

Behavioral Research and AARP

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A few years ago, a watershed book, *The Mature Mind* by renowned health researcher Gene Cohen, challenged prevailing assumptions about mental aging. Grounded in the latest studies of the brain and behavior, *The Mature Mind* offered scientific proof that as we get older, our minds *improve* —that developmentally, our brains continue to open up new fronts of thinking. The happy consequence, of course, was that we could approach “old age” with renewed confidence that growth, positive change, and vibrancy were not only possible but likely. Basically, the book offered a template for reinventing the way we age.

AARP took considerable interest in Cohen’s research as it backed what we call “active aging,” and it was a useful resource for helping people maintain mental acuity. Most of all, though, *The Mature Mind* affirmed something that has always guided AARP’s work: investment in behavioral research stimulates entrepreneurial thinking, which in turn leads to innovative programs, and expanded lifestyle choices for people who are 50+.

At a time when boomers are reshaping markets, transforming the workplace, and seeking ways to leave their mark on the world, this link between behavioral research and “being entrepreneurial” is more important than ever at AARP.

Behavioral research lays the groundwork for creatively pursuing the twin goals of improving the quality of life for all as we age and enhancing the public good. Behavioral research informs our views on fundamental questions about what makes us tick. How do we make decisions? What motivates us? How are we persuaded to take action now to prevent problems later?

Addressing such questions allows AARP to know more about what works in health care, financial security, and lifestyle. As a membership organization, we provide credible, practical information to our 40 million members. So we are adept at managing the “translation problem” — that is, delivering research data in useful ways.

For AARP, behavioral research is a gateway for behavior change. It is one thing to use sound scientific evidence to promote the virtues of physical activity. It is quite another to leverage the evidence into structured, self-directed physical activity initiatives that empower people to lock in behavior change over time.

Our approach is to create “enabling environments” for people, whether we are pushing for broad health care reform or encouraging better diets. Nearly every AARP initiative that aspires to behavior change of any sort begins with the research and then provides the tools, the resources, and the guidance to take meaningful steps.

Applying Behavioral Research

AARP's embrace of behavioral research has contributed to the betterment of America's aging population in a number of ways.

When I came to AARP, for example, I saw an opportunity to use the organization's brand recognition as a platform to get adults to be healthier, as well as to make wellness and prevention top national priorities. Now, a signature track of AARP's work is the promotion of healthy lifestyles and physical fitness.

The Active for Life program, which ran from 2001 to 2004 and eventually spawned AARP's successful walking initiative, marked a milestone in AARP's conversations on physical fitness and behavior change. Active for Life research examined what it takes to get people engaged in a physical activity. Although many activities were tried, walking emerged as the centerpiece activity because the research indicated that people could more readily work it into their lifestyles, leading to the possibility of behavior change. Thousands now participate in the walking program.

Research that preceded the debut of AARP's Wise Use of Medication initiative looked at what behaviors could be influenced so that people would be responsible with their medicines, a priority issue for AARP and for a nation in which three-quarters of Americans over 45 take prescription drugs. We have since been proactive in urging consumers to adopt three behaviors that enable wise use: 1) keep a personal medical file, 2) know what questions to ask your doctor, and 3) research the medications you take.

AARP's Stay Sharp program is designed around state-of-the-art research on brain functioning and promotes cognitive fitness among the 50+ community. Stay Sharp combines the insights of rigorous research with the delivery of accessible, user-friendly information to members on maintaining brain health and understanding memory loss, dementia, Alzheimer's disease, and other aging-related conditions.

At an AARP retirement conference last year, Harvard economics professor David Laibson drew on brain studies to show that adults tend to spend for instant gratification, rather than save or invest for the future. The research found that automatic enrollment by employers of workers in 401(k) plans increases participation, and that automatic increases of employee contributions help build retirement savings. These findings fortify AARP's call for employers to enroll workers automatically in retirement plans.

More broadly, AARP has welcomed opportunities to use behavioral research to frame public messages. Take, for example, the message that high-fiber diets may reduce the incidence of cancer, a message backed by primary research from the Centers for Disease Control and Prevention (CDC) and the National Institutes of Health (NIH). AARP broadcasts this message to millions via multiple channels and has parlayed it into a slate of nutritional activities. The organization's reputation as an honest broker ensures that research data will be delivered as user-friendly information that people value.

AARP and Behavioral Research: A Long-Term Relationship

What does the future hold for enlisting behavioral research in the service of AARP's work? One promising direction is online information leveraging.

Designing and offering access to online tools that enable people to acquire, process, and use information to make lifestyle changes is of great interest to AARP. This kind of initiative delivers the benefits of behavioral science research by converting it into comprehensible, interactive forms. It creates economies of scale and enhances AARP's ability to catalyze behavior change at the aggregate level.

An example of this is the current development of an online physical activity assessment tool that provides users with a physical fitness profile and practical options for taking the next step toward a healthier lifestyle. AARP has been discussing the value of such a tool with NIH and the CDC in terms of assessing cognitive functions, such as balance, or other metrics that may serve as screens for the appearance of early Alzheimer's disease.

AARP's long-term commitment to grounding its work in behavioral research is vital and strategic. For example, we are tracking current research on the health effects of age stereotyping. The research suggests that negative images of aging produce negative effects on health outcomes and that negative self-images (of oneself as an older person) also produce negative effects on health outcomes. Such research advances AARP's efforts to counter negative images of aging by supporting active aging, dispelling myths about aging, and bolstering products and services that present positive images of older people.

The revolution to change the face of aging in America is gathering momentum because we know more about the 50+ community and what it wants. And we know more about the 50+ community because of behavioral research. ?