

# Thinking Outside the Body: Environmental Approaches for Promoting Healthy Aging



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# Creating Aging-Friendly Communities



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# Overview



1. A new perspective on “healthy aging”
2. Implications for healthy aging environments
3. Creating aging-friendly communities

# Conceptualizing “Healthy Aging”



# Perspectives on “Healthy Aging”



- Functional
- Phenomenological
- Developmental

# Functional Perspectives



- “Successful Aging” (Rowe & Kahn, 1998)
  - avoidance of disease and disability
  - maintenance of high physical and cognitive functioning
  - active engagement in social and productive activities
- “Healthy Aging” (Ryff & Singer, 2009)
  - “the maximal delay of illness, disease, disability, and hence mortality”

# “Successful aging”?

## Fauja Singh, age 100



# Who ages “successfully”?



- 10.9% of 65+ in US (McLaughlin et al., 2010)
- 8.5% of 65+ in Europe and Israel (Hank, 2011)
- Who doesn't fit? (Hank, 2011; Strawbridge et al., 2002)
  - Older
  - Less educated
  - Less well-off
  - African Americans
  - Health problems
    - ✦ (35.5% of persons with disabilities say they are “aging successfully”)



# Phenomenological Perspectives



- Health and well-being
- Keeping active
- Positive outlook
- Helping others
- Harmonious interpersonal relationships
- Deserving of respect
- Autonomy, self-determination
- Life satisfaction

(*CF*: Duay & Bryam, 2006; Havighurst, 1961; Laditka et al., 2009; Strawbridge et al., 2002; WHCoA, 1995)

# Integrated Developmental Model

[and Environmental Implications]



- **Continuity**
  - Minimal Age Barriers
- **Compensation**
  - Accommodations/Supports
  - Basic Safety and Security
- **Control**
  - Efficacy Opportunities
  - Consumer-Directed Care
- **Connection**
  - Social Engagement Opportunities
  - Intergenerational and Age-Cohort Activities
- **Contribution**
  - Civic Engagement
  - Meaningful Family Roles
- **Challenge**
  - New Opportunities for Fulfillment

# Aging-Friendly Environments



# Context Matters



"Optimal aging refers to...  
aging under development-enhancing  
and age-friendly environmental  
conditions"

(Baltes & Baltes, 1990, p. 8)

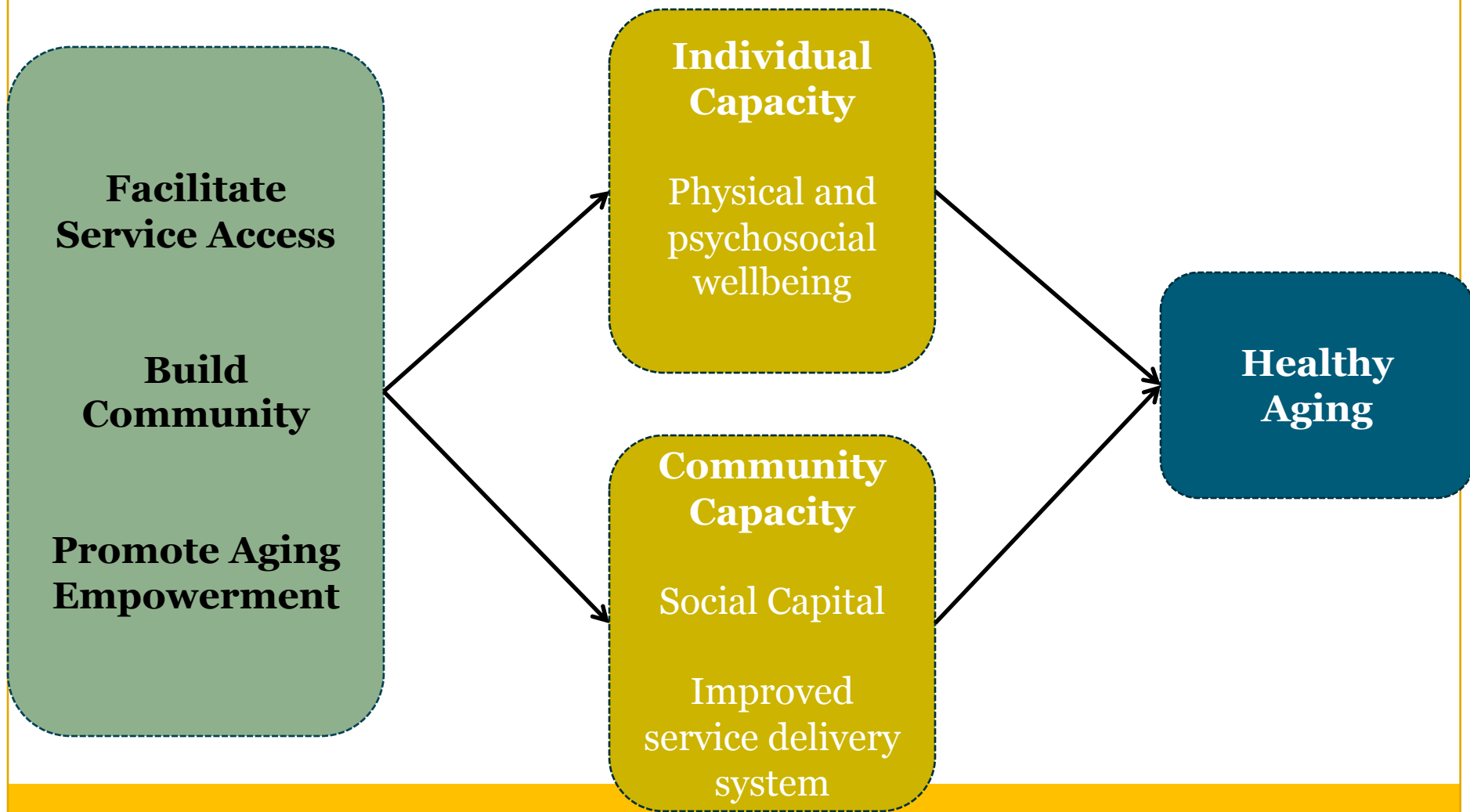
# Components of “Aging Friendliness”



- Environmental fit and accessibility
  - Built environment
  - Transportation/mobility
- Social engagement
  - Social inclusion
  - Social environment
- Multi-dimensional health and well-being
  - Health/independence
  - Safety/security

(Scharlach & Lehning, 2015)

# Healthy Aging – Logic Model



# Creating Aging-Friendly Communities



Models and  
Promising Initiatives

# WHO Age-Friendly Cities & Communities

## EUROPE

Germany, Ruhr  
Ireland, Dundalk  
Italy, Udine  
Russia, Moscow  
Russia, Tuymazy  
Switzerland, Geneva  
Turkey, Istanbul  
UK, Edinburgh  
UK, London

## AMERICAS

Argentina, La Plata  
Brazil, Rio de Janeiro  
Canada, Halifax  
Canada, Portage La Prairie  
Canada, Saanich  
Canada, Sherbrooke QB  
Costa Rica, San Jose  
Jamaica, Kingston  
Jamaica, Montego Bay  
Mexico, Cancun  
Mexico, Mexico City  
Puerto Rico, Mayaguez  
Puerto Rico, Ponce  
USA, Portland

## AFRICA

Kenya, Nairobi

## EASTERN MEDITERRANEAN

Jordan, Amman  
Lebanon, Tripoli  
Pakistan, Islamabad

## SOUTH-EAST ASIA

India, Delhi  
India, Udaipur

## WESTERN PACIFIC

Australia, Melbourne  
Australia, Melville  
China, Shanghai  
Japan, Himeji  
Japan, Tokyo





Figure 6. Age-friendly city topic areas



# The “Village” Concept: Senior Support Associations



Beacon Hill Village  
Boston, MA



# Villages → Healthy Aging



- **Facilitating Service Access**
  - Personalized advice and referrals (“conciierge”)
  - Care coordination
  - Transportation
  - Reduced service cost
- **Building Community**
  - Social engagement
  - Social support
- **Promoting Elder Empowerment**
  - Participation in meaningful roles

# Conclusion



Thank you!

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