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Health promotion and prevention of risk – actions for seniors

Pro-health 65+

WP4 Health status and life-style of older population

Team: JUMC, UCSC

Presentation by: Prof. Beata Tobiasz-Adamczyk (leader),
Agnieszka Sowa, PhD (leader's assistant)

Kick-off meeting

Consumers Health And Food Executive Agency (CHAFEA)

Luxembourg

3-4.11.2014



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Main tasks of WP 4



- Complexity of health status of older cohorts: chronic diseases and multi-morbidity.
- Comprehensive health status analysis - two groups of indicators: objective (life expectancy, causes of mortality and morbidity, multi-morbidity, functional limitations and degree of disability) and subjective (health self-assessment, quality of life and general well-being).
- Health status determinants across life cycle of the elderly: income and social position, family relations, place of residence.
- Health related life style of the elderly.



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Main tasks of WP 4



- Current and accumulated life-time effect of healthy living, life style choices determined by social position and a selection bias of premature mortality.
- The analysis of behavioral health determinants will use two groups of indicators and will be based on available cross-sectional and panel data, including SHARE, EHIS, other Eurostat statistics, WHO (HFA Database) and Global Burden of Disease.
- The analysis will take into account the impact of traditions and ethnicity as well as regional differences and differences between urban and rural areas. Behavioral patterns explaining sound differences in the health status of the elderly in Eastern and Western Europe will also be addressed.
- Policy oriented analysis will cover EU 27 countries (total) and selected representative countries.

LIFE SPAN/LIFE CYCLE

PREVIOUS STAGES OF LIFE
Determinants:

Gender, education, occupation,
marital status, place of residence
Income

Social environment

LIFE
CHAN-
-CES

LIFE STYLE
Healthy behaviors
/health damage
behaviors

PERSO-
NAL
CHOICE

Social networks

HEALTH OUTCOMES

OBJECTIVE

Morbidity
Disability
Functional status

SUBJECTIVE

Self-rated health
Quality of life

OLDER STAGE OF LIFE

Target groups

60-
67
yrs
old



68-
79/
84
yrs
old



80/
85+
yrs
old

HEALTH PROMOTION
PROGRAMS

Social environment

LIFE
CHAN-
-CES

LIFE STYLE
Healthy behaviors
/health damage
behaviors

PERSO-
NAL
CHOICE

Social networks

HEALTH OUTCOMES

OBJECTIVE

Morbidity
Disability
Functional status

SUBJECTIVE

Self-rated health
Quality of life



LIFE STYLE → HEALTH → LIFE STYLE → HEALTH

Successful ageing / healthy ageing / definition:

- I. Three main components: low probability of disease and disease-related disability; high cognitive and physical functional capacity; active engagement with life (Rowe & Kahn, 1997).
- II. Successful ageing – combinations of these three components-with active engagement with life
- III. Low probability of disease refers not only to absence or presence of disease itself – but also absence, presence or severity of risk factors for disease

Operationalization of existing definitions of healthy ageing and operationalization of life-style in older adults (Strawbridge W.J., Wallhagen M.I., Cohen R.D., 2002)

- I. **Absence of disease, disability and risk factors** (heart disease, stroke, bronchitis, cancer, osteoporosis, emphysema, asthma).
- II. **Absence of disability:** independence in all activities of daily living (bathing, dressing, eating, using the toilet, moving from bed to chair, grooming, walking across a room).
- III. **Absence of risk factors (life style):** absence of cigarette smoking, hypertension, obesity.
- IV. **Physical and mental functioning:** the ability to walk distance, ability to climb one flight of stairs with resting, to stand up without fainting or feeling dizzy; ability to remember where one put something, or to find the right word when talking.
- V. **Active engagement with life:** monthly contacts with three or more close friends or relatives
- VI. **Being productive** including: paid employment; caring for child or grandchild; active volunteering; cleaning house.
- VII. **Measures of well-being:** being very happy, feeling much more energy than other, enjoy free time a lot.



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I. Life style



1. Nutrition (coping with obesity, coping with malnutrition)
2. Physical activity (sport activity)
3. Smoking
4. Alcohol consumption (alcohol-dependency)
5. Drugs (prescribed by physician, OTC); drug-dependency
6. Sleep (number of hours, quality of sleep)
7. Sexual activity ???
8. Safety (prevalence of falls)

II. Social dimensions: Social inclusion – social exclusion

1. Social network -size and frequency of social contacts per month/week with friends, relatives, others; creation of new networks
2. Social participation: in seniors clubs, meeting with friends, religious activity, sport clubs, participation in the cultural events, sport events, volunteering, caregiving, life-long learning
3. Trust
4. Social support (instrumental emotional, informational)
5. Continuation of job activity- full or part employment; position of older worker- coping with job stress, work related strain
6. Consequences of retirement and unemployment : coping with retirement shock - volunteering activity, caring for grandchild, or child, sick person (caregiving), self-help groups
7. Subjective and objective loneliness
8. Access to information, health literacy, modern technologies (internet) use
9. Prevention of abuse and violence, disease and substance abuse

III. Psychological dimension - Promoting mental health

1. Cognitive issues, memory training
2. Depression symptoms
3. Coping with stress and burn-out
4. Empowerment – individual responsibility, self-respect, dignity

IV. Spiritual dimension:

1. Religious activity
2. Meditations
3. Self-help groups

INFORMATION & DATA:

I. SYSTEMATIC REVIEW OF SCIENTIFIC LITERATURE

↓ HEALTH, HEALTH IN OLDER RAGE

↓ LIFE STYLE (DYNAMICS – LIFE CYCLE)

II. DATA –BASES (INDIVIDUAL AND AGGREGATE LEVEL)

III. EXISTING HEALTH PROMOTION PROGRAMMES TARGETING OLDER STAGE OF LIFE

Database	Year	Population covered	Country coverage	Variables
Survey of Health, Ageing and Retirement in Europe (SHARE)	2004-2005 (Wave 1), 2006-2007 (wave 2), 2008-2009 (SHARElife – Wave 3) 2010-2011 (Wave 4)	Aged 50+	From 11 to 16 EU countries + Israel, depending on wave	<p>Health status: SAH, chronic diseases, functional limitations, morbidity, mental health</p> <p>Care reception /provision</p> <p>Social participation: organizations, religion, volunteering</p> <p>Life style: smoking, alcohol consumption, physical activity, diet</p> <p>Social networks (special module): family, friends</p> <p>Economics: income, wealth</p> <p>Employment</p>

Database	Year	Population covered	Country coverage	Variables
European Health Interview Survey (EHIS)	2006-2009 (Wave 1), 2013-2015 (Wave 2)	To be checked	17 EU countries	<p>Health status: SAH, chronic diseases, functional limitations, mental health, pain, accidents</p> <p>Life style: smoking and alcohol consumption, body weight, physical activity, diet</p> <p>Health care: use of health care services, prevention, use of medicines, unmet needs for health care</p> <p>Social support</p> <p>Provision of care</p>

Database	Year	Population covered	Country coverage	Variables
Eurobarometer Health and Food	2005-2006	Aged 15+	31 European countries	<p>Health status: SAH, chronic diseases, limitations</p> <p>Life style: diet (and obstacles to take up healthy diet), physical activity (and obstacles to take up physical activity)</p>

LIFE STYLE – HEALTH (1)

BASELINE DATA	PROCESS INDICATORS	OUTPUT INDICATORS	OUTCOME INDICATORS
A full review of existing definitions of health in older stage of life	Dimensions/ methods of measuring	Selection of definition of the high usefulness to elderly studies	Methods of measuring
A full review of existing definitions of life style	Indicators of healthy/unhealthy life style	Selection of existing indicators	Indicators selected to different stages of older age
A full review of existing evidence based public health data – dietary habits, special diet (mortality, morbidity)	Indicators of dietary habits in healthy older people Indicators of diet in relation to specific health condition (disease)	Selection of existing indicators	Index of healthy diet
A full review of existing evidence based on public health smoking data (mortality,	Indicators of predictable role of smoking in health status	The role of smoking in healthy ageing	Smoking and quality of life

LIFE STYLE – HEALTH (2)

BASELINE DATA	PROCESS INDICATORS	OUTPUT INDICATORS	OUTCOME INDICATORS
A full review of existing evidence based public health data – physical activity (mortality, morbidity)	Dimensions/ methods of measuring	Selection of definition of the high usefulness to elderly studies	Methods of measuring, evidence-based quality of life
A full review of existing evidence based public health data – alcohol consumption (mortality, morbidity)	Indicators of healthy/unhealthy life style	Selection of existing indicators	Indicators selected to different stages of older age, quality of life
A full review of existing evidence based public health data – functional status (everyday activity, ADL, IADL)	Indicators of functional status in older people Indicators of functional status in relation to specific health conditions (disease)	Selection of existing indicators (scales)	Index of positive functional status

LIFE STYLE – HEALTH (3)

BASELINE DATA	PROCESS INDICATORS	OUTPUT INDICATORS	OUTCOME INDICATORS
A full review of existing definitions of psychological well-being	Dimensions/ methods of measuring	Selection of definition of the high usefulness to elderly studies	Methods of measuring
A full review of existing evidence based public health data – depression (mortality, morbidity)	Indicators of depression, anxiety	Selection of existing indicators	Index of psychological disorders
A full review of existing definitions associated with social networks, social participation, social support, trust (social capital)	Indicators of characteristics of social networks, social participation, social support, trust	Selection of existing indicators	Methods of measuring
A full review of existing evidence based public health data on social networks, social participation, social support,	Predictive role of social networks, social participation, social support trust (social	Selection of the best evidence	Index of social capital, characteristic for healthy ageing

WP 4 Health status and life-style

Description: Organization of work and research activities undertaken within the WP4

Participating partners: Jagiellonian University, Università Cattolica del Sacro Cuore

<p>WP lead: JUMC Partner: UCSC Persons responsible: Beata Tobiasz-Adamczyk (BTA) - WP leader Agnieszka Sowa (AS) – leader’s assistant, researcher Roman Topór-Mądry (RTM) - researcher Andrea Poscia (AP) – researcher Umberto Moscato (UM)</p>	<p align="center">Responsible:</p>	
<p>Daily coordination (communication with project coordinator, supervision of WP work, reporting etc.)</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	
<p>Monthly/quarterly TCs & F2F meetings (with project coordinator and between WP researchers)</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	
<p>Kick-off meeting in Luxembourg</p>	<p align="center">BTA</p>	
<p>Annual conferences</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	
<p>Registration and documentation</p>	<p align="center">BTA/AS</p>	
<p>Deliverable 1 Research template</p>	<p align="center">Responsible</p>	<p align="center">Month</p>
<p>Research plan, research approach, methodology, incorporating changes following the Kick-off meeting</p>	<p align="center">BTA/AS</p>	<p align="center">Month 1 November 2014</p>
<p>Scientific literature review: definition of health status, overview of life-style factors</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	<p align="center">Month 6 April 2015</p>
<p>Recognition of data sources to be used</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	<p align="center">Month 8 June 2015</p>
<p>Overview of health promotion policies</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	<p align="center">Month 8 June 2015</p>
<p>Research in Task 1 (health status measurement)</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	<p align="center">Month 10 September 2015</p>
<p>Research in Task 2 (life-style analysis)</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	<p align="center">Month 12 October 2015</p>
<p>Preparation of research template (WP report)</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	<p align="center">Month 14 December 2015</p>
<p>Deliverable 2/ Milestone 1 Scientific article</p>	<p align="center">Responsible</p>	<p align="center">Month</p>
<p>Preparation and submission of the scientific article from the WP4 research</p>	<p align="center">BTA/AS/RTM/AP/UM</p>	<p align="center">Month 18 April 2016</p>