

Suggested Citation: Evseeva, Y. (2019). Successful Ageing: State of the Art and Criticism. In Ł. Tomczyk & A. Klimczuk (Eds.), *Between Successful and Unsuccessful Ageing: Selected Aspects and Contexts* (7–22). Kraków: Uniwersytet Pedagogiczny w Krakowie. DOI: 10.24917/9788395373718.1

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## **Successful Ageing: State of the Art and Criticism**

**Abstract:** This chapter reviews the history of the major ideas of successful ageing, their current state, and criticism. The original concept of successful ageing understood as life satisfaction continuing into later maturity, was developed by Havighurst in the early 1960s. Afterward, it was associated with active, healthy, positive, or productive ageing. For contemporary gerontology, successful ageing was rediscovered in the late 1980s by Rowe and Kahn who regarded it as good physical and mental health as well as social engagement. Today, one can speak of three major trends in the development of ideas of successful ageing. On the one hand, considerable numbers of scientists and specialists around the world in an uncritical way elaborate projects and programs of successful ageing as a useful research and practice framework. On the other hand, over the past two decades, ideas of successful ageing have tended to embrace more than implied in the classical Rowe-Kahn model. For quite a large group of researchers, successful ageing is an umbrella term for a positive world outlook and a respective

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lifestyle in old age, not limited to one theory and potentially encompassing all older people who are relatively content with themselves and their life, which can be facilitated through altruistic behavior (e.g., volunteering) and spiritual growth (lifelong learning and creativity). Finally, quite influential is the trend that denies the importance of successful ageing and regards it as a reflection of current neoliberal values. This approach is typical of critical gerontological branches, post-Marxist, feminist, postmodern gerontology among them. Authors sharing this view believe that concepts of successful ageing individualize and psychologize ageing and ignore power relations and structural inequalities in society (which do not allow all the population groups to age equally “successfully”).

**Key words:** Successful Ageing, Social Gerontology, Activity Theory, Disengagement Theory, Critical Gerontology

### **Introduction**

This chapter presents an overview of the history of the ideas of successful ageing. Related to successful ageing are the concepts of active ageing (connected with ongoing activities as one age, most often work and social engagement), healthy ageing, productive ageing (focusing on staying in paid employment and other forms of economic efficiency), some of them more popular with particular researchers, in particular countries. Furthermore, active ageing is rather a policy framework, associated with programs of governments and international organizations while successful ageing is more often seen as academic discourse.

Since ancient times, humankind has contemplated how to age “well,” what it would mean to have a good old age. In ancient times, there was exclusive knowledge, philosophy; the physical was seen through the metaphysical. The human condition was related to the balance of the elements; warmth

(fire) and humidity (water) were regarded as the bosom of life, while with years, a man supposedly grows cold and dry, thus withers and dies. In order to prolong life, one was to eat warm types of food (cereals, most spices, certain kinds of seafood and meat) and avoid complete rest. The old-age ideal was a sage indulging in speculation and accumulating wisdom, though it was accessible for few. In the Christian Middle Ages, the body was subjected to the soul, and life was looked upon in the light of the end; piety would be the main merit of an older adult. Alongside medicine still following Galen, there developed alchemy as a mysterious way to immortality. Renaissance humanists started to display interest in the physical body itself; they dreamed of a long life full of vital energy and creativity. In the 15<sup>th</sup> century, Zerbi (1988 [1489]) published “Gerontocomia,” the first treatise on old-age care. Enlightenment became the last epoch when longevity was considered a private matter, to be attained through moderation and diet; in the 19<sup>th</sup> century, with the development of professional science, life extension became a duty of the medical discipline. In the 20<sup>th</sup> century, based on medical physiology and biology of ageing, gerontology, a specific branch of science devoted to ageing, came into existence.

In a certain sense, the first contemporary theory of successful ageing belongs to Russian biologist Metchnikoff, one of the fathers of gerontology, who also coined the term itself. In “The Nature of Man” (1903), he speaks of the so-called “natural death” emerging as a result of orthobiosis, the full human life cycle (which can be achieved, among other methods, by means of eating products rich in lactic acid bacteria). According to the author, “natural death” can be experienced by centenarians and near-centenarians, who feel that they have lived enough and are ready to die; allegedly, they feel satisfied and do not show any obvious fear of death.

In the second half of the 20<sup>th</sup> century, natural sciences developed towards further specialization of knowledge;

biology of ageing was delving into the microworld. One of the theories reaching beyond cells and chemical processes and actually concerned with positive ageing was elaborated by Ukrainian Soviet gerontologist Frolkis. The fundamental concept of his adaptive-regulatory theory is *vitauct* (Latin, “life extension”), a phenomenon opposite to physical ageing. As early as the 1920s, Soviet gerontology had stressed the significance of compensatory means exercised by the human organism. According to Frolkis (1988), *vitauct* characterizes the adaptive and reparative capacities of the organism, among them DNA repair, metabolism activation, detoxication, the antihypoxic system. Thus, an individual’s lifespan is a resultant vector of ageing and anti-ageing, the latter to be enhanced by physical activity, a low-calorie diet, taking geroprotectors (e.g., antioxidants).

### **Successful Ageing in Social Gerontology**

Soviet gerontologists had always paid attention to the social aspects of ageing; probably owing to that fact, there was no need in the region in a special branch such as social gerontology. Whereas in Western countries, it was recognized in the middle of the 20<sup>th</sup> century that while biology and medicine of ageing were making good progress, social aspects of ageing remained in the shade. In 1944, the United States Social Science Research Council founded the Committee on Social Adjustment in Old Age. Under the auspices of the Committee, two important texts were published, “Social Adjustment in Old Age” (Pollak & Heathers, 1948) and “Personal Adjustment in Old Age” (Cavan et al., 1949). This new socially-oriented branch of ageing studies got the name of “social gerontology.” Early socio-gerontological theories developed within functionalism, a major current in American sociology in the 1940-1960s. Parsons, the theorist of functionalism, viewed all constituents of society as functions which ought to operate effectively, thus sustaining the whole

system. Being normative, functionalist theories prescribed people to behave in such a way that societal balance may be preserved.

The first socio-gerontological theory, the activity theory, advanced by Cavan, Havighurst, and others, saw the way to optimal ageing in people's ongoing social activity (Cavan et al., 1949; Havighurst & Albrecht, 1953). The "right" behavior, for example, if one manages to adapt one's lifestyle to the changing circumstances, was defined as "adjustment" (the opposite was labeled "maladjustment"). Becoming a retiree, a person loses part of his or her social connections, primarily with colleagues. The person is to substitute the lost connections with new ones and maintain the constant activity level; in order to achieve that, one can find, for example, a part-time job, take up a hobby, engage in volunteering and community work, or take on grandparenting duties. Individual success, activity as a life stand belong to the known values of American culture; the theory in question was also a reflection of the cultural context of the period. The system of old-age benefits was developing, a market of goods and services for older people was on the rise, the first "golden age clubs" and retirement communities were established. Gerontology added to that trend, manifesting the importance of its own object.

However, the second socio-gerontological theory, Cumming and Henry's (1961) disengagement theory, embraced a different model of "ageing well." It stated that not all the active individuals were satisfied with their life and not all the non-active ones were dissatisfied with it. According to the disengagement theory, the most appropriate and "natural" scenario of the relations between an older person and society would be their gradual mutual alienation. An individual, while ageing, keeps drifting away from society, immerses into one's own inner world, whereas society, from the family to the power institutions, pays still less and less attention to the person, consigning the latter to oblivion. Eventually, there sets

in the final stage of disengagement, death. The somewhat grave mood of the disengagement theory was a reaction to the excessive optimism of the activity theory. Furthermore, forecasts could already be heard warning about future competition between the young and the old on the labor market, for material and non-material resources. Older people were now supposed to focus on themselves, their own life, and leisure.

Both fundamental theories have since then been earnestly criticized, first of all for their alleged one-sided nature. Although the activity theory gained popularity and was later associated with successful ageing, some researchers could not accept the idea of compulsory, “fussy” activity. It was viewed as a normalization strategy promoted by the official and medical discourse as well as the justification of social work with older people (Katz, 1996, 2000). The disengagement theory has been exposed to even more criticism. Particularly, its validity was considered limited as the older generation could be seen withdrawing from society only in Western culture (Gubrium, 1973); some arguments were merely directed against its supposedly negative nature. It was practically not until the 1990s that the marginal theory was to a certain extent, emancipated in Tornstam’s (1999, 2005) theory of gerotranscendence. In his theory, disengagement takes the shape of gerotranscendence; that is the transition to a new personality level happening in old age. This new existential state is characterized by a decrease of interest in the material world, refusal of a lifestyle overridden by achievement, focusing on the main, limiting the circle of connections and activities; therefore, a person obtains opportunities for spiritual development and creativity. According to Tornstam, gerotranscendence is welcomed by most older people.

Meanwhile, the original concept of successful ageing was proposed by Havighurst (1961), understood as life

satisfaction continuing into later maturity. Within this framework, people would be ageing successfully if they were content with their past and present, and the years lived were filled with a satisfactory substance (“adding life to the years”). Successful ageing became one of the most popular ideas in social gerontology, which may be accounted for not only by its allegedly positive nature but also by the looseness of its definition. Since the 1960s, it has inspired numerous research projects and has been linked to such affiliated concepts as “healthy,” “positive,” “productive,” “effective,” “optimal” as well as “active” ageing and others. Though in its author’s view, it was compatible with both the activity and the disengagement model, to the public as well as researchers, the activity theory has seemed closer to successful ageing than its counterpart. The World Health Organisation titled its active ageing program “Add Life to Years,” hence referring one to Havighurst’s successful ageing formula.

Concepts of successful ageing appeared in various gerontological branches. A critical model, known as SOC (selective optimization with compensation), was developed by P. Baltes and M. Baltes in the psychology of ageing and incorporated into social gerontology. Life is seen here as continuous development: not as fading, but rather as an interplay of losses and gains. Thus, while the third age offers all opportunities for successful ageing, one can be active and socially successful even after eighty. In order to attain that, the individual can use specific techniques, namely selection (concentrating on the most significant goals), optimization (improving methods of attaining those goals) and compensation (replacing methods that are no longer available with new ones). Baltes and Baltes (1998) give the example of pianist Arthur Rubinstein (1888–1982) who was long professionally active and as time went by gave fewer performances (selection), rehearsed more (optimization) and changed the tempo to produce an impression of a high speed

of playing which, in fact, he could no more keep up (compensation).

The recent concept of successful ageing most researchers now refer to belongs to Rowe and Kahn (1987, 1998). In their works, old age is seen as necessarily active. By successful ageing they mean: (a) avoiding diseases and disability; (b) maintaining physical as well as cognitive functions; and (c) “full engagement in life, including productive activities and rich interpersonal relations” (Rowe, 1997, p. 367). The more active older individuals are, the better should be their health and emotional state. Rowe and Kahn’s works became a symbol of the so-called “new gerontology,” focusing on successful ageing rather than seeing old age as a time of frailty and disease.

### **Contemporary Views: Extensions and Criticism**

Though some attempted to actually measure successful ageing based on Rowe and Kahn’s three categories, eventually, because of their own perceptions as well as their exposure to lay views, researchers have recently been considerably stretching successful ageing (for instance, religion and spiritual growth were not included in the Rowe-Kahn model, but proved crucial for older informants). What constitutes successful ageing now extends from a balanced lifestyle, independence, and favorable living conditions to death acceptance.

As more researchers now see it, ageing successfully need not mean compulsory physical and social activities which would disagree with older people’s changing physical conditions or their own wishes. Older people, it is stated, ought not to be equated with energetic middle-aged adults, and those less active than their peers must not be left behind while social policy should pay attention to preventive health care (Walker, 2002). Even older people with reduced mobility can

be active enough for their condition, for instance, volunteering over the phone (Boudiny, 2013).

Furthermore, ideas of successful ageing are being spread onto an ever-larger scope of phenomena. Flood (2006) gives a comprehensive definition of successful ageing as an ability to adapt to occurring changes while maintaining one's own identity and existential meaning. Lander V. McCarthy and Bockweg (2013) present "a holistic view of successful ageing." They unite all major socio-gerontological theories under the roof of successful ageing. In the activity theory, they highlight the orientation towards cooperation and altruism; in the disengagement theory, the value of solitude and reflection; in the continuity theory, the idea of ego integrity and self-acceptance; in the life span development theories, the attitude towards old age as a qualitatively new life stage leading to individuals' self-realization. The authors include into their model Maslow's idea of self-transcendence as the highest level of human needs, the Eriksons' transcendental eighth and ninth stage of psychosocial development and Tornstam's gerotranscendence theory. In their view, the most encompassing recent approach is given in Reed's (2003) theory of self-transcendence, which, according to the author, implies a gradual, usually taking place in old age, widening of the cognitive boundaries of an individual, who overcomes the limited views on one's own self, other people, and the world. This can be attained through altruistic behavior, lifelong learning, creativity, keeping a diary, and sharing wisdom with others. The idea that the positive does not have to be entirely positive while the negative may be positive in some way, thus uniting activity and disengagement in transcendence, may seem a promising trend in successful ageing theorizing.

However, the looseness of the definition has proven to be a weak point of the successful ageing concepts and a target for criticism. Timonen (2016) speaks of more than 100 definitions of successful ageing. Moreover, its problems do

not end here. In 2015, “The Gerontologist,” where Havighurst’s article formulating the original concept was once published, devoted a special issue to the issue of successful ageing, analyzing it from various angles and commencing its criticism with the very phrase “successful ageing,” namely to what extent the notion of success can be valid and applicable. An overview of the critical arguments is given in the article written by Katz and Calasanti (2015). Firstly, according to the authors, a substantial part of research on successful ageing still relies on gerontologists’ own idea of success in old age and would not consider what it may mean for older people themselves to age successfully. Secondly, regarding successful ageing as people’s own responsibility, this discourse ignores power relations in society, environmental issues, and other barriers to ageing “well” which lie beyond individual choices. Some older people, and some groups of older people, for example, women compared to men, minorities vs. the core population, tend to have fewer resources for successful ageing. What about people ageing “unsuccessfully”? Elsewhere, Calasanti (2005) writes about anti-ageing propaganda as a manifestation of ageism and criticizes her own colleagues for their aversion to an unhealthy, physically unattractive old age. Besides, the longer people live, the more health issues they are likely to develop; after 85-90, diseases and disabilities are an objective phenomenon. Successful ageing seems to exclude all those people.

Many researchers have recently proposed to reject successful ageing in favor of other concepts. To those belong, Moody’s (2005) idea of conscious ageing by which the author means that people should better recognize and adapt to, not postpone or deny decline. According to Moody, spiritual growth is possible in the face of loss and pain. Liang and Luo (2012) criticize the successful ageing model for an ethnocentric view and suggest it should be replaced with “harmonious ageing” to reflect other, non-Western

perspectives. They see this as the integrity of body and mind as well as the interdependence of one with the world and other people instead of individual success.

Starting with the pioneering study by Bowling and Dieppe (2005), who focused on “lay views” of successful ageing, various researchers have looked into attitudes towards ageing expressed by older people themselves, particularly those the least consistent with ideas of successful ageing, for example, very old, living with a disability, suffering physically and morally, grieving, belonging to other cultures. An interesting example is given by Lamb (2014), who contrasted their views on the ageing of Boston-area financially secure former professionals in their 70s and 80s (stemming from the environment the ideas of successful ageing had come from) with those of Indian villagers in their 60s and 70s. The former longed to sound like successful agers, enumerating the many activities they were engaged in and claiming they had never been happier. The latter were not showing any sign of physical or social activity, only meditating and waiting to die. The inclusive approach to successful ageing is, indeed, challenged in the latter case.

Therefore, some researchers claim that successful ageing has exhausted its potential, such as Timonen (2016) who insists that neither successful nor active ageing concepts are working; they are allegedly just modeling ageing and older people (hence her theory of model ageing), prescribing them what to do and how to be. According to her, what is needed is not a normative theory of any kind, but merely actual research of diverse ageing populations.

## **Conclusion**

One can see nowadays that successful ageing concepts still represent a product of social gerontology in high demand. The discourse in question is forwarded by international

organizations and power institutions, especially in Western countries. To the latter, the realization of successful ageing strategies would mean reduction of retirement expenditures and welfare services costs. Therefore it constitutes an essential component of many contemporary programs in the sphere of social policy towards older people. At the same time, conceptually, successful ageing is now more encompassing than ever; successful is that option which is suitable for the particular individual. This way, successful ageing has become a broad framework not limited to any given theory and capable of embracing the majority of older people. Relatively healthy individuals as well as those with a disability, working and retired, (grand)parents and childless may be said to be ageing successfully if they are content with themselves and their life rather than dissatisfied. In other words, successful ageing is being individualized and psychologized, herewith losing its scientific rigor.

Yet, one may object that this reflects modern trends. With the contemporary level of tolerance and the development of lay cultures, there exist foundations for a positive, harmonious, diverse ageing. People are claiming their right for both a “graceful” and “disgraceful” ageing, for accepting their own ageing body, for seeing ageing not as physical fading, but as spiritual enrichment. Therefore, while, on the one hand, it is possible to speak of the societal pressure older people may be feeling (the cult of youth, beauty standards, and anti-ageing technologies), on the other hand, anyone can follow their own preferred lifestyle and even become a trendsetter. The latter approach is supported by works of authors such as Gullette (2004), for whom old age is a time of “narrative freedom,” and Randall (2013), calling upon people to cultivate irony so that they may get the best of their later years (as it helps individuals to accept the ambiguity of life, to be less serious about oneself and eventually one’s own end). Being in line with those trends, successful ageing may prove a fruitful

framework for the 21<sup>st</sup> century. However, others may claim that it is just, for example, a reflection of neoliberal values, demanding personal responsibility for the way one lives, or looks.

Thus today, one can observe three major trends in the use of successful ageing ideas by sociologists and gerontologists: (1) considerable numbers of scientists and specialists around the world see successful ageing as an in-demand, funded area of ageing research and practice, as a convenient framework to work in; and (2) for quite a large group of researchers, successful ageing is a nominal, umbrella term for a favorable view of ageing, a positive world outlook and a respective lifestyle in old age, not limited to one theory and encompassing all older people who are relatively satisfied with their life (which can be facilitated by altruistic behavior and spiritual growth). Also, (3) somewhat important is the trend that regards successful ageing as an exclusive rather than a general phenomenon (there are, after all, those who are not, and should not be, happy with their life). This approach is typical of critical gerontological branches, Neo-Marxist, feminist, postmodern gerontology among them. Authors sharing this view believe that concepts of successful ageing reflect current neoliberal values, individualize and psychologize ageing and ignore power relations and structural inequalities in society (that do not let all population groups age are equally “successfully”).

Therefore, those researchers who are using the successful ageing discourse, need to critically assess their use of it. If they are of the opinion that it has research potential, if they consciously believe that success, activity, and productivity for that matter, are highly relevant concepts, they should acknowledge this fact as well as explain to themselves why they think so—or dismiss it and choose other methodological foundations.

## Acknowledgments

This chapter is based on the two conference papers read by the author at the Third ISA Forum in Vienna, Austria, 10-14 July 2016, and the workshop of the Eastern-European Ageing Societies in Transition (EAST) Research Network of the Oxford Institute of Population Ageing in Łódź, Poland, 22-23 June 2018, respectively. The previous version of the text was published as *Successful ageing: History and state of the art* in: *Chelovek: Obraz i sushchnost (Human Being: Image and Essence)*, 2017, N 30/31, pp. 130–140. The author would like to thank all her colleagues for their valuable comments.

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