Keeping active for better ageing
Conor Breen, CARDI
24 April 2015
Overview

1. Setting the context
2. Increasing physical activity in older adults
3. Case studies and policy lessons
<table>
<thead>
<tr>
<th>Person</th>
<th>Nationality</th>
<th>Longevity secrets</th>
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<tbody>
<tr>
<td>Jeanne Calment, 122</td>
<td>French</td>
<td>Olive oil, port wine, chocolate, <strong>exercise</strong></td>
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<td>Alexander Imich, 111 (died 2014)</td>
<td>Polish-American</td>
<td>Genes, nutrition, <strong>exercise</strong></td>
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<td>Misao Okawa, 117, world’s oldest woman (died 2015)</td>
<td>Japanese</td>
<td>Sushi, 8 hours’ sleep, <strong>exercise</strong> (squat thrusts)</td>
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<tr>
<td>Jiroemon Kimura, 116, longest living man</td>
<td>Japanese</td>
<td>Small portions of food, <strong>exercise</strong></td>
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Blue zones

LONGEVITY HOTSPOTS
A Blue Zone is a region of the world where people commonly live active lives past the age of 100 years. Scientists and demographers have classified these longevity hot-spots by their inhabitants' ability to live longer, on average, than anyone else in the world. For more information, visit www.bluezones.com.

BLUE ZONE LIFE LESSONS

MOVE NATURALLY
Longevity all-stars engage in low-intensity physical activity, often as part of a daily work routine.

RIGHT TRIBE
Blue zone inhabitants have strong social support networks and prioritize family and faith.

RIGHT OUTLOOK
People who live in blue zones have a sense of purpose and their daily lives are infused with a sense of calm.

EAT WISELY
A common thread among longevity cultures is a plant-based diet, which avoids meat and processed foods.
• Current levels of physical inactivity (World Health Organization, 2014)

• Study of declining rates of physical activity in the US over 50 years (Brownson et al., 2005).
recommendations on physical activity for health
CARDI RESEARCH – KEEPING ACTIVE FOR BETTER AGEING (2015)
<table>
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<th>Factors that encourage activity</th>
<th>Barriers to activity</th>
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<tr>
<td>• Individual</td>
<td>• Health</td>
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<td>• Environmental</td>
<td>• External</td>
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<td>• Environmental</td>
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Factors that encourage more activity

- Social and individual factors have more of an influence than environmental factors (Cerin et al., 2013)
The factors associated with self-reported physical activity in older adults living in the community

Gabrielle McKee¹, Patricia M. Kearney², Rose Anne Kenny³
Interventions: what works?

- Healthcare professionals providing information
- Incorporating physical activity into daily life
- Improving physical activity environments
- Building self-efficacy
- Addressing inequalities
- Noordman et al., 2010
- Kerse et al., 2005
- Johnson et al., 2014

Healthcare professionals providing information
• Convincing evidence that targeting self-efficacy is an effective means of increasing physical activity
  – Warner et al. (2014)
  – Williams & French (2011)
  – Darker et al. (2009)
  – Burke et al. (2008)
- Active travel
- Sedentary older adults (Fox, 2014)

Incorporating physical activity into daily life
• Using Local Authority planning, Transport plans, public space consultations, etc.

Improving physical activity environments
• Remove barriers over the life cycle
Case study 1: Green prescription, New Zealand
Case study 2: Katanning, Australia

Shire of Katanning
At Risk Populations

Background
Katanning is a very diverse multicultural community with significant Aboriginal Mabu.

Objectives
- Promote and preserve physical or...
Case study 3: National Walking and Running Programme, Portugal
Case study 4: Dutch District Approach, the Netherlands
Case study 5: Active living by design, US
FOUR LESSONS FOR POLICY AND PRACTICE
Lesson 1: Clinical guidelines on physical activity

• Guidelines for the clinical management of overweight and obese adults and children
• GPs / Public Health Nurses / Other health professionals
Are NICE guidelines becoming a ‘laughing stock’?

5 March 2015

NICE recommendations are increasingly complex and impractical, and the institute risks losing the confidence of GPs, finds Caroline Price

NICE guidelines are seemingly becoming increasingly detached from day-to-day general practice.

In key areas of primary care – cardiovascular disease, diabetes, asthma, cancer diagnosis – the latest guidance from the institute has been criticised by experts and grassroot GPs.
Lesson 2: Build self-efficacy

• Should underpin all physical activity interventions
• Five simple steps
Lesson 3: Move from no activity to some activity

- Greatest reduction in risk is between inactive and moderately inactive groups
- A 20 minute brisk walk each day
Lesson 4: Plan and design activity-friendly environments
• Physical activity is “today’s best buy in public health” (Morris, 1994)
For copies of report

www.cardi.ie