

WELLNESS AND ACTIVE AGEING AMONG OLDER ADULTS (65+): CASE IN ALBANIA

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Abstract. Albania's demographic and social landscape is increasingly shaped by the growing proportion of individuals aged 65 years and over. As life expectancy rises and demographic ageing becomes more pronounced, older adults represent an increasingly important population group that requires enhanced social, health and community-based support. Nevertheless, many older people in Albania continue to face challenges related to mental well-being, social isolation, loneliness, limited access to organized activities, and a lack of sustainable wellness initiatives tailored to their needs. This study examines demographic ageing trends and selected indicators of wellness and active ageing among older adults in Albania. The analysis is based on Population and Housing Census data from 2001, 2011 and 2023, complemented by Labour Force Survey data and social inclusion indicators. A descriptive demographic trend analysis and linear trend regression models are used to assess changes in population structure and labour market participation among individuals aged 65 years and over.

The findings reveal a substantial increase in the older population, accompanied by important challenges related to health conditions, disability, poverty risk, and social exclusion. At the same time, improvements in educational attainment and increased labor force participation among some groups of older adults indicate opportunities to promote active ageing. The results highlight the multidimensional nature of wellness in later life, emphasizing that active ageing extends beyond healthcare to include social participation, economic security, community engagement, dignity and independence. The study underscores the importance of developing accessible, community-based initiatives that support healthy, active ageing. The findings provide evidence that may inform the design of policies to improve the well-being and quality of life of older adults in Albania.

Keywords: active ageing, wellness, older adults, demographic ageing, wellbeing, Albania

Introduction

Population ageing is one of the most impactful demographic transformations of the 21st century, with significant impacts on health, social, and economic systems globally. According to the World Health Organization, the number of people aged 60 and over is expected to double by 2050, reaching more than 2 billion globally. This demographic change calls for a reevaluation of how societies address ageing issues and how they further improve the quality of life for older adults.

The concept of *wellness* has become more important. Wellness lies beyond mere absence of disease and encompasses physical, mental, and social well-being. It is a concept that includes a healthy lifestyle, physical activity, nutrition, emotional stability, and social relationships. Among older adults, wellness is associated with maintaining functional ability, independence, and a high quality of life. Similar to the concept of wellness is *active ageing*, also promoted by the World Health Organization. Active ageing is the process of maximizing opportunities for health and security to improve the quality of life as people age. This framework highlights that older adults should not be seen only as passive recipients of care, but as active contributors to their families, communities, and society.

The importance of population ageing brings both challenges and opportunities worldwide. On the one hand, increased life expectancy shows a major achievement of human development. On the other hand, it is connected to a higher prevalence of chronic diseases, increased demand for long-term care, and adds more pressure on social welfare systems. Encouraging wellness and active ageing is crucial to reducing the burden on healthcare systems and improving the general well-being of older populations. In developing countries like Albania, these gaps are often pronounced as a result of ongoing socio-economic transitions, migration, and changes in family structures. With that said, there is more to be done in exploring the experiences of older adults regarding wellness and active ageing. Against this background, the present study aims to examine demographic ageing trends and selected indicators of wellness and active ageing among individuals aged 65 years and over in Albania. Using secondary statistical sources and descriptive-analytical methods, the study seeks to provide a comprehensive overview of the demographic, social, and economic conditions affecting older adults within the Albanian context. This will contribute to a better understanding of ageing within the Albanian context.

Albania, like many other nations, is experiencing demographic change among its 65+ population, reflected in a steady increase in the proportion of older adults. Declining fertility rates are a major contributing factor to this demographic change, including other factors such as increased life expectancy and significant migration patterns, especially among younger generations. As a result, the ageing population in Albania is becoming more visible, raising significant concerns for social and health systems that are still adapting to these changes. The increased number of older adults is associated with many socioeconomic challenges. Many older people have limited financial resources, which may affect their access to healthcare and their ability to maintain a high standard of living. From a social perspective, changes in traditional family structures, partly due to migration effects, have led to increased risks of isolation and reduced social support for older adults. It has become increasingly important to understand how older adults perceive and experience wellness and active ageing. The policies and programs tend to focus more on structural challenges, and less attention is paid to the subjective perspectives and experiences of older individuals. For this reason, this study focuses on descriptive trends to examine both the structural ageing of the population and the labour-market participation of older adults over time, as well as an exploration of the perceptions and experiences of adults aged 65 and over in Albania on wellness and active ageing. Using a descriptive approach, this research aims to provide insightful evidence on how older adults maintain active lifestyles and deal with the challenges associated with ageing in the Albanian context.

Literature review

1. The concept of wellness

The concept of wellness has turned into a comprehensive approach to health, not limited to the absence of illness. It encompasses a holistic understanding of well-being, integrating various aspects of an individual's life (Travis, Ryan, 2004). Scholars generally agree that wellness includes several interrelated dimensions, particularly physical, psychological, social, and spiritual well-being (Hettler, 1980).

The physical dimension of wellness refers to maintaining a healthy body through regular physical activity, proper nutrition, and disease prevention. Among older adults, physical well-being is closely linked to functional ability and independence in daily living (Rowe, Kahn, 1997).

The psychological dimension includes emotional well-being, cognitive functioning, and the ability to cope with stress. Maintaining mental health is crucial in older age to prevent depression, anxiety, and cognitive decline (Keyes, 2002).

The social dimension emphasizes interpersonal relationships, social networks, and community participation. Strong social ties are associated with improved life satisfaction and reduced loneliness among older adults (Berkman et al., 2000).

The spiritual dimension relates to meaning, purpose in life, and personal values. It plays an important role in helping individuals cope with ageing, loss, and existential concerns (Fisher, 2011). Several theoretical models have been developed to conceptualize wellness. One of the most influential is Hettler's Six-Dimensional Model of Wellness, which highlights the integration of multiple life domains and the importance of balance among them (Hettler, 1980).

2. Active ageing

The concept of active ageing has gained relevance in the context of global demographic changes. According to the World Health Organization, active ageing is defined as "the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age" (WHO, 2002). Given that only three census observations are available, the study applies a descriptive demographic trend approach rather than a complex time-series model. This approach is consistent with population projection methods that use trend extrapolation of population totals and age-group proportions. (U.S. Census Bureau, 2014).

This framework is based on three key pillars. The first is health, which includes access to healthcare services, disease prevention, and health promotion. Maintaining good health enables older adults to remain independent and active (WHO, 2002).

The second pillar is social participation, referring to continued involvement in the labour force, social, economic, and cultural activities. Active engagement fosters a sense of belonging and purpose (Walker, 2002).

The third pillar is security, which includes access to income, housing, and social protection. Ensuring security reduces vulnerability and enhances well-being among older populations (WHO, 2002).

This approach recognizes older adults as active contributors to society rather than passive recipients of care, promoting empowerment, autonomy, and social participation instead of dependency.

3. Previous studies

A considerable amount of international research has studied wellness and active ageing among older adults. Studies in Europe and North America have shown that physical activity, strong social networks and access to healthcare significantly contribute to successful ageing (Rowe, Kahn, 1997; Walker, 2002).

High-quality studies, in particular, have demonstrated that older adults value independence, social connectedness, and a sense of purpose (Bowling, Dieppe, 2005).

A very close match to our employment data for this age group is the relevant study from Malaysia, which uses time-series regression (Ismail et al., 2026).

However, despite growing global interest, there is a lack of research focusing on Albania. Existing studies mostly focus on economic conditions or healthcare services, rather than the lived experiences and personal perspectives of older adults.

This lack of studies stresses the need to conduct research to further understand how older individuals in Albania see and experience wellness and active ageing. Such approaches provide detailed information regarding cultural, social, and individual factors that play a key role in ageing.

Despite the growing international literature on active ageing, empirical evidence from Albania remains limited. Existing studies primarily focus on demographic change, pension systems, and healthcare provision, while less attention has been devoted to broader dimensions of wellness, social participation, and quality of life among older adults. Consequently, there is a need for research that integrates demographic, social, and economic perspectives to better understand the opportunities and challenges of ageing in Albania.

Methodology

The study adopts a descriptive-analytical approach using secondary data sources and existing academic literature. Quantitative demographic indicators are combined with conceptual perspectives from the wellness and active ageing literature to provide a comprehensive understanding of the ageing process in Albania. The research relies mostly on secondary data sources and existing academic literature, rather than on primary data collected through interviews, surveys, etc. The study is structured and organized to include both the quantitative dimensions of population ageing, such as size, structure, and growth of the older population, and the qualitative insights from existing literature regarding wellness and active ageing. This combination of the different perspectives helps this study to provide as accurate an understanding as possible of how demographic shifts intersect with social and economic factors affecting older adults in Albania.

1. Data sources

The study is based on several reliable secondary sources, including:

1. Population and Housing Census data from INSTAT (2001, 2011, 2023), Labour Force Survey data (2012–2024), SILC data (2023–2024) and Eurostat data. These data provide detailed information on the absolute numbers, proportions, and characteristics of older adults in Albania, which enable a clear understanding of long-term demographic trends.
2. Several national and international reports from institutions worldwide on ageing and health. These include policy papers and statistical analyses of health, social support, and active ageing programs. This offers more contextual information that complements the census data.
3. Academic articles and books on wellness, active ageing, and older populations. These data sources are used to provide definitions and insights into the wellness dimensions (physical, psychological, social, and spiritual) and supporting active engagement and inclusion among older adults.

These sources give thorough information on the size, structure, and trends of the older population in Albania. Additionally, it provides theoretical perspectives on well-being and active participation in later life.

2. Method of analysis

The analysis is mostly descriptive, providing detailed illustrations of demographic trends and patterns. Specifically, the study focuses on:

1. Summarizing key demographic indicators. These indicators ensure an overview of the ageing population and its dynamic structure.

2. Highlighting changes and trends over time. By examining Population and Housing Census data from 2001, 2011, and 2023, the study identifies growth patterns, changes in population structure, and the rate of population aging. This perspective enables the identification of long-term trends and challenges related to population ageing in Albania.
3. Analyzing employment time series data on 65-year-olds over the study shows whether employment among older adults is increasing or decreasing over time.
4. Interpreting wellness and active ageing patterns. The research observed demographic trends in broader frameworks, indicating how psychological and physical health, social engagement, and opportunities for active participation may be impacted by the increase in the older population.

Demographic analysis of adults aged 65+

This chapter provides a descriptive analysis of Albania's population aged 65 years and older, using data from the Population and Housing Census (2001, 2011, 2023) and other secondary sources. The analysis focuses on this age group and aims to organize the information, highlighting patterns for wellness and active ageing.

1. Population growth and gender distribution

Significant demographic changes have impacted Albania over the past decades, characterized by rapid population aging. Like many other European nations, declining fertility rates, increased life expectancy, and high levels of emigration have contributed to this process, with juveniles being mostly affected. As a result, the elderly population has increased significantly, changing the country's demographic structure.

Data from Population and Housing Censuses indicate an increase in the share of individuals aged 65 and over. This trend shows Albania's transition from a relatively young population to an ageing society over a short period of time. Consequently, these changes play a key role in social protection systems, healthcare services, and well-being among older adults.

Because the census time series is only three years (2001–2011–2023), a descriptive trend model is used to show how the population aged 65+ has grown over time. The simplest and most robust model for cases with only three observations is the compound annual growth rate model. The compound annual growth rate allows the study to compare the pace of population ageing between the intercensal periods 2001–2011 and 2011–2023:

$$r = \left(\frac{P_{t2}}{P_{t1}} \right)^{1/n} - 1$$

where:

P_{t1} = population aged 65+ in the first census year

P_{t2} = population aged 65+ in the later census year

n = number of years between censuses

r = average annual growth rate

Table 1. Compound annual growth rate age 65+ between 2001 and 2023

Period	Absolute increase	Total percentage increase	Average annual growth
2001–2011	+86,222	37.3	3.22% per year
2011–2023	+155,519	49.0	3.38% per year
2001–2023	+241,741	104.5	3.30% per year

Figure 1 demonstrates an increase in the proportion of older adults over time. In 20 years, the percentage of individuals aged 65 and above has more than doubled (Table 1).

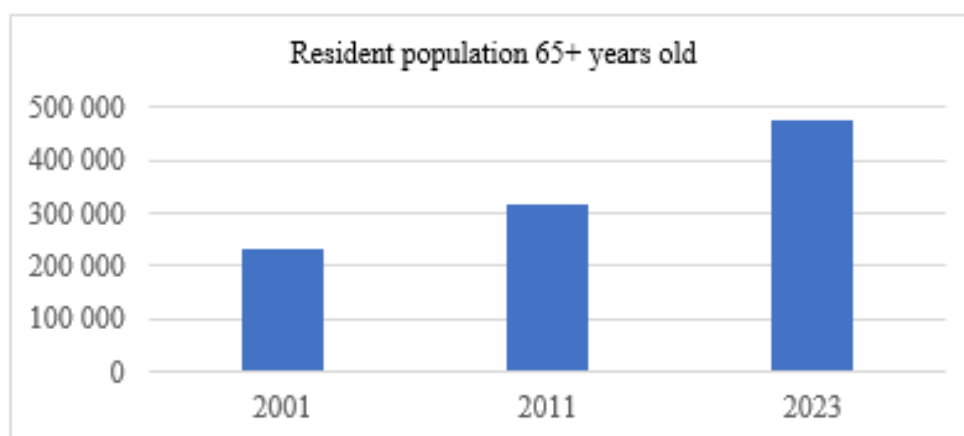


Fig. 1. Resident population 65+ years old 2001–2023 in Albania
Source: *Population and Housing Census 2001, 2011, and 2023 (INSTAT)*

An aging population increases the demand for healthcare services, social inclusion, and policies that support active living. At the same time, it raises concerns regarding social isolation, economic vulnerability, and access to adequate care. Therefore, understanding demographic ageing is crucial for analyzing the conditions that support the well-being and active participation of older adults in Albania.

Table 2. Resident population by citizenship type and sex (in percentage)
Source: *Population and Housing Census 2023 (INSTAT)*

Age - group	Citizenship type								
	Total			Albanian			Foreign and stateless		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
65+	19.7	19.2	20.2	19.7	19.3	20.2	12.8	14.1	11.2

The data in Table 2 show that 19.7% of the total population in Albania is aged 65 and over, with a higher proportion among females (20.2%) compared to males (19.2%). A further examination of citizenship status reveals that the ageing process is primarily driven by Albanian citizens, who represent nearly the entire older population (19.7%). In contrast, the proportion of individuals aged 65+ among foreign and stateless populations is significantly lower (12.8%). This dominance of Albanian citizens in the age group 65+ suggests that national policies and services should primarily target this group.

Table 3. Resident population by urban and rural area and sex
Source: *Population and Housing Census 2011 (INSTAT)*

Population	Urban and rural areas and sex								
	Total			Urban			Rural		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total	2,800,138	1,403,059	1,397,079	1,498,508	742,671	755,837	1,301,630	660,388	641,242
65+	317,585	151,692	165,893	171,404	80,944	90,460	146,181	70,748	75,433

Most adults aged 65+ live in urban areas, reflecting migration patterns and access to healthcare. Rural older adults face higher social isolation and reduced access to services. This situation requires interventions in order to reduce isolation and encourage engagement. The importance of gender sensitive programs is demonstrated by the higher proportion of women, addressing loneliness, health care needs, and social participation.

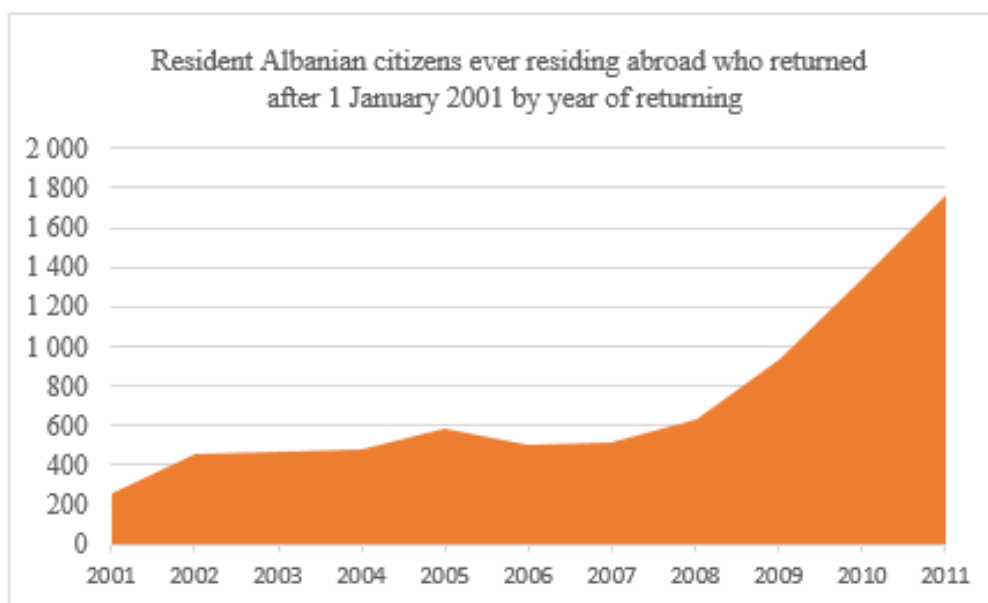


Fig. 2. Resident Albanian citizens ever resided abroad and returned after 1 January 2001, by the year of returning
Source: *Population and Housing Census 2011 (INSTAT)*

The return of Albanian citizens aged 65 and above shows a clear increasing trend between 2001 and 2011. In 2001, the number of senior returnees was relatively low, around 280, but by 2011, these figures had risen dramatically, reaching around 1800.

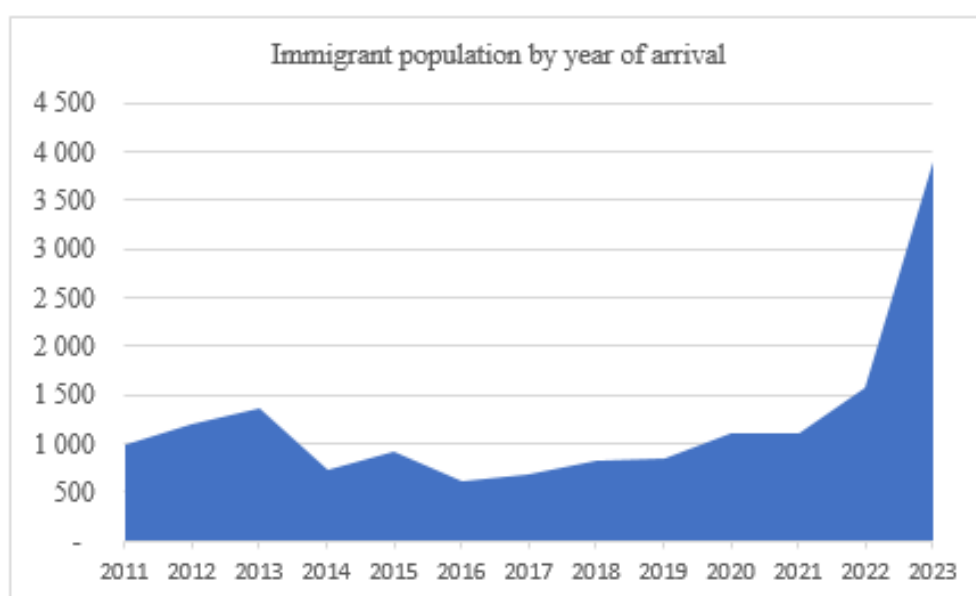


Fig. 3. Immigrant population by year of arrival, in Albania
Source: *Population and Housing Census 2023 (INSTAT)*

Over the period 2011–2023, immigration levels fluctuated year to year, with a notable increase in 2022 and especially in 2023. However, despite this rise, the overall number of immigrants remains relatively low compared to the total population. This indicated that it has minimal impact on the total size of the older population in Albania. Since immigration does not affect the 65+ population, policies for wellness and active ageing must primarily focus on existing older residents. However, a relatively younger population (due to migration) may help reduce pressure on social and economic support systems, indirectly benefiting older adults. The limited role of migration underscores the need for robust national strategies to support healthy and active ageing.

2. Education, literacy, and activity status

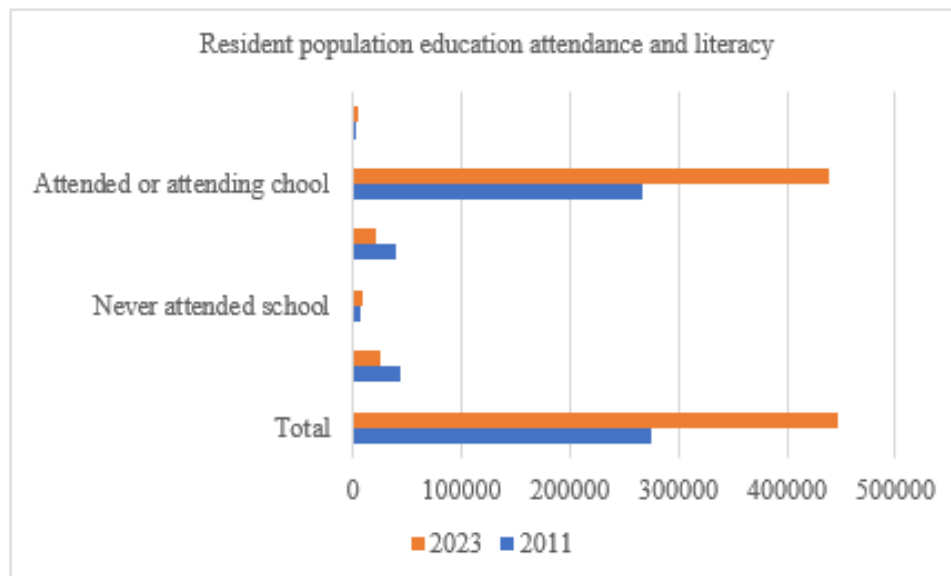


Fig. 4. Resident population, education, attendance, and literacy in 2011 and 2023

Source: *Population and Housing Census 2011, 2023 (INSTAT)*

The data show a significant improvement in literacy levels among adults aged 65+ between 2011 and 2023. The number of literate older adults increased substantially, from 274,587 in 2011 to 447,546 in 2023. At the same time, the number of illiterate individuals declined sharply, from 42,998 to 25,558.

A closer look at educational background reveals that a large proportion of illiterate older adults belong to the group that never attended school, although this number decreased significantly (from 39,875 to 20,489). Also, the majority of literate individuals aged 65+ have attended school, increasing from 267,849 in 2011 to 439,278 in 2023. These trends indicate that younger cohorts entering the 65+ group are more educated than previous generations. The decline in illiteracy reduces barriers to participation in digital services, healthcare systems, and learning opportunities. However, some older adults, especially those who never attended school, may still face social exclusion and limited access to services.



Fig. 5. People having a long-standing illness or health problem, 2022

Source: *Eurostat*

In Albania (2022), 58.6% of individuals aged 65 years and over report having a long-standing illness or health problem. Albania's level is close to regional norms (e.g., North Macedonia and Greece), but it is lower than countries like Serbia and Türkiye. If we compare it to another border country like Italy, it is much higher,

which may reflect differences in healthcare systems or lifestyle patterns. According to the World Health Organization, ageing populations are increasingly characterized by a high prevalence of chronic conditions coexisting with maintained levels of functionality. In this context, the Albanian figure of 58.6% reflects an expected epidemiological profile of later life. Importantly, the presence of long-standing illness highlights the need to distinguish between disease prevalence and functional health status, including mobility, cognitive capacity, and independence in activities of daily living.

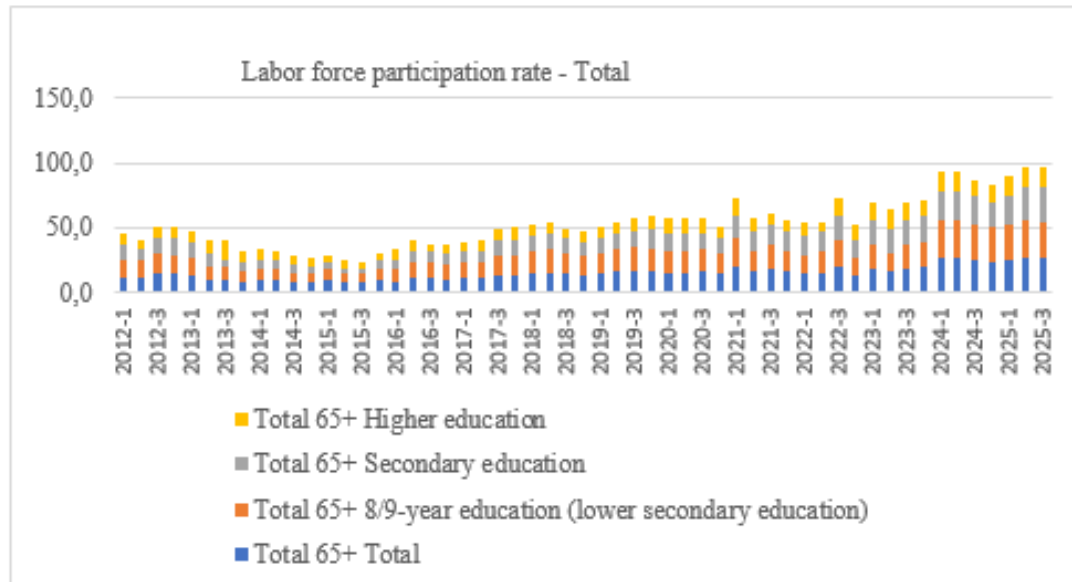


Fig. 6. Labor force participation rate for 65+ years old, 2012–2025

Source: Labour Force Survey, INSTAT

Using the liner time-trend model the results show a positive, statistically significant trend in the labour force participation rate of the population aged 65 years and above, estimated at approximately 1.07 percentage points per year. The coefficient is statistically significant ($p < 0.001$), and the model explains about 68.9% of the variation in the quarterly Labour force participation rate time series data ($R^2 = 0.689$). Over the full period, the observed Labour force participation rate increased from 12.0 % in 2012 Q1 to 26.5% in 2025 Q3 (Papke, Wooldridge, 1996; National Institute of Standards and Technology, 2012).

By education level, adults with lower secondary education had the highest participation, rising from 6% in 2012 to nearly 30% in 2025. Those with secondary education increased from 4 to 26.7%, while higher-educated older adults remained the least active (4.6–15%), despite the upward trend.

The model used:

$$LFPR_t = \alpha + \beta \text{Time}_t + \varepsilon_t$$

where:

LFPR = quarterly labour force participation rate for age 65+

Time = quarterly index from 1 to 55

β = average quarterly change

The model estimates only a time trend. It does not identify the causal factors behind the increase in labour force participation among older adults. The analysis suggests that economic and financial needs may partly explain higher participation among less-educated adults, whereas more educated individuals may retire earlier. They can also participate more in non-labor activities. These trends highlight the different dimensions of active ageing that coexist in Albania: economic engagement as a necessity for some people and a personal choice for others.

The same model was used for the Unemployment rate time series data. The result shows a very small positive trend, not statistically significant, approximately 0.041 percentage points per year. The p-value was 0.425, and the R^2 was 0.012. Therefore, the trend is not statistically significant, and the linear model explains only a small share of the variation in the unemployment rate:

$$URate_t = \alpha + \beta \text{Time}_t + \varepsilon_t$$

where:

URate = quarterly unemployment rate for people aged 65+

Time = quarterly index from 1 to 55

β = average quarterly change

Annual trend = $\beta \times 4$

Linear regression summary results are shown in the table below:

Table 4. Linear Regression of unemployment rate 65+ by gender

Age group	N	Annual trend	p-value	R ²
Total 65+	55	0.041	0.425	0.012
Men 65+	55	0.049	0.465	0.010
Women 65+	55	0.067	0.318	0.019



Fig. 7. Unemployment rate by gender and quarter for the time period 2012–2025

Source: Labour Force Survey, INSTAT

Analyzing Figure 7, the results show that across the entire period, unemployment for older adults remains remarkably low, with most quarterly values under 2% from 2012 to 2016. This low baseline aligns with the predominance of retirement in this age group, where most individuals are no longer actively participating in the labour force. Men exhibit consistently higher unemployment rates than women. For instance, the 10.6% in 2022-1 is exclusively observed in men, while female rates remain significantly lower at the same time. This pattern reflects greater labor-market participation among older men, exposing them to fluctuations in employment opportunities. Men's higher volatility in unemployment rates during crises underscores their greater economic exposure, despite their overall low participation in the 65+ cohort. Women maintain very low unemployment rates throughout most of the period, often registering 0–0.6% per quarter prior to 2020.

3. Health and disability

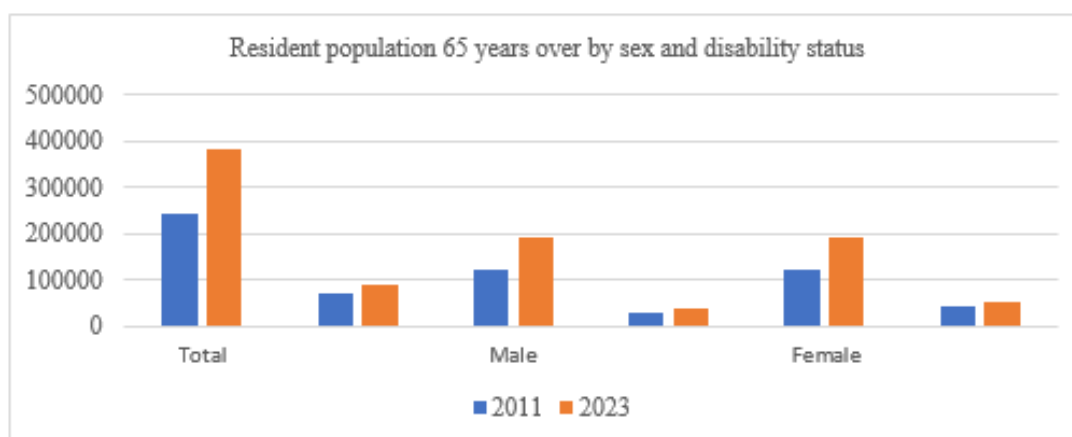


Fig. 8. Resident population 65 years and over by sex and disability status for 2011 and 2023

Source: Population and Housing Census 2011 and 2023 (INSTAT)

The data indicate that a significant number of older adults experience some form of disability. In both years, women report a considerable proportion of disabilities compared to men. This shows higher longevity in women and greater chances of experiencing disability at older ages. The presence of disability does not exclude active ageing, but it emphasizes the need to adapt programs and implement inclusive policies.

4. Socioeconomic status and poverty risk

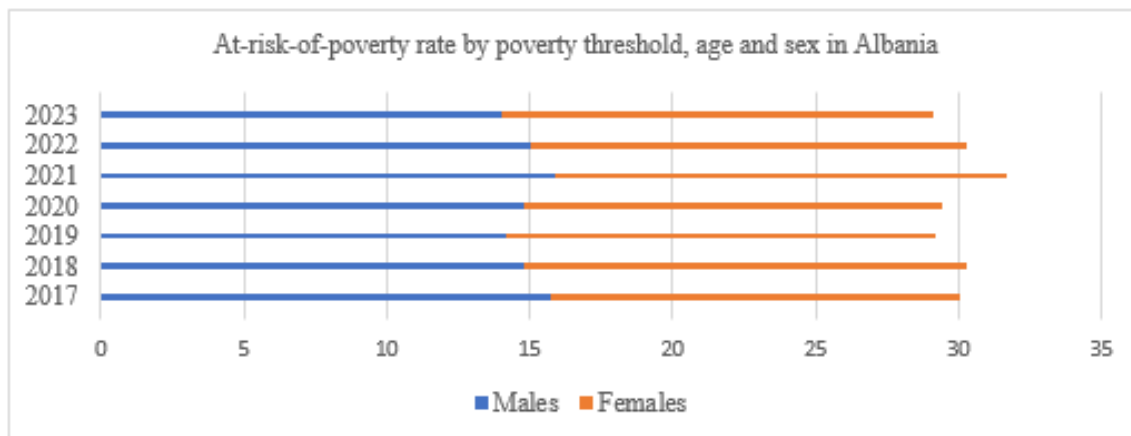


Fig. 9. At-risk-of-poverty rate by poverty threshold, age, and sex 2017–2023

Source: Eurostat

For the time period 2017 to 2023, the at-risk-of-poverty rate among older men remains stable, fluctuating between 14.0% and 15.9%. A slight decline is observed toward the end of the period, with the rate reaching 14.0% in 2023. It may suggest improvements in income security or pension among older men. In contrast, the trend among older women is characterized by higher and more stable levels of poverty risk, generally ranging between 14.3% and 15.8%. Overall, the at-risk-of-poverty rate among older adults in Albania is moderate. The stability of these rates suggests that existing social protection mechanisms, while preventing extreme poverty, may be insufficient to significantly reduce vulnerability in later life.

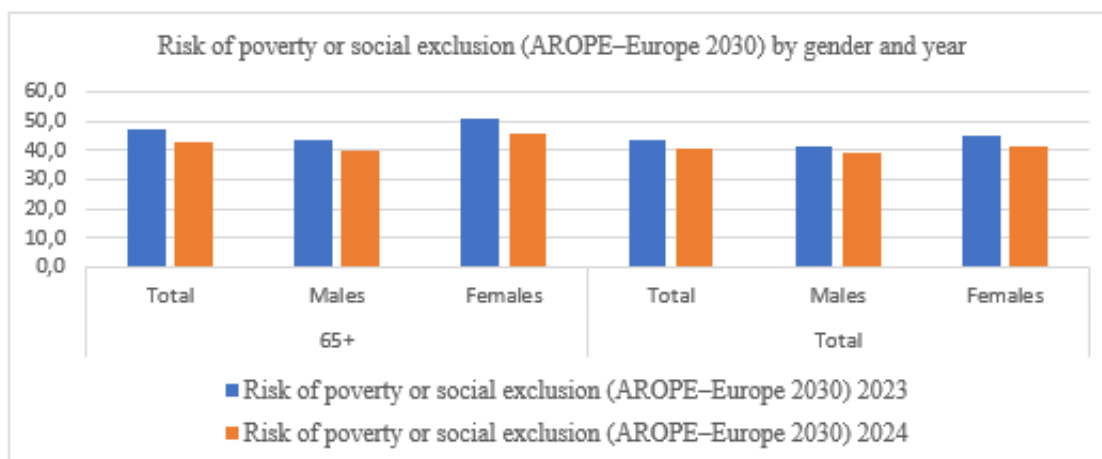


Fig. 10. Risk of poverty or social exclusion (AROPE–Europe 2030) by gender 2023 and 2024

Source: INSTAT

For individuals aged 65 and over, the AROPE rate in 2023 was 47.2%, improving to 42.8% in 2024, indicating that even the level of at-risk poverty or social exclusion is improving, although work remains to be done to address social policies. This prevalence is significantly higher than the general population rate of 40.5% (in 2024), reflecting the increased economic vulnerability characteristic of later life. The data demonstrate gender disparities. In 2023, older women had an AROPE rate of 50.7%, significantly higher than their male counterparts at 43.5%. In 2024, these rates decreased to 45.4% for women and 40.0% for men, maintaining a stable, improving gender gap.

These findings are consistent with international evidence suggesting that older women are more vulnerable to poverty and social exclusion due to lower lifetime earnings, pension inequalities, and longer life expectancy.

Discussion and implications

In Albania, the demographic analysis shows rapid population aging, with the proportion of adults aged 65 and over doubling over two decades. This trend is mostly explained by low fertility, increased life expectancy, and high youth emigration. There is a visible dominance of Albanian citizens among older adults and a higher share of women in the 65+ population.

Older adults live mostly in urban areas, while rural residents face greater isolation and limited access to services. It highlights the need for geographically oriented interventions. Between 2001 and 2011, return migration contributed significantly to Albania's older population. But immigration since 2011 has remained modest, indicating that policies for wellness and active ageing must primarily focus on resident older adults.

Educational attainment among older adults has improved significantly, with declining illiteracy and higher school attendance among younger adults. It facilitates access to healthcare, digital services, and lifelong learning. However, a segment of less-educated adults remains vulnerable to social exclusion. Health indicators show that over half of adults 65+ experience long-standing illnesses, and the majority of them face disabilities, particularly among women. It underscores the importance of inclusive health and social programs.

Overall, labor force participation remains low, but there are disparities by education and gender. Less-educated older adults participate more out of necessity, and men experience greater long-term unemployment volatility. According to AROPE metrics, one in two adults 65+ is at risk of poverty or social exclusion. The socio-economic analysis reveals moderate poverty risk, especially among older women in Albania.

These findings indicate that active and healthy ageing in Albania requires multidimensional policies on healthcare accessibility, promoting social inclusion and supporting gender labor participation. There is a crucial need for interventions in rural areas and for the disabled in order to reduce poverty and vulnerability. Moreover, existing older residents must be prioritized by national strategies to support sustainable community engagement and independent living. This will enable ageing populations to maintain well-being and to engage more actively in social participation.

The findings suggest that active ageing should be understood as a multidimensional process extending beyond labour market participation. While economic activity remains important for some older adults, maintaining good health, social relationships, community engagement, and access to services appears equally important for overall well-being. Therefore, policies aimed at promoting active ageing should adopt an integrated approach that combines health, social, and economic interventions.

Limitations

This study has several limitations. First, the analysis relies exclusively on secondary data sources and therefore cannot directly capture older adults' subjective experiences, perceptions, and well-being. Second, demographic trend analysis is based on a limited number of census observations, restricting the use of more advanced forecasting techniques. Third, the labour market analysis identifies statistical trends but does not establish causal relationships between demographic and socioeconomic factors. Future research could incorporate survey data and qualitative interviews to provide a deeper understanding of active ageing and wellness among older adults in Albania.

Conclusions

Albania is undergoing a significant demographic transition characterized by rapid population ageing. The results indicate that the growing proportion of adults aged 65 years and over is associated with important challenges related to health, disability, poverty risk, and social exclusion. At the same time, improvements in educational attainment and increased labor force participation among some groups of older adults offer opportunities to promote active ageing.

The study highlights that wellness in later life is influenced by multiple interconnected factors, including health status, social participation, economic security, and community engagement. Consequently, policies supporting older adults should adopt a comprehensive approach that promotes not only healthcare access but also social inclusion, lifelong learning, and active participation in community life.

Strengthening community-based services, reducing poverty risks, and expanding opportunities for social engagement will be essential for improving the well-being and quality of life of older adults in Albania.

The evidence presented in this study suggests that population ageing in Albania should not be viewed solely as a demographic challenge. Rather, it represents an opportunity to promote healthier, more inclusive and socially engaged later lives through coordinated public policies and community-based interventions.

Use of Artificial Intelligence (AI) Tools

The authors used ChatGPT (OpenAI) solely as a language and writing support tool during the preparation of this manuscript. The AI tool was used to improve grammar, readability, and the presentation of ideas. No AI tool was used to generate data, conduct analyses, interpret results, or formulate scientific conclusions. The author reviewed, edited, and takes full responsibility for all content presented in this article.

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VYRESNIO AMŽIAUS ŽMONIŲ (65+) SVEIKATINGUMAS IR AKTYVUS SENĖJIMAS ALBANIJOJE: KOKYBINIS TYRIMAS

Santrauka

Albanijos demografinę ir socialinę padėtį vis labiau lemia didėjanti 65 metų ir vyresnių asmenų dalis. Ilgėjant gyvenimo trukmei ir ryškėjant demografiniam senėjimui, vyresnio amžiaus žmonės tampa vis svarbesne gyventojų grupe, kuriai reikalinga didesnė socialinė, sveikatos priežiūros ir bendruomeninė parama. Tačiau daugelis vyresnio amžiaus žmonių Albanijoje ir toliau susiduria su įvairiais iššūkiais, susijusiais su psichine gerove, vienišumu, socialine izoliacija, ribota prieiga prie organizuotų veiklų ir tvarių sveikatingumo iniciatyvų, pritaikytų jų poreikiams, trūkumu.

Ši kokybinė studija nagrinėja dabartinę vyresnio amžiaus žmonių padėtį Albanijoje, ypatingą dėmesį skirdama iniciatyvoms, kurios skatina aktyvų senėjimą ir gerina gyvenimo kokybę. Tyrimo tikslas – geriau suprasti, kaip vyresnio amžiaus žmonės patiria senėjimą kasdieniame gyvenime, kokios paramos jie sulaukia iš šeimos, bendruomenės ir institucijų, taip pat kokios kliūtys trukdo jiems aktyviau dalyvauti socialinėse ir sveikatingumo veiklose. Ypatingas dėmesys skiriamas socialinių ryšių vaidmeniui, kuris išryškėja kaip vienas pagrindinių vyresnio amžiaus žmonių gerovės pagrindų. Ryšių su šeimos nariais, kaimynais, bendraamžiais ir vietos bendruomenės grupėmis palaikymas yra labai svarbus emocinei pusiausvyrai, savivertei ir priklausymo jausmui.

Tyrimo rezultatai taip pat pabrėžia fizinio aktyvumo, kasdienės rutinos, neformalaus socialinio bendravimo ir sąmoningumo praktikų kaip paprastų, tačiau reikšmingų elementų, galinčių prisidėti prie sveikesnio ir aktyvesnio senėjimo, svarbą. Tuo pačiu metu tyrimas nustato kelias kliūtis, ribojančias dalyvavimą sveikatingumo iniciatyvose, įskaitant informacijos stoką, ribotus finansinius išteklius, nepakankamas vietos paslaugas, sveikatos apribojimus, transporto sunkumus ir struktūruotų programų, specialiai sukurtų vyresnio amžiaus žmonėms, stoką.

Apskritai rezultatai atskleidžia daugiamatį gerovės pobūdį vėlesniame gyvenimo etape, parodydami, kad aktyvus senėjimas yra susijęs ne tik su sveikatos priežiūra, bet ir su socialine įtrauktimi, bendruomenės parama, orumu, savarankiškumu ir prasmingu kasdieniu įsitraukimu. Tyrime pabrėžiama vietinių ir prieinamų iniciatyvų plėtojimo svarba, siekiant paskatinti vyresnio amžiaus žmones išlikti socialiai, fiziškai ir emociškai aktyviais. Šis tyrimas pateikia naudingų įrodymų, kurie gali padėti formuoti politiką ir bendruomenines intervencijas, skirtas aktyviam senėjimui skatinti ir vyresnio amžiaus žmonių gerovei Albanijoje gerinti.

Reikšminiai žodžiai: aktyvus senėjimas, sveikatingumas, vyresnio amžiaus žmonės, kokybinis tyrimas, Albanija

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