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The official newspaper of the American Public Health Association



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Nutrition, exercise essential components for healthy aging: Living longer, stronger in later ye

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By Kim Krisberg

First in an in-depth series on healthy aging in conjunction with APHA's National Public Health Week 2 event, which will be held April 4-10, focuses on "Empowering Americans to Live Stronger, Longer!" V www.apha.org/nphw for details.

As the life expectancy of Americans continues to increase, the pressing concern for many public heal professionals has shifted from living longer to living healthier. Good nutrition and physical activity are parts of the healthy living equation, and as such, researchers are always searching for innovative way healthy behaviors.

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Question of the Month

What percentage of Americans believe that they and their communities have benefited from public health?

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Participants in the Lifetime Fitness Program get a workout at Seattle's Central Area Senior Center in July 2002. (Photo by Chris Arrendondo, courtesy Senior Wellness Project)

challenge is spreading the message and bringing older Americans into the fold.

"As public health professionals, what we want to focus on is finding functional benefits that mean som older adults, like getting greater mobility or being able to lift their grandchild," said Kay Loughrey, MPI program specialist at the U.S. Administration on Aging. "Those are the kinds of benefits that people re about, rather than the standard benefits like better health, which most people already know."

AoA recently launched the national "You Can!" campaign, which is working at a community level to er older adults in becoming physically active and improving their nutrition. A big challenge to engaging th population is simply getting them information, Loughrey said. Community organizations need to reach health care providers, such as giving doctors a list of available fitness and nutrition resources to whic can be referred, she told The Nation's Health.

"It's never too late to start (exercising and eating right)," Loughrey noted. "There's so many benefits, t functional and physical — there's almost too many to list."

An important aspect in changing lifestyle behaviors is to "start slow with any change and determine st well as long-term goals," according to Serena Sanker, senior program associate at the National Coun Aging, a non-profit organization that has focused on aging issues for more than 50 years. For exampl Americans can make a commitment to walk a few minutes a day several times a week or consider so diet changes such as substituting an unhealthy snack such as potato chips with fruit, Sanker said. St

with small modifications can ensure a longer lasting behavior change, she noted. According to the CE report, older people don't necessarily have to take part in strenuous physical activity to see health benefits. Daily walking or leisure-time activities such as gardening can also improve health.

"Physical activity is absolutely the thing that all Americans can do to improve the way they feel, their independence and the length of their life," Sanker told The Nation's Health.

Checking with a health care provider before beginning to exercise isn't necessarily a requirement for older people, Sanker noted. In fact, "(older Americans) almost need a doctor's okay not to exercise," said AARP member Susan Hughes, DSW, co-director of the Center for Research on Health and Aging at the Institute for Health Research and Policy at the University of Illinois in Chicago. Although, for people living with conditions such as arthritis, it can't hurt to consult a provider, Hughes noted.

"We can really cut into a cycle of disability by intervening and 'reactivating' people," Hughes told The Nation's Health. "It's a terrific thing that people can do for themselves."

The solution, Hughes said, is to tailor exercise activities toward different population characteristics. For older people, a phased build-up of aerobic activity over time might be best for frail or sedentary people, she said. To help and to motivate people to begin exercising, Hughes and her colleagues created "Fit and Strong!" a program for people with osteoarthritis and lower-extremity joint problems offered at several locations in Chicago. People who participated in "Fit and Strong!" experienced reduced joint stiffness and pain, an increased confidence in their ability to safely exercise as well as increased participation in physical activity, Hughes reported.

"I don't think we know as much as we should about barriers (to exercise)...but we are starting to learn more information," she said.

Hughes' university is also part of CDC's Healthy Aging Research Network, which recently finished a national survey of physical activity programming. The survey found that compared to the number of older adults, the supply of programming will only meet about half of existing demand. However, the good news, Hughes said, is that exercise can be as simple as using ankle weights and getting a good pair of walking shoes.

Low-income older adults can face additional barriers to exercise, such as living in neighborhoods not conducive to outdoor activities. But, the "important thing is for people to be as creative as possible," Hughes said, is that people get their exercise walking inside a mall or finding the local YMCA.

"People should be thinking of (exercising) in the same vein as going to the doctor," she said.

Not only does exercise improve physical health, but mental health as well. According to two December studies published in the Journal of the American Medical Association, physical activities such as walking are associated with better cognitive functions in both older men and women. In Seattle, older residents who participated in a fitness pilot program reported a decrease in depression after six months of activity, said Snyder, director of the Senior Wellness Project at Senior Services of Seattle/King County. The pilot program would later become the award-winning Lifetime Fitness Program.

"A lot of it is just getting out of their homes and feeling that they're still an important person," Snyder told The Nation's Health.

The Senior Wellness Project serves thousands of older residents in the Seattle and King County area who are older than 75. The project's Lifetime Fitness Program, which has been operating since 1999, is the result of a research collaboration that included the University of Washington and has now grown to more than 20 sites around the nation, according to Snyder.

Participants are able to take advantage of low-cost fitness classes taught by certified fitness instructors. About 99 percent of participants said they would recommend the classes to a friend, Snyder noted.

"(Regular exercise) is a paradigm shift for a lot of people," she said. "It's not about aging, it's how they feel about themselves."

Another program under the Senior Wellness Project umbrella is the Health Enhancement Program, which was originally designed for people older than 75 living with chronic conditions who wanted to make health changes. Participants in the enhancement program work with a nurse and social worker to create a health plan primarily around physical activity and good nutrition. According to Snyder, a study conducted on

found that participants had a 72 percent decrease in days spent in the hospital from the prior year.

“We want people to graduate from the program with a feeling that they can manage their health on their own,” she said.

Good nutrition also key to healthy aging

In addition to getting physical, making wise food choices could have a significant impact on healthy aging. Many older Americans are more likely to eat five or more servings of fruits and vegetables daily, many are not. Some older Americans — and Americans in general — might view diet changes as a sacrifice, but that doesn't have to be, said Susan Moores, MS, RD, a spokeswoman for the American Dietetic Association and a dietitian consultant in St. Paul, Minn.

“Diet is so important, and it's not all about sacrifice, but about embracing the wonderful foods that are available,” Moores told The Nation's Health. “As you get older, you need to make more of your calories count — every calorie counts.”

For some older Americans, a major barrier to eating healthily is cost. In fact, many seniors face difficult trade-offs: to afford prescription medicines and other necessities, fresh fruit and vegetables can be left behind, according to Shari Baker, RLD, nutrition program manager at the Ohio Department of Aging.

Baker helps manage the department's Senior Farmers' Market Nutrition Program, which works with local farmers to help low-income seniors gain access to fresh produce. The program — now in its fifth year — operates in 15 Ohio counties, and in 2004, served about 16,000 older residents, Baker said. The U.S. Department of Agriculture was the market's grant funder, but such funding was recently cut and, in turn, the program will not be expanded, Baker noted.

“Seniors know that eating fruits and vegetables is a good thing, but maybe in the past, they didn't have the wherewithal to do it,” Baker told The Nation's Health.

The Ohio Department of Aging allocates the USDA grant money to its partners throughout the state, in a contract with local farmers who take part in the program. Eligible seniors are given coupons they can use to purchase fresh fruits and vegetables at the farmers' markets and oftentimes, area aging agencies will provide transportation. The farmers' markets are also tied to an educational component in which the senior center or aging agency involved will offer classes on the benefits of healthy eating, sharing recipes and cooking demonstrations, according to Marc Molea, MHA, MCRP, chief of planning, development and evaluation at the Ohio Department of Aging.

In addition, Baker said, a survey of farmers' market participants found that 77 percent ate more fruits and vegetables than usual, almost 76 percent ate more than three servings per day — a 43 percent increase. Ninety-three percent said the best aspect of the program was access to fresh produce.

“(The farmers' market) serves seniors, but it also supports the local economy — it's a dual impact program,” Molea said.

Unfortunately, funding for senior nutrition programs such as the Ohio farmers' market has been steadily decreasing over time in proportion to demand and increases in costs of living. Such issues leave a divide between current and predicted demand for senior services and their status as a national priority, according to Nadine Sahyoun, PhD, RD, assistant professor in the Department of Food Science and Nutrition at the University of Maryland.

“We're not putting enough emphasis yet on dealing with some of these issues,” Sahyoun told The Nation's Health. “In order to decrease the expenditures on chronic disease and illness, we need more preventive care and the kind of work that will help people stay at home and live healthfully.”

In addition to eating wholesome foods, older Americans should also be mindful of how aging affects their ability to take in nutrients, Sahyoun said. For example, there is often decreased absorption of calcium and vitamin D in older women, which can lead to osteoporosis. In turn, older people should be aware of such physiological changes so they can make appropriate accommodations, she said. However, for some low-income seniors, overcoming barriers that limit access to fresh produce is difficult enough, Sahyoun said. For example, a person with a fixed income and mobility issues might have problems affording transportation services to the grocery store.

"It is so complex to understand all of the factors that affect nutrition among older adults," Sahyoun noted.

Eating properly is also affected by physical and mental well-being, according to Ruth Palombo, PhD, independent healthy aging consultant in Boston and co-chair of APHA's Task Force on Aging. For instance, because Medicare — the nation's health care program for seniors — doesn't cover dental care, an inability to eat fruits and vegetables could be impacted by poor teeth or broken dentures, Palombo said. Social isolation can affect dietary intake, such as seniors who live alone and don't want to bother cooking for themselves — Palombo called it the "tea and toast" syndrome.

"Social factors, physical factors and eating are very much tied together," she told The Nation's Health.

One way to bridge the gap between good health and good eating is to train medical professionals in geriatric nutrition, Palombo said.

"If you tell someone to eat a healthy diet without specifics, it's difficult," she said. "(Nutrition) is a big area and it doesn't happen in a short visit. Our health care system needs to be working much more as a team to be able to refer to a (registered dietitian) or nutritionist who can help someone with the specifics."

Both Palombo and Sahyoun agreed that much more preparation is needed to ready the nation for the generation of older Americans.

"There is a gap here between knowledge and actual education of older adults and this is where we need to focus our efforts," Sahyoun said.

For more information on healthy aging, visit www.aoa.gov.

For more on National Public Health Week events or to become a partner or sponsor, visit www.nphw.gov.

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