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## **SENIOR CITIZENS' EXISTENTIAL NEEDS AND EDUCATION FOR THE MEANING OF LIFE**

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**Abstract.** A contemporary man is embroiled in perpetual change. Living in the world in which it is more and more difficult to find permanence and constancy frequently evokes anxiety and confusion about the world and one's own life. It is hard to find lasting values and set long- and short-term goals, which is connected with the fact that people stop perceiving their life and activity as a value, as something with the meaning and sense. They stop thinking about what is significant and meaningful and about their direction – apart from material goods, which gain in importance. However, possessing things does not make people happy because they lack the 'essence' necessary for achieving the climax of humanity, the meaning of life which is focussed on an individual's activity and essential attribute of his full development. Meaning of life is made present not only in action but also in relationships with other people, God and oneself. It is very important to consider the role of meaning of life in education to old age. Education concerning meaning of life may help people function better in their everyday life, act more effectively and meet their needs. In this paper, it was presented the research about existential needs of 200 elderly people with using some standardized questionnaire "Unmet psychosocial and spiritual needs of elderly". The final conclusions indicate the value of the religious, spiritual and social needs of the respondents.

*Keywords:* reflexivity; the meaning of life; education for the meaning of life

### **Introduction**

Old age is a final stage of human life and it constitutes a dynamic and synergistic union of both biological and mental processes and numerous changes in the area of the individual's social activity. This stage is characterised by the occurrence of typical life events, developmental tasks, social roles and prevailing experiences and attitudes. Questions usually asked by senior citizens include the ones regarding the meaning of life, which stems from the fact that "A human being does not want to exist at all costs, but what he really wants is to live meaningfully. It is not life's duration that makes it valid and conclusive but the depth of its meaning" (Frankl,

1976: 76). For him, looking for the meaning is about giving meaning to oneself and one's life. According to Kazimierz Obuchowski, having and fulfilling the meaning of life makes an elderly person convinced that he has not wasted it and is ready to part with it feeling fulfilment and not sorrow (Obuchowski, 1990: 7). Lifespan development and improving one's functioning is possible if a person is engaged in higher tasks for which it is worth living, providing, of course, that his basis needs, including existential ones, are satisfied. It helps in overcoming natural changes – increasing with age – in physical functioning, and obstacles and problems which are accompanied by new experiences resulting from them. The aim of the paper – with reference to the studies conducted – is to present higher existential needs of senior citizens, limited to social, spiritual and religious ones, and the objectives faced by education directed at this age group, which is conducive to satisfying their needs, defining short- and long-term life goals and giving meaning to their lives.

### **Senior citizens' needs in the changing world**

A. Maslow's hierarchy of needs is a widely known psychological theory. It lists basis needs necessary for biological survival and higher needs which can be satisfied only after biological needs have been met. Old age is a stage in life when all these needs are present, but, as M. Susułowska remarks, some of them become more intense and more deeply felt than before. Old age modifies the significance and intensity of particular needs, for example, a considerable increase in the needs for safety, belonging and respect can be observed among senior citizens (Susułowska, 1989: 329). The needs for social usefulness, acceptance and emotional ties also become particularly important, as they give meaning to the life of an ageing person. Psychosocial needs are especially important for the elderly, and their insightful classification is provided by an American gerontologist C. Tibbitts:

- the need to engage in socially useful activities,
- the need to be recognized as a part of community, society and group and to play suitable roles in them,
- the need to fill an increased amount of free time in a satisfying way,
- the need to lead a normal social life,
- the need to be recognized as a human being,
- the need to create opportunities and occasions for self-reflection and a sense of achievement,
- the need for adequate psychological and mental stimulation,
- the need for adequate health care and access to health care centres and services,
- the need for a satisfactory daily routine and contact with a family,
- the need for spiritual satisfaction (Tibbitts, 1960).

As can be concluded from the above needs, senior citizens – to a greater extent than younger people – need proper relations with their surroundings and have

increased needs for recognition, respect and care. They still want to be useful. They are no longer, however, driven by success and a desire to introduce changes to their own living conditions. What they need most is safety and stabilization.

Looking closer at the above considerations, it is worth paying attention to vital psychological and physical conditions entailed by some of them. The need to be recognized is important for senior citizens, and it is often satisfied by a sense of prestige understood as being shown due respect. As can be concluded from *Rapport*, the majority of Poles – regardless of their age – feel loved and trusted. These important needs are satisfied at almost the same level among the oldest age group (65 and above) as among younger age groups. Also religious needs among the oldest age group are satisfied to a great extent. Thanks to participation in religious services, not only their spiritual needs are met, but also their need for social contacts, still very important for senior citizens (Wądołowska, 2010: 40-41; Łukasik, Pikula, Jagielska, 2017). If an adult, regardless of age, is to be able to make his life meaningful and fulfil his life goals, his highest needs must be satisfied (Pikula, 2015). Unfortunately, satisfying senior citizens' needs does not depend only on them but also on people around them. According to C. Tibbitts, the needs that most often remain unsatisfied include: playing specific social roles, especially the ones irretrievably lost, leading a satisfying social life, being recognized as a human being, self-expression and a sense of achievement, psychological and mental stimulation, contacts with the family, and spiritual satisfaction (Tibbitts, 1960).

Thus, it is crucial not only to identify the extent to which senior citizens' needs are satisfied but also to make them aware of the existence of certain needs and to show them the ways in which these needs can be satisfied. Satisfying social, spiritual and religious needs seems especially significant from the perspective of the meaning of life, as it helps to avoid the emergence of existential emptiness caused by numerous factors, including the awareness of approaching death or an inability to follow social changes, etc. (Popielski, 2007).

### **Methodological assumptions of the study**

An elderly person is a specific area of interest for contemporary pedagogy, sociology and social gerontology, which stems from, among others, ageing of European societies and other developed countries worldwide. That is why addressing the issue of senior citizens' needs follows this academic trend. This study focuses on their needs limited to three higher needs: social, spiritual and religious. The aim of the study was to identify and describe the needs characteristic for elderly persons living in the biggest urban agglomerations in southern Poland and inhabiting either their own houses, or nursing homes (they stay there permanently), or attending day care centres (they stay there only during the day). The main research question was: *What are senior citizens' social, spiritual and religious needs?* The survey method was used in the study with a questionnaire "Our needs". This questionnaire has

been developed by Prof. Dr. Arndt Büssing and consists of the needs questionnaire (SpN © Prof. Dr. Arndt Büssing, Witten/Herdecke University), the satisfaction questionnaire (BMLSS-10 © Arndt Büssing, Witten/Herdecke University), the anxiety/fear questionnaire (RGH and Escape © Arndt Büssing, Witten/Herdecke University), the loneliness questionnaire (UCLA LONELINESS SCALE © Russell, Peplau, & Ferguson (1978); revised version Fetzer Insititute), and the well-being during the previous two weeks questionnaire (WHO 5 Well-Being Index (1998 version)). The questionnaire was used in pilot studies conducted within international cooperation of academics from Italy, Germany and Poland. The aim of these studies is to identify the needs of adult persons in order to prepare the best offers of life support for both individuals and institutions. The paper presents only the results of a fragment of the pilot study conducted among 195 seniors living in the biggest urban agglomerations in southern Poland. The fragment covers selected indicators referring to social, spiritual and religious needs from the needs questionnaire developed by A. Büssing (SpN © Prof. Dr. Arndt Büssing, Witten/Herdecke University).

### Social, spiritual and religious needs of elderly Poles

When people grow old their needs and their intensity change. It refers to, among others, safety needs (directed mainly at care, stability, order and borders), interpersonal relations and spiritual needs. Belonging to a given group, respect, love, acceptance, and healthy relations with other people satisfy the need for affiliation, which is necessary to palliate fears and obtain higher self-esteem or even better health. Senior citizens are extremely sensitive to being treated as agents. That is why, from the perspective of the study, it is so important to learn about their opinions on the need for affiliation, social ties and relations within their families. The results referring to these areas are presented in three consecutive tables.

**Table 1.** The need for strong family ties taking into account the respondents' place of residence

| The need for strong family ties | I live... |         |                     |         |                  |         |           |         |        |         |
|---------------------------------|-----------|---------|---------------------|---------|------------------|---------|-----------|---------|--------|---------|
|                                 | at home   |         | in day care centres |         | in nursing homes |         | No answer |         | At all |         |
|                                 | N         | %       | N                   | %       | N                | %       | N         | %       | N      | %       |
| No                              | 39        | 26,35%  | 0                   | 0,00%   | 10               | 41,67%  | 1         | 14,29%  | 50     | 25,64%  |
| Yes                             | 108       | 72,97%  | 16                  | 100,00% | 14               | 58,33%  | 6         | 85,71%  | 144    | 73,85%  |
| No answer                       | 1         | 0,68%   | 0                   | 0,00%   | 0                | 0,00%   | 0         | 0,00%   | 1      | 0,51%   |
| At all                          | 148       | 100,00% | 16                  | 100,00% | 24               | 100,00% | 7         | 100,00% | 195    | 100,00% |

The data presented in the above table indicate that the need for strong family ties is expressed by 100% of respondents staying in day care centres, by 72,97% of respondents living at home, and only by 58,33% of respondents living in nursing homes. People who live at home are likely to indicate this need so rarely because it is fully satisfied in their lives, as they probably have close relations with their own children and grandchildren, and that is why they do not experience this need (Pikuła, 2015). The result obtained among people staying in day care centres is very surprising indeed. Although these respondents live at home and spend their days in institutions, they have the greatest need for strong ties with their relatives, which indicates limited contacts with the closest family or even their lack. The need for strong family ties among people permanently living in nursing homes is understandable, although they express it less frequently in comparison with other senior citizens. Due to their place of residence, their contacts with families are limited (usually their relatives visit them once a week or several times a month). So, it can be concluded that the need for strong ties among persons staying in nursing homes is satisfied, even though they live in institutions, or are so resigned, that they even do not try to voice and satisfy it (repression). The need for strong ties is accompanied by the need to share one's life experiences. If it is satisfied, senior citizens feel important and socially useful, and, in their opinion, actively participate in their families' lives (Table 2).

**Table 2.** The need to share one's life experiences taking into account the respondents' place of residence

| The need to share one's life experiences | I live  |         |                     |         |                  |         |           |         |        |         |
|------------------------------------------|---------|---------|---------------------|---------|------------------|---------|-----------|---------|--------|---------|
|                                          | At home |         | in day care centres |         | in nursing homes |         | No answer |         | At all |         |
|                                          | N       | %       | N                   | %       | N                | %       | N         | %       | N      | %       |
| No                                       | 46      | 31,08%  | 3                   | 18,75%  | 8                | 33,33%  | 2         | 28,57%  | 59     | 30,26%  |
| Yes                                      | 98      | 66,22%  | 13                  | 81,25%  | 15               | 62,50%  | 5         | 71,43%  | 131    | 67,18%  |
| No answer                                | 4       | 2,70%   | 0                   | 0,00%   | 1                | 4,17%   | 0         | 0,00%   | 5      | 2,56%   |
| At all                                   | 148     | 100,00% | 16                  | 100,00% | 24               | 100,00% | 7         | 100,00% | 195    | 100,00% |

The data presented in the above table indicate that, as in case of the need for strong family ties, the majority of respondents with this need stay in day care centres – 81,25%, slightly fewer live at home – 66,22% and in nursing homes – 62,50%. The reasons might be the same as in case of satisfying the need for family ties. Bearing these needs in mind, it seems important to learn how senior citizens perceive their needs with reference to their everyday functioning within their own families (Table 3).

**Table 3.** The need to be re-included in everyday life of one's family taking into account the respondents' place of residence

| The need to be re-included in everyday life of one's family | I live  |         |                     |         |                  |         |           |         |        |         |
|-------------------------------------------------------------|---------|---------|---------------------|---------|------------------|---------|-----------|---------|--------|---------|
|                                                             | At home |         | in day care centres |         | in nursing homes |         | No answer |         | At all |         |
|                                                             | N       | %       | N                   | %       | N                | %       | N         | %       | N      | %       |
| No                                                          | 64      | 43,24%  | 9                   | 56,25%  | 12               | 50,00%  | 4         | 57,14%  | 89     | 45,64%  |
| Yes                                                         | 82      | 55,41%  | 7                   | 43,75%  | 11               | 45,83%  | 3         | 42,86%  | 103    | 52,82%  |
| No answer                                                   | 2       | 1,35%   | 0                   | 0,00%   | 1                | 4,17%   | 0         | 0,00%   | 3      | 1,54%   |
| At all                                                      | 148     | 100,00% | 16                  | 100,00% | 24               | 100,00% | 7         | 100,00% | 195    | 100,00% |

Less than a half of senior citizens staying in day care centres on everyday basis and living in nursing homes and over a half of those living at home (55,41%) express the need to be re-included in everyday life of their families. Most probably their need to be useful in everyday life of their close relatives (children, grandchildren) results from the fact that they are not engaged in organized activities addressed at senior citizens. That is why their need to feel useful is greater than among other respondents. People engaged in various activities offered at day care centres and nursing homes satisfy this need in different ways and realize themselves and increase their self-esteem in areas other than being useful for their own families. Elderly persons who do not participate in organized leisure activities have a stronger need for self-fulfilment by doing something useful for their families (cf. Pikula, 2015).

Higher existential needs analysed in this article also include spiritual and religious needs. Similarly to the need for belonging, these needs lay a foundation for the meaning of life for senior citizens. That is why it seemed justified to check how the respondents assess the extent to which their spiritual needs are satisfied. The first of them was the need to look back at one's life. Reflection on one's achievements is a basis for building fulfilment and, accordingly, perceiving one's life as meaningful or meaningless, which transgresses the physical level and reaches the spiritual level (Table 4).

**Table 4.** The need to look back at one's life taking into account the respondents' place of residence

| The need to look back at one's life | I live  |        |                     |        |                  |        |           |        |        |        |
|-------------------------------------|---------|--------|---------------------|--------|------------------|--------|-----------|--------|--------|--------|
|                                     | At home |        | in day care centres |        | in nursing homes |        | No answer |        | At all |        |
|                                     | N       | %      | N                   | %      | N                | %      | N         | %      | N      | %      |
| No                                  | 69      | 46,62% | 5                   | 31,25% | 11               | 45,83% | 5         | 71,43% | 90     | 46,15% |
| Yes                                 | 76      | 51,35% | 11                  | 68,75% | 13               | 54,17% | 2         | 28,57% | 102    | 52,31% |

|           |     |         |    |         |    |         |   |         |     |         |
|-----------|-----|---------|----|---------|----|---------|---|---------|-----|---------|
| No answer | 3   | 2,03%   | 0  | 0,00%   | 0  | 0,00%   | 0 | 0,00%   | 3   | 1,54%   |
| At all    | 148 | 100,00% | 16 | 100,00% | 24 | 100,00% | 7 | 100,00% | 195 | 100,00% |

The data presented in the above table indicate that the majority of respondents who express this need reside in day care centres (68,75%), and fewer in nursing homes (54,17%) and at home (51,35%). It can be explained by the fact that the senior citizens belonging to the first group spend a lot of time outside their home with other people. Conversations activate the need to look back at their own lives, to assign some order and meaning to them and to set new goals. Maybe this need is also strengthened by the need for family ties, although this might also result from reflection. Other respondents probably have already assessed their life outcomes, redefined their meaning and value by being engaged in everyday life of their families (respondents living at home) or sharing their life experiences (respondents living in nursing homes). The need to analyse the meaning of life is linked with the need to talk to someone about it (Table 5) and the need to reach a conclusion that one's life has been meaningful and valuable (Table 6).

**Table 5.** The need to talk to someone about the meaning of life taking into account the respondents' place of residence

| The need to talk to someone about the meaning of life | I live... |         |                     |         |                  |         |           |         |        |         |
|-------------------------------------------------------|-----------|---------|---------------------|---------|------------------|---------|-----------|---------|--------|---------|
|                                                       | At home   |         | in day care centres |         | in nursing homes |         | No answer |         | At all |         |
|                                                       | N         | %       | N                   | %       | N                | %       | N         | %       | N      | %       |
| No                                                    | 81        | 54,73%  | 6                   | 37,50%  | 9                | 37,50%  | 6         | 85,71%  | 102    | 52,31%  |
| Yes                                                   | 65        | 43,92%  | 10                  | 62,50%  | 14               | 58,33%  | 1         | 14,29%  | 90     | 46,15%  |
| No answer                                             | 2         | 1,35%   | 0                   | 0,00%   | 1                | 4,17%   | 0         | 0,00%   | 3      | 1,54%   |
| At all                                                | 148       | 100,00% | 16                  | 100,00% | 24               | 100,00% | 7         | 100,00% | 195    | 100,00% |

The data presented in the above table indicate that, as in case of the need to reflect on one's life, the majority of respondents residing in day care centres (62,50%) and living in nursing homes (58,33%) experience the need to talk to someone about the meaning of life. In fact, if this need is not satisfied in people residing in institutions, it may not necessarily reveal weak family ties but rather the lack of persons with whom one could discuss this issue in institutions, which, by their very nature, abound with other residents and professional staff. Yet, according to elderly persons staying in institutions, this need is not satisfied. 43,92% of respondents living at home also declare that this need is not satisfied. It might indicate that life outcomes have been assessed and that there are close persons in their environment who have helped them to discover the meaning of life and to set new life goals, which give it meaning again. However, if we take into consideration the need to be certain that



one's life was meaningful and valuable, respondents' declarations are significantly different.

**Table 6.** The need to be certain that one's life was meaningful and valuable taking into account the respondents' place of residence

| potrzeba<br>pewności,<br>że życie było<br>sensowne i<br>wartościowe | I live... |         |                        |         |                     |         |           |         |        |         |
|---------------------------------------------------------------------|-----------|---------|------------------------|---------|---------------------|---------|-----------|---------|--------|---------|
|                                                                     | At home   |         | in day care<br>centres |         | in nursing<br>homes |         | No answer |         | At all |         |
|                                                                     | N         | %       | N                      | %       | N                   | %       | N         | %       | N      | %       |
| Nie                                                                 | 41        | 27,70%  | 7                      | 43,75%  | 10                  | 41,67%  | 1         | 14,29%  | 59     | 30,26%  |
| Tak                                                                 | 104       | 70,27%  | 9                      | 56,25%  | 14                  | 58,33%  | 6         | 85,71%  | 133    | 68,21%  |
| brak odpowiedzi                                                     | 3         | 2,03%   | 0                      | 0,00%   | 0                   | 0,00%   | 0         | 0,00%   | 3      | 1,54%   |
| At all                                                              | 148       | 100,00% | 16                     | 100,00% | 24                  | 100,00% | 7         | 100,00% | 195    | 100,00% |

Respondents living at home (as many as 70,27% of them) need confirmation that their life has been meaningful and valuable. Respondents from nursing homes and day care centres reveal this need less frequently (58,33% and 56,25%, respectively). It might result from limited ability to reflect among the members of the first group or their experiences connected with everyday life, in which – as the data in Table 3 demonstrate – to the greatest extent they look for confirmation of their usefulness, and, through it, the conviction that their lives and everything they have done was and still is meaningful. It might also be connected with their free time: they live as if 'inside' their families, while the respondents residing in institutions have a wider range of experiences, and their everyday activities are not limited to family life only (Pikula, 2015).

Higher existential needs include the religious ones. 90,77% of respondents declared that they were Roman-Catholics, 4,62% described themselves as non-believers, and the same percentage did not answer this question. Religious needs were exemplified by the need for prayer (Tables 7 and 8) and the need to talk about life after death (Table 9).

**Table 7.** The need for prayer taking into account the respondents' place of residence

| The need for prayer | I live... |         |                        |         |                     |         |           |         |        |         |
|---------------------|-----------|---------|------------------------|---------|---------------------|---------|-----------|---------|--------|---------|
|                     | At home   |         | in day care<br>centres |         | in nursing<br>homes |         | No answer |         | At all |         |
|                     | N         | %       | N                      | %       | N                   | %       | N         | %       | N      | %       |
| No                  | 33        | 22,30%  | 0                      | 0,00%   | 4                   | 16,67%  | 1         | 14,29%  | 38     | 19,49%  |
| Yes                 | 113       | 76,35%  | 16                     | 100,00% | 20                  | 83,33%  | 6         | 85,71%  | 155    | 79,49%  |
| No answer           | 2         | 1,35%   | 0                      | 0,00%   | 0                   | 0,00%   | 0         | 0,00%   | 2      | 1,03%   |
| At all              | 148       | 100,00% | 16                     | 100,00% | 24                  | 100,00% | 7         | 100,00% | 195    | 100,00% |



The data presented in the above table indicate the strongest need of individual prayer among people residing in day care centres (100,00%). This percentage was followed by respondents living in nursing homes (83,33%) and at homes (76,35%). Such a result might be connected with participation in communal prayers which takes place in institutions.

**Table 8.** The need to turn to a higher being taking into account the respondents' place of residence

| The need to turn to a higher being | I live... |         |                     |         |                  |         |           |         |        |         |
|------------------------------------|-----------|---------|---------------------|---------|------------------|---------|-----------|---------|--------|---------|
|                                    | At home   |         | in day care centres |         | in nursing homes |         | No answer |         | At all |         |
|                                    | N         | %       | N                   | %       | N                | %       | N         | %       | N      | %       |
| No                                 | 34        | 22,97%  | 9                   | 56,25%  | 11               | 45,83%  | 0         | 0,00%   | 54     | 27,69%  |
| Yes                                | 111       | 75,00%  | 7                   | 43,75%  | 13               | 54,17%  | 7         | 100,00% | 138    | 70,77%  |
| No answer                          | 3         | 2,03%   | 0                   | 0,00%   | 0                | 0,00%   | 0         | 0,00%   | 3      | 1,54%   |
| At all                             | 148       | 100,00% | 16                  | 100,00% | 24               | 100,00% | 7         | 100,00% | 195    | 100,00% |

As far as the need to turn to a higher being is concerned, it can be noticed that the respondents living at home indicated this need most often (75,00%). It was chosen less frequently by the respondents living in nursing homes (54,17%) and staying in day care centres (43,75%). Maybe in case of the first group this need is more clearly visible because they do not have many opportunities to obtain support in difficult situations from so many sources as people staying in institutions (where more services are provided by professionals and where there are more opportunities for social contacts). That is why the respondents living at home look for support from God by talking to Him in prayer.

After assessing their life outcomes, senior citizens frequently prepare for death. Their conversations often focus on life after death and are conducive to reflection on the possibility of eternal life. The respondents' opinions regarding these needs can be found in Table 9.

**Table 9.** The need to talk to someone about the possibility of the existence of life after death taking into account the respondents' place of residence

| The need to talk to someone about the possibility of the existence of life after death | I live... |        |                     |        |                  |        |           |        |        |        |
|----------------------------------------------------------------------------------------|-----------|--------|---------------------|--------|------------------|--------|-----------|--------|--------|--------|
|                                                                                        | At home   |        | in day care centres |        | in nursing homes |        | No answer |        | At all |        |
|                                                                                        | N         | %      | N                   | %      | N                | %      | N         | %      | N      | %      |
| No                                                                                     | 97        | 65,54% | 7                   | 43,75% | 16               | 66,67% | 6         | 85,71% | 126    | 64,62% |
| Yes                                                                                    | 48        | 32,43% | 9                   | 56,25% | 8                | 33,33% | 1         | 14,29% | 66     | 33,85% |

|           |     |         |    |         |    |         |   |         |     |         |
|-----------|-----|---------|----|---------|----|---------|---|---------|-----|---------|
| No answer | 3   | 2,03%   | 0  | 0,00%   | 0  | 0,00%   | 0 | 0,00%   | 3   | 1,54%   |
| At all    | 148 | 100,00% | 16 | 100,00% | 24 | 100,00% | 7 | 100,00% | 195 | 100,00% |

The data presented in the above table indicate that the need to discuss life after death is the strongest among people staying in day care centres (56,25%). Most probably it results from the fact that such institutions offer opportunities to discuss this topic during everyday meetings, communal activities and social contacts between the respondents. This need is rarely expressed by the respondents living at home (32,43%) and in nursing homes (33,33%), which might be connected with their faith in eternal life or the lack of opportunities to discuss life after death with other people.

The study revealed that senior citizens have higher needs, which differ, however, depending on where they reside, and the factors directly influencing these needs are connected with their relations with the closest family and other people. The needs that turned out particularly significant for the elderly respondents include the need to be useful, the need for the meaning of life, the need for valuable life, and transcendent needs (cf. Piśula, 2015). In order to fully satisfy them and live with the feeling of fulfilment, adequate education is necessary – offered to both senior citizens and younger persons, who will reach old age at one point in their lives and who might already have aged relatives or friends in need of support in satisfying their higher existential needs (Aleksander Kamiński pointed at this aspect as early as in the second half of the 20<sup>th</sup> century).

### **Final remarks**

As contemporary psychologists, doctors and educators emphasise, “no age is a barrier for the cognitive area to undergo developmental changes connected with creating and using opportunities to participate in social life (individuals and groups) nor a barrier to overcome stagnation or regress of these opportunities” (Kuchcińska, 2009: 174). That is why, as Jerzy Halicki remarks, “education of senior citizens is one of the most important elements conducive to improving the quality of their lives” (Halicki 2000: 208; Piśula, 2015). Referring to the results of the study presented in the paper, it can be concluded that education offered to the respondents (senior citizens) offers them a chance to cope with their old age in a more effective way. Thanks to education, an elderly person learns how to lead a life which is active, conscious, intentional, aim-directed, meaningful, positive, and valuable, and how to create and realize the self-concept. That is why the aims of education in old age must take into account both resources available to elderly persons and their needs. According to Olga Czerniawska education should “lead to self-education (...) Self-fulfilment and self-education take place in everyday life. Reflection on experiences allows for a different evaluation and for building one’s own identity on them” (Czerniawska 1998: 15). Education for the meaning of life (in the context of

satisfying the needs discussed in this paper), understood as being both past-oriented and future-oriented, should follow this path. That is why important objectives of this kind of education include the following ones:

- Discovering and realizing the potential of old age and creating conditions conducive to its development.

- Supporting an active attitude to one's own development, development of others and development of one's social environment (participating in social situations; being useful).

- Supporting initiating and maintaining interpersonal relations, especially inter-generational relations within a family, which gives meaning to senior citizens' lives.

- Inspiring and motivating elderly persons to engage in passions and develop their interests.

- Supporting assessing life outcomes and looking for the meaning of life and existence.

- Motivating to become task-oriented, to undertake activities which give meaning to human life.

- Strengthening religious activities which facilitate the relation with God.

- Providing stimuli and supporting spiritual development which takes into consideration transcendent values playing a significant role in transgressing borders and discovering the meaning of life in the perspective of ageing and dying.

Identifying senior citizens' existential needs and educating them for the meaning of life are essential objectives of contemporary pedagogy (cf. Pikuła, 2015).

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