, their level of physical and emotional health, and the characteristics of their social relationships.

Methods and research sample

A quantitative empirical survey was conducted using the standardized Caregiver Burden Inventory questionnaire (Novak & Guest, 1989). The survey sample consisted of 58 informal caregivers living in municipalities belonging to the Regional Association of Towns and Municipalities of Rudohorie (RZMO) (which brings together 16 municipalities in eastern Slovakia) who care for geriatric patients in their home environment. The vast majority of the survey participants were men (62%), with an average age of 64 and an average length of caregiving of 3.5 years.



Results

Based on the average time difficulty score of 2.71, we conclude that caregiving is very time-consuming. The average quality of life score for caregivers was 1.74, indicating that informal caregivers do not view their personal lives negatively because of caregiving. The average physical health score was 2.84, indicating that caregiving has an impact on the physical health of informal caregivers. Emotional health is not a key issue in caregiving, as indicated by the average score of 0.95. The average score for social relationships was 1.74, which means that caregivers sometimes have problems in their relationships with their partners due to caregiving, and this can sometimes be reflected in their relationships with other family members or loved ones. A comparative analysis between male and female informal caregivers showed that caregiving is more demanding for women than for men, as they reported more problems in all areas.

Conclusion

In our survey, the most problematic areas were time demands and physical health. Respondents scored relatively high in these two areas, indicating that caregiving can contribute to the deterioration of the informal caregiver's health as well as to a loss of time for their personal life.

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Inmates with Dementia: Responding to an Ageing and Ailing Prison Population

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Keywords: cognitive impairments, correctional healthcare, dementia, older prisoners, penal policy, social policy

Penitentiary systems worldwide are confronting a profound demographic shift mirroring that of developed societies: a rapidly ageing prison population. This trend results in a growing number of inmates with complex, age-related health issues, most notably dementia and other severe cognitive impairments. The prison milieu – characterised by stress, sensory deprivation, and limited access to specialised care – can exacerbate the progression of these neurodegenerative diseases. This situation presents a fundamental challenge to the very purpose of incarceration, as individuals with dementia progressively lose the ability to comprehend their legal situation and the meaning of their punishment. On the other hand, this is also a challenge for prison guards and those working in prisons who face the problem of providing care for such prisoners.

This paper draws upon an interdisciplinary research project that analyses the systemic, legal, medical, and ethical challenges associated with managing prisoners with dementia.

Based on a mixed-methods approach, including a review of official reports and statistics, a comparative analysis of international policies (e.g., in Poland, Germany, Austria, Japan, and Sweden), and in-depth interviews with key penitentiary stakeholders, our research identifies critical systemic failures.



The presentation aims to disseminate pre-findings of an analysis of six areas of institutional inadequacy in selected countries: daily care, medical care, living conditions, legal procedure, inter-institutional coordination, and staff competencies.

Ultimately, this paper argues that current punitive models are unsustainable, inefficient, and ethically untenable for this vulnerable population. It aims to provide robust analytical material to stimulate debate towards creating humane, coherent, and evidence-based policies for prisoners with dementia.

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Generational change in pensioner organisations: challenges and opportunities in leadership succession

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Keywords: pensioner organisations, generational change, leadership succession

Leadership succession is a crucial factor in ensuring the sustainability of organisations across both business and civil sectors, particularly in community-based organisations whose activities are strongly person-dependent and locally embedded. In the context of pensioner organisations, succession planning becomes even more significant due to demographic shifts and the ageing leadership base, raising pressing questions about how organisational knowledge, culture, and management responsibilities can be effectively transferred to new generations.

Aim/Scope

This pilot study aims to explore leadership succession practices, attitudes, and challenges among civil society organisations working with older adults in Hungary's Northern Great Plain region. The research seeks to identify current approaches, highlight structural gaps, and examine how these organisations prepare — or fail to prepare — for generational change and leadership transition.

Methods

A quantitative research design was applied, using a structured questionnaire completed by a targeted sample of 14 pensioner organisations from the counties of Szabolcs-Szatmár-Bereg, Hajdú-Bihar, and Jász-Nagykun-Szolnok. The survey investigated succession practices, leadership competencies, selection mechanisms, and intergenerational dynamics.

Results

The findings show that although the leaders of these organisations typically have extensive experience, leadership succession is most often handled on an ad hoc basis, without formal strategic planning or documentation.

Succession issues generally emerge only in crisis situations, such as retirement or unexpected departures, which is particularly problematic in the civil sector where leadership often shapes both daily operations and long-term strategic decisions.

Respondents identified key leadership competencies — including empathy, effective communication, and strategic thinking — reflecting the complex demands of managing civil organisations. However, formal frameworks for preparing future leaders are largely absent; leadership skills are mainly acquired through self-training and practical experience. Successor selection tends to rely on informal relationships rather than structured mentoring. Most leaders are already of retirement age, highlighting an urgent need for conscious and pre-planned leadership transitions. Despite this, written succession plans remain rare and are usually limited to formal management roles. Nevertheless, there is a strong intention among organisations to engage younger generations and ensure the transfer of organisational culture through intergenerational collaboration and mentoring.

Conclusion

The study confirms that while leadership in civil society organisations in the Northern Great Plain region is highly committed and experienced, significant structural deficiencies exist in succession planning. Sustainable organisational continuity requires formalised planning processes, leadership development initiatives, and institutionalised mechanisms for transferring organisational knowledge and values.

The findings underscore the need for supportive policy frameworks to strengthen succession practices, especially in rural contexts.



This pilot research contributes to the limited body of knowledge on leadership succession in organisations serving older adults and provides a foundation for future studies and interventions aimed at fostering a culture of conscious generational change.

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Enhancing Geriatric Care through Speech-Language Therapy - Practical Tools for Cognitive - Communication Disorders

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Keywords: cognitive communication disorders, geriatrics, speech therapy, adherence, quality of life

This study aims to present the significance of cognitive-communication disorders (CCD) in geriatric care and to highlight the role of speech therapy along with the latest research directions in diagnostics and therapeutic interventions.

The study places particular emphasis on tools and methods applicable in everyday practice that enhance therapeutic adherence and improve quality of life among elderly patients with stroke, acquired brain injury, or neurodegenerative diseases.

CCD encompass linguistic, cognitive, and pragmatic difficulties, directly affecting functional communication, independence, and social participation. These challenges reduce therapy success, increase caregiver burden, and contribute to isolation.

The study is based on a literature review, personal clinical case experiences, and previous presentations. Therapeutic tools include both classical and alternative options, such as visual aids, external memory supports (calendars, pill organizers, communication boards), and digital cognitive training applications. In group therapy sessions, creative and interactive tools — such as Dixit or

MoodCards — may be used to develop social skills and reduce isolation. Patient and healthcare staff education, along with interdisciplinary collaboration, are also essential elements of practice.

Research findings show that speech therapy interventions in geriatrics can significantly improve therapeutic cooperation and participation in everyday communication situations. Therapy supported by tools and methods can foster patient independence, reduce hospital readmissions, and strengthen the maintenance of social relationships. Additionally, incorporating group and home-based practice increases motivation.

Recognition and treatment of cognitive-communication disorders are essential in high-quality geriatric care. From a theoretical perspective, speech therapy is an interdisciplinary field that integrates linguistic, cognitive, and social functions. The therapeutic approach increasingly focuses on functionality and supporting success in daily life, since the goal is not merely the development of communication skills, but their practical applicability. The methods presented offer easily adaptable, patient-centered solutions that strengthen therapeutic cooperation, ensure safe care, and sustainably improve quality of life. Future geriatric care models should reinforce the interdisciplinary role of speech-language pathologists, as their contribution is crucial for effectively addressing the everyday needs of an aging society.

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Self-compassion in elderly people: Samples from studies

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Keywords: self-compassion, common humanity, mindfulness, well-being

Elderly people who practice self-compassion tend to experience better psychological well-being and cope more effectively with the challenges of aging, such as physical decline and emotional stress. Self-compassion in older adults involves treating oneself with kindness, recognizing the shared human experience of aging, and maintaining mindful awareness without harsh self-judgment. Research shows that higher self-compassion is linked to greater life satisfaction, less emotional distress, and a more positive attitude toward age-related changes. It also moderates the negative impact of poor physical health on subjective well-being, helping older adults maintain resilience despite health issues. Moreover, self-compassionate elderly individuals are more willing to seek and use assistance (e.g., using walkers or asking for help) without feeling bothered, which can promote better physical and cognitive functioning (Allen et al., 2012; Allen & Leary, 2014).

Practical strategies to cultivate self-compassion in seniors include:

- Self-kindness: Encouraging gentle, supportive self-talk instead of self-criticism.
- Common humanity: Understanding that aging challenges are a universal experience.
- Mindfulness: Staying present and accepting difficult emotions or situations without judgment, for example, through meditation or deep breathing exercises.

Encouraging self-compassion among older adults may thus improve their overall quality of life, mental health, and ability to adapt to aging-related difficulties.

Samples from Studies

Authors	Title	Conclusion
Perez-Blasco et al., 2016	The Effects of Mindfulness and Self-Compassion on Improving the Capacity to Adapt to Stress Situations in Elderly People Living in the Community	The results demonstrated that both mindfulness and self-compassion significantly improved participants' capacity to cope with stress. Specifically, cultivating these qualities was associated with better emotional regulation, reduced stress levels, and increased psychological well-being. The study concluded that mindfulness and self-compassion practices can serve as effective interventions to help older adults manage stress and enhance their overall mental health.
Kashmari et al., 2023	Comparing the Effectiveness of Cognitive-behavioral Therapy Combined With Self-compassion and Cognitive Motor Activities and Cognitive Motor Intervention Alone on Forgiveness and Self-compassion in the Elderly	Both intervention methods — (1) cognitive-behavioral therapy (CBT) combined with self-compassion and cognitive-motor activities, and (2) cognitive-motor intervention alone — were effective in increasing levels of forgiveness and self-compassion among elderly participants. CBT combined with self-compassion and cognitive-motor activities was significantly more effective than cognitive-motor activities alone in enhancing self-compassion in the elderly.
Bijaeyeh et al., 2021	The Effectiveness of the Self-Compassion Training on Life Satisfaction and Resilience of the Elderly Women	The results suggest that self-compassion training is an effective therapeutic intervention to enhance psychological well-being and resilience in elderly women, and it can be effectively applied in nursing home settings
Farokhzadian & Mirderekvand, 2018	The Effectiveness of Self-Compassion Focused Therapy on Increase of Psychological Well-Being and Reduction of Depression in the Elderly	Self-compassion-focused therapy significantly reduces cognitive vulnerability to depression and increases psychological well-being in elderly individuals. The research demonstrated statistically significant improvements in dysfunctional attitudes, self-esteem, and attribution styles related to negative events after eight sessions of therapy.
Kazemi et al., 2020	The effectiveness of self-compassion treatment on loneliness and life expectancy in elderly women	Self-compassion-focused therapy significantly reduces loneliness and increases life expectancy among senior women. This indicates that the intervention not only helps elderly women feel less isolated but also has a positive impact on their overall longevity
Mohamed Abd-Elsalam Elhgry et al., 2020	Effect of self-compassion based intervention on self-compassion, life satisfaction and psychological well-being among older adults	A highly statistically significant increase in life satisfaction scores post-intervention. Elderly participants with chronic health problems showed notably higher self-compassion after the intervention, suggesting better acceptance and kind responses to their health difficulties. Positive increases were seen in psychological well-being subscales such as acceptance, autonomy, environment mastery, personal growth, positive relations, and purpose in life.

Conclusion

Recent research consistently highlights the positive impact of self-compassion and mindfulness-based interventions on the psychological well-being of elderly individuals. Studies have demonstrated that practices fostering mindfulness and self-compassion significantly improve older adults' abilities to manage stress, regulate emotions, and reduce depressive symptoms. For example, Perez-Blasco et al. (2016) found enhanced stress adaptation through mindfulness and self-compassion, while Farokhzadian and Mirderekvand (2018) observed reduced depression and increased psychological well-being after focused self-compassion therapy.

Additionally, combining cognitive-behavioral therapy with self-compassion and cognitive-motor activities yields greater improvements in forgiveness and self-compassion compared to cognitive-motor activities alone (Kashmari et al., 2023). Self-compassion training also bolsters life satisfaction, resilience, and reduces loneliness, which are critical factors for elderly women's mental health (Bijaeyeh et al., 2021; Kazemi et al., 2020). Interventions notably enhance various aspects of psychological well-being such as acceptance, personal growth, and positive relationships, even among those suffering chronic health conditions (Mohamed Abd-Elsalam Elhgry et al., 2020).

Recommendations

Given these findings, integrating self-compassion and mindfulness-based approaches into mental health programs for the elderly can offer valuable benefits. Tailoring interventions to include both psychological therapy and physical or cognitive activities may maximize outcomes. Nursing homes and community centers should consider structured self-compassion training to improve resilience and reduce loneliness. Moreover, healthcare providers working with chronically ill older adults should incorporate these practices to foster better acceptance and psychological adjustment, ultimately enhancing quality of life and possibly longevity.



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CONFERENCE PROGRAMME

ON 17TH OCTOBER

8:30 Registration

Nyíregyháza, Sóstói út. 2-4. Zilahi Hall, (University of Debrecen, Faculty of Health Sciences)

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=m656b832fa6663ffd46ebc6544c86741c>

Place: Zilahi Hall

Host: Ágnes Stomp, University of Debrecen, Hungary

9:00 Welcome Speeches

Dr. Ágnes Bene, Department of Gerontology, Faculty of Health Sciences, University of Debrecen, Hungary

Prof. Dr. Christian Borg Xuereb, Department of Gerontology and Dementia Studies, Faculty for Social Wellbeing, University of Malta, Malta

Key note speakers:

9:20

Behavioural technics in work with seniors

Dr. Ondrej Botek, Ph.D., F.R.S.A.,

Department of Social Work, Faculty of Health Care and Social Work, Trnava University in Trnava, Slovakia

9:50

Ageing, Dignity and Daily Life: A Phenomenological Inquiry into Older Men in Malta's Prison System

Prof. Dr. Christian Borg Xuereb, Paul Schembri

Department of Gerontology and Dementia Studies, Faculty for Social Wellbeing, University of Malta, Malta



10:20

Intergenerational folk dance: Dances from Moldva (Transilvania)

Kerekerdő Kindergarden Így tedd rá folkdance group

and

Canned Food Factory Pensioner Association

instructor: Mónika Balassáné Sebestyén Methodology instructor of „Így tedd rá” programme

10:30

Official Group photo

10:40-11:00 Coffee break

SESSIONS (1-6.)



Session 1.

Place: Zilahi Hall

Host: Dr. Gergely Fábíán, University of Debrecen, Faculty of Health Sciences, Institute of Social and Sociological Sciences, Department of Social Sciences, Hungary

Co-host: Dr. Adrienn Újváriné Siket, University of Debrecen Faculty of Health Sciences, Hungary

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=m656b832fa6663ffd46ebc6544c86741c>

11:00

Well-being among the Elderly - challenges for social policy

Dr. Marzanna Farnicka

Family Psychology Unit Psychology Institute, University of Zielona Góra, Poland

11:20

Focusing on UN Decade of healthy aging: national plans across Europe to Asia

Prof. Dr. Elena Golubeva

Department of Social Work and Social Security, Northern Arctic Federal University, Russia

Russian Gerontological Society, Russia

Dr. Nidhi Mishra

Applied Psychology GITAM School of Humanities and Social Sciences Visakhapatnam, India

11:40

The challenges of community nursing in Europe, with a focus on health advice, patient education, digital education and the potential of telecare in nursing and nursing education

Dr. Adrienn Újváriné Siket

University of Debrecen Faculty of Health Sciences, Hungary

12:00-12:20 Coffee break

12:20

Social Ingredients in Gerontopsychiatry: Challenges and Overcoming

Prof. Dr. Andrey Soloviev

Department of Psychiatry and Clinical Psychology Northern State Medical University, Russia

12:40

Are We Listening to Elders? Intergenerational Wisdom as a Protective Factor Against Bullying in Diverse Academic Spaces

Jebari Mariem



Doctoral School of Sociology, Faculty of Social Sciences, Eötvös Loránd University, Hungary

13:00

Growing Old and Being LGBTIQ in Malta: What Happens When We Need Care?

Christian Vella

Department of Gerontology and Dementia Studies, Faculty for Social Wellbeing, University of Malta, Malta

13:20

Self-compassion in elderly people: Samples from studies

Dr. Emel Bahadır Yilmaz

Giresun University, Turkey

Session 2.

Place: 1. Large Lecture Hall (1. Nagyelőadó terem)

Host: Dr. Katalin Papp, University of Debrecen, Faculty of Health Sciences, Hungary

Co-host: Dr. Nicoleta Mitrea, Department of Fundamental Disciplines and Clinical Prevention, Faculty of Medicine, University of Transilvania from Brasov, Romania

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=md1e1fcdab94d2187379ce60f3d716828>

11:00

Climate Change and Aging: Health Challenges

Prof. Dr. Klára Gadó

Semmelweis University Geriatric Clinic and Research Centre for Nursing, Hungary

11:20

Pain assessment and therapy in palliative care

Dr. Nicoleta Mitrea

Department of Fundamental Disciplines and Clinical Prevention, Faculty of Medicine, University of Transilvania from Brasov, Romania

Department of Education and Research, HOSPICE Casa Sperantei, Brasov, Romania

11:40

Interpersonal communication style towards hospitalized seniors - study report

Dr. Joanna Hoffman- Aulich

Dr. Monika Lato - Pawłowska

The Nursery Department, The Health Sciences Institute, University of Zielona Góra, Poland



Dr. Marzanna Farnicka
Family Psychology Unit Psychology Institute, University of Zielona Góra, Poland

12:00-12:20 Coffee break

12:20

Physiotherapy in Semmelweis University Geriatrics Clinic and Center for Nursing Sciences

Handulle Hair Abdullahi

Semmelweis University Geriatric Clinic and Research Centre for Nursing , Hungary

12:40

Examining the effects of physical activity on the impact of older people's bereavement in ELSA data

Zsuzsanna Balogh

Lancaster University, Division of Health Research, UK

University of Szeged, Faculty of Health Sciences and Social Studies, Hungary

13:00

Frailty as the Cornerstone of Elderly Care: Strategies for Early Detection and Intervention

Abu Baker

Semmelweis University Geriatric Clinic and Research Centre for Nursing, Hungary

13:20

Enhancing Geriatric Care through Speech-Language Therapy – Practical Tools for Cognitive-Communication Disorders

Ádám Szücs

Semmelweis University Geriatric Clinic and Research Centre for Nursing, Hungary

Session 3.

Place: Tower Loft Auditorium (Torony, tetőtér)

Host: **Dr. Bassel Anwar Asaad**, Tishreen University Department of Economics and Planning, Syria

Co-host: **Teresa Alves Martins**, Centre for Research and Innovation in Education (inED) Porto Polytechnic School of Education (ESE), Portugal

Co-host: **Ivett Stumpf-Tamás**, University of Debrecen, Faculty of Health Sciences, Hungary

Webex link:



<https://unideb.webex.com/unideb-hu/j.php?MTID=m02e7299410d3f627f4a22038500ff7e8>

11:00

Political participation of retired people towards a future for all ages – from Portugal to Europe

Teresa Alves Martins

Centre for Research and Innovation in Education (inED) Porto Polytechnic School of Education (ESE), Portugal

11:20

Health literacy and active ageing among the population 65+ in the South Bohemian Region in the Czech Republic

Hellerová Věra, Brabcová Iva, Bártlová Sylva

The University of South Bohemia in České Budějovice, Faculty of Health and Social Sciences, Institute of Nursing, Midwifery and Emergency Care, Czech Republic

11:40

Perceived barriers and enablers to outdoor mobility among older adults in the Nordic Arctic Region

Dr. Anastasia Emelyanova

University of Oulu, Finland

Dr. Agneta Larsson

Luleå University of Technology, Sweden

Dr. Steinunn Ólafsdóttir

University of Iceland, Iceland

12:00-12:20 Coffee break

12:20

Self-care behaviour and illness perception in older adults with heart failure in outpatient care

Mária Sováriová Soósová

Pavol Jozef Šafárik University in Košice, Faculty of Medicine, Institute of Nursing, Košice, Slovakia

12:40

Unmet care needs of older patients with maxillofacial diseases: A cross-sectional study

Dominika Kohanová

Constantine the Philosopher University in Nitra, Faculty of Social Sciences and Health Care, Slovakia

Ján Valentíny

University Hospital Banská Bystrica



Andrea Sollárová

Constantine the Philosopher University in Nitra, Faculty of Social Sciences and Health Care, Slovakia

13:00

The burden on informal caregivers caring for a family member

Valéria Parová

Pavol Jozef Šafárik University in Košice, Faculty of Medicine, Slovakia

13:20

Health status of persons aged 65+ - cross-sectional study

Iva Brabcová

University of South Bohemia in Ceske Budejovice, Faculty of Health and Social Sciences, Institute of Nursing, Midwifery and Emergency Care, Czech Republic

Session 4. INCUBATOR SESSION

Place: Tower Ground Floor Video Conference Hall (Torony földszinti videókonferencia terem)

Host: Dr. Katalin Balázs, University of Debrecen, Faculty of Humanities, Institute of Psychology, Department of Social and Work Psychology, Hungary

Co-host: Emese Nagyné Lengyel, University of Debrecen, Faculty of Health Sciences, Institute of Social and Sociological Sciences, Department of Psychology, Hungary

Co-host: Zalán Gulyás, University of Debrecen, Faculty of Medicine, Institute of Behavioural Sciences, Hungary

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=m075f62e905557d87377e731e458a5c2e>

11:00

Social support systems for the elderly in the Philippines: A policy and demographic analysis

Magana Dan Louie

University of Debrecen, Faculty of Health Sciences, Hungary, Philippines

11:15

Adapting the WHO Age-Friendly Cities Framework to Address Challenges in Kenya's Urban Informal Settlements

Fidella Ngugi

University of Debrecen, Hungary, Kenya



11:30

Beyond Longevity: How Gender Roles Shape the Ageing Experience of Women in Nigeria

Oluwatobi Mercy Odedina

University of Debrecen Faculty of Health Sciences, Hungary, Nigeria

11:45

Ageing in Two Worlds: Policy and Culture in Pakistan and Hungary

Minahil Majid, Rabia Nayyar Butt

University of Debrecen Faculty of Health Sciences, Hungary, Pakistan

12:00-12:20 Coffee break

12:20

Resilience Amid Crisis: The Impact of COVID-19 on Older Adults in Jordan - Challenges, Interventions, and Policy Innovations

Dina Kamal

University of Debrecen, Hungary, Jordan

12:35

Ageing Without Care? The Healthcare Insecurity Among The Elderly in Nigeria

Oluwakemi Kafilat Oyedeji

University of Debrecen Faculty of Health Sciences, Hungary, Nigeria

12:50

Physical Activity and Healthy Aging

Muhammed Ahmed

University of Debrecen, Hungary

13:05

Weaving threads of care: Examining extended family support for aging in rural Ghana

Amos Elikplim Awuku

University of Debrecen, Hungary, Ghana

13:40-14:20 Lunch break



Session 5.

Place: Zilahi Hall

Host: Prof. Dr. Elena Golubeva, Department of Social Work and Social Security, Northern Arctic Federal University, Russia; Russian Gerontological Society, Russia

Co-host: Ágnes Stomp University of Debrecen, Faculty of Health Sciences, Hungary

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=m656b832fa6663ffd46ebc6544c86741c>

14:20

Rewriting Female Ageing: Positive Later-Life Narratives in Post-COVID Cinema from the Global North

Rodriguez Julieta Atenas

University of Debrecen, Hungary

14:40

Someone makes videos and gets the money for it' - Agency of Older TikTokers in Digital Capitalism

Edit Paulo

ELTE Eötvös Loránd University, Sociology Doctoral School, Hungary

15:00

Walking Toward Understanding: Engaging Older Adults in Intercultural Dialogue Through the Orrajt Migrantour project in Malta

Dr. Viviana Premazzi

Center for Liberal Arts and Sciences, University of Malta, Malta

GMD Training and Consultancy Services Ltd., Malta

15:20

Charity, Mental health and Hike adventures in Malta

Gregory Camenzuli

Trekking friends, Malta

15:40

Longer male life in the Mediterranean - Older men's roles, habits and leisure activities in Malta

Dr. Ágnes Bene

University of Debrecen, Hungary



Brigitta Váradi, Andrea Izsó
freelance professionals, Malta
Gabriella Mihály-Gajdos
freelance professional, Spain

Session 6.

Place: 1. Large Lecture Hall (1. Nagyelőadó terem)

Host: Dr. Anikó Panna Tóth, University of Debrecen, Faculty of Health Sciences, Institute of Social and Sociological Sciences, Department of Social Sciences and Social Work, Hungary

Co-host: Dr. László Patyán, Institute of Social Sciences Reformed Theological University of Sárospatak, Hungary

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=md1e1fcdab94d2187379ce60f3d716828>

14:20

The appearance of old age in the documents regulating artificial intelligence of the European Union and Hungary

Imre Töviskes

University of Pécs, Faculty of Humanities and Social Sciences, Doctoral Program in Philosophical Sciences

Balázs Molnár

University of Miskolc, Faculty of Humanities and Social Sciences, Teacher Training Institute

14:40

Dynamic and Interoperable Social Welfare Integrated System (DISWIS) – A Data Architecture Model

Enrique H. Gascon Jr.,

Department of Social Welfare and Development, (DSWD), Philippines

Climson L. Balangue

University of Debrecen, Hungary

15:00

Digital Homecoming: Investigating Belonging and Ageing in Place among Older Syrians with a Migration Experience in Frankfurt and Surroundings

Roua Shaban

Goethe University Frankfurt, Germany



15:20

Digitalisation and older workers. Digitalisation in the home care system

Dr. László Patyán

Institute of Social Sciences, Reformed Theological University of Sárospatak, Hungary

15:40

Digital Solutions for Supporting Active and Healthy Aging and Elderly Care

Dr. Anikó Panna Tóth

University of Debrecen, Faculty of Health Sciences, Institute of Social and Sociological Sciences,
Department of Social Sciences and Social Work, Hungary

Session 7.

Place: Tower Ground Floor Video Conference Hall (Torony földszinti videókonferencia terem)

Host: Dr. Győző Pék, University of Debrecen, Hungary

Co-host: Dr. Zofia Szweda-Lewandowska, SGH Warsaw School of Economics, Poland

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=m075f62e905557d87377e731e458a5c2e>

14:20

Hungarian and European Conscious Ageing Network

Cooperation between Municipalities, Municipality Associations, NGOs and Business to promote active and conscious ageing in Hungary and Europe"

Kinga Milankovics,

Hekate Conscious Aging Foundation, Hungary

Bettina Török

University of Pécs, P-AGE, Hungary

14:40

Older people in the structure of local society - results and experiences of the panel survey in Nyíregyháza

Prof. Dr. Mihály Fónai

University of Debrecen, Faculty of Humanities, Hungary

15:00

Inmates with Dementia: Responding to an Ageing and Ailing Prison Population

Dr. Zofia Szweda-Lewandowska



Dr. Joanna Felczak
SGH Warsaw School of Economics, Poland

15:20

The role of balneotherapy in helping older people take advantage of new job opportunities

Helmeczi Gabriella
University of Debrecen, Faculty of Health Sciences

15:40

Characteristics of addictions in old age - Preventive aspects

Dr. Győző Pék
University of Debrecen, Hungary

Session 8.

Place: Tower Loft Auditorium (Torony, tetőtér)

Host: **Dr. Bassel Anwar Asaad**, Tishreen University Department of Economics and Planning, Syria

Co-host: **Dr. Shah Ali Murtaza**, Department of Management Sciences, Beaconhouse National University Pakistan

Co-host: **Ivett Stumpf-Tamás**, University of Debrecen, Faculty of Health Sciences, Hungary

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=m02e7299410d3f627f4a22038500ff7e8>

14:20

A new Precedent in Health Cooperation to Make an Assessment Model of Total Demand for Health Service

Dr. Bassel Anwar Asaad
Tishreen University, Department of Economics and Planning, Syria

Dana Dagher
University of Debrecen, Faculty of Health Science

Mohammad Bassam Kashmar
Department of Communications and Electronics Engineering, Faculty of Electrical Engineering, Homs University, Syria

Zahraa Ammar Khadour
Department of Computer and Automation Engineering, Faculty of Electrical Engineering, Homs University, Syria



14:40

Forever Vital: Redefining Age, Well-being, and Quality of Life

Dr. Shah Ali Murtaza

Department of Management Sciences, Beaconhouse National University Pakistan

15:00

The Challenges and Rewards of International Research on Aging

Professor Dr. Ellen L. Csikai

School of Social Work, The University of Alabama, USA

Dr. László Patyán

Reformed Theological University of Sárospatak, Hungary

15:20

Generational change in pensioner organisations: challenges and opportunities in leadership succession

Ivett Stumpf-Tamás; Dr. Mariann Móri

University of Debrecen Faculty of Health Sciences, Hungary

Session 9. Online

Place: A (building) 115.

Host: Dr. Ágnes Bene, University of Debrecen, Faculty of Health Sciences, Hungary

Webex link:

<https://unideb.webex.com/unideb-hu/j.php?MTID=m8ff0f5514760c214bd981cec1e14ce0a>

11:00

Empowering Older Persons: The Truths and Challenges of Care Decisions for Enhanced Quality of Life

Dr. Maria Aurora Fenech

Department of Gerontology and Dementia Studies, Faculty for Social Wellbeing, University of Malta, Malta

11:26

The Networks for eCooperation

Dr. Jože Gričar

University of Maribor, Slovenia; Professors Emeriti Network; eSeniors 55+ Network; Using Digital Technologies for Active Aging Initiative, Slovenia



11:43

Implementation of Intergenerational Practices for Promoting Active Ageing

Ms Ilona Mercieca
Care Malta, Malta

12:00

Reforging kinship bonds with older people

Rev. Dr. Carlo Calleja,
Department of Moral Theology, University of Malta, Malta

12:22

Formal Carers' Perspectives on Elder Abuse within a Maltese Care Home

Ms Lindsay Zarb
Department of Social Policy and Social Work at the University of Malta Malta
Dr Maria Aurora Fenech
Department of Gerontology and Dementia Studies, Faculty for Social Wellbeing, University of
Malta, Malta

12:46

Harmonising Perspectives: Understanding the resident's voice and care homes' culture

Mr George Fenech, Ms Letizia Marmara,
Older Persons Standard Authority, Malta

13:06

Relocation Stress Syndrome and Associated Health Outcomes among Older Persons Living in Long-Term Care Facilities: Findings from a Systematic Literature Review

Ms Jeannette Azzopardi Gouder, Ms Roberta Sultana, Dr Maria Aurora Fenech
University of Malta, Malta

13:26

Interdisciplinary falls prevention program for elder community dwellers within a Rehabilitation Hospital

Mr Simon Cilia, Ms Anabel Cortis, Ms Edwina Pia Zammit, Ms Michela Victoria Camenzuli, Ms
Ariana Marie Cassar
Karin Grech Rehabilitation Hospital, Malta

13:49

Ageing in the land of origins: Makedonia's impact on the Ethiopian elderly

Tigist Mogus
University of Debrecen, Hungary

14:11

Application of Bioelectrical Impedance, Phase Angle, and Bioelectrical Impedance Vector in Assessing the Nutritional Status of Elderly Individuals



Paweł Więch, Izabela Sałacińska, Dariusz Bazaliński
University of Rzeszów, Poland

14:27

Promoting active and healthy living through cooperation: Involving stakeholders in innovative projects

Juliana Louceiro, Carina Dantas, Natália Machado
SHINE 2Europe, Portugal

14:42

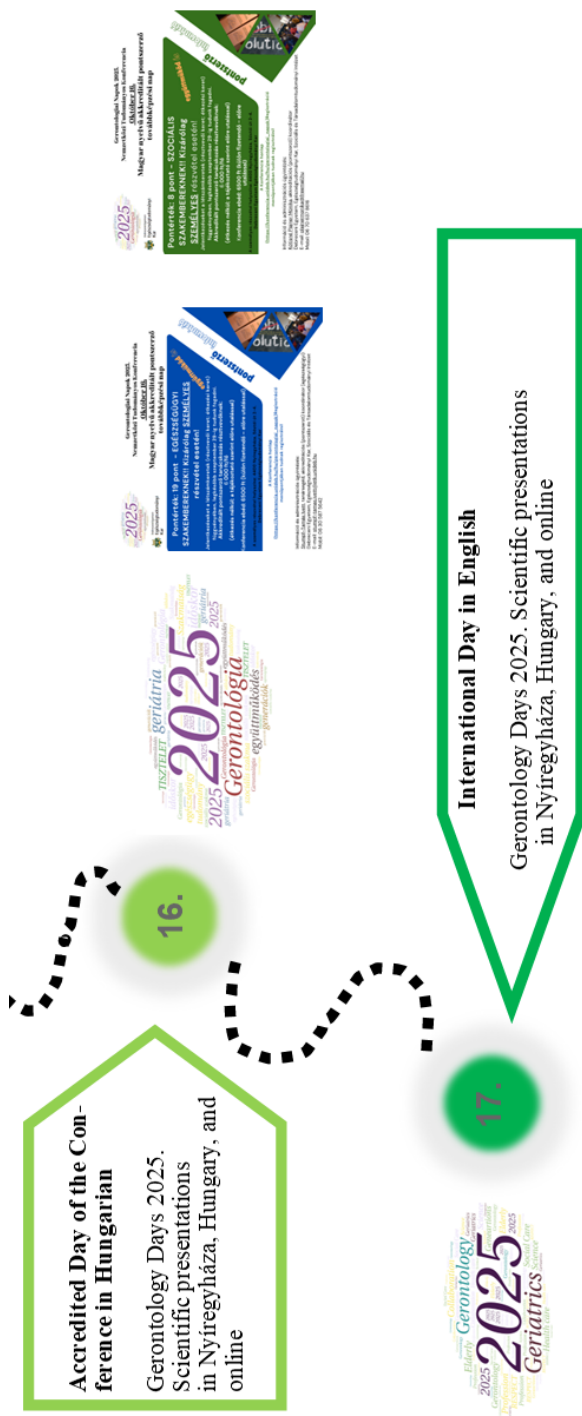
Innovations in the Smart Silver Economy: An Overview of Their Selected Strengths and Weaknesses from an Ageing Policy Perspective

Dr. Andrzej Klimczuk,
SGH Warsaw School of Economics, Poland

15:00

Age as a factor of hospitalization and death during Pandemic Crisis. The determinants of severe cases in Europe based on the data from SHARE survey

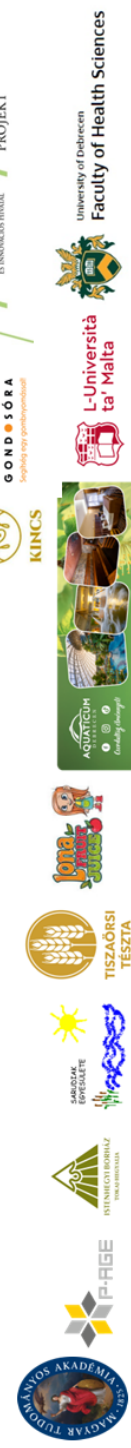
Dr. Șerban Olah
Department of Sociology and Social Work, University of Oradea, Romania



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<https://konferencia.unideb.hu/en/gerontological-days-2025>

Facebook page:
<https://www.facebook.com/foh.unideb>

14—17. October 2025.



International gerontology projects – from the perspective of the Arctic



At 10:00 am.

On 14 th October 2025

1. Nagyelőadó (Nyíregyháza Campus)

Prof. Dr. Elena Golubeva

Department of Social Work and Social Security,
Northern Arctic Federal University, Russia
Russian Gerontological Society, Russia

The Programme is supported by MEC_24 sub-programme MEC_SZ_24 of the "Scientific Patronage Call" under the ID number: MEC_SZ149413 "International Gerontology Conference"



NATIONAL RESEARCH, DEVELOPMENT
AND INNOVATION OFFICE
HUNGARY

PROJECT
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ÉS INNOVÁCIÓS HIVATAL

AZ NKFI ALAPBÓL
MEGVALÓSULÓ
PROJEKT



University of Debrecen
Faculty of Health Sciences

Dr. Blaskovich, Erzsébet
Dr. Bene, Ágnes PhD; Dr. habil. Kovács, Éva
Prof. Dr. Leibach, Ádám; Dr. Majercsik, Eszter PhD
Mészáros Lászlóné Bóle, Valéria; Dr. Zöllei, Magdolna

Idős betegek re-adaptációs kezelése a geriátriai gyakorlatban

Magyar-angol egyetemi tankönyv



Re-adaptation treatment of elderly
patients in geriatric practice
Hungarian-English university textbook



IDŐS BETEGEK RE-ADAPTÁCIÓS KEZELÉSE A GERIÁTRIAI GYAKORLATBAN
RE-ADAPTATION TREATMENT OF ELDERLY PATIENTS IN GERIATRIC PRACTICE

A kiadó ajánlása

Szakkönyvünk az idősgyógyászat egy speciális területét, a geriátriai re-adaptáció módszertanát, gyakorlati alkalmazását mutatja be, ami egy olyan új szemléletű állapotjavító eljárás, amely a hagyományos rehabilitációval már nem kezelhető idős betegek életminőségének javítását szolgálja. A könyvet több évtizedes klinikai és beteggyógy melletti tapasztalattal rendelkező szakemberek írták, akik az elmélet és a gyakorlat ötvözésével korszerű megközelítést képviselnek az idős gondozásban. Az idősgyógyászati és ápolástudományi szakkönyv mostani, második kiadása számos új elemmel bővült, és a növekvő nemzetközi érdeklődésre való tekintettel magyar és angol nyelven is olvasható. Célja az idősök (ön)jellátásának támogatása és a megváltozott élethelyzethez való alkalmazkodás elősegítése, valamint olyan hiánypótló szakmai tudásanyag átadása, amely fontos támpontot nyújt a krónikus betegek ellátásában részt vevő gondozók, hozzátartozók és szakemberek számára.

Publisher's recommendation

This professional volume explores a specialized field of geriatric medicine: the methodology and practical application of geriatric re-adaptation. This innovative, condition-improving approach is designed to improve the quality of life for older patients whose needs can no longer be met through conventional rehabilitation. Written by experienced professionals with decades of clinical and bedside practice, the book integrates theoretical knowledge with hands-on expertise to present a modern perspective on elderly care. This second edition of the textbook - targeted at professionals in geriatric medicine and nursing science - has been expanded to include with numerous new elements and is now available in both Hungarian and English, reflecting growing international interest. The book aims to support (self-) care for older people, to facilitate adaptation to changed life circumstances, and to convey professional knowledge that fills an important gap. The publication serves as a valuable resource for caregivers, family members, and professionals involved in the care of individuals with chronic conditions.





Organising Committee

Chairwoman:

- **Dr. habil Marianna Mór ,** Dean of the Faculty of Health Sciences of the University of Debrecen

Members:

- **Dr.  gnes Bene - secretary of the Conference**
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- M nika K tisn  Plajner M nika *accreditation*
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- Dr. Edina M rkus
- Dr. Luca Cs. Kiss
-  gnes Stomp
- Gy rgy Kirilla
- Tam s Szab 
- Zsoltn  Varga
- Lajos Sajtos



Scientific Committee:

- Dr. Gergely Fábrián, University of Debrecen, Hungary
- Dr. Marianna Móré, University of Debrecen, Hungary
- Dr. Ágnes Bene, University of Debrecen, Hungary
- Prof. Dr. Attila Nagy, University of Debrecen, Hungary
- Prof. Dr. Christian Borg Xuereb, University of Malta, Malta
- Dr. Maria Aurora Fenech, University of Malta, Malta

Co-organiser

University of Malta, Faculty for Social Wellbeing



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- Sarudiak Association
- P-AGE Tudatos Öregedés
- Association of Consumer Protections in Hungary (Fome)
- Economic Competition Advisory Office Network (GVTI)
- Financial Navigator Advisory Office Network (PNTI)
- MTA DAB Területi Bizottság Szabolcs-Szatmár-Bereg Megyei Szakbizottság Életmód és Egészségkutatások Interdiszciplináris Munkabizottság
- MTA DAB Területi Bizottság Orvostudományi Szakbizottság Geriátriai és Szociálgerontológiai Munkabizottság
- Tiszaörsi Barázda Élelmiszer- előállító Start Szociális Szövetkezet
- Kopp Mária Intézet a Népesedésért és a Családokért (KINCS)
- GONDOSORA
- Istenhegy Wine House
- Aquaticum Debrecen Kft.



Conference abstracts will be published in Conference Issue of Hungarian Gerontology
(Magyar Gerontológia) scientific journal.

Home page of the Journal: <https://ojs.lib.unideb.hu/gerontologia>

Webex links for the online

Plenary:

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1. Session:

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2. Session:

<https://unideb.webex.com/unideb-hu/j.php?MTID=md1e1fcdab94d2187379ce60f3d716828>

3. Session:

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8. Session:

<https://unideb.webex.com/unideb-hu/j.php?MTID=m02e7299410d3f627f4a22038500ff7e8>

9. Session:

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