CONCLUSIONS AND IMPLICATIONS

The purpose of this study was to explore older adults’ perceptions of participation in physical exercise throughout the life course. Using a life course perspective, as the theoretical framework for this study, enabled me to recognize and understand changes and continuity in the older adults’ exercise patterns across life and the influence of individual development, generational and historical timing, and social context and process (Bengston & Allen, 1993). I examined the multiple transitional life roles of nine men and six women that both promoted and interfered with their regular exercise throughout their life. Through in-depth interviews with these individuals, I gained an understanding of how societal processes and opportunities, life course roles and transitions, and individual meanings of physical exercise influenced participation in physical exercise throughout life. Using a qualitative methodology to guide this research study found to be truly beneficial in highlighting specific variables included in this study. Qualitatively, through personal conversations with older adults I was able to understand their perceptions of physical exercise and activities over sixty and seventy year time spans. As a researcher, I was able to go beyond merely reciting the older adults’ “words.” I was able to interpret individuals’ thoughts, meanings, and perceptions of physical exercise and put them into a larger context. The use of qualitative methodologies exposed the depth and breadth of participants’ exercise experiences and enabled me to explore the different ways in which people made sense of their participation (Bogdan & Bilken, 1992). In this chapter, I draw several conclusions about the definitions and perceptions of physical exercise across the life course based on the findings of this research study. I also provide direction for future research and make suggestions for practitioners to increase exercise in the lives of older adults.

The definition of exercise is socially constructed and has continually changed from one historical period to another. For older adults in this study, exercise changed in accordance with historical, societal, and environmental changes. Their exercise participation was influenced by beliefs and practices of past participation. As the older adults moved through young, middle and late adulthood, society changed as did the opportunities for participation in physical exercise and activities. Compared to when they were children, society has changed a great deal, transportation is more accessible, technology has advanced and lifestyles have changed. These advances and
changes must be recognized in order to understand the context in which physical exercise and activities were a part of older adults’ lives.

Physical activity is defined as “any bodily movement produced by skeletal muscles that results in energy expenditure” whereas exercise has been defined as “planned, structured, and repetitive body movement done to improve or maintain one or more components of physical fitness” (Casperson, Powell, & Christenson, 1985, p. 126). When asked to think about how they would define exercise in earlier years the older adults defined exercise as unplanned and unstructured. When asked to define exercise today they defined it as planned and structured. Therefore, the older adults’ involvement in exercise developed from physical activity to physical exercise throughout their lives. What they once defined as unplanned and unstructured “physical activity and work,” they now defined as planned and structured exercise. The older adults’ perceptions of exercise changed and redefined itself over the years as both informal and formal exercise became part of their everyday lives.

One of the most striking findings of this study is that the physical activity and play patterns of childhood for both men and women were more similar than different. All of the participants described involvement in skilled and vigorous work and play. Differences in the types of activities were part of the childhood milieu of rural versus urban living, rather than what was available for boys and girls. Upon reflection, several of the older adults who grew up in rural areas indicated that had they grown up in urban areas, they would have had more opportunities to participate in physical exercise and sports. Future research is necessary to explain further the influence of geographical locations on patterns of physical activity and exercise across the life course. If the findings of this study are supported, rural schools and community planners need to consider how to offer children and their families members more opportunities to participate in physical exercise, activities, play, and sports. The definition of physical exercise, activities, play and sports also needs to be broadened to incorporate activities of daily living and other informal types of work and activities.

The findings in this study, as well as previous research (O’Brien Cousins & Keating, 1995; O’Brien Cousins & Vertinsky, 1995; Snyder & Spreitzer, 1973) suggest that childhood physical activity influences participation in physical activity throughout the life course. The older adults adamantly indicated that had they not “been productive and active” as children they may not have been inclined to remain active throughout their lives. They also believed that there
is a great deal of continuity in their participation in physical activities, work, and exercise. They firmly adhered to the belief that the things they enjoyed doing at an early stage of their life (not just in childhood) will also be enjoyable in later life. This belief supports the notion of continuity theory which purports that with age we become more of what we already were when we were younger (Atchley, 1993). The older adults’ involvement in physical activity and exercise is believed to be a lifelong preference that maintained some continuity throughout life. Continuity theory suggests, as did the older adults in this study, that individuals are more motivated to participate in exercise programs in later life if they were physically active throughout life. It further maintains that the activities in which persons engage in earlier periods of their lives carry over into later life (Atchley, 1997). This study, relied on retrospective data and provide only a snapshot (i.e., cross sectional view) of participation in exercise. Longitudinal research needs to be conducted to confirm and document continuity and change in the type and frequency of physical activity and exercise across the life course. Findings from the longitudinal studies would better explain individuals’ level of involvement in physical activities and exercise and could help to explain how life roles and transitions interfere with and influence participation. Information would benefit future generations as they learn to adapt to, and plan for, specific life roles and transitions in adulthood. It may encourage them to plan more adequately for involving themselves in physical activities and exercise.

Life course roles during early and middle adulthood were similar for men and women. They did not determine whether the participants were physically active or to what extent and in what types of activity they were involved. Both men and women withdrew from some physical activities that they enjoyed because of family and career responsibilities. However, they also took advantage of their familial responsibilities to maintain physical involvement. Their level and type of physical activity and exercise was shaped by the changing context of their families. The older adults’ exercise regimens varied in accordance with the particular life stage and transition that they were experiencing. Thus, definitions and participation in physical activity and exercise remained consistent, however the types of exercise in which they participated changed. For example, during young adulthood when the men were in the military, their participation in exercise was centered and focused around a regimented military schedule. They were directed and ordered by a superior to be physically active; it was part of their role as a member of the military. Women in young and middle adulthood were participating in some
exercise outside of their “motherhood” role, but the majority of their exercise came from housework, yardwork, play with the children, and meeting family needs. Many of the older adults viewed their children as a substitute for formal exercise because the demands of parenting required a great deal of activity (see also O’Brien Cousins & Vertinsky, 1995).

The transition into late adulthood marked the entry into the older adult’s current life stage—retirement. This transition was accompanied by reduced responsibility and increased discretionary time (O’Brien Cousins & Keating, 1995). Retirement allowed them more time to participate in specific, planned, formal, and structured types of exercises as well as to maintain participation in unstructured, informal, and unplanned activities and exercises. Several of the older adults who became inactive or decreased their participation in exercise during young and middle adulthood found that retirement allowed more time for them to return to those favorable activities that they performed at earlier stages of their lives. The older adults were not resorting to the same types of play and games that they engaged in as children. However, they engaged in their new activities with as much enthusiasm and pleasure as they remembered having in their childhood years (O’Brien Cousins & Vertinsky, 1995).

Retirement has enabled them to diversify their exercise regimens into a new and prosperous type of formalized exercise that is performed at the Wellness Center. The Wellness Center is a “safe haven” for many of the older adults to perform their exercises. Specifically, many of the older adults felt safe exercising at the Wellness Center as opposed to outdoors. They also have developed new friendships while at the same time reacquainting themselves with old friends. Being in the presence of other cohort counterparts encouraged and motivated them to better themselves physically and “to keep moving.” The older adults strongly stressed that paying their monthly or yearly membership fees at the Wellness Center “is well worth the cost of their life.”

Their positive attitude in life towards work and participation in physical activities and exercise is what I believed motivated the older adults to frequent the Wellness Center. Their exercise regimens ranged from three to seven days a week, 30 to 95 minutes a day, and their exercises varied from walking on the treadmill and using nautilus machines and free weights, to participating in aerobics and dance classes. It is important to note that although these older adults belong to the Wellness Center and participate in very formalized types of exercise, they also participate in informal exercise outside of the Wellness Center. They walk and ride bikes in
the park, ski, play golf and tennis, canoe, and square dance. Formal exercise has not limited them or spoiled them from participating in the types of informal physical activities that they have enjoyed throughout their lives. The older adults’ emphasized that there is a tremendous amount of availability today to participate in both formal and informal exercise and activities than there was twenty or thirty years ago. They stressed that availability and encouragement to exercise, motivated them to be active and productive.

The fifteen older adults in this study are by no means “Master Athletes,” but they are an exceptionally motivated group of individuals. They consider their informal and formal daily regimens to be “exercise.” Some consider exercise to be like a job or part of life. They believe they have to exercise in order to survive. Hard work has been a continuous part of their lives, therefore in late adulthood they perceive their exercise to be similar to their work or something that needs to be done.

Although the older adults believed that many of their aging counterparts are currently participating in regular exercise, they indicated that more older people need to involve themselves in a regular exercise program. They believed that participating in regular exercise in late adulthood contributes to healthier life styles. The older adults discussed the inactivity of spouses’ and family members and were very inquisitive as to why they cannot encourage them nor convince loved ones that exercise is important to their physical and psychological health and well-being. The older adults asked, Why is it that some older adults choose to remain physically active and engaged with life while others choose to lead sedentary and inactive lives in late adulthood? Answers to this would greatly enhance the knowledge and expand the research in the area of exercise and aging.

The findings of this study also suggest that as individuals grow older, the more important health and physical capacity become to their well-being (Spirduso, 1994). The older adults believed that good health and physical strength is critical to their well-being and quality of life in late adulthood and can be achieved through lifelong participation in physical exercise. They believed that their participation in regular exercise assisted them in keeping up with their activities of daily living and enabled them to remain extremely independent. They emphasized that they “got around” a lot better, they “think” better, and overall they are able to feel and live better because of their participation in exercise. These findings suggest that regular exercise increased the older adults’ capabilities to cope with their late adulthood environment. The older
persons in this study believed that their decision to participate in exercise promoted good health, improved adaptation to their social environment, and assisted or helped them adjust to changing personal conditions. They stressed that they are aging well and will maintain the benefits of exercise only as long as they continue their daily regimen.

Aging well has become a self-fulfilling prophecy for the older adults who exercise regularly. Many of them have a “I can do anything” type of attitude. In this vein, the findings indicate that exercise has a positive influence on older adults’ well-being. More research is necessary to further our understandings of the interactions between physical, psychological, and social well-being and physical exercise. Although, the older adults vividly pointed out that physical exercise stimulates their psychological well-being, they could not explain this interaction except by saying “it just does.” It is imperative that future research make the link between these two areas and answer the questions of “why” and “how” exercise increases the psychological well-being of older adults. If a consistent explanation of the positive link between exercise and psychological well-being is documented, more individuals may be inclined and influenced to participate in lifelong exercise.

The benefits of exercise are very explicit and comprehensible; however, getting an inactive elder to begin an exercise program and to stay with it, is where the real challenge lies. The greatest challenge for future practitioners is undoubtedly to provoke sedentary individuals into leading more active and productive lifestyles well into their later years of life. The older adults in this study indicated that a physician’s referral or recommendation to become involved in a regular exercise program is a motivating influence in and of itself. Bob, a retired pediatrician, indicated that physicians “really miss the opportunity to really tell patients what they need to do to be healthy.” He said the amount of time that physicians spend with patients has decreased compared to ten and twenty years ago. Bob said that from his medical experience, doctors claim that “patients can become highly irate if the doctor suggests that their lifestyle needs to be modified, especially in regards to obesity.” People can become very offended, therefore Bob believed that if physicians will not take the time during the initial examination to educate and promote healthy living to their patients that they should at least have handouts available in their office for patients to read. He said, “You have to try to get to people in some way.”
The benefits of exercise or participation in physical activities were not stressed or known to the older adults when they were children. Although society, educators, and practitioners are teaching people about the benefits of exercise, we need to increase awareness through other means. A good place to start is in the elementary, junior high, and high school gym classes. Educators need to start putting the physical education back into “P.E. and gym class” and begin educating children about the benefits of exercise and physical activity, instead of just telling the children to go play basketball or baseball. Teachers need to educate the children about why it is important that they participate in these physical games, activities, and exercises. Individuals need self-challenging activities that will keep them healthy for a lifetime. The theory is that individuals will be motivated to workout if it is made fun. Play and fun need to be integrated into individual life roles and transitions. The older adults emphasized that you have to “enjoy” and “have fun” with exercise and physical activities or you will not maintain involvement.

If educators begin teaching children about the lifelong benefits of participation in sport, physical activity and exercise, our sedentary population may become more productive and active in the coming decades. If children are made aware of why it is important to remain physically active and keep their bodies in good physical condition at an early age, the likelihood of them remaining involved in physical activities and exercise throughout their lives may be increased. Children may reap and benefit from early childhood education about maintaining good health and the importance of staying physically fit and practice these lessons throughout their lives.

Not only should children, be made aware of the lifelong benefits of exercise but also should the older adult population. As a society, we need to increase participation in physical exercise programs and to encourage and motivate older persons to exercise. Because older adults were not socialized into sport or physical activity and were not directly taught the benefits of exercise, they may benefit from educational programs about exercise. The awareness of the benefits of exercise may increase individuals’ participation in regular informal or formal exercise. Communities, health facilities, and educators could hold educational meetings or workshops to inform the economically disadvantaged and other interested persons as to what they can do to in place of “formal exercise.” They could teach the older adults or other persons the risks and benefits of exercise, “the what to dos” and “not to dos” of exercise, and reinforce the point that not being able to afford “formal” exercise is no excuse to not get involved in regular physical exercise.
Snyder and Spreitzer (1973) concluded from their study of older adults’ involvement in sports that “apparently sport involvement begins in childhood, is reinforced by parental encouragement, continues into middle age, and diminishes only in the last stage of the life cycle as part of a broader disengagement from previous leisure activities” (p.252). This cycle of activity was not apparent in the lives of the older adults who participated in this study. Throughout the interviews, the older adults gave every indication that they were just as active, if not more so, in their sixth and seventh decades of life then they have ever been. They have not disengaged from much of anything except a full-time career. The findings indicated that the older adults believed physical activity and exercise have remained a continuous part of their lives. They believed that the fact that they were “brought up to be productive and not to be lazy” was a contributing factor to their life course participation in physical activities and exercise.

This relatively small homogeneous sample of men and women provides an illustration of how a group of individuals became very diverse in their levels of participation in physical activity and exercise across the life course. These active older adults talked with a great deal of enthusiasm about their lifetime involvement in physical activities and exercise. They clearly expressed their level of involvement in physical activities and exercise at each of the life stages that were in question (i.e., adolescence, young adulthood, middle adulthood, and late adulthood). The older adults reasoning for participation in formal physical exercise in their later adulthood years were clearly expressed—to improve quality of life and physical and psychological well-being. The older adults faced several turning points and transitions in their lives that either impeded or enhanced their level of involvement in physical activity and exercise. Health impediments in middle and late adulthood that first appeared to be barriers to older adults’ participation in exercise actually motivated and enhanced older adults’ levels of participation. By late adulthood active persons continued to seek physical opportunities and challenges, and those persons who had maintained a less active life course began to increase their levels of participation as well. Individuals continued and sought exercise programs and regimens in late adulthood because they wanted to improve their quality of life and maintain, better, or improve their physical health.

The findings of this study illustrate that although individuals from the same cohort often experience similar life transitions that can promote or interfere with participation in physical activities and exercise, individual life choices and circumstances determine the level of their
participation (O’Brien Cousins & Keating, 1995). The older adults in this study have mapped out their own “physically active” life course and are determined to stay active as long as possible. Thus, a life course perspective lends to our understanding of exercise participation and provides a framework for examining exercise participation for individuals in different phases of the adult life cycle.