

Promoting Healthy and Active Ageing

Lesson 07

Determinants of healthy ageing

Intended Learning Outcomes

- Identify determinants that promote or hinder healthy ageing.
- Analyze the influence of these determinants on the functional ability of older adults.
- Propose nursing strategies to address modifiable risk factors.
- Evaluate how personal, family, community, and policy-level determinants shape ageing outcomes.
- Integrate determinants into individualized care planning and health promotion.

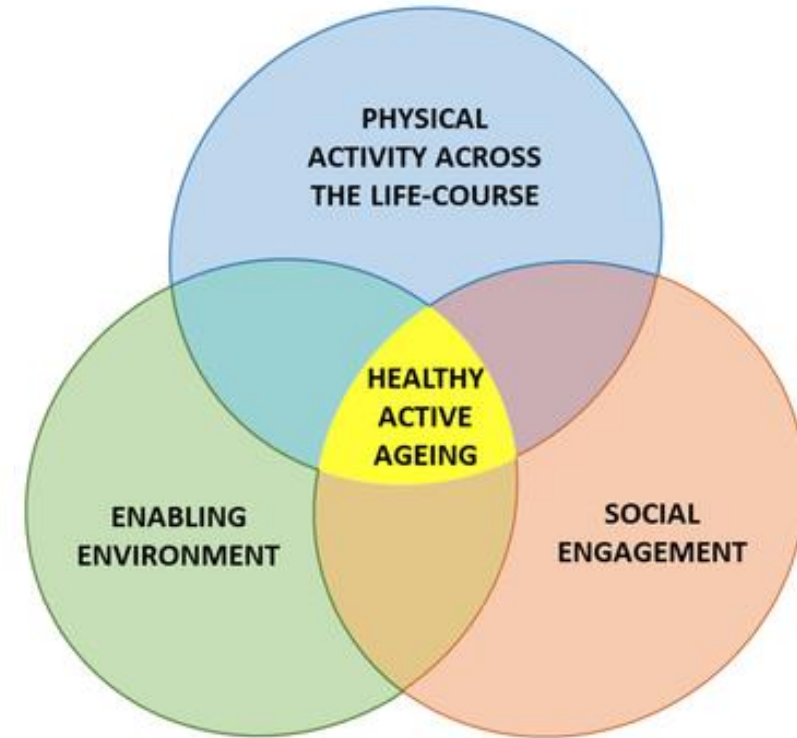
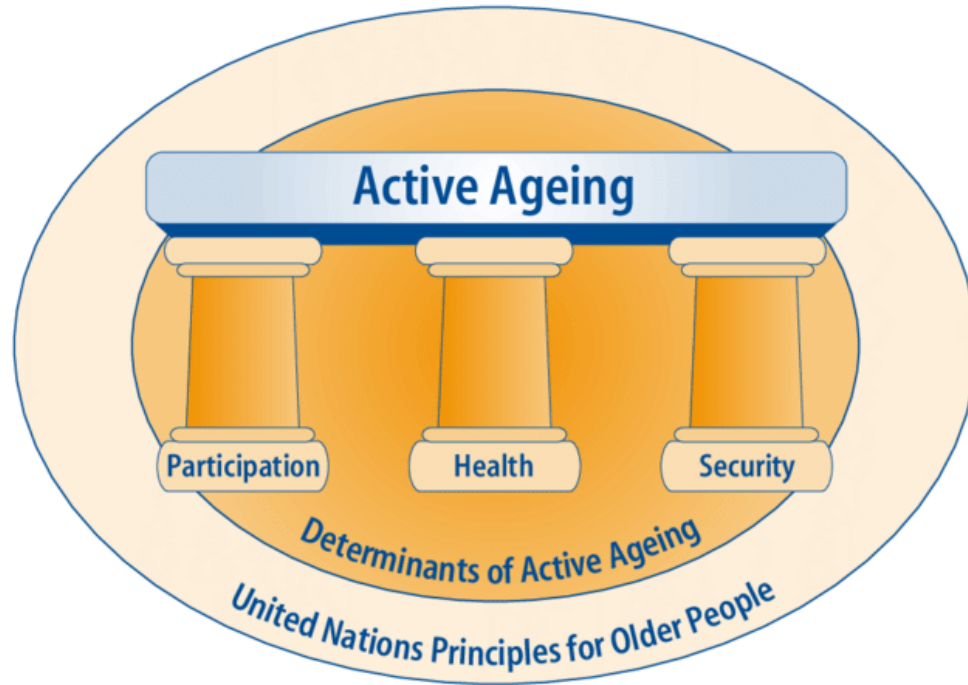
- How do we help people remain independent and active as they age?
- How can we strengthen health promotion and prevention policies directed to older people?
- As people are living longer, how can the quality of life in old age be improved?
- Will large numbers of older people bankrupt our health care and social security systems?
- How do we best manage the care needs as they grow older?
- How do we acknowledge and support the major role that people play as they age in caring for others?



What is Healthy/ Active Ageing?

- the process of optimizing opportunities for health, participation, and security to enhance the quality of life as people age.
- applies to both individuals, communities, and the entire population.
- Not merely being physically active or participation in the labour force, but also continuing participation in social, cultural, spiritual, and civic affairs.
- is important for people to understand their potential for physical, mental, and social well-being throughout their life course. It also allows people to engage in their society according to their needs, desires, and level of capacity with support, protection, and care (WHO, 2002).

Three Pillars of Active Ageing



What are the common factors that influence healthy ageing?

- Personal: genetics, resilience, lifestyle.
- Family: caregiving support, intergenerational ties.
- Community: social capital, health services, age-friendly settings.
- Policy level: pensions, social security, WHO Decade of Healthy Aging priorities.

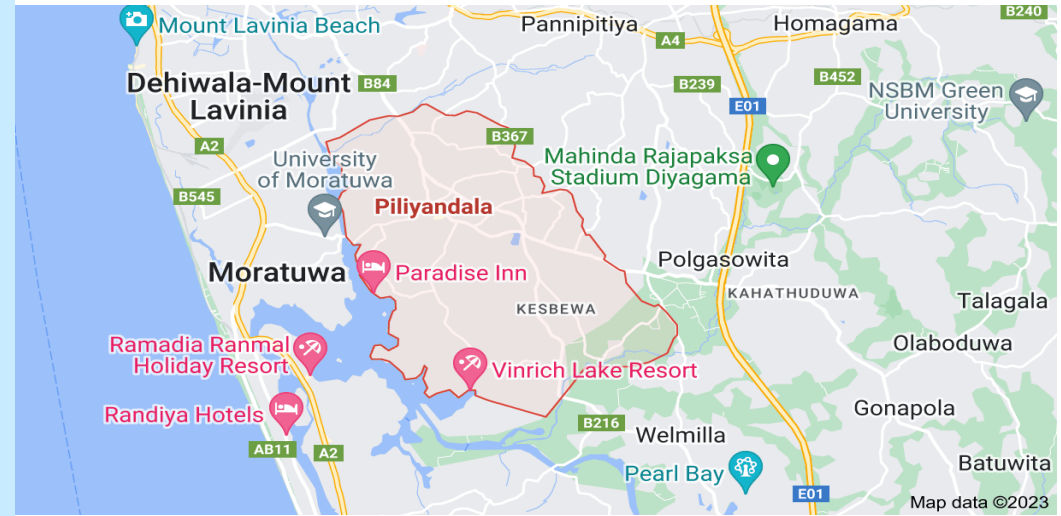
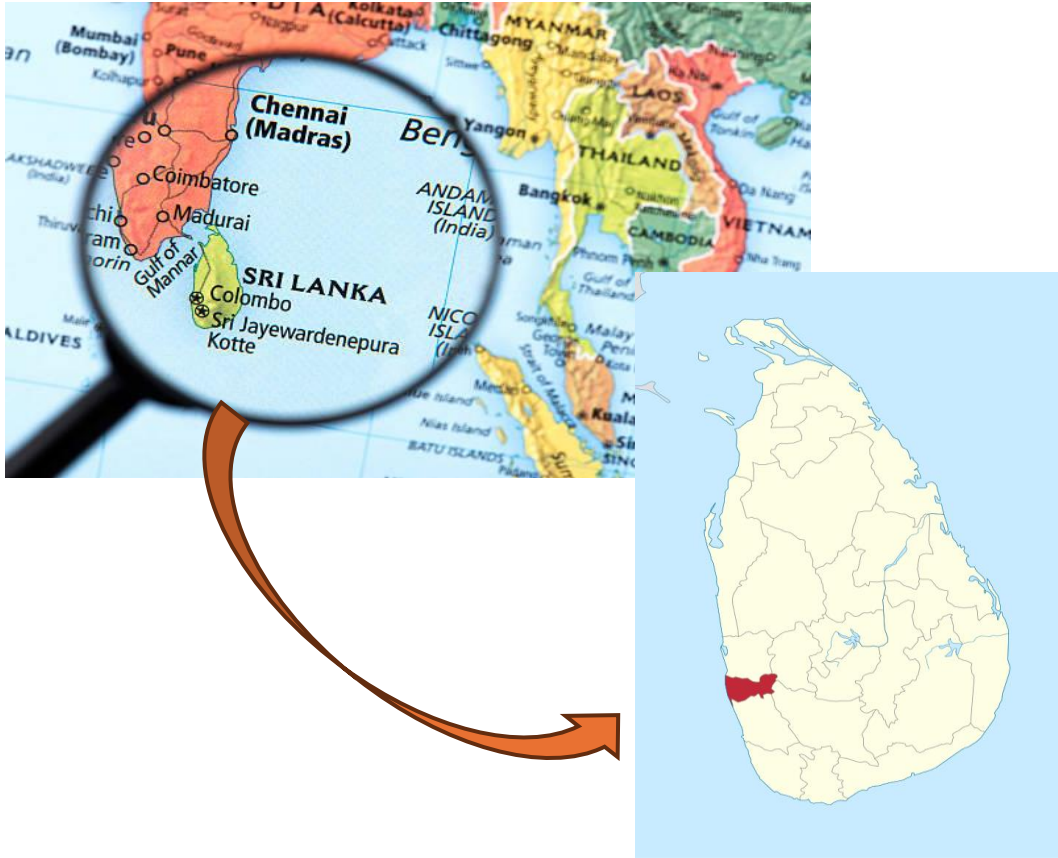
An intervention to promote active ageing among a group of older adults in an elderly care home in Sri Lanka.

Aim of the intervention

- To explore the views and experiences of older adults residing in a care home (elderly home) and their caregivers on active ageing
- with an aim of introducing ways to improve their active ageing and general well-being.

Methods and Materials

- ❑ **Design:** A qualitative intervention informed by PAR and community-based health promotion approach (Samarasinghe et al., 2011)
- ❑ **Duration:** 03 months
- ❑ **Setting:** an elderly care home located in sub urban area in the district of Colombo, Sri Lanka



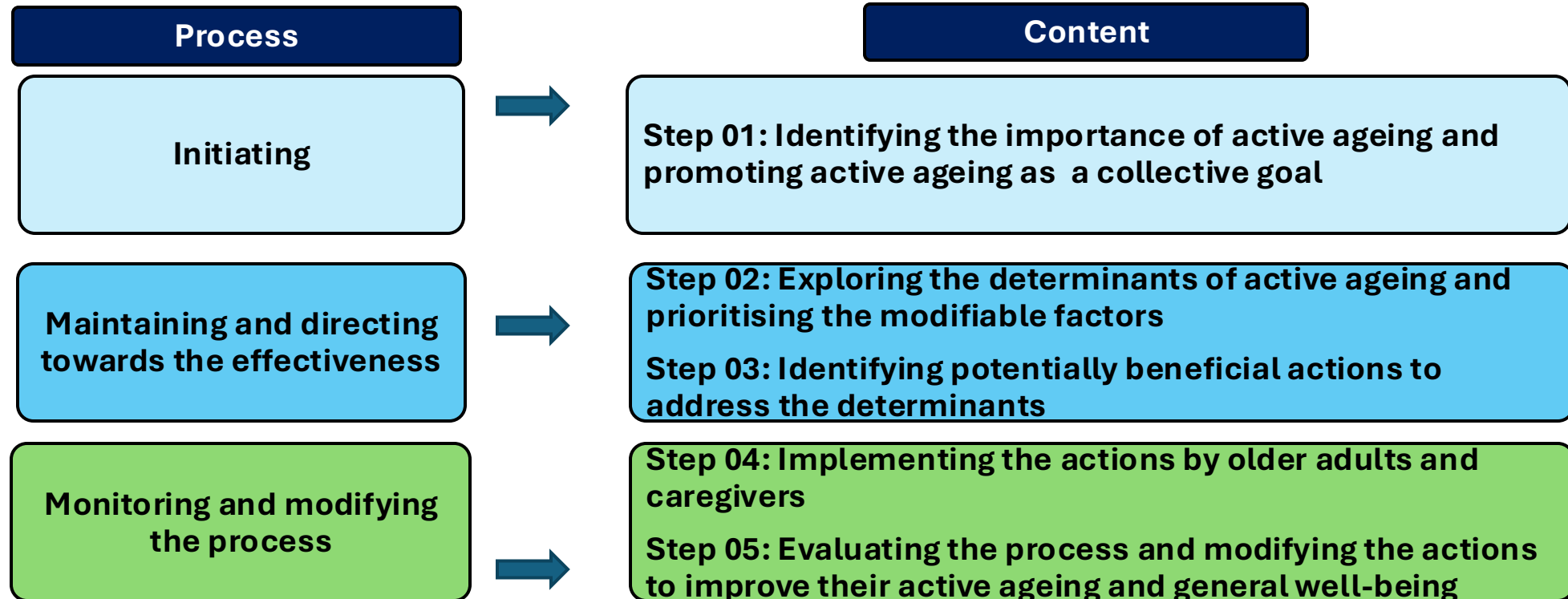
Our participants

- ❑ Number of residents of age 60 or above = 12 (03 Male, 09 Female)
- ❑ Number of care home staff = 03
- ❑ Level of independence of older adults (assessed using the Barthel Index)

Independent	07	58.3%
Minimally dependent	01	8.35%
Partially dependent	03	25.0%
Very dependent	01	8.35%

- ❑ Health concerns: Diabetes (n= 03), HPT (n=07), Dementia (n=02), Arthritis (n=04), Severe back pains and other (n=04), Risk of Falls, body weaknesses, poor vision (All)

Conceptual framework of the intervention



Initiating the HP process



Pics: © Kalpani Abhayasinghe

We had a series of discussions and brainstorming sessions with elderly home residents and the care team

“They are overly sensitive with their age. Sometimes over reacting. They always complain of pains and sicknesses.” (Caregiver 01)

“They gather during mealtime. Those who are weak go back to their rooms and sleep. Some stay in the living area and listen to dhamma talks, watch TV some have discussions. That’s what they basically do. I have given them a schedule for everyday routines.” (Caregiver 02)

“She is weak, and her vision is poor. I’ve asked her to sit somewhere and listen to Dhamma programs and not to walk alone in the garden. I can’t take any risk of falls.” (Caregiver 03)

“I feel so lonely without my family near me. I’m waiting for it [life] to end.” I am not interested to do those [gardening] anymore. (Resident 01)

"I can not walk [Sadly]. So I need assistance for everything.”(Resident 12)

“Tired always. We are useless now at this age. No one wants us.” (Resident 03)

**“I’m looking forward to see my son. He promised to bring the kids next time.”
(Resident 04)**

Participants' views at the beginning...

“I am reluctant to let them go out. What will happen if someone fell down?” (Caregiver 01)

“It is easy for us if they do not involve in cooking or washing. They are too slow.”(Caregiver 02)

“It would be better to do something rather than just idling.” (Resident 08)

“I have never been involved in anything like this [HP activity] before. I doubt whether this will go wrong.” (Resident 04)

Exploring the determinants

Determinants identified by the older adults and care team

Areas discussed	Promoting factors	Hindering factors
Physical health and well-being of older adults	<ul style="list-style-type: none"> • Good meals with nutrition and variety • Support in ADL • Awareness of physical well-being • Motivation to being active • Knowledge and experience of the care home staff to engage older adults 	<ul style="list-style-type: none"> • Older age • Sedentary life style • Poor vision • Weak body, legs • Less concern of monitoring pressure, blood sugar, etc. • Risk of falls
Psychological or emotional health and well-being of older adults	<ul style="list-style-type: none"> • Good sleep • Adequate rest • Receive good care by the staff 	<ul style="list-style-type: none"> • Lack of sleep • Unhappiness, Worrying • Feeling lonely • Being lazy and lethargic
Spiritual health and well-being of older adults	<ul style="list-style-type: none"> • having a relaxed mind • Engaging in religious/spiritual activities 	<ul style="list-style-type: none"> • Lack of freedom • Feeling of dependency or under control
Environmental and social health and well-being of older adults	<ul style="list-style-type: none"> • Clean and tidy garden • Clean rooms • Safe care home facilities (toilets, lighting) • Adequate staff to support residents • Interest to participate in activities 	<ul style="list-style-type: none"> • Fear of falls while doing outdoor activities • No/lack of visitors/ relatives • Less social interactions • Self rules and regulations(care home staff)

Exploring the determinants (Cont.)

Determinants identified by the researchers

Areas discussed	Promoting factors	Hindering factors
Physical health and well-being of older adults	<ul style="list-style-type: none"> Eating low salt, sugar, and oil Being physically active Regular Exercises Free from illness and manage/ control current illnesses 	<ul style="list-style-type: none"> Less concern of health monitoring Low physical activity levels Body weaknesses and pain Unhealthy meal pattern Sleep during daytime Watching TV
Psychological or emotional health and well-being of older adults	<ul style="list-style-type: none"> Adequate sleep during night time Leisure activities (e.g. gardening, reading, creative work, sewing, etc.) 	<ul style="list-style-type: none"> Feeling sad, worry, unhappy Uncertainty of future Felling of separation from family, loneliness
Spiritual health and well-being of older adults	<ul style="list-style-type: none"> Engaging in hobbies interested (e.g. gardening, reading, birds watching, singing, dancing, etc.) Peace in mind Feel independent and free Involve in decision making Acceptance 	<ul style="list-style-type: none"> Lack of happiness Feeling lonely Dependency
Environmental and social health and well-being of older adults	<ul style="list-style-type: none"> Being environmental friendly Keep cleanly and tidy environment Group activities 	<ul style="list-style-type: none"> Having no visitors Less interpersonal interactions with other residents

Prioritised determinants

Mutually agreed list of determinants by residents, caregivers and researchers

Areas discussed	Promoting factors	Hindering factors
Physical health and well-being of older adults	1. Regular physical exercises 2. Low salt, sugar and oil consumption 3. Awareness of active and healthy ageing	4. Sedentary lifestyle (e.g. watching TV, sleeping or sitting on a chair mostly during day time) 5. Less concern towards monitoring BP, Weight, BMI, etc 6. Body weakness and pain
Psychological health and well-being of older adults	7. Adequate sleep during night time 8. Leisure activities (e.g. gardening, reading, creative work, listening to music, etc.)	9. Feeling sad, worry, unhappy 10. Feeling of separated from family and neglected
Spiritual health and well-being of older adults	11. Engaging in hobbies interested (e.g. gardening, reading, birds watching, singing, dancing, etc.)	12. Feeling of dependency or under control of care home manager (lack of freedom)
Environmental and social health and well-being of older adults	13. Clean and tidy garden 14. Interest to participate	15. less interaction with other residents, loneliness



Determinants of healthy ageing may include...

Biological Determinants

- Genetics (longevity, predisposition to chronic illness).
- Gender differences in ageing (women live longer, but often with more disability).
- Presence of chronic conditions (diabetes, hypertension, arthritis, etc.).
- Resilience and physiological reserve (ability to recover from illness).

Behavioural Determinants

- Lifestyle habits across the life course:
 - Positive: balanced diet, physical activity, cognitive stimulation.
 - Negative: smoking, alcohol misuse, sedentary lifestyle.
- Medication adherence and health-seeking behaviour.
- Engagement in health screenings and preventive care.

Determinants of healthy ageing may include...

Economic Determinants

- Income security (pensions, savings).
- Access to affordable healthcare.
- Employment opportunities for older adults.
- Economic burden on families (care costs, medications).

Environmental Determinants

- Age-friendly housing (safety, accessibility, sanitation).
- Transport facilities and mobility support.
- Access to green spaces, safe neighborhoods, community centres.
- Exposure to pollution, climate change, disasters.

Determinants of healthy ageing may include...

Health and Social Service Systems

- Availability of primary healthcare, long-term care, and rehabilitation.
- Continuity and coordination of care across settings.
- Trained workforce in geriatric care.
- Community-based programmes (elder day care, social clubs).

Cultural and Spiritual Determinants

- Beliefs and attitudes toward ageing and older adults.
- Religious/spiritual practices providing meaning and coping strategies.
- Societal respect vs. ageism.

Personal Determinants

- Psychological resilience, coping skills.
- Attitude toward ageing (positive vs. negative).
- Self-efficacy and motivation to maintain independence.

After identifying the key determinants of healthy ageing, what actions can nurses take to address these factors and promote healthy ageing among older adults?

To be continued...



*Thank
you*

