

# Successful ageing: In whose hands?

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# Background

- Paradigm shift in thinking about ageing, partly due to increasing longevity
- Important to optimise quality of life in old age
- ‘Successful ageing’ is key organising principle for research, policy and practice



# Definitions of successful ageing: a small sample

- Laferriere and Hamel-Bissell (1994) – having a family and friends, living off of the land, dealing with difficult times, working hard, staying active.
- Palmore (1979): 3 criteria:
  - Survival to age 75,
  - Less than 20% disability (rated by physician),
  - Self-rated happiness, contentment, lack of worries
- Rowe and Kahn (1997): 3 components:
  - low probability of disease and disease-related disability,
  - high cognitive and physical functional capacity,
  - active engagement with life.
- Gething et al. (2003) - maintenance of mental, physical, & social health - emphasises strengths and maintaining capabilities.



# Definitions of successful ageing: a small sample

- "growing old free from deficits that are due to a deleterious lifestyle and pathology" (Stones, Kozma, & Hannah, 1990).
- "a global concept encompassing general psychological, physical and social well-being" (Day & Day, 1993)
- "the ability to grow into their later years without feeling in any significant way diminished or constrained by them" (Powell, 1992)
- "qualities of individuality and combativeness, combined with... passion for life" (Berman, 1986)
- "positive adaptation as reflected in contentment and satisfaction with quality of life as perceived by people in their advanced years" (Butt & Beiser, 1987)



# Definitions of successful ageing: a small sample

- Baltes and Baltes (1990): successful adaptation of the individual to changes during the ageing process.
- Ranzijn (1998): successful adaptation to age-related changes, as measured by self-rated psychological well-being



# Definitions of successful ageing

- Lack of consensus
- At one extreme are objective indicators, primarily health-based
- At the other extreme are self-rated (subjective) indicators, primarily psychological
- Some definitions encompass both



# Problems with definitions

- ‘Success’ is problematic, implies people may ‘fail’
- ‘Unsuccessful’ agers may not seek useful interventions or care
- Definition can be seen as prescriptive and ‘solution’ can be overly simplistic



# Problems with definitions

- Who decides?
- Voices of older people themselves relatively silent, although this is changing



# Owning the definition

- Older people taking increasing charge over their own ageing, this is likely to become more pronounced as Baby Boomer cohort ages
- Emerging area: 'Life coaches' to help set and realise goals in ageing
- Will this create a problem for service providers? (Grumpy old men and women? Recalcitrants? 'Do it because it's good for you!')



# Role of service providers

- Interventions have been historically based on a deficit model of ageing
- This may have been a barrier to the provision of effective treatments and other useful interventions
- Service providers need to be informed about the rapidly changing literature on ageing, including successful ageing
- As older people become more knowledgeable and assertive, service providers will need to be more responsive to their wishes



# Glaring gaps in the literature

- Successful ageing in:
  - Aboriginal elders
  - Other ethnic groups
  - Diverse sexual orientations
  - People with disabilities
  - Rural and remote
  - etc



# Problems with research

- Generally based on large longitudinal studies which tend to exclude marginalised and minority groups
- Analyses emphasise 'averages' (mostly on white middle-class healthy elders) and downplay individual differences ('noise' or 'nuisance variables' in statistical terms)



# Problems with research

- Causal interpretations may not be valid since direction of causality may be opposite
  - Eg physical health → psychological well-being?  
psychological well-being → physical health?
- ‘Experts’ may use research to develop ‘prescriptions’ which may not resonate with older people’s needs



# Should we throw out the term?

- Useful because it is a guiding principle for thinking about optimising quality of life in older age
- Implies that we value older people and want them to be happy and comfortable
- Alternative terms (eg active ageing, positive ageing, healthy ageing) are equally problematic
- Useful as long as we are aware of its limitations and can be flexible in its application



# Facilitating successful ageing

- Factors in successful ageing include physical health and activity, having a healthy lifestyle including good nutrition, social involvement and support, socioeconomic status, educational status, housing and transport.
- All of these factors interact with each other
- Therefore, it is necessary to intervene in all of these areas in a holistic way
- Community engagement and productive ageing emerging predictors of successful ageing
- Any prescription for successful ageing will only be a guideline, and every older person needs to be assessed on a case-by-case basis

