

HEALTH PROMOTION OF ELDERLY IN COMMUNITY

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ABSTRACT

Background: Population ageing is a global phenomenon, creating a growing need for effective community-based health promotion strategies that support healthy ageing and improve quality of life among older adults.

Objective: To discuss the role of community health promotion in enhancing the health, independence, and well-being of older adults living in the community.

Content: Health promotion for older adults focuses on enabling them to maintain functional ability, prevent disease, and participate actively in society. Community health nurses play a pivotal role through health education and counseling, screening and early detection of health problems, promotion of physical activity and mobility, psychosocial support, family and caregiver empowerment, and advocacy for age-friendly services. These interventions help address physical, psychological, and social challenges associated with ageing while promoting healthy lifestyles and preventing disability.

Conclusion: Comprehensive community-based health promotion strategies are essential for supporting healthy ageing and improving the quality of life of older adults. Collaborative efforts involving healthcare professionals, families, community organizations, and policymakers can enhance independence, social participation, and overall well-being among the elderly population.

Keywords: Health Promotion; Older Adults; Healthy Ageing; Community Health Nursing; Quality of Life; Community-Based Care.

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INTRODUCTION

Health promotion is defined as “the process of enabling people to increase control over, and to improve, their health” (**WHO, 1998**) and covers diverse methods and approaches at local, national, and international levels and is fundamental in the clinical work of various professions and voluntary groups alike (**WHO, 1984**).

Recently, international health promotion strategies targeting older adults have centered around the concept of healthy ageing—the creation of environments and opportunities that enable persons to lead later life as they desire (**WHO, 2020**). In order to promote healthy ageing for all, strategic work on increasing person-centered approaches in primary health services, responsive to the needs of the older adults, has been warranted along with multi-sectoral collaboration and meaningful engagement of older persons

Population ageing is occurring rapidly worldwide, with the proportion of older adults expected to increase significantly by 2050. [Noei H et al., 2017]. The increase in age may lead to difficulties in remembering specific details. Clear differentiation between normal aging and cognitive decline is crucial in determining the inability to successfully perform ordinary activities, such as forgetfulness and disorientation. The need for the elderly to engage in social participation as a significant indicator of QOL is of paramount importance. [**Ghasemnejhad M et al 2021**]

Lifelong learning and education for integrating the social and cultural conditions of the elderly are essential. Using educational programs that are compatible with the specific needs of the elderly can improve skills and promote a healthy lifestyle. [**del Pilar Díaz-López M et al 2017**]

Despite the many known health benefits of physical activity (PA), older adults are the least active citizens globally. Regular PA significantly decreases the odds of functional limitation, including “mobility-disability” and social disengagement. These broad-sweeping physical and social health benefits are crucial to maintain older adult independence. The quality and quantity of a person's social relationships are also strongly linked to mental health, morbidity, and mortality. When older adults are socially isolated, they are at an increased risk of loneliness, cognitive decline, depression, physical inactivity, and falling. (**Hawkley LC et al 2009**)

Health promotion of the elderly in the community focuses on enabling older adults to maintain functional ability, independence, and quality of life through preventive, educational, and supportive actions delivered where they live.

Key components include:

1. **Health education and counseling:** Community health nurses provide tailored education on nutrition, hydration, fall prevention, medication adherence, chronic disease self-management, and recognition of warning signs for conditions like hypertension, diabetes, and dementia. Counseling addresses mental health, loneliness, and coping with life transitions. Health education and counseling are essential components of community-based health promotion for the elderly, equipping older adults with knowledge and skills to manage chronic conditions, adopt preventive behaviors, and maintain independence. Community health nurses deliver tailored education on nutrition, medication adherence, fall prevention, and NCD self-care, while counseling addresses psychosocial needs, readiness to change, and health literacy barriers. Structured programs using frameworks like the K-shape model—covering knowledge, comprehension, inquiry, decision-making, and implementation—significantly improve health literacy and preventive behaviors among older adults. Individualized counseling also enhances self-efficacy and engagement with care. These strategies empower seniors to make informed choices, reduce hospitalizations, and support active aging within their communities (**Lo et al., 2025**).

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2. **Screening and early detection:** Regular community-based screening for blood pressure, blood glucose, vision, hearing, depression, cognitive decline, and frailty helps identify risks early. Nurses coordinate immunizations such as influenza, pneumococcal, and shingles vaccines. Screening and early detection are key components of community-based health promotion for the elderly, enabling timely identification of frailty, chronic diseases, and functional decline before disability occurs. Community health nurses conduct multidimensional assessments—including nutrition, cognition, mobility, psychological status, and health literacy—often using brief tools like the Frailty Questionnaire, Chair Rise Test, or culturally adapted EHSAS tool during home visits or primary care outreach. Early detection allows tailored interventions such as exercise, nutrition support, or referral to comprehensive geriatric assessment, preventing deterioration and hospitalizations. Integrating screening into routine community services supports healthy aging and maintains independence among older adults living with chronic conditions (**Hill et al., 2024**).
3. **Physical activity and mobility:** Organizing group exercises, walking clubs, or tai chi reduces fall risk, improves balance, and supports cardiovascular health. Home safety assessments and modifications prevent injuries. Physical activity and mobility are fundamental components of community-based health promotion for the elderly, preserving functional ability, preventing frailty, and reducing mobility disability. Community health nurses promote tailored, multicomponent programs—combining aerobic, strength, balance, and flexibility exercises—that align with WHO recommendations of 150–300 minutes of moderate activity weekly plus muscle-strengthening and balance activities. Group-based park programs, walking clubs, and home exercise supported by peers or mHealth tools increase adherence and social engagement. Built-environment partnerships and age-friendly spaces further enable access. Regular physical activity significantly reduces risk of major mobility disability, improves balance, and enhances mental well-being, allowing older adults to maintain independence and quality of life (**World Health Organization, 2023**).
4. **Social engagement and psychosocial support:** CHNs facilitate senior clubs, peer support groups, and intergenerational programs to reduce isolation and depression. They link elderly to community resources, day care centers, and volunteer networks. Social engagement and psychosocial support are vital components of community health promotion for the elderly, reducing loneliness, depression, and cognitive decline while enhancing resilience and quality of life. Community health nurses facilitate group activities, peer support, befriending, and intergenerational programs that foster belonging and purpose. Psychosocial counseling addresses stress, grief, and coping with chronic illness, while connector services link seniors to resources, digital tools, and volunteer networks. Interventions that simultaneously promote social participation and physical activity yield synergistic benefits for mental well-being, functional status, and social capital. Actively engaged older adults report significantly higher mental and physical health-related quality of life, demonstrating that social connections are protective for healthy aging (**Tcymbal et al., 2022**).
5. **Family and caregiver empowerment:** Nurses train families on elderly care, safe transfers, pressure sore prevention, and palliative needs, reducing caregiver burden and hospital readmissions. Family and caregiver empowerment is a key component of community health promotion for the elderly, strengthening the capacity of relatives to provide safe, effective home care while protecting their own well-being. Community health nurses implement empowerment programs combining intensive counseling, education, skill training, and telephone support to improve caregiving appraisal, self-efficacy, and positive attitudes. Empowered caregivers report better coping, reduced burden, and enhanced health-promoting behaviors for elders, as

family care operates through self-efficacy and aging expectations to influence outcomes. Interventions that build caregiver knowledge, decision-making, and resource access also reduce hospitalizations and support aging in place. Strengthening caregiver capacity is thus essential for sustainable community elder care (Yoon & Kim, 2020).

6. **Advocacy and coordination:** CHNs collaborate with local leaders, NGOs, and primary care to ensure access to social pensions, transport, and geriatric-friendly services, addressing social determinants of health. Advocacy and coordination are key components of community health promotion for the elderly, ensuring equitable access to services and person-centered care. Community health nurses advocate for older adults' rights, social inclusion, and age-friendly policies while coordinating multidisciplinary teams, social services, and family resources to address complex health and social needs. Through partnerships with local governments, community organizations, and volunteers, CHNs facilitate integrated care pathways, reduce barriers to physical activity programs, and connect seniors to preventive and supportive services vital for aging in place. Effective advocacy addresses ageism, strengthens community capacity, and empowers older adults to participate in decision-making, improving overall health, well-being, and social connectedness (Sims-Gould et al., 2020).

CONCLUSION

Health promotion among older adults is essential for maintaining independence, functional ability, and quality of life. Community health nurses play a central role through health education, screening, physical activity promotion, psychosocial support, caregiver empowerment, and advocacy. Strengthening community-based interventions can facilitate healthy ageing and reduce the burden of chronic illness and disability among the elderly population.

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