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## Positive Gerontology: Well-Being and Psychological Strengths in Old Age

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The public discussion about old age and aging is often focused on losses that occur in many areas of life. The deteriorating state of health, the loss of independence, the increased need of nursing care,as well as the increased risk for dementia and memory loss are automatically associated with the aging process by many people. Unfortunately, this deficit-oriented and pessimistic view also determines the scientific examination of old age. However, there are two important points that this perspective ignores. First, aging is not a homogeneous process, but can take a range of different courses [1-3]. Second, old age is not characterized only by risks and losses, but has also extensive strengths that are essential to maintain positive well-being in spite of losses [4,5].

The heterogeneity in old age is one of the main findings in gerontological research [6-8]. With respect to their functioning, individuals of the same advanced age can be very different from each other, whereas individuals of the same younger age can be very much alike. Further, there is also empirical indication that old age is not a single phase of life but can be divided into (at least) two phases [9-12]. The third age is characterized by physical and mental fitness, good social integration and high activity level. In addition, the so called young old individuals show a high level of emotional and cognitive well-being [7]. In contrast, the fourth age seems to be less positive. The oldest old individuals often suffer from several chronic diseases and have cognitive limitations [13-16]. Furthermore, their social network is significantly reduced [17], and many of them need increased support and assistance or even long term care [18-20]. Baltes and Smith [7] showed that 80% of very old participants of the Berlin Aging Study suffer from losses in three to six areas such as vision, hearing, strength, functional capacity, intelligence, and physical health. In sum, among these very old study participants there was a high degree of functional impairment and multimorbidity, as well as a substantial prevalence of dementia (approximately 50% at the age of 90 years and above). Gerontology speaks in this particular context of a very vulnerable stage of life in which the increasing losses and deficits are juxtaposed within sufficient opportunities for their compensation [9].

Here one could ask, if, in face of a steady decline in health condition and mental function, the life in very old age is valuable and worth living at all. Can individuals adapt successfully to the changes that occur in very old age? Indeed, adaptation activities to new development requirements are necessary across the entire lifespan, but they may be especially of particular importance in late life due to accumulating losses. Paradoxically, numerous studies document an impressing resilience and adaptability in old and very old age [21-25]. Despite all limitations and losses, older adults maintain a positive sense of subjective well-being, which can by understood as an indicator for a successful adaptation [26, 27]. Both the emotional and the cognitive facet of the subjective well-being [28] show a high level and stability into very old age [29]. If there are age differences or negative changes, such as with respect to positive effect, they are rather small [30-32]. Interestingly, some studies point to a stability or even increase in positive mood in later life [33,34]. In contrast, fornegative affect the empirical results are convergent and show that the experience of negative emotions decreases to adulthood, and then remain to stay stable in old age [35-37]. Small or even marginal age effects exist also in terms of life satisfaction, which shows a slight decline with advancing age [38,39]. Importantly, only 3 to 4% of the variance of life satisfaction in old age can be explained by chronological age [40]. Thus, although there are some differences in study findings associated with research methodology (e.g. comparing cross-sectional, longitudinal, or diary data), older people feel generally no worse than in earlier stages of life and certainly not as bad that it could be assumed on the basis of the objectively observed loss of resources. Actually, older and very old people, even centenarians report being just as happy, if not happier, than the younger generations [21]. Thus, this stability-despite-loss paradox suggests that humans have the potential to adapt successfully to the age-related changes.

But what contributes to this remarkable adaptability and resilience in old age? How do old individuals do this-overcome the challenges of old age and stay happy in spite of all those losses? After examining the influence of many individual resources, which show only a limited relationship to well-being (e.g., income situation, educational level, family status, cognitive abilities, physical health, social network [22, 25, 37, 41-44], recent gerontological research confirms that psychological strengths seems to be critical to the positive development and resilience in old and very old age [4,5]. These are beliefs and attitudes about one self, life, and aging, which include constructs such as self-esteem, optimism, self-efficacy, and control beliefs, as well as existential constructs such as personal meaning for life, purpose in life and will to live [21,45-49]. Therefore, not having the right basic resources and properties but having the right attitude seems to matter a lot in later life. Interestingly, while individual resources decline sharply with age, the psychological strengths show only minor losses (e.g., selfefficacy, optimism), stability (e.g., will to live), or even increases (e.g., meaning in life). However, it still remains an open question how the psychological strengths influence well-being, whether their impact is direct or through the resources. Thus, it becomes important to examine the effect of psychological strengths together with resources in order to determine not only their independent contribution but also their interplay [21]. In our view, the psychological strengths represent a large, yet under studied potential, which may be especially useful to address in interventions designed to maintain well-being and to achieve continuing growth into very old age.

In conclusion, there are two points that we wanted to highlight in this editorial. First, we need more positive gerontology that focuses not only on the risks and losses but also on good aspects of later life

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J Gerontol Geriatric Res ISSN: 2167-7182, an open access journal and resilient aging, as well as on the potential for a good and valuable longevity. Second, psychological strengths need more investigation to examine how they themselves develop over the life span and how they maintain their protective role for well-being in old age. We hope and wish to all of us that this open access journal will make a significant contribution to advance these timely and important goals of gerontological research.

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