Aging in Context:

Individual and Environmental Pathways

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Matthew A. Pollack Lecture
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Overview

- Aging as a Lifelong Process
- Roots
- Individual Pathways
  - Conceptualizing “healthy aging”
- Environmental Pathways
  - Conceptualizing “place”
- Implications for “aging-friendly” communities

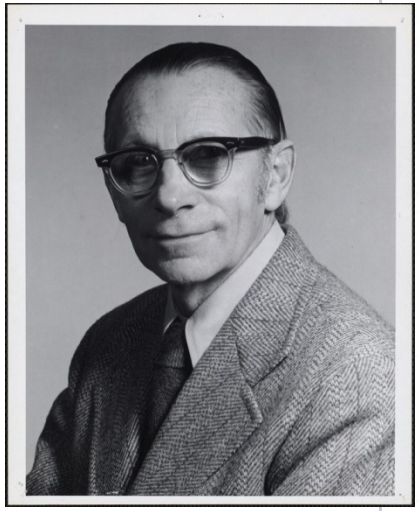
Roots

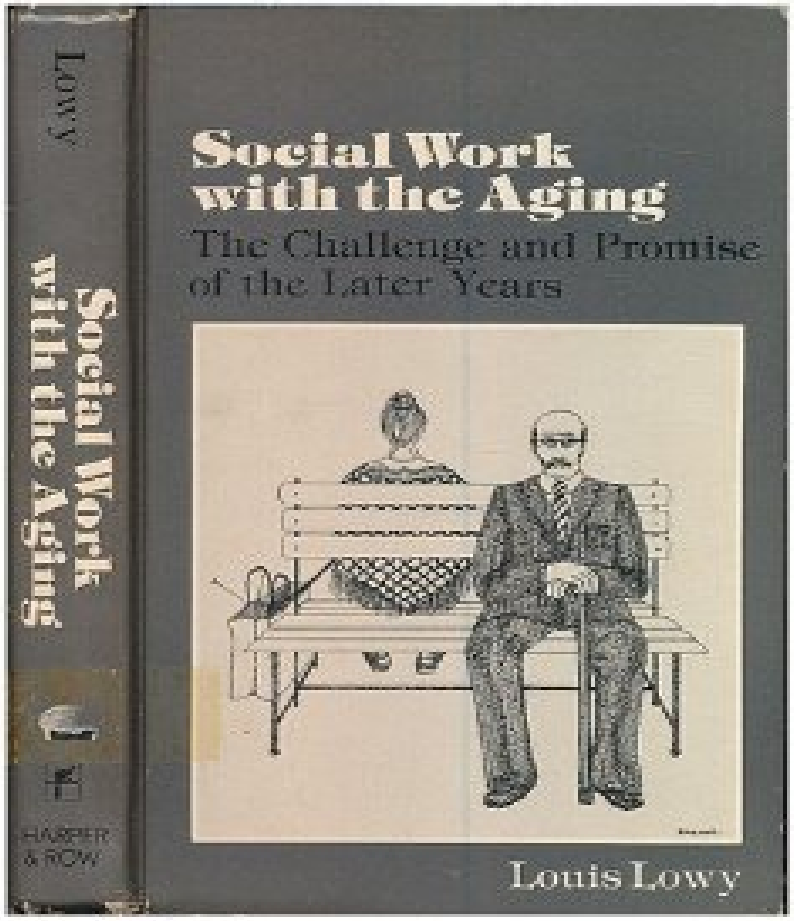
"We Stand on the Shoulders of Giants"

Roots:
Gerontological Social Work

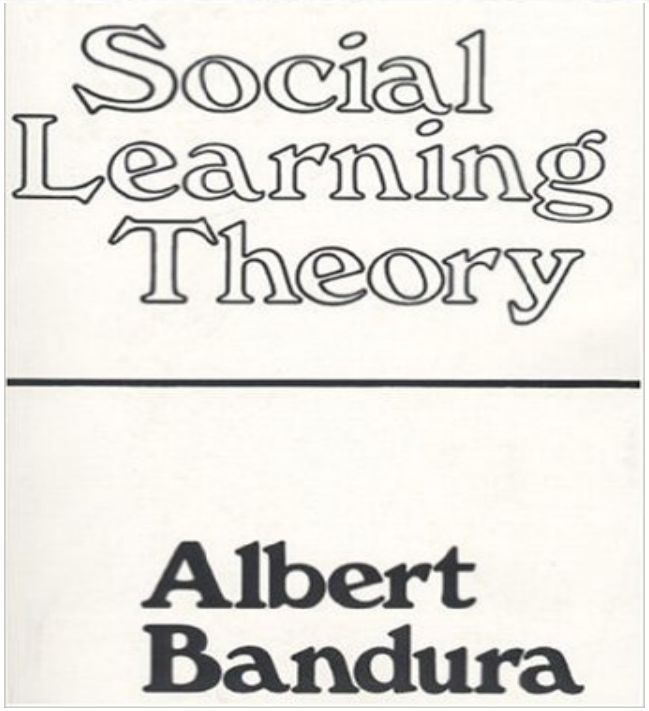
Louis Lowy

Boston University
School of Social Work





Roots:
Social Development



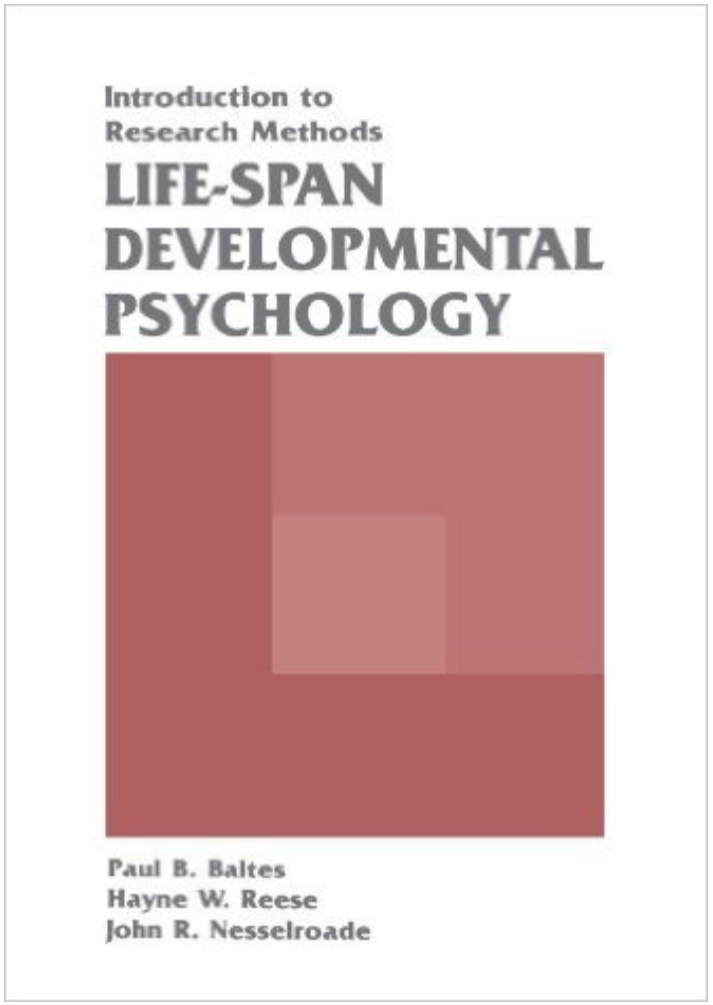
Albert Bandura

Stanford University

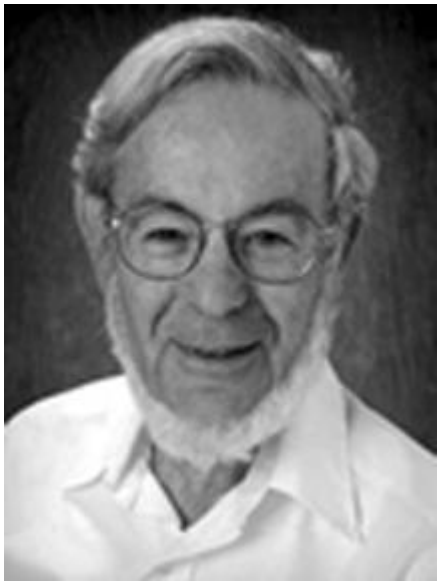
Roots:
Lifespan Development

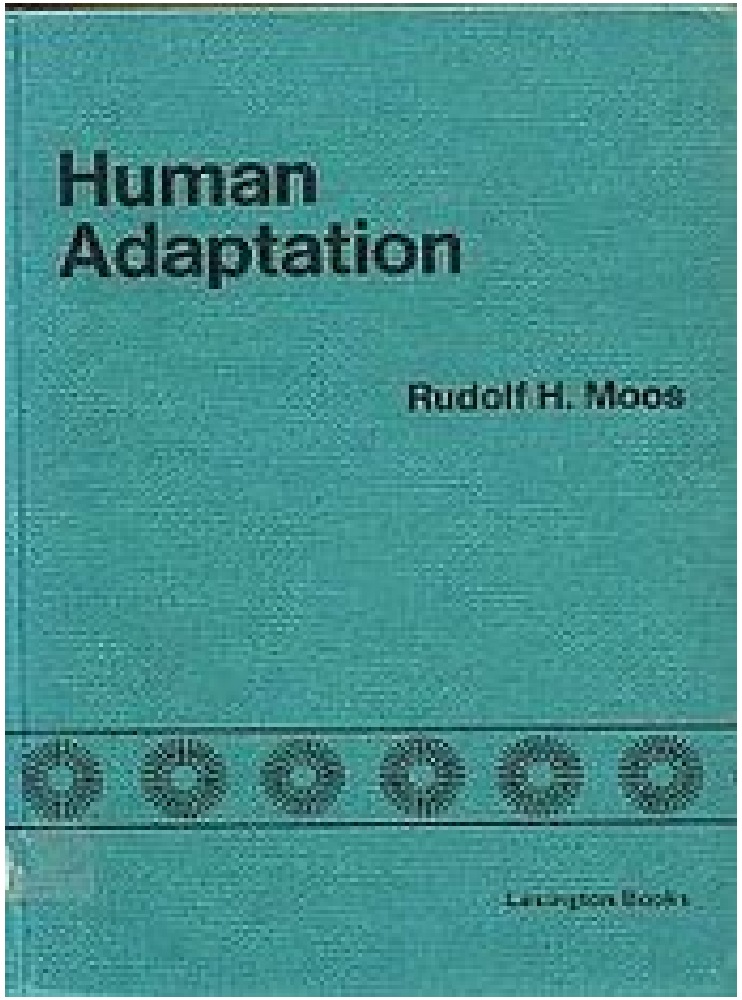
Paul Baltes

Max Planck Institute for Human Development



Roots:
Social Ecology



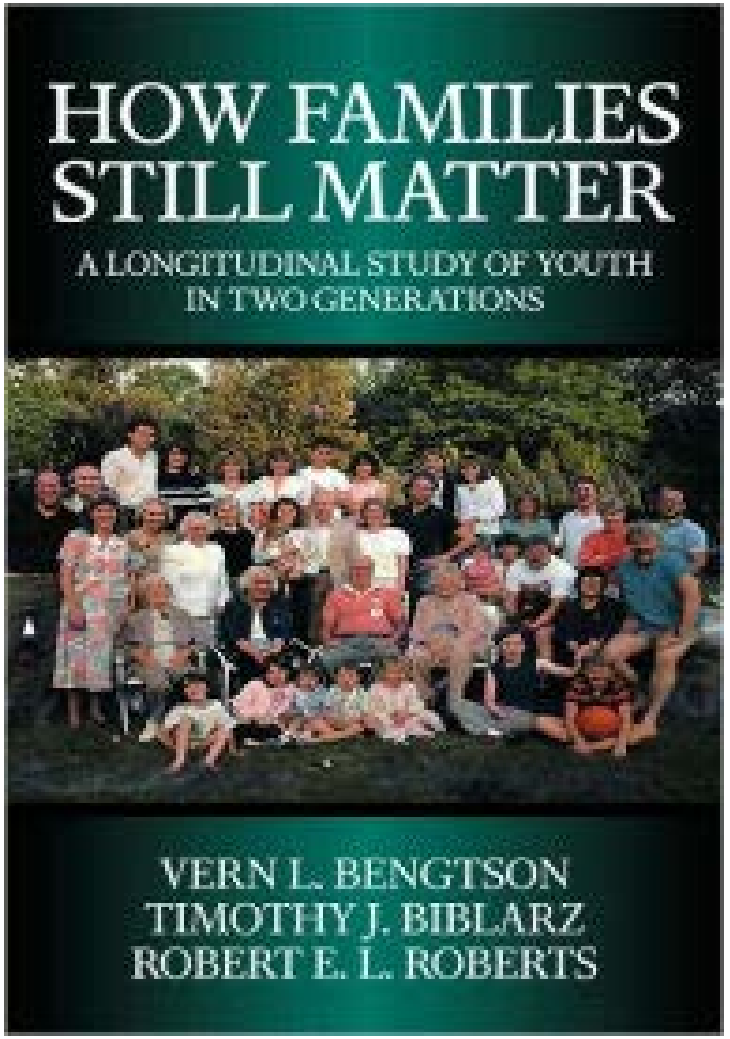


Rudolf Moos

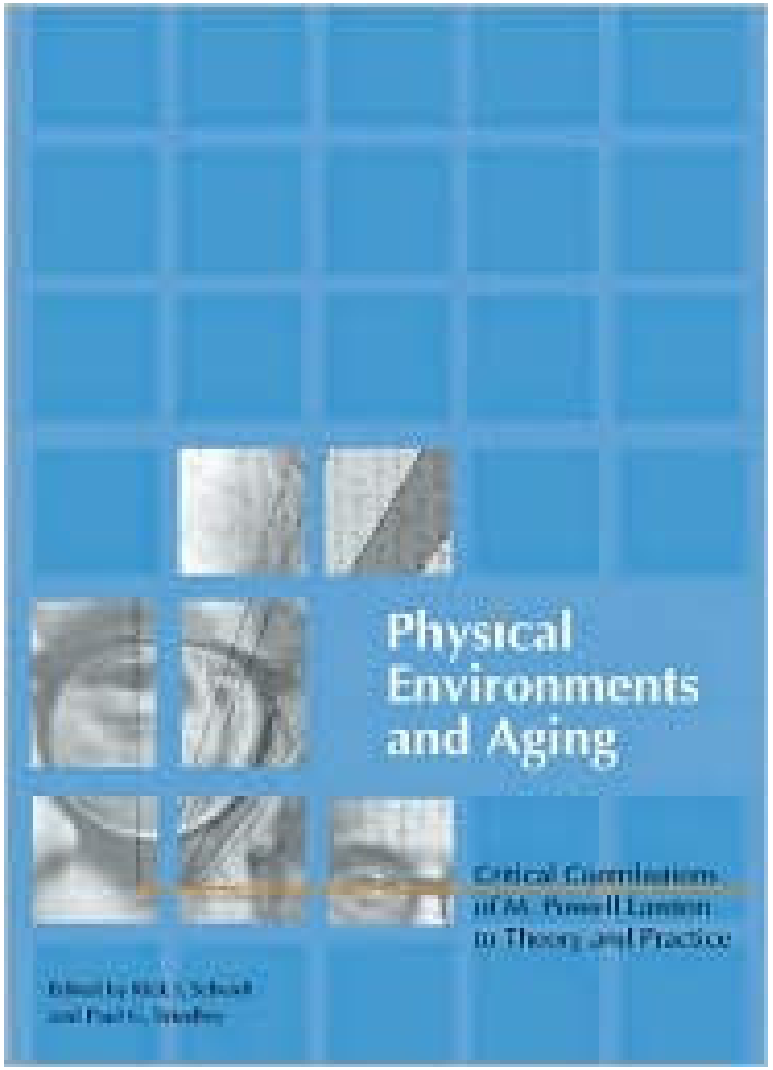
Stanford University
Palo Alto VAMC

Roots:
Family Systems

Vern Bengtson
USC
Andrus Gerontology Ctr.



Roots:
Environmental Gerontology



M. Powell Lawton

Philadelphia Geriatric Center

Individual Pathways

Conceptualizing
"Healthy Aging"

Perspectives on “Healthy Aging”

- Functional
- Phenomenological
- Developmental

Functional Perspectives

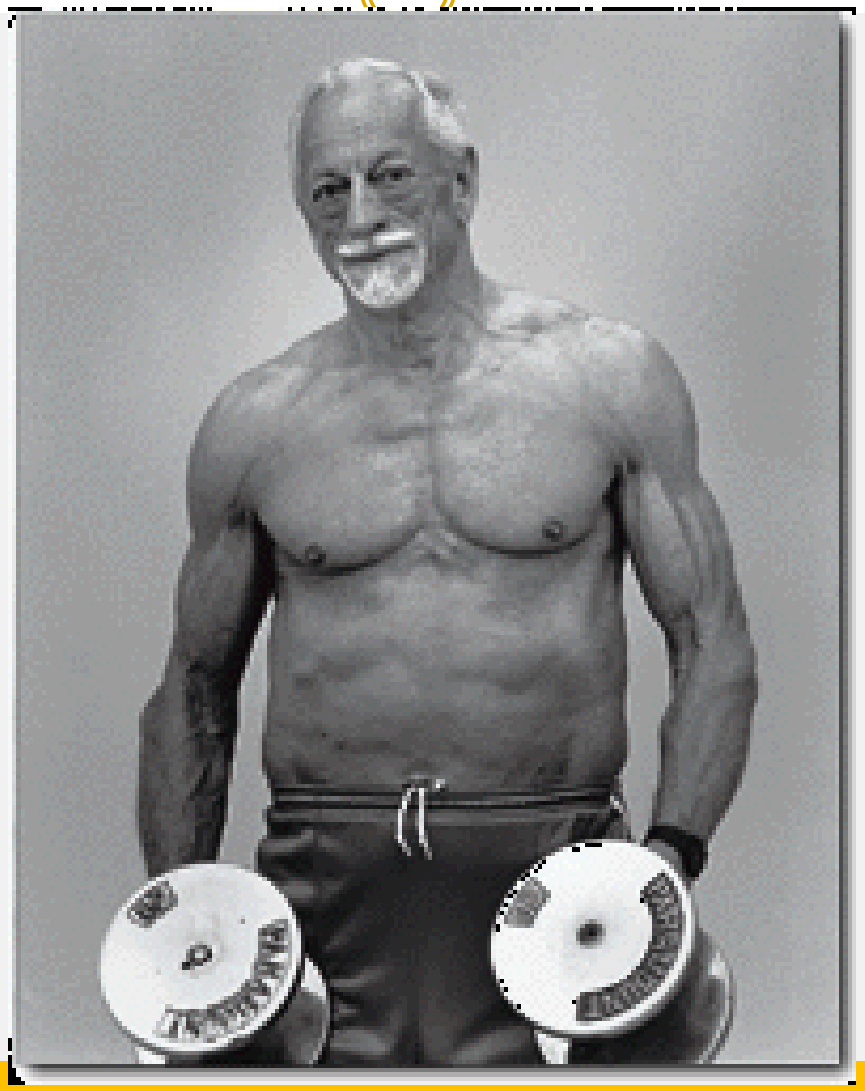
- "Successful Aging" (Rowe & Kahn, 1998)
  - avoidance of disease and disability
  - maintenance of high physical and cognitive functioning
  - active engagement in social and productive activities
- "Active Ageing" (European Commission)
  - in good health
  - a full member of society
  - fulfilled in our jobs
  - independent in our daily lives
  - involved as citizens

Functional Perspectives (contd)

- "Healthy Aging" (CDC)
  - "optimal physical, mental and social well-being and function"
- "Healthy Aging" (Ryff & Singer, 2009)
  - "the maximal delay of illness, disease, disability, and hence mortality"

“Successful aging”?

John Turner, age 79



“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)

Developmental Perspectives

- Selective Optimization with Compensation
  (Baltes & Baltes, 1990)
- Proactivity Model of Successful Aging
  (Kahana & Kahana, 1996)
- Socioemotional Selectivity
  (Carstensen, 1993)
- Vital Aging
  (Erikson, Erikson, & Kivnick, 1986)

Integrated Developmental Model

1. Continuity

- Personality stability
- Self-construct
- Self-esteem
- Stable environmental context
  - Physical
  - Social
  - Economic

(*CF*: Atchley, 1971; Kaufman, 1986; McCrae & Costa, 1990)

2. Compensation

- External
  - Environmental modifications
  - Human and non-human assistance
  - Alternative goal attainment strategies
- Internal
  - Modified goals
  - Modified social referents
  - Psychological reframing

(*CF*: Baltes & Baltes, 1990; Romo et al., 2012; Schulz & Heckhausen, 1996)

3. Control

- Primary control
  - External actions
    - Modifying the environment to facilitate goal attainment
- Secondary control
  - Cognitions
    - More attainable goals
    - Strategic social comparisons
    - Self-protective causal attributions
    - Acceptance
  - Emotions
    - Positivity

(*CF*: M. Baltes, 1988; Brandtstädter & Rothermund, 2002; Schulz & Heckhausen, 1996; Seeman & Lewis, 1995)

4. Connection

- Social engagement
  - Social interaction
  - Social networks
  - Social support
- Meaningful interpersonal bonds
  - Maintaining existing relationships
  - Creating new relationships
- Socioemotional selectivity

(*CF*: Carstensen, 1993; Krause, 2001; Seeman et al., 2001)

5. Contribution

- “Contributory orientation”
- Prosocial activities
  - Formal
  - Informal
- Socially-meaningful roles
  - Employment
  - Volunteer
  - Familial
  - Community

(*CF*: Erikson, Erikson, & Kivnick, 1986; Gottlieb & Gillespie, 2008; Kahana et al., 1987; Morrow-Howell et al., 2001)

6. Challenge

- Stimulation
  - Physical
  - Social
  - Psychological
- Dosage
  - Moderate intensity
  - Repetitive exposure
- Hormetic Effects
  - Growth
  - Resilience
  - Coping ability

(*CF*: Bortz, 1982; Calabrese & Cook, 2006; Etkin et al., 2006; Rattan, 2008; Woods et al., 2012)

Integrated Developmental Model

- Continuity [maintenance]
  - Minimal Age Barriers
- Compensation [support]
  - 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 [stimulation]
  - New Opportunities for Fulfillment

Environmental Pathways

Conceptualizing

"Place"

Context Matters

"Optimal aging refers to…

aging under development-enhancing and age-friendly environmental conditions”

(Baltes & Baltes, 1990, p. 8)

P x E x T

"Time and place therefore are matters of substance, not error;
and to understand human development, one must appreciate how variables associated with person, place and time coalesce."

(Lerner, 2007, p. 6)

Ecological Model of Aging

- **B = f (P, E, PxE)**

Ecological Framework of Place

- Setting
- Program
- People
- Activity
- Time

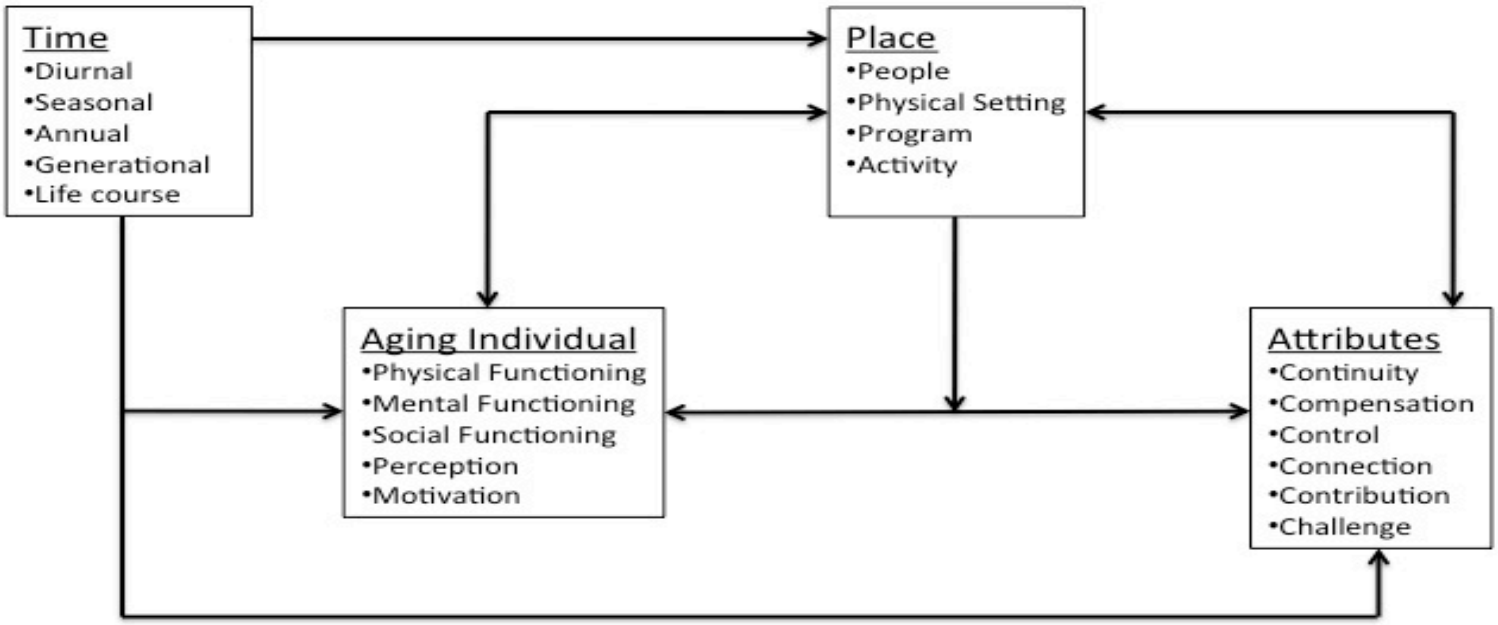
Aging-in-Place

- Processes
  - Assimilation
  - Accommodation

    (*CF*: Golant, 2011; Piaget, 1932)
- Objectives
  - Connection
  - Agency
  - Maintenance

    (*CF*: Benjamin, 1974; Leary, 1957; Moos & Otto, 1972; Olson et al., 1979; Wahl et al., 2012)

Heuristic of Aging-in-Place



Scharlach & Diaz-Moore, in *Handbook of Theories of Aging*, *3rd ed*. (forthcoming).

Implications

Conceptualizing
"Aging Friendliness"

“Aging Friendliness”

- Livability
- Elder friendliness
  - Compensatory goals
  - Enabling goals
- Development-enhancing
- Communal
- Transactional

(Scharlach & Lehning, 2015)

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)

"Aging-Friendly" Community
(Working Definition)

- "Physical-social environments which enhance P-E fit (e.g., mobility, accessibility, stability, autonomy), in order to achieve age-related compensatory goals (e.g., safety, security, physical and mental well-being) and enabling goals (e.g., meaningful social roles, personal fulfillment).

(Scharlach & Lehning, 2015)

Conclusion

What do older adults want from their environments?

- Remain in their own homes or neighborhoods
- See friends, social networks
- Get to shopping, health care
- Be safe
- Be healthy
- Be involved in the community

Maturing of America Survey, Part 2.
(National Association of Area Agencies on Aging)

Creating Aging Friendly Communities

- Enhance individual well-being
  - Physical, psychological, social, spiritual
- Improve community infrastructure
  - Social climate, accessibility, mobility
- Increase service adequacy
  - Availability, affordability, accessibility, appropriateness
- Reduce disparities
  - Economic, social, cultural, geographic, ability-related

“A Society for All Ages”

“A society for all ages is multigenerational. It is not fragmented, with youths, adults and older persons going their separate ways. Rather, it is age-inclusive, with different generations recognizing – and acting upon – their commonality of interest.”

(Kofi Annan, 1998)

For further information:

- Scharlach, A. E., & Lehning, A. J. (2015). *Creating Aging-Friendly Communities*. New York: Oxford University Press.
- Scharlach & Diaz-Moore (forthcoming). Aging-in-place. In V. L. Bengtson & R. Settersten (eds.), *Handbook of Theories of Aging, 3rd edition*. New York: Springer Publishing.
- http://socialwelfare.berkeley.edu/center-advanced-study-aging-services

Thank you!

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