

Active Aging

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The concept of aging has evolved in recent years due to the increased life expectancy in the Western world [1]. The current trend is “adding quality of life to years, not just years to life,” leading to the development of concepts such as active or healthy aging [2].

In evaluating the use of time by the elderly, several studies show that the concern about keeping them entertained and active is increasing [3]. Based on studies that began to confront the realization of activities among elderly people living at home and living in senior centers [4], we can highlight some data: people who reside in their homes are freer to do different activities, while those in institutions are more restricted by a schedule. However, in general, the residents in nursing homes have access to a range of activities with more variety. This is a fact that in recent years is being promoted through investments in social policies to encourage activities in this group (e.g., classroom training, workshops, civic centers, etc.) [5,6] in the community and in residential care or nursing homes.

“Happiness does not vary much with age. (...) As the satisfaction or welfare cognitive assessment underlines, there is a clear increase with age (...) [However] the frequency measurements of happiness or positive emotions, show a progressive decrease with age. Also, the frequency of pleasant activities appreciably decreases with age,” says Argyle [7], assuming that satisfaction increases relative to the most important aspects: work, marriage, leisure, and religion. The realization of recreational, cultural, and leisure activities are an important element of gratification for seniors [8]. The potential impact on health can be a key element in the sense of well-being and life satisfaction, so that active behaviors and healthy lifestyles will be a good indicator of life satisfaction [9].

Life satisfaction is a psychological construct that reflects the subjective well-being of the individual. The assessment of life satisfaction is a simple measure that encompasses various dimensions related to psychological, emotional, perceived health, and social relations. The close relationship with the concept of quality of life makes it a construct to consider, especially in the elderly population [10].

Studies show that practical advice for life satisfaction and quality of life are given for prevention based on improving and adapting behaviors, habits, and lifestyles in relation to health, leisure, relationships, and stress management [11,12].

Psychosocial variables that appear to better predict greater satisfaction, according to most studies, are health, functional abilities, social contacts, and activity [11,13]. In addition, socio-demographic variables such as gender, marital status, level of income, and education may also be related to satisfaction in older people [14]. According

to Zamarrón [4], psychosocial variables appear to be more strongly associated with life satisfaction than demographics.

Research on life satisfaction among older persons has important social, psychological, and social impacts since it can determine social policy and health promotion in terms of the intervention factors that appear to influence this satisfaction [4,12]. Hence, studies to properly evaluate and determine these factors may be of importance for public health and health management [15-16].

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