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FACILITATORS ABD BARRIERS OF ACTIVE AGING AMONG EGYPTIANS: A COMMUNITY BASED STUDY IN CAIRO GOVERNORATE, EGYPT

By

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ABSTRACT

Background: Active aging can be achieved, when people are free of diseases, have intellectual capabilities, possess high physical fitness and can actively be engaged with others. In developing countries, most of which do not have comprehensive policies on aging, big challenges are faced including double burden of disease, increased risk of disability and feminization of aging. It is important to promote the concept of active aging in the population.

Objective: To understand the Egyptians perception and attitudes towards the elderly, the contribution of older people in their workplaces, societies and determine the most important actions required to ensure an actively aged Egyptian population.

Subjects and methods: A community based study was conducted in eastern Cairo by applying simple random sample to select between 4 main divisions, a sample of 1000 participants yielded a power of approximately 99%. All age groups above 18 years old were included. Subjects were divided into two groups: below 60 years and those equal to or above 60years. Data was collected using interview questionnaire, which was adopted from the special Active Aging questionnaire EUROBAROMETER 378 questionnaire.

Results: The majority of the participants feel that a person is considered old at the age of 66, and 51% of participants less than 60 years assured that elderly play a big role towards their family. Workplace age discrimination was highly reported, being unable to adapt to modern workplaces is found to be the main obstacle stopping people aged 60 years and over from working.

Conclusion: Flexibility at work and financial rewards for elderly are recommended. More attention must be given to institutions as older people's organizations and religious organizations that have a positive role in tackling the challenges of aging in population.

Key words: Active aging–barriers–community based study- elderly.

INTRODUCTION

Each fundamental stage of human development is actually affected by the previous stage which in turn affects the fore coming stages. In 2010, estimates of 524 million people were above the age of 65 or older- representing 8% of the

world's population. By 2050, this number is expected to be tripled to reach 1.5 billion, representing 16% of the world's population. This phenomenon is due to decline in fertility and improvements in long living. Added to fewer children entering the population and people living

longer, older people are making up an percentage increasing of the total population growth (WHO, 2011). According to a report by the Central Agency for Public Mobilization and Statistics (CAPMAS), the number of older people in Egypt in 2013 reached 6,461,078 persons (7.8%) of the total population.

WHO (2002) defined active aging as "the process of optimising opportunities for health, participation and security in order to enhance the quality of life as people age". This definition highlighted the importance of the social environment for the achievement of active aging i.e. in 2015, WHO defined it as "the process of developing and maintaining the functional ability that enables well-being in older age". This encompasses four elements of healthy aging: functional abilities (healthrelated attributes that allow people to do what they have reason to value); intrinsic capacities (all the physical and mental capabilities that an individual can draw on); environments (all the factors in the extrinsic world that form the context of a person's life); and well-being (happiness, security, and fulfilment). Antoine and Golaz (2010) found that, in developing countries, the time marking the entrance into old age continues to be around 60 years. Researchers have proposed a more general definition, made up of six categories including no physical disability at the age of 75 years and above as rated by a physician, good health status, length of un-disabled life, good mental health, well established social support, and life satisfaction in eight domains, namely marriage, income-related work, children, friendship and social contacts, hobbies,

community activities, religious believes, and sports (*Depp et al.*, 2012).

The challenges of population ageing are global, national and local. Meeting these challenges will require innovative planning and substantive policy reforms in developed countries and in countries in transition. Developing countries, most of whom do not yet have comprehensive policies on ageing, face the biggest challenges are: Double burden of disease, increased risk of disability and feminization of ageing (WHO, 2011).

Many studies have worked determinants of active aging. In Britain in 2006, found that three quarters of British people aged 50 years and above defined successful ageing intersecting as of dimensions health, psychological factors, social activities, finances, social contacts and neighborhood (Bowling and Dieppe, 2005). A study of determinants for active ageing in the Thai context was conducted based on elements of health, community participation, and security. It was found that the Thai active ageing levels were on age, area of residence, education, marital status, social support, gender, income, work, health checkup, ministered care, and exercise (Wongkeenee et al., 2013).

Promoting healthy ageing, in lifestyle or social support for instance, is a good implementation strategy for reducing the burden of age-related disease. Hence, It is important to promote the concept of active ageing (*Illario et al.*, 2016).

The current study aimed to understand the Egyptians perception and attitudes towards the elderly, the contribution of older people in their workplaces, societies,

and determine the most important actions required to ensure an actively aged Egyptian population.

SUBJECTS AND METHODS

A descriptive community-based study on was conducted in Cairo governorate in Egypt. Cairo is divided geographically into North, South, East and west. A simple random sample was conducted to select one of 4 main divisions, out of which was East Cairo.

In the cross-sectional analysis for continuous variables a sample size of 1000 yields a power of approximately 99% to show a contribution to the explained variance of 5% in a linear regression model with 10 predictors (including interactions, but not constant) if the probability level (alpha) is set at 0.05. (Rantanen et al., 2018).

A purposive sample (1000 participants) was taken from clubs, nursing homes for elderly, churches and mosques from Misr el Gidida, Nasr city and Ain shams (districts located in East Cairo). All age groups above 18 years old were included with respect to percentage of population in different age groups in Cairo for both males and females in 2016. Data collection took 6 months duration -3 days a week including weekends- during the period from February till August 2018.

Data were collected using interview questionnaire, which was adopted from the special Active Aging EUROBAROMETER 378 questionnaire (Active aging report, 2012). The tool was modified to suit the Egyptian community as well as being translated into simple Arabic language, and geriatric physician did back translation to English. Pilot was

done on 50 individuals of different social and educational levels and then modified to ensure its comprehension before data collection. A committee from 3 public health professors was formed to revise the questionnaire and compare it with the English version to ensure its internal validity.

The questionnaire targeted the following themes:

- Overall perceptions of age and older people – perceptions of and attitudes towards older people, the potential role for older people in society and the impact of the ageing population in the future
- Older people in the workplace attitudes towards older people in the workplace and potential barriers to continuing work.
- Retirement and pensions attitudes towards the official retirement age and pension payments and whether any changes are appropriate.
- Voluntary work and support for older people – establishing the level of personal participation in voluntary work and care of older people.
- Age friendly environment identifying how improvements can be made to meet the needs of older people.

Data Management and Analysis: The collected data were revised, coded, tabulated and entered to computer then finally analyzed using statistical package for social sciences (IBM SPSS Version 20). For descriptive analysis, quantitative data were summarized in the forms of means± standard deviations. Qualitative data were presented in frequencies and

percentages and the qualitative variables were compared using Chi square test.

Ethical Consideration:

Ain Shams University Ethical committee board approvals were obtained to carry out the study. All subjects were told about the overall study objectives of the study and anonymous questionnaires were used. Confidentiality of the data was assured.

Availability of data and materials:

The data sets used and/or analysed during the current study were available from the corresponding author on reasonable request.

Competing interests:

The authors declare that they have no competing interests.

RESULTS

Out of 1000 participants recruited, (58.1%) were males and (41.9%) were females. The mean age of the studied population was 42.82 ± 16.19 ; nearly half of the participants have university degree and currently working. (55%) are married and mostly (69.8%) living in urban areas. People are thought to be old once they reach 66 years and they are no longer

young after 54 years. The majority of the population considers themselves as either 'old' or 'middle aged' (33.8%, 36.1% respectively), comparatively few (11.6%) feel they are 'old'. (53.7%) of the respondents are satisfied with their health (giving a score of at least 7 out of 10) and least satisfied with their life conditions (60.8%) (**Table 1**).

Table (1): Socio-demographic Characteristics distribution of the studied population

Socio-demographic characteristics	N (total=1000) (%)
Gender:	
Males	581 (58.1)
females	419 (41.9)
Age groups (years)	
[18-25]	129(12.9)
[26-35]	221(22.1)
[36-45]	313(31.3)
[46 - < 60]	109(10.9)
≥60	228(22.8)
$(mean \pm SD)$	42.82 ± 16.19
Education:	
Illiterate	131(13.1)
School	196(19.6)
University	473(47.3)
postgraduate	200(20)
Current occupation:	
Not working	348(34.8)
Working currently	
unskilled workers*	193(19.3)
skilled workers**	459(45.9)
Current living place:	
My home	704(70.4)
One of sons/daughters homes	278(27.8)
Geriatrics home	18(1.8)
Marital status:	
Married	551(55.1)
Widow/widower	146(14.6)
Divorced	123(12.3)
single	180(18)
Have children	501(50.1)

^{*}Unskilled workers include manual workers as car mechanics, painters, electricians, carpenters

Most of the participants less than 60 feel that people aged 55 years and older nearly have no role in the aspects of society (politics, the community and the economy), except for their effect on their families where 51% reported having big role, 33.8% for small role and only 11.3% reported no role from their opinion. Yet participants above the age of 60 years reported that elderly have small role in all aspects except for the family role where

41.7% reported big role played by the elderly in their families. The Majority of the participants (all age groups) feel that they must have a bigger role in all aspects of life in the future.

The participants (60 years and above) were asked if they heard or were subjected to age discrimination in workplace, health care facilities or in any other facility, one in five respondents having personally experienced or witnessed it (Table 2).

^{**}Skilled workers include health care providers, teachers, accountants, secretary, engineers

Table (2): The overall perceptions of age and older people among the participants (N &%)

Participants	18 - < 60	≥ 60 years	Significance
Parameters	(N=772)	(N=228)	(P<0.05)
Describe the current role of elderly in:			
- political issues:			
Big role	149 (19.3)	37 (16.2)	
Small role	309 (40)	103 (45.2)	
No role	314 (40.7)	88 (38.6)	
- Country income:			
Big role	247 (32)	30 (13.2)	
Small role	152 (19.7)	109 (47.8)	(P<0.05)*
No role	373 (48.3)	89 (39.0)	
- community role:			
Big role	157 (20.3)	8 (3.5)	
Small role	385 (49.9)	158 (69.3)	(P<0.01)*
No role	230 (29.8)	62 (27.2)	
- Family role:			
Big role	394 (51)	95 (41.7)	
Small role	271 (35.1)	67 (29.4)	(P<0.01)*
No role	107 (13.9)	66 (28.9)	
Expectations regarding the future role			
of elderly in:			
- Political issues	389 (50.4)	133 (58.3)	
Greater than current	238 (30.8)	27 (11.8)	(P<0.01)*
Lesser than current	145 (18.8)	68 (29.8)	
Same as current			
- Country income:	590 (76.4)	93 (40.8)	
Greater than current	91 (11.8)	43 (18.9)	(P<0.01)*
Lesser than current	91 (11.8)	92 (40.4)	
Same as current			
- Community role:	372 (48.2)	80 (35.1)	
Greater than current	63 (8.2)	73 (32)	
Lesser than current	337 (43.7)	75 (32.9)	(P<0.01)*
Same as current			
- Family role:	55 (7.1)	62 (27.2)	
Greater than current	216 (28)	62 (27.2)	(P<0.01)*
Lesser than current	501 (64.9)	104 (45.6)	
Same as current			

^{*}Chi square test was done to compare between the two age groups and significant test results were found.

Regarding older people in the workplace, retirement and pension:

Factors as having unsuitable pension and tax policy, having family responsibilities, being unappreciated by senior staff and being unable adapt to modern workplaces perceived to be the main causes for stopping people aged 60 years and over from working (majority of participants

found it either very important or important to some degree). On the whole, the majority does not believe that the retirement age should be different for men and women (whether to compensate for holidays, because women tend to live longer or because women tend to be younger than their partners). However, opinion was divided as to whether the retirement age for women should be lower

to allow them to take care of family duties (52.2% agree and 47.8% disagree). Also 55.2% of all the participants believe that

the age of retirement should be above 80 years (Table 3).

Table (3): Factors affecting geriatric work regarding workplace, retirement and pension expectations

Degrees	Very important	Important to
Parameters		some degree
Work places are unsuitable for them	194 (19.4)	309 (30.9)
They are unable to adapt to modern	215 (21.5)	314 (31.4)
workplaces		
They are excluded from training	45 (4.5)	442 (44.2)
They are unappreciated by senior staff	224 (22.4)	426 (42.6)
Pension and tax policy is unsuitable for	402 (40.2)	355 (35.5)
them		
They have family responsibilities	321 (32.1)	475 (47.5)
	Agreed	
Opinions about work aspects of elderly		
females in comparison to male		
regarding retirement age:		
Lesser retirement age due to family duties	522 (52.2)	478 (47.8)
Lesser retirement age because they are	140 (14.0)	860 (86.0)
younger		
Higher retirement age to compensate for	366 (36.6)	634 (63.4)
holidays		
Higher retirement age because they live	284 (28.4)	716 (71.6)
longer		
	18 - < 60 years	> or equal 60
Opinion regarding suitable age for	N = 772	years
retirement		N = 228
55 – 60	15 (1.9)	117 (51.3)
> 60 - 80	203 (26.3)	30 (13.2)
> 80	159 (20.6)	79 (34.6)

More than half (57.5%) of the study participants share a great contribution in the financial support of their families and in helping others in health care. 23.7% greatly contribute in taking care of your children or grandchildren. Respondents

feel that the most useful contributions from government would be: flexibility at work in terms of flexible working hours (61.8%) followed by extra year paid vacation (55%) as well as financial reward (48.1%) (Table 4)

Table (4): Elderly contribution in voluntary work and support that can be provided to them (asked to 60 years old and above participants only)

Degrees	Great	Small	No
Parameters			
extent of sharing as a working population	604 (60.4)	307 (30.7)	89 (8.9)
extent of sharing as good customers in	670 (67.0)	289 (28.9)	41 (4.1)
buying			
extent of sharing as volunteers	275 (27.5)	480 (48.0)	245(24.5)
extent of sharing in supporting your	575 (57.5)	299 (29.9)	126 (12.6)
families financially			
extent of sharing as care givers to your	161 (16.1)	406 (40.6)	433 (43.3)
families			
extent of sharing in taking care of your	237 (23.7)	593 (59.3)	170 (17.0)
children or grandchildren			
How can elderly caregivers be			
rewarded:			
flexible working hours	618 (61.8)		
extra yearly paid vacation	550 (55.0)		
financial reward	481 (48.1)		
be provided free training for the service	465 (46.5)		
they provide on geriatric care			

The majority feels that their country is "age-friendly". Yet they believe that many areas need improvement to ensure active aging. Young participants (66.2% them) believe that roads needs improvement be followed to by transportation and public places (56.7% respectively) and 55.6% however participants (60 years and above) believe that public and commercial buildings are the most pressing areas that need

The role of different improvement. organizations in facing increased geriatrics. The institutions believed to have the most positive role in tackling the challenges of the ageing population are older people's organizations and religious organizations (33%) followed by the media (22%) however the government, the non-governmental unions and the organizations are the least (Table 5).

Table (5): Current role of different sectors for helping in achieving active aging and needed improvements

Degrees	Positive role to	Negative role	Very	No role
Role of:	some extent	to some extent	negative role	
Governments is:	134 (13.4)	361 (36.1)	326 (32.6)	179 (17.9)
Companies is:	164 (16.4)	388 (38.8)	287 (28.7)	161 (16.1)
Unions is:	105 (10.5)	414 (41.4)	230 (23.0)	251 (25.1)
Media is:	221 (22.1)	485 (48.5)	200 (20.0)	94 (9.4)
Non-	29 (2.9)	110 (11.0)	368 (36.8)	116 (11.6)
governmental				
organizations is:				
Religious	331 (33.1)	387 (38.7)	264 (26.4)	18 (1.8)
institutes is:				

On comparing between the opinions of elderly and younger age populations as regards several aspects of geriatric life, it was found that both groups agree that they are more experienced, can deal with modern technology, have the ability to deal with others and to find solutions.

Yet statistical significant difference was found between both groups regarding capability to depend on elderly, that they are broad minded, have the ability of coping with different cultures, are more productive, deal with work stress in a better way and are more creative so overall, elderly are positive in their self-perception, Where participants less than 60 years do not agree with the previously mentioned variable especially regarding capabilities to cope with different environment (60.9%) of them disagree with this (Table 6).

Table (6): Comparison between opinion of elderly and those younger in age as regards several aspects of geriatrics life: (60 years as a cut of points is used as it is the age of retirement in Egypt)

Degrees	Less than 60 years	60 and above years old	Chi	P	
Parameters	old	-	square	value	
One can deper	nd on elderly				
Yes	226 (29.3)	181 (79.4)	1,831	0.001	
no	546 (70.7)	47 (20.6)			
Elderly are de	cision makers				
Yes	369 (47.8)	143 (62.7)	15.68	0.001	
no	403 (52.2)	85 (37.3)			
Elderly are br	oad minded				
Yes	319 (41.3)	169 (74.1)	75.7	0.001	
no	453 (58.7)	59 (25.9)			
Elderly have t	Elderly have the ability to cope with different cultures				
Yes	302 (39.1)	134 (58.8)	27.64	0.001	
no	470 (60.9)	94 (41.2)			
Elderly are more productive					
Yes	317 (41.1)	154 (67.5)	49.54	0.001	
no	455 (58.9)	74 (32.5)			
Elderly deal w	Elderly deal with work stress in a better way				
Yes	372 (48.2)	160 (70.2)	34.18	0.001	
no	400 (51.8)	68 (29.8)			
Elderly are mo	Elderly are more creative				
Yes	352 (45.6)	126 (55.3)	6.59	0.01	
no	420 (54.4)	102 (44.7)			

DISCUSSION

The current study was conducted in Cairo governorate to elaborate the different perception of the people towards the concept of active aging with its different dimensions. About 51% of the participants felt that person is considered old at the age of 66, and stressed on the

big role played by the elderly towards their family. This came in agreement with the survey done on the European countries in 2012 (Active aging report) Conducted by TNS Opinion & Social to understand European citizens' views and attitudes towards older people. It was found that most people think that old age is considered on reaching 64 years.

However, the European research revealed that people aged 55 years and more play major role in all aspects of society not only towards their families. Workplace age discrimination was highly reported in and current study that, unappreciated by senior staff and being unable to adapt to modern workplaces are perceived to be the main obstacles stopping people aged 55 years and over from working. A survey conducted in Australia found that almost a third of Australians perceived some form of agerelated discrimination while employed or looking for work, in addition to limited promotion or training opportunities and perceptions that older people outdated skills or are too slow to learn new things (Irving, 2017). Although this should be related to the nature of work and the qualification of elderly, it was difficult to focus on the relation between those parameters and that age related discrimination.

The majority did not believe that the retirement age should be different for men and women the current study showed that a high percentage of participants thought the pension age for females should be less than 60 years so that they can look after their family duties. However, according to Egyptian law, the age of retirement must not be less than 60 years. Employer may terminate the employment contract of their employees when they reaches the age of 60, unless he was employed for a certain limited period which ends after their employees reach this age (Saleh, 2016). The retirement age in China currently is 60 for men and 55 for female civil servants and 50 for female workers council (State circular, 2016). Australia, the retirement age is 65 for both

genders and it is expected be 67 years by July 2023 (Age pension, 2014).

The participants agreed that the age of retirement should be increased by 2030. This came in agreement with European survey especially participants Denmark (58%); the Netherlands (55%), Ireland (53%), the UK (51%) and Austria (49%) are most likely to feel that it needs to increase. This opinion is supported by the study conducted in USA, 2016 that assures on the importance of delaying retirement and concluded that early retirement may be a risk factor for mortality and prolonged working life may provide survival benefits among US adults (Wu et al, 2016).

Actually, the retirement age is related to the situation of unemployment in each country and the idea of increasing the retirement age may has its disadvantage but it is better to provide some flexibility in the retirement process.

The current study found that pension policy were important and determinants of work among geriatrics and most elderly agreed on having the retirement age at about 60 years old which reflects the need to have improved labor system that encourages elderly to continue work because this may prove to help them to pass through a healthy aging as physical/ mental activity and participation are required for better health. Encouraging and enabling people to continue working after their normal retirement age will increase gross domestic product and will help in decreasing the demand for public support in later life. However, on the other hand, pension replacement rates are usually low, and extra income is needed to

ensure the sustainability of one's lifestyle (*Active Aging*, 2012).

In the current study, the role of elderly was considered to be small overall in political, income, community and family by both groups (below and above 60 years). This agrees with the finding of another work where it was found that there is a mismatch between increased elderly proportion of in the total population and their role community. It is recommended to rebuild inclusive munities in which elderly are treated with respect. Elderly have been considered mainly as receivers of help, as those in need. However, many recent studies have looked consider older people as a "resource", providers, contributors, and givers. Hence, their contribution is now recognized on different levels: at a societal level as workers and GDP contributors as active members in their community; and at a micro level as a pivotal part of intergenerational solidarity, especially as care providers within families (Vidovićová et al, 2015). So, working grandparents who are also looking for their partner or grandchild is of great importance, and not at all a marginal role in ageing communities.

On studying the factors that need improvement in the community so as to facilitate active aging, it was found that infra-structure (roads. transportation facilities, commercial buildings) need improvement. Moreover, participation of governments, companies and governmental organizations (NGOs) is required to help in reconstructing the community facilities to be geriatrics friendly. While factors that could facilitate the role of elderly in the future are the perceptions of most study participants that the role of elderly is expected to be greater than current in political issues, country income and community role.

Several factors were proved to enhance active aging. , the elderly with a high active ageing level in that study spent in time leisure and social more participation than those in the moderate and low active aging groups. In addition to this, elderly people at the higher active ageing level spent more of their time outdoors with than those in lower groups. This finding supports the fact that active ageing relates to engagement in leisure and social participation (Punyakaew et al 2019).

In addition, it was found that elderly people at the high active ageing level do not only spent most of their time on leisure activities but also engage in social participation. Social participation activities include engagement with others as in clubs for elderly, activities in schools for elderly, religious activities, and cultural events in the community.

Aging is not only a population phenomenon but also an individual reality and experience. It is stated that while a 25% of the ways individuals age are accounted by genetics, 75% are due to environmental conditions, including those behavioral events who select external conditions (*Kirkwood*, 2005).

CONCLUSION AND RECOMMENDATIONS

The study revealed the awareness of the participants towards the increased in geriatrics and pointed out factors that can be improved to facilitate active aging the most important of which is flexibility at work and financial rewards for elderly. A multi-sectorial approach is needed to enhance active aging, not only at the governmental level but also community participation as well as NGOs should cooperate together to tackle the challenges faced also due attention must be given to institutions as older people's organizations and religious organizations that have a positive role in tackling the challenges of aging in population.

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ميسرات وعوائق الشيخوخة النشطة بين المصريين: دراسة مجتمعية في محافظة القاهرة، مصر

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خلفية البحث: يمكن تحقيق الشيخوخة النشطة عندما يكون الأفراد خاليين من الأمراض، ويتمتعون بقدرات عقلية ولياقة بدنية متميزة مع القدرة على التعامل بنشاط مع الآخرين. وبالرغم من ذلك فإن معظم الدول النامية ليس لديها سياسات شاملة في مجال الشيخوخة، ويوجد أيضا التحدى الأكبر الذي يواجه تلك الدول مثل العبء المرزوج للمرض، وزيادة خطر الإعاقة، وتأنيث الشيخوخة. كل ذلك يؤكد على أهمية تعزيز وتأصيل مفهوم الشيخوخة النشطة بين أفراد المجتمع.

الهدف من البحث: بيان مدى إدراك المصربين وإتجاهاتهم تجاه كبار السن، ومساهمة كبار السن في شتى مجالات العمل و الأعمال الإجتماعية، وتحديد أهم الإجراءات المطلوبة لضمان شيخوخة نشطة للمواطنين المصربين.

الأشخاص وطرق البحث: أجريت دراسة مجتمعية على 1000 مشارك من حي شرق بمحافظة القاهرة والذي تم اختيارهم عشوائيا ضمن أربع مناطق بمحافظة القاهرة. وقد تضمنت الدراسة كلا الجنسين متضمنة جميع الفئات العمرية فوق 18 سنة مقسمة إلى مجموعتين: أقل من 60 عاما، والمجموعه الأخرى 60 عاما فأكثر. وقد تم جمع البيانات باستخدام إستبيان المقابلة، والذي تم اعتماده من الاستبيان الخاص بالشيخوخة النشطة وترجمت إلى اللغة العربية وتطبيعه بما يتوافق مع المجتمع المصرى.

النتائج: أظهرت النتائج ان غالبية المشاركين يشعرون بأن الشخص يعتبر مسنًا عند بلوغ سن 60 عامًا، وأكد 51% من المشاركين الأقل من 60 عامًا على الدور الهام الذي يلعبه الكبار تجاه أسرهم. وقد أكد الجميع بأن وجود التمييز على أساس السن في مكان العمل بالإضافة إلى صعوبة التكييف مع التكنولوجيا الحديثة في

العمل تعد العقبة الرئيسية التي تحول دون عمل الأشخاص الذين تتراوح أعمار هم بين 55 عامًا وأكثر للعمل.

الاستنتاج: يجب المرونة في العمل والمكافآت المالية للمسنين، كما يجب إيلاء المزيد من الاهتمام للمؤسسات مثل منظمات كبار السن والدينية، والمنظمات التي لها دور إيجابي في مواجهة تحديات الشيخوخة.