

Successful Aging among Senior Adults Across Age Residing in Lucknow City

Preeti Maurya, Shalini Agarwal, Khwairakpam Sharmila

ABSTRACT

Research Background: Successful Aging among Senior Adults is an important area of concern that reflects their overall aging and how they deal with it. **Objective:** The aim of the present investigation was to study Successful Aging among Senior Adults. **Methods:** The study was conducted on a Purposive Random Sampling of 120 respondents who were selected from Lucknow city in the age ranging from 65 to more than 75 years of which 67 men and 53 women. "Successful Aging Scale" Questionnaire which are prepared by Reker, 2009 is used to measure Successful Aging, the questionnaire was administered. The data were coded, tabulated, and analyzed. The data obtained were subjected to statistical analyzed using mean, frequency percentage. **Result:** The finding of the study revealed that the majority of respondents are Successfully Aged and the study also reveals that there is no significant difference between the Successful Aging of respondents and their Gender.

Keywords: Successful aging, Senior adults, Gender

Asian Pac. J. Health Sci., (2022); DOI: 10.21276/apjhs.2022.9.2.01

INTRODUCTION

Aging is a natural process of life is due to gradual changes in metabolic activity of organs and disability in regeneration capacity of cells. Worldwide, the average lifespan of people has been increasing. Several factors including heredity, life styles, and healthy diet, avoiding smoking, and physical activity can effect the longevity of life.

According to the WHO report, there are more than 600 million elderly individuals worldwide, it is estimated this rate will be double by 2025 and 2 billion by 2050.^[1]

Successful aging has become an important concept to describe the quality of aging. It is a multidimensional concept, and the main focus is how to expand functional years in a later lifespan. The concept has developed from a biomedical approach to a wider understanding of social and psychological adaptation processes in later life. The main focus in the concept of successful aging is how to expand healthy and functional years in the life span. The phenomenon of successful aging can be viewed from a population or an individual perspective. At the population level, definitions include determinants of health and participation for the purpose of promoting policies, whereas at the individual level it is defined by outcomes of health, physical and cognitive function, and life involvement.^[2]

REVIEW OF LITERATURE

1. Estebansari *et al.* (2020)^[3] has conducted a study on "The concept of Successful Aging." They found out that with the increasing number of elderly people in the world, usage of concepts and terminology related to this phenomenon has substantially increased. One concept in this context is successful aging. The purpose of the present study is to extract and introduce a common concept to be used in studies on measuring successful aging. They concluded that Health care professionals as community health supporters can use the result from the present study for providing the grounds for successful aging. Then, they can use the designed successful aging program for preserving and promoting active and healthy aging for every elderly person
2. Subramaniam *et al.* (2019)^[4] has conducted a study on "Successful ageing in Singapore: prevalence and correlates from a national survey of older adults." In this study, they aimed to estimate the overall prevalence and sociodemographic correlates of successful aging, as defined by Rowe and Kahn, among a national sample of multiethnic adults aged 60 years and older in Singapore. Data were analyzed and they find out that successful aging was defined with five indicators: no major diseases; no disability; high cognitive functioning; high physical functioning; and active engagement with life. The prevalence of successful aging was 25.4% in older population. Older adults aged 75–84 years and ≥85 years had 0.3 times

Human Development and Family Studies, School of Home Science, Babasaheb Bhimrao Ambedkar University, Lucknow, Uttar Pradesh, India

Corresponding Author: Dr. Shalini Agarwal, Associate Professor, Human Development and Family Studies, School of Home Science, Babasaheb Bhimrao Ambedkar University, Lucknow, Uttar Pradesh, India. E-mail: drshaluagarwal@gmail.com

How to cite this article: Maurya P, Agarwal S, Sharmila K. Successful Aging among Senior Adults Across Age Residing in Lucknow City. *Asian Pac. J. Health Sci.*, 2021;9(2):1-4.

Source of support: Nil

Conflicts of interest: None

Received: 06/12/21

Revised: 14/12/21

Accepted: 25/12/21

and 0.1 times the odds of successful aging, respectively, than those aged 60–74 years. Compared to older adults of Chinese ethnicity, those of Malay (odds ratio [OR] 0.6) and Indian (OR 0.5) ethnicities were less likely to be associated with successful aging. Older adults with lower education levels, who had no formal education (OR 0.2), some schooling but did not complete primary education (OR 0.4) or only primary education (OR 0.5), had lower odds of aging successfully than those with tertiary education. They also concluded that Older adults in Singapore tend to have much more active engagement with life as compared to their counterparts from other countries.

METHODOLOGY

The study was conducted on respondents who were selected from Lucknow city in the age ranging from 65 years to more than 75 years using Purposive Random Sampling technique of which there were 67 men and 53 women, "Successful Aging Scale" (SAS) Questionnaire was used to measure the Successful Aging along with Self-constructed interview schedule. The data obtained were subjected to statistical analyzed using mean, frequency percentage, F test & χ^2 Test using SPSS (version 20.0).

RESULT AND DISCUSSION

Result in Table 1 describe the distribution of respondents on the basis of their age.

About 24.1% of males are between the age group of 70–75 years which is maximum population in both the gender and the least population also belongs to males which is 10% who falls between the age group of 75-Above years.

The result depicted that male constitute 21.6% and female constitute 17.5% of age between 65 and 70 years whereas only 10% male and 15% female respondents were in the age group 70–75 years.

Table 1: Distribution of respondents on the basis of their Age n=120

S.No.	Age of respondents	Male	Female
		F (%)	F (%)
1.	65-70 years	26 (21.6)	21 (17.5)
2.	70-75 years	29 (24.1)	14 (11.6)
3.	75-Above years	12 (10)	18 (15)

DISTRIBUTION OF RESPONDENTS ON THE BASIS OF THEIR SUCCESSFUL AGING

The (SAS) contain 14 items and is divided into four Models of Successful Aging are Psychological well-being model of Ryff (1989), the SOC model of Baltes and Baltes (1990), the Primary and Secondary control model of Schulz and Heckhausen (1996), and the disease/cognitive functioning/engagement model of Rowe and Kahn (1997).

Table 2 is based on Rowe and Kahn model of successful aging which is a part of the SAS and it contains five statements and all of them are positive statements. This table describes the physical and cognitive functioning of respondents, it also describes the avoidance of disease/disability and engagement with life.

Regarding Engagement with life, Majority of respondents i.e. 13.3% male and 11.6% female respondents were Moderately Agreed with the statement "I am actively engaged with life through productive activities."

Majority of respondents, 16.6% of male respondents were Strongly Agreed and 12.5% female respondents were Moderately Agreed that they engage themselves with life through regular social contacts.

Majority of population, 12.5% of male respondents Moderately Agreed while 9.1% female respondents Moderately Disagreed with the statement "I make attempts to engage in healthy lifestyles".

Regarding avoiding diseases, Majority of respondents, i.e., 13.3% of male respondents and 11.6% females Moderately agreed that they make attempts to remain free of diseases and disability.

Regarding physical and cognitive functioning, 6.6% male and 10% female respondents Strongly agreed with the statement "I try to maintain good physical and mental well functioning as I age".

Table 3 is based on Baltes and Baltes model of Successful aging and it contains three statements which are all positive. This table describes the Selection, Optimization, and Compensation of respondents.

Majority of respondents, Regarding optimization 16.6% male and 13.3% female Strongly agreed that they make effort to achieve goals that are important to them while 4.1% male and 2.5% female Strongly disagree with statement.

About 16.6% males and 5% females Strongly Agree with the statement " When things don't go right way, I keep trying until achieve the same result.

About 5.8% males and 4.1% females Strongly agreed with statement " I can deal with whatever comes my way" while 13.3% males and 12.5% females Strongly disagreed that they can deal with everything which comes their way.

Table 2: Rowe and Kahn (Avoiding disease/disability; High cognitive/Physical functioning;Engagement with life)

Statement	Male							female						
	F (%)							F (%)						
	SA	A	MA	U	MD	D	SD	SA	A	MA	U	MD	D	SD
I am actively engaged with life through productive activities.	14	12	16	14	8	0	3	11	4	14	12	5	2	5
I make attempts to remain relatively free of disease and disability.	11.6	10	13.3	11.6	6.6	0	2.5	9.1	3.33	11.6	10	4.16	1.6	4.16
I try to maintain good physical and mental functioning as I age.	12	8	16	13	10	4	4	11	4	14	12	4	4	4
I am actively engaged with life through regular social contacts.	10	6.6	13.3	10.8	8.3	3.3	3.3	9.1	3.3	11.6	10	3.3	3.3	3.3
I make attempts to engage in healthy lifestyles habits.	8	4	17	20	8	4	6	12	11	12	5	6	1	6
	6.6	3.3	14.1	16.6	6.6	3.3	5	10	9.1	10	4.16	5	0.8	5
	20	10	20	9	5	2	1	13	7	15	11	2	0	5
	16.6	8.3	16.6	7.5	4.16	1.6	0.8	10.8	5.8	12.5	9.1	1.6	0	4.16
	3	3	15	12	11	7	16	7	1	7	8	11	8	11
	2.5	2.5	12.5	10	9.1	5.8	13.3	5.8	0.8	5.8	6.6	9.1	6.6	9.1

Table 3: Baltes and Baltes (Selection, Optimization, Compensation)

Statement	Male							Female						
	F (%)							F (%)						
	SA	A	MA	U	MD	D	SD	SA	A	MA	U	MD	D	SD
I make every effort to achieve goals that are important to me.	20	12	9	14	2	5	5	16	11	4	14	2	3	3
When things don't go as well as they used to, I keep trying other ways until I achieve the same result.	16.6	10	7.5	11.6	1.6	4.1	4.1	13.3	9.1	3.3	11.6	1.6	2.5	2.5
I can deal with whatever comes my way.	20	15	7	10	1	5	9	6	10	9	6	5	4	13
	16.6	12.5	5.8	8.3	0.8	4.1	7.5	5	8.3	7.5	5	4.1	3.3	10.8
	7	5	2	19	2	16	16	5	4	3	9	8	9	15
	5.8	4.1	1.6	15.8	1.6	13.3	13.3	4.1	3.3	2.5	7.5	6.6	7.5	12.5

Table 4: Schulz and Heckhausen (Primary and Secondary control)

Statement	Male							Female						
	F (%)							F (%)						
	SA	A	MA	U	MD	D	SD	SA	A	MA	U	MD	D	SD
I am unable to make choices about things that affect how I age, like my diet, exercise and smoking.	9	15	17	10	9	5	2	11	15	8	8	5	5	1
In difficult times, I develop mental toughness in dealing with the situation.	7.5	12.5	14.1	8.3	7.5	4.1	1.6	9.1	12.5	6.6	6.6	4.1	4.1	0.8
I feel that I am not in control of my immediate environment.	19	15	12	11	1	2	7	18	11	7	11	1	4	1
	15.8	12.5	10	9.1	0.8	1.6	5.8	15	9.1	5.8	9.1	0.8	3.3	0.8
	8	16	13	15	10	3	2	10	9	10	13	3	4	4
	6.6	13.3	10.8	12.5	8.3	2.5	1.6	8.3	7.5	8.3	10.8	2.5	3.3	3.3

Table 5: Ryff (Psychological well-being)

Statement	Male							Female						
	F (%)							F (%)						
	SA	A	MA	U	MD	D	SD	SA	A	MA	U	MD	D	SD
I maintain warm and trusting relationship with significant others.	16	12	11	12	4	3	9	16	11	4	13	0	5	4
I strive to remain independent for as long as possible.	13.3	10	9.1	10	3.3	2.5	7.5	13.3	9.1	3.33	10.8	0	4.1	3.3
I am comfortable in accepting both my good and bad qualities.	15	13	12	10	2	4	11	9	16	8	12	2	3	3
	12.5	10.8	10	8.3	1.6	3.3	9.1	7.5	13.3	6.6	10	1.6	2.5	2.5
	8	13	21	9	7	7	2	5	7	9	16	10	5	1
	6.6	10.8	17.5	7.5	5.8	5.8	1.6	4.1	5.8	7.5	13.3	8.3	4.1	0.8

Table 4 is based on the Schulz and Heckhausen's model of Successful aging which contains three statements among which two were negative statements and one was positive.

The table describes the Primary and Secondary control of respondents.

Result showed that Regarding primary and secondary control, 7.5% of males were Strongly Agreed with the statement that they are unable to make changes about things while 9.1% of females were also Strongly Agreed with it and 1.6% males and 0.8% females were Strongly Disagree with the statement.

Majority of respondents, Regarding primary and secondary control 15.8% of men and 15% of women were Strongly Agreed with statement that they develop mental toughness in dealing with difficult situation.

Regarding primary control 6.6% male and 8.3% female respondents were Strongly agreed with the statement that they feel " I m not in control of my immediate environment while 1.6% male and 3.3% female respondents strongly disagreed with it.

Table 5 is based on Ryffs model of Successful aging and it contains three statements, they are all positive. The table describes the Psychological well-being of respondents.

Majority of respondents, Regarding Psychological well-being 13.3% of males and 13.3% of females Strongly agreed that

they maintain warm and trusting relationship with others while 7.5% of males and 3.3% of females Strongly disagreed with this statement.

Majority of male respondents, i.e., 12.5% strongly agreed with the statement that they strive to independent as long as possible which shows their autonomy while 13.3% of females Agreed with it.

Majority of self-acceptance is shown in male, i.e., 16.6% and only 4.1% females Strongly agreed with the statement " I m comfortable in accepting both my good and bad qualities.

ANOVA value of Successful aging across different age groups.

Category	Mean	Std. deviation	Df	F	Sig.	conclusion
Successful aging				44.181	0.000	S
65-70 years	70.7234	10.28655	119			
70-75 years	58.720	6.56950				
75-above years	48.3667	14.18470				

Result depicted that $P < 0.05$ thus the null hypothesis is rejected which means there was a significant difference between Successful Aging across Age.

CONCLUSION

The aim of the study is to assess the Successful Aging across Gender in Lucknow city, India. This study reveals that there is no significant difference between Successful Aging and age and gender of the respondents.

Gerontology is broadening its perspective from prior pre occupation with disease and disability to a more robust view that includes Successful Aging. Successful Aging is seen as multidimensional, encompassing four distinct domains: Avoidance of disease and disability, maintenance of high physical and cognitive function and sustained engagement in social and productive activities, selection, optimization, compensation, primary and secondary control, and psychological well-being.

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