

NEWSLETTER OF THE NATIONAL ADVISORY COUNCIL ON AGING

Member's Editorial

Healthy Lifestyles and Aging

As the story goes, not long into the 16th century, a Spanish explorer named Juan Ponce de Leon had his sights set on finding the legendary fountain of youth. Feeling restless after having conquered the island of Puerto Rico, Ponce de Leon ventured out into the Caribbean Sea searching for a land known as Bimini where, supposedly, the mythic fountain lay. Search as he may, the Spaniard's quest for the well-spring of eternal youth escaped him. The best he could do was discover Florida along the way, which is rather ironic given the perpetual playground status the state has for many people today.

ago, not much has changed in the human psyche—we're still in search of that venerable fountain. For it is youth that we equate with

Despite the fact Ponce de Leon set

out on his mission nearly 500 years

health. However, the idea of

what constitutes 'health' has evolved of late. The connotations are now much broader than we had previously allowed. Whereas we might have referred to health at one time in regard to physical well-being, the definition now encompasses our mental, emotional and social health as well.

Echoing this definition,
the World Health
Organization describes
the term as "a state of
optimal physical,
mental and social
well-being, and not
merely the absence of
disease and infirmity."
Implicit is the notion
that health today is an
active pursuit.

No longer is there the sense that some are fortunate to be healthy



Government of Canada

of Canada

National Advisory

Council on Aging

Gouvernement du Canada

Conseil consultatif national sur le troisième âge





while others suffer. Health is the result of responsible, active living and responsible living is a matter of leading a balanced life.

This is certainly not a new sentiment being bandied about. The Greeks expressed the essence of health in typical plain language when they promoted the idea, "mens sana in corpore sano" essentially, a healthy mind in a healthy body. How we achieve this level of health involves fitting a few pieces of the puzzle together. That puzzle comprises the basic affairs that fill our day: the physical activities we perform, the mental challenges we engage, the nutrition that fuels our bodies, even the social interactions we have. Not one factor figures more prominently than the other in creating a vibrant lifestyle. Rather, the challenge is to find the

balance between these influences, to locate the optimal point where they complement one another and to eliminate the factors that threaten our health.

Today, an even greater emphasis is being placed upon the promotion of health as a strategy to enhance the quality of life Canadians enjoy. This is not only a government effort to deflect the future costs of health care, it is a practical solution to optimizing Canadians' lives, and many of us are

capable of pursuing such a goal. As one man with the right attitude once said, "'To me, old age is fifteen years older than I am." With studies now showing that seniors who maintain an active lifestyle, both mentally and physically, are able to live a normal existence until late in life, the autumn years are being looked upon fondly, resonating with boundless potential.

Joyce Thompson NACA Member Prince Edward Island

A State of Optimal Well-being

Jackrabbit Johannsen

Not surprisingly, one of Canada's most celebrated centenarians managed to embody many of the qualities that characterize a fulfilling life. Though it has been eight years since his death, Canada's quintessential symbol of healthy living in old age remains **Herman** Smith Johannsen, better known as Jackrabbit Johannsen. Many people were first introduced to this man by way of the Canadian Ski Marathon, a crosscountry ski race that winds its way through the hills of western Quebec. During his later years, Jackrabbit may not have completed the course, but his participation served notice to young and old that age is only a state of mind. In fact, his very existence served as an inspiration to people young

and old and proved that our quality of life can improve beyond 50 years of age, if not before.

Despite the aura he had, there was no magic to Jackrabbit's lifestyle. This man, nicknamed by the Cree Indians for his agility on skis, lived modestly, his life governed by very simple principles. He could not stress enough the importance of existing as close to nature as possible, of living in harmony with our natural surroundings. For him, the wilderness provided a boundless playground for his pursuits, whether it was cross-country skiing, hiking, canoeing or simply his dayto-day living. Indicative of his attitude, Jackrabbit maintained, "I always want to know what's on the other side of the hill." He claimed that the unflagging spirit to live an active life, and to

keep his gaze fixed firmly forward kept him going.

No question he had experienced his share of suffering, having fallen bankrupt during the Great Depression at the age of 56. When most people would treat such a setback as a devastating blow to their lives, Jackrabbit remained focused on the influences that truly mattered to him: a love of life, a love of people and a love of the wilderness.

Jackrabbit Johannsen refused to look back over his years with regret or to gaze back longingly to remember past glories. This, to him, achieved little. "I live in the present." Such a clear and uncomplicated approach, but an approach that captured the essence of who he was. His 111 years are testament to an indefatigable spirit, and it only seems appropriate that Jackrabbit Johannsen remains a symbol of how an active life is a full life.

Emotional Health

To speak of emotional well-being is to paint a broad canvas. Despite the fact it is fundamental to how we approach the other aspects of our lives, our emotional health is by far the most difficult to gauge. We can take stock of what our exercise regimen is, what foods we feed our body and the activities that stimulate us, but we often take for granted the importance of our feelings.

When we discuss emotional health it tends to reflect upon our social interactions, how we communicate with our environment. The interpersonal relationships

we carry in our lives perhaps have the most powerful influence upon our world. Whether they are romantic, friendships, professional associations, connections through common hobbies or interests, even the pets we have in our homes—we rely upon all these influences to support us, guide us and to bolster our sense of self worth. Some researchers contend emotional support has a strong and consistent relationship to health status, so it is imperative to maintain these connections at an age when loneliness can exact a devastating effect upon an individual's well-being.

The most widespread threat to emotional stability is stress. Whereas younger and middle-aged people tend to suffer from the stress of employment and relationships, older individuals must cope with adapting to the sociological stressors that result from aging itself. These situations include separation from family and friends, death, and unwanted changes such as retirement, a decrease in physical capabilities or a declining income.1 Particularly difficult to adapt to is dealing with an aging body image. Factors such as wrinkles, tooth loss, handicaps and changes in the tone and texture of the muscle and skin have a direct correlation to levels of depression. A person's preparedness to deal with these stressors, whether predicted (body image, planned retirement) or unpredicted (sudden death of spouse or friend), can affect the rate of aging.

Though it is an intangible quality, maintaining a healthy emotional outlook can have a direct impact on lifespan. There is obviously a correlation between the activities we enjoy and the relationships we treasure to one's stress level. Epidemiologist Lisa Berkman found that people who were married, had ample contact with extended family and friends, belonged to a church and had other group affiliations were half as likely to die over the course of her 9-year study than those with less adequate social supports.² Taken from another perspective, researcher James House found that social isolation has as dire an effect on mortality as smoking and high-chloresterol levels.³ Combating these negatives in life largely comes down to positive interaction with others and maintaining a sense of self-worth through sustained independence and the activities we enjoy.

Perhaps it is taken for granted, but much of our emotional well-being depends upon how tuned our mental capacities remain as we grow older. Just as our bodies require exercise to remain fit, so too do our minds demand intellectual stimulation to prolong mental agility. The key to maintaining our mental faculties is preserving an intellectually vibrant environment in our lives. This may take some adapting, especially for recently retired individuals accustomed to receiving their stimulation from the work environment, but the effort invested usually yields

satisfying results. Seniors have the opportunity to spend time savouring their interests: taking courses, learning new hobbies, getting involved with local community groups the possibilities are boundless. However, even simple activities such as doing crossword puzzles or playing bridge deserve attention. The consequences of actively engaging ourselves with these pursuits are encouraging. Furthermore, it is not necessary to venture far to spark our interests. As gerontologist Dr. Warner **Schaie** maintains, having an intelligent spouse and living in a "complex, stimulating environment—including travel, reading and cultural events also contribute to having a late-life intellect".4

Psychologist **Leonard Poon**, after interviewing 100 centenarians, tentatively concluded that mental health is more important to survival than the longevity of parents or what the person has eaten over a lifetime. He reported that survivors over the age of 100 appear to be "optimistic, to be passionately engaged in some activity, and have the ability to adapt to repeated losses over time".⁵

Our minds control our body and emotions to a significant extent. It decides whether an event will make us worry, feel anxious, be afraid, or, on the other hand, act positively. The ways we choose to act in the face of stressful situations are known as 'coping strategies'. Positive coping helps us overcome the situation, or at least, retain emotional balance. It includes actions

such as seeking information or advice to resolve a problem, asking for emotional support, praying, even taking a warm bath to relax. Negative coping often refers to actions taken to escape from, or deny a situation instead of dealing with it rationally. Negative coping includes behaviours such as alcohol abuse, excessive sleep, aggressivity and social withdrawal.

One area we cannot overlook is the important influence sexual relationships have on our emotional health. Sexual activity remains a vital element in the lives of healthy seniors today despite the misperception that during our later years we somehow lose sexual desire. Certainly, there are more physical impediments than in younger years (arthritic pains, respiratory conditions, cardiovascular disorders, hormonal imbalances). As well, some medications may have a negative effect on sexual ability. Yet there is not as dramatic a drop in sexual activity as the prevailing societal notions would have us believe.6

Over time, priorities tend to change and a shift in the levels of desire may be evident, but intimacy at this point may be cherished above the ability to carry on sexual activity. Instead, the focus for older couples when it comes to sexual relations tends to move toward sharing, touching and intimate communication. Even if people are alone, without partners, a closeness with friends and family found in reassuring hugs, a supportive shoulder to reach out to, even a kiss on the cheek

when saying hello or goodbye can provide the stability and social reinforcement we need. Whatever the case, be it intimacy or sexual relations, the intangible emotional benefits of closeness are as potent in older age as they are in youth: a sense of selfworth and the chance to treasure the unique moments shared with another.

Another interesting area of research reveals the benefits older individuals experience when they are in the company of pets. So simple a concept but so strong a result. For example, Susan Pearce of the Human **Animal Bond Association** of Canada notes scientific studies have shown elderly coronary patients with pets are likely to live longer. She also says that the simple act of petting a cat or a dog can lower blood pressure, heart rate and anxiety levels.⁷ Having realized the positive mental health benefits, pet therapy and pet visitation programs for adults in institutionalized settings are on the rise.

Practically, the company of a pet offers a number of comforts. The therapeutic qualities a reliable companion such as a pet can have on an individual's physical health cannot be overlooked either. Many people maintain their exercise regimen simply because they are compelled to take their pet for a walk.

Tobacco, Alcohol and Medication

It is one thing to encourage the practise of habits that combine positively to create a healthy lifestyle, it is

another to reduce or eliminate the practises considered mental and physical health risks: namely, alcohol, tobacco and medication. There is much evidence showing the negative consequences of abuse with these substances. However misguided the belief, there is the assumption that older individuals who indulge these habits have been doing so for most of their lives. As a result, older people may not receive the encouragement to abandon these abuses. This pessimism towards successful treatment arises not only in medical circles, but it exists as a prevailing societal attitude.

Despite recent evidence showing alcohol consumption wanes as people enter their senior years,8 metabolisms change and the susceptibility to disease as a result of alcohol consumption increases among them, malnutrition, liver disease, and peptic ulcers. Moreover, the chance that people will suffer from the risks of alcohol abuse as they age is elevated. Falls and accidents, dementias and the potential hazards associated with mixing alcohol with prescription and over-thecounter medications are not uncommon.

Medication for seniors presents a daunting paradox the source of relief when taken independently, but is the root of adverse reactions when combined with other medications or with alcohol. Another problem threatening the health of seniors is the reliance on drugs to provide them with a sense of security and control when they should

be searching for non-drug ways to cope with everyday problems. The best means of avoiding these problems is consulting directly with physicians about the range of medications being taken, complying with the medical regimen and reporting any side effects that are unexpected. People should not hesitate to consult with their physician, nor should they dismiss the possibility of taking a friend or a family member along to the consultation to help understand what is required. Like alcohol in that widespread use subsides as people grow older, long-term smokers who want to quit must overcome the addictive nature of this habit. Moreover, older individuals who contend with lengthy smoking histories are likely to doubt that quitting later in life will reap any benefits. Contrary to this stance, studies have shown that within two years of quitting, the risk of heart attack lowers to the levels nonsmokers enjoy, and the risk for lung cancer is reduced by one third. People who choose to smoke into older age face the progression of chronic conditions and the loss of mobility. Beyond these fundamental incentives to kick the habit, the improved physical health and endurance that can enhance the overall quality of life people enjoy, and the selfesteem garnered from abandoning this dependence can be motivation enough for quitting.

Any substance abuse tends to evolve as a crutch for

people who are suffering from a lack of emotional or social support, mental anguish or inadequate exercise. As people grow older and endure both their own physical suffering, as well as the grief associated with the loss of friends and relatives, reliance upon these artificial supports is not uncommon. Confronting substance abuses is not easy and should occur in close consultation with a GP and/or a counsellor trained in these areas. Many seniors today struggle with this fact, even though they want to quit one or all three of these habits. They remain embarrassed or don't feel optimistic it can be resolved. There is the fear of change itself and being left without the old familiar patterns. Be assured, your GP, family or friends will support you.

Nutrition

Good nutrition cannot be encouraged enough—it is the fuel of life. It feeds our minds, it nourishes our souls and it replenishes our bodies. Both young and old require healthy nutrition, but as we grow older and our metabolisms change, we need to monitor our nutrition levels and food content much more closely. Whereas proper dietary habits help us feel active and energetic, neglecting good nutrition leads to feelings of fatigue. Worse yet, disregarding what we feed our body can lead to health woes or problems such as obesity that, beyond being a physical burden, threatens self-esteem. There is no magic formula to solve these problems, however.

The principles of good nutrition are based in sensible eating habits: moderation, selectivity, variety and balance.⁹

Adapting to the anatomical and physiological changes that occur as people grow older means seniors must pay closer attention to not only what they eat but also how much they consume. A number of changes occur within our bodies that can discourage people no matter how fit they may be. The percentage of body fat increases while lean muscle declines, exercise may become less regular and digestion slows down causing a greater likelihood of constipation. Furthermore, dental problems can eliminate the enjoyment of some foods, and the sense of taste and smell can be stifled. 10 Understandably, people may become frustrated if they suffer from these indispositions, but they may neglect healthy eating as a result.

Dealing with these barriers usually means older individuals have to cut down on the amount of food they consume without cutting back on the level of nutrition. The basic categories of nutrients include fats, carbohydrates, proteins, fibre, water, vitamins and minerals. A diet should draw from all categories, but particular attention should be paid to increasing fibre intake (fruits, vegetables, grains, bran, legumes) and water intake, both of which help regulate bowel function. As well, given that the metabolic rate drops with age, generally, fewer calories need be consumed or at least be

matched by the energy level expended with exercise.

This is merely a brief overview of nutrition, though some fundamental principles are proposed. Some simple rules do apply: enjoy a variety of foods, augment a healthy diet with regular physical activity, and try to keep salt, alcohol and caffeine intake to a minimum. There is no excuse not to enjoy a varied, nutritious diet—to deny it is to deny a healthy life.

Exercise

Having addressed three of four primary influences of a healthy lifestyle, the last element—exercise presents the greatest impact on all the other aspects. Physical fitness can influence the quality of lifestyle and can add years to a person's life when conducted in conjunction with other aspects of healthy living. At a time in their lives when people are apt to find more excuses not to get fit, there may be nothing that yields as positive an outcome than to undertake an exercise program.

The significance of physical fitness changes over time, usually due to our level of ability to participate, as well as the priorities we establish in our lives. For younger individuals, fitness refers to qualities of "muscular strength and physical prowess in motor and athletic skills". 11 For persons in their 70s and 80s, to be fit means freedom from disease, the absence of physical pain and discomfort, the ability to enjoy the mobility of independent living, or solely

being able to cope with the problems of everyday life. In some circles, this is described as 'active living' which recognizes being physically active can "involve and affect people emotionally, mentally, socially, spiritually as well as physically." 12

For noticeable results, an exercise program of 30-60 minutes should be performed three or four times a week. The exercises do not have to be difficult, complex or forceful, but rather smooth, relaxed and evenly-paced (walking, lawnbowling, swimming, tai chi and dancing). As one's fitness level improves the frequency per week and intensity of effort may be increased and/or new activities that present different challenges may be undertaken (downhill skiing, curling, golf). Regardless, an important consideration is to consult first with your family physician to jointly determine your activity goals and capabilities. This consultation should at least be part of your annual check-up.

Focus is given to three aspects of fitness: aerobic capacity (activities that move large amounts of oxygen and employ large muscle groups, such as the arms and legs, for extended periods of time to help develop the cardiovascular system); muscular strength (combats osteoporosis and improves endurance) and flexibility (enhanced mobility and muscular suppleness). Together, these three factors combine to foster better coordination, increased agility, and improved body weight. Other benefits are numerous:

normal sleeping patterns, reduced anxiety levels, better digestion and improved memory. Naturally, the improvement in body image augments the emotional well-being of people and increases their confidence to participate in a wider range of activities.

Exercise combats emotional and social isolation. Regardless of our age or level of fitness, when we are isolated or emotionally 'down' the tendency is to stop all activity when actually the best thing a person can do for him or herself is to keep moving. A successful fitness regimen is only as good as the commitment given. As R.J. Shephard points out in his study, 'physical fitness cannot be stored" 13 It only takes a few weeks of sedentary living and most of the gains a person may have made exercising will have dissipated. Encouraging news, though, is that with three months of progressive training sedentary people can improve their condition to approach that of active people. Not a bad deal. Think of it this way: if happiness were the dividend a stock paid after 90 days, wouldn't you invest?

Conclusion

Growing older does not have to mean suffering or loneliness. We have a choice of how we want to approach and live with old age, whether we want to resign ourselves to a sedentary lifestyle or treat the physical and mental obstacles that accompany our later years as a challenge. It just depends on how enriched a life we care to live. We have the power to decide for ourselves what options we want to pursue and we are fortunate enough to have access to communities rich with the resources to meet our interests.

Healthy living is multidimensional no matter what the age. Though some people make it look easy, it does not happen automatically—as with most matters in life, you get out of it whatever you decide to put in. Achieving a healthy lifestyle does not have to entail an unbearable schedule. It's a matter of balancing a moderate level of physical and mental activity, eating well, maintaining strong relationships and indulging our interests. We may have our different reasons for undertaking this path—longer life, sustained mobility to enjoy our respective interests, spiritual gratification—but in the end, the journey becomes the goal—a healthy lifestyle.

Fact File

- A year of physical endurance training has been found to improve heart function in men and women in their 60s by 25%-30%. 14
- On average, approximately 70% of healthy 70-year-olds continue to have regular intercourse. More than 25% of healthy men and women age 80+ are still sexually active—the frequency of intercourse being four times monthly.¹⁵
- The central impediment for couples maintaining an amorous relationship is the lack of a healthy partner. Women especially suffer in this case given they tend to marry men four years older than themselves, and the average life expectancy for a woman is seven years longer than a man's. 15
- Moderate alcohol intake may be of benefit to seniors as it may stimulate the appetite, increase socialization and play a role against coronary artery disease.¹⁶
- Some 19% of hospital admissions are due to medication problems while two-thirds of these admissions are the result of adverse reactions.¹⁰
- Between 25% and 40% of all prescriptions have been found to be inappropriate.¹⁴

Tips

Exercise

- Consult with your physician before undertaking a new exercise regimen to establish a program that best suits your needs. Perform exercises that are readily accessible and convenient for you.
- Start off with a realistic routine, from easy and low frequency and work your way up to more moderate or vigorous levels. Simple exercises such as walking, stretching even gardening are good ones to begin with.

Nutrition

• Consult with your physician or a nutritionist to map out an appropriate nutrition plan for yourself.

• Don't fall for fad diets. The best way to lose weight is to exercise regularly and eat properly.

Emotional/Mental Wellbeing

- Volunteer your time with one of your preferred organizations. Enroll in university courses and get a library card. Feed your mind.
- Get reacquainted with the programs your local community centre has to offer.
- Make an effort to speak with or see a friend or family at least once a week.
- Develop a meal routine, exercise regimen or social activity with a friend or two.

Tobacco, Alcohol and Medication

- If you smoke regularly and want to quit, consult with your physician and/or local stop smoking program.
- Set a goal to reduce the amount you smoke and keep a record each day of the amount you have smoked. Take one day at a time and reward or congratulate yourself for trying.
- To deal with alcohol and tobacco problems, don't hesitate to see a doctor or counsellor for the best possible solutions.
- Ask your doctor to explain thoroughly the medication he/she has prescribed. Don't hesitate to take a friend or family member along to help you fully understand matters.

Notes

- ¹ Stenger, L.A. and C.M. Smith. "*Healthy moves for older adults.*" Washington, D.C.: ERIC Clearinghouse on Teacher Education, 1985: 20.
- ² Berkman, L. *Health and ways of living. Findings from the Alameda County Study.* New York, N.Y. Oxford University Press, 1983.
- ³ House, James et al. "Social relationships and health." *Science*, 24 1, 4865, (1988): 540-545.
- 4 "Crosswords and long walks stave off aging." Report to the American Association for the Advancement of Science. *Globe and Mail*, Feb. 23, 1994: Al 3.
- ⁵ Poon, L.W. et al. "The Georgia centenarian study." *International journal of Aging and Human Development*, 34, 1, (1992): 1-17.
- ⁶ Kaplan, H.S. "Sex, intimacy and the aging process." Journal. American Academy of Psychoanalysis, 18, 2, (1990): 185-202.
- ⁷ Sokol, A. "The joy of pets." *Toronto Star,* March 15, 1994: C1.
- ⁸ Statistics Canada. *General Social Survey*. Ottawa: 1991.

- ⁹ Haber, D. Health promotion and aging. New York, N.Y.: Springer Publishing Company, 1994: 06.
- 10 Participaction. Live it up!: A guide to healthy active living in the senior years. Toronto: 1992.
- 11 Piscopo, J. *Fitness and aging*. Toronto: John Wiley & Sons, 1985: 96-15 1.
- 12 Health and Welfare Canada. Fitness Directorate. *Active living and aging: Health* benefits and implications - Working paper. Ottawa: July 1994.
- 13 Shephard, R.J. "Physical activity, fitness and cardiovascular health: a brief counselling guide for older patients." *Canadian Medical Association Journal*, 151, 5, (1994): 557-560.
- 14 National Advisory Council on Aging. Aging vignettes series A quick portrait of Canadian health and seniors. 1994: No. 33, 27.
- 15 Holzapfel, S. "Aging and sexuality." Canadian Family Physician, 40, (April 1994): 748-749.
- 16 Lamy, P. "Actions of alcohol and drugs in older people." *Generations*, (Summer 1998):10.

Expression is published four times a year by the National Advisory Council on aging, Ottawa, Ontario K1A 0K9 (613) 957-9938

The opinions expressed do not necessarily imply endorsment by NACA

ISSN: 0822-8213