
Optimal Aging in the Arab Population: Gaps, Needs, and Solutions

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Abstract

Background

The Arab population in Israel is undergoing an accelerated aging process, and the proportion of adults aged 65+ is expected to double in the coming decades. Demographic, social, and cultural changes – such as urbanization, modernization, and shifts within the nuclear family – are reshaping traditional social structures and weakening support networks for older Arab adults. In addition, significant gaps exist between Arab and Jewish older adults in health, economic status, social welfare, and access to services. These disparities affect the quality of life of Arab adults aged 50+.

Study Objectives

The study aimed to examine aging in the Arab population and identify the disparities between Arab older adults and their peers in the general population. It focused on three domains:

- Characterizing and assessing aging in the Arab population according to the national indicators of optimal aging
- Identifying issues perceived as important for optimal aging in Arab society
- Identifying barriers to the use of existing services and defining the adaptations required

Method

The study was conducted between 2021 and 2024 and combined quantitative and qualitative methods: (a) Secondary analyses of data from various sources, including national surveys; (b) In-depth interviews with 35 Arab older adults and 15 professionals; (c) A telephone survey of 800 Arab older adults.

Findings

- **Perceptions of aging and attitudes toward old age:** Aging is viewed as a natural process determined by fate and divine will; however, many Arab older adults experience a decline in their social status. Respondents described strong family ties together with a growing dependency on their children, and a gap between expected familial support and the reality of the erosion of familial responsibility for their care.
- **Health and functioning:** Life expectancy in the Arab population is lower than in the general population, and the prevalence of illness and functional limitations is higher among Arab older adults compared with Jewish older adults. Healthy lifestyle practices are less common, due to factors such as limited awareness, language barriers, lack of services, or lack of accessibility.
- **Mental and social well-being:** A high proportion of Arab older adults report loneliness compared with their Jewish peers. Although satisfaction with family relationships is high, many avoid seeking help from family members for fear of being a burden. Violence within Arab society contributes to stress, disappointment, and fear of leaving home.
- **Economic and employment status:** Arab older adults reported poorer economic status compared to Jewish older adults and a high dependency on social benefits. Their lower effective retirement age compared to the general population is one of the factors contributing to economic hardship in old age. Many women have not accrued pension rights due to nonparticipation in the labor market and subsist on social benefits and rely on their spouses, and children. Many older adults support their children financially even at the expense of their own well-being.
- **Access to and use of services:** The use of leisure services – such as day centers or clubs – and formal caregiving services is low. Barriers include social norms, economic constraints, preference for cash benefits over participation in day centers, and limited physical or geographic accessibility.
- **Digital skills:** About one-third of Arab older adults do not use digital technology. Lack of digital use limits their ability to exercise rights and access services and increases reliance on their children.

Key Recommendations

- Increase awareness among Arab older adults about preparing for old age through community-based campaigns promoting optimal aging, in collaboration with physicians, religious leaders, and social workers.
- Improve accessibility of health services by encouraging Arabic-speaking physicians to specialize in geriatrics and rehabilitation, adapting health service centers to the needs of older adults, and providing health information in Arabic.
- Strengthen mental and social well-being by developing programs to reduce loneliness and improving access to clubs and day centers, with an emphasis on physical and transportation accessibility.
- Enhance economic and employment resilience by encouraging labor-force participation among older adults through age appropriate training programs and promoting financial preparedness for old age.
- Integrate older adults into community roles to maintain social status and strengthen intergenerational ties, including involving family members in awareness and preparation processes and in encouraging older adults' participation.
- Improve digital accessibility through individualized training in the use of smartphones and online services.