

Aging Families—Series Bulletin #3

Successful Aging: Is it Fact or Fiction?



This bulletin is the third in a series of bulletins on later life family relationships. Because the manner in which individuals' age is directly influenced not only by genetics but more importantly by their immediate environments, including the family, this particular publication presents the current state of knowledge on the concept of "successful aging."

Howard

Howard is 96 years old and lives with his wife, Betty. He has always loved learning new things and has been an avid reader all his life. Howard knows he is very fortunate to be able to live at home and hopes his health remains stable. Despite what he has always thought of as his "good genes" (Howard's mother lived to be 101), his world has become more limited recently. He is no longer able to deliver meals on wheels or pay visits to friends around the community. Even going to church on Sunday has become difficult. Although Howard is experiencing physical changes, he continues to stimulate his mind by reading, listening to the radio, watching the news on television, and visiting with others on the phone. Rather than focusing on what he can't do, Howard chooses to focus on the pleasures he still enjoys, such as watching the birds on his deck and counting the blooms in the garden outside his window. Howard feels very strongly that aging is a challenge but also a privilege. When asked what he thinks is the most important factor in living a long life, Howard answers, "Loving relationships! It is our contact with others that gives meaning to life!"

Successful Aging: Is it Fact or Fiction?

Despite the fact we are all aging from the moment of birth, the process of aging



is often a topic most individuals would prefer not to discuss. Largely as a result of negative societal images of aging, cultural standards of beauty, and economic standards of productivity, aging is frequently associated with the 4Ds; these 4Ds include, dependency, disease, disability, and depression (Scheidt, Humpherys, & Yorgason, 1999).

More recently, in spite of the negative images and attitudes towards aging that permeate media outlets, increasing attention is being paid to the idea of aging "successfully." Usually this concept refers to defying historical stereotypes of aging and living long, happy, and healthy lives. Although the concept of "successful aging" has been labeled an oxymoron, it appears to have captured the attention of the general public.

This popularity is exemplified by the number of books available today at neighborhood bookstores that claim to have the secret to aging successfully. What consumers may not realize is that research on the aging process has been taking place for quite some time. More specifically, theories or models of “successful aging” have been in existence since the 1950s, however, they were not labeled as such. In fact, models of how best to age are as numerous as they are diverse. For example, Erik Erikson, a social scientist famous for his work in cognitive development, was the first scientist to describe adult development in terms of progress as opposed to decline. In the latter four stages of his cognitive development theory (Identity vs. Identity Diffusion; Intimacy vs. Isolation; Generativity vs. Stagnation; and Integrity vs. Despair) Erikson portrayed adults as broadening their social networks and fully participating in life (Erikson, 1950; Vaillant, 2002). In addition to Erikson, other theories that propose methods of aging successfully include Havighurst’s “activity theory” published in 1953. This theory emphasizes the importance of remaining active in later life and replacing lost roles with new roles. Cumming and Henry’s “disengagement theory,” though not widely popular, characterizes successful aging as accepting the loss of power that comes with old age (cited in Baltes & Carstensen). More recently, Ryff (1989) proposed a more integrative model of successful aging that includes six separate criteria (positive social interactions, autonomy, a sense of purpose, personal growth, self acceptance, and environmental fit). Finally, Baltes and Baltes (1990) portrayed successful aging as a process involving selection, optimization, and compensation that requires the prioritization and utilization of resources as well as adaptation (Fisher & Specht, 1999).

Why study “successful aging?”

One of the primary reasons the concept of successful aging is receiving societal attention is due to the dramatic increase in the number of older adults surviving into old age. This demographic phenomenon has peaked and influenced the attention of researchers for decades but it is not until recently as the Baby Boomers (born between 1946 and 1964) enter midlife that more societal attention is being focused on the process of aging and the implications of aging for individuals and society.

Over the course of the 20th century, America (as well as other developed countries) witnessed a dramatic increase in the life expectancy of both men and women. Never before in the history of the human species has there been such large numbers of people living to be very old. For example, at the turn of the 20th century, approximately 4% of the U. S. population was over the age of 65; today that percentage has increased to 13%. The percentage of adults over the age of 65 is predicted to be at 24% by the year 2030 (citation). While the entire population of the United States has tripled since 1900, the number of older adults (>65), which is currently 33 million, has increased eleven-fold; thus making older adults the fastest growing segment of the U. S. population.

In addition to an increase in life expectancy, we have also witnessed a dramatic decrease in mortality (a decline in the death rate) that has also contributed to the large number of older adults living at one time. Mortality has decreased first among children and second among middle-aged and older people. It is the reduction in infant mortality and childhood death that has had the greatest impact on who constitutes the U. S. population; because fewer children die, more can live to old age. Due to better

prenatal care, clean water, better food supplies, immunizations, and antibiotics, more children are surviving childhood. Additionally, adults are taking better care of themselves through greater health awareness and prevention behaviors, and the medical community is taking better care of people through prevention, intervention, and treatment opportunities (Rowe & Kahn, 1998).

Interest in the concept of successful aging also has resulted from a realization that aging research is uni-dimensional. Historically, researchers who study aging have been preoccupied with disease and disability. This emphasis on the negative aspects of aging served to contribute to and soundly reinforce the negative portrayals and myths associated with aging that have become such a foundation of the American culture. By only exploring one side of the aging process, gerontological researchers were taking a uni-dimensional approach to aging; one that did not accurately represent the whole picture. A multidimensional approach to the study of aging that recognized and valued the multiple dimensions of the aging process was encouraged beginning in the mid-1980s (Vaillant, 2002). This shift in emphasis resulted in greater investigations into the more positive aspects of aging and the inherent potential of older adults (Baltes & Carstensen, 1996; Rowe & Kahn, 1998).

At this time, aging researchers began asking different questions, for example:

- 1) "Is aging only a process of decline and debilitation? What about growth?"
- 2) "Don't lifestyle factors, psychosocial factors, and contextual factors impact how we age?"
- 3) What can we learn from individuals as they age, especially from those who experience "normative" or

"usual" aging as opposed to "pathological" aging?

- 4) "Are there interventions that prove we do have the potential to learn, and change and grow as we age?"

Research on Successful Aging

The MacArthur Foundation study:

The purpose of the MacArthur Foundation study was to examine and evaluate, longitudinally, methods for improving the physical and mental abilities of older Americans. What is unique about the MacArthur study is the interdisciplinary nature of the research project. The study consisted of sixteen scientists from a variety of different disciplines (i.e., biology, neuropsychology, sociology, geriatric medicine, etc.). Over the course of ten years, this "MacArthur group" of scientists met regularly to present and discuss their individual research programs related to aging.

In the book *Successful Aging* authored by John Rowe and Robert Kahn (1998), the results of the many research projects are compiled and presented as strategies for middle-aged and older individuals to apply to their lives and increase their chances of having a positive aging experience. Overall, these numerous studies showed that individual lifestyle choices do in fact influence our aging experiences more than previously thought.

According to the authors, Rowe and Kahn, successful aging is defined as "...the ability to maintain three key behaviors or characteristics" (1998; page 38).

- 1) Low risk of disease and disease-related disability
- 2) High mental and physical function
- 3) Active engagement with life

Although there is a hierarchical order among these components with avoiding disease and disability coming first in order to enable the remaining two components, a combination of all three factors is meant to represent the concept of successful aging most accurately. The authors present each of these components individually and talk about some of the risk factors associated with them. Additionally, they make various suggestions on how to alter one's lifestyle in hopes of achieving each component of their definition of successful aging.

One example of a study investigating the potential of older adults to maintain physical functioning was titled "Pumping Iron in the Nursing Home" (page 106). This study involved frail older adults up to 98 years of age who lived in skilled nursing facilities. The purpose of the study was to assess the impact of weight lifting on physical functioning and mobility in later life. Over a period of eight weeks, nursing home residents lifted regular weights three times a week. Results showed that muscle strength increased by 174% on average and walking speed increased by 50%. The individuals were able to maintain their new functioning level by continuing to do weightlifting exercises one time per week.

Unfortunately, despite strong scientific evidence, weight-training exercise is not frequently applied to older adult populations. Likely this resistance results from societal assumptions that individuals over the age of 80 cannot possibly participate in weight-lifting exercises. This societal misconception is disturbing when supervised weight-training among older adults has been proven to significantly improve daily mobility, decrease injuries, and falling, as well as impact other health problems (i.e., osteoporosis, heart health, and lung capacity).

An important point to emphasize is how a narrow approach to aging can limit one's ability to discover and support potential strengths and abilities of older adults. Because we don't associate "pumping iron" with people in their 90s, we neglect to ask questions that might reveal the potential of older adults to improve their abilities, as was proven in this study. By thinking "out of the box" these researchers found that something as manageable as a one-week 30 minute set of exercises with weights has the potential to significantly influence the ability of older adults to walk, stand, lift, and maintain their balance.

The Harvard Study of Adult Development

The Study of Adult Development at Harvard University is the longest study on aging ever conducted. The study consists of 3 separate cohorts and a total of 824 individuals (both men and women) recruited as teenagers and followed for their entire lives. The three groups include a (1) Harvard Cohort consisting of 268 "socially advantaged" male Harvard graduates born around 1920; (2) an Inner City Cohort consisting of 456 "socially disadvantaged" men born about 1930; (3) 90 middle-class, intellectually gifted women selected from the Stanford University "Terman Women Study" study (which is the longest prospective study of women's development in the world with an original sample of 672) born between 1908 and 1914.

In the book *Aging Well* (2002) authored by the director of the Harvard Study of Adult Development, Dr. George Vaillant, the results of this remarkable project are presented along with participant profiles that provide personal examples of study findings. In particular, Dr. Vaillant emphasizes that successful aging or "aging well" is less dependent on genetics than previously thought. The genetic cards we

are dealt at birth only partly influence our aging experience. What research is showing is that there are issues we can control or at least influence in relation to how we age. A list of factors that were found to contribute to successful aging experiences include:

- Seeking and maintaining positive and fulfilling relationships with others. Relationships that help us to heal and grow usually require the ability to practice gratitude, forgiveness, and intimacy.
- Practicing generativity; being interested and concerned about the lives of others and being able to share and give of oneself.
- Having a sense of humor and the capacity to laugh and play well into later life.
- Learning to make new friends and younger friends as we lose older ones was found to be more important to positive aging than retirement income.
- Practicing intellectual curiosity; having the desire to learn new things and being open to new ideas and perspectives.
- Displaying graceful acceptance of one's limitations sometimes referred to as the "indignities of old age" as well as accepting the assistance of others.
- Reflecting on and appreciating the past but living in the present.
- Focusing on good things and the good people who happen to us at any age contributes to an enjoyable old age as opposed to focusing only on the bad things that happen to us.

The primary theme that is emphasized in both of these revolutionary research projects (i.e., the MacArthur Foundation Study and the Harvard Study of Adult Development) is that as individuals, we have more control over our own aging experience than previously thought. This

is not to say we are completely and totally responsible for our aging experiences. It is true that genetics do play some part in how we age, however, what these studies show us is that we can reduce the impact of genetics through our own attitudes and lifestyle choices.

In addition, based on the findings of scientifically sound research, we are learning that successfully aging cannot be universally defined. Admittedly it is related to physical functioning, psychological health, and social relationships; however, each person will evaluate their aging experience differently. This term "successful aging" at its most general level implies that people reach individual personal goals. As a result, success cannot and should not be measured against one standard (Baltes & Carstensen, 1996).

While not everyone will be climbing mountains in their 90s, it is likely that a large proportion of young and middle-aged adults today will live longer and healthier lives than their predecessors. In spite of the advantages of modern medicine and civilized society, research on successful aging shows that, as individuals, we have choices to make regarding our own aging experiences. First, it is still important to make wise lifestyle choices, for example, not smoking, avoiding excessive amounts of alcohol, avoiding vehicles going 110 miles an hour, and getting regular medical check-ups. In addition, however, we also need to spend time thinking about the quality of our relationships, our attitudes toward the aging process, and our interest in the world around us. The lessons that many older adults are passing on to us through these remarkable research projects are lessons that deserve our attention. Those who have "aged" before us are the only ones that can tell us what it is like in that place of old age. We are fortunate enough to have their stories and their experiences to learn from.

What these septuagenarians, octogenarians, nonagenarians, and centenarians appear to be telling us is that we may not be able to stop the aging process but we can get a head start on influencing how we choose to age. In particular, we can begin by making choices to work on our attitudes, our relationships, and our engagement with the world around us. This way, if we are blessed with a long life, then at least we will be able to fill that time with humor, intimacy, curiosity, and gratitude.

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