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International  
Council on  
Active Aging



The ICAA is the world largest association dedicated to changing the way we age by uniting and working with professionals in the retirement, assisted living, recreation, fitness, rehabilitation and wellness fields. It connects a community of like-minded professionals who share the goals of changing society's perceptions of aging and improving the quality of life for aging Baby Boomers and older adults within the six dimensions of wellness (emotional, vocational, physical, spiritual, intellectual, social.) The council supports these professionals with education, information, resources and tools, so they can achieve optimal success with this growing market.

The ICAA also takes an active role in helping to change the way society perceives aging. The council is one of more than 50 of the nation's most prominent health and aging organizations working to implement the National Blueprint on Aging. Contributors to the Blueprint's development include AARP, the American College of Sports Medicine, the American Geriatrics Society, the Centers for Disease Control and Prevention, the National Institute on Aging and the Robert Wood Johnson Foundation.

By joining the ICAA, you connect with and commit to something higher than yourself

*"I cannot believe that the purpose of life is to be "Happy." I think the purpose of life is to be useful, to be responsible, to be compassionate. It is, above all, to matter: to count, to stand for something, to have made some difference that you have lived at all."*

Leo C. Rosten

#### Our vision

The International Council on Active Aging (ICAA) is dedicated to changing the way we age by uniting professionals in the retirement, assisted living, fitness, rehabilitation, and wellness fields to help dispel society's myths about aging. We will also help these professionals to empower aging baby boomers and older adults to improve their quality of life and maintain their dignity.

#### Our mission

The ICAA connects a community of like-minded professionals who share the goals of changing society's perceptions of aging and improving the quality of life for aging baby boomers and older adults within the six dimensions of wellness.

The council supports these professionals with education, information, resources and tools, so they can achieve optimal success.

**[www.icaa.cc](http://www.icaa.cc)**

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A photograph of two women exercising in a gym. The woman in the foreground is wearing a black tank top and a red jacket draped over her shoulders. She is holding a blue resistance band. The woman behind her is wearing a grey t-shirt and a white skirt, also holding a blue resistance band. Both women are smiling and appear to be in motion. The background is a blurred gym environment with blue lighting.

# Motivating the 50-plus adult

**AARP's research reveals the complexities of communicating physical activity issues**

Committed to helping its 35 million members make the most of life after 50, AARP decided in 2000 that it needed to address—and try to change—statistics showing that people with sedentary lifestyles run a greater risk of developing diabetes, high blood pressure, cancer, obesity and a host of other diseases and conditions. The association was particularly concerned about data showing that a third (34%) of people age 50 and older are sedentary. But it was also encouraged by research indicating that people who become more active will improve their physical and mental health, suffer fewer chronic illnesses and disabilities, enjoy improved cardiovascular fitness and build healthier bones and muscles.

AARP knew from the beginning that it needed more information about the 50-plus audience before it could begin motivating that audience to exercise. So, with help from the Robert Wood Johnson Foundation and the Centers for Disease Control, the association launched a research effort in 2001 to help it understand how people over 50 feel about exercise and how it fits into their daily lives. Through that research—which included numerous focus groups and two national surveys—AARP has learned that certain key events usually trigger a person’s interest in physical activity. Turning 50 is one of the most significant triggers. Declining health is another.

**Overview**

Many participants in AARP studies reported that they started exercising because a 50<sup>th</sup> birthday caused them to take stock of their health and how best to preserve it. Most baby boomers wanted to reclaim the energy and vigor that they had in their youth. Others reported that seeing a relative or friend decline in health made them reevaluate their own health. Many study participants noticed themselves gaining

weight, or started experiencing annoying aches and pains.

Despite these clear wake up calls, however, many members of the 50-plus population don’t act on their knowledge of exercise’s benefits or don’t stick with an exercise program once they begin. While almost three-quarters (72%) of those surveyed said they exercise because it is good for their health, almost half (47%) said they should exercise more than they do. Only 16% said they had exercised regularly throughout their lives. Significantly, focus group participants were more likely to start and follow through with an exercise plan if their doctors recommended it.

**How healthy is the audience?** Generally speaking, the 50-plus target audience is fairly content and fairly health conscious, according to the survey results. The vast majority (90%) of respondents said they were either *very satisfied* or *somewhat satisfied* with their lives. Respondents’ satisfaction, in many cases, was tied directly to their health status. For example, 80% of those who described their health as *very good* said they were *very satisfied* with their lives. In marked contrast, fewer than half (38%) of those in *fair* or *poor* health said they were *very satisfied* with their lives. (See “Table 1: self-rated level of health” below and “Table 2: overall satisfaction with life” on page 30.)

Americans over 50 are taking steps to maintain good health. Almost all respondents (93%) said they had had their blood pressure checked in the past year, while 82% said they had discussed health issues with their doctor. Many said they were trying to control weight loss or gain (78%), had their cholesterol level checked regularly (76%), and got regular health screenings (73%). (See “Table 3: health-related activities in the past 12 months” on page 30.)

**What health benefits does the audience get from exercise?** Most Americans aged 50-79 are well aware that exercise is a vital part of becoming and staying healthy. About two out of three (63%) study participants agreed that *exercise is the best thing I can do for my health*. Few (4%) said it is not very important. (See “Table 4: perceived importance of exercise for personal health” on page 31.) More than half (67%) of respondents listed preventing disease as a major reason to exercise. Reducing stress (60%) and fighting aging (45%) were other often-cited health benefits.

Controlling weight—a health benefit in itself—was cited by 60% of participants as another major reason for exercise. Nearly half (48%) said they exercise to look good. Other people said they exercise to stay fit, healthy and flexible (18%); for nonspecific health problems (10%); because of heart problems (6%);

**Table 1. Self-rated level of health (by gender and age)**

	Total	Gender		Age		
		Men	Women	50-59	60-69	70-79
	%	%	%	%	%	%
Very good/good	76	81	72	76	77	76
Very good	38	43	33	36	43	37
Good	38	38	38	40	34	40
Only fair/poor	24	19	28	24	23	24
Only fair	19	14	23	19	17	19
Poor	5	5	6	5	6	4

# Motivating the 50-plus adult

Continued from page 29

**Table 2. Overall satisfaction with life (by self-rated health)**

	Self-rated health			
	Total %	Very good %	Good %	Fair/poor %
Very/somewhat satisfied	91	96	94	81
Very satisfied	64	80	73	38
Somewhat satisfied	26	15	21	43
Only a little/not at all satisfied	9	4	6	18
Only a little satisfied	6	3	4	12
Not at all satisfied	3	1	1	7
Don't know	1	—	—	1

**Table 3. Health-related activities in the past 12 months (by self-rated health)**

	Self-rated health			
	Total %	Very good %	Good %	Fair/poor %
Had your blood pressure checked	93	91	92	97
Discussed health issues with your doctor	82	76	79	91
Tried to control your weight	78	76	78	76
Had your cholesterol checked	76	75	75	81
Tried to manage your stress	73	68	71	77
Read books or articles on health, nutrition and wellness	68	70	68	66
Ate more healthy foods than last year	62	54	61	64
Took a specific action to prevent disease	59	57	58	63
Had a cancer screening (prostate or skin cancer screening)	53	56	54	50
Started an exercise program	43	50	46	33
Started a physical activity program	41	42	43	37

and the desire to feel better (6%). (See “Table 5: major reasons to exercise” and “Table 6: chief motivators to start exercise regimen” on page 32.)

**How active is the audience?** Walking seems to be the exercise of choice for those 50 and older, but most don't do much to increase their muscle strength or tone. About eight in ten (83%) of those who have a physical activity program said they spend at least 10 minutes at a time engaging in *moderate* physical activities—such as brisk walking, bicycling, vacuuming or gardening—that cause relatively small increases in heart rate and breathing. *Vigorous* activities—the kind that cause large increases in heart rate and breathing—were less popular among the target audience. Fewer than half (41%) of study participants said they spend at least 10 minutes at a time engaging in such activities as running, aerobics and heavy yard work. More than half (58%) said they do not engage in these activities.

**Why don't some audience members exercise?** One third of nonexercisers (34%) said that health problems keep them from exercising. Six in ten (58%) said arthritis interferes with their ability to exercise, while others reported having problems with chronic pain (46%), injury (41%), physical disabilities (36%) or a heart condition (30%). In addition, many nonexercisers worried about overdoing it and didn't want to start exercising until they checked with their primary care physicians.

Respondents also reported nonmedical reasons for not exercising. A significant number said they didn't have the time to be more active. Many others viewed exercise as a boring, unappealing chore. They'd much rather be engaging in enjoyable activities—like dancing and golfing—than working out alone on the treadmill in the basement.

**What would help the audience exercise more?** Study participants suggested that having good information about how to exercise could help them increase their physical activity. A majority of

**Table 4. Perceived importance of exercise for personal health (by gender and age)**

	Total %	Gender		Age		
		Men %	Women %	50-59 %	60-69 %	70-79 %
Exercise is the best thing I can do for my health	63	66	61	60	65	65
Exercise is important for my health, but many other things are more important	32	30	33	34	30	30
Exercise is not very important for my health	4	4	5	5	5	4
Don't know/refused	1	–	1	–	1	1

respondents said they would be *very* or *somewhat interested* in learning how to: exercise safely (74%), keep motivated (71%) and set realistic goals (66%). Moreover, half expressed interest in developing an individualized physical activity plan (51%), tracking their progress (50%) and learning how to stay on track (49%). (See “Table 7: interest in acquiring various exercise skills/support” on page 33.)

**Messages that motivate the audience**

To be effective, promotional messages for physical activity must assume that the target audience already knows the health benefits of exercise, but for various reasons has not taken advantage of those benefits. The messages must focus on inspiring audience members to get off the couch, all the while being careful not to alienate or turn them off.

Focus groups, which reviewed and commented on a number of print advertisements, have helped AARP identify messages that are likely to be successful in motivating adults 50-79 to adopt and stick with a physical activity regimen. The groups also provided valuable insight into what messages will stand in the way of efforts to promote

increased levels of physical activity among midlife and older Americans.

In most cases, a focus group’s response to a particular promotional message was based on members’ gut reactions to the visual imagery used to communicate that message. In general, focus groups reacted positively to ads showing men and women together, ads that featured youthful-looking people and ads that showed people exercising in groups. Ads that portrayed scenes of people walking in a beautiful setting also elicited a positive response. To be successful, promotional messages should also incorporate the following:

**Feature ordinary people doing ordinary things.** Adults over 50 responded best to promotional messages when they could identify with the people—and the activities—featured in ads. Focus group participants preferred ads that showed *real people like us* taking part in realistic activities. For example, both men and women identified strongly with a smiling female jogger, whose positive attributes included the fact that she was physically attractive without looking like a model, was doing something that most of them could do and didn’t look old, even though she had gray hair.

Many participants commented that the jogger looked like someone they would like to have as a friend.

On the flip side, male participants in one focus group couldn’t identify with one ad featuring a man who, they said, looked more athletic than they would ever be. Likewise, when focus groups were expanded to include 45 year-olds, the younger participants said they were turned off by ads featuring older people because they could not identify with *old age*.

**Provide concrete information.** While audiences need motivation and encouragement to get moving, they are also hungry for specific directions and guidance. Focus group participants always appreciated being directed to other resources—like websites or telephone numbers—where they could find more information.

**Make recommendations that are clear and consistent.** Two exercise recommendations were tested. One suggested that people over 50 take *at least a brisk walk every other day*. The other recommended, *Get your heart rate up for at least 30 minutes, most days*. Focus group participants preferred the second recommendation, but found *most days* to be too vague. In response, the message was changed to a more specific *at least 5 days a week*. This guideline reflects the recommendations for moderate exercise distributed through the *Healthy People 2010* initiative, a set of health-related recommendations developed by leading federal agencies.

**Recognize the obstacles that people face.** A significant number of focus group participants identified strongly with messages that acknowledged the busy lives that audience members lead. For example, one ad introduced Terry Watkins, a 53 year-old Ohio resident who was pictured taking a brisk walk in a park, even though he had many other responsibilities that demanded his time and attention. “Terry Watkins takes the kids to practice,” read the ad copy. “He

*Continued on page 32*

# Motivating the 50-plus adult

Continued from page 31

**Table 5. Major reasons to exercise (by gender and age)**

	Total %	Gender		Age		
		Men	Women	50-59	60-69	70-79
		%	%	%	%	%
Improving your overall health	82	81	83	83	80	84
Increasing your fitness level	72	74	70	71	74	69
Feeling good about yourself	71	67	75	71	70	72
Increasing your energy level	69	67	72	68	70	70
Preventing disease	67	61	72	65	70	66
Feeling in control of your life	57	53	61	54	58	63
Reducing stress	60	55	64	61	58	60
Controlling your weight	60	59	60	61	58	60
Having fun	53	51	55	47	56	62
Looking good	48	42	54	48	47	49
Fighting aging	45	41	48	42	46	47
Socializing with other people	34	30	37	26	33	50
Having better sex	28	37	20	35	25	19

**Table 6. Chief motivators to start exercise regimen (by gender and age)**

	Total %	Gender		Age		
		Men	Women	50-59	60-69	70-79
		%	%	%	%	%
Wanted to lose weight	27	24	30	31	28	21
Wanted to stay fit	18	18	17	19	14	21
Health reasons	10	7	12	12	10	6
Heart problems	6	9	4	5	5	9
Wanted to feel better	6	5	7	7	5	5
Recommended by family member/friend	4	3	5	5	3	4
Getting older	4	4	3	5	1	5

takes his dad to therapy. He takes on a full-time job. And he takes time to stay fit at least every other day. Because Terry knows taking care of himself gives him the power to do it all better.” Focus groups found Terry Watkins’ story inspiring. They liked the fact that, despite the demands on Terry, he was trying to be more active, and doing it for himself. Because Terry looked like a nice guy, focus groups found it easy to believe that taking time out of a busy schedule for physical activity is neither selfish nor uncaring.

Focus group members felt that Terry Watkins was using physical activity to take control of his life. They liked this message, which was communicated through the slogan, *Age on your own terms*.

### Messages that turn off the audience

In addition to identifying positive messages, focus groups were also very clear about the messages that will not

work with the over-50 crowd. To be successful, physical activity promotional messages should stay away from these approaches:

### Don't make exercise look like work.

Researchers discovered quickly that fun is much more inspiring than hard work. Images of grimacing, sweaty, straining exercisers won't entice many members of the target audience to don sneakers and get moving. Study participants were not comfortable with ads that showed a male biker exercising at a level they felt was far too strenuous and potentially dangerous. Instead, they liked seeing people who were smiling and chatting with their exercising companions.

**Don't call it exercise.** Focus groups associated the word *exercise* with hard work. Exercising meant going to aerobics class, working on a treadmill or playing softball on the weekend. On the other hand, participants equated being *active* and *physically active* with walking to the subway or to a restaurant for lunch, taking the stairs on the way to a meeting or picking up after the children. *Physical activity* was viewed as a nonthreatening term that let audience members choose how they would get moving.

**Don't play the age card.** Reminding readers about their age doesn't necessarily motivate them to exercise. One sample ad that tried to convince readers that “you can make time move backward” brought objections from those who didn't like the ad's attempt to establish a rapport with readers by focusing on getting older.

**Don't be confrontational.** Exhorting ad viewers to get off the couch isn't likely to get results, according to the research. This approach turned off the audience and, as a result, the audience turned off the message. Instead, successful messages give readers positive reasons to be more active. In one ad, 72 year-old George Bowman tells readers, “I stay active because she deserves a dance with grandpa.” The ad features two pictures of George: in one, he's waving at friends as he walks down a suburban street; in the other, he's dancing with his

**Table 7. Interest in acquiring various exercise skills/support (by gender and age)**

	Total %	Gender		Age		
		Men %	Women %	50-59 %	60-69 %	70-79 %
Exercising safely	74	73	74	80	75	64
Keeping motivated	71	72	70	80	69	61
Setting realistic goals	66	68	65	78	68	51
Developing an individualized physical activity plan	51	51	51	61	54	36
Tracking my progress	50	49	51	61	53	35
Keeping on track when facing special events such as holidays or vacations	49	49	50	58	53	37
Developing a support network	29	27	31	41	29	16

granddaughter at her wedding. Ads like this, which play on family-centered emotions, appealed to both male and female focus group participants. “It may be sappy,” one man commented, “but it works.”

**Implications/ recommendations**

Having identified messages that seem to resonate with audience members, AARP is now in the process of testing how effective these messages can be in helping the 50-plus population increase its physical activity and improve its long-term help. Through two pilot programs—one in Madison, Wisconsin, and the other in Richmond, Virginia—the association is using a variety of outreach strategies to get 50-80 year-olds moving, so they can feel better, have more energy and age more healthfully. By next spring, AARP hopes to use what it has learned in Richmond and Madison to devise a national initiative aimed at increasing physical activity among midlife and older adults.

The pilot programs are making full use of targeted advertising and printed resources to get the physical activity message across. In addition, AARP is working closely with local leaders to make their communities more exerciser-friendly. Finally, the association hopes to involve trusted advisors, like primary care physicians, in its efforts to communicate solid information about

physical activity, and to motivate audience members to act on that information.

Three important research findings indicate that any promotional campaign worth its salt will try to capitalize on the important relationship that already exists between physicians and their patients. As illustrated in previous sections of this paper, these findings show the following:

- 1. Midlife and older consumers already see physical activity as a health issue;
- 2. Audience members want concrete information and clear recommendations about how much exercise they need and how they should go about getting that exercise; and
- 3. Consumers trust their doctors to guide them in designing a safe and effective physical activity routine.

It’s important to recognize that communication about physical activity is a two-way street. Physicians can be enlisted to advise their patients to exercise, and to help those patients develop exercise routines that are appropriate for their physical condition. But adults over 50 must also be encouraged to seek, and rely upon, their physicians’ advice in this area. As long as physicians are reinforcing the messages that their patients are receiving

through a variety of media, it will be far easier to change sedentary behaviors and improve the target population’s overall health.

Whether physical activity promotional messages are imparted in a doctor’s office or through a magazine advertisement, they must focus on the consumer and his or her perceptions and behaviors. The most successful messages don’t necessarily reflect what the experts want a person to hear or how they want the person to change. Rather, the right message is always the one to which the person will respond. Recognizing the barriers people face—and encouraging them to overcome those barriers—could lead to permanent social change.

Organizations and health professionals must also work together to ensure that people over 50 find it easy to get moving within their communities. Creating walking and bike trails, and making sure there are safe places to be active, is part of that strategy. In addition, local employers might be convinced to provide fitness equipment, so their workers can exercise on the job. A hospital or physicians group could create fun programs to promote physical activity. Manufacturers and retailers could offer discounts on sports equipment, so more people can start moving.

“A lack of physical activity in our society is a reflection of the culture in which we live,” says AARP Executive Director William Novelli. “If we are going to succeed in changing it, we need to impact people’s individual behavior and their environments. We can only succeed if we apply communication strategies as sophisticated and effective as the ones used by those who are peddling products that help perpetuate our society’s sedentary lifestyle.” ▼