Research Article

Active Aging: Perceptions and Experiences of Older Adults who Attend a Seniors Gym

Yvonne Thomas*1, Alison Blank1 and Helen Frank2

¹Otago Polytechnic Te Pukenga, Dunedin, New Zealand

To Cite This Article: Yvonne Thomas*, Alison Blank and Helen Frank. Active Aging: Perceptions and Experiences of Older Adults who Attend a Seniors Gym. Am J Biomed Sci & Res. 2023 19(6) AJBSR.MS.ID.002654, DOI: 10.34297/AJBSR.2023.19.002654

Received:

August 17, 2023; Published:

August 23, 2023

Abstract

Introduction: Projected increases in the aging population necessitate actions that improve healthy aging and the wellbeing of older adults. Maintaining physical and mental wellbeing or older adults is becoming a priority for health agendas, as the cost of older persons care rises. This study explored the meaning and motivation of retirees attending a senior's gym program and its contribution to wellbeing.

Method: 11 participants were interviewed using a structured interview schedule which included the WHO QoL Breve and the WEMWS. Interviews were recorded and transcripts analyzed thematically using a qualitative descriptive approach.

Results/Findings: Participants reported high levels of wellbeing and recognized improvement since attending the program.

The qualitative analysis identified 4 themes: 1) Fear of getting older. 2) Physical and psychological wellbeing. 3) A sense of purpose. 4) Socially motivating environment.

Conclusion: Attending the seniors gym promoted wellbeing through staying active and counters the fear of getting older and losing functional ability. Both physical and psychological wellbeing was supported and confirms the benefits of measuring wellbeing outcomes for older adults. Further research is suggested to explore the role of grand parenting in increasing older adults' wellbeing.

Key Findings

Regular exercise counters the fear of aging in older adults, including loss of function.

A supportive and social gym environment enhances physical and psychological wellbeing of older adults.

What the Study has Added

A fear of getting old is a motivating factor for taking up exercise for older adults. Improvement in eudemonic wellbeing is consistent with an occupational therapy approach.

Introduction

As the population of older people increases, the health and well-being of older adults becomes a greater priority [1]. Regular physical exercise for older adults has been shown to improve physical and psychological health [2]. While physical health outcomes are important there is growing support for using broader concepts of wellbeing as an outcome measure for interventions for older people. Eudemonic wellbeing is the degree to which a person judges

their life to be meaningful and have purpose and has been linked to improved health outcomes in older people [3]. Higher levels of eudemonic wellbeing are believed to be a protective factor in old age and strengthen the ability to adapt to the challenges of aging [1].

From an occupational perspective the concept of eudemonic wellbeing is consistent with fulfilment of meaningful tasks and obligations [4]. Retirement results in fewer obligations and social



²University of Worcester, UK

^{*}Corresponding author: Yvonne Thomas, Otago Polytechnic Te Pukenga, G Block Fourth Street Dunedin, New Zealand.

networks and, for some, a loss of productive activities. Regular attendance and engagement in a senior's gym creates an alternative strategy for meaningful physical and social activity.

This study aimed to explore the meaning and motivation of retirees attending a senior's gym program and its contribution to perceived wellbeing. Two research questions underpinned the study.

- 1) What is the current level and experience of wellbeing of the Seniors Gym users?
- 2) What factors influence the wellbeing of seniors who attend a gym program?

Literature Review

The number of people over 60 years will double by 2050 [1]. In the UK there will be more than 20 million people aged 60 years or over by 2030 [5]. A decline in disabilities in older people has been replaced by preventable chronic diseases, such as cardiovascular disease, diabetes, and hypertension [1,2]. Health and wellbeing are closely linked to age, and as life expectancy increases maintaining wellbeing becomes increasingly important [3]. Aerobic training has been shown to be the most beneficial form of physical exercise, and has the strongest effects on self-efficacy, cardiovascular status, strength and functional capacity [6]. Higher frequency of physical exercise has been shown to lower mortality rates and support the benefits of regular exercise to older people [7].

In addition to improved physical health, exercise has been shown to improve wellbeing, general mood and quality of life in older people [8-10]. Increased activity and/or regular physical exercise can significantly reduce the risk of cognitive impairment associated with aging and improve an older person's functional ability [11-14]. In women physical exercise is also correlated with higher social participation [15]. Therefore, wellbeing should be considered as an outcome measure of physical exercise programs for older people [16]. Wellbeing is a multifaceted and complex construct that is difficult to define and measure [16]. Three overlapping aspects of wellbeing; life satisfaction, hedonic wellbeing (pleasure and positive emotions), eudemonic wellbeing (meaning and purpose in life), have been described and measured [3,18]. Eudemonic wellbeing highlights the importance of being able to fulfil one's occupational needs by carrying out the activities that are important for the individual and therefore is an important outcome for occupational therapy [4,,19-21]. Aging is associated with a decline in physical and cognitive functions; loss of confidence; loneliness; financial insecurity; threats to independence and bereavement. Establishing strong reserves of mental health and wellbeing may allow older adults to adapt to these challenges more effectively [1]. Promoting healthy, safe and socially inclusive lifestyles for older adults is crucial to improving the health and well-being of society. Attending a regular gym session provides opportunities for social engagement and productive activity [22-24]. Regular commitment to physical activity in a social environment may improve wellbeing in older adults through establishing social roles [22,25]. The aim of this study was to gain an understanding of how regular attendance to the senior's gym program influenced the subjective wellbeing of older adults.

Method

The study used mixed methods to determine the participant's subjective perceptions of wellbeing and the factors that support healthy aging. This exploratory study was grounded in an interpretivist paradigm [26]. to gain an understanding of how wellbeing is experienced in the context of aging. Ethical approval for the study was gained from University of Worcester Ethics Committee (approval number 2013/2014 023). The study used two measures to measure wellbeing against a range of predetermined factors, followed by structured interviews to explore subjective experiences of wellbeing. The self-report assessments were the WHO QoL Bref [27], and the Warwick-Edinburgh Mental Health Wellbeing Scale (WEMWBS) [28]. The WHO QoL Bref is a 26 question self-report questionnaire which measures quality of life in terms of four broad domains: physical health, psychological health, social relationships, and environment. The WEMHWS is a 12-item validated self-report tool which uses Likhert scales to measure subjective wellbeing. Both assessments have been shown to have validity and have been used widely in previous studies [29, 30].

Following completion of the questionnaire, the interviews explored participant's experience of wellbeing and the influence of the senior's gym to their perceived wellbeing. A qualitative descriptive methodology was taken to explore how older adults achieve and maintain their wellbeing, in the context of their day to day lives [31]. Thematic analysis of the interview data allowed for interpretation of participant's in-depth descriptions of wellbeing and the seniors' gym experience. Participants volunteered for the study in response to an invitation placed in the Seniors Gym. 11 service users, comprising 7 males and 4 females; aged from 53-70, were recruited and contacted by the Chief Investigator by email or telephone. The research aims and process were provided, and an interview time was allotted. Consent was obtained prior to the interview taking place. Individual interviews were conducted at the gym, by two BSc (Hons) Occupational Therapy students using a detailed interview schedule and supervised by the Chief Investigator (YT). The students previously studied wellbeing in old age and undertaken training in the interviewing processes including role plays and practicing with a family member prior to the interviews. The interview reviewed the reasons for attending the seniors' gym, the perceived influence of their involvement on wellbeing and factors that had positively or negatively contributed to engagement. The interviews were digitally recorded and reviewed by the chief investigator to ensure quality of the research process. Interviews were transcribed verbatim prior to analysis. Descriptive data from each participant, together with the results of both questionnaires were compared and used to supplement the qualitative data. Thematic analysis of the interview transcripts followed the methods described by Glasser and Strauss 1967 cited in [32, 33]. beginning

with open coding, axial coding and selective coding to develop themes that illustrated participants wellbeing as promoted through the seniors' gym activities.

Results

The participant were 7 males (average 65 years), and 4 females (average 62 years) included the youngest participant at 53 years, who joined the senior's gym after being part of a Breast Cancer

Recovery group at the gym. (Table 1) provides a summary of the demographic and quantitative data including overall score for the WHO QoL Bref and the WEMWBS and their self-rated satisfaction with health. Participants were generally satisfied with their overall health. Participants rated their quality of life and satisfaction with health highly as reflected in the WHO Qol Bef general score and the WEMWBS scores.

Table 1: Participants Descriptive Statistics.

	Male/ female	Age	Self-rating of wellbe- ing (1-10)	WHO Qol Bref					Satisfac-	
				General (max 10)	Physical Health max = 35	Psycholog- ical	Social Relation- ships	Environ- ment	tion with health max = 5	WEMWBS
						Max = 30	Max = 15	Max = 40		
1	male	62	9	9	26	23	14	37	4	63
2	female	62	9	8	25	22	12	35	4	45
3	female	70	8-9	8	25	22	13	36	4	60
4	male	68	7	8	22	21	11	39	4	44
5	male	65	8	9	26	24	14	40	4	66
6	male	70	8	10	29	24	15	40	5	61
7	female	63	9	10	27	24	14	40	5	63
8	female	53	10	10	26	24	15	36	5	66
9	Male	66	8	8	22	24	14	35	4	57
10	Male	64	7.5	9	28	22	15	39	4	67
11	Male	63	6-7	8	26	23	12	31	5	51
average	n/a	64 yrs	8.8	8.8	25	23	13.7	37	4.3	58.4

Participants reported health concerns such as breast cancer, osteoarthritis and high blood pressure, while others identified being overweight, lethargic and unrelaxed before joining the gym. All participants reported that attending the gym was beneficial and rated the benefit between 8 and 10 out of a possible score of 10 (or extremely helpful).

Thematic analysis of the interview data generated four themes that identify the meaning and motivation of older adults regularly attending a senior's gym program.

- $1) \quad \text{Fear of getting older and losing physical and cognitive function}.$
- Psychological wellbeing.
- A sense of purpose.
- 4) Socially motivating environment.

The first three themes highlight the personal motivation for attending the gym and its impact on wellbeing, while the final theme highlights the motivating environment.

Fear of Getting Older - Losing Physical and Cognitive Function

A fear of getting old and losing the ability to do what is import-

ant was countered by the determination to maintain, and in some cases regain, a level of fitness through being active. A common motivating factor for gym attendance was therefore related to staying well and active for as long as possible. As stated by one participant

"There are more years behind me than ahead of me I want to make the most of those years and to be well enough to enjoy those years now." (Participant 11)

Participants were fearful of the stereotypical images of old age, and some held memories of their own parents aging process.

"My dad was an old man at 60 and I watched him getting frustrated and saying this isn't going to happen to me." (Participant 10)

The desire to counter old age and remain independent though physical activity was common and increased quality of life.

"It's about quality of life [] being able to do what I did 30 years ago, which you can't always achieve, or achieve in the same time scale." (Participant 9)

The fear of getting older implied both physical decline and cognitive decline, which would directly impact on their valued roles in the family, as spouse, parent and grandparent.

"We get involved with their reading and number skills,, conversation skills it's extremely important." (Participant 5)

Participants perceived that attendance in the seniors' gym was directly linked to improving their physical health, their independence, and their valued roles; in short, being able to engage in the occupations they wanted or needed to do in life.

Psychological Wellbeing

Alongside the physical and cognitive benefits participants felt more relaxed and confident through attending the gym. The availability of exercise guidance from instructors increased confidence in trying new and challenging exercise programs. The social and supportive environment of the senior's gym, with "like-minded people" improved psychological wellbeing.

"... you feel better physically and therefore you feel better about yourself." (Participant 5)

Participants identified that they felt more positive in their attitude to life, and generally more confident.

"... physical fitness brings mental fitness increases your confidence fundamentally" (Participant 10)

As individuals achieved their fitness goals, they gained a sense of mastery and self-efficacy through active engagement in exercise, and increased confidence in their ability to do activities of inherent meaning and purpose.

A Sense of Purpose

Regular participation in the senior's gym provided routine and structure that had been previously provided by employment. Some identified that retirement could lead to boredom and loneliness, whereas attending the gym had motivated them to do more.

"I ought to be looking at doing something else that has a bit more purpose maybe I'm too relaxed sometimes" (Participant 4)

Participants recognized that family role and responsibilities improved wellbeing though providing a sense of purpose:

"[we] help out with two youngest [grandchildren] one who has special needs which can be a challenge and keeps us going." (Participant 4)

For some being married is also a source of physical and emotional well-being.

"My family, yes definitely yes I am lucky I have been married for nearly forty years and definitely that sort of makes you feel secure and happy" (Participant 2)

Family relationships and responsibilities bring a sense of purpose and meaning that was identified by participants as contributing to wellbeing.

Socially Motivating Environment

Participants reported how the social environment of the seniors' gym had encouraged them to continue attending and con-

tributed to their enjoyment. Some participants joined the gym with their spouse or a friend and this also motivated them to continue attending. The gym provided a positive environment with a social aspect, where chatting to new and old friends during the exercises added to their enjoyment.

"If I'm at home I won't exercise on my own I will think about it, but I won't do it, whereas if I come to a class or a get together then I will do it." (Participant 2)

Attending the seniors' gym for some replaces the social network that was afforded through work. Following retirement people can lose social contacts and social networks may decline. Some participants reported meeting old friends and contacts they had not seen for years at the senior's gym. The supportive social environment motivated participants to 'work harder' when exercising together with other people.

"... that little bit of competition or whatever, you know, and you can chat while you're doing it as well so it's a good atmosphere" (Participant 1)

"I much prefer the spirit that you get from doing it with other people" (Participant 11).

For some participants the social aspect extended outside of the gym; meeting for coffee or going out occasionally for a meal or to the pub. The seniors' gym specifically provided social pressure and influenced participation. Observing others their own age or older engaging in exercises was an encouraged factor:

"In fact, there is a guy that comes he's 80 and he was doing things and thought I'll do some of that." (Participant 6)

Discussion

This study explored the influence of regular attendance at the senior's gym program on the subjective wellbeing of older adults. Quantitative results obtained indicated high levels of quality of life and average to high levels of mental wellbeing [29,30]. This was supported by the qualitative data obtained through structured interviews. The findings demonstrated that regular participation in the gym had resulted in high levels of subjective wellbeing, and satisfaction with the gym program. The study also provides insights into older adults' perceptions of wellbeing and their motivation for attending the gym program. The supportive, non-competitive and non-judgmental environment encouraged increased activity and confidence. The presence of older participants working out was a motivating factor for participants to improve their activity levels. Attending with friends or spouses and getting to know others, having chats and meetings outside of the gym for coffee contributed to and enhanced the perceived wellbeing effects especially for older women [8,9]. These social relationships provided some protection from the loneliness that some older people experience after giving up work and have been shown to correlate with decreased health status [1,22]. This research highlighted how maintaining wellbeing in older age alleviates the fear of getting old, associated with the loss of functional ability, usefulness, independence and purpose.

Experiencing meaning and purpose in being active, living independently, and enjoying social and family relationships all countered this underlying fear. There is a need for further research to explore the fear of getting old in older people.

This study suggests that older adults value eudemonic wellbeing, affirms the importance of an occupational perspective of eudemonic wellbeing for older adults [4,20]. Whilst the importance of psychological wellbeing, i.e., maintaining a positive mental attitude and self-confidence was valued, the study found little evidence of older adults' perceptions of wellbeing in hedonistic terms, i.e., in seeking out pleasure. Rather the overwhelming understanding with that wellbeing was experienced by older people as the ability to do what they wanted or needed to do to fulfil their personal needs and family roles. Increasing eudemonic wellbeing can counteract the perception of old age and the fear of losing capacity and becoming a burden. The findings of this study demonstrated the value of specifically targeted seniors' gyms and exercise classes as occupational opportunities for older people to increase their physical and psychological wellbeing. It demonstrates the value of taking a broader approach to measuring wellbeing to include the improvement or maintenance of independence, and social/family roles (WHO, 2013). It may be argued that these outcomes are at least as important to overall wellbeing in older adults, and in maintaining healthy aging, as the more commonly discussed physiological gains [32].

Limitation of the Study

The study involved participants at a single gym program and may not be generalizable to other contexts. Voluntary participation in this study may have resulted in a strongly positive bias, as all participants were regular attenders. Different opinions may have been obtained from people who had left the gym.

The structured interviews were conducted by novice health professionals who have little experience in interviewing. The ability of some of the interviewers to draw out further information may have been limited.

It is clear in the current study that family roles are important to the wellbeing of older adults. Previous studies have identified the importance of relationships such as marriage to wellbeing in the general population. Further research to investigate the impact of grand parenting on older people's wellbeing is needed.

Conclusion

The aim of the study was to explore the experience of wellbeing with a group of active older adults to identify the factors that support health aging. The results confirm that attending a senior's gym, which provided a supportive environment and personal instruction improved both physical and mental wellbeing. The experience of wellbeing for older people was significantly associated with and countered a fear of getting old. In this study getting old was not measured in years, but in the ability to maintain functional ability.

The study demonstrates the importance of eudemonic well-

being for older people including a sense of purpose and meaning. Wellbeing is seen as the ability to perform important functional tasks including looking after oneself and looking after loved ones. Social connections were also important to wellbeing and can be enhanced by targeted group gym programs. Addressing the health and wellbeing needs of older adults is increasingly important as the population ages. Exercise programs that support health aging are of value to individuals, to their families and to society as a whole as the costs of care for older people rise. Provision of senior gym programs with trained instructors is an affordable and effective way of enhancing healthy aging.

Acknowledgments

None.

Conflict of Interest

None.

References

- 1. WHO (2015) World report on Aging and Health.
- Warburton D (2006) Health benefits of physical activity: the evidence. Canadian Medical Association Journal 174(6): 801-809.
- 3. Steptoe A, Deaton A, Stone A (2015) Psychological wellbeing, health and aging. Lancet 385(9968): 640-648.
- 4. Hayward C, Taylor J (2011) Eudaimonic well-being: Its importance and relevance to occupational therapy. Occup Ther Int 18(3): 133-141.
- 5. Age UK (2014) Key stats on older people, ageing and Age UK.
- Netz Y, Wu M, Becker B, Tenenbaum G (2005) Physical activity and psychological well-being in advanced age: A meta-analysis of intervention studies. Psychol Aging 20(2): 272-284.
- Brown R, Riddell M, Macpherson A, Canning K, Kuk J, et al. (2013) The association between frequency of physical activity and mortality risk across the adult age span. J Aging Health 25(5): 803-814.
- 8. Barnett F (2013) The effect of exercise on affective and self-efficacy responses in older and younger women. J Phys Act Health 10(1): 97-105.
- Guedes D, Hatmann A, Martini F, Borges M, Bernardelli R, et al. (2012) Quality of life and physical activity in a sample of Brazilian older adults. J Aging Health 24(2): 212-226.
- Penedo F, Dahn J (2005) Exercise and well-being: A review of mental and physical health benefits associated with physical activity. Curr Opin Psychiatry 18(2): 189-193.
- 11. Angevaren M, Aufdemkampe G, Verhaar HJJ, Aleman A, Vanhees L (2008) Physical activity and enhanced fitness to improve cognitive function in older people without known cognitive impairment. Cochrane Database of Syst Rev (3): CD005381.
- Blondell S, Hammersley Mather R, Lennert Veerman J (2014) Does physical activity prevent cognitive decline and dementia? A systematic review and meta-analysis of longitudinal studies. BMC Public Health 14: 510-522.
- 13. Sumic A, Michael Y, Carlson N, Howieson D, Kaye J, et al. (2007) Physical activity and the risk of dementia in oldest old. J Aging Health 19(2): 242-259.
- 14. Williams K, Kemper S (2010) Exploring interventions to reduce cognitive decline in aging. Journal of Psychosocial Nursing and Mental Health Services 48(5): 42–51.

- Clark D, Stump T, Damush T (2003) Outcomes of an exercise program for older women recruited through primary care. J Aging Health 15(3): 567-585.
- 16. Davis J, Bryan S, Li L, Best J, Hsu C, et al. (2015) Mobility and cognition are associated with wellbeing and health related quality of life among older adults: a cross-sectional analysis of the Vancouver Falls Prevention Cohort. BMC Geriatr 15: 75.
- 17. Dodge Rachel, Daly Annette, Huyton Jan, Sanders Lalage (2012) The challenge of defining wellbeing. International Journal of Wellbeing 2(3): 222-235.
- 18. Killen A, Macaskill A (2015) Using gratitude intervention to enhance wellbeing in older adults. Journal of Happiness Studies 16(4): 947-964.
- 19. Hammell K (2008) Reflections on ... well-being and occupational rights. Can J Occup Ther 75(1): 61-64.
- 20. Stanley M, Creek J (2003) Well-being and older people: A review of the literature. Can J Occup Ther 70(1): 51-59.
- 21. Thomas Y, Gray M, McGinty S (2012) An exploration of subjective wellbeing among people experiencing homelessness: A strengths-based approach. Social Work in Health Care 51(9): 780-797.
- 22. Huxhold O, Fiori K, Windsor T (2013) The dynamic interplay of social network characteristics, subjective well-being, and health: The costs and benefits of socio-emotional selectivity. Psychol Aging 28(1): 3-16.
- 23. Litwin H, Stoeckel K (2014) Confidant network types and well-being among older Europeans. Gerontologist 54(5): 762–772.
- 24. Wong S, Wu A, Gregorich S, Perez Stable E (2014) What type of social support influences self-reported physical and mental health among older women? J Aging Health 26(4): 663-678.

- 25. Baker L, Cahalin L, Gerst K, Burr J (2005) Productive activities and subjective well-being among older adults: The influence of number of activities and time commitment. Soc Indic Res 73(3): 431-458.
- 26. Denzin N, & Lincoln Y (2005) Sage Handbook of Qualitative Research (3rd Edn). Thousand Oaks: Sage Publications. Dodge H, Kita Y, Takechi H, Hayakawa T, Ganguli M, & Ueshima, H (2008) Healthy cognitive aging and leisure activities among the oldest old in japan: takashima study. J Gerontol A Biol Sci Med Sci 63(11): 1193-1200.
- 27. WHO (1996) WHO QoL Bref. Geneva WHO.
- 28. Tennant R, Hiller L, Fishwick R, Platt S, Joseph S, et al. (2007) The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): development and UK validation. Health and Quality of Life Outcomes 5: 63.
- 29. Skevington S, Lotfy M, O'Connell K (2004) The World Health Organization's WHOQOL-BREF quality of life assessment: Psychometric properties and results of the international field trial: A Report from the WHOQOL group/ Qual Life Res 13(2): 299–310.
- 30. Stewart Brown S, Platt S, Tennant A, (2011) The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): a valid and reliable tool for measuring mental well-being in diverse populations and projects. Journal of Epidemiology and Community Health 65: A38-A39.
- 31. Stanley M (2015) Qualitative Research Methodologies for Occupational Science and Therapy. New York: Routledge.
- 32. Otkay J S (2012) Grounded Theory. Oxford: Oxford University Press.
- Steverink N, Lindenberg S (2006) Which social needs are important for subjective well-being? What happens to them with aging? Psychol Aging 21(2): 281-290.