Active Ageing to Gerotranscendence
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Introduction
Ageing, old age and death have piqued the interest of philosophers and writers since antiquity. Confucius related ageing to maturity and wisdom,1 while Shakespeare described it as a “second childhood”.2 Cicero, perhaps with premonitions of his own demise, viewed death with fondness in a metaphor, likening it to a ship approaching a harbour.3

Confronted by ageing demographics, Singapore has embraced “active ageing” like many developed countries. The World Health Organization (WHO) defines active ageing as “the process of optimising opportunities for health, participation and security in order to enhance quality of life”.4 This entails harnessing the elderly’s instrumental value, while mitigating healthcare utilisation from chronic illnesses.

Limitations of Active Ageing
Cole and Johnson et al attributed current negative stereotypes about the elderly to the Victorian outlook that viewed midlife as the phase that determined an individual’s salvation. This resulted in old age becoming evaluated on the standards of youth. Such a paradigm foreshadowed modern gerontology, which appraised the elderly on the midlife standards of autonomy, wealth and good health.5,6

Some aspects of active ageing may indirectly reinforce such mindsets by promoting traits associated with physical vitality, where an elderly person’s worth is measured mainly by his or her physical capabilities. In reality, the human is complex and made up of highly interactive and connected “other” dimensions as illustrated in the biopsychosocial model of ageing in Figure 1. This misrepresented view of ageing is further reinforced by celebrities who have been known to undergo plastic surgery or aesthetic treatments to maintain a youthful appearance necessary for their continued appeal.8 Herein lies the slippery slope that could lead us from seeking active ageing to being anti-ageing. The latter connotes efforts to stop or reverse ageing as if it were a bane.

Inevitably, many elderly face age-related degenerative conditions that hamper their ability to partake in active ageing. Although individuals tend to link self-worth to gainful occupation and career success,9 the truth remains that few can work until late life. Even for those who enjoy the good fortune of active ageing and employment, can it last forever?

Active Ageing to Embracing Ageing
For ageing to be all embracing, it needs to be destigmatised to allow society to better focus on elders’ intrinsic worth beyond the utilitarian and instrumental. This must begin with acknowledgement and acceptance of their vulnerabilities. Acceptance helps lower ageing’s “negative affect” by reducing the older person’s anxiety, sadness or frustration over the loss of youthfulness.10 The value of the elderly is intrinsic as exemplified by William Thomas’ refrain, “elders are the glue that bind us together”.11

Embracing ageing and ultimately death may help resolve Erickson’s final stage of personality development in ego

Fig. 1. The biopsychosocial model of ageing.

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integrity versus despair. Individuals who deem themselves to have lived successfully gain integrity, while those who fall short of expectation suffer from depression. Finding one’s role in society and seeking answers to spirituality can engender the virtue of wisdom in the face of decline.12

Hence, instead of fostering youthful paradigms of active ageing in economic, physical or social terms, embracing ageing needs to focus on spiritual and philosophical dimensions.

**Spirituality in Ageing**

Old age may be characterised by increased spirituality (Fig. 2) as the elderly seek to make sense of the past, present and future. Spirituality, which provides meaning to existential issues, is a multidimensional construct rooted in relationships and involves bonding with the transcendent, self, others and environment.13 Connectedness with others, fundamental to personhood, forms the essence of spirituality which in turn fosters contentment, peace and meaning.

Interestingly, a study by Hill et al showed the medical benefits of religiosity and spirituality in improving cognitive function,14 perhaps because spirituality results in more active participation in communal activities. By offering answers to existential questions, spirituality may also reduce stress and even improve immunological function.15 Importantly, spirituality, which focuses on well-being, guides medical care to preserve intactness and integrity of the human person.16

Unlike active ageing, whose pursuits may be out-of-reach for the frail, spirituality embraces the whole person and is relevant to all, even the chronically ill or disabled. Singapore’s eldercare-related services can consider adding a spiritual dimension to their services, by establishing pastoral care services, chaplaincies or trained counsellors to provide comfort, counselling and spiritual care for those under their charge.

**Gerotranscendence as an Eventuality**

Gerotranscendence occurs as part of human growth when an individual living into old age views life from a different perspective—“from a materialistic and rational view of the world to a more cosmic and transcendent one, normally accompanied by an increase in life satisfaction.”17 As part of this transition, the elderly disengage from social roles and become more reflective. They acknowledge their inadequacies and accept the loss of independence.18 Elderly who are gerotranscendent are less preoccupied with self. They are less concerned with the material and become more genuine as persons.19 Liberated from societal expectations, the gerotranscendent elderly can rise above an active ageing mindset as they acquire a “cosmic” outlook on life and define reality according to their own terms.20

Gerotranscendence can eventually lead to spiritual reminisce,18 where the elderly undergo a critical evaluation of their lives to gain new insights from their past to help cope with the present and find meaning in the future. Hence, beyond the physical and material, gerotranscendence can help rechannel hope towards spiritual aspirations of inner fulfillment and anticipation of a good death. Such hope is essential to encourage the elderly to persevere through ageing’s tribulations.

A concrete way to incorporate the spiritual dimension to ageing well can lie in initiating life-story reminiscence groups among seniors that gather regularly for programmes and activities, be they in day care centres, community clubs or religious settings. Spiritual reminiscence, infused in life-story work, helps the elderly find new meaning and hope in life by reframing life experiences, coming to a new understanding, acceptance and transcendence. A recent study of a 6-week spiritual reminiscence intervention evidenced positive outcomes in hope, life satisfaction, and well-being of elderly people even though they suffered from dementia.21 Such efforts are already underway in Singapore22 and can be implemented on a more systemic level with support from the government working through health and social care agencies.

**Conclusion**

Active ageing has its limits in the inevitable decline of an individual’s physical and mental faculties, and the economic and social capital it exacts. Even the active elderly must transition towards acceptance and embracing of their eventual deterioration in health and ultimate mortality, and discover new hope and a reason to live.

The worth of a person is not to be judged by societal yardsticks, finding meaning in ageing, decline and loss is a personal choice. Unconstrained by external expectations, such choices express true autonomy.
REFERENCES


