



Physical Health and Well-being: A Life Stage Model

Alexander Kelly, Sheila Panchal and Stephen Palmer



Abstract

People's physical health and exercise behaviour is often considered without paying attention to the wider context of their life stage. Coaches and coaching psychologists can benefit from an awareness of life stages both in terms of psychological and physical health. This article focuses on the latter, and can be useful to coaches and psychologists working in a range of settings.



Keywords: Life stage model, physical health, well-being, exercise.

Introduction

At each life stage there will be a number of factors influencing a person's physical health and attitude towards it. People tend to experience different pressures, motivators and health issues according to their life stage. These include external factors (e.g. work/family pressures, time, and income available) as well as the impact of the ageing process.

Life stages

Lifespan developmental perspectives have been considered in terms of individual sport and exercise behaviour (Weiss, 2004), and have been applied to physical activity in examining community and environmental interventions (see Keegan et al., 2010). Developmental transitions experienced by athletes have also been explored (e.g. Wylleman and Lavallee, 2004).

Figure 1 outlines the main characteristics and motivators at each life stage, and some linkages. It is adapted from a model of life transitions and stages which has been applied to the field of coaching and coaching psychology (Palmer and Panchal, 2011), which focuses on psychological well-being and how coaches can support individuals at these times. It draws on the existing work in the field of physical health during the lifespan (e.g. Weiss, 1994). Whilst this model seeks to offer useful insights, there will be exceptions. It is important to keep individual differences in mind and avoid stereotypes.

Childhood

During childhood, parents and schools represent key influences. Parents, teachers, and siblings can be powerful role models during this stage (Jarvis, 1999).

A child's attitude towards exercise and sport is often shaped during these years, positively or negatively. The childhood experiences of sporting elation or humiliation can have a long term effect; predisposing children towards or away from sport and physical activities.

Mention should also be made to the influence of technology impacting childhood health and fitness which may discourage physical activity.

Teenage

During teenage years the influence of peers and the media becomes more pronounced. Young people are likely to be more concerned with how they are perceived; their appearance become more important (e.g. Shroff and Thompson, 2006). Exercise and health behaviour at this stage is more likely to be motivated by aesthetics, rather than health.

Celebrities, pop stars, film stars, and models represent role models to a much greater degree. These role models are often unrealistic. Increased use of airbrushing in magazines, and the lifestyle commitment required to look a particular way (use of nutritionists, personal trainers, and amount of time and money dedicated) are not fully appreciated. This lifestyle observed by young people can result in unrealistic expectations (e.g. Derenne and Beresin, 2006). Eating disorders, body dysmorphic disorder, and the use of steroids and body building supplements amongst young people have been increasing in recent years.

Twenties

During the twenties, attitudes and behaviour towards health and exercise are likely to be influenced by career, social and relationship factors. Individuals can take a variety of paths in this life stage, ranging from establishing a career, to travelling the world. This can mean that exercise is de-prioritised. Time pressures associated with establishing a new career, or geographical change, often do not sit well with maintaining a structured exercise programme and making healthy lifestyle choices.

Generally speaking, old age and mortality are likely to be considered rarely by individuals in their twenties.

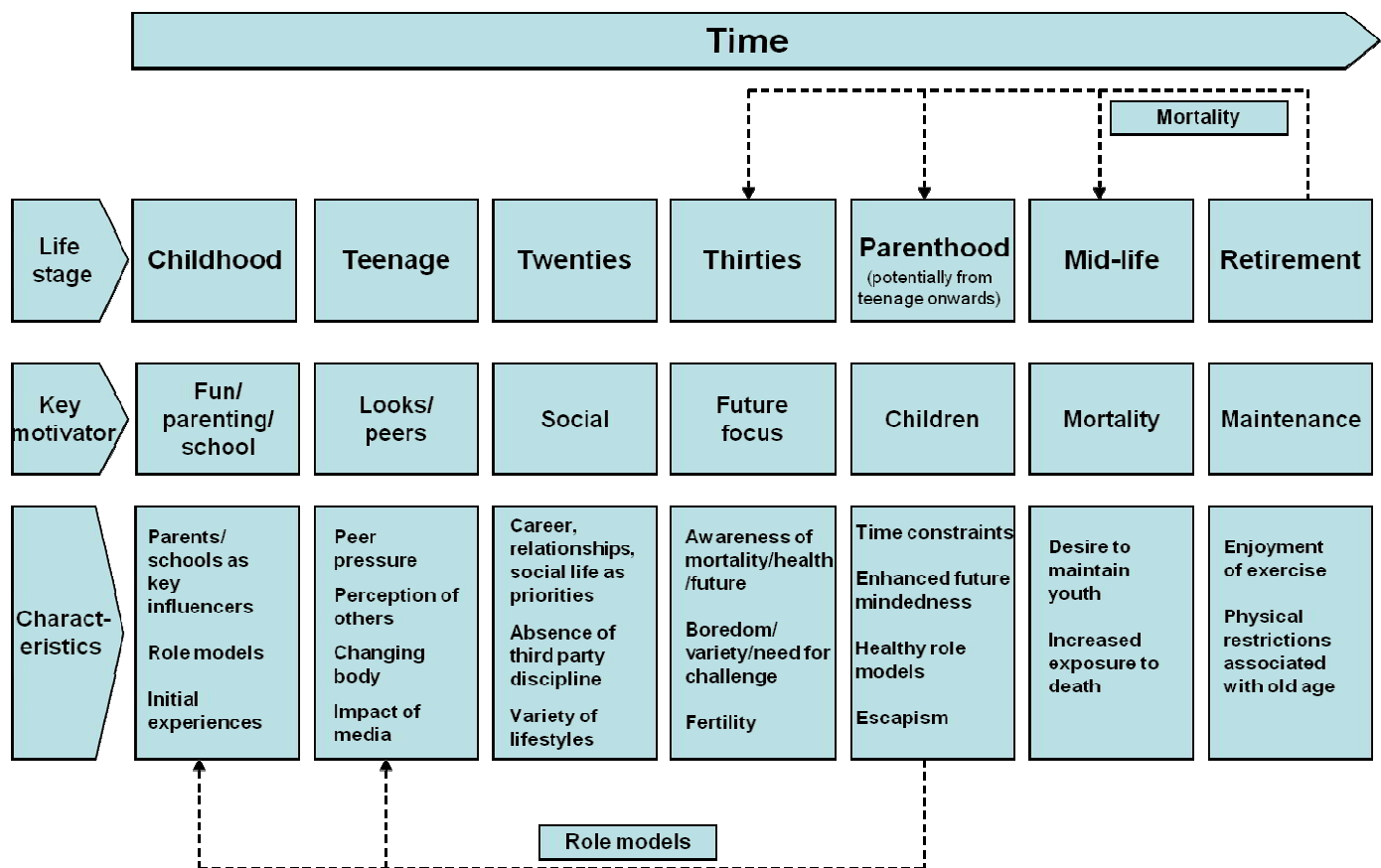


Figure 1: Life stage model and physical health factors (adapted from © Palmer & Panchal, 2011)

Thirties

During the thirties, individuals are more likely to have established careers and relationships. There will be greater focus on the future, often for the first time. Individuals begin to consider their mortality, long-term health, and purpose (Panchal and Jackson, 2007). As a result, exercise will be prioritised to a greater degree by many. It may be used as a coping strategy for dealing with stress.

Individuals in this stage can find themselves bored and in need of a challenge, as careers plateau. The rising popularity of certain endurance events, such as triathlons, is driven by individuals in their thirties (1). The mental (in addition to physical) discipline required for completing such events (coupled with greater disposable income to fund participation) come with age. The use of the term 'weekend warriors' is most relevant to individuals in this life stage.

Parenthood

Parenthood can cross life stages. It can start from the teenage years onwards, and does not apply to everyone. It can be an intentional or unintentional life event.

For many parents, finding the time to dedicate to a structured exercise plan and make healthy lifestyle choices is difficult (e.g. Nomaguchi and Bianchi, 1995). Individuals are likely to reduce the amount of exercise taken, or need to think more creatively about how to exercise, given their extra commitments. For instance, exercising with the children (if older), and mother and baby exercise classes.

For some, parenthood represents a motivator to health and exercise, through greater future-mindedness and consideration of long term

health and mortality. Also, parents may become role models through exercise and healthy lifestyle choices (e.g. healthy eating).

Mid-life

During mid-life individuals are likely to experience the death of friends or significant family members. They are also more likely to be diagnosed with serious illnesses or conditions during this stage. How individuals choose to deal with such experiences is varied; some taking a more careful and considered approach to their health, some continuing with bad habits or perhaps even indulging more than previously to live their remaining time 'to the full'.

The manner in which individuals have lived up until this point will most likely determine their current health and fitness in quite profound ways; serious illnesses such as heart conditions, joint problems, and diabetes. Basic functional fitness is likely to be compromised for the first time for many (e.g. ability to climb stairs, lift heavier objects, walk certain distances).

With some disorders such as cardiovascular disease, patients are usually recommended to increase their daily exercise. Health and wellbeing coaching facilitates patients and clients to achieve their health-related goals and people within the mid-life stage may find it beneficial (Palmer et al., 2003).

Retirement

For those individuals that have maintained a reasonable level of health and fitness, the retirement years can be a time to enjoy. For longevity older people are encouraged to walk. There is likely to be far

less time pressure and (provided that basic functional fitness is good) many pastimes and pursuits can still be enjoyed.

Figure 1 notes some links between the life stages. Mortality becomes an increasing focus from thirties through to retirement. There is also a link between parental role models as key influences in the childhood/teenage years, and the desire to be a positive role model as a health motivator in parenthood.

Additional analysis could further explore how generational and social trends influence physical health behaviour at each life stage. For example, technology plays a major role for today's children, which may contribute to the rising rates of childhood obesity.

Conclusion

Whilst there are numerous factors affecting individual health and well-being, certain factors are more prevalent at each life stage; motivators, influences and characteristics change as transitions are made into a new stage. The context of life stage, and the current (and future) influences upon life stages, should therefore be considered.

(1) *'Of the 1376 to complete Ironman Australia 2010, 959 were men aged between 30 and 54'.*

'Ian Cornelius, president of the Australian Ultra Runners Association, says that of the association's 360 members, 234 are over 40'.

References

- Derenne, J.L. and Beresin, E.V. (1996). Body Image, Media, and Eating Disorders. *Academic Psychiatry* 30:257-261, May-June 2006.
- Jarvis, M. (Ed.) (1999). *Sports Psychology*. London: Routledge.

Keegan, R.J., Biddle, S.J.H. and Lavalley, D.E. (2010). It's not how old you are, it's where you're at in life: Application of a life-span framework to physical activity in examining community and environmental interventions. *Sport & Exercise Psychology Review*, 6 1, 19-34.

Palmer, S. and Panchal, S. (Eds.) (2011). *Developmental Coaching: Life Transitions and Generational Perspectives*. London: Routledge.

Nomaguchi, K.M. and Bianchi, S.M. (1995). Exercise Time: Gender Differences in the Effects of Marriage, Parenthood, and Employment. *Journal of Marriage and Family*, 66, 2, 413-430, May 2004.

Palmer, S., Tubbs, I. and Whybrow, W. (2003). Health coaching to facilitate the promotion of healthy behaviour and achievement of health-related goals. *International Journal of Health Promotion and Education*, 41, 3, 91-93.

Panchal, S. and Jackson, E. (2007). 'Turning 30' transitions: Generation Y hits quarter-life. *The Coaching Psychologist*, 3, 2: 46-51.

Shroff, H. and Thompson, K.J. (2006). Peer Influences, Body-image Dissatisfaction, Eating Dysfunction and Self-esteem in Adolescent Girls. *Journal of Health Psychology*, 11, 4: 533-551.

Weiss, M.R. (Ed.) (2004). *Developmental Sport and Exercise psychology: A Lifespan Perspective*. Morgantown, WV: Fitness Information Technology.

Wylleman, P. and Lavalley, D. (2004). A Developmental Perspective on Transitions Faced by Athletes. In M.R. Weiss (Ed.), *Developmental sport and exercise psychology: A lifespan perspective*. Morgantown, WV: Fitness Information Technology.

© Alexander Kelly, Sheila Panchal and Stephen Palmer, 2010

Biographies:

Alexander Kelly has a BA in Economics from the University of Leeds, and is a qualified personal trainer. He has competed in a range of endurance events including triathlons and marathons.

Sheila Panchal CPsychol is a Registered Occupational Psychologist and co-author of 'Turning 30: How to get the life you really want' (with Jackson, 2005). Her academic and practitioner interests focus on transitions, and she is co-editor of a new book titled 'Developmental coaching: Life transitions and generational perspectives' (with Palmer, 2011).

See earlier article for Prof Stephen Palmer's Biography.

Correspondence:

Alexander Kelly
E-mail: alexkelly74@hotmail.com

Sheila Panchal
E-mail: sheilapanchal@hotmail.com

Prof Stephen Palmer PhD
Centre for Coaching
156 Westcombe Hill, London, SE3 7DH, UK
Email: palmer@centresofexpertise.com
Website: www.centreforcoaching.com