

Conclusions

Ageing well in a changing society

A plea for meaning and creativity

Crétien van Campen

Original title:

Gelukkig ouder worden in een veranderende samenleving

Een pleidooi voor zingeving en creativiteit

978 90 377 0946 9

Conclusions

Ageing well in a changing society

A plea for meaning and creativity

Everyone wants to age well. But how do you do that? What do you need to achieve it? And is it something you can determine yourself, or is a matter of chance and good luck? Happiness seems to be a difficult concept to pin down, and especially to bend to our will. Society is changing rapidly as a result of processes such as digitalisation, flexibilisation and informalisation. Life feels as if it is moving faster and becoming more complex.

Society is also 'ageing', and the number of pensioners is increasing rapidly. Most of them are vital individuals, but there comes a point in their lives when they become frail and dependent on others. Many see this as a turning point for happiness. There is a stubborn perception that retirement signals the start of the 'golden years' of happiness – until adversity strikes and the small and not so small physical and mental deficiencies gradually accumulate and people become frail. Is this the start of the unhappy years?

This essay explores the question 'What is ageing well?'. This is an old question, which was also pondered by the classical philosophers (Baars 2006; Dohmen & Baars 2011). They asked what it means to have a good life and how a society can treat all its members with respect and dignity. Those questions have been reiterated time and again down the generations, and in the light of the ageing of the population and in rapidly changing society, they are once again highly relevant today. Embedded stereotypes about 'pensioners' and 'older people being cared for in an institution' seem outmoded. Instead of being written off and put out to grass, today's older people want to be active, to continue taking part in social life and to be of significance for others. To enable them to continue playing a meaningful role in society, some retirees develop new skills and different attitudes to life. The latter gives them a form of creative resilience to enable them to weather more difficult periods of frailty.

Compared with healthy ageing, little is known about ageing well. Personal goals and life events are not the only determinants here, but above all changes in the individual's immediate setting and more broadly in society as a whole.

Looking at the ageing population through the lens of people who are ageing well sheds light on different solutions. Naturally, older people need tailor-made services that are geared to their situation. Care facilities are also needed to support those who are physically frail, so that they can continue participating. Another requirement for maintaining the vitality of an ageing population is creative resilience. Cultural initiatives in long-term care enable frail individuals to learn and develop creative life skills, such as using their imagination and role-playing, which contribute to their creative resilience.

The scope of these initiatives is broader than 'arts projects'; a better term is 'co-creative communities', because while the initial idea often comes from artists, the passion and

co-creation of the participants is more important than the art form itself. Walking football can serve as an example here: it would be difficult to describe this as an arts project, but it is nonetheless a creative activity. A common feature of co-creative communities is that participants develop creative life skills which they can also use in their daily lives.

There are many ways of developing the creative resilience and life skills of frail people to increase their chances of ageing well. A range of stakeholders can play a role here. First, there are the older persons themselves and the organisations for the elderly. They can take control of things themselves. There is also a key role for professionals who come into direct contact with older people. Their interaction starts at an early stage of preventative activities during the vital life phases, and intensifies during the frail phases – bearing in mind that these phases can alternate with each other. Policymakers are a third group who can play a role, facilitating the chances of ageing well from a distance by providing services and infrastructure.

Self-image and imagination

Arts and culture can dispel stereotypical images and celebrate the diversity that characterises ageing. Civic organisations such as broadcasting associations, senior citizens' associations and foundations could take a lead here.

The Dutch Senior Citizens' Council (Raad van Ouderen) (2019a) has called for research on the self-image of citizens as they grow older. The Council argues that the way they see themselves and how they feel about growing older has a great influence on their health and happiness:

A positive identification with one's peers increases the likelihood of a clear sense of self-worth. Vital older persons are able to cope with the limitations and sadness that can accompany ageing; they have resilience.

After age, loss of health is the next factor that is strongly associated with old age. The stereotypical image is that all people above a certain age are sick and care-dependent. That image is for example one that figures in the debate about the rising costs of health care. Sadly, the perception of and by older people themselves is still dominated by their physical or mental deficiencies.

Ageing well in a changing society is influenced by two types of perception: how do people themselves view their ageing process, and how does society view the growing group of people who attain a great age? Less stereotyping of and by older people and more examples of diversity in life courses and biographies would help create a more realistic picture of how people can age well.

The public perception of what growing older means benefits from role models of successful people who demonstrate how it is possible to age happily. A good example can be found in the photographs by international photographer Erwin Olaf of erotic mature women and of his own sexuality and frailty during the ageing process. These images differ

markedly from the stereotypical and one-sided picture of older people that is deeply embedded in our thoughts and perceptions.

Co-creative communities

The 'Long Live Arts' ('Lang Leve Kunst') programme is a successful example of how citizens and civic organisations can change the self-image of older people in both the vital and frail phases of their lives, enabling them to derive meaning and enjoyment from their lives again. The programme was the initiative of private senior citizens' foundations in collaboration with the Ministry of Health, Welfare and Sport and the Ministry of Education, Culture and Science. The Long Live Arts programme was subsequently rolled out internationally. Unfortunately, the knowledge about creative life skills such as using imagination to help ageing well is fragmented across temporary arts projects in a 'project carousel', with virtually no knowledge sharing or building (Van Campen et al. 2017). Concepts such as *creative ageing* (Cohen 2009; Hanna & Perlstein 2008) have been explored in more depth in the United States. There are also plenty of cultural initiatives for older people in Europe (e.g. www.longlivearts.eu; Fancourt & Finn 2019; All-Party Parliamentary Group on Arts 2017; Clift & Camic 2016), but there is little clarity about what 'creative ageing' actually means, and what its ultimate benefits are for people in the later phases of life. There is much to be said for setting up an expertise centre in the Netherlands akin to the us National Center for Creative Ageing (www.creativeaging.org). Such a centre would need to work closely with other disciplines in research on ageing. The Netherlands has a leading international position in terms of its knowledge infrastructure in relation to ageing, but there is a notable gap when it comes to arts and culture.

Helping and challenging

Creativity arises when people are challenged within their capabilities (Csikszentmihalyi 1996). How could professionals challenge frail people more? The natural reaction is to help and care for these people; challenging them requires a different approach.

Let us engage in a thought experiment using the example of an arbitrary 80 year-old frail man. We ask him the same main question twice – 'What do you need?' – but preceded by different introductory questions. In variant 1 we first ask: What is wrong with you? In variant 2 we begin with: What makes you happy?

The second variant produces different answers from the first. The first variant makes clear what the man's care needs are and how he can continue to live independently for longer. The second variant makes clear what gives his life meaning, what he enjoys and how he would like to participate in society. The care need is pushed to the background, because in this variant his starting point is what he is capable of until he encounters an impediment to realising his wish.

This technique is already being put into practice on a small scale, for example using 'Life Enjoyment Plans' ('Leefplezierplannen') (Slaets et al. 2019). Dutch law states that every resident of a nursing home has a right to a care plan describing his or her preferences, questions, needs and goals. A pilot project on introducing Life Enjoyment Plans in the care sec-

tor ('Leefplezierplan voor de zorg') used images and other sensory materials in an attempt to learn more about the personal wishes and desires of nursing home residents: what is their narrative? Who is important for them? What adds colour to their lives? These insights form the starting point for the Life Enjoyment Plan, which also devotes attention to the roles of family and informal carers and the dilemmas that arise in practice. The focus here is not on 'guidelines, protocols and tick-boxes', but on people's stories and what matters for them, their experiences, what matters to them in the last phase of their lives (see <https://www.leydenacademy.nl/leefplezierplan/>).

Expanding integrated care to include arts and culture

The last Dutch government set aside a substantial extra budget for nursing home care; nursing homes have mainly used this money to pay for more staff and technology, but have spent virtually none of it on arts and cultural activities.

The public debate on how we are to care for the growing group of older people constantly returns to the issue of the number of care staff. The solution is often sought in a single direction, namely more of the same care staff.

However, there is no clear scientific evidence to support a relationship between the deployment of more nursing staff, carers or helpers and residents' quality of life (Hamers et al. 2016). After studying over 180 available scientific publications in this field, researchers came to the conclusion that deploying more carers or nursing staff in residential nursing homes does not lead to an improvement in quality of care or quality of life. The recommendation was that solutions be sought in ensuring an optimum mix of staff with different skill sets. In response to this recommendation, most care administrators do not think of arts professionals, but rather of a multidisciplinary care dialogue, for example to develop 'life enjoyment plans' rather than care plans.

Adding an arts professional to the multidisciplinary team is by no means always possible, but in practice pragmatic solutions have been found for this. For example, some city-based care organisations have appointed an arts and culture coordinator, who acts as a 'culture broker' to bring together supply and demand. The question, of course, is how to find the right match. What is the frail older person's passion, and which artistic and cultural activity matches it? These organisations apply a broad interpretation to providing integrated care that is tailored to frail recipients. They expand the integrated accommodation, care and support package to include arts and culture, so as to give people the opportunity for enjoyable and happy ageing (cf. Bakker et al. 2019).

Attention for diversity in life stories

Creativity can be interpreted as a group characteristic – for example 'the creatives' – or as a set of skills that people develop. In fostering happy ageing, it is not increasing the number of 'creative seniors' that is important, but rather the ability to offer opportunities to a broader group of older people to develop and increase their creative life skills. This requires a life-course approach by policymakers, rather than a group approach.

Older people are not a ‘category’ or homogeneous group. Although there is no longer such a thing as an ‘elderly policy’ in the Netherlands, older people are still treated as a single category in policy plans. An alternative is to think in terms of life courses during the ageing process. These two approaches are fundamentally different. Where a group approach is taken to different social groups, for example low and high socio-economic groups, characteristics are assigned to each group. In a life-course approach, characteristics are assigned to moments or periods in people’s lives. For example, in the group approach the entire group of people aged over 75 are regarded as being at risk of loneliness, whereas the life-course approach assigns this risk to a particular period in a person’s life, for example following the loss of a partner.

The Senior Citizens’ Council (Raad van Ouderen) (2019a, 2019b, 2019c) advises policymakers to devote attention to the diversity within the over-65 age group, for example gender differences, phase of ageing, social status and migration background. The negative perception of ageing, including among older people themselves, could be dispelled by showing that ‘lots of older people in vulnerable situations are sufficiently vital to derive enjoyment and meaning from their lives and to contribute to the well-being of their loved ones’. Diversity is about life stories, biographies and life pathways. Individuals differ in how they give meaning to their lives and how they want and are able to be of significance for society. Analyses of quantitative and qualitative biographies in panels such as the Longitudinal Aging Study Amsterdam (LASA) (Huisman et al. 2011) and story banks (Westerhof 2015) offer solid and detailed insights for government policy that seeks to make possible dignified and meaningful ageing.

Patient or citizen?

The government invests considerable sums in promoting healthy lifestyles for vital older people and in providing long-term care and support for frail older people. The outcomes of this policy are generally measured in terms of daily physical and mental functioning and satisfaction with the use of services. Ageing well also includes outcomes such as creative development, meaning and enjoyment.

The Senior Citizens’ Council (Raad van Ouderen) expresses this well in its report on giving meaning and reducing loneliness (Raad van Ouderen 2019c):

First and foremost, it is important to realise that loneliness is common among older people and that this is to some extent unavoidable. Vitality and mobility reduce as people age; the feeling of no longer being part of the changing society increases, as does the feeling of not being valued and respected because of the expense, being perceived as a burden and as ‘useless’. This reinforces people’s feeling that they no longer matter – a key aspect of deriving meaning from life. (...) All initiatives that strengthen the cohesion in a neighbourhood are valuable, whether they be community barbecues, community apps, community meeting centres, community meals, care cooperatives or help services. The government and – in particular – civic initiatives can play a key role in this regard. If people don’t know each other, they

also don't know each others' needs and what they might be able to do for each other. People need to be given more opportunities to age within their own culture.

One insight to emerge from approaches based on systems science is that stimulating and challenging people makes them more resilient than helping and treating them. This applies for biological, psychological and social systems. A system is normally in a state of equilibrium and will recover and become stronger after being exposed to a minor external stressor (Scheffer 2009). It is only after extended pressure from multiple stressors that the system will pass the tipping point and become weaker (Olde Rikkert et al. 2016). Vaccination programmes are an example of this: a small quantity of the pathogen challenges the recipient's biological system to develop resistance and resilience. Another example is a physiotherapist who teaches a rehabilitating patient to walk again by stimulating and challenging them to go just beyond their own limits with each step. Seen from this perspective, engaging in the arts and cultural activity can be regarded as a preventative stimulus which increases the mental and physical resilience of older people to stressors from their environment. Health policy and cultural policy can be mutually reinforcing, as the former Minister for Education, Culture and Science, Jet Bussemaker, wrote in 2014 in relation to the care domain:

As a society, we have to find an answer to a number of critical developments. It is clear that issues in areas such as care, corporate social responsibility, energy supply and ageing are becoming increasingly complex and increasingly intertwined. Creativity and innovation are essential in addressing these issues. The cultural sector and cultural education are important drivers of creativity and innovation.

Research and development

In response to this, the Ministry of Education, Culture and Science and the Ministry of Health, Welfare and Sport commissioned the Netherlands Organisation for Scientific Health Care Research (ZonMw) to develop a programme for incorporating arts and culture into the system for long-term care and support ('Kunst en Cultuur in de Langdurige Zorg en Ondersteuning'). There are three strands to this programme: targeted development and dissemination of knowledge emanating from current initiatives; research and methodology development; and ensuring embedding and sustainability. These strands are intended to lead to improvements in quality of life, health and well-being of participants in artistic and cultural initiatives. They are also intended to contribute to the structural embedding of these initiatives and to lead to an increase in the cultural participation and personal development of participants.

In addition, the Ministry of Education, Culture and Science, the Cultural Participation Fund (Fonds voor Cultuurparticipatie) and the National Institute for Cultural Education and Amateur Arts (LKCA) are set to launch the programme 'Cultural Participation in the Social Domain' ('Cultuurparticipatie in het sociale domein') in 2021. The programme focuses on

initiatives which reduce differences in cultural participation, for example in areas such as poverty, loneliness, social integration and prevention.

In conclusion

Ageing well entails growing older in a contented, healthy and meaningful way. Expanding the existing policy on care, well-being and housing for frail people to include the cultural sector will not only support contented and healthy ageing, but can also provide opportunities to help people age in a meaningful way. There are already numerous practical examples of increasing the creative resilience of the ageing population. This can make a key contribution to happy ageing in a rapidly changing society.

References

- All-Party Parliamentary Group on Arts, Health and Wellbeing (2017). *Creative Health: The Arts for Health and Wellbeing*. Londen: National Alliance for Arts Health and Wellbeing. Retrieved from <https://www.culturehealthandwellbeing.org.uk/appg-inquiry/>.
- Baars, J. (2006). *Het nieuwe ouder worden. Paradoxen en perspectieven van leven in de tijd*. Utrecht: Humanistics University Press.
- Bakker, F., A. Harps-Timmerman, M. Veerman, A. van den Berg & C. Smits (2019). Goed leven. Een holistische visie op ouder worden. In: *Tijdschrift Positieve Psychologie*, no. 3, p. 36-40.
- Clift, S. & P.M. Camic (2016). *Oxford textbook of creative arts, health, and wellbeing. International perspectives on practice, policy and research*. Oxford: Oxford University Press.
- Cohen, G.J.A. (2009). New theories and research findings on the positive influence of music and art on health with ageing. In: *Arts & en Health*, jg. 1, no. 1, p. 48-62.
- Csikszentmihalyi (1996). *Creativity: Flow and the Psychology of Discovery and Invention*. New York: Harper/Collins.
- Dohmen, J. & J. Baars (2011). *De kunst van het ouder worden. De grote filosofen over ouderdom* Amsterdam: Ambo.
- Fancourt, D. & S. Finn (2019). *What is the evidence on the role of the arts in improving health and well-being? A scoping review*. Copenhagen: who Regional Office for Europe.
- Hamers, J.P., R. Backhaus, H.C. Beerens, E. van Rossum & H. Verbeek (2016). *Meer is niet per se beter. De relatie tussen personele inzet en kwaliteit van zorg in verpleeghuizen*. Maastricht: Maastricht University, Faculty of Health, Medicine and Life Sciences.
- Hanna, G. & S.J.T.M. Perlstein (2008). *Creativity matters. Arts and aging in America*. Washington: Americans for the Arts.
- Huisman, M., J. Poppelaars, M. van der Horst, A.T. Beekman, J. Brug, T.G. van Tilburg & D.J. Deeg (2011). Cohort profile: the longitudinal aging study Amsterdam. In: *International Journal of Epidemiology*, jg. 40, no. 4, p. 868-876.
- Olde Rikkert, M.O.G., V. Dakos, T.G. Buchman, R. de Boer, L. Glass, A.O. Cramer, S. Levin, E. van Nes & G. Sugihara (2016). Slowing down of recovery as generic risk marker for acute severity transitions in chronic diseases. In: *Critical care medicine*, jg. 44, no. 3, p. 601-606.
- Raad van Ouderen (2019a). *De waarde van ouder worden*. Utrecht: Raad van Ouderen. Retrieved 2020, March 12, from https://www.beteroud.nl/beteroud/media/documents/Advies_Raad_van_Ouderen_campagne_herwaardering_ouderen.pdf.
- Raad van Ouderen (2019b). *Voorbereiden op ouder worden*. Utrecht: Raad van Ouderen. Retrieved 2020, March 12, from <https://www.beteroud.nl/beteroud/media/documents/Advies-RvO-Voorbereiden-op-Ouderen.pdf>.

- Raad van Ouderen (2019c). *Zingeving*. Utrecht: Raad van Ouderen. Retrieved 2020, March 12, from [https://www.beteroud.nl/beteroud/media/documents/Advies-RvO-Zingeving-november-2019-\(003\).pdf](https://www.beteroud.nl/beteroud/media/documents/Advies-RvO-Zingeving-november-2019-(003).pdf).
- Scheffer, M. (2009). *Critical transitions in nature and society* (Vol. 16). Princeton: Princeton University Press.
- Slaets, J.P. et al. (2019). *Langer leefplezier ervaren. Handreiking narratief kwaliteitskader verpleeghuiszorg*. Leiden: Leyden Academy on Vitality and Ageing.
- Campen, C. van, W. Rosenboom, S. van Grinsven & C. Smits (2017). *Kunst en positieve gezondheid. Een overzichtsstudie van culturele interventies met mensen die langdurig zorg en ondersteuning ontvangen*. Zwolle: Windesheim.
- Westerhof, G.J. (2015). Life Review and Life-Story Work. In: S. Krauss Whitbourne (red.), *The Encyclopedia of Adulthood and Aging* (p. 1-5). New York: John Wiley & Sons.