


Age Well and SDG Curriculum: Opportunities for Healthy Ageing

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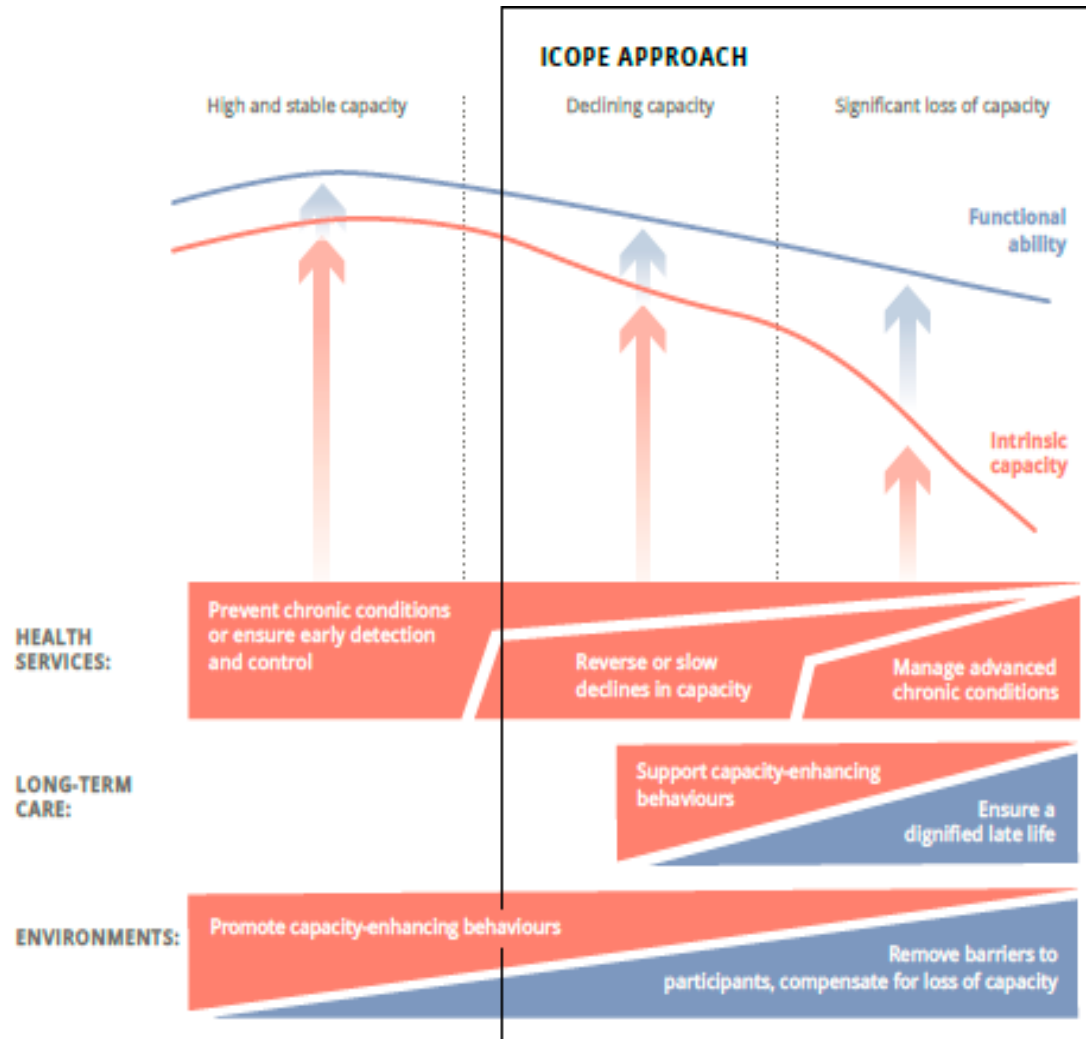
Ageing is a common process
Ageing is progressive
Ageing affects our capacity
to perform a number of functions

WE ARE ALL AGEING

healthy ageing



The United Nation of Decade of Healthy Ageing (WHO,2021)



Source: World Health Organization, 2015 (1).

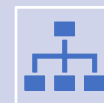
- Healthy Ageing is the process of **developing** and **maintaining the functional ability** that enables well-being in older age. (WHO, 2015)
- A Public health framework for healthy ageing focuses on **opportunities** for public health action across the life course (WHO, 2019)
- **Preventive care** is a key agenda for individuals and countries to promote healthy ageing



Key domains of intrinsic capacity are potentially **modifiable**



Effective interventions to optimize intrinsic capacity → tapping on community resources



Domains of IC interact at various levels → **Integrated Approach** to Screening, Assessment & Care plan

Older Adults' perceptions of ageing

Table 1. Details of Cross-Sectional Studies Included in the Systematic Review (21 Studies)

Study	Country	Sample size	% Female	Age range, mean age \pm SD	Perception of aging measure	Quality-of-life measure	Results	Risk of bias
Bai et al. (2017)	China	1,099	48%	60–96 69.6 \pm 7.0	Self-image of aging scale (SIAS-C)	Life satisfaction (SWLS)	Self-image was positively associated with life satisfaction ($\beta = 0.299, p < .001$).	Low
Bryant et al. (2012)	Australia	421	61.5%	Aged \geq 60 71.67 \pm 7.93	AAQ	Life satisfaction (SWLS) Depression (CES-D) Physical and mental health (SF-12)	Positive attitudes to aging were associated with higher levels of satisfaction with life, better self-report physical and mental health on the SF-12, and lower levels of anxiety and depression.	Low
Cadmus et al. (2021)	Nigeria	1,180	82.3%	Aged \geq 60	AAQ	SRH	Urban-dwelling participants had a better attitude to the aging process in all the domains compared with rural-dwelling participants. Among both rural and urban older adults, good self-rated health was significantly associated with a positive attitude to aging across the domains.	Intermediate
Chen et al. (2021)	China	7,229	45.8%	Aged \geq 60 68.99 \pm 7.40	AAQ	Life satisfaction (single item question) Depression (CES-D) loneliness (Loneliness scale)	Older people experiencing psychosocial loss are less satisfied with their life ($\beta = -0.036, SE = -0.003, p < .001$), more depressed ($\beta = 0.327, SE = 0.010, p < .001$) and lonely ($\beta = 0.096, SE = 0.004, p < .001$).	Low
Cramm et al. (2018)	Netherlands	680	47.6%	66–95 72.90 \pm 5.02	APQ-S	Physical and social well-being (SPF-IL)	SPA is positively associated with well-being.	Low
Dogra et al. (2015)	Canada	170	79%	60–87 70.9 \pm 6.8	Ageing expectation (AE)	physical and mental health (SF-36) Physical activity (Healthy Physical Activity Participation Questionnaire)	Higher AE scores significantly associated with better mental health ($\beta = 0.23, SE = 0.08, p = .003$), and higher physical activity ($\beta = 0.04, SE = 0.01, p = .003$).	Intermediate
Emile et al. (2014)	France	192	59.4%	60–93 73.44 \pm 7.34	ATOA	Physical activity (Dijon Physical Activity Score)	Positive stereotypes regarding physical activity directly predicted physical activity and indirectly by attitude towards own aging ($\beta = 0.13, p < .05$).	Low
Fukase et al. (2018)	Japan	572	51.7%	Aged \geq 65	Acceptance of aging scale	life satisfaction (LSIK-J)	Acceptance of aging was negatively related to QOL ($\beta = -0.19, SE = 0.29, p < .05$).	High
Gu et al. (2019)	China	1,029	50.1%	Aged \geq 60 69.68 \pm 8.49	APQ	QoL (SF-36)	Negative SPA associated with lower QOL.	Low
Hou et al. (2020)	China	1,029	50.1%	Aged \geq 60 Urban = 68.4 \pm 7.5 Rural = 70.8 \pm 9.2	APQ	QoL (SF-36)	Older adults with negative SPA and living in rural area had poorer HRQoL.	Low
Korkmaz Aslan et al. (2019)	Turkey	999	50.4%	Aged \geq 65 72.34 \pm 23.61	AAQ	QoL (WHOQOL-OLD)	Positive attitudes to aging predicts better QOL. AAQ subscales psychosocial loss ($\beta = -0.289, p < .001$), physical change ($\beta = 0.296, p < .001$), and psychological growth ($\beta = 0.279, p < .001$) were significant predictors of quality of life.	Low

01

Many older adults perceive **ageing negatively**, especially in terms of **poor or declining health and functioning** (Warmoth et al, 2016)

02

Older adults with **poorer self rated and physician -rated health** tended to report more **negative** ageing perceptions (Jang, et al, 2004; Moor et al, 2006)

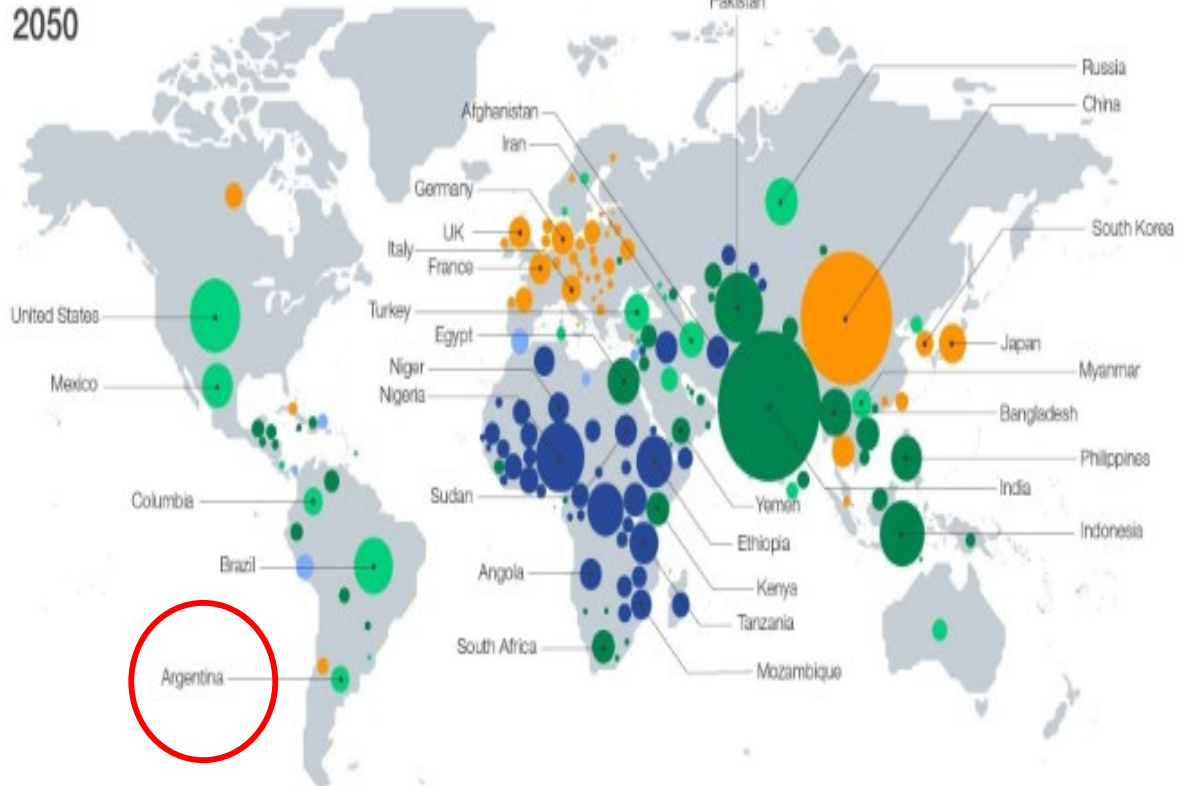
03

Positive ageing perceptions were associated with **better self-rated health** (Janeckova et al 2013; jang et al.2006), **psychological well-being**(Polverino, 2010) and **health status** (Kim, 2009)

04

Negative ageing perceptions were associated with **lower Quality of Life** and vice versa (Velaithan, 2023)

UN world population prospects for 2023 and 2050



Source : <https://www.weforum.org/agenda/2024/01/how-employers-can-unlock-the-potential-of-the-longevity-economy/>
<https://www.nytimes.com/2023/09/14/learning/whats-going-on-in-this-graph-sept-20-2023.html>

BUILDING SOCIETIES FOR ALL AGES
| ESCAP Implementation of the Madrid International Plan of Action on Ageing

About MIPAA Review Resources

In most countries of the Asia-Pacific region, less than a third of the working-age population contributes to a pension scheme

ESCAP Addressing the Challenges of Populati... Watch later Share

MIPAA is a global guiding document aimed at promoting a developmental approach to population ageing through the mainstreaming of older persons' concerns into development plans and policies. [Read more...](#)

ESCAP aims to promote and protect the rights of older persons, as well as facilitate social and economic adjustments needed to response to the rapid demographic transition being experienced throughout the Asia-Pacific region. [Read more...](#)

Partnerships

International Labour Organization UNFPA World Health Organization HelpAge International

Can we build a society for all ages?

Sustainable Development Goals and Aging

POSTED ON 13TH NOVEMBER 2019 CATEGORIES: GLOBAL AGEING NEWS, UNCATEGORISED, UNITED NATIONS COMMENTS ARE OFF FOR THIS POST



The Stakeholder Group on Ageing (SGA) represents the voice of older persons in the United Nations Agenda for Sustainable Development.

The Sustainable Development Goals contain several goals that address the needs of older persons, in particular those related to social protection, health, reducing inequalities and ending poverty (Goals 1, 2, 3, 4, 5, 8, 10, 11, 13 and 15).

Older persons are also mentioned under targets related to nutrition, resource use, healthcare-preventive and long-term healthcare, accessibility, safety, social protection (e.g. financing), non-discrimination, and age-specific data collection and analysis.

MIPAA and the 2030 Agenda



Service-Learning Opportunities

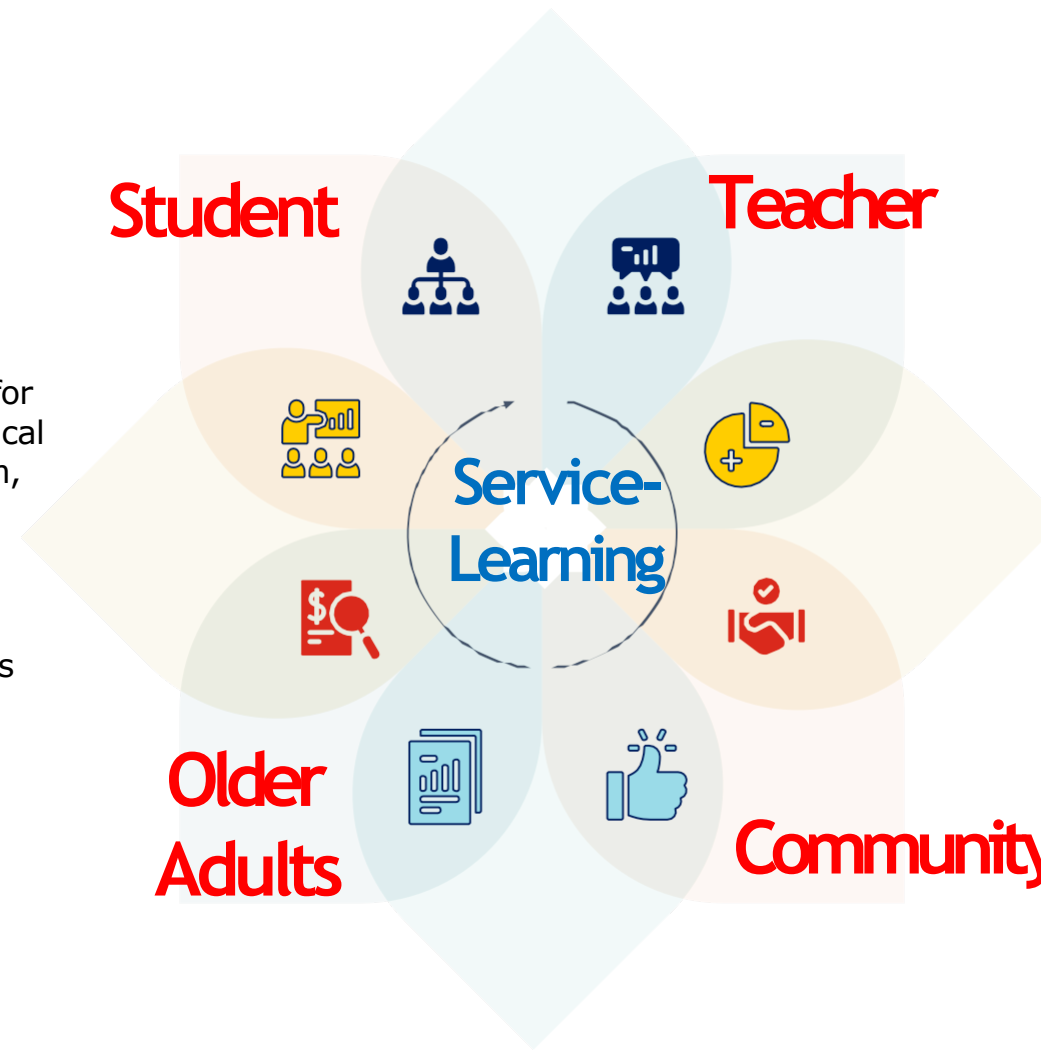
CARE

◆ **Curriculum Design** –
Funding, coordination,
volunteers

◆ **Activities** – design activities for
the older adults (Social, Physical
health, learning, volunteerism,
cognitive)

◆ **Rational** (Learning Outcomes
and measurement)

◆ **Education & Empowerment**



CARE 2.0

◆ **C**ollaboration – Rooms for
more multi-disciplinary
collaborative projects (let
hundred flowers bloom)

◆ **A**daptive Activities – design
activities based on the intrinsic
capacity decline, community
needs and person – centered
approach

◆ **R**elationship-focused –build
relationship with volunteers,
older adults, care partners,
students and teachers, consider
spirituality and learning
outcomes

◆ **E**xperiential – **E**mpathy
(Education & Empowerment) –
put ourselves into older
adults/care partners' shoes and
design more experiential
learning activities)



**Alzheimer's
Disease
International**

Every
Three
Seconds

...

Someone in the world is
diagnosed with some form of
dementia

Gerontology Programme

Develop an Intergenerational Reminiscence Game

Come! Let's Chat



“Come! Let's Chat” features:

- Age-friendly design
- Singapore's past and present, categorised into three themes: People & Places, Kampong Days, and National Campaigns
- Fun
- Input from gerontologists, youth and older adults
- Instructional videos

Reminiscence Facilitator Training Journey

Organised by



Supported by



Step 1 Online e-learning An Introduction to Reminiscence Facilitation: Enhancing Wellbeing in Older Adults

Section 1 Principles of Reminiscence

- 1.1 Concept of reminiscence**
 - Relationship-driven
 - Focusing on parts of the past to enrich daily lives
 - Is evidence-based
- 1.2 Exploring Reminiscence**
 - Journey through memories
- 1.3 Reminiscence Facilitation**
- 1.4 Principles of Reminiscence**
 - Person-centred care
 - WFCs
 - W: Take every individual
 - F: Treat people as individuals
 - C: Look from the perspective of each person
 - I: Supporter of social environment
 - Life Course Approach
- 1.5 Benefits of Reminiscence**
 - Lift moods and realises worth
 - Promotes meaningful conversation and creates sense of shared memories
 - Helps with mental performance
- 1.6 How memories are triggered**
 - 5 senses and sensory stimuli such as photos, smells and tastes

Section 2

Reminiscers and Reminiscing

- 2.1 6 types of Reminiscers**
 - The External
 - The Creative
 - The Reluctant
 - The Struggling
 - The Denying
 - The Enthusiastic
- 2.2 6 types of Reminiscing**
 - The Obsessive
 - The Escapist
 - The Narrative
 - The Transmissive
 - The Instrumental
 - The Integrative type

Section 3

Roles and Skillsets of a Reminiscence Facilitator

- 3.1 Roles of a RF**
 - Programme Designer
 - Programme Executor
 - Programme Supporter and Debriefer
- 3.2 Effective Communication**
 - Active Listening
 - Allowing space for expression
 - Adjusting Speech and Non-verbal Communication
 - Language Skills of Older Adults
- 3.3 5 RECs: Attributes & Skills of a RF**
 - R**: Respectful, Empathetic, Encouraging, Encouraging memory, Ethical
 - E**: Engage, Engaging, Expressive, Equal
 - C**: Communication Skills, Confidence, Confidence Building, Community, Care

Section 4

Facilitating Reminiscence Sessions

- 4.1 Session Outlines**
 - 5 Ws & 1 H
 - Who, What, Where, When, Why, How
 - Factors to Consider: People, Time, Place
- 4.2 Session Types**
 - Small Group
 - Big Group
 - One on One

Section 5

Planning a Reminiscence Activity

- 5.1 4 Ws in Reminiscence Activity Design**
 - Welcome
 - Warm-up
 - Workout
 - Wrap up
- 5.2 Celebration for Older Adults**
 - Create a festive atmosphere
 - Incorporate meaningful activities
 - Capture memories
 - Involve family members and caregivers

Step 2
Face-to-face Training
• 2 full day sessions

Step 3
Practicum
• 1 hour x 6 sessions

Completion
Certified Reminiscence Facilitators

For more information, please visit <https://www.suss.edu.sg/igremi>

For more information on Gerontology Programmes, events and initiatives, please visit <https://www.suss.edu.sg/about-suss/schools/nshd/gerontology>





Our
Reminiscence
Facilitators




**Service-
Learning**

**Age-well
Healthy
Ageing**

What's your role?



**Let's
Reimagine our
golden year**



**Make everyone
age with confidence
through Service-
Learning**



THANK YOU