Berlin declaration on the quality of life for older adults: closing the gap between scientific knowledge and intervention

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This declaration on quality of life for older adults highlights some central topics that were discussed at the New Horizons Expert Workshop on Quality of life in Old Age held as part of the XXIXth International Congress of Psychology in Berlin, Germany, 2008.

In many countries life expectancy has dramatically increased over the past 100 years—with an average gain of 30 years. The shift in life expectancy has consequences for current aging cohorts, and for future cohorts, for the aging individual, for the relevant institutions of the welfare state, and for the science of psychology at large.

Quality of life encompasses many individual aspects of functioning, such as physical and mental health, cognitive processing, and social participation. In addition, quality of life also refers to adequate contexts and environments, such as family support, access to social and health services, environmental stimulation and safety, and a satisfying economic standing. All this concerns populations that

become more and more heterogeneous in terms of their physical and mental conditions, lifestyles, ethnicities and religions. Discussions of the quality of life in old age thus need to focus on how to activate and promote resources and unused potentials, how to prevent or delay age-associated declines, and how to introduce therapeutic interventions that compensate age-related losses and thus maintain competence and mental health.

- *Activate resources and potentials of older adults.* There are many possibilities for increasing the quality of life by social participation, be it through volunteering or through new formats of age-fair work that avoid marginalization of the elderly without putting undue pressures on those who cannot live-up to standards of activity, but allowing those who are able and want to continue working after the mandatory retirement age. For future cohorts, we need to make sure that education, work, and leisure occur at varying levels of

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intensity and quality over the entire life span, rather than in a fixed linear sequence as is still common.

- *Promotion of competence.* Solid evidence from decades of cognitive training research has shown that there is enormous plasticity of functioning—within biological limits. Particularly, the ages between 60 and 80 offer a late possibility to avoid or compensate normative losses of functioning by intervention. Recent research on the role of physical activity and cognitively engaging activities on neuronal growth and plasticity in animals has shed new light on the mechanisms possibly involved in human aging. Cognitive training research has been successful to illustrate plasticity of cognitive functioning but at the same time has demonstrated very limited generalizability. The only exception so far is training of aerobic fitness and its broad effects on cognitive performance. Thus, as a next step, it is necessary to develop ecologically valid interventions (including, for instance, changes in the work environment) and to test their effects.
- *Promotion of mental health and autonomous functioning in old age.* A growing body of evidence has shown that psychological therapy and many other interventions that are applied to a range of mental problems often related to age-associated losses, such as depression, anxiety, and psychological distress are successful in old age and that calendar age is not an important predictor for positive therapeutic outcomes. In addition, psychological intervention offers a full scope of methods able to prevent negative outcomes, foster autonomy, enhance loss management (e.g., in the situation of chronic physical illness), reduce problem behaviors in those with dementia-related disorders, and is able to positively shape possible late-life disability trajectories.
- *Strengthening the families of older adults.* Although there has been much progress in the prevention and rehabilitation of diseases and disabilities in old age, demographic aging has led to an increase in the number of older people in need of help and care. Family members, such as spouses and adult children, are the most important supporters of the frail elderly, although many older adults also turn to their peers as a source of help. There is a need for developing and implementing effective interventions that strengthen the ability of the family and significant others to provide support and ease the burden of informal caregivers.
- *Ethnic/cultural diversity.* Given migration and increasing ethnic diversity of the aging population, we need research on ethnic/cultural differences of the older population, the development of culturally fair

assessments of older adults from different ethnic backgrounds, and measures for overcoming ethnic/cultural disparities in the use of services for older adults.

- *Research needs.* Improving the quality of life of the elderly requires new initiatives, and in particular more experimental and interdisciplinary studies. Studies that use the new tools of neuroscience, as well as studies in real-life contexts, are especially important. We in the science of psychology should increase our research activities to investigate the causal connections between engaging experiences in education, work, and leisure in earlier years on the one hand and positive functioning and resilience in the cognitive, motivational, and social domain in old age on the other hand. Moreover, we need to know what type of intervention is optimal at what time of the life span, and how such interventions can be implemented with the greatest effectiveness and equity across all segments of the population.
- *Training researchers and professionals for working with older adults.* Finally, in order to develop and implement effective interventions aimed at increasing the quality of life in old age and to increase scientific knowledge about aging processes, we need to improve the training of young practitioners and scientists in the fields of basic and applied research of aging. That is, the science of psychology worldwide must become more sensitive to the research and practice needs related to aging. In particular, we should strive to achieve a similar level of expertise in issues of aging across countries and regions of the world. This should be part of a larger cross-national collaboration among research institutes and universities.

Concerning all possible ways of intervention towards improving the quality of life in old age, the major gap is not so much one of scientific knowledge but of implementation. The range of older adults in need that are reached is too small. Beyond psychological barriers, such as aging stereotypes, there is often a lack of awareness and knowledge among those in charge of health and social policies and programming about the potential of psychological interventions for older adults.

We need a new effort to integrate the activities of science, research foundations, governments, and relevant service providers to close the gap between what is possible and what is reality in promoting quality of life in old age.

This declaration was signed by the international experts of the Forum on Aging that took place on July 22, 2008, on the occasion of the XXIXth International Congress of Psychology in Berlin, Germany.