

RESEARCH

Open Access



The definition of vitality—the perspectives of Dutch older persons

M. E. Jongeneelen^{1,2,3}, C. H. L. A. Wieringa^{1,3†}, W. P. J. den Elzen^{4,5†}, K. Langeveld², J. Gussekloo^{1,2,3} and Y. M. Drewes^{1,2,3*}

Abstract

Background Vitality is often mentioned in the context of successful ageing, however, there is still no consensus on the definition of vitality. Moreover, older persons themselves have yet to be involved in establishing a definition of vitality.

Aim To explore and describe how older persons define vitality, how they experience vitality, and what influences their vitality.

Method A qualitative study consisting of 33 semi-structured interviews with community-dwelling older persons (60+) in the Netherlands. The interviews were analysed using the thematic content analysis.

Results The definition of vitality that emerged from the interviews was “vitality is having the physical, cognitive, and social capacities to do what you want to do”. The important dimensions of vitality can be divided into their capacities and their drivers in life. The capacities consisted of physical, cognitive, and social capacities. Sustaining these three capacities was important for the preservation of vitality. Main drivers in life were autonomy, independence, and meaning in life. Their experience of vitality was mostly determined by the balance between their capacities on one side and their drivers in life on the other side. Furthermore, this balance, and therefore their vitality, could be impacted by their lifestyle, loss of social network, coping, and role models.

Conclusion According to older persons, vitality is determined by the balance between their capacities to do what



is a central part of successful aging, rather than merely being an influencing factor. They showed that successful ageing is not determined by objectively measured physical functions, but by the subjective satisfaction of the individuals themselves with their adaptation to physical limitations. They found that when using a biomedical perspective only 13% of participants had optimal functioning and could therefore be considered to be aging successfully. However, it appeared that 45% of the same participants considered themselves to be aging successfully after applying the psychosocial perspective.

One of the elements that greatly contributes to successful aging is vitality [1–3, 5–7]. A common complaint experienced by older persons is a decrease in their vitality; this decrease is an indicator of aging-related decline [8]. Declining physical health is considered to be the main factor that negatively impacts their vitality [9]. Research in younger populations showed additionally that being female, younger, single, obese, having less exercise and having a lower annual income or being currently unemployed, increased the risk on impaired vitality [10]. Besides, physical health, emotional health, participation in meaningful activities, mastering new skills and roles, and support and recognition from others contributed to emotional vitality [11].

Despite vitality being important for successful aging, we found no consensus about its definition in the literature. In biomedical discourses, the term vitality was used in relation to the level of energy for the maintenance of optimal homeostasis [12–14]. Bautmans et al. [15] developed a consensual working definition for vitality capacity as ‘a physiological state (due to normal or accelerated biological ageing processes) resulting from the interaction between multiple physiological systems, reflected in (the level of) energy and metabolism, neuromuscular function, and immune and stress response functions of the body’. In this view, vitality can be captured with measurements of the balance in energy intake and expenditures [12]

life, health, quality of life, and vitality from 1 to 10. These data were collected to be able to describe the characteristics of the participants.

And then I find one of the most challenging aspects of ageing: health. (Female, 75).

Their cognitive capacities were another dimension of vitality. The respondents valued being able to understand what is happening around them in the world. They wanted to stay interested in the world around them and to discuss that with others. For some this meant participating in a social club that centred around the discussion of societal relevant topics. A few participants expressed that their cognitive capacities were more important than their physical capacities. One of the male respondents phrased it as follows:

If you cannot maintain it cognitively or mentally, what good is a very healthy body? Yes, I mean that

is dynamic concept of vitality that emerged from the interviews was captured in the following definition: “Vitality is having the physical, cognitive, and social capacities to do what you want to do”. The definitions given by the participants ranged from a few keywords to an extensive explanation, as expressed by two interviewees:

A feeling of fitness that a person experiences depending on the mental and physical condition. (Male, 77)

When I look at vitality, I think that it is wanting to get the most out of life as possible. And of course, that's different when you're 18, I'm almost 73, but it still is to get the most out of it, depending on all the circumstances. (Male, 72)

Capacities

The capacities of vitality consisted of physical capacities, cognitive capacities, and social capacities. Almost all of the participants mentioned physical capacities as an important dimension of their vitality. Their physical capacities could be negatively impacted by disabilities or (chronic) illnesses and bettered or restored by receiving medication and/or medical intervention. This is especially applied for those that had to live with physical pain. Many participants experienced a fear of declining physical health but seemed to expect and accept a certain amount of (physical) decline with advancing age. They mentioned that the most important difference compared to when they were younger was that their health was no longer self-evident.

Drivers in life

Drivers in life encompassed according to the older individuals three dimensions: autonomy, independence, and meaning in life. The participants often expressed the desire to experience minimal boundaries in life and when doing activities that they want to do. The concepts of autonomy and independence were therefore considered important drivers in life. For the participants, the feeling of autonomy was based on the ability to make decisions themselves and thereby having a sense of control. This could range from what they were going to eat for dinner to making major life decisions.

Keeping the control myself to stay as vital as possible for as long as possible. (Male, 70)

Their independence was mainly seen in being able to do things by themselves and not needing help from others. Especially mobility, in the broadest sense, was frequently mentioned. This included being able to drive a car, living on their own, going wherever and whenever they wanted to go from getting groceries to traveling to foreign places, and being able to walk and ride a bike. Feeling autonomous and independent gave a feeling of freedom, and if either their autonomy or their independence would decline, the participants expected that their vitality would be negatively affected.

When you become dependent on others, then, yes, you are less vital. (Male, 76).

Respondent validation

The findings of this study were taken back for respondent validation to the Older Persons Advisory Board for Care and Welfare South Holland region North. The invited members could identify themselves in the findings of the study. The definition of vitality and its dimensions seemed complete to them. Also, the influencing factors on vitality seemed logical to them, and they could also identify themselves on how they maintained their capacities. One of the members expected a difference in definitions and dimensions of vitality between men and women. However, subsequent analysis showed that in this study older men and women did not differ substantially regarding the way they defined or preserved vitality.

Discussion

The aim of this study was to explore how older persons define and experience vitality, and what influences their vitality. The overall definition of vitality that emerged from the interviews with older persons was 'vitality is having the physical, cognitive, and social capacities to do what you want to do.' The important dimensions of vitality can be divided into their capacities and their drivers in life. The capacities consisted of the dimension's physical capacities, cognitive capacities, and their social capacities. Sustaining these three capacities was important for the preservation of vitality. Their drivers in life were composed of autonomy, independence, and meaning in life.

Their feeling of vitality was mostly rated by the balance between their capacities on one side and their drivers in life on the other side. When capacities decreased, vitality could be retained by adjustment of the drivers. This balance, and thus their vitality, could further be impacted by coping, lifestyle, loss of social network, and role models.

Comparison with existing literature

When comparing our definition of vitality by older persons to the one of subjective vitality from Ryan and Frederick being "the conscious experience of possessing energy and aliveness" [16], important differences have to be noted. The first difference is that vitality in the Ryan and Frederick's definition does not seem to be a continuum, but more a static state of being vital or not vital. Secondly, it does not take personal goals into account and lastly, autonomy and independence do not seem to fit into their definition. The beforementioned study by Westendorp and Schalkwijk [2] proposed to

with low subjective vitality might have expressed a different experience of their vitality, and therefore, their narrative could have helped to compose a more complete picture of the perspectives on vitality. Exploring the perspectives of older persons with lower subjective vitality is recommended for future research.

Conclusion and implications for research

Older persons define vitality as “having the physical, cognitive, and social capacities to do what you want to do”. Vitality is changeable and determined by the balance between their capacities on one side and their drivers in life on the other side. When these two sides of the balance correspond, vitality is regarded high. This balance can further be affected by lifestyle, loss of social net-