

# The situation of elderly people in Poland in the time of COVID-19

## *Sytuacja ludzi starych w Polsce w dobie COVID-19*

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### KEYWORDS:

- COVID-19
- older adults
- social isolation
- loneliness

### ABSTRACT

The aim of the article was, to present the situation of old people during the COVID-19 pandemic in Poland. The article has an illustrative character and is based on the available data. Authors starting from the presentation of basic demographic and epidemiological data, discussed such aspects of functioning of the elderly as, physical activity, economic, social, cultural and educational activity, and use of Internet resources, which were transformed due to the COVID-19 pandemic. In particular, isolation and protective measures such as distance, masks, handwashing and stay-at-home policies, and restrictions on congregation, have resulted in significant changes in the daily functioning of the old and have often led to increased social isolation, marginalization and limited access to health care.

### SŁOWA KLUCZOWE:

- COVID-19
- podeszły wiek
- izolacja społeczna
- samotność

### STRESZCZENIE

Celem artykułu było, w oparciu o dostępne dane, przedstawienie sytuacji osób starych w okresie pandemii COVID-19 w Polsce. Artykuł ma charakter poglądowy. Wychodząc od przedstawienia podstawowych danych demograficznych i epidemiologicznych autorzy omówili takie aspekty funkcjonowania osób starych jak m.in. aktywność fizyczna, aktywność ekonomiczna, społeczna, kulturalna i edukacyjna, oraz korzystanie z zasobów Internetu, które z powodu pandemii COVID-19 uległy przekształceniom. W szczególności izolacja i środki ochrony takie jak: dystans, maseczki, mycie rąk i polityka pozostawania w domu oraz ograniczenia dotyczące zgromadzeń, spowodowały istotne zmiany w codziennym funkcjonowaniu ludzi starych i niejednokrotnie prowadziły do pogłębienia izolacji społecznej i marginalizacji, a także stanowiły dodatkową barierę w dostępie do opieki zdrowotnej.

### Introduction

In December 2019 first case of coronavirus infection in people was reported in Wuhan, a Chinese Hubei province.

On 11 March 2020 due to continuous increase in morbidity caused by SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus 2) COVID-19 (Coronavirus Disease 2019) pandemic was declared, the effects of which are still a problem on a global scale (1). The COVID-19 pandemic has caused a serious threat to health and life, especially for the elderly, who are more susceptible to adverse health effects and the breakdown of homeostasis during infection. In addition, in elderly persons chronic diseases coexist more often than in younger groups, which is a significant risk factor for the severe course of COVID-19, including death. The assessment of mortality caused by COVID-19 shows that the mean values of mortality rate increase with patients' age and in the following age groups: 60-69, 70-79 and 80+, they were 4%, 8.6% and 13.4%, respectively (2).

"The Report on deaths in Poland in 2020" issued by the Ministry of Health shows that in 2020 the number of deaths was 485,259, an increase by 67,112 cases

compared to the number of deaths in 2019. This rise was mainly related to the number of deaths among people over 60 years of age and accounted for 94% of the excess number of deaths compared to 2019 (3).

SARS-CoV-2 infection may be asymptomatic or manifest as abortive infection characterized by acute respiratory viral infection, however, in many cases the complications of this infection include: acute viral pneumonia leading to the development of acute respiratory distress syndrome (ARDS), acute myocardial injury or kidney, a pro-inflammatory state of hypercoagulability with thromboembolic events in various organs including the central nervous system (4).

### The situation of Polish seniors before COVID-19 pandemic

#### *Demography*

According to the data published by the Central Statistical Office in Poland (GUS) at the end of 2019 the population of Poland was 38.4 million, including over 9.7 million

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people aged 60 and above (over 25%). Compared to 2018, the number of elderly people increased by 195 thousand, i.e., by 2.1% (5).

In Poland, similarly to many European countries, progressive aging of the society can be observed. This is related, among the others, to longer life expectancy thanks to the development of science but also the changes in the family model and the persistently low birth rate. This process has been confirmed by the results of the "Population by 2050 forecast" developed by the Central Statistical Office (GUS), which indicates that despite the expected population decline of 4.5 million by the year 2050, the population of people aged 60 and above will increase to 13.7 million in the final stage of the forecast and will account for over 40% of the total population (6).

### *Social isolation*

The aging of the society is also associated with the emergence of new social phenomena, such as: feminization of old age (the majority of women in elderly population), double aging (numerous age groups of people born between the Second World War and the turn of the 1950s and 1960s enter the stage of late old age) and singularization of old age (a percentage increase of older people running households single-handedly).

According to the data of 2017 gathered by the Central Statistical Office (GUS) about 38% of people aged 75+ lived in single-person households (7).

The GUS report (2020) on "Quality of life of elderly people in Poland" indicates that seniors are most exposed to social isolation, i.e., functioning in the environment with few or no social contacts with people outside the household. The report also says that the percentage of socially isolated persons 65+ is 9.8%, and in case of people 75+ it amounts to 14.1%. In real terms, in Poland up to 1 million elderly people remain in actual social isolation. These persons function outside the social support system. The data from the report also shows that 15.4% of people 65+ did not maintain any contacts with friends, and in addition to that, 7.8% declared that they talked /met friends less often than once a year and 20.2% of the respondents met their friends no more than once a year. Thus, before the pandemic, 43.4% of persons 65+ had rare contacts or no contacts with close friends outside the family, which means that many elderly people, even before the imposed isolation resulting from the COVID-19 pandemic, lived in deep loneliness. Such limited social relations negatively affect a mental condition of elderly people as well as their health and physical condition.

### *Physical activity*

As shown in the above GUS report, 78% of people aged 65+ and 89% of people 75+ did not do any sport at all. The main recreational activity of seniors aged 65+ was walking and it was done by 57%, only 9% of people aged 65-74 devoted their time to voluntary and social activities (8). Maintenance of social relations is also linked to maintenance of professional activities in the elderly age.

### *Professional, social, cultural and educational activities*

Along with retirement, i.e., the end of professional activity, the present lifestyle of seniors changes, as well as the shape

and maintenance of intra-generational and intergenerational relations in the local community undergo a transformation. Usually, the incomes of the elderly are also reduced preventing them from taking up activities as often as before. This situation contributes to lower sense of safety and acceptance in everyday life as well as the feeling of being needed in a local community.

As shown by the results of The Survey of Health, Aging and Retirement in Europe (SHARE) study on the economic activity of people aged 50 and above, the situation between 2015 and 2017 improved and employment rates increased. The greatest increase was recorded in people aged 60-64. However, still low economic activity concerned people who lived in the countryside and had a low level of education (9).

In 2019 the economic activity rate for elderly people was 9% (in 2018 it was 14.0%), while the employment rate, similarly to the previous year, was 13.7%. The population of economically inactive seniors was 8,038,000, which accounted for 86.1% of the total population aged 60 and above. Among these people, the main and the primary reason for professional inactivity was, above all, retirement.

The second cause of professional inactivity was a disease or disability (10).

The SHARE research results also show that the involvement of elderly Poles in social work is not high. Only 5.4% of people aged 55 and above engage in community services.

The possibility to continue education in old age also affects the maintenance of social relations, social activity and the psychophysical abilities of seniors. The studies conducted before the COVID-19 pandemic in Poland confirm the low educational activity of Poles over 55, i.e., only about 5.3% in total (9).

Cultural activity, which helps to maintain relations in the local community (family, neighbors, the entire local community) also plays an important role in the life of elderly people. For many seniors, it gives the opportunity for further development, maintenance of social contacts and self-esteem. According to the data of the Central Statistical Office (GUS) published in 2019, elderly people actively participated in various types of cultural activities organized by cultural centers, recreation and cultural facilities, as well as clubs and community centers (11).

The projects financed so far made it possible to organize a meeting venue and guaranteed various forms of free time activities.

### *Health and disability*

According to "The European Union Statistics on Income and Living Conditions (EU-SILC) 2019", before the pandemic, seniors usually assessed their health as neutral (the answer "neither good nor bad" was indicated by 45.6% of the respondents) but as many as 26.5% of people in this group said that their health was either bad or very bad. Approximately 45.4% of people aged 60+ stated serious or mildly serious limitations of activities due to their health condition. Men more often than women assessed their health positively (25.6% versus 21%, respectively) (12).

Based on the results of the European Health Interview Survey (EHIS) carried out in 2019, it was found that the majority of elderly people have chronic diseases or ailments and only every 9<sup>th</sup> person declared no such problems (13). According to "Information on the situation of the elderly in 2015" report, the most common health ailment of Polish

seniors is arterial hypertension, which occurred in over half of people in this age group. Over 40% of this population report low back pain. The third most frequently mentioned health problem was osteoarthritis, which occurred in nearly 40% of the elderly as well as coronary artery disease. Diabetes mellitus (18%), urinary incontinence, thyroid disease and migraine (approximately 12% each) were ranked as other common health conditions. Elderly women were more likely than elderly men to suffer from arthrosis, thyroid disease, neck and back pain and they were also more likely to suffer from hypertension, urinary incontinence and migraine conditions. On the other hand, elderly men much more frequently had heart attack or stroke and the related complications, as well as chronic bronchitis, chronic obstructive pulmonary disease (COPD), emphysema and cirrhosis of the liver.

As shown in the above report and other studies (e.g., PolSenior study results) elderly people are characterized by concomitance of a few chronic diseases, i.e., the so-called multimorbidity. Therefore, the people in this age group require more frequent consultations with primary care physicians or various specialists, as well as many diagnostic tests and, more often than people in younger age groups, need hospital treatment and rehabilitation (14).

Along with the increase in life expectancy in the society, the risk of dependency increases, due to the difficulties in spatial orientation, memory loss, etc., which may occur with age, similarly to increased susceptibility to falls or the need for more frequent and prolonged hospital stays. Problems related to the freedom of movement and dependence on the help of others make it necessary to provide these people with well-developed care and appropriate support.

Hence, in the period before the pandemic, certain measures were taken to organize various forms of care for dependent people or temporary day care facilities.

In Poland, care for a senior is primarily the responsibility of the family and the support provided by social welfare institutions is initiated only when a family member is unable to combine care with professional, family or health problems (15).

### *Digital abilities of elderly people*

Due to the very rapid development of new technologies and their widespread use in everyday life (computers, smartphones, the Internet, mobile banking, household appliances, etc.) seniors were confronted with the need to have digital skills even before the pandemic. It turned out that their lack may constitute a barrier that hinders or even prevents active participation of elderly people in social and public life.

According to the study conducted by the Central Statistical Office in 2018 60% of people aged 65 and above have never used the Internet. In addition, as many as 82% of the seniors who had no experience with the Internet did not feel the need to use it and 71% mentioned that the lack of computer skills was an obstacle. On the other hand, 9% did not use the Internet for financial reasons (16).

However, according to Eurostat study (Aging Europe – Looking at the lives of older people in the EU-2020 edition), only every fourth elderly person (26%) uses the Internet at least once a week. This problem is even more visible among people aged 65-74, as only 10% of them are active in social networking sites (17).

The report on "The use of information and communication technologies in households" (GUS 2020) study has shown that only 3% of elderly people used the Internet to a wide or very wide extent (in more than five areas), i.e., browsing websites easily, using search engines, sending e-mails, being active on social media, doing shopping and using on-line banking or culture sites.

The average range of Internet activity was much more limited among the elderly than among the representatives of younger age groups (16).

### **Effects of COVID-19 pandemic on Polish seniors**

Following the outbreak of the COVID-19 pandemic, many countries around the world, including Poland, introduced isolation and protective measures to limit the spread of the virus, such as physical distancing, use of masks, hands washing, staying at home and reduction of socializing. As a result, dramatic changes took place in everyday life of the general population. Added to this was a high level of anxiety and fear of the unknown, i.e., an infectious disease, which in many cases is fatal and cannot be treated successfully. Many people also faced financial problems (18).

However, the extent to which the effects of the COVID-19 pandemic reported by the general population are felt in the elderly population is still not fully documented (18).

In Poland, in April 2021 the results of "The quality of life of elderly people in the first year of the COVID-19 epidemic" study were published, which was developed as part of the activities of the SeniorHub Institute of Senior Policy ([www.seniorhub.pl](http://www.seniorhub.pl)) (19). The main study was conducted using the computer-assisted telephone interviewing (CATI) technique by DRB Research. It was conducted in February /March 2021 and the study sample included 500 persons aged 60 and above.

At the same time Senior.Hub the Institute of Senior Policy conducted a study on a sample of 688 people aged 60+ using the Internet questionnaire, which concerned the digital competences of seniors using the Internet. The obtained data were compared and supplemented with CATI data for the entire population.

Based on the results of this study several basic recommendations were also formulated that can aid in developing solutions to "restore" seniors to social life after COVID-19 and contribute to improvement of their quality of life in various dimensions.

As it was found in "The report on deaths in Poland in 2020" of the Ministry of Health in 2020 there were 67,000 more deaths than in the comparable period in 2019. The majority of deaths in both the first (spring 2020) and the second wave (autumn 2020) of the COVID-19 pandemic were elderly people. This number of "excess" deaths among Polish seniors was a direct consequence of COVID-19 and it also resulted from difficult access to medical services and ineffective health care. All these obstacles were combined with a significant deterioration of the psychophysical condition of seniors due to isolation and limited physical activity, i.e., the recommendation to "stay at home" (3).

According to the data in the above report, more than half of the surveyed seniors (59.5%) stated that their mental condition was worse than before the pandemic and only 3.8% of the respondents felt better than before the pandemic.

During pandemic as many as 62.8% of the people over 60 years of age limited their physical activity, which, in this

age group, is known to pose a risk of a significant deterioration of their independence and may also greatly impede (especially seniors suffering from comorbidities) the access to health services and thus, contribute to higher mortality in this age group (19). In the group of people aged 70+ as many as 73.9% of the respondents limited physical activities. These people had already been less physically and socially active in the pre-pandemic period, and also, due to their age and coexisting diseases, they were more at risk of contracting coronavirus infection and its severe course and therefore decided to limit their time outdoors, such as going for a walk or doing shopping.

Over 53% of the surveyed seniors say that they felt tired about the restrictions related to the pandemic, such as compulsory masks, inability to participate in meetings and gatherings, difficulties related to office working hours as well as shops and service centers.

Almost half (46%) of the surveyed seniors stated that they limited their social relations during the pandemic and felt discomfort due to a smaller number of social contacts and their lower quality. In the group of people aged 60-69 as many as 52% felt that the number of maintained contacts with others decreased. In the 70+ group this figure was 39.2%, and in the 80+ group it amounted to 34.5%.

Stress has an extremely negative impact on the quality of life of the elderly, and yet, according to the presented report, 34.6% of the surveyed seniors say that they feel much more irritated and anxious compared to the time before the pandemic. The women (40.4%) react to the COVID-19 pandemic more strongly and 32.5% of the surveyed elderly men express a similar opinion.

Over 60% of the seniors indicate a limited access to health care during the COVID-19 epidemic, not only to specialist healthcare but also to primary care physicians.

On the one hand, this was associated with seniors' avoidance of visits to clinics and on the other hand, such visits were very limited due to the sanitary restrictions applied there.

Access to teleconsultations was also severely hampered by a large number of people who needed medical services at the same time. Also, the transformation of next hospital wards into the ones dedicated to patients with COVID-19 has led to a decline in the effectiveness of health services mainly used by seniors.

The study also assessed the degree of the use of the Internet and a computer (or tablet or smartphone) by the elderly and verified the possible correlation between the digital exclusion of elderly people and their subjective mental condition or the degree of loneliness.

The quantitative study has shown that 71.2% of people 60+ do not use the Internet and 28.8% of seniors do not use this tool and 7.6% use it only occasionally. Only one in five people 60+ (21.4% of seniors) uses the Internet regularly, usually every day, in a way that easily and safely allows them to meet their numerous on-line needs. Many seniors still need help when using digital technologies and searching for information. On the other hand, the pandemic has strengthened the motivation of some elderly people to communicate using the relatively new tools, such as audio-video messaging. The cited data also clearly show the important role of trainings and courses that strengthen the competences of elderly people in the use of new digital technologies. Moreover, the report stresses that the Internet and computers help seniors to function better during the pandemic and reduce their sense of loneliness, yet, these tools do not replace social contacts with others (19).

## Summary

For the elderly population that is more prone to death than younger age groups, compliance with isolation and protection measures is crucial. However, it is generally known that seniors "pay" the price of deeper loneliness, their physical and mental conditions aggravate and they have even more restricted access to information, health care services and support of formal and informal caregivers.

In the current pandemic situation, further research on the quality of life of seniors is needed as well as it is necessary to consider what should be changed and what new measures should be introduced as part of public policies.

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