



Rapid Evidence Assessment to identify strategies to support and sustain healthy behaviour as part of active ageing in Australian veterans

Evidence Profile

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The authors acknowledge the traditional custodians of the unceded lands on which this work was undertaken. We recognise their continued connections to the land and waters and thank them for caring for Country for thousands of years. We acknowledge that they never ceded sovereignty. We pay our respects to First Nations Elders past and present, and honour their unique cultural and spiritual relationships to the land, and their rich contribution to society.

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Intervention studies


Author & Year	Bartlett et al. (2013)
Study Design	Scoping review and program evaluation
Country	Australia
Age, Ethnicity, and Gender	Age: 65+ Ethnicity: not specified Gender: Female and male
Sample size	136
Title	Preventing social isolation in later life: findings and insights from a pilot Queensland intervention study
Aim of the study	Reports on the challenges of attempting to undertake a rigorous evaluation of three demonstration pilot projects targeting older people at risk of social isolation, conducted within different social settings in Queensland, Australia.
Outcome variables	Social isolation and loneliness.
Data Analysis	A pre- and post-intervention questionnaire was developed to gauge loneliness and social support pre and post intervention.
Findings	This paper provides a range of group-based activities and services to specific groups of at-risk older people in three locations with the aim of building community capacity and social networks.
Study Recommendations	Generally, this study suggests that there may be benefits in using such a community development model to help reduce social isolation in later life and provide key insights into how future interventions should be undertaken. The incorporation of outcome evaluation in such programmes is essential for planning and designing future initiatives to tackle social isolation and for the development of a robust evidence base.
Quality assessment (maximum 5 stars)	 2.5 stars Small scale, retrospective evaluation study design; enrolment into interventions was not blinded to participants or researchers; inconsistent outcome measures; subjective outcome measures; evaluation methods were well described

Author & Year	Caspi and Cojocaru (2021)
Study Design	2x2x2 (pre-post; intervention-control; community-residence) study design
Country	Romania
Age, Ethnicity, and Gender	Age: 65-97 Ethnicity: Not specified Gender: Male and Female
Sample size	149
Title	Intervention of a Physical Movement Program “Body Management in Safe Ranges” Enhances Self-Management in Aging
Aim of the study	The objective of the presented study was to examine the effect of the Body Management in Safe Ranges (BMSR) method on a self-management program in an aging population. It examines the extent to which the BMSR intervention program improves self-efficacy, ability to self-manage and functioning of elderly people in two different social networks: subjects living in the community versus those living in a retirement residence framework.
Outcome variables	Changes in body management in safe ranges, changes occurring in old people’s self-management ability, and their perception of self-efficacy.
Data Analysis	<ul style="list-style-type: none"> • Questionnaires analysed using SPSS. The first hypothesis was examined with two ways repeated measures analyses of variance, by time (pre/ post), group (intervention/ control) and social setting (community/ retirement residence) (2x2x2). • Analyses included main effects for time, group, and social setting, all second order interactions and the third order interaction of time by group by social setting.
Findings	<ul style="list-style-type: none"> • The rate of physical activity, as well as satisfaction with the BMSR program increased in both intervention groups compared to the control group. However, there was no difference between elderly living in the community and those living in the retirement residence. • The BMSR program intervention, an improvement in everyday skills was seen in both populations, improvement in general feeling increased in the community with no change observed in the retirement residence and social motivation remained intact in the community while decreasing among the retirement residence population.

Study Recommendations	An intervention based on personalisation and adopting principles for changing behaviour dictates individuals' ability to improve their self-management. The BMSR program is based on the principle of learning one's body status to make progress in physical activity and thereby self-management.
Quality assessment (maximum 5 stars)	 4 stars Quasi-experimental study design; community over-represented in sampling frame; self-reported outcome measures

Author & Year	Chao et al. (2021)
Study Design	Cohort/Longitudinal study
Country	United States
Age, Ethnicity, and Gender	Age: 56-84 Ethnicity: not specified Gender: Female and male
Sample size	12
Title	Preventing Loss of Independence through Exercise (PLIÉ): A Pilot Trial in Older Adults with Subjective Memory Decline and Mild Cognitive Impairment
Aim of the study	The goal of this study was to pilot-test a novel, integrative group exercise program for individuals with mild-to-moderate dementia called Preventing Loss of Independence through Exercise (PLIÉ), which focuses on training procedural memory for basic functional movements (e.g., sit-to-stand) while increasing mindful body awareness and facilitating social connection.
Outcome variables	physical performance, cognitive function, physical function, dementia-related behaviours, quality of life and caregiver burden.
Data Analysis	Descriptive statistics.
Findings	PLIÉ showed promise for improving physical function, cognitive function, quality of life and caregiver burden in individuals with mild-to-moderate dementia. The magnitude of improvement observed with PLIÉ is substantially larger than what has been observed with currently approved dementia medications such as cholinesterase inhibitors and memantine and affects a broader range of outcomes.
Study Recommendations	PLIÉ's novel, integrative exercise program that incorporates elements of conventional and complementary or integrative exercise modalities may improve physical performance, cognitive function, and quality of life. PLIÉ individuals with mild to moderate dementia and may also reduce caregiver burden. Larger clinical trials of the PLIÉ program are warranted.
Quality assessment (maximum 5 stars)	 4 stars No RCT or experimental study design; limited description of measures; no blinding regarding enrolment into conditions.


Author & Year	Chung et al. (2020)
Study Design	Retrospective intervention study
Country	Republic of Korea
Age, Ethnicity, and Gender	Age: 60+ Ethnicity: Korean Gender: Male and Female
Sample size	40
Title	Mobile App Use for Insomnia Self-Management in Urban Community-Dwelling Older Korean Adults: Retrospective Intervention Study
Aim of the study	To explore the relationships between subjective sleep quality and subjective memory complaints and depressive symptoms; to explore the relationship between perceived difficulty in mobile app use and usability of the mobile phone-based self-help CBT-I app, named MIND MORE, in urban community-dwelling Korean older adults; to compare changes in subjective sleep quality from pre-intervention to post-intervention, during which they used the mobile app over a 1-week intervention period; and evaluate adherence to the app.
Outcome variables	<ul style="list-style-type: none"> • Subjective sleep quality and subjective memory. • Complaints and depressive symptoms.
Data Analysis	Pre and post intervention questionnaire measuring subjective evaluation of sleep quality. All statistical analyses were performed using PASW Statistics and were determined through the Spearman rank correlation as a nonparametric statistical test and Pearson correlation as a parametric statistical test. The paired-samples <i>t</i> test, as a parametric method, was used for hypothesis testing.
Findings	<ul style="list-style-type: none"> • First, the newly developed MIND MORE app was usable among community-dwelling older Korean adults. • Second, as hypothesized, subjective sleep quality significantly improved from pre-intervention to post-intervention, particularly by using the mobile phone-based self-help CBT-I app we developed during only a 1-week intervention period. • Third, except for the attendants who did not have their own smartphones (2/40) and withdrew from their MIND MORE membership (3/40), those in the 1-day sleep education program adhered to the MIND MORE app for at least 2 weeks.

Study Recommendations	More diverse research protocols should be designed and administered to examine the treatment effects of the mobile self-help CBT-I intervention as an alternative, first-line treatment for insomnia, thus leading to translation from research into practice.
Quality assessment (maximum 5 stars)	 2.5 stars No RCT or experimental study design; no control group; no randomisation to groups (allocation determined by smart phone ownership); subjective outcome measures; no accounting for confounding factors


Author & Year	Clemson et al. (2012)
Study Design	Randomised Parallel Trial
Country	Australia
Age, Ethnicity, and Gender	Age: Mean age 83.4 Ethnicity: Not provided Gender: LiFE: Female 55.1% Structure exercise: Female 54.3% Control: 55.2%
Sample size	317
Title	Integration of balance and strength training into daily life activity to reduce rate of falls in older people (the LiFE study): randomised parallel trial
Aim of the study	The study aimed to establish whether the change in one intervention was significantly greater than the control group over the 12-month follow-up, and if retrospective linear contrasts (rather than quadratic contrasts) were significant, which would indicate change over time rather than just a difference at one time point.
Outcome variables	Fall surveillance, balance and strength, and functional outcomes.
Data Analysis	<ul style="list-style-type: none"> • Compared the rates of falls in the LiFE and structured interventions with those from the control intervention (that is, gentle exercise). • For secondary outcomes, the study used the general linear modelling, repeated measures procedure to establish the effects of interventions over time compared with the control group. They conducted a three-way comparison, and when the main time x treatment effect was significant, or if indicated by significant retrospective Scheffe or Tukey tests, they examined pairwise comparisons between the interventions and control. • They used a one-way analysis of variance with retrospective analysis, and subsequent t tests, to determine any differences between the proportion of exercises adhered to during the first full six month. To establish exercise maintenance at 12 months, we examined adherence in the final (12th) month of follow-up.


Findings	<ul style="list-style-type: none"> • After 12 months of follow-up, the study recorded 172 falls in the LiFE group, 193 in the structured exercise group, and 224 falls in the control group. The study did not see a significant reduction in the fall rate for participants in the structured programme compared with the control programme (0.81 (0.56 to 1.17), n=210). • LiFE participants significantly improved compared with controls, with moderate to large effect sizes for the two balance hierarchy scales. The structured programme showed small and significant effects for the five-level scale. • Activities of daily living using the NHANES measure was significantly improved for the LiFE participants compared with controls, with a moderate effect size. The Late Life Function Index showed large and significant effects for LiFE and a moderate and significant effect for the structured programme. • Physical activity, measured by the Physical Activity Scale for the Elderly, showed small but significant gains for the LiFE programme.
Study Recommendations	<ul style="list-style-type: none"> • The LiFE programme could improve functional capacity in frail older people. There might be value in testing whether the LiFE programme and philosophy could be introduced at a younger and earlier stage, to mediate functional decline whether or not a person has experienced a fall. • The Lifestyle integrated Functional Exercise (LiFE) programme provides an alternative to traditional exercise for older people to reduce falls, to improve function in doing activities and to enhance participation in daily life • The LiFE programme demonstrates that having an environment that offers some stressors and complexity is beneficial
Quality assessment (maximum 5 stars)	<p>★★★★☆ 4.5 stars</p> <p>Randomised study design (double RCT design); external (non-researcher) randomisation; three-armed intervention; detailed description of measures; some subjective outcome measures</p>

Author & Year	Gao et al. (2016)
Study Design	Randomised controlled trial
Country	United States
Age, Ethnicity, and Gender	Age: Intervention: 63.7 Control: 62.6 Ethnicity: Intervention: Non-Hispanic 96% ; White 74% Control: Non-Hispanic 97% ; White 87% Gender: Male 83% of sample
Sample size	208 (6 months) 203 (12 months)
Title	Physical activity counselling in overweight and obese primary care patients: Outcomes of the VA-STRIDE randomized controlled trial
Aim of the study	The study evaluated the effectiveness of the Project STRIDE print intervention among Veterans recruited from a primary care setting. The primary hypothesis of VA-STRIDE is that participants randomized to the print intervention arm would be more likely than attention control arm participants to meet the U.S. recommended physical activity target of at least 150 min per week of moderate-intensity physical activity.
Outcome variables	Physical activity (self-report of minutes of at least moderate-intensity and minutes of moderate-equivalent physical activity measured by accelerometer).
Data Analysis	<ul style="list-style-type: none"> • Baseline characteristics were compared between the two study arms using Pearson chi-squared, Fisher's exact, or Student's t tests, as appropriate. • Profile plots were used to summarise the proportions of Veterans engaged in the recommended ≥ 150 min of at least moderate-intensity aerobic physical activity per week for the modified CHAMPS and ≥ 150 min of moderate-equivalent aerobic physical activity per week for the accelerometer data at baseline, 6 months, and 12 months. • Conditional logistic regression was used to model within-person change in the probability of meeting the recommended ≥ 150 min/week of aerobic physical activity over time, based on separate models for the modified CHAMPS and accelerometer data. • The statistical significance of main effects of time and the treatment by time interactions was assessed using Wald statistics, with p-values 0.05 considered to be statistically significant.


Findings	<ul style="list-style-type: none"> • Participants in the intervention arm had significantly higher odds of meeting the U.S. recommended ≥ 150 min/week of at least moderate-intensity aerobic physical activity at 12 months for the modified CHAMPS but not at 6 months. • For the accelerometer, compared to the attention controls, intervention participants had significantly higher odds of ≥ 150 min/week of moderate-equivalent aerobic physical activity at 6 months, and borderline significantly increased odds at 12 months. However, the CIs are quite wide. The time trends in the attention control arm were not statistically significant for either the CHAMPS or the accelerometer data, although the decline at 12 months relative to baseline is of borderline statistical significance for the accelerometer data. • One might have more confidence concluding that the VA-STRIDE intervention prevented physical activity decline than increased it, despite the moderate amount of missing accelerometer data.
Study Recommendations	Expert based physical activity counselling interventions can increase the odds of meeting recommended levels of aerobic physical activity. This might also mean that this type of intervention, while it does not increase physical activity, it can prevent the decline in physical activity among older people.
Quality assessment (maximum 5 stars)	 4.5 stars Randomised control trial design; people delivering outcome not blinded to the groups; some errors (noted in paper) in measuring one outcome.

Author & Year	Joung and Lee (2019)
Study Design	Randomised Control Trial
Country	Republic of Korea
Age, Ethnicity, and Gender	Age: Dance group: 70.5 Stretching group: 71.77 Ethnicity: Korean Gender: No information on gender
Sample size	82 (dance program=41, control=41)
Title	Effect of Creative Dance on Fitness, Functional Balance, and Mobility Control in the Elderly
Aim of the study	The purpose of the study was to evaluate the effect of a CD program on elderly adults' fitness, functional balance, and mobility, as compared to stretching.
Outcome variables	<ul style="list-style-type: none"> • Cognitive impairment. • Fitness. • Functional balance. • Mobility.
Data Analysis	<ul style="list-style-type: none"> • Descriptive statistics. • Two-way repeated measures analyses of variance (ANOVAs) were used to assess differences in all outcomes by group (CD group versus ST group) and time (pre- and post-test). • Paired t tests were used to evaluate significant differences within each group between the pre- and post-test measurements, while independent t tests were used to determine significant differences between groups at post-test. • ANOVA tests were used to analyse the data primarily because this was an initial foray into the assessment of CD, and because there were no missing data and participants were randomly assigned to groups of equal size.
Findings	<ul style="list-style-type: none"> • There were no significant differences in baseline scores between the groups for any of the Senior Functional Fitness measures. However, there was a significant group versus time interaction for the 30-s chair stand and the 30-s arm curl. In the post hoc paired t tests, the CD group showed significant changes in the 30-s chair stand, 30-s arm curl, back scratch, and chair sit and reach test, while the 30-s arm curl and chair sit and reach test showed differences in the ST group.


	<ul style="list-style-type: none"> There were no significant differences in the baseline scores between the groups for the overall outcomes of balance and mobility. However, there was a significant group vversus time interaction for the balance and mobility measures. The post hoc paired t tests revealed that the CD group showed significant changes in balance, functional mobility, gait, and gait speed, while the ST group showed a significant increase in functional mobility.
Study Recommendations	They recommend the CD program as a means of promoting strength, flexibility, functional balance, and mobility in the elderly.
Quality assessment (maximum 5 stars)	 4.5 stars Randomised control trial design; no control group; limited description of sample

Author & Year	Kahwati et al. (2011)
Study Design	Program evaluation
Country	United States
Age, Ethnicity, and Gender	Age: 57.6 mean Ethnicity: not specified Gender: men and women
Sample size	140 Veterans Health Administration Medical Centres - 31,854 participants
Title	RE-AIM evaluation of the Veterans Health Administration's MOVE! Weight Management Program
Aim of the study	To evaluate the effectiveness of the MOVE! weight management program
Outcome variables	Weight loss of obese veterans.
Data Analysis	Descriptive statistics (frequencies, percentages, means, and medians) were employed to calculate measures for data collected at the level of the facility (e.g., measures within the adoption, implementation, and maintenance, effectiveness).
Findings	<ul style="list-style-type: none"> • Despite high levels of screening, only 10 to 12% of patients engage in at least one treatment visit, and even fewer engage at a level recommended for behavioural weight management treatment. • Staff are targeting the intervention towards those most likely to benefit (e.g., patients with diabetes, hypertension, and/or hypercholesterolemia). • Within the past 5 years, the MOVE! Weight Management Program has been implemented throughout the VHA system, reaching a small proportion of VHA beneficiaries with modest yet beneficial short-term effects on weight loss. • It is unknown how participants fared in the long term (12 months or more after).
Study Recommendations	Increasing reach, improving effectiveness of care, and keeping patients engaged in treatment through new modalities of care and better linkage with primary care teams are areas for future policy, practice, and research.
Quality assessment (maximum 5 stars)	 3 stars Limited information on intervention process and outcomes and their measurement; program overview


Author & Year	Luci et al. (2020)
Study Design	Observational qualitative pilot research
Country	United States
Age, Ethnicity, and Gender	Age: M=70.1 Ethnicity: Non-Hispanic White (68.2%) or African-American (31.8%). Gender: male
Sample size	99
Title	SAVE-CLC: An Intervention to Reduce Suicide Risk in Older Veterans following Discharge from VA Nursing Facilities
Aim of the study	Evaluating the development and implementation of a telephonic intervention (SAVE-CLC) piloted at three VA sites for Veterans returning to the community from VA nursing facilities (Community Living Centers or "CLCs"), providing a process for addressing suicide risk among older Veterans following discharge from CLCs.
Outcome variables	Suicide risk and acceptability and feasibility of the intervention.
Data Analysis	Inferential grounded theory analysis. Interviews recorded and transcribed, before the data was aggregated into themes.
Findings	<ul style="list-style-type: none"> • SAVE-CLC providers successfully contacted a large portion of patients, the majority of whom were screened for depression. Satisfaction with the calls was nearly universal, and the intervention appears to have had the desired impact of communicating concern and connecting Veterans with services to meet their needs post-discharge. • While the VA recently standardised minimum suicide risk screening requirements within 24 hours prior to discharge to home, SAVE-CLC ensures that Veterans continue to feel supported throughout this transition and period of increased risk.
Study Recommendations	<ul style="list-style-type: none"> • SAVE-CLC requires broader implementation with larger samples across various types of geographic regions to examine its effectiveness among patient subgroups (e.g., race, gender, age, rural location, and clinical characteristics).

	<ul style="list-style-type: none"> • Comparisons to Veterans in “usual care” are also necessary to determine the value and clinical impact of SAVE-CLC. Despite limitations, SAVE-CLC has numerous strengths and represents a timely first step toward identifying a solution for VA facilities attempting to address suicide risk in these first few weeks following discharge from a CLC.
Quality assessment (maximum 5 stars)	 3 stars Unclear group selection process; some objective outcomes; confounding variables not well accounted for

Author & Year	Morey et al. (2018)
Study Design	Mixed methods
Country	United States
Age, Ethnicity, and Gender	Age: 65+ Ethnicity: white and other Gender: Male and Female
Sample size	691
Title	Should Structured Exercise Be Promoted as a Model of Care? Dissemination of the Department of Veterans Affairs Gerofit Program
Aim of the study	To assess if an exercise program customised to his or her functional deficits that is aimed at improving function and making progress toward meeting national recommended guidelines.
Outcome variables	Physical functioning
Data Analysis	<ul style="list-style-type: none"> • Descriptive statistics of baseline characteristics at each site include means and standard deviations for continuous variables and percentages for categorical variables. • Changes in physical function between 3 testing time points (3, 6, 12 months) and baseline were examined using the 5 new sites. • A t-test was used to determine whether the mean of 3-, 6-, and 12-month changes in physical function in Durham differed significantly from the mean changes in new sites. The t-test was also applied to compare the means of 3-, 6-, and 12-month changes in physical function between rural and urban sites. • The study also examined the linear trend of overall patterns of change in physical function over time, in which time from baseline was treated as a continuous independent variable.
Findings	<ul style="list-style-type: none"> • Implementation was considered highly successful, with all but one site meeting or exceeding initial enrolment targets and reporting high levels of participant and provider satisfaction. • Change scores from baseline through 1-year follow-up indicated a significant improvement over time for each functional task for participants in the newly implemented sites. • Facility-based implementation in medical centre's in counties considered largely rural (Salem, VA; Canandaigua, NY) was equally successful, with programs able to reach or exceed enrolment targets.

Study Recommendations	Implementing Gerofit-like programs improves access and provides the necessary support for older adults to begin or re-engage in customised, monitored physical activity that can result in life-altering benefits for individuals and population health improvement that health systems today are aiming for. Older adults are the fastest-growing segment of the population and account for a high percentage of healthcare costs; the benefits of physical activity in this population outweigh barriers to investment in widespread implementation of health promotion.
Quality assessment (maximum 5 stars)	 3.5 stars No Randomised Control Trial or experimental design; no control group; limited description of the study sample; no discussion of exclusions

Author & Year	O'Connor et al. (2018)
Study Design	Randomised controlled trial
Country	United States
Age, Ethnicity, and Gender	Age: 62-87 Ethnicity: Mostly white (98%) Gender: Male
Sample size	49 (n25 assigned to AgeWISE program and n24 no treatment control)
Title	The Aging Well through Interaction and Scientific Education (AgeWISE) Program.
Aim of the study	<p>To test the AgeWISE: Aging Well through Interaction and Scientific Education program. AgeWISE is a multi-component intervention that provides comprehensive education and broad cognitive skills training. The AgeWISE program was created with three goals in mind:</p> <ul style="list-style-type: none"> • to provide older adults with education about normal aging and diseases of aging; • to present scientific literature on lifestyle factors that are related to successful brain aging; and • to teach older adults techniques and skills that can help them to manage some of the normal age-related changes in memory and thinking in day-to-day life.
Outcome variables	Cognitive ageing
Data Analysis	The characteristics of the intervention and control groups were compared to determine whether randomization was successful. Independent samples t-tests were conducted to determine whether there were any significant demographic variables between the intervention and control groups following randomization.
Findings	<ul style="list-style-type: none"> • Participants in the AgeWISE program reported greater contentment with their memory following participation in the class. • AgeWISE participants also reported using more memory strategies and having more positive beliefs in their memory ability after completing the group, although similar increases were also observed in the no-treatment control group.

	<ul style="list-style-type: none"> • Participants also provided very high overall satisfaction ratings of the group and were likely to recommend it to a friend. • Surprisingly, there were no statistically significant increases in AgeWISE participants' knowledge of memory aging. • The current findings, demonstrating an improvement in memory contentment post-intervention, may reflect how the modified appraisals of cognitive aging may reduce fears of developing dementia. That is, participants may reappraise the subjective changes in memory and thinking that they are experiencing as reflecting normal aging and not incipient dementia, thereby improving memory contentment. • Participants' self-appraisals about their use of strategies in day-to-day life and memory abilities increased following participation in the group, as expected. However, a surprising finding was that similar increases were also observed in the control group, and consequently, the desired group by time interaction effects were not statistically significant. • Improving perceptions about memory controllability may increase the likelihood of engagement in health behaviours that contribute to longevity and successful brain aging.
Study Recommendations	<ul style="list-style-type: none"> • Older adults want more information about brain aging, lifestyle factors that can contribute to successful brain aging, and skills to help manage common age-related memory problems. • Interventions like AgeWISE may help to improve older adults' level of contentment with their memory and their sense of control over memory in advancing age.
Quality assessment (maximum 5 stars)	 3.5 stars Pilot study; very small sample; process was adapted over time (not consistent methods); participants not blinded to interventions

Descriptive/contextual studies

Author & Year	Barnett et al. (2021)
Study Design	Exploratory qualitative research
Country	Australia
Age, Ethnicity, and Gender	Age: Mean age=37years, range=25-57years Ethnicity: Not specified Gender: 85% male
Sample size	40
Title	Transitioning to civilian life: The importance of social group engagement and identity among Australian Defence Force veterans
Aim of the study	Explore how Australian Defence Force veterans' social group engagement and identity has influenced their adjustment to civilian life and well-being.
Outcome variables	The role of social group engagement and identity in transition to civilian life
Data Analysis	<ul style="list-style-type: none"> • Social network map and life course map as visual components to the interview. • Interviews analysed with thematic analysis
Findings	<ul style="list-style-type: none"> • The transition experiences of participants regarding engagements with social groups and formation of social identities are varied and context specific. • For those with strong military identity and reduced interaction with civilian groups after service, there was no need to form a new civilian identity to function. These were older and often did not need to work or study after the military. • For others, efforts to integrate with civilian groups was challenging and so was to form a new civilian identity and to function accordingly. • For those able to combine a military and civilian/family social identity, transition was stable and conducive to a sense of belonging. • Ethic of service, altruism & 'giving back to community' were core military values of respondents that can inform reintegration into civilian life.

Study Recommendations	<ul style="list-style-type: none">• As veterans, social group memberships can be both positive or negative for health and well-being, it's important to consider how to develop/sustain military identities while also maintaining/forming civilian ones and corresponding social ties.• Successful reintegration might be enhanced by matching veterans with groups, opportunities (e.g., jobs, volunteering), and programs (peer-support) that allow them to rely on their values.
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Author & Year	Black and Dobbs (2014)
Study Design	Mixed methods
Country	United States
Age, Ethnicity, and Gender	Age: 65+, FG mean: 79.4; Survey mean: 75.9 Ethnicity: 89% White, 8% African American, 3% Hispanic Gender: FG: 80% women, Survey: 70% women
Sample size	7 focus groups (N =51) and e-survey (N =216)
Title	Community-dwelling older adults' perceptions of dignity: core meanings, challenges, supports and opportunities
Aim of the study	To explore older adults' perceptions regarding the meanings, supports and challenges associated with dignity.
Outcome variables	Perceptions of dignity.
Data Analysis	This study used multiple methods of qualitative inquiry, including focus groups and open-ended surveys, to explore older adults' perceptions of dignity within the context of community-based daily living. Open coding and axial coding were used. The open coding strategy was used for a line-by-line content analysis of the responses to the questions asked in the focus group and survey data.
Findings	<ul style="list-style-type: none"> • Dignity was mostly seen as related to autonomy (self-choice and self-sufficiency), associated with one's social relationships and interactions (relational), and linked to self-identity (self-acceptance and appreciation). • The challenges to dignity in later life were health issues, ageism, life-course circumstances (widowhood, caregiving, economic insecurity), and family contexts (from dependency on adult children to lack of support). • Supports to dignity included supportive networks (family, friends, formal providers), positive attitudes about ageing, and active ageing behaviours (staying active, have meanings, contribute to society).
Study Recommendations	<ul style="list-style-type: none"> • Informal and formal interactions to facilitate autonomy, promote positive relations and support self-identity. • Understanding key life course events in later life can support focus on dignity. • Focus on dignity in the course of advancing illness or disease. • Enhance 'supports to dignity' outlined above.

Author & Year	Brewster et al. (2021)
Study Design	Qualitative grounded theory research
Country	United Kingdom
Age, Ethnicity, and Gender	Age: 68-99 Ethnicity: Not specified Gender: Twenty-seven interview participants were male and three were female Workshop participants not specified
Sample size	30 interviewees + 11 participants in two workshops (n=41)
Title	A point of connection? Wellbeing, the veteran identity and older adults
Aim of the study	To explore experiences of well-being and military identity among older veterans
Outcome variables	Wellbeing, health, cognitive and physical functionality
Data Analysis	Interviews were analysed with "data-driven constant comparison approach". Using a qualitative approach, data was drawn from 30 individual interviews, discussing veteran engagement with workshops. Workshops not specified
Findings	<ul style="list-style-type: none"> • Loneliness and social isolation were identified as main issues, although this was not directly reported by interviewees • Fictive kinship: strong identification with military peers • Importance of military visual culture for support and sense of belonging (e.g., Veterans badge) • Positive influence of talking about military experience with others with military experience on well-being • Veteran identity could also be othering, separating them from civilian life
Study Recommendations	<ul style="list-style-type: none"> • Importance of narratives/stories of military experience to connect to others (storytelling, etc) • Co-design

Author & Year	Bundy et al. (2018)
Study Design	Qualitative grounded theory research
Country	United States
Age, Ethnicity, and Gender	Age: 62-83 Ethnicity: Caucasian Gender: Male
Sample size	12
Title	Perceptions of Cognitive Aging Among Older Veterans
Aim of the study	To understand the perceptions, knowledge, and understanding of memory, cognition, and aging among older veterans.
Outcome variables	Perceptions of memory, cognition, and aging
Data Analysis	Interviews analysed with grounded theory and thematic analysis
Findings	<ul style="list-style-type: none"> • Participants saw successful aging as a combination of cognitive and physical characteristics (mobility, functional independence, memory, cognition) • But some gave more importance to successful cognitive aging over physical aging • Had concerns about memory and cognition as they age • Nutrition, exercise, and social interaction were the most reported elements to keep a healthy brain • Mentioned the importance of VA digital communication and veteran's groups to disseminate info about healthy aging • Perceptions of impact of military service on memory and cognition were divided: some saw positive impact (e.g., discipline, social group), others negative (e.g., PTSD)
Study Recommendations	<ul style="list-style-type: none"> • Participants knew diet, exercise (physical and cognitive), and social engagement was important for healthy aging but did not know specifics or adopt those strategies for their own health aging • Focus on how to improve adoption of these lifestyle factors

Author & Year	Cernin et al. (2011)
Study Design	Cross-section study
Country	United States
Age, Ethnicity, and Gender	Age: average 73 Ethnicity: African American Gender: Women (82.1%)
Sample size	67
Title	A comparison of self-rated and objectively measured successful aging constructs in an urban sample of African American older adults.
Aim of the study	The present study seeks to explore and compare self-rated and objectively measured successful aging in an urban sample of African Americans. It is hypothesized that: (1) a greater percentage of this sample will rate themselves as successfully aging as compared to those who meet objective criteria, consistent with previous findings from the literature; (2) self-rated successful aging will be related to modifiable health behaviours, whereas objective success will not; and (3) the relationship between objective successful aging and cognition will be mediated by quality of education.
Outcome variables	Self-rated successful aging & objectively measured successful aging.
Data Analysis	<ul style="list-style-type: none"> • Cross tabulations of participants who met criteria for self-rated and objectively defined successful aging were compiled, as well as concordance between these two constructs. • Chi-square analyses tested for between-group differences. • Bivariate correlations between self-rated and objectively defined successful aging and predictor variables were calculated. • Logistic regression examined the prediction of self-rated and objectively defined successful aging from Rowe and Kahn variables: high physical (i.e., regular exercise) and cognitive functioning (i.e., TMT-B score), active engagement with life (i.e., MSPSS), and absence of disease and disability (i.e., CCI).
Findings	<ul style="list-style-type: none"> • Nearly two-thirds (62.7%) of this sample of older urban African Americans rated themselves as aging successfully, whereas only 29.9% of the sample met objective successful aging criteria. Importantly, over seventy percent of this sample did not meet the requisite physical and cognitive cut-off criteria for objectively measured success, and thus were classified as non-successful.

	<ul style="list-style-type: none"> • This study provides evidence that self-rated successful aging, not objective successful aging, was related to engagement in health promoting behaviours. Specifically, self-rated successful individuals reported significantly better sleep quality, increased physical exercise, less depressive affective functioning, and better nutrition than self-reported unsuccessful individuals, suggesting that both mental and physical health and wellness should continue to be a central concern of any initiative aimed at promoting successful aging. In contrast, objective successful aging was unrelated to these health behaviours. • In general, self-rated health was related to a variety of variables, whereas objectively defined success was related to more static features. • The Rowe and Kahn variables provided significant additional predictive power to the logistic regression models, confirming earlier analyses. Cognition was a significant predictor for objectively defined success, whereas exercise was the best predictor for self-rated successful aging. Level and severity of illness comorbidity was significantly associated in both self-rated and objectively rated groups, suggesting that some component of health status may be captured by both paradigms.
Study Recommendations	<ul style="list-style-type: none"> • Findings from this study provide supportive evidence for the discrepancy between self-rated and objectively defined success. However, more studies examining successful aging in African American Older adult samples, as well as other racially and ethnically diverse samples, are needed, particularly studies with much larger samples, which would permit more complex analyses of the variety of factors that impact objective and self-evaluation of successful aging. • Self-rated successful aging was related to engagement in health promoting behaviours, whereas objectively defined success was related to more static variables. an important finding was that objectively defined successful aging appeared more related to early educational attainment, rather than maintenance of cognition. Defining successful aging on objective factors alone may limit our understanding of successful aging in urban African American Older adults.

Author & Year	Du et al. (2015)
Study Design	Cross-sectional study
Country	China
Age, Ethnicity, and Gender	Age: 82.29 Ethnicity: Chinese Gender: Female and male
Sample size	9676
Title	Physical activity as a protective factor against depressive symptoms in older Chinese veterans in the community: Result from a national cross-sectional study.
Aim of the study	Determine the relationship between physical activity and depressive symptoms in older Chinese veterans in the community, with adjustment for potential confounders.
Outcome variables	Physical exercise & depression.
Data Analysis	Univariate analysis used to calculate the associations for categorical variables, including the association between physical activity and depressive symptoms to identify underlying correlates.
Findings	This study found an inverse relationship between physical activity and symptoms of depression in older Chinese veterans in the community. It was also indicated that the antidepressant effect of physical activity probably extended to the oldest-old, and the light-intensity physical activity was probably available for the same protective effect.
Study Recommendations	This information could be used to devise further interventions to prevent or ameliorate symptoms of depression.

Author & Year	Dwyer & Hardill (2011)
Study Design	Participatory qualitative evaluation
Country	United Kingdom
Age, Ethnicity, and Gender	Age: 70+ Ethnicity: white Gender: female and male
Sample size	69
Title	Promoting social inclusion? The impact of village services on the lives of older people living in rural England
Aim of the study	This paper explores the impact of 'village services' on the lives of people aged 70 or more years living in rural England. Throughout the paper, the phrase 'village services' refers to six community-based services and activities provided to help meet the needs of older rural residents, namely lunch clubs, welfare rights information and advice services, befriending schemes and community warden support, in rural areas in three regions of England.
Outcome variables	Quality of life and social inclusion.
Data Analysis	User-participatory approach and abductive research strategy.
Findings	<ul style="list-style-type: none"> Physical isolation, the lack of public transport, an inability to afford or drive a car in old age, and a lack of specialised local services, can combine to the detriment of older people in remote rural settings. Village setting may have a positive impact on older people lives, in part, because of the often-high levels of informal support [that] exist despite apparent service fractures. Rural befriending schemes, lunch clubs and warden services all promote social inclusion in old age by helping combat loneliness and social isolation.
Study Recommendations	The presented evidence has provided new insights into the gendered character of many existing village services and how this unintentionally promotes the exclusion of older rural men. Many of those involved in providing such services recognise the need to reach out to new client groups – including older men.

Author & Year	Gordon et al. (2020)
Study Design	Narrative (qualitative) research
Country	United Kingdom
Age, Ethnicity, and Gender	Age: M=53.33 R=26-92 Ethnicity: not mentioned Gender: male and female
Sample size	30
Title	Outside the Military "Bubble": Life After Service for UK Ex-armed Forces Personnel
Aim of the study	This study explored how ex-service personnel perceived their experiences in military and civilian worlds, ways in which those worlds may be distinct, and their roles within a broader social culture outside of the military. The individual's biographical accounts of military experience is as important as making sense of what lived experiences represent to the individual.
Outcome variables	First-hand experiences related to military service, access to and use of mental healthcare and interventions, and the impact of transition on the military family.
Data Analysis	Thematic and narrative analysis to account for the complex human accounts of experience to develop themes from pre, post, and during armed forces service.
Findings	<ul style="list-style-type: none"> Findings show meaning-making from experiences of transition across veteran cohorts. Main themes were reasons for leaving Armed Forces, life outside the military, and mental health concerns after service. Subordinate themes additionally focused on evaluation of identity and mental health service provision.
Study Recommendations	Future clinical research should include the experiences of UK serving personnel and the effects of pre-and post-military adversity, alongside the impact of deployment experiences. Interventions designed to address transition into life after service is discussed.

Author & Year	LaCroix et al. (2016)
Study Design	Cohort/Longitudinal study
Country	United States
Age, Ethnicity, and Gender	Age: 80 years and older & and under 80 (postmenopausal) (mean age 71.5 for veterans, mean age 68.8 non veteran) Ethnicity: Twelve percent of surviving and currently enrolled women are minorities, including American Indians, Asian and Pacific Islanders, African Americans, and Hispanics Gender: women
Sample size	Women were recruited from 40 clinical centres throughout the United States. From 1993 to 1998, 161,808 postmenopausal women between 50 and 79 years of age were enrolled. A second study extension began in 2010 and continues through 2015 and comprises 93,462 women, 53% of whom are younger than 80 years and 47% of whom are aged 80 and older
Title	Aging Well Among Women Veterans Compared with Non-Veterans in the Women's Health Initiative.
Aim of the study	The study objectives were to (a) compare measures of successful, effective, and optimal aging among women Veterans and non-Veterans at least 80 years of age in the WHI cohort and (b) determine whether the probability and determinants of living to age 80 years without disease and disability differs for Veteran women compared with non-Veteran women.
Outcome variables	Successful ageing
Data Analysis	This analysis is based on an adaptation of the Biopsychosocial Model of Health and Aging that incorporates the allostatic load concept influencing resilience in aging.
Findings	<ul style="list-style-type: none"> • Women Veterans were significantly more likely to be current or past smokers, to consume alcohol, and reported higher mean physical activity levels. Although mean BMI was similar by Veteran status, women veterans were less likely to be overweight or obese compared with non-Veteran women. They were also slightly less likely to be classified as depressed compared with their non-Veteran peers. • Metrics of aging well related to successful, effective, and optimal aging were all significantly different among the women at least age 80 years compared with the women younger than age 80 years.

- Although scores were lower than those among the younger women, the majority of older women continued to report being happy and enjoying life most of the time, as well as having a high quality of life
- Women Veterans compared to non-veterans had significantly lower scores on the satisfaction with life, social support, quality of life, and purpose in life scales.
- The probability of death prior to age 80 years was significantly higher among Veteran women compared with non-Veterans after adjustment for age alone.
- Baseline predictors of survival to age 80 years without disease and mobility disability were very similar in women Veterans and non-Veterans. Both groups of women were more likely to reach this milestone if they were older at baseline, married, or using HT and less likely to achieve this milestone if they were non-drinkers, were smokers, had lower physical activity levels, had higher levels of depressive symptoms, or were underweight or obese.
- This study highlights many similarities and several important differences between older Veteran and non-Veteran women that relate to aging well. At baseline, among WHI participants who could have reached their 80th birthday by December 2013, prior military service was associated with older age, higher education, higher levels of physical activity, and alcohol consumption but lower likelihood of ever marrying and currently living with a spouse or partner. After adjustment for age alone and for all of these variables, women Veterans were significantly more likely to die before reaching age 80 years compared with non-Veteran WHI participants, but they were no more likely to develop nonfatal incident diseases or mobility disability. Among WHI participants who were aged 80 and older, women with prior military service had lower physical function scores and were more likely to reside in a place with special services for older people. Women Veterans had significantly but modestly lower satisfaction with life and purpose in life scores. They also had significantly lower quality of life ratings and lower social support scores. These findings suggest that prior military service identifies a subgroup of older women with some special risks that need to be better understood
- Women Veterans in WHI were apparently not protected by having college degrees as there was no association between educational attainment and healthy survival for them, in contrast to better odds of healthy survival among more highly educated non-Veteran women (the lack of social support and greater disability of Veteran women may have negated any salutary effect of higher education on healthy survival).

	<ul style="list-style-type: none"> • The same modifiable risk factors predicted healthy survival in women Veterans and non-Veterans. Specifically, women were less likely to survive to age 80 years without disease and disability if they were current smokers, less physically active, obese, or suffering from depressive symptoms. • These findings support that goal by showing that women Veterans differ from non-Veterans on several dimensions of aging well, including survival to age 80 years, maintaining physical function, and perceived health and quality of life. Importantly, modifiable risk factors predicting healthy survival were similar regardless of prior military service.
Study Recommendations	<ul style="list-style-type: none"> • This underscores the importance of providing effective behaviour change programs targeting smoking cessation and physical activity and establishing healthy body weights to Veteran and non-Veteran women alike. • The findings also support evaluation and treatment of depressive symptoms to improve prospects of healthy survival.

Author & Year	Parsons et al. (2014)
Study Design	Comparative qualitative research
Country	United Kingdom
Age, Ethnicity, and Gender	Age: 60-64 Ethnicity: Not specified Gender: Female and male
Sample size	60
Title	Physical capability and the advantages and disadvantages of ageing: perceptions of older age by men and women in two British cohorts
Aim of the study	This paper discusses perceptions of age, focusing particularly on how perceived advantages and disadvantages differ by respondents' self-reported physical capability. To understand more about capability, wellbeing and ageing from an individual or lay perspective.
Outcome variables	Physical capability
Data Analysis	Thematic analysis
Findings	<ul style="list-style-type: none"> • Financial security, being comfortable or free from money worries was the single most cited advantage, mentioned equally by respondents irrespective of physical capability, age or gender. • Having more leisure time and an appreciation of the 'now' was also valued by a number of respondents (five men and four women), but more by those with better capability. • More women than men, particularly those in their sixties, mentioned the enjoyment of grandchildren and family. • The overwhelming disadvantage that people perceived, mentioned in the interviews, was general physical decline, slowing up and being less able to do things than previously. Arguably, when faced with a real health concern or challenge, the future is not a major focus. When an individual is battling cancer or negotiating the health care needs of a partner with dementia, worries centre on getting through the next stage of treatment or the next week.
Study Recommendations	<ul style="list-style-type: none"> • For the positive messages attached to 'successful ageing' or life in the third age to take hold in the perceptions of both older and younger members of society, the narrow concept of successful ageing needs to be challenged. Positive ageing is about far more than not looking your age and not succumbing to illness.

Author & Year	Romo et al. (2013)
Study Design	Qualitative grounded theory research
Country	United States
Age, Ethnicity, and Gender	Age: 59-97 (Mean: 78) Ethnicity: African American, White, Cantonese-speaking Chinese, and Spanish-speaking Latino Gender: Men: 20 Women: 36
Sample size	56
Title	Perceptions of Successful Aging Among Diverse Elders with Late-Life Disability.
Aim of the study	The purpose of this study was to explore the meaning of successful aging among a diverse sample of community-dwelling elders with late-life disability.
Outcome variables	<ul style="list-style-type: none"> • Self-perceptions of successful ageing. • Conceptualisations of healthy ageing.
Data Analysis	Fifty-six interviews were included in this analysis. Grounded theory methodology was used to analyse the data through constant comparative analysis, in which data were reviewed iteratively to identify new and emerging themes
Findings	<ul style="list-style-type: none"> • Overall, most participants stated they were ageing successfully, and an equal number of participants felt old versus not old. • This study examined the experience of successful ageing from the perspective of diverse community-based elders with late-life disability and found that physical functioning did not define successful aging. • A majority still felt they had aged successfully. To do so, they reframed their personal situation. Some accepted age-related disability as natural, adapting to their circumstances. • The importance of the On Lok program is apparent—the services it provides are a significant part of successful ageing for many participants. Depending on the organization was seen as reasonable and appropriate, did not make one a burden on family, and did not appear to threaten one's sense of independence. • Successful ageing involves a subjective component that is not measured by objective criteria and needs to be better understood.

	<ul style="list-style-type: none"> Elders with late-life disability can and often do enjoy a sense of well-being and feel that they have aged successfully. Efforts to minimise disease and disability in late life are important and cannot be dismissed; however, it is inevitable that everyone will age, and for most, a period of deterioration will precede death.
Study Recommendations	<ul style="list-style-type: none"> Expanding programs like On Lok could have a great effect on improving elders' sense of well-being and perception of successful ageing. From a policy perspective, the major implication is that more funding should be directed toward understanding and supporting those who live with late-life disability, as opposed to the current emphasis on prevention. Successful ageing is a subjective concept that must be considered and contrasted with the more "objective" criteria often imposed by researchers. This is not to say that the use of the term from an objective perspective is not helpful in predictive models. However, perceived successful aging focuses on the values individuals have about function and capacity, and if these individual views are not considered, there will be no common ground from which to communicate.

Author & Year	Rozanova et al. (2015)
Study Design	Cross-sectional mixed methods study; analysis of qualitative research items
Country	United States
Age, Ethnicity, and Gender	Age: 60-96 Ethnicity: not indicated (nationally representative sample) Gender: male (96.9%)
Sample size	2025
Title	Perceptions of Determinants of Successful Aging Among Older US Veterans: Results from the National Health and Resilience in Veterans Study
Aim of the study	To conduct a qualitative study of older American veterans' subjective perceptions of factors that contribute to successful physical, emotional, and cognitive aging.
Outcome variables	This study is a pre-intervention. Rather, it identifies the key determinants US veterans perceive to assist with healthy aging process.
Data Analysis	Using qualitative analysis software, the authors coded responses to three open-ended questions, inductively developed categories, aggregated similar categories into factors, and grouped factors into broader themes.
Findings	<ul style="list-style-type: none"> Analyses revealed that older veterans believed successful aging is driven by the many of the same interrelated factors, most notably health behaviours, social engagement, maintenance of good function, personality and explanatory style, moral compass, and emotional disposition. The order of importance of these factors differed slightly across successful aging domains, but overall older veterans emphasized individual responsibility and modifiable health behaviours as key determinants of successful aging, giving a lesser role to external resources such as healthcare. Qualitative findings confirmed that veterans emphasized psychosocial and behavioural factors, such as happiness, adaptation, coping, physical activity, and relationships with family and with society, more so than biomedical factors, such as genetics and good health. Older veterans commonly endorsed potentially modifiable health behaviours and personal characteristics as key contributors to successful aging is encouraging and in line with prior literature. Decreased regard for healthcare as a determinant of successful aging combined with greater emphasis on individual behaviours and self-reliance may present a barrier for service use, because veterans may

	<p>view seeking help as a sign of personal failure despite the onset or progression of physical or mental disabilities.</p> <ul style="list-style-type: none"> • There are three implications for these findings. First, by furthering the detailed knowledge of factors related to physical, emotional, and cognitive areas of successful aging, results of this study can help inform the development of more targeted interventions to promote successful aging. Second, by showing that older individuals perceive successful aging holistically and that key determinants of physical successful aging overlap with those identified for emotional and cognitive successful aging, these results suggest that interventions targeting one specific area, such as physical activity, may also positively impact emotional and cognitive health. Third, by revealing that older American veterans are highly aware of multiple behavioural factors that contribute to successful aging, results of this study suggest that if individuals do not engage in these behaviours, it is unlikely because they lack knowledge regarding the key influence of such factors on successful aging.
Study Recommendations	<ul style="list-style-type: none"> • It will be helpful in future research to assess the role of self-reliance in contributing to successful aging and elucidate through qualitative interviews whether self-reliance is an activity, a manifestation of the self, or both. • Additional research should explicitly evaluate veterans' and civilian older persons' perceptions of how healthcare relates to successful aging and assess the effective-ness of interventions that promote potentially modifiable factors linked to successful aging older veterans have elevated rates of physical, emotional, and cognitive morbidities, which may further influence their perceptions of successful aging. • Further research will be useful in ascertaining how such experiences, as well as how living with possible physical, emotional, and cognitive morbidities, may influence perceptions of key determinants of successful aging in older veterans. • Further research in a variety of populations is needed to examine barriers and facilitators that affect adherence to behaviours that promote successful aging, to evaluate female veterans' views of successful aging, to assess how military training and experience might relate to successful aging, and to examine how distinct subgroups of veterans (e.g., war era, combat veterans, veterans with mental illness) may differ in their subjective perceptions of key determinants of successful aging.

Author & Year	Tohit et al. (2012)
Study Design	Qualitative thematic analysis research
Country	Malaysia
Age, Ethnicity, and Gender	Age: Men: 72.7 Women: 66.6 Ethnicity: Malay Gender: Men: 18 Women: 20
Sample size	38 Recruited from community leaders, snowball sampling, and through the recommendations of the community leader in the mosque towards participants in the community
Title	'We want a peaceful life here and hereafter': healthy ageing perspectives of older Malays in Malaysia
Aim of the study	The aim of this paper is to report on data from a study that sought to explore the concept of healthy ageing in older Malays, and in particular, the role of spirituality which emerged as fundamental.
Outcome variables	Conceptualisations of healthy ageing. Perceived influences on ageing well. Role of spirituality in healthy ageing.
Data Analysis	Thematic analysis through an inductive process which involved coding the entire data set, which were collated to identify themes
Findings	<ul style="list-style-type: none"> • Role of spirituality in healthy ageing: Spirituality was central to the experience of ageing for participants in this study and, in talking about spirituality, it appeared the role and importance of spirituality was linked to other aspects of participants' ageing experience. Specifically, these other aspects include financial security, physical health and function, peace of mind, family, and the living environment. • Spirituality and financial security: Participants indicated that financial security was regarded as important for healthy ageing, and many participants spoke of the hard work they had done in the past, and in some cases still did, just to get by and live comfortably. • Spirituality and physical health and function: participants highlighted the importance of good physical health which allowed them to fulfil their spiritual and religious obligations without hindrance; Being physically independent appeared to be very important for participants, particularly for enabling them to

	<p>carry out their religious activities such as attending religious classes or congregation and going to the mosque.</p> <ul style="list-style-type: none"> • Spirituality and peace of mind: the importance of achieving peace of mind in later life. Many informants believed that to attain this, one needs spiritual guidance • Spirituality and family: Family, particularly family wellbeing, was perceived by participants to be intricately related to their healthy ageing experience. Participants regarded their responsibility towards their children and grandchildren as a lifelong commitment. • Spirituality and the living environment: participants expressing their eagerness to live in an environment which supports their spiritual needs. Being able to safely and easily access the mosque was most important; spiritual needs seemed to affect participants' decisions significantly about where they chose to live. • There were other significant differences in the experience of the role of spirituality for healthy ageing relating to gender, age, income and education. For example, for older participants who may be less mobile and in poorer physical health, spiritual activities may take up more of their time, have more priority in their lives and have more influence over decisions about where they choose to live. • Furthermore, it appears that those participants who enjoyed a better education and were able to get better jobs and gain more financial stability, were those who are now able to dedicate more time to their spiritual endeavours. And for women, access to ongoing learning opportunities and spiritual development appear to be of great importance, while for the men regular attendance at the mosque is a priority.
Study Recommendations	<ul style="list-style-type: none"> • Given the important role of spirituality as a resource for healthy ageing, it may be in policy makers' and practitioners' best interests to be more explicit about its role – by stating that older people, in addition to the other key elements, require opportunities to enhance their spirituality. • There may be a need for more integration and inter-departmental collaboration to ensure a more holistic and comprehensive approach towards older people that incorporates their spiritual needs. • These findings also have implications for policy and practice in other countries, such as Australia, where older Malays have chosen to migrate to and grow old.

Author & Year	Tovel & Carmel (2014)
Study Design	Cohort/Longitudinal study
Country	Israel
Age, Ethnicity, and Gender	Age: average age 80.6 at first survey Ethnicity: not specified Gender: 143 women & 92 men
Sample size	235
Title	Maintaining Successful Aging: The Role of Coping Patterns and Resources
Aim of the study	To examine the contribution of personal coping resources and the use of reactive and proactive coping patterns to successful aging, in terms of subjective well-being
Outcome variables	<ul style="list-style-type: none"> • Successful ageing. • Change in health. Coping resources & coping patterns.
Data Analysis	<ul style="list-style-type: none"> • Univariate analyses (Spearman and Pearson correlation coefficients, and t-tests, according to variable scales) were carried out between successful aging as measured at Time 2, and all of the indices and variables used to assess socio-demographic characteristics, coping patterns and resources as measured at Time 1 and the change in health/function assessed at Time 2. • Two-stage hierarchical regressions (enter method) were used to examine the differential influence of personal resources and coping patterns on successful aging in the presence of change in health/function. In the first model (stage 1), in addition to change in health/function, we included gender, which was found to be the only demographic variable significantly related to successful aging in the univariate analyses. In the second stage, we conducted a separate regression analysis for each of the two groups of variables, coping resources (model 2a) and coping patterns (model 2b), by adding them to the variables included in the first stage (model 1). Regression models for each of the interactions between coping resources/patterns and
Findings	<ul style="list-style-type: none"> • Self-efficacy and social support have a positive effect on successful aging in the presence of a change in health and/or function. People ranking high in self-efficacy are more likely to make use of the appropriate patterns of reactive coping but are less likely to use certain patterns of proactive coping. • Reactive coping has a positive effect on successful aging in the presence of a change in health and/or function. However, this effect diminishes when self-efficacy and social support are added to the

	<p>analysis because of the strong correlations between these coping resources and reactive coping patterns.</p> <p>The effect of two patterns of proactive coping seems to be contradictory: while the effect of deciding on preferences for future care needs is negative, the effect of concrete planning for how to meet such needs is positive.</p>
Study Recommendations	<ul style="list-style-type: none"> • The development of socialization programs for older people to be initiated and implemented by professionals. • Developing and implementing supervised interventions and training programs focused on role transitions and the losses these transitions hold for older adults, as well as on effective coping patterns and strategies for preserving and developing coping resources such as social support and self-efficacy. <p>Society accompanies and supports its members throughout the life span with an emphasis on the early and productive years. Guiding older people through their aging process has the potential to help maintain and improve quality of life during more years of old age, both for personal and familial benefit, as well as for the benefit of society as a whole</p>

Author & Year	Williamson et al. (2019)
Study Design	Exploratory mixed methods research
Country	United States
Age, Ethnicity, and Gender	Age: M= 52.4 Ethnicity: Hispanic/Latinx, Non-Hispanic/Latinx Gender: Female and Male
Sample size	593
Title	An Exploratory Analysis of Self-Reported Protective Factors against Self-Harm in an Enrolled Veteran General Mental Health Population
Aim of the study	The purpose of this study is to characterize self-reported protective factors against suicide or self-harm within free-response comments from a harm-risk screening.
Outcome variables	Self-reported protective practices against self-harm.
Data Analysis	<ul style="list-style-type: none"> • Descriptive analyses of demographic factors (age, gender, race, etc.), clinical factors (mental health inpatient stays, diagnoses obtained from the VA medical records), and quality of life measures across risk groups were used. • Chi-square tests and t-tests were used to conduct bivariate analyses and identified intergroup differences between respondents with no thoughts of self-harm and thoughts of self-harm, as well as between respondents with stated protective factors and no stated protective factors.
Findings	<ul style="list-style-type: none"> • Of 593 Veterans, 57 (10%) screened positive for active thoughts of self-harm or suicide. Those with thoughts of self-harm had lower quality of life scores and higher rates of depression diagnoses. Of those individuals, 41 (72%) reported protective factors including personal resources (17%), community resources or relationships (68%), and other including pets and hobbies (15%). Those with stated protective factors had higher rates of employment and lower rates of PTSD diagnoses. • New protective factors emerged, such as pets and hobbies, while previously reported characteristics, such as religious and spiritual factors, did not. • The study found that there were external resources that kept individuals safe, but there was also a notable group of individuals who use personal resources for strength.

Study Recommendations	Expanding the scope of suicide research to incorporate the strengths and positive aspects of a person's life—from the person's perspective—may increase the understanding of suicidal populations and protect individuals. By asking people what motivates them to stay safe, clinical and community care can work to incorporate those factors into practice.
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Author & Year	Wooldridge et al. (2019)
Study Design	Secondary analysis of data collected through mixed methods research
Country	United States
Age, Ethnicity, and Gender	Age: 18-75 Ethnicity: 68.9% White, 19.7% African American Gender: 18% Female and 82% Male
Sample size	61
Title	Improvement in Six-Minute Walk Test Distance Following Treatment for Behavioral Weight Loss and Disinhibited Eating: An Exploratory Secondary Analysis
Aim of the study	To examine whether a 4-week Acceptance and Commitment Therapy (ACT) intervention for disinhibited eating or a behavioral weight-loss (BWL) intervention improved exercise capacity
Outcome variables	BMI
Data Analysis	<ul style="list-style-type: none"> Demographic variables (age, sex, baseline BMI) were entered on the first step and disinhibited eating predictors were entered on the second step. To examine demographic and disinhibited eating predictors of change in 6MWT, change scores were computed by subtracting 6MWT at 6-months from 6MWT at baseline. Treatment-related changes in disinhibited eating predictors were computed by subtracting post-treatment scores from baseline scores. Hierarchical multiple regression analyses were then used to examine whether demographic variables and changes in BMI and disinhibited eating patterns from baseline to post-treatment predicted improvements in 6MWT from baseline to 6-month follow-up.
Findings	<ul style="list-style-type: none"> Functional exercise capacity improved among participants completing behavioural interventions for weight and disinhibited eating. Improvements in dietary behaviour regulatory skills may have generalized to improved regulation in other behavioural domains associated with exercise capacity. There were significant improvements in 6MWT distance from baseline to 6 months in a sample of veterans who completed short-term behavioural treatment for disinhibited eating and 38% achieved clinically meaningful improvements.

Study Recommendations	<ul style="list-style-type: none"> • Future research could focus on directly examining the “spill-over” hypothesis in a larger sample, using daily physical activity measurement by accelerometer, and ecological momentary assessment for physical activity, eating behaviour and other psychosocial variables. • Future research may develop and test intervention strategies specifically targeting older male veterans with obesity who engage in disinhibited eating behaviour.
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Author & Year	Yeung et al. (2019)
Study Design	Cohort/Longitudinal study
Country	New Zealand
Age, Ethnicity, and Gender	Age: 55-86 Ethnicity: not specified Gender: Male and female
Sample size	1852
Title	Risk and protective factors for wellbeing in older veterans in New Zealand.
Aim of the study	To compare indicators relating to ageing and health among veterans and non-veterans, and identify factors associated with subjective wellbeing (SWB) of older New Zealand veterans.
Outcome variables	Capabilities, purpose in life, activity participation, physical and mental health, housing satisfaction, social provision, depression, loneliness, subjective wellbeing.
Data Analysis	Analyses for this study were conducted in two phases: In phase one, cross tabs with chi-square (χ^2) and independent t-tests were used to compare variables between veterans and non-veterans where appropriate. Phase two was conducted with those from the veteran group only. In this phase, a hierarchical multiple regression was conducted to examine the associations between the multiple domains of independent variables and SWB.
Findings	Results suggest that older veterans do not differ greatly on indices of health and ageing from their non-veteran peers. Results support previous findings that lower mental and physical health is associated with lower subjective wellbeing for veterans. The lack of significant differences between veteran and non-veterans suggests that opportunities and challenges associated with ageing among veterans could be similar to the ageing process of civilian samples. However, attention to the needs of veterans should still remain a priority as other military-related factors (such as service-type, active or reserved; era; cohort membership and historical events) may confound or even accelerate older veterans' aging process.
Study Recommendations	A capability approach to subjective wellbeing in ageing may provide a way to integrate the physical changes, environmental influences, and psychosocial effects of ageing, by focusing on what older people themselves value in regards to healthy ageing. The use of capabilities enables individuals to achieve wellbeing through facilitating practical opportunities.

Review articles

Author & Year	Cook and Simiola (2018)
Study Design	Scoping review
Country	US, Australia, China, Germany, South Africa, among other countries.
Age, Ethnicity, and Gender	Age: 65+ Ethnicity: N/A Gender: Male and Female
Sample size	Not clear how many articles reviewed
Title	Trauma and Aging.
Aim of the study	The aim of this paper is to present a succinct summary of the major scientific findings on trauma, posttraumatic stress disorder (PTSD), and aging over the past few years.
Outcome variables	Trauma, post-traumatic stress disorder
Data Analysis	Review of longitudinal studies
Findings	In summary, trauma in older adults is less well-researched, under-recognised, and under-treated in older as opposed to younger adult populations. Although the majority of older adult trauma survivors do not develop PTSD, a significant minority do. Unless treated, older trauma survivors seem to experience a relatively stable course of PTSD across the lifespan, with some waxing and waning of symptoms. Effective psychotherapy for adults with PTSD exists and need to be applied and further investigated with older individuals.
Study Recommendations	<ul style="list-style-type: none"> • Research on older adult trauma survivors would benefit from inclusion or focus on more diverse samples, including those with a broader range of traumas and varying ethnicities and socioeconomic levels, the oldest old (85+), and those who are cognitively impaired. Prospective, longitudinal research designs would also add a significant contribution to what we know about how aging impacts older survivors. • More fine-grained analyses (even if they are exploratory) on young-old (65–74 years), middle-old (75–84 years), and old-old (85 years and older) are necessary to advance understanding of trauma and

	aging. Lastly, more methodologically rigorous research on mental health treatment for PTSD in older adults is needed, with sufficient numbers of older adults, randomization, and credible comparison conditions.
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Author & Year	Fogle et al. (2020)
Study Design	Narrative/Scoping review
Country	United States
Age, Ethnicity, and Gender	Age: N/A Ethnicity: N/A Gender: N/A
Sample size	82 articles reviewed
Title	The National Health and Resilience in Veterans Study: A Narrative Review and Future Directions
Aim of the study	Inform the design of large-scale outreach initiatives, and to ensure the effectiveness of service care delivery both within and outside of the Veterans Affairs healthcare system.
Outcome variables	<ul style="list-style-type: none"> • Post-traumatic stress disorder • Suicide • Ageing • Resilience • Post-traumatic growth
Data Analysis	Longitudinal narrative review
Findings	Covered six major topic areas, including post-traumatic stress disorder, suicide, ageing, resilience and post-traumatic growth, special topics relevant to veterans, and genetics.
Study Recommendations	To develop and test prevention and intervention strategies that aim to enhance modifiable protective factors in veterans.

Author & Year	Howell and Peterson (2020)
Study Design	Qualitative metasynthesis
Country	Circumpolar North
Age, Ethnicity, and Gender	Age: N/A Ethnicity: N/A Gender: N/A
Sample size	23 articles reviewed
Title	"With age comes wisdom": a qualitative review of elder perspectives on healthy aging in the circumpolar North.
Aim of the study	The aim of this analysis was to synthesise qualitative research among older residents (aged 50+ years) in the Circumpolar North to identify a definition of healthy ageing common in the region.
Outcome variables	Healthy Ageing
Data Analysis	Inductive grounded theory analysis
Findings	<ul style="list-style-type: none"> • The results of this literature review indicate that many aspects of healthy ageing are common across populations, including a desire for autonomy; mental, cognitive, and physical health; purpose in life; access to healthcare; social relationships; and community engagement. • Older adults in the Circumpolar North also focused on the role of society in respecting the wisdom and experiences of elders, their relationship to the natural environment, and psychosocial resilience, such as optimism, balancing their emotions, and living in harmony with others.
Study Recommendations	A qualitative, systematic analysis of how older adults define healthy ageing in the Circumpolar North is an important addition to the literature because research shows that when respondents create lay models of their community health issues, these models are more inclusive than researcher-driven definitions of healthy aging. Such robust models reveal previously unknown factors that can inform effective health promotion programming in the region to reduce the health disparities that persist in the Circumpolar North. These models provide guidance for caregivers to implement more culturally competent practices and to create treatment systems that are context specific based on the concerns that local elders find essential to their health. A deeper understanding of local needs could improve communication overall and decrease barriers to culturally appropriate treatment.

Author & Year	Krivanek et al. (2021)
Study Design	Scoping review
Country	United States
Age, Ethnicity, and Gender	Age: N/A Ethnicity: N/A Gender: N/A
Sample size	not clear how many papers they reviewed
Title	Promoting Successful Cognitive Aging: A Ten-Year Update
Aim of the study	Take stock of the field of successful cognitive ageing
Outcome variables	N/A
Data Analysis	Summary of findings on the viability of past research of successful cognitive aging.
Findings	Given the epidemiological evidence that more than a third of ADRD cases may be due to modifiable risk factors, helping individuals make brain-healthy behaviour changes could improve the lives of millions of older adults around the world and reduce the social and economic burdens associated with cognitive decline and dementia.
Study Recommendations	The lifestyles and behaviours examined in this review are not exhaustive, and ongoing research continues to refine our understanding of the factors that promote successful cognitive ageing. We expect that work in this field will continue to expand rapidly and anticipate that our next update will need to be completed in much less than a decade.

Author & Year	Reich et al. (2020)
Study Design	Systematic review
Country	Review including 13 countries (North America, Western Europe, the Middle East, Asia, Oceania)
Age, Ethnicity, and Gender	Age: Various across studies Ethnicity: Various across studies Gender: Women & Men
Sample size	23 articles reviewed
Title	What does "successful aging" mean to you? Systematic review and cross-cultural comparison of lay perspectives of older adults in 13 countries, 2010-2020.
Aim of the study	Systematic review of lay definitions of successful ageing across cultures
Outcome variables	Meanings of successful ageing
Data Analysis	Thematic analysis of a systematic review of qualitative peer reviewed studies from multiple countries published between 2010-2020 that contained qualitative responses of older adults.
Findings	<ul style="list-style-type: none"> • The concept of successful ageing (SA) is subjective and context/culture based. • Similar ideas about what concepts (e.g., social engagement, positive attitudes, independence, etc.) relate to SA across cultures but details varied. • Most mentioned dimensions of SA across cultures were social engagement (giving back to communities, maintain connections) and positive attitude on ageing. These two were more discussed than independence, physical health, cognitive health, or spirituality. • Least mentioned dimension of SA was cognitive health. • Spirituality was mostly mentioned by ethnic minorities. • Older people prefer social and psychological criteria of SA over biomedical criteria.
Study Recommendations	<ul style="list-style-type: none"> • Future research to determine culture-specific and country-specific social influences on lay persons' perceptions of successful aging could contribute significantly to understanding why older adults across many cultures tend to emphasize social engagement and positive attitude as key elements of successful aging.

	<ul style="list-style-type: none"> • Policy/Health Practice & Provision: Consider older patients' priorities in terms of care/SA; prioritise health promotion that matches social engagement and positive attitudes towards ageing desires/needs; epidemiologists could consider shifting attention from disease-centric studies of older adults to health-centric studies of older adults, to identify factors that increase or decrease the likelihood of successful aging, even in the presence of significant disease.
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