Are We Aging Gracefully?

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Work and relationship stress had a greater impact on emotions in midlife than other ages. Men and people who are married or outgoing reported more positive and less negative emotions than women and single or shy people.

Mental Performance in Midlife

Although it is commonly thought that mental functions decline with age, this change may not happen until old age and, even then, not in all areas! Middle-aged adults showed little or no decline in mental speed, reasoning, and short-term memory compared to younger adults. Midlife adults performed better than the elderly in the same areas, and even more striking, midlife and elderly adults both outperformed younger adults in vocabulary tests!
Scientific findings from MIDUS I

Differences Between Men and Women

- Men had an increase in the number of chest pains until age 50, where they leveled off, while women had a high incidence at all ages.
- As age increased, so did the waist to hip ratio, the percentage of people overweight, and the use of high blood pressure medication. The reported frequency of exercise decreased with age.
- As age increases more effort is devoted to health, although women reported devoting more effort than men.
- Men were more likely to experience stress that was focused on themselves, while women were more likely to experience stress that focused on others.

**Who's Exercising?**

- During young adulthood, men with less leisure time exercised the most while men with the highest level of education exercised the least; however, by older adulthood this pattern was reversed.
- Among women, a higher level of earnings was associated with more vigorous exercise, yet those women with more education had a steeper decline in exercise across adulthood.
- Individuals who were single or who had a high level of emotional support from their spouse or their family exercised more often.
- Employees who had decision-making ability at their job or who worked more hours exercised more often.
- Individuals who perceived their neighborhoods as safer participated in more regular exercise.

**Who’s Not Feeling Healthy?**

- Throughout midlife, physical health ratings decreased and reported health problems increased, although women reported more problems than men. However, men were more likely to report alcohol or drug problems.

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The University of Wisconsin Mind-Body Center was created in 1999 with a $10.9 million grant from the National Institute of Mental Health. The Center brought together researchers in the Health Emotions Research Institute, the Wisconsin Center for Affective Science. The goal was to study how emotional, psychosocial, and neurobiological factors interact to influence unfolding profiles of physical and mental health, in both human and animal models. Over the past 3 years new data have been collected on various longitudinal samples and samples of women with rheumatoid arthritis and fibromyalgia.

RECENT FINDINGS

► Men and women with more positive relationship profiles are less likely to have high allostatic load (wear and tear on multiple physiological systems) than those with more negative relationships profiles. Because allostatic load predicts ill health (cardiovascular disease, cognitive and functional decline, mortality), these findings suggest possible protective effects associated with having good quality social relationships.

► Older women with higher levels of purpose in life and personal growth have significantly high levels of HDL cholesterol (the "good" cholesterol). In addition, older women with more positive social ties to others have lower waist-hip ratios, lower weight, and lower levels of glycosylated hemoglobin (a marker for diabetes). Alternatively, higher levels of anger and anxiety are linked with higher levels of glycosylated hemoglobin among older women.

► Probing the role of brain function, middle-aged men and women completed assessments of positive emotions as well as purpose, growth, and mastery prior to EEG (electroencephalographic) assessment. Those showing greater left than right activation in frontal parts of the brain reported higher levels of well-being. Frontal asymmetry continued to explain variation in overall well-being even after adjusting for the influence of positive affect. In addition, those individuals showing this pattern of brain activity had higher levels of antibody titers in response to an influenza vaccine.

► Among men and women whose EEG was monitored while viewing emotionally arousing pictures, it was found that those showing greater relative left-sided activation in frontal regions showed faster recovery following a negative emotional event, as reflected in peripheral physiological measures. These findings support the idea of a frontally mediated mechanism in automatic emotion regulation.

► Significant positive associations were found between high psychological well-being and good quality social relationships and vigorous antibody response to influenza or hepatitis A immunization. Such findings point to beneficial associations between positive psychosocial factors and cell-mediated immune function.

► Women with fibromyalgia may have disabling chronic pain and severe fatigue. However, fatigue appears to be a better predictor of well-being than the chronic pain. These findings may help direct early treatment toward alleviating this severe fatigue, rather than trying to primarily relieve the chronic pain.

The above findings have been generated by a large number of investigators (i.e., faculty, postdoctoral fellows, graduate students) working together on projects in the UW Mind-Body Center.
NEW ON-LINE
GERONTOLOGY
CERTIFICATE
PROGRAM

The new Collaborative On-Line Gerontology Certificate Program (OGC) is an 18-credit program of undergraduate coursework in aging. The program is appropriate for anyone with a personal or professional interest in the field, including health care professionals, human service providers, caregivers, and educators. The program combines the expertise of University of Wisconsin campuses at La Crosse, Madison, Milwaukee, Parkside, Stevens Point, Stout, and Superior.

Courses are accessible whenever and wherever it is convenient for the student, because they are taken over the Internet from the student's home computer. The courses are offered entirely online, so there is no need to go to a campus. Even the required practicum will be arranged in a students' geographic area. Students can take the entire certificate program or just courses of interest.

The first course, Foundations of Gerontology, will be offered in the fall of 2003. Enrollment opened June 2, 2003. You may find out more information about this innovative program by calling toll-free at 1-866-374-1326, where educational specialists provide program information and answer questions Monday through Thursday, 8 a.m. to 6 p.m. Information is also available at http://learn.Wisconsin.edu/gerontology.

For more information about IOA www.aging.wisc.edu

GET THE LATEST
ON HEALTHY AGING

Department of Health & Family Services
http://www.dhfs.state.wi.us/aging/index.htm

From this web page, you can access a variety of information on programs and services in Wisconsin. Brief descriptions of each service and connections for further information are available. Among the many topics on this site, you will find information about Alzheimer's Disease, Elderly Nutrition, Family Caregiver Support, Household Help, the Retired Senior Volunteers Program, Spousal Impoverishment, and Transportation Services.

Human Values in Aging Newsletter
July 1, 2003
H.R. Moody, Editor

In this issue:
- Against the Culture of Autonomy
- Web Sites to See
- The Secret of Successful Aging
- Dreams for the Second Half of Life
- Gerontology at Faith-based Colleges
- Aging, Mysticism and Creativity
- Books of Interest
- Calendar of Events

The Institute for Human Values in Aging is part of the International Longevity Center-USA, with support from The Robert Wood Johnson Foundation of Princeton, New Jersey. For additional information, see

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30th Anniversary Celebration
October 23 – 24, 2003
Monona Terrace

October 23
Tobias Lecture
on Aging
Dinner Speaker
Margie Lachman, Ph.D.
Brandeis University
"The Sense of Control and Aging: Examples from Cognition and Health"

Breakout Sessions following presentations
Blood Pressure Readings
Bone Densitometry Testing and more

October 24
Emeritus Luncheon
Speaker
John Suttie, Ph.D.
Emeritus Professor
Biochemistry

October 24
Speakers
Neil Binkley, M.D.
Associate Director, UW Institute on Aging
Associate Professor, Medicine
Carol Ryff, Ph.D.
Director, Institute on Aging
Professor, Psychology
Mark Sager, M.D.
Professor, Medicine
Director, WI Alzheimer’s Institute
Rick Weindruch, Ph.D.
Professor, Medicine

New IOA Display and Information Booklet

Look for more information in the brochure coming out this fall
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The above findings have been generated by a large number of investigators (i.e., faculty, postdoctoral fellows, graduate students) working together on projects in the UW Mind-Body Center.
Differences Between Men and Women

- Although similar numbers of men and women graduated from college, women tended to have fewer high-ranking jobs.
- Women, especially midlife and older women, were more likely than men to have made career sacrifices for their families.
- Married men felt more in charge of situations and managing daily responsibilities than non-married men, but married women did not have this advantage compared to unmarried women.

Who’s Not Feeling Healthy?

- Throughout midlife, physical health ratings decreased, and reported health problems increased, although women reported more problems than men. However, men were more likely to report alcohol or drug problems.

Stress in Adulthood

- Most people experienced a daily stressor during the 8-day daily diary study. However, 8% of young, 12% of midlife, and 19% of older adults reported no stressors.
- As age increased, men and women reported fewer daily and multiple daily stressors.
- Women reported experiencing stressors on more days, felt more overloaded, had higher levels of physical symptoms, and experienced more child-related stressors than men.

Who’s Exercising?

- During young adulthood, men with less education exercised the most while men with the highest level of education exercised the least; however, by older adulthood this pattern was reversed.
- Among women, a higher level of earnings was associated with more vigorous exercise, yet those women with more education had a steeper decline in exercise across adulthood.
- Individuals who were single or who had a high level of emotional support from their spouse or their family exercised more often.
- Employees who had decision-making ability at their job or who worked more hours exercised more often.
- Individuals who perceived their neighborhoods as safer participated in more regular exercise.

Men reported more stress related to coworkers, job procedures, and disciplining employees, and reported that stressors posed more risk to their financial situations.

Men were more likely to experience stress that was focused on them, while women were more likely to experience stress that focused on others.

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HONORS AND AWARDS

Jane Mahoney, Assistant Professor of Medicine (Geriatrics), in collaboration with the UW-Madison and Wisconsin Department of Health and Family Services, has been awarded a three-year, $750,000 grant to study the prevention of falls among older people. It was the only grant awarded as a result of a nationwide competitive process. The purpose of the project is to identify effective strategies to reduce falls and fall-related hospitalizations among older adults in general, and especially among those at high risk. According to national health statistics, Wisconsin’s death rate from falls is almost twice the national average. Average direct costs for an individual’s first fall-related hospitalization alone can easily range between $10,000 and $20,000. Cooperating partners include the Safe Community Coalition of Madison and Dane County, the WI Bureau of Aging and Long Term Care Resources, the Dane County Area Agency on Aging, the Madison Patient Safety Collaborative, UW Hospitals and Clinics, UW-Madison and UW- La Crosse.

Stephanie Robert, Assistant Professor, Social Work, received the 2003 AGE-SW Faculty Achievement Award. This is an annual award sponsored by the Association for Gerontology Education in Social Work (AGE-SW) for an early-career social work faculty member who demonstrates significant contributions and potential in gerontological social work research, teaching, and leadership.

Karen Hansen, Assistant Professor, Medicine, Rheumatology Section, was awarded best clinical abstract. Her abstract titled “Is Cherry Picking Appropriate?” was presented in oral session in Los Angeles, CA on February 12-15, 2003.

Following is a sample of some of the recent grant awards and honors received by IOA faculty and scientists:

- Betty R. Hasselkus, Emeritus Professor, Occupational Therapy, has been named to the expert panel of the Rosalynn Carter Institute for Human Development to serve on the Caregiving and Alzheimer’s Disease Editorial Board. She will be reviewing a chapter for a forthcoming book on caregiving for people with Alzheimer’s disease, edited by Rhonda Talley, Executive Director of the Institute. Dr. Hasselkus was selected from a roster of over 600 nominations for expert panel members.

- Betty Kramer, Associate Professor, Social Work, participated in an award ceremony at UCSF to describe results of a textbook review project she completed in social work and to present awards to authors and editors who had exemplary end-of-life content in their textbooks.

- David A. Noyce, Assistant Professor, Civil and Environmental Engineering, has been selected as this year’s recipient of the D. Grant Mickle Award by the Transportation Research Board (TRB). This award is given each year by TRB for the best paper in the area of transportation operations, safety, and maintenance. Dr. Noyce co-authored a paper titled “Drivers’ Understanding of Simultaneous Traffic Signal Indications in Protected Left-Turns,” where older driver comprehension and behavior were critical components of this research.

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