Healthy Aging in Older Adults:

Promoting Healthy Aging

By

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Abstract

Healthy aging in a broader perspective entails the multidimensional processes of lifelong learning and personal development aimed at accomplishing autonomy and independence for elderly people. Thus, it requires the balance of the interactions between the various dimensions in the lives of older adults from physical health, to independence and autonomy in activities of daily living, and to social involvement. The present study identifies and discusses various important factors including physical, psychological, and societal that can promote healthy aging. Based on the premises of such factors, potential changes in public policy aimed at enhancing the mobility of older adults as well as encouraging positive behavioral changes in the lifestyles of older individuals were proposed to advance the agenda of healthy aging.
Introduction

The world is facing an unprecedented demographic milestone. 526 million people out of the global population of 7 billion in 2012 (or 8%) were aged 65 and over. By 2015, the older adult population rose by an astonishing 55 million (8.5% ratio to the rest of the world’s population) (Goodkind & Kowal, 2016), and will continue to rise exponentially. America within this world wide demographic boom, is seeing the same results due to improvements in public health, and it is projected that adults aged 65+ will surpass the 98 million count by 2060 (Mather, 2016). The remarkable improvements in life expectancy over the past decades can be viewed as a human success story of increased longevity as well as a significant challenge.

Individuals who lack access to social protections, such as healthcare, will face significant challenges due to the increasing risk of Non-communicable diseases as they age. In the United States alone, more than 90% of older adults (65 and over) reported living with at least one chronic disease in 2016 (National Council on Aging, 2017). Furthermore, the lack of mental health assistance and awareness among older adults poses severe limitations on their ability to exercise control over their lives and function properly (Conner, Copeland, & Grote, 2010). Not only is the call for governmental and societal interventions becoming increasingly important for the well being of the aging population, but also for individuals themselves to care for their bodies.

Before addressing these issues, it is imperative to focus on how societies and individuals can promote healthy aging. So what exactly does healthy aging look like? According to McLaughlin, Jette, and Connell (2012), a healthily aging adult can be defined as an individual who is not only both physically and mentally healthy, but one who is also socially engaged.
Will the significant increase in the aging population be accompanied with improved health, increased quality of life, social integration, and economic stability for those in later life? The answer to this question lies in the hands of public policy makers, communities, as well as the perceptions of people themselves on aging (National Research Council, 2001). The study of psychology along with gerontology, (which studies the aging of older adults through the scientific studies of physiology, societal changes, and implementation of their knowledge to policies), has greatly contributed our understanding of how to promote healthy aging. In the following paragraphs, this paper will aim to unravel and examine the complex web of physiological, psychological, and societal factors, which can promote healthy aging specifically among individuals transitioning from midlife into later-life (aged 65 and older).
Physical Factors

Many physiological changes occur during the normal process of healthy aging for the better or for worse. Visible wrinkles and sprouts of grayed hair are only few of the physical indicators of aging individuals in later life. Much of the complex aging process can be examined within the body’s internal systems. With old age brings the growing risk of chronic diseases and impairment of bodily functions (White, et. al. 2015). Sensory decline, such as the diminishing ability to see objects closely and hear also accompany people in the aging process and can negatively affect older adults’ functional abilities in daily life (Salvi, Akhtar, & Currie, 2006).

Though physiological changes of aging differ by individuals due to heredity, it is fallacious to simply disregard the significance of lifestyle choices, which can affect the normal aging process. Therefore, it becomes evident that proper nutrition is one factor that may help to promote longevity and suffice the health related aspect of normal healthy aging, as many diseases that older people suffer from are due to dietary factors (Ahmed & Haboubi, 2010). For example, nutritional intervention, such as incorporating Vitamin E, which functions as an antioxidant and plays a role in aiding the anti-inflammatory processes, into people’s diet may be correlated to the decreased risk of cardiovascular disease (Lobo et al., 2010). More importantly, refraining from substance abuse as well as from overeating can significantly decrease the risk of chronic illnesses since drugs, like tobacco, can increase the victim’s risk of cancer (NIHD, 2014) and since overeating can lead to obesity, which is correlated to heart disease (Nakamura, Fuster, & Walsh, 2014).

Apart from chronic illnesses and sensory decline, healthy older adults are at more risk of falls than any other age group, with around 30 to 50% in health care institutions falling annually (World Health Organization, 2007). Therefore, efforts to reduce falls have been one of the primary concerns in the public health sector. Fortunately, home modifications, such as
installing grab bars and shower benches in fall risk areas, like the bathroom, can promote physical safety for older adults (The American Occupational Therapy Association, 2010). As an alternative method to home modifications, which may be a burden to those in lower income families, engaging in regular exercise, such as Tai Chi, can decrease the risks of falling. According to a study examining the correlation between Tai Chi and fall reduction, the group of older individuals who practiced Tai Chi daily had a 55% decrease in their risk of falling when compared to the control group (Li et al, 2005).

Since the quality of life is directly related to the functional status of older adults and their feeling of control over their environment, it is necessary to promote exercise, which may reduce the risk of muscle, bone, (osteoporosis and arthritis), cardiovascular, and metabolic diseases (National Institute of Arthritis and Musculoskeletal and Skin Diseases, 2015). Furthermore, frequent physical activity accompanied with proper nutrition has been labeled as the best type of “medicine” for all age groups and studies have shown the promising cognitive benefits of physical activity. For example, researchers in the Nurses’ Health Study found that female participants between the age of 70 to 81 who were in the highest quintile in physical activity had 20% lower risk of cognitive impairment than their counterparts who scored lowest in the physical activity quintile (Weuve et al., 2004).
Psychological Factors

The important factors to be considered for healthy aging within the psychological perspective include life satisfaction, positive well-being, and cognitive functioning (McKee & Schüz, 2015). When concerning the mental health of older adults, the most prevalent issues are the prevention, treatment, and quality of life interventions (Fingerman & Constança, 2017). Among these issues, depression can be thought of as a paramount challenge among senior citizens because it is often undiagnosed and untreated, yet widespread (Conner, Copeland, & Grote, 2010). This problem is particularly concentrated in rural and underserved groups, for those living in poverty, or in some ethnic groups (Cutrona, Wallace, & Wesner, 2006).

Conclusions drawn from a 2009 meta regression analysis study suggest that psychological therapy is equally effective in older and younger adults with depression (Cuijpers et al., 2009), which shows the importance of various psychotherapies, like cognitive behavioral, interpersonal, and psychodynamic psychotherapy. There has been skepticism towards whether or not “Reminiscence Therapy,” which involves reflecting on the past to improve psychological well-being, can actually boost well being in older adults. However, this type of therapy has shown promising leads according to meta analysis studies, which showed that patients after three months of “Reminiscence Therapy,” reported overall positive mental health and cognitive performance (Gaggioli et al., 2014). If further studies confirm this, we can address the often overlooked psychological problems for the elderly by increasing access to mental health services, which will reduce healthcare expenditures by decreasing the frequent medical procedures and primary care visits.

Psychologists in the field of positive psychology also have presented several ways older adults can increase their overall subjective well-being, such as through social participation. When surveying more than 200,000 people in 136 different countries,
researchers found that everywhere, people reported feeling happier when spending money on others than on themselves (Aknin, Norton, & Dunn, 2009). Moderate charitable giving has also been seen to have a significant effect on older people’s psychological well-being and has been found to have positive physical, functional, and mental health outcomes for elderly volunteers (Choi & Kim, 2011). Studies examine that altruism and a sense of social responsibility accompanies people when they feel like they can actively contribute to society.
Social Factors

Since an active and socially engaged lifestyle as well as autonomy over one’s environment are important factors to consider when addressing healthy aging, the narrowing of social network connections and opportunities to exert personal control over environments (common amongst elders especially after retirement), poses challenges to their self-perceived levels of subjective well-being (Coehn, 2004).

Fortunately, many social interventions, such as making contributions within volunteering organizations and investing time into leisure activities, have shown to enhance the subjective well being of older individuals (especially for those transitioning into retirement). Older adults who reported that they were useful to their friends and family had lower rates of disability and mortality seven years later when compared to older adults who rated themselves as lower on their perceived usefulness to their social network (Greunewald et al., 2007). This means that older adults can replace lost social roles with compensatory activities, like volunteer work, and boost their self-esteem, while preserving self-identity. For example, adults with frequent participation in volunteer work, reported greater levels of healthy wellbeing according to a study that interviewed members of an environmental organization (Wong, 2010). Furthermore, these volunteers enjoyed even more benefits when the organization provided training, support, and flexibility in the decision-making processes, which shows the overall importance of the decision-making community environment when promoting healthy aging.

Moving on, it is also imperative to address the ways by which communities can increase access to forms of social support, vital to the healthy aging of older adults, especially since the narrowing of social networks can be attributable to the more frequented losses of loved ones amongst older adults. Maintaining continuity in the realm of social participation are strategies older adults may be able to use in order to cope with spousal loss because the
opportunity to express one’s grief may help attenuate the negative outcomes of bereavement (Tatum, 2006). The building of non-profit organizations such as “Vital Communities” within rural and urban communities can help individuals cope with spousal loss by connecting their strengths with community assets and creating a body of people who can mutually care for each other.
Conclusion

Keeping in mind that psychological, social, and physical factors are all interwoven and correlated with each other, it is crucial for older adults to have an integrated perspective on adopting healthy lifestyles, so that they can enjoy all aspects of healthy aging. Older adults in particular, must break the existing barriers, which myths create, such as the stigma that frailty prohibits them from physical activity. Arbaje explains that it is a common misconception both adolescents and elders to think that old age is associated with the loss of balance, when in reality, the loss of balance are the symptoms of sedentary lifestyles (Seaton, 2015). Habitual inactivity among older individuals has been increasing over decades so the need to examine behavioral and lifestyle changes has become an ever pressing issue for today’s gerontologists as well as psychologists.

Pioneering psychologist, William James once explained that habits, in particular, make up a vital part of our behavior, which in return, influences our perceived quality of life (James, 1890). According to previous studies examining how new habits are built (Clear, 2014), it takes more than two months before new behaviors become automatic (though it may vary by person). The question then becomes, how can individuals foster positive physical habits? Self-motivation and perseverance on the individual’s parts are promising catalysts for beneficial physical change as people transition into later life. Setting goals and positive reinforcers when scheduling exercise regimes can quicken the realization of such physical benefits. A multitude of studies have confirmed the benefits of continued (habitual) sessions of physical exercise (Warburton, Nicol, & Bredin, 2008; Weuve et al., 2004). If exercising is not a preferred choice, then opening oneself up to participation within preferred communities could be an alternative approach to healthy aging and successfully help older adults adjust to healthy behaviors. In this subtle behavioral transition, older adults must also realize their potential to continue contributing to the community.
Moving away from lifestyle and behavioral changes, it has become apparent that larger governing sources like public policies play a substantial role when determining the quality of the life in senior citizens. In the coming years, it will be of paramount importance for psychologists and policy makers alike to come up with creative changes in public policy for older adults, especially for those persons with disabilities or chronic diseases.

In this discussion, transportation and enhancing the mobility of older adults must be put on top of a pedestal for evaluation. As more than 20% of Americans over the age of 65 do not drive a vehicle, improving transportation systems has become a must, so that senior citizens can take more control over their lives and enjoy opportunities for social engagement by being able to freely explore the environment (Suttie, 2014; Shallcross et al., 2012). Experts must pay closer attention to the mobility of the community of older people as current public investment in senior transportation alternatives lacks resources.

Although there are several programs and non-profit organizations available, which provide safe routes to transits, such as “Bus Stops Under EI,” or covers rural areas such as “Ride Partners,” there is still a growing need to pass bills on a national and local level for more funding and for creating incentives for transit operators and local communities to engage in new practices. This can be benefited through the coordination of the existing transportation programs aforementioned.

Funds can be channeled towards supporting research on how and where to implement the transportation options already open to senior citizens so that its positive impacts will best serve the physical and social well being of older adults. Case studies can be carried out evaluating positive and negative effects of the existing supplemental transportation system on senior citizens’ self reported levels of well-being and physical health, which can then be used to evaluate which programs would fit the needs of the older population the most. It is
important for public policy makers to work with gerontologists as well as psychologists in order to evaluate rural and separate ethnic communities differently as their interests could vary from the urban or homogenous populations.

In all, longer lives must be thoroughly planned for in order to prepare for the increasing numbers of persons who are surviving to older ages, both on an individual and societal level and promote healthy aging. The path, however, towards promoting the physical, psychological, and social well-being, all required to fit the terms of healthy aging, will be complex. Yet, psychology and all of its subfields, has led way towards understanding the dynamics of what a healthy society truly is. We must be reminded that there can always be room for positive change as long as policy makers, communities, and people themselves are willing to rally their support behind healthy longevity.
REFERENCES


