Evaluating the Relationship Between Quality of Life and Exercise in Older Adults

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Background

Understanding how to improve quality of life in older adult years is important to all people since everyone ages. Exercise has been shown to have positive impacts on the mental, physical health, and overall wellbeing of individuals, even decreasing mortality and morbidity in older adults (Nied & Franklin, 2002). Previous research demonstrates that consistent exercise can improve affect, self-efficacy, physical self-esteem, as well as satisfaction and quality of life (Elavsky et al, 2005).

Purpose

The purpose of this study is to assess the quality of life of older adults post participation in an exercise class offered by JFS.

Methods

Sample: The sample (N=16) includes male (31%) and female (69%), older adult participants age 60 and older (mean=78; SD=11.54), who have participated in at least one exercise class offered by Jewish Family Service.

Design: This study utilized a convenience sample in a one-shot case study (XO) design, without a control group or randomization.

Instrumentation: The standardized World Health Organization Quality of Life Survey-BREF (WHOQOL-BREF) instrument was used for this study.

Results

The Mann-Whitney U test revealed a significant difference in the psychological scores between females (Md=75, n=11) and males (Md=44, n=5), U=8, z=-2.24, p=0.02, with a large effect size (r = 0.56). Female participants scored significantly higher than male participants on Domain 2 of the WHOQOL-bref.

Overall, results of a quality of life survey as reported by older adult exercise participants (N=16) at Jewish Family Service, were lower than previously reported means (see Table 1).

<table>
<thead>
<tr>
<th>Domain</th>
<th>Males</th>
<th>Females</th>
<th>Total</th>
<th>Domain Score Norm Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Health</td>
<td>52.8</td>
<td>66.6</td>
<td>62.3</td>
<td>72.3-74.7</td>
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<tr>
<td>Psychological</td>
<td>46.2</td>
<td>68.2</td>
<td>61.3</td>
<td>69.7-71.5</td>
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<tr>
<td>Social Relationships</td>
<td>39.4</td>
<td>58.5</td>
<td>52.5</td>
<td>70.3-72.7</td>
</tr>
<tr>
<td>Environment</td>
<td>51.4</td>
<td>66.1</td>
<td>61.5</td>
<td>74.2-76</td>
</tr>
</tbody>
</table>

Table 1. JFS Participants’ WHOQOL-bref Scores by Gender

What did participants say?

“Since taking exercise classes, I am not tripping. It helps my arthritis” (86-year-old female)

“It is a necessity, gives me a purpose, makes me feel good, chance to meet new people and interact” (97-year-old male)

“I will be able to socialize with people. Exercise according to my doctor will keep me more mobile and should lessen the pain from arthritis and fibromyalgia” (66-year-old female)

“Improving my health improves my emotions” (68-year-old male)

Discussion

Results from this study align with previous research, which suggests that men are more likely to suffer from lower psychological health than women, and continues to decline as men get older in age (Adams-Fryatt, 2010; Hawthorne, Herrman, & Murphy, 2006; Mental Health Foundation, 2010).

Future research should seek to conduct research where it will be possible to obtain both pre and posttests from participants, in order to better connect how exercise classes as an intervention affect the overall quality of life in older adult participants. Future research should seek to obtain the SES of participants to better assess differences related to the impact of outside factors on clients’ exercise participation outcomes.

Implications

It is important for those working with the older adult population to be familiar with programs that can improve quality of life for our clients. Previous research shows that exercise programs can offer a plethora of benefits for those who participate at any level of physical functioning. The benefits can improve client’s likelihood for being able to live independently and safely for as long as possible.

References