PSYCHOLOGY AND EDUCATION (2025) 62(4): 152-161
ISSN: 1553-6939

The Impact of Demographic Shifts on the Evolution the Aging phenomenon in Algeria

تأثير التحولات الديمغرافية على تطور ظاهرة الشيخوخة في الجزائر

PHD. Naima Aizel [1]
[1] University of algiers2,Algeria, Email:naima.aizel@univ-alger2.dz

Received: 12/02/2025 ***Accepted: 20/03/2025*** ***Published: 11/04/2025***

ABSTRACT

This study aims to analyze the phenomenon of aging, which is mainly linked to demographic changes in age categories below 60 years. Its main focus is on analyzing the group 60 years or more, which has a unique characteristic based on gender ratio. The age gap between genders has been increasing continuously, estimated to be 0.02 in 1965, but it is projected to reach 2.8 in 2023.Based on official statistical data, the phenomenon of aging (60-74 years / 75 years and above) was analyzed by calculating the relevant demographic indicators. The results showed that the size of the elderly category is constantly increasing This demographic shift presents a significant challenge for the country's developmental and planning policies.
Keywords: Aging; Fertility; Life Expectancy; Birth; Deaths; transition

ABSTRACT

تهدف هذه الدراسة إلى تحليل ظاهرة الشيخوخة التي ترتبط اساسا بالتغيرات الديموغرافية في الفئات الاقل من 60 سنة، و تحليل الفئة(60 سنة فما فوق)*ذات الميزة الخاصة من حيث : النسبة النوعية التي يفوق عدد النساء فيها عدد الرجال ،و تفوق مدة بقاء النساء على قيد الحياة مدة بقاء الرجال ،و يعرف فارق السنين بين الجنسين تزايدا مستمرا ،و الذي قدر ب 0.02 في 1965 مقابل 2.8 في 2023. استنادًا إلى البيانات الإحصائية الرسمية، تم تحليل ظاهرة الشيخوخة (60-74 سنة / 75 سنة فأكثر) من خلال حساب المؤشرات الديموغرافية ذات الصلة، وأظهرت النتائج أن حجم فئة المسنين يتزايد باستمرار، ويمثل هذا التحول الديموغرافي تحديًا كبيرًا للسياسات التنموية والتخطيطية للبلاد.
الكلمات المفتاحية: الشيخوخة ؛ الخصوبة ؛ أمل الحياة ؛ الولادات؛ الوفيات ؛ التحول

Introduction

"Aging is a natural stage of life," and it is a global phenomenon that places many countries in the face of significant challenges, particularly those experiencing a substantial increase in the elderly population due to longer life expectancy and a significant decline in fertility rates. The increase in the proportion of this age group is primarily linked to changes recorded in other age groups. United Nations statistics for 2022 indicated that 10% of the world's population belongs to the 60+ age group, and this percentage is expected to rise to 16% by 2050. This increase will inevitably affect the proportions of other age groups. It is likely that the number of children under 12 will equal the number of individuals aged 60 and above, who will in turn be double the number of children under five.

At independence, Algeria had a population of 11,778,260, which grew to 12,096,000 in the first general census of 1966, including 607,046 individuals aged between 60-74 years and 191,246 individuals over 75 years old. These figures quickly rose to 1,872,777 for the first group and 692,159 for the second group in the 2008 census, reaching 3,629,736 for the 60-74 age group and 1,236,809 for the 75+ age group in 2023. The increase in the elderly population is mainly linked to Algeria's transition phase, during which demographic indicators changed, including a drop in crude death rates (especially infant mortality) from 15.87‰ in 1967 to 4.5‰ in 2023, and changes in birth rates across successive periods, dropping from 50.12‰ in 1967 to less than 20‰ in 2023.

The significant shift in reproductive behavior (fertility indicator) characterized by high birth rates (many children per woman) to compensate for the loss of lives before and during the liberation war recorded 7.6 children per woman in 1967, later shifting towards reducing the number of births to 5.32 children per woman in 1998 and continuing to drop to 2.8 in 2023.

Conversely, life expectancy at birth has seen a considerable increase, doubling over 61 years, with the average lifespan rising from around 40 years in 1962 to approximately 80 years in 2023. This positive transition reflects the quality of life experienced by individuals between birth and death and is a testament to the effective health policies implemented.

The demographic changes have impacted the age pyramid structure, with its peak expanding due to the increase in the elderly population and stretching upwards thanks to longer life expectancy. Algeria has now entered a phase of rapid aging, creating an economic burden due to continuously rising dependency ratios, which increased from 11.11% in 1990 to 17.8% in 2023. The same applies to the aging index, which was 6.59% in 1966 and reached 10.5% in 2023. These two indicators represent the real challenge Algeria faces on both economic and social fronts.

The impact of demographic transformations is a fundamental reason for the development of the aging phenomenon in Algeria, which will be analyzed according to indicator changes from independence to the present day, starting with the initial interest in the elderly in international and national charters and agreements.

2. Initial Interest in the Elderly in International Policies and Charters:

Interest in the elderly in international policies began in the 1980s after this age group had been marginalized and overlooked by government and state policies for decades. The starting point was:

Elderly through the UN General Assembly 1978: The UN General Assembly's resolution (33/52) drew global attention to the issues faced by the elderly amid their considerable increase globally and proposed organizing the 1982 World Assembly on Aging (United Nations, 1978).

Elderly through the ILO General Conference 1980: The ILO General Conference, held in its 66th session in Geneva in 1980, amended recommendation No. 162, emphasizing the need for equal opportunities, fair treatment, and improved working environments for elderly workers, enabling them to continue working under acceptable conditions and preparing for retirement voluntarily (https://www.ohchr.org older-persons).

Vienna International Plan of Action on Aging 1982: Key points included population welfare, non-marginalization, and equity among all age groups, aiming for intergenerational integration and planning to address population growth (UNFPA, 2019-2029).

UN Principles for Older Persons 1991: Eighteen principles were adopted to benefit the elderly, focusing on preserving their dignity, rights to care, health, financial independence, and social participation. Countries were urged to incorporate these principles into their national policies (http://hrlibrary.umn.edu/arabic).

International Conference on Population and Development Program of Action on the Elderly - Cairo 1994: A bold agenda was adopted, placing the rights and dignity of all age and gender groups at the heart of sustainable development, with the program adopted by 179 governments.

Madrid International Plan of Action on Aging 2002: This plan addresses multifaceted issues concerning the elderly, emphasizing social protection, financial independence, and enhancing participation and integration into social and economic life, with a focus on family roles in maintaining intergenerational solidarity within comprehensive and sustainable development (UNFPA, 2019-2029).

ILO on Aging 2012: The ILO announced recommendation No. 202, establishing national social protection floors to ensure minimum living standards, social protection, and lifelong health care, as the elderly are among the most vulnerable to poverty and marginalization, with difficulty accessing social benefits and healthcare services.

Aging in the Sustainable Development Plan (2015-2030),in 2015, United Nations member states agreed on the 2030 Sustainable Development Plan, encompassing three dimensions (economic, social, and environmental) with its 17 goals, 169 targets, and 231 indicators. Most Arab countries, including Algeria, committed to its implementation. However, this plan is comprehensive for all age groups and only specifically mentions the elderly in three points among the total targets: Target 2.2 on ensuring nutritional needs, Target 11.2 on providing transportation for essential needs (mostly health-related), and Target 11.7 on safe public spaces and green areas (https://www.sustainable-development-agenda.org/2030).

This plan was bolstered by the establishment of an international organization, HelpAge, to assist in achieving the sustainable development goals, particularly supporting countries with a high percentage of elderly population. One of the most significant challenges facing both developing and developed countries in the 21st century is the rapid changes in demographic composition due to the swift decline in fertility rates and the increase in life expectancy at birth, which varies geographically across continents. This leads to different proportions of the age group 60 and above: North America (79.2 years: 17.2%), Australia (78.4 years: 13%), Europe (78.3 years: 19.5%), Asia (73.3 years: 9.1%), Africa (62.7 years: 3.6%) (UN; Demographic 2021). According to the same source, the proportion of the elderly (65 and above) exceeds 9.6% of the world's population.

3. Demographic Transformations in Algeria

Algeria is experiencing a change in its population structure with an increase in the population, primarily reflected in the decline in mortality rates, especially among the under-five age group, coupled with a continuous rise in life expectancy at birth, resulting in a higher proportion of the elderly population.

3.1 Demographic Features in Algeria

Population statistics in Algeria began to take shape with the establishment of a database right after independence, used to plan social and developmental policies charted by the state for both the short and long term. It should be noted that population data have shown varying trends over the years.

3.1.1 The Absolute Number of Algeria's Population (1962-2023)

On the eve of independence, Algeria had a population of 11,778,260, including 5,954,588 males. This figure rose to 12,096,000 in the first population and housing census conducted by independent Algeria in 1966, including 6,073,000 males. The results of the second census in 1977 showed a total of 17,052,000, including 8,451,000 males, with the number of females exceeding males by 156,000 that same year. The third census in 1987 estimated the population at 23,139,000, including 11,704,000 males. The population continued to grow, reaching 29,507,000 in the 1998 census, including 14,712,000 males. The 2008 census recorded a population of 34,591,000, including 17,493,000 males. By 2018*, the population was estimated at 42,577,000, including 21,570,000 males. According to population projections for 2040 (Demography of Algeria, 2017), Algeria's population will reach 50,075,000 and 56,369,000 for the years 2028 and 2038, respectively. The increase in population every ten years was estimated as follows:

Table 1: Population Growth Every 10 Years from 1962 to 2024

Period	Total Increase	Period	Total Increase
1962-1966	317740	1998-2008	5084000
1966-1977	4962000	2008-2016	6245000
1977-1987	6081000	2016-2024	5864000
1987-1998	6368000		

Source: Prepared by the researcher based on data from the National Statistics Office

The phenomenon of births can be characterized by four key phases:

Increase in Births (1962-1985): The number of births recorded was approximately 503,200 in 1962 and continued to rise to 845,381 by 1985, with a rate of 39.5%.

Decline in Births (1986-2000): The birth rate decreased to 34.73% in 1986 and continued to decline until reaching 19.36% (approximately 589,000 births) by 2000.

Return to Increased Births (2001-2019): The birth rate reached 20.03% (approximately 619,000 births) and continued to rise until 2014 when the number of live births exceeded one million for six consecutive years (2014-2019).

Current Phase (2020-2023): In 2023, there was a continued decline in birth rates since 2017 with 895,000 live births recorded—the first time this figure fell below 900,000 since 2010. The birth rate

decreased from 23.8% to 19.32% between 2019 and 2023. Throughout all phases of fluctuations—whether increases or decreases—there has been a consistent disparity between male and female birth ratios (105 males for every100 females).

3.3 Changes in Fertility Rates

Fertility refers to the actual capacity for reproduction, measured by the number of live births. In contrast, reproductive capability encompasses the physiological ability to produce offspring throughout a woman's reproductive lifespan (ages 15-49). The actual production of live births is a direct influence on population growth and aging. The replacement or fertility rate, defined as the number of children per woman necessary to replace a generation, is set at a minimum of 2.1 children per woman to maintain population stability. Any increase above this threshold indicates population growth, while stability suggests equilibrium, and a decrease implies a reduction in population size alongside an increase in the elderly demographic.In Algeria, the fertility index has shown a downward trend since independence, recording 7.6 children per woman in 1962. This figure remained relatively stable until the early 1980s, with rates of 7.1 and 7.4 observed during the second census of independent Algeria in 1977. The fertility rate continued to decline, reaching 5.29 children per woman by 1987, followed by a slight rise to 6.21 in 1989. From 1990 onwards, the rate dropped to 4.5 children per woman, and by the turn of the millennium, it was recorded at 2.4 children per woman. This figure stabilized in subsequent years, reaching 2.8 by 2008.The fertility index remained stable until 2012 when it was estimated at 3.02; however, it experienced a decline beginning in 2020, falling to 2.9 with only minor fluctuations in subsequent years, ultimately settling at 2.8 children per woman by 2023.

Graphical Representation No. (01): Number of Children per Woman Across Different Time Periods

Source: Compiled by the researcher based on data from the National Statistics Office

3.4 Changes in Crude Mortality Rates

In the years immediately following independence, Algeria experienced a rise in overall mortality rates, particularly among infants and children under five years old. This rate was recorded at 25.04% on the eve of independence in 1962. The results from the census conducted in 1966 indicated that the crude mortality rate had decreased to 15.87%, further declining to 14.36% by 1977.The subsequent years witnessed a rapid decline in this rate due to government policies promoting free healthcare and education, along with efforts focused on combating epidemic diseases and implementing free vaccination programs. Accessibility to medical services improved through the establishment of treatment facilities close to population centers and mobile clinics for remote areas, complemented by initiatives for school health that facilitated vaccinations and early detection of various diseases. As a result of these policies, the crude mortality rate decreased significantly to 6.61% by 1988 and further to 5.28% by 1998. This declining trend continued in subsequent years as the rate stabilized around 4% from the year 2000 onward,

with slight variations recorded at rates of 4.42%, 4.53%, and finally reaching 4.66% for the years 2008, 2018, and 2023 respectively. .

3.5 Development of Life Expectancy at Birth and Gender Disparities

Algeria, like other Arab countries, has experienced an upward trend in life expectancy at birth, reflecting the quality of life lived during previous age stages. This trend is indicative of health conditions that enhance the likelihood of survival for as long as possible. Life expectancy, or the expected duration of life, is defined as "the length of time a person can be expected to live after birth, representing the actual ability to survive compared to what one might potentially live" (Al-Eisawi, 2003, p. 249 The maximum life expectancy recorded for Algerians at the end of the colonial period in 1962 was 39.32 years. This figure has shown continuous improvement for several reasons: primarily the stability resulting from independence and secondly, advancements in social, economic, and health sectors.The length of time individuals can expect to live serves as a reflection of the quality of life experienced from birth until death. A notable characteristic of this indicator's development in Algeria is its doubling over a span of 61 years, increasing from 40 years in 1962 to approximately 80 years in 2023. Over many years, this indicator has consistently shown a value advantage for females. The lowest recorded disparity was 0.02 years in 1965, while the highest was 3.9 years in 1991. Recent statistics indicate that life expectancy for women has surpassed the threshold of eighty years (81 years), compared to 78.2 years for men in 2023.The improvement in life expectancy at birth is illustrated in the following table:

Table 4: Development of Life Expectancy at Birth by Gender and Their Disparities

Years	Total E0	E0 Males	E0 Females	Difference	Years	Total E0	E0 Males	E0 Females
*1962	40				1998	71.7	70.5	72.9
1965	51.16	51.15	51.17	0.02	2008	75.6	74.8	76.3
1977	53.37	53.17	53.48	0.21	2018	77.7	77.1	78.4
1987	66.19	66.05	66.34	0.29	2023	79.6	78.2	81

Source: Hamza Cherif A., Population and Essential Needs in Algeria by 2038, Perspective Monde (07/10/2024)

It is worth noting that the continuous decline in fertility and mortality rates, along with the increase in life expectancy at birth, are indicators of the rising proportion of the elderly in the entire world, including Algeria. This results in related transformations such as changes in dependency ratios and aging indicators.

4 Analysis of the Aging Phenomenon

The phenomenon of aging has become a focal point of discussion among demographers, medical professionals, and policymakers. In recent years, it has emerged as a distinct field of study that encompasses cultural and economic aspects, awareness studies, and social changes resulting from the physiological alterations affecting the physical, mental, and psychological structures of individuals in this age group.

4.1 Concept of Aging

Aging is an inevitable stage that every individual who does not succumb to death will reach. It is "considered a process of adaptation for the body to counteract the effects of wear and external changes" (Ghanem, 2015, p. 279). Furthermore,

"aging is a physiological change in human life, akin to the stages of infancy, childhood, adolescence, adulthood, and old age. It is the age phase during which physical and mental functions begin to deteriorate more noticeably than in earlier life stages" (Hegazi, 2010, p. 111).

This concept applies simultaneously to both population aging and individual aging. Population aging refers to the condition resulting from changes in the demographic pyramid due to declining fertility and mortality rates, increased average age, enhanced life expectancy at birth, and migration factors (both attracting and repelling). Traditionally, population aging is defined as the growing change in age distribution within a society, which gives considerable weight to older ages while assigning less significance to younger ages (World Health Organization, 2009).

In contrast, individual aging or partial aging is associated with an increase in the average age within society due to prolonged life spans and reduced mortality rates among those aged 60 years and older. This leads to an expansion in this demographic segment, as evidenced by various censuses and statistical surveys indicating a rise in the number of elderly individuals reaching advanced ages compared to previous periods.

4.2 Absolute Number of Individuals Aged 60 and Over and Those Aged 75 and Over

The accelerated growth observed in Algeria's age structure—particularly among the elderly population—has led to increased demands for care and support services on one hand and health monitoring on the other. It is essential to emphasize that the elderly population does not exist at a uniform level of frailty or strength; rather, their capacities vary significantly among individuals along with their needs. These capacities tend to decline as age increases while their requirements multiply in tandem. Consequently, a division of the elderly population into two categories has been adopted: those aged 60-74 years and those aged 75 years and older.

The number of elderly individuals in the 60-74 age group has shown consistent growth over successive historical periods. For instance, there were 607046 elderly individuals recorded in 1966; this figure increased by 2.5 times by 1998, tripled by 2008, and approximately quintupled by 2018. In 2023, there were 3629736 elderly individuals recorded—six times what it was in 1966—representing a percentage range of this group from the total population between 4.20% and 7.83% during the period from 1966 to 2023.

Regarding the age group of individuals aged 75 years and older, there has also been a continuous increase and multiplication over successive periods. In 1966, there were 191246 elderly individuals; this figure doubled by 1977, tripled by 1988, increased by four-and-a-half times by 1998, and continued at this pace to surpass one million (1236809) by 2023. Thus, this figure has increased by 6.5 times compared to what it was in 1966. The percentage of this group.

relative to the total population has also risen significantly over similar historical stages, ranging from 1.28% to 2.66%.

Throughout most historical stages represented by this data, disparities have been recorded between female and male populations, with these differences becoming more pronounced within the age group of those aged 75 years and older.

4.3 The Transformation in the Proportion of the Elderly by Gender Relative to the Total Population

It is natural for age groups to undergo change and transformation, whether through increase, decrease, or maintenance of a stable status, which can only be achieved by stabilizing the replacement rate at 2.1 children per woman. This condition is far from Algeria's demographic situation. With the increasing elderly population in both segments, statistics over different time periods have shown that the proportions of elderly individuals vary by gender, with female percentages often exceeding those of males. For instance, in the age group of 60-74 years, female representation was recorded at 2.54% compared to 2.46% for males in the 1966 census. However, this trend shifted in 1977 when male percentages surpassed those of females (2.28% versus 2.23%). A similar situation was observed in 2018 with a slight difference, while in 2023, the figures were 3.94% for females compared to 3.88% for males.The same pattern applies to the age group

of 75 years and older, where there has been a consistent increase favoring women across all historical stages except for 1987. In 1966, female representation was recorded at 0.85% compared to 0.70% for males; this percentage increased to 1.40% for females versus 1.26% for males by 2023.

Table (05): Distribution of Elderly Proportions by Gender from 1966 to 2023

Age Group Year (Census	Total Population	60-75 years old		75 years and above	
		Males (%)	Females (%)	Males (%)	Females (%)
1966	12 096 347	2.46	2.54	0.7	0.85
1977	16 063 821	2.28	2.23	0.62	0.65
1987	22 881 508	2.05	2.14	0.77	0.76
1998	29 398 235	2.46	2.56	0.75	0.8
2008	34 590 585	2.69	2.72	0.98	1.01
2018	42 577 722	3.38	3.37	1.23	1.31

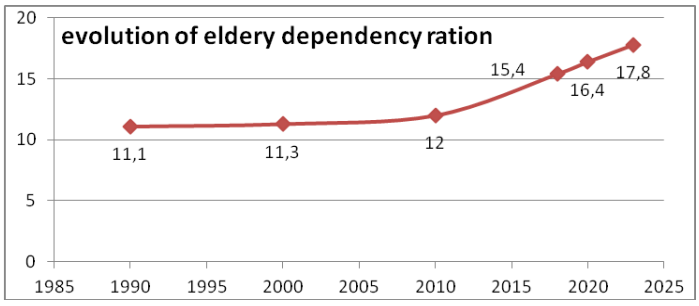
Source: Prepared by the researcher based on data from the National Statistics Office (Demography of Algeria: 1962-2020/2018/2020-2023).

4.4 Demographic Aging

The size of the population aged (60 years and over) is determined by the interaction of several demographic variables through changes in fertility and mortality rates and the steady increase in life expectancy at birth and at ages of sixty and seventy-five years old. The transformation in this demographic segment necessitates specific qualitative requirements related to material, health, and social care—needs that this segment previously contributed to during their active life stage through contributions to pension funds. As they age, their status shifts from providers to dependents; thus, as the size of this segment increases, changes occur in dependency ratios and aging indicators.

4.4.1 Dependency Ratio : Also known as the economic burden ratio, it is defined as the ratio of elderly individuals to the working-age population (aged between fifteen and fifty-nine). It is calculated as the number of individuals aged sixty years or older relative to those aged fifteen to fifty-nine multiplied by one hundred (100). This ratio illustrates the burden placed on economically active individuals—a burden that steadily rises with an increasing proportion of elderly citizens.

Graphical Representation No. (02): Evolution of Elderly ;Dependency Ratio Across Different Time Periods



Source: : Compiled by the researcher based on data from the National Statistics Office

4.4.2 Aging Index

The aging index plays a crucial role in planning policies regarding infrastructure provision and human resources needed to meet the needs of this vulnerable segment characterized by frailty and vulnerability. It is defined as the number of individuals aged sixty years or older per one hundred individuals in total population or per one hundred individuals under fifteen years old; like other demographic indicators, this index has shown a consistent increase year after year—highlighting the urgent need for sound planning that aligns with the specificities of this community segment.

After recording an index value of 6.59% in 1966, indicating that for every one hundred individuals in society there were 6.59 elderly individuals (aged sixty years or older), this value reached 10.5 elderly individuals per one hundred people by 2023.

5 Discussion of Results:

The demographic transitions in Algeria, significantly influenced by the health system through planning policies, have spanned many years from independence to the present day. This is evident in the following aspects:

The gradual and continuous decrease in crude death rates is a positive indicator for health development. This rate declined from 15.87‰ in 1967 to 14.36‰ in 1977, dropping below ten in the following years and reaching 4.15‰ in 2023. This period also saw a reduction in infant mortality rates and a significant decrease in general and specific fertility rates. The number of children per woman fell from 7.60 in 1962 to 5.32 in 1988, stabilizing below three children per woman in subsequent years, except in 2018, and remained low at 2.8 children per woman in 2023. Consequently, the proportion of the elderly population increased sixfold between 1962 and 2023.

The free healthcare system improved individual health by eradicating infectious diseases and waterborne illnesses, which previously caused numerous fatalities and left survivors with various physical and organic damages, negatively impacting future health and longevity.

The health system played a crucial role in extending life expectancy at birth, which increased from 40 years at the time of independence to 53.37 years in 1977, then to 71.7 years by 1998, and reached 79.6 years in 2023. Notably, Algeria has consistently recorded a higher life expectancy for women over several years, with this gender gap fluctuating. For example, the gap was 0.02 years in 1966, 2.4 years in 2008, and 2.8 years in 2023.

The number of elderly individuals in the age groups 60-75 and 80+ has been continuously increasing, with women in these age groups outnumbering men, contrary to the younger age groups. For instance, the percentage of the 60-75 age group was 5% of the total population in 1966 compared to 1.58% for the 80+ age group, and these percentages rose to 7.83% and 2.66% respectively in 2023.

Reaching the age of 80 and above is a positive achievement for the healthcare system. However, it is not sufficient for individuals in this age group to lead a dignified life as their social needs become more significant. The presence of this age group within families is preferable, but it necessitates social support and supervision from elderly protection agencies to assist caregivers.

With more than three million individuals in the 60-75 age group and over one million individuals aged 80 and above, the healthcare sector faces a significant challenge in providing specialized care for this vulnerable group. Additionally, developmental policies must create an environment conducive to their well-being.

The dependency ratio is continuously increasing, primarily linked to the size of the active population. Conversely, the rise in the number of elderly and those under 15 years old poses a serious economic burden on the state, requiring meticulous planning and optimal utilization of the active population by providing permanent jobs to maximize contributions to the retirement fund and prevent financial hardship for the elderly.

6 Recommendations:

The study of aging requires a multidisciplinary approach, including demographic, medical, social,

psychological, and legal perspectives, necessitating targeted academic research.

The specificity of aging demands special attention from healthcare providers by establishing a branch in medical studies focusing on elderly health, similar to countries facing a significant increase in this age group. Algeria recorded over five million individuals aged 60 and above in 2023.

The needs of the elderly are diverse and extend beyond medical care. The physical, psychological, and mental changes accompanying aging require the creation of a social system addressing the multifaceted needs of this group.

Many residences are unsuitable for the elderly in terms of living conditions and mobility, forcing them to remain confined and depriving them of the freedom to move and engage in activities (gardens, cafes, visits, etc.), leading to isolation, withdrawal, and depression.

Elderly individuals, especially those who lose their independence, need special attention. This situation poses a problem for the families they live with, traditionally placing this responsibility on women, whether family members or external caregivers, necessitating social support and supervision to protect the elderly from abuse or violence.

The constitution guarantees the rights of the elderly but does not specify the environment in which they should be. Therefore, all relevant bodies must collaborate to discuss and address the apparent and latent needs of this group to achieve sustainable development goals, allowing them to live with dignity, equality, and in a healthy environment.

7 Conclusion:

The demographic changes in Algeria are reflected in the transformation of the population pyramid's structure, especially the upper segment, indicating an increase in the size and life span of this group, achieved through improvements in the healthcare and social systems. The elderly population's physical and sometimes mental decline necessitates intensified efforts from the healthcare system to meet their diverse and different needs compared to other age groups. This presents a significant challenge and burden for state policies aiming to achieve this, in line with the United Nations General Assembly's declaration for the period 2021-2030, which mandated the World Health Organization to monitor and implement the contract for advancing health in old age.

Aging remains a serious topic requiring research and study in various fields, as it concerns doctors, psychologists, sociologists, demographers, legal experts, social affairs researchers, and other disciplines. Collaborative research is preferred to analyze aging and determine its needs, aiming to make it a turning point for this group in developmental policy planning.

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