

# University of the Third Age: A Unique Model for Successful Implementation of “Active Ageing”

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## 1. Introduction

The world's population is rapidly ageing due to low birth rates and rising life expectancy. It is expected that between 2000 and 2050, the proportion of world's population over 60 years will double from about 11% to 22% (1). The global trend in population ageing is unprecedented in human history, pervasive across societies, enduring and will affect every community, family and person (2). Population aging is a worldwide phenomenon and dramatically proceed in low and middle income countries (3). For instance the proportion of the aged population in France doubled over a period of 100 years. However, Brazil will experience the same population growth in less than 25 years (1). The fast aging in developing countries provides less time to adjust to this structural change. The growth of ageing population leads to an increased number of age-related diseases, such as cancers, diabetes and other chronic diseases (4). Hence, many countries across the world are facing the healthcare, social and economic challenges posed by these demographic changes. Countries need to get ready to address the challenges for an aging world.

## 2. What is "Active Ageing"?

Promoting good health and healthy lifestyle in aging population is vital to response to the rapidly growing proportion of the aged people worldwide. Good physical, social and mental health can help older people to have full, independent and productive lives throughout their old age. According to World Health Organization (WHO) “active ageing” is defined as an evidence-based strategy to diminish the consequences of the global increase in the population over 65 years (5). “Active ageing is the process of optimizing opportunities for health, participation and

security in order to enhance the quality of life as people age” (5). Active ageing will result in an increase in life expectancy and improvement in the quality of life for the elderly (6). One of the major issues that these people are facing is the social isolation, which can adversely affect their health and wellbeing (7, 8). Interventions to foster participation of aged people in social activities are potential ways to tackle this problem. These may include a wide range of leisure, social, cultural and spiritual activities in the community.

## 3. University of the Third Age

Health education plays an important role in improving the older people's quality of life. The University of the Third Age (U3A), though not a university in the conventional sense, is a flourishing elderly education initiative that has been successfully functioning in many countries for more than 40 years (9). The concept of U3A was developed in France in 1972 and spread rapidly throughout the globe. What is meant by the term “university” here is the concept of gathering like-minded people who like to teach and those who want to learn by organizing them into educational groups (9). The term “Third Age” is based on dividing life into three distinct stages: the first age is the age of youth that they learn about the world, the second stage is the age of employment and parenthood, and the third age is when they retire and do what they like (10). The U3A students can take part in a wide range of courses that enables them to learn and also to share skills and knowledge in such fields as art, languages, music, history, life sciences, philosophy, computing, photography, etc. (11).

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### Implication for health policy/practice/research/medical education:

This study focused on the world population ageing, challenges that communities are facing and also the importance of the University of the Third Age (U3A) as a valuable intervention in empowering the aged people to adapt an active lifestyle.

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#### 4. Quality of Life, Health Status and U3A Membership

Although a handful of studies have been carried out to evaluate the role of U3As in improving the health status of the aged population, it is clearly evident that this initiative has growingly become a global success story in addressing the educational, social, and psychological needs of the ageing population. A study on the quality of life of the U3A students in Poland showed that elderly individuals participating in these courses have satisfactory and relatively stable parameters of quality of life in all aspects of functioning (12). Another study compared the perceived well-being of U3A members from Sydney, Australia with the normative peers from USA. They showed that members of U3A had a better general, physical and mental health condition (13). The results from this study also concluded that enrolling to U3A courses can, even in the very elderly, lead to a much more positive perception of well-being. It also has been reported that the level of self-rated health by U3A students could be modified by factors such as age, income, lack of symptoms/illness and sense of happiness (14). A Brazilian study on the body composition and quality of life of elderly women attending a university of the third age program showed a decrease in body weight, body mass index and fat-free mass (15). This study reported that although the general quality of life scores and those for physical, psychological and environmental domain to some extent decrease by increasing age, the social performance shows significant improvement.

The sense of coherence, which determines how elderly people cope with various difficult situations, is an important determinant of life satisfaction. Another study showed higher levels of coherence among U3A students. This in turn can result in a better adaptation to old age challenges and life difficulties (16).

It could be argued that the elderly people attending the U3A programs are more likely to be health-conscious, and some relationship observed between attending U3A programs and an improvement in physical and mental health status of these people is partly explained by special characteristics of the participants (17). However, there are many valid and reliable studies emphasizing that repeated mental stimulation in later life will help the aged population to prevent from becoming physically and cognitively deteriorated by growing older (18, 19).

In conclusion, with a historically unprecedented growth of aging population across the world and given the fact that they begin to experience declines in different aspects of their health and well-being, more attention is drawn to the need for services that help them to maintain their active lifestyles and activities. The U3As can potentially offer a great opportunity to enhance their personal productivity and achievement.

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#### Authors' Contribution

This study has been equally done by the authors.

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#### References

1. *Ageing and life course*. World Health Organization; 2012. Available from: <http://www.who.int/ageing/about/facts/en/index.html>.
2. *World population ageing: 1950-2050*: United Nations; 2013. Available from: <http://www.un.org/esa/population/publications/worldageing19502050/>.
3. *Population ageing: a celebration and a challenge*.: UNFPA; 2014. Available from: <http://www.unfpa.org/pds/ageing.html>.
4. Shetty P. Grey matter: ageing in developing countries. *Lancet*. 2012;**379**(9823):1285-7.
5. *What is "active ageing"?*: World Health Organization; 2014. Available from: [http://www.who.int/ageing/active\\_ageing/en/index.html](http://www.who.int/ageing/active_ageing/en/index.html).
6. *Good health adds life to years: global brief for world health day 2012*.: World Health Organization; 2012. Available from: [http://www.who.int/ageing/publications/whd2012\\_global\\_brief/en/](http://www.who.int/ageing/publications/whd2012_global_brief/en/).
7. Coyle CE, Dugan E. Social isolation, loneliness and health among older adults. *J Aging Health*. 2012;**24**(8):1346-63.
8. Shankar A, Hamer M, McMunn A, Steptoe A. Social isolation and loneliness: relationships with cognitive function during 4 years of follow-up in the English Longitudinal Study of Ageing. *Psychosom Med*. 2013;**75**(2):161-70.
9. Swindell R, Thompson J. *An international perspective of the university of the third age*. 1995. Available from: <http://www.worldu3a.org/resources/u3a-worldwide.htm>.
10. *Learning without tears*. 2014. Available from: <http://www.adelaideu3a.on.net/>.
11. Swindell R. U3A (the University of the third age) in Australia: a model for successful ageing. *Ageing Soc*. 1993;**13**(2):245-66.
12. Zielinska-Wieczkowska H, Kedziora-Kornatowska K, Ciemnoczolowski W. Evaluation of quality of life (QoL) of students of the University of Third Age (U3A) on the basis of socio-demographic factors and health status. *Arch Gerontol Geriatr*. 2011;**53**(2):e198-202.
13. Mitchell RA, Legge V, Sinclair-Legge G. Membership of the University of the Third Age (U3A) and perceived well-being. *Disabil Rehabil*. 1997;**19**(6):244-8.
14. Maniecka-Bryla I, Gajewska O, Burzynska M, Bryla M. Factors associated with self-rated health (SRH) of a University of the Third Age (U3A) class participants. *Arch Gerontol Geriatr*. 2013;**57**(2):156-61.
15. Sonati JG, Modeneze DM, Vilarta R, Maciel ES, Boccaletto EM, da Silva CC. Body composition and quality of life (QoL) of the elderly offered by the "University Third Age" (UTA) in Brazil. *Arch Gerontol Geriatr*. 2011;**52**(1):e31-5.
16. Zielinska-Wieczkowska H, Ciemnoczolowski W, Kedziora-Kornatowska K, Muszaliak M. The sense of coherence (SOC) as an important determinant of life satisfaction, based on own research, and exemplified by the students of University of the Third Age (U3A). *Arch Gerontol Geriatr*. 2012;**54**(1):238-41.
17. Formosa M. Four decades of Universities of the Third Age: past,

- present, future. *Age Societ.* 2012;**34**(1):42-66.
18. Miller KJ, Dye RV, Kim J, Jennings JL, O'Toole E, Wong J, et al. Effect of a computerized brain exercise program on cognitive performance in older adults. *Am J Geriatr Psychiatry.* 2013;**21**(7):655-63.
  19. *Later life learning: unlocking the potential for productive ageing: Canberra, Australian Capital Territory: Department of Education, Employment and Workplace Relations, 2010.* 2012. Available from: <http://www.voced.edu.au/content/ngv49761>.