

# Healthy Aging in Place: Perceptions of Rural Older Adults

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To date, initiatives to support healthy aging in place have focused primarily on the views of policy makers, researchers, and health professionals. This article explored the meanings, experiences, and perceptions of healthy aging in place among rural older adults. Guided by a community-based

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Funding was provided by the Saskatchewan Health Research Foundation (SHRF), the Canadian Centre on Health and Safety in Agriculture (CCHSA), the Public Health and the Agricultural Rural Ecosystem (PHARE), and the Canadian Institutes of Health Research through a Doctoral Research Award.

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participatory research approach, this study sheds light on the perspectives of rural seniors themselves. Through semistructured interviews with 40 rural older adults, the study found that rural older adults' conceptualization of healthy aging in place consisted of factors that policy makers and health professionals would not necessarily consider. In contrast to biomedical approaches, the rural older adults situated healthy aging in place within a more holistic context of health, ranging from social interaction to maintaining an optimistic mental outlook. If policy makers and researchers are to develop more effective interventions that support rural healthy aging in place, then the importance of rural older adults' perspectives, experiences, and input must be recognized.

Healthy aging in place has become a key term among policy makers, researchers, and health professionals. Healthy aging has been understood by researchers using biomedical models and focusing on mortality and morbidity (Westindorp, 2006) or on functional health status (Haveman-Nies, DeGroot, & Van Staveren, 2003; McLaughlin, Jette, & Connell, 2012). Policy makers have defined aging in place as "the ability to live in one's own home and community safely, independently, and comfortably, regardless of age, income, or ability level" (Centers for Disease Control and Prevention, 2009, p. 1). In Canada, the rural population is aging faster than their urban counterpart, and approximately 15% of the rural population is aged 65 and older (Dandy & Bollman, 2008). Similar to Canada, many countries are experiencing challenges related to rural aging populations such as Australia (Davis, & Bartlett, 2008); India (Johnson, Duraiswamy, Desai, & Frank, 2011); and China (Dong, & Simon, 2010). For example in China, rural aging challenges are anticipated to be more serious than in urban areas because of the massive rural to urban migration of young people (Zeng, 2013). As policy makers, researchers, and health professionals address the needs of the aging demographic in many rural communities, it is important to understand rural older adults' perceptions of healthy aging in place.

To date, studies focus primarily on the healthy aging perceptions of policy-makers (Health Canada, 2002); researchers (Potempa, Butterworth, Flaherty-Robb, & Gaynor, 2010); and health professionals (Hammer & Östgren, 2013). In 2006, a background paper entitled "Healthy Aging in Canada" (Federal, Provincial and Territorial Committee Seniors, 2006) was developed to provide a vision for healthy aging by focusing on five areas for action including social connectedness, physical activity, healthy eating, falls prevention, and tobacco control. Although the paper makes a notable contribution in developing a vision towards healthy aging in Canada, the vision shared is largely from a public policy perspective. In 2009, a national survey was conducted on healthy aging entitled, the Canadian Community Health Survey (CCHS): Healthy Aging (Statistics Canada, 2009). Although the term *healthy aging* is included in the survey title, it is striking to note that that no questions explored respondents' perceptions of healthy aging or *healthy aging in place* (Statistics Canada, 2009). Moreover, a recent environmental scan across Canada identified over 75 policies and programs focused on healthy aging (Ndegwa, 2011). Although healthy aging is a growing issue in public policy, many initiatives reflect the perspectives of policy makers, researchers, and health professionals rather than the views of older adults, especially rural older adults.

With the exception of a study in the Netherlands (Naaldenberg, Vaandrager, Koelen, & Leeuwis, 2011); a study in Thailand (Thanakwang, Soonthornhada, & Mongkolprasoet, 2012); and one study conducted in the United States (Bryant, Corbett, & Kutner, 2001); there is a paucity of research examining perceptions of healthy aging among older adults.

While several government initiatives have been developed to improve healthy aging (Ndegwa, 2011), knowledge on healthy aging remains highly speculative. For example, social engagement may be of little importance in facilitating healthy aging unless one's perception of healthy aging is established.

In order to develop effective interventions to support rural healthy aging in place, it is important to understand the experiences and meanings held by rural older adults. Research on rural healthy aging in place has been hindered by idealistic views that have characterized rural areas as pristine pastoral landscapes, with idyllic community networks, less stressful living and close connection to the land (Keating & Philips, 2008). However, rural older adults are reported to experience more social isolation and lower social functioning than their urban counterparts (Baernholdt, Yan, Hinton, Rose, & Mattos, 2012). As a cultural group with special needs, rural seniors may face different aging experiences from urban seniors, which may be compounded by lower incomes, less education, geographical barriers, and poorer access to health and emergency services (Averill, 2012). Moreover, studies suggest that rural older adults value cultural characteristics of self-reliance, independence (Russ, 2012), hardiness, and privacy (Sivamalai, 2008).

This study advances geriatric knowledge by providing preliminary insight into the meanings, experiences, and perceptions of healthy aging in place through the viewpoints of rural older adults. More specifically, this study explores healthy aging in place perceptions among rural older adults living in Saskatchewan, Canada. To date, there is a scarcity of data on rural older adults in Saskatchewan, a province in Canada with the highest number of centenarians in the country (Statistics Canada, 2012a). If policy makers and researchers are to develop more effective interventions that support rural healthy aging in place, then the importance of rural seniors' perceptions and local input must be acknowledged.

## RESEARCH QUESTIONS

This research builds on a pilot study that examined rural older adults' support systems in facilitating healthy aging in place (Bacsu et al., 2012). This research is part of a larger three-year longitudinal, qualitative study that examines the interventions that support rural older adults' independence and ability to remain within their homes and communities to age in place. During the interviews, participants discussed a wide variety of topics including functional health, mobility, care-giving, nutrition, yard work, housing, transportation, access to services, and social support. This paper focuses on the findings related to rural older adults' perceptions of healthy aging in place. Rural older adults' understandings of healthy aging were explored through the following research questions:

1. What does rural healthy aging in place mean to you?
2. What factors do you think are important to healthy aging in rural communities?

## METHODOLOGY

A community-based participatory research (CBPR) approach was used to explore the perceptions of rural older adults towards healthy aging in place. Community-based participatory research involves collaboration; capacity building; collective decision-making (Israel, Schultz,

Parker, & Becker, 1998); and produces community relevant research that aims to address locally identified needs (Pinto, 2009). In this study, community partners were involved in all stages of the research process from the development of the research questions to the dissemination of the study's findings (Israel et al., 2003). All partners participated as equal members and collective decision-making was used on a continual basis through all stages of the research process.

Ethical approval (Beh 11-79) was obtained at the University of Saskatchewan and the University of Regina. Prior to the interviews, an overview of the study's purpose was provided along with a consent form that highlighted important ethical topics such as voluntary participation, confidentiality, and the right to withdraw from the study. Each of the participants received a copy of their signed consent forms for their own records.

Participants were recruited with the help of local community partners and selected from a population of older adults living in the two rural communities of Watrous and Wolseley, Saskatchewan, Canada. Wolseley has a population of approximately 867 (Statistics Canada, 2012c), while Watrous has a population of 1,857 people (Statistics Canada, 2012b). Both of the rural communities are located approximately 1.5 hours from large urban centers. Participants were purposely selected to be representative of older adult age categories such as 65–74, 75–84, and 85 years and over.

The findings reported in this paper were drawn from two waves of in-depth, qualitative interviews which were conducted with the same group of 40 older adults (24 women and 16 men) ages 65 and older from September 2011 to August 2012. Four participants were unable to participate in the follow-up interviews as they were either experiencing illness or were unavailable at the time of the interviews. A semistructured, open-ended interview guide was used with probing to allow for clarification and verification of responses. The interview guide was designed to enable participants to speak openly and to collect information on healthy aging in place. The researcher started interviews with general questions about the lives of the participants, asking, for example, how long the participant lived in the community in order to encourage the participants to share their stories and perceptions. Each interview was approximately one hour in length and was conducted in the participants' homes. The interviews were audio-recorded, transcribed verbatim, and analyzed for themes with ATLAS.ti-6 ([http://www.atlasti.com/uploads/media/miniManual\\_v6\\_2011.pdf](http://www.atlasti.com/uploads/media/miniManual_v6_2011.pdf)).

## DATA ANALYSIS

Thematic analysis was conducted to identify common themes, patterns, and relationships through four main stages. First, six transcripts were independently read and reviewed by four members of the research team using an interpretive approach (Creswell, 2007). Following the initial reading, the four researchers developed an initial code list that was grounded in the data. Second, a full team meeting was held to discuss areas of agreement and disagreement and a master code list was developed. The master code list was used to code all of the transcripts using the qualitative data analysis software Atlas.ti 6. Throughout the data analysis, full team meetings were held to review any coding issues. Third, following the data analysis, a team meeting was held to review the findings. Fourth, participant workshops were held in each of the communities to share the results and ensure that the findings accurately reflected participants' views.

## FINDINGS

Findings from this study highlight rural older adults' healthy aging in place perceptions, knowledge, and experiences in Saskatchewan, Canada. This study identified five main themes related to rural healthy aging in place: social interaction; keeping active; independence; optimistic mental outlook; and cognitive health. These factors will be discussed in detail using participant quotes to highlight the viewpoints of the rural older adults.

### Social Interaction

Social interaction was a central theme identified by participants in relation to perceptions of rural healthy aging in place. The older adults reported that their social circles consisted of friends, neighbors, and family. A senior woman noted, "Well I like to get out with the people, I do, I like to mix with the people." A key feature that influenced healthy aging in place was friendships. This is highlighted by a rural senior man's comment, "Growing old and living with it as opposed to dying with it involves friendships." Another participant stated, "I think friends and neighbors are your best resource to an aging population ... I guess it's important for all of us to start networking like crazy."

Much of the discussion around friendships emphasized reciprocity and the caring nature of friendships. A participant stated, "When you're with your friends, you're with people who care." Reciprocity was evident in discussions related to mutual benefit and exchange of favors. For example, participants described how younger neighbors would often help with yard work in exchange for baked goods or a meal.

Respondents valued social interaction with people of similar age. For example, one participant stated, "Elderly people are more friendly because we're all going through the same thing; I guess we value friendships more than we did when we were younger." Similarly, respondents discussed enjoying taking exercise classes and going for coffee with people of similar age. Seniors may tend to make friendships more predominately with their older aged cohorts because of shared experiences. However, with advancing age, seniors lose friends, making organized opportunities for social interaction more important. Many respondents identified that they would like to have more opportunities to interact with younger generations but were unaware of how to initiate this interaction.

Respondents indicated that social interaction with their family was important to healthy aging. A participant stated, "My family is very caring ... They all help me, even by their phone calls. Yeah, they come over and do things, we always get together." Another respondent believed that an emphasis on family was essential to healthy aging and stated, "Stay in touch with your family, make sure that that's a good relationship." Similarly another senior noted, "Now we're older ... There's probably nothing we enjoy more than being in a family gathering or barbecue, and watching the kids play, and so on." Participants identified the importance of Internet and telephone in supporting social interaction. With the exception of unsolicited advice, family was generally viewed as a positive facilitator of social interaction. However, seniors highlighted their desire for freedom in making their own decisions.

Mobility was identified as important in fostering social interaction. When asked about the factors important to social interaction, a respondent stated, "Being able to get around and still be able to have my friends and socializing." Another respondent commented, "Well, I guess being able to get out and associate with other people, you're able to get around ... ." Important factors

identified in relation to rural seniors' mobility included the following: having safe sidewalks and ramps, good winter weather conditions with limited ice and snow, and being able to drive.

### Keeping Active

Keeping active was identified as a key theme in relation to rural healthy aging in place. A participant commented, "As we get older, it is [vital] that we can continue to feel good and able to do things to keep life worth living, worthwhile ... ." Keeping active was often discussed in relation to being involved, engaged and participating in the community. One respondent noted, "To be able to participate and take part in the community and the activities that it offers and volunteerism ... I think staying active is the key." Another senior described the importance of remaining active in relation to healthy aging and stated, "I think just to be able to continue with the activities that you have been used to doing and remaining active and not a sedentary life." Participants described a range of activities including crafts, physical activity, reading, gardening, music, pet companionship, and self-employment. A senior man discussed having a home-based business to keep active: "Like I keep this little business I have because it keeps me active and gives me something to do ... I work around our camping trips and stuff."

In describing rural healthy aging in place, many participants expressed the importance of having different options for activities. A senior woman stated, "There are lots of activities to take advantage of ... I don't know what could be better than that for aging people." A senior man noted, "We have some organized activity here ... an organized card tournament, card party this afternoon ... ." Another respondent emphasized the necessity of having various activities, "You know the thing is if you were to stay in your own house and just look at the four walls ... that's why it's so important that we've got Wolf Creek Friendship Center where you know there's carpet bowling, there's cards ... ." The local seniors' center and churches were often identified as importance sources of activities.

Participants described the importance of self-initiative in keeping busy and being involved in the community. A woman stated, "Being able to participate in things that go on because after all you have to be out and about and don't expect everybody to come to you and entertain you ...." Another respondent highlighted the importance of self-initiative in being engaged, "We feel in a community, you have to be involved, if you're going to be a recluse, that's not going to help anybody, including yourself."

### Independence

In discussing healthy aging in place, independence was identified as a key theme. Independence was generally described as the ability to make one's own decisions, live self-sufficiently, and have freedom over one's own life. A participant stated, "Being independent, being able to do the things you want to do." Independence and freedom in decision-making was often highlighted in participant's responses. For example, a participant noted, "Just being able to live as you choose." In describing healthy aging in place, a senior highlighted the importance of freedom and stated, "Particularly when you have the freedom to do what you want to do, if you're not healthy you don't have freedom." Fear of loss of independence was also indicated. A respondent commented, "Like I said, being able to do what I want to do, my biggest fear is ever having a stroke."

Self-sufficiency was identified by many participants in relation to independence. A participant stated, "It means independence, that I can be independent and self-sustaining." Another senior responded, "I can do what I want, I'm self-sufficient. I don't have a problem making or getting meals ... I can use a microwave, a dishwasher. I get around."

Many seniors recognized the importance of mobility in maintaining their independence. A respondent commented, "To be able to walk and take care of yourself, basically." Another senior stated, "Being independent enough to do everything, like I said mobility to me is key ... I have to be able to walk and get where I want to get to where I want to go."

### Optimistic Mental Outlook

Maintaining an optimistic mental outlook was recognized as a theme to support rural healthy aging in place. Participants discussed the importance of remaining happy and optimistic. In discussing healthy aging in place, a participant noted, "I'm thinking your mental optimistic outlook ... Your aches and pains cause you to be depressed and that might be a big issue with seniors as they have to limit the things they could do."

Having a positive outlook was discussed in relation to accepting the aging process. For instance, a senior man stated, "My dad died when he was 97 ... He had a really good sense of humor about his aging, he was in a home, he needed a walker, he had breathing problems ... I think healthy aging is probably being able to accept your situation." The importance of humor was identified in relation to the aging process and coping with loss of abilities.

Respondents emphasized the positive influence of feeling younger than their physical age. One respondent stated, "Healthy aging ... feel like I'm twenty years younger than I am ... I feel about 60." Another senior stated, "Well I think healthy aging is great, I think I feel young and that's young." A senior woman emphasized the importance of feeling young and commented, "Don't act like you're old lady, you know that's what I was saying, I don't act like I'm an old lady ... I like to keep, stay young as long as I can." Many participants discussed the importance of not letting age determine one's abilities. A woman respondent stated, "I don't believe in people who would say 'Oh well I'm 75 now I just sit down I can't do anything.' I think you do what you feel capable of doing and I think that helps you age well ..." Another participant commented, "I guess the thing that I think is important is to make the most of every stage that you're at ..." Overall, respondents shared a common view that age was not indicative of the aging process.

Poor spousal health and caregiving were identified as challenges to maintaining a positive mental outlook. Participants discussed the need for awareness of available services to support rural caregivers such as respite and long term care facilities. Dealing with grief and loss of a spouse was identified as a significant concern by many seniors. Accordingly, having sufficient caregiver services, access to information of available services, and mental health supports were identified in relation to sustaining an optimistic mental outlook.

### Cognitive Health

Respondents identified cognitive health as a crucial component of rural healthy aging in place. A participant noted, "That's the most important thing, keeping your mind sharp."

Participants expressed concerns and anxiety related to cognitive decline and healthy aging. Participants shared personal accounts and stories of their friends, neighbors, and family members suffering from cognitive decline. A participant stated, “My biggest concern is why in the heck can’t they develop a treatment for Alzheimer’s?”

Many respondents made reference to activities that they performed to maintain their cognitive health. A respondent commented, “We try and do things that will keep our minds a little bit active.” Another participant noted, “Like we do the crosswords on the English paper daily, we do a bit of things, at least a couple of Sudokus every day and I read a lot.”

Proper nutrition and exercise were recognized as key factors to supporting cognitive health. A respondent stated, “Good nutrition, exercise, using your mind to keep it functioning properly ... exercise is going to contribute to a good healthy body and keep your mind active.”

Reading was identified as an important method for maintaining cognitive health. A participant stated, “And to keep a good mental alertness we get a daily paper and we both read that before we go downtown so you have something intelligent to talk about, not just worry about the neighbors, try to keep abreast of the happenings even in your own community or the world ... I think that all helps for healthy aging.”

## LIMITATIONS

Although older adults living in nursing homes and those with cognitive impairment were not represented in the analysis, this study provides rich data that can be used to inform the development of culturally informed interventions to support rural healthy aging in place. At a global level, the findings from this study highlight the importance of situating and developing interventions to support older adults within the unique cultural and geographical context of the local communities. For example, understanding how different cultures and backgrounds influence older adults’ beliefs, knowledge, and informational requirements optimizes the development of appropriate policies, programs, and the delivery of services to support healthy aging in place.

## DISCUSSION

This study found that rural older adults’ conceptualization of healthy aging in place consisted of factors that policy makers and health professionals would not necessarily consider. In contrast to biomedical approaches, this study found that rural seniors situated healthy aging in place within a broader context of health, ranging from independence to social interaction. Accordingly, efforts to improve rural healthy aging in place must consider the unique context and specific needs and experiences of older adults in rural communities (Averill, 2012).

Participants shared the view that social interaction and keeping active were important factors to support rural healthy aging in place. Participants highlighted the importance of self-initiative and the need to be engaged in activities. Maintaining strong social support circles, as well as being involved in the community were viewed as key themes to rural healthy aging in place. With the exception of unsolicited advice, familial interactions were often perceived as positive factors supporting social interaction. However, rural older adults highlighted their desire for freedom in



making their own decisions. Participants noted the importance of friendships with other older adults and appreciated the shared commonalities and realities in the aging process.

Many participants addressed the importance of having a positive mental outlook. Participants felt that it was important to not let age determine one's abilities. Age was not viewed as being indicative of one's perceptions, experiences, or needs. Spousal health was associated with the ability of married participants to experience healthy aging in place. Participants related poor spousal health and demanding caregiving responsibilities as challenges to a positive mental outlook.

Instead of explicitly defining what healthy aging in place meant to them, some participants identified the challenges of healthy aging, specifically emphasizing aspects of cognitive decline and loss of mobility. Cognitive decline was viewed as a challenge to healthy aging as participants perceived that it would impede their ability to meet their needs and provide care for themselves. Having good mobility was interwoven throughout the findings and viewed as a prerequisite for facilitating key features of healthy aging in place, from independence to social interaction. Participants indicated that being able to drive a vehicle or a scooter augmented their physical mobility.

Globally, this study's findings shed light on the need for local input and highlight the importance of understanding the role of culture in healthy aging perceptions. Culture surrounds all groups of people and shapes the aging process as it influences older adults' experiences, expectations, and concerns (World Health Organization, 2002). In developing interventions to support rural healthy aging, it is pertinent for decision makers to engage in local consultation and expand their knowledge of the specific issues and cultural influences impacting rural older adults (Goins, Spencer, & Williams, 2011). For example, rural older adults may have local insight or knowledge of potential healthy aging challenges such as cultural barriers to accessing health supports. This study's results have key implications for broader international public policy and research as it highlights the need for local perspectives, knowledge, and input in the development of appropriately designed and culturally informed interventions for older adults.

This study's results concur with existing research, in regards to identifying the importance of culture and the need to address healthy aging perceptions among diverse populations. For example, a study in China with younger adults found that their healthy aging perspectives were accentuated by socioeconomic aspects such as getting married, having children, earning money, owning a flat, and having savings (Lee & Fan, 2008). Laditka et al. (2009) found that perceptions of aging well varied among different ethnic groups and suggested that culturally informed healthy aging models are needed to support aging among diverse older adults. If research and policy are to develop more comprehensive interventions to support older adults, then studies must address the importance of culture by exploring healthy aging meanings, values, and experiences among diverse older adults. Accordingly, future research needs to include older adults from different cultures and backgrounds in order to better understand healthy aging among diverse older adult populations.

## CONCLUSION

Existing policy and research on healthy aging in place has focused primarily on policy-makers', health professionals', and researchers' views of healthy aging, whereas this study explored the direct perspectives of rural older adults. The findings from this study shed light on the need to

situate and develop rural healthy aging interventions within the unique local and cultural context of rural communities. In contrast to biomedical approaches, this study found that rural older adults described healthy aging in place as an interrelated combination of factors ranging from independence to social interaction. In conducting rural healthy aging research, the importance of community-level input and understanding rural seniors' perspectives cannot be overstated. If policy-makers and researchers are to develop more effective interventions to support rural healthy aging in place, then the importance of rural seniors' knowledge, experiences, and understandings must be acknowledged.

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