

# HAPPY AGEING: INCLUSION AND MOTIVATORS OF SOCIAL VULNERABLE OLDER ADULTS IN A HEALTHY LIFESTYLE INTERVENTION

## Background

Socially vulnerable older adults tend to have a lower health literacy regarding healthy behaviours and they most often experience limited access to health interventions such as healthy lifestyle programs when compared to general older adults [1,2].

## Aim(s)

This research project aimed to detect the needs of socially vulnerable older adults in terms of healthy lifestyle behaviors. These needs were then used in the development of a healthy lifestyle program that was being implemented in local centers for community-dwelling older adults in Brussels and Flanders.

## Methods

Based on a literature review and a needs assessment, a multidisciplinary research team of nurses, occupational therapists, a nutritionist, a psychologist, a sleep therapist and a physiotherapist were involved in the development of a 10-week healthy lifestyle program. This program consisted out of 10 weekly group sessions of 60-90 minutes each. Each session was focused on healthy lifestyle behaviours such as physical activity (PA) and sedentary behavior (SB), sleep and stress, healthy nutrition, resilience and social contact. First, for the implementation of the program, socially vulnerable older adults were identified and recruited by means of a neighborhood analysis that was initiated by the research team and supported by the community centers. Second, the participants' motivators for participation in the program were examined by means of focus groups with the participants [3].

## Results

Nine centers for community-dwelling older adults in Flanders and Brussels were involved in the implementation of AHAA of which 6 centers collaborated in this program. In total, 93 older adults were recruited to participate in AHAA of which 76 completed the full program. Main motivators of participants for participation were to acquire more knowledge on a healthy lifestyle, staying and becoming fit, getting acquainted with neighbours and the community center, expanding own network, escaping loneliness, positive ageing and rebooting social contact after covid.

## Discussion

The inclusion of socially vulnerable older adults in this program was a challenging process considering these older adults often remain under the radar of both formal and informal organizations. Second, the social aspect of a group was a critical factor for the drop out of participants as well as absence due to illness of the participants or the participants' spouse. Third, the success of the program itself was also strongly affected by the embedding of the program within the community centers as well as the social aspect (belongingness), the free admittance and the freebies that were included in the sessions.

## Implications and future perspectives

Future research and projects regarding socially vulnerable older adults are encouraged to reconsider recruitment methods and inclusion of the target group and their motivators during the development of the intervention in order to increase inclusion of older adults and decrease drop out during the intervention.

## References

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