

Understanding of health and advice on its preservation from the perspective of advanced age and impaired health

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Abstract

The paper presents the understanding of “health” from the viewpoint of people in advanced age and in impaired health and their advice to young people for its preservation. The study was carried out among 362 people aged 65 years and over, discharged from therapeutic and surgical wards of two hospitals in northeastern Bulgaria. The information from respondents was gathered on the 7th day after discharge during visits at their homes in 12 towns and 64 villages, by means of an interview. The expressed understanding of health integrate physical, mental, and social components, with an emphasis on: health as a lack of illness, high appreciation of mobility and independence in performing the activities of daily living, physical and mental health unity, social activity. The pieces of advice for preserving health given by respondents address the significance of care for physical health, emotional comfort preservation, timely medical care, nutrition, limitation of harmful uses, and activity throughout the lifespan.

Keywords: advice for preserving health, Bulgaria, elderly, understanding of health.

Introduction

The popular understanding of health as a lack of illness has been altered with the positive concept of the World Health Organization (WHO) for a trilateral entity of health as a state of complete physical, mental and social well-being (1).

It is important to know how health is defined not only from the perspective of health professionals, but from the viewpoint of people themselves. Understanding of health could be quite different in young and in old age as well as when a person is healthy or ill. The young and healthy people think of what health actually is on very rare occasions, just if their health is impaired. The significance of health could be completely realized when youth is gone and health is lost. Therefore, a study on understanding of health from the position of advanced age and impaired health would be of high value as it integrates the experience in a negative and positive health aspect, and the wisdom accumulated during the long life course.

Health perception of elderly people was investigated in many studies in order to explore its relations with different factors and conditions. A person's perception of his/ her own health was usually measured using a self-rating scale ranging from "very poor" (or "bad") to "very good" (or "excellent"), based on the response to the question "In general, is your health excellent, very good, good, fair, or poor?" (2), or "In general, compared with other people your age, would you say that your health is excellent, very good, good, fair, or poor?" (3), or "How do you consider your health status?" (4), or a similar single question (5-10). Bulgaria is one of the European countries with the highest proportion of people aged 65 years and over, 18.9% according to the 2011 Census (11); self-perceived health of the elderly was also investigated using a single question and a 3-point scale from "bad" to "good" (12). There is no information how elderly people define "health" (not their current health status, but health as a concept) in their own words. The knowledge of this could enrich professional perspective on health, could be of benefit to younger people, and could provide policy-makers with more evidence needed to improve the promotion of health.

Study Aim

The aim of the paper is to present what "health" is from the viewpoint of people in advanced age and in impaired health, and their pieces of advice to young people for its preservation.

Material and Methods

The presented results are part of a research on health needs of people aged 65 years and over, discharged from therapeutic (internal medicine and neurology) and surgical (surgery and orthopedics) wards of two hospitals in northeastern Bulgaria. On the 7th day after discharge from hospital 362 elderly patients were visited at their homes in 12 towns and 64 villages in order to investigate their health needs in the early post-hospital period. The lowest age among research participants was 65 years, and the highest 98 years.

Within the framework of the research there was a big challenge to reveal what "health" is from the viewpoint of an elderly and ill person (not his/ her own health at the moment). Taking into account that policy for shortening the length of hospital stay leads to discharge of patients not as "healthy" but with needs to continue the medical treatment at home, and also that the poly-morbidity is a feature of the elderly, the respondents were considered as ill.

Information in this qualitative part of the research was obtained from an interview, asking two open questions: "In your opinion, what is health?" and "What is your advice to younger people to preserve their health?".

In the data analysis, the identical elements in the statements of different respondents were extracted and grouped, then presented as a number of people (not as percentages) sharing the same opinion as well as many definitions were presented fully, preserving the respondents' own words.

Results and Discussion

The most frequent understanding of health is formulated identically. Health is "the most precious treasure" for 184 respondents, it is "everything in the world" for 19 individuals, it is "equal to happiness" for seven participants, whereas according to nine individuals it is "no good enough words can be found for health".

“A human can understand what health is just when he loses it and has to struggle for it.” (a respondent aged 67)

“Health is the most precious treasure. Even if I were a millionaire, when I cannot breathe and get up from bed, what are the millions good for?” (a respondent aged 87)

“Be barefoot, but be healthy!” (a respondent aged 76)

“Health is a happiness that I have been deprived of.” (a respondent aged 83)

“Without health, nothing else matters.” (a respondent aged 86)

“Being young I have given health for money; now I am giving money for health. In both cases there is no benefit.” (a respondent aged 73)

The understanding of health as a lack of illness is reflected in the definitions “having no pain” (36 respondents) and “having no illnesses” (9 respondents).

“When people move and nothing hurts, they feel unhappy of having no success. But when you lose your health, just then you realize that it has been the most important thing that you have not valued while you have had it.” (a respondent aged 67)

“To be healthy means not to think whether I am healthy.” (a respondent aged 70)

“To be healthy means: When I get up in the morning not to look for medicines, but to walk out in the yard not thinking about illnesses.” (a respondent aged 80)

The high appreciation of independence in daily life finds expression in the definitions “to be able to do everything by myself” (24 respondents), “not to depend on another person’s help” (34 respondents), “not to be a burden for anyone” (15 respondents).

“To be healthy means to be able to take care about yourself and not to be a burden for your kids. When your kids come to you from 60 km away to take you to a physician and to bring you medicines, this makes you think that you are needless already, that you make only embarrassment.” (a respondent aged 72)

“To be sick means to want to do something but not to be able to.” (a respondent aged 77)

“To be healthy means to be independent. When they change your nappies, you are no longer a complete human, your soul cries because it does not want to accept this humiliation.” (a respondent aged 69)

“To be healthy means to be able to have your meal on the table. When they give you the meal in your bed, the health has gone already.” (a respondent aged 86)

“To be healthy means not to ask anyone for anything. Help is actually help when it is received on time; the permanent asking kills you.” (a respondent aged 76)

The significance of mobility as a part of independence is differentiated in: “to be on my feet” (23 respondents), “to be able to move” (18 respondents), “not to be bedridden” (14 respondents), “to be able to buy bread by myself” (5 respondents).

“While you can walk, you do not realize what a wealth is that. Health is the ability to walk anywhere you want – that means you are alive.” (a respondent aged 79)

“The best thing that nature has given the human is being able to move. I am no longer able to but I do not allow that to break my spirit and for 10 years I have never complained.” (a respondent aged 73, from 10 years not being able to walk due to a backbone trauma)

The understanding of health is associated with the ability to work: “to be able to work” (10 respondents) not only in the sense of professional practice.

“To be healthy means to be able to work smoothly and to lift heavy things, without thinking about each movement.” (a respondent aged 70)

“To be able to draw.” (a respondent aged 78, painter)

The significance of physical health is emphasized in: “to be physically healthy because the soul never gets old” (87 respondents).

“To be healthy means to feel each part of your body, and not your hands and legs to be like foreign to you.” (a respondent aged 78, with a right-sided hemiparesis)

Mental health is inseparable from the physical one: “healthy spirit in a healthy body” (16 respondents). The sense of health is the base of self-confidence.

“To be healthy means to have no pain, the soul to be healthy and the life to make you happy.” (a respondent aged 72)

“To be pleased by one’s own self.” (a respondent aged 74)

“To be healthy means to remember your life. Sometimes I want to remember something but I cannot. Not to be able to remember is as painful as not to be able to walk.” (a respondent aged 79)

“Self-belief comes from the self-confidence that you are useful. When I know that I cannot do a lot of things, I lose my self-confidence, which means that I am not healthy.” (a respondent aged 70)

“To feel healthy is the greatest feeling in the world. Health is equal to life and self-confidence.” (a respondent aged 73)

The association of health with home and family is expressed in: “to be able to care of my house” (15 respondents), “to be able to care about my family” (17 respondents).

“To be healthy means to live in your own home and not to wait for help from anyone.” (a respondent aged 65)

“To be healthy means to be needed by someone.” (a respondent aged 83)

Social contacts and socio-economic status are also included in the understanding of health.

“To live a full-fledged life, to maintain social contacts.” (a respondent aged 71)

“To be among the people, to participate in the social life.” (a respondent aged 70)

“Health is the joy to be in touch with other people.” (a respondent aged 68)

“To be healthy means to enjoy life, and not to flicker of cold, to be hungry and not to have money for medicines.” (a respondent aged 68)

“The healthy human is cheery. I have the feeling that I make nature angry for it has given me life, but I cannot maintain and enjoy it. I want to live longer but my pension is not enough for food, medicines and heating.” (a respondent aged 68)

Health is identified with life: “to be alive” (68 respondents), “to be in this world” (14 respondents).

“I am alive. Therefore I am healthy.” (a respondent aged 85)

“To look at the bright side of life, to exist.” (a respondent aged 77)

“Health, you are the life itself!” (a respondent aged 80)

The respondents’ advice to younger people for preserving health is associated with the understandings of health, life experience, and in number of cases with the state having caused hospitalization.

The importance of care for health in younger age and realizing the need of timely search for medical

care are expressed in the pieces of advice: “they should care about their health from early times, before they lose it” (46 respondents), “they should visit a physician immediately after they feel unwell” (21 respondents). The interviewees’ advise the young people to comply with the professional recommendations for health preservation and the experience of the elderly.

“The young people now have access to a lot of information. They should comply with the recommendations of medicine.” (a respondent aged 76)

“They should learn from the mistakes of the elderly people who have not preserved their health.” (a respondent aged 68)

The prevailing part of the advice emphasizes the care for physical health as a condition for keeping vitality, e.g. “they should temper their bodies” (34 respondents), “they should move more” (38 respondents), “they should work a lot and move a lot” (18 respondents), “more physical exercises” (25 respondents), because “if there is no physical exercises, there is no vitality”. The advice of some respondents is associated with the fractures having caused the hospitalization: “they should temper their bodies because with age progressing the bones break

easily” (25 respondents). A particular recommendation for sustaining the physical health is: “they should practice sports” (52 respondents). The immobilization observed by the respondents, which accompanies the younger people’s everyday life, finds expression in the pieces of advice: “they should not follow a sedentary life” (23 respondents), “they should spend more time among nature and not in front of the computers” (19 respondents), “they should spend more time in fresh air” (13 respondents).

“They should temper their bodies because the soul never gets old, but suffers when you want to do something and you cannot.” (a respondent aged 65)

“They should temper their bodies because the soul does not understand the physical obstructions of old age.” (a respondent aged 77)

“Physical efforts and clear air are needed, because nowadays the young people are in the cities, travel only by car and are non-stop in front of the computers.” (a respondent aged 70)

“They should do more physical work for their bodies and souls to be strong.” (a respondent aged 71, chemical engineer)

The advice for early prophylaxis of joint diseases with appropriate attire is provoked by the grandchildren’s dress style observed by respondents: “they should dress well, for their joints not to hurt when they get old” (32 respondents), with the addition of: “the contemporary fashion is going to be reflected in their health later”.

The traditional advice regarding the harmful uses: “they should not drink and smoke” (34 respondents) is complemented with advice resulting from the expanding use of psycho-active substances: “they should not use narcotics” (8 respondents).

The role of nutrition in sustaining the good health,

realized by the respondents, coupled with observation on the nutrition among the younger age groups, finds expression in the overlapping pieces of advice: “they should eat lighter food” (16 respondents), “they should eat moderately” (10 respondents), “they should eat healthy food” (12 respondents), as well as in the addition: “they should not drink so much coffee” (14 respondents). “Moderateness in everything” (8 respondents) concludes the detailed recommendations for the amount of food intake. The advice for limited amount of food is given mostly by the age group over 85 years, because of which it could be considered a condition for a long life.

“They should follow the natural laws of nutrition, drinking and movement.” (a respondent aged 87)

“They should work a lot, should be in nature, and should not overburden their organism with too much food.” (a respondent aged 98)

The perception of psychical comfort as an element of health and as a prerequisite for physical health is

manifested in the pieces of advice: “they should be calm” (9 respondents), “they should not get angry

at small things” (12 respondents), “they should not get angry, because all diseases come from that” (11 respondents), “they should enjoy every day of their life” (24 respondents). The respondents also appreciate the healing force of high spirit in a state of impaired health.

“They should be pleased when they wake up in the morning, and not feel stressed by small things. There is no bigger wealth than health, but the young people will not understand that until they get old.” (a respondent aged 66)

“They should be self-confident and decisive, should listen to themselves, should respect their own desires. The permanent compliance with the others destroys health. When you stay alone and sick, those, with whom you have complied, will not help you.” (a respondent aged 76)

“They should not give up when they fall ill.” (a respondent aged 73)

“They should not lose their spirit, they should struggle for their health.” (a respondent aged 87)

The activity throughout life is considered a necessary condition for health and good self-confidence. The respondents do not perceive the progressing age as a cause of passivity even in a state of impaired health.

“They should be active, irrespective of their age.” (a respondent aged 81)

“Thought and hands should always be busy.” (a respondent aged 69)

Some pieces of advice are related to the contemporary dynamic way of life.

“They should live at a slower pace, not to hurry without a break. Health is a treasure, they should not rush into losing it.” (a respondent aged 86) “They should be careful crossing the street. At war, the rules are clear and you know what to keep away from. In the street, there are no rules and in this war the victims are more.” (a respondent aged 85, hospitalized due to a trauma in a car accident, a war veteran)

In general, the advice given by the respondents is influenced by the dominant concept of health as a condition for every activity in life.

“They should save their health more than anything in the world, because without health nothing else is possible.” (a respondent aged 71)

Conclusion

The understanding of health presented from the viewpoint of advanced age and impaired health integrates physical, mental, and social components – the wisdom of the elderly people defines health in its trilateralness, similar to its definition by WHO. The advice to young people on preserving health

emanates from perceiving health as a foundation of every activity in life and is close to the contemporary health promotion concepts.

The respondents' opinions reflect the stability of their personality with age progress, when regardless of the physical changes, the individual "I" is preserved almost unchanged. The elderly people have a large volume of knowledge based on their rich life experience and trend to better general judgment. The applied knowledge, known as "wisdom", can be much more significant for adaptation in everyday life than the abilities covered by the intelligence tests. Through the applied knowledge coping strategies are built, which compensate for the impaired physical and cognitive abilities. As Davidovsky (1966) pointed out: "It is not true that old age is only a fall. The adaptation power in old age indeed falls down, but it can be successfully compensated by the increased mastery, the high ratiocination level, the scope and the sense of social responsibility. Experience and wisdom have always been a function of time..." (13).

Listening to the elderly people's understanding of health is of great importance for everyone, in order to appreciate his/ her own health and take care of it.

The elderly people's opinions of health could be taken into consideration in developing programmes for health promotion among younger age groups. They could be applied for strengthening health education, emphasizing physical activity, coping with stress, healthy nutrition, and limitation of harmful uses.

Further research could be devoted to clarify to what extent younger people comply with elder ones' recommendations for preserving health.

Despite that the presented study is limited to a narrow theme, the wealth of information received by only two open questions indicates that researchers (not only in the field of ageing) should pay more attention to the viewpoints of respondents through qualitative studies, because structured questionnaires and scales facilitate statistical analysis but limit the information that reflects the diversity of real life. Health scientists should not cling to already adopted definitions of fundamental issues, but they should try to enlarge, enrich and even modify these definitions using the people's understandings as resources. This finds support in the fact that science and its consequences are devoted namely to people and therefore people's voice should be heard.

Conflicts of interest: None declared.

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