

Age-friendly approaches – the missing link

The age-friendly communities movement has come a long way since its 2007 inception by the World Health Organisation (WHO). However, there is a significant gap – a missing link. The WHO age-friendly framework focusses on the external conditions and policy processes at the exclusion of attention to the inner lived experience of people in later life. The WHO's original guide (World Health Organisation, 2007) advocates a focus on changing “structures and services” in order to meet the needs of older people. Whilst this is necessary, one has to question whether it is sufficient. Do we not need a more holistic approach which, as well as being driven by a sociological analysis, is also attentive to the psychological realities and characteristics of older people's lives? Is it not time for the age-friendly movement to begin to develop a more balanced “psychosocial approach”? How would it do this? There are three elements which could feature in the start of this journey.

Wellbeing

First, in order to boost older people's inner satisfaction and quality of life, age-friendly approaches could promote the simple, but well evidenced, framework – the Five Ways to Wellbeing (Aked *et al.*, 2008). This contains five simple exhortations:

1. “connect” with other people;
2. “learn” new things;
3. be physically “active”;
4. “notice” the world around you; and
5. “give” to others.

Whilst not specifically developed for older people, these actions are extremely relevant to the circumstances that people face in later life. A major messaging campaign to make this wellbeing framework as well known as the “five a day” dietary framework could bring about a significant re-focussing of attention on the psychological and emotional aspects of ageing.

Resilience

Second, the age-friendly movement could do more to support initiatives to build older people's resilience in later life. Whilst the age-friendly movement is rightly committed to challenging the prevalent negative narrative about ageing, it is also important to recognise and validate the fact that later life can also be characterised by significant life events and challenges (e.g. retirement, ill health, caring responsibilities, bereavement, etc.), all of which can trigger older people into anxiety, depression and loneliness (Robertson, 2014). As Bette Davies famously quipped – “Old age ain't no place for sissies!” Supporting older people to enhance or build their resilience should therefore be an important agenda for the age-friendly movement. And resilience is something which is primarily built from the “inside out”, rather than solely from the “outside in”. In other words, resilience is a psychological and emotional phenomenon which, as the Calouste Gulbenkian Foundation and Centre for Ageing Better's (2017) “Transitions in Later Life” programme is showing, can be strengthened through interventions which enable older people to access and benefit from a variety of humanistic psychological techniques (e.g. positive psychology, mindfulness and cognitive behavioural therapy).

Internalised ageism

Third, there is a need to address the toxic effects of internalised ageism. Whilst much attention has rightly been paid to the impact of ageist ideas on older people's access to services and entitlements, there has been very little attention paid to how ageism can distort older people's inner worlds. There is a significant and growing evidence base which shows how internalised ageist attitudes negatively affect how long people live; the incidence of illness and the ability to recover from it; functional abilities such as walking speed and activities of daily living; cognitive ability and memory performance; health-enhancing behaviours and the will to live; and finally, emotional wellbeing and mental health (for an overview, see Robertson, 2017).

Internalised ageism appears to negatively affect older people's health and wellbeing in this way through two psychological mechanisms. First, by inculcating self limiting beliefs (i.e. I cannot/should not do this at my age). Second, by instigating self fulfilling prophecies (i.e. loneliness is just something you cannot avoid in old age). Unfortunately it is not enough just to promote positive images of older people as a way of combatting internalised ageing – indeed there is some evidence that promulgating overly positive images of ageing can actually make the situation worse (Fung *et al.*, 2014). There are however a range of other possible strategies (Robertson, 2017), but few have been developed into workable interventions, and evidence of effectiveness “in the field” is woefully lacking. This is therefore an area worthy of attention by the age-friendly movement and its academic supporters.

A new agenda

As the age-friendly communities movement moves into its next phase of development, it needs to develop an awareness of how the internal as well as the external world affects older people's health and wellbeing in later life. The “missing link”, the psychological domain, needs to be addressed if age-friendly approaches are to become truly “psychosocial”.

References

- Aked, J., Marks, N., Cordon, C. and Thompson, S. (2008), “Five Ways to Wellbeing: a report presented to the Foresight Project on communicating the evidence base for improving people's wellbeing”, NEF Consulting, London.
- Calouste Gulbenkian Foundation and Centre for Ageing Better (2017), *Evaluation of Transitions in Later Life Projects: Executive Summary and Full Report*, Calouste Gulbenkian Foundation, London.
- Fung, H.H., Li, T., Zhang, X., Sit, I., Cheng, S.-T. and Isaacowitz, D.M. (2014), “Positive portrayals of old age do not always have positive consequences”, *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*, Vol. 70, pp. 913-24.
- Robertson, G. (2014), *Transitions in Later Life: Scoping Research*, Gulbenkian Foundation.
- Robertson, G. (2017), “Ageing and ageism: the impact of stereotypical attitudes on personal health and well-being outcomes and possible personal compensation strategies”, *Self & Society*, Vol. 45, pp. 149-59.
- World Health Organisation (2007), *Global Age Friendly Cities: A Guide*, World Health Organisation.