



ORIGINAL ARTICLE

The Review and Extension of Fitting Strategies of Communities Centers for elderly

Farhad Zojaji¹ and Masoomeh Shemshad^{2*}

¹Department of Urban Planning, Shahr-e-Qods Branch, Islamic Azad University, Tehran, Iran.

^{2*}Member of Young Researchers and Elites club, Science and Research Branch, Islamic Azad University, Tehran, Iran

*Corresponding authors E-mail: Shemshad.m87@gmail.com

ABSTRACT

Elderly-friendly city, is a city that both seniors and ordinary citizens have the same rights and the city is not stranger with elderly and design codes and standards are observed for its for appropriate making. Due to the increasing number of elderly people in different communities, the importance of this research would be evident. The purpose of this study was to fit and at the same time address the problems of the elderly due to urban design. The current study was an applied research and descriptive-analytical method was applied in the study. Data collection was performed by libraries, documentary and field study. Based on the findings of the research the appropriate design criteria for community centers have been achieved in a manner that were responsive to the needs and rights of the elderly. Finally, guidelines and recommendations have been discussed that if implement an effective step towards this group of citizens, in case of mental and physical health would be done.

Keywords: elderly-friendly city, neighborhood center, making appropriate.

Received 20.12.2014

Revised 11.01.2015

Accepted 12.02.2015

INTRODUCTION

The main purpose of this paper was to meet the needs for making space proper for the elderly. Providing facilities to compensate the physical and mental limitations for elderly, lead to maximizing their general public health. Paying attention to the needs, interests and behavior patterns for the elderly, the design and improvement of public areas such as neighborhoods can provide attendance, activity and participation folder people and not only lead to a sense of satisfaction and mental health benefits, but also promotes their social relations and reduces their diseases because of their physical activity. So, the consciously design of elderly living environment and equipping it leads to their more attendance of these classes in the society. In Iran, Bahrain and Khosravi, 2011 have performed researches on the factors influencing health status based on physical space criteria. Nozari, 2009 in accordance with the principles of the design of open spaces, has provided residential neighborhoods offer. Based on the theory of Burton, 2012, the challenges of the making appropriate and to be available the environment outside the home for all people of all ages and abilities, it may be hard work, but currently it is very necessary. If roads are not designed to meet the needs of the elderly, many, especially those who are weak or have dementia, will be seriously imprisonment in their homes. Experts believe that any attempt to overcome the loneliness of the elderly, is a barrier against wave of complex psychological problems of the elderly and the other lead to improve their self-esteem [1-3]. Based on the theory of Parkinson, 2001, a neighborhood is a space that could enhance mobility due to the presence of economic and social activities such as visiting friends and the strengthening of identity and belonging. The neighborhood can be a reflection of its inner values, economic, social and environmental. In England, housing associations do supervision and regulation of social housing schemes. Their goal is to provide good quality housing in attractive, safe, clean and suitable environment for everyone, including seniors and people with disabilities. Where they can easily access to schools, jobs, services, leisure and relaxation facilities and equipment [3,4].

METHODOLOGY

The current research is an applied research and the methods of it were observation, interviews and documentary studies. In this study, the initial recognition of documentary studies was carried to the burial issue. The objectives of the study were explained and considering the objectives of the study, two issues were examined.

1. The concept of age-friendly urban spaces with an emphasis on making it particularly neighborhood center suitable for them
2. To provide solutions to meet the needs of the elderly, the promotion of physical and mental quality of life.

Aging is one of the most important stages of life and with the progress of science and health situation, elderly in different communities is increasing. The increasing number of elderly people on one hand and religious and cultural beliefs based on honoring the seniors on the other hand, reveals the importance and necessity of research in this field [5, 6].

The elderly period

Aging period begins of 65 years old [7,8] and is associated with physical, sensory, mental, or costs disabilities. These weaknesses may be entitled disability. Aging affects a person's ability and can cause physical decline, decreased ability to move, cause confusion etc. In contrast, elderly can be the period of vitality, determination, will, great, great honor to. The most significant demographic change, in the twenty-first century is population aging that has been affected all countries, including Iran. Developed countries in order to solve the consequences of aging have proposed solutions but if third world countries such as Iran (approximately 8% of Iran are the population over 60 years) do not apply necessary policies to nursing care planning, in the near future will face with socio-economic and health crises [7-10].

Physical and psychological characteristics of elderly

Aging process is a gradual aging of the body's systems, and changes a healthy adult to a weak person with a decline in physiological capacities and increase the susceptibility to many diseases and death [11,12]. But despite the changes in the physical and health problems in this course of life, elderly in the case of psychosocial and social needs are similar to the middle age adults [13,14]. The elderly in most cases still interested in continuing their previous activities, but decrease in social interaction in old age is because the community in contrast of their willing, keep the elders away [15-17].

Elderly health

Since many diseases and aging problems cause by unhealthy lifestyles, the basis of their health and quality of life dimensions should be on using the correct method of establishing from the earliest stages of life as well as by providing appropriate training and participation of the elderly in the family, move to the community to be healthy and successful life [18].

Threats and Problems of the elderly

Problems and threats in the elderly due to issues such as sexual diseases, loss of sensation (such as visual, auditory and sensory), communication problems (such as the low ability to speak and understand and stuttering), cognitive disorders, sedentary lifestyles and etc. today, the health problems are not only lead to infectious diseases but the main cause of morbidity and mortality are due to unhealthy lifestyle and also a growing trend increase in the elderly population in the world and Iran and issues resulted because of them as an important part of the society clarifies priorities in this case [19-23]. Alzheimer's disease is of the known diseases that is known to cause elimination of wisdom, and is a progressive and irreversible brain disorder that effect on cognitive function (memory, attention, language, visual - spatial planning and decision-making), character, the content of thought, perception and behavior. Alzheimer's disease is the fourth leading cause of death in Western countries that before it some diseases including cancer and stroke have been located [24]. Age, physical changes, mind and psychology cause these changes often include several weaknesses in the brief hearing, vision, skill, movement and memory and effect on the ability of the elderly to use the facilities in the different environments [25]. Improve the living conditions, health care, increasing life expectancy have led to the phenomenon of aging of societies. This increasing in elderly population needs paying attention to the guidelines for promotion of health, health, welfare, rehabilitation and enhancement of the quality of their life [26-28].

a) Treatment of Loneliness: The successful treatment of loneliness possibly decreases the serious side effects such as depression; an increase of social contacts can promote the health of the elderly [8-11]. Some believe that loneliness therapy is development of mechanisms to deal with solitude [6,28]. Studies show that adopting a healthy lifestyle even in later years of life can increase life expectancy and reduce illness and disability and health care costs. Aging is not a disease, nor does poverty, loneliness threaten elderly [29-31].

b) Improve the self-esteem of the elderly: a review of the available evidence indicates that the loneliness of the elderly is the origin of abnormal mental states such as depression, suicide and severe disappointment, and loneliness [32-35]. Experts believe that any attempt to overcome loneliness of the elderly, is the barrier against the wave complex psychological problems of the elderly and improve their self-esteem [33].

c) Developing a sense of joy and happiness in elderly people: if elderly are happy, they see the world a safer place, they will have a sense of cooperation and helping others and will process the data in such a way that they lead to more happiness.

d) creating opportunities for reminiscence: telling reminiscence make people sense that they are valuable with more competent[24] according to the idea of Jonsdottir, 2001 group reminiscence has innate ability to reduce social isolation, improve performance, cognitive decline, depression, increased self-esteem, life satisfaction and strengthen the value of its own. In this case, study of Cunez and Sooltitz, 2007 has shown that reminiscence lead to raise the level of life satisfaction, prevent or reduce depression, promotion Social interactions, reduce chronic pain, cognitive orientation, as well as help to improve relations in job and family. Research of Chiang, 2009 showed that reminiscence has significant effect on reducing depression in elderly people. Therefore, it seems that reminiscence by improving the cognitive function and cognitive promotion of lead to appropriate coping with the problems of life; On the other hand, by increasing life satisfaction and self-esteem, depression reduces. By promoting social interaction and the use of reminiscence as entertainment for leisure, time can reduce loneliness and depression in elderly people.

e) Creating the right to participate actively in the community for the elderly: Elderly is a biological reality that was existed throughout the history and in recent years, along with the knowledge of "aging treatment" other science called "Elder recognition" aging process has been generally examined. This science is a comprehensive study of the aging mechanisms and processes of aging and researches but regardless of biological issues related to seniors, one of the most important issues in this area is the risk of marginalization and exclusion from economic, personal, actively participation and social right sin society [7,13-15].

f) The necessity of designing inclusive spaces: As Lavery and others expressed, designers should be aware of the fact that designing for individuals (average physical and mental conditions) has been outdated, and the challenge for designing a suitable street and usable for all savory so that the final design for anyone whether young or old, strong or weak, not be dangerous [5].

g) The public space: Public space is as a common bed that people do their functional activities and ceremonies that are members of the connective in it even if it is a normal cronyism or periodic public space festival that are scenes that the collective life, is displayed [14-16]. Public space is a space where we share with strangers, people who are relatives, friends and colleagues. It is a space for politics, religion, business and sports, space for peaceful coexistence and non-personal conflicts [5].

h. Neighborhood

Rising growth of urbanization and the formation of a new scale of urban growth in last decade has made the city and modern urban development to face with new challenges such as increased abnormalities in socio - economic and overall quality of life. Because of the extent and the nature and complexity of urban issues, the need for attention to interactions holistic and sustainable solutions to their problems, seems inevitable [23,33]. Neighborhood is a place for socialization and mutual aid supports. Neighborhood atmosphere can stimulate presence of economic and social activities such as visiting friends and buying groceries every day. Built environment and social organization can be very close to each family. This environment can reinforce the identity and sense of belonging to the neighborhood. Therefore, it can be a reflection of his inner values, economic, social and environment condition [7].

The role of community centers in life

from the past, residential neighborhoods in cities, were as urban life cells and played an important role the lives of their inhabitants. In the past, urban neighborhoods were places to gather people with different characteristics of ethnic, religious, economic, social, etc. Following the gathering of most people with a common characteristic in one range, the part of the town that had a specific identity led to distinguish it from surrounding tissues[8].

Appropriate methods of neighborhoods

To enhance the quality of urban spaces and create opportunities for increased social interaction among the elderly, standards and environmental parameters are explained in Table 1 that finally encourage seniors to participate in the public sphere, and provides methods for adjusting the neighborhoods.

TABLE 1: CRITERIA AND ENVIRONMENTAL PARAMETERS AFFECTING THE ELDERLY PARTICIPANTS IN URBAN OPEN AREAS AND APPROPRIATE METHODS OF COMMUNITY CENTERS (SOURCE: AUTHORS)

Appropriate methods	Standards and environmental parameters
Creating varieties in space performances in the neighborhood center	Vitality
Neighborhood should accept a wide range of audiences (Including the elderly, youth, children, etc.)	
Creating full of trees and natural elements	
Increasing duration of audiences contacts in the neighborhood	To accept presence
Diversification of hours of attendance	
Increasing range of groups who use the space	
presence of uses absorbing population	
rich mix of uses that increase the contacts (social interaction)	
Enabling social monitoring on public spaces of neighborhoods	Security
boarding applications	
There impaired users to use the users at different times of the day	
Reduce black spots	
Proper lighting of neighborhood	Safety
Adjusting the sidewalks	
Creating spaces with environments that are friendly	Memorable
Presence of locations and elements in the spaces that are memorable	
Communities should have the necessary permeability	junction of accessed network connection and moving walks
Enabling public access (bus, subway, taxi, etc.) to achieve public spaces	
Standard permeability radius respect to the subway and bus	
Easy access from place to place	
Standard permeability radius respect to parks and public spaces	To be close to parks and public spaces
Bicycle and pedestrian paths suitable slope	Appropriate infrastructure for walking and cycling
Development of appropriate width of sidewalks and bike paths	

Favorable impact of neighborhoods on quality of life of elderly

Researchers have shown that older people when go out, are faced with different emotions and can have different feelings on different days, although it was clear that the majority of them enjoy it [4-7].

Life satisfaction and social support

Life satisfaction in older people can have access to a key and important resources of life and the sources are defined as material, social or personal characteristics that elderly are belonged to it that can be defined as the promotion and protection of biological resources because these resources can help them achieve their personal goals and meet the basic needs of the physical and psychological lower [12-17].

Vitality, enjoyment and social interaction

One of the important advantages of going out and walking on the local streets is pleasure and joy from it that will help to elevate the public joy [7]. Contact or communication that occurs in the going can be greeted or talk or just a smile, but this could create especial changes in people, in particular those who are introverted and the possibility real relationship with external world external creates. Researchers have shown that social interaction is very effective for mental health and happy life and is an important contribution to improve the quality of life [7]. Depression in older people living in nursing homes relatively is high. Part of this may be due to the loss of the ability to go out and tour of the site. In elderly, there are understanding and appreciating of the nature, trees, plants and wildlife living [7].

Feeling of freedom and independence

Participants had ideas that "I feel like I am in charge of my own and the world belongs to me only for a short time". This shows how being able to go to the local streets and the neighborhood for the elderly, especially those who have dementia is important [7].

Feel valued and respected

Going out of the house and the use of local streets and do something simple are big steps towards regaining a sense of value and respect [7].

Fresh air and exercise

No doubted, the fresh air and exercise have positive influences on physical health and spiritual vitality of older people [18]. People with dementia, needs mental and physical exercises to keep their minds and eyes active, regardless of the reasons why it is difficult to move out of the house. Result of poor physical, social isolation and low self-esteem and lack of independency can make disable both physical and psychological conditions. As, Robson, 1982, suggests even if the only normal activity is going out of the house. It is possible to be vital for the quality of their lives and even to preserve the independency and dignity of breath. About one million older people reported that they feel that they are trapped in their

homes. However, the positive effects of fresh air and exercise, social interactions, and even just going out and seeing themselves among people on the street, should not be underestimated [7].

GUIDELINES AND RECOMMENDATIONS

Regarding the results of investigations and emphasizing on them and field studies of Yousefabad neighborhood of Tehran elderly, the table 2 has been explained. In the table, criteria and guidelines to increase the quality of life in the community centers, and the effects of these strategies on the lives of the elderly are provided that would be helpful.

TABLE 2: CRITERIA AND GUIDELINES FOR INCREASING AND IMPROVING THE QUALITY OF LIFE OF THE ELDERLY IN COMMUNITY CENTERS (AUTHORS)

The impact on life of elderly	Strategies for improving the quality of life of the elderly	Criteria
Social interaction and loss of feeling alone	Increase the functional diversity in public spaces of neighborhood Neighborhood Public Spaces for different age groups, especially the elderly	Paying attention to the district center (place of assembly and collective action)
Mobility and prevent disability due to lack of physical activity	Create sports programs regular and in group Suitable vegetation in public spaces of neighborhood	Social communities
Easy to access and orientation and remove the fear of getting lost	Increasing the quality of lighting in public spaces, neighborhoods and reduce black spots	Equipping public areas of the neighborhood with good urban furniture
The opportunity to meet, talk, relax and ...	Design of various areas for sitting collectively or individually	
Eliminating the fear of falling and creating a sense of security	Appropriate Flooring Increase the safety of pedestrians in the roadway Paying attention to the signs and symptoms and their proper placements	appropriate design of pavements for the elderly
Creation of life and vitality in elderly Social interaction	Holding street displays Create a sidewalk restaurants Street festival	Cause happiness, vitality and joy in the elderly
Creating a pleasant feeling to the environment Create opportunities for seniors to participate in all seasons to spend some time outdoors.	Shelter and shade routes and places to sit proper vegetation and trees around seating to create oxygen and shadow create heat or chilly by climate itself Use appropriate furniture that in different seasons absorb heat and cold	Create comfortable climate conditions

CONCLUSION

Since the field of urban public spaces are for social interaction and communication citizens, the possibility of doing or lack of citizens activity, especially the vulnerable sections of society such as the elderly. It is important that it cannot be expected in the absence of comprehensive and balance of all sections of society, especially the elderly to social classes. However, it can be found that the elderly should be equal to have urban public areas as one of the social strata, in addition to creating social cohesion, in the right of enjoyment of their rights, social satisfaction with quality of life could be achieved. Public urban spaces are areas for travel, meetings, friendly meetings, and establishment social ceremonies that all sections of society should benefit equally from them. This issue in recent years has been noted in some countries and it seems to act urgent measures in order to make appropriate urban spaces especially in the center of the neighborhoods with the needs of disabled people in Iran. Respecting to standards and design codes, urban spaces adaptation with the physical and behavioral disabilities, and providing the conditions of presence of elderly in public spaces in the context of social policies through changing the behavior of healthy citizens about elderly, especially in public places, ways to increase the participation of older people in the public arena which should be of interest to architecture and urban designers and urban policies to provide the natural right of these social classes in the use of urban spaces.

REFERENCES

1. Hosseini SM, Rezaei A, Kaikhosravi Beigzadeh Z. (2012). The comparison between social support and life satisfaction and depression and happiness in elderly men and women. *Quarterly scientific and research journal of women sociology*; 2(4).
2. Weeks DA. (1994). Review of loneliness with particular reference to old age. *International Journal of Geriatric Psychiatry*; 9 (5):345 – 355.

3. Bahraini SH, Khosravi H. (2011). Measures the amount of physical space on walking, health and fitness. *Fine arts magazines*; 43:5-15.
4. Chiang K. (2009). The effects of remembrance therapy on psychological well-being, depression, and loneliness among the institutionalized aged. *International of geriatric psychiatry*; 25(4): 380-388.
5. Nozari S. (2009). Open residential spaces design guidelines. Research and scientific journal.
6. Berten E, Lin M. (2012). A comprehensive urban design "good street life". Translated by elham Zabetian Toroghi and Fatemeh Moghimi.
7. Madanipour A, Nourian F. (2009). Public and private spaces. Publication of Pardazesh Company and urban planning process.
8. Fasaei F. (1997). Seniors and families. *Elderly Quarterly*, No. 3, Fall 1997.
9. Dadkhah A. (2008). Elderly care system in the US and Japan, and provide indicators for Strategic planning for senior services in Iran. *Iranian elderly Journal*; 2(3).
10. Seifi Gh, Zeynali A.H. (2009). The status of the elderly in civil law of Iran. *Journal of Social Welfare*; 7(26).
11. Davarinejad M, Mabhoot MR. (2013). Recognizing the urban space, Hayan publication.
12. Sarrafi M, Tavakoli Beheshtinia J. (1997). Theoretical analysis and redefine the concept of neighborhood with emphasis on the conditions of neighborhoods in Iran.
13. Ghasemi V, Negini S. (2011). Effect of community based social identity, with emphasis on regional identity in Isfahan. *Journal of Urban and Regional Studies and Research*; Vol. II, No. VII, Winter 2011.
14. Delawar B, Amini A, Baizaei H. (2000). Health status of the elderly in country, the first International Conference on Aging, 2000. Proceedings of Aging, vol. 2, p:7.
15. Safari M, Moradi F. (2007). Situation awareness, health contacts in Shiraz on healthy lifestyle in old age. *The aging journal*, 1(1).
16. Bazrafshan MR, Hosseini MA, Rahgozar M, Sadat Maddah SB. (2008). *Journal of Aging*, 2(3).
17. Nejati V, Ashayeri H. (2007). To investigate the relationship between cognitive impairment and depression in the elderly. *Elderly Journal*; 1(2): 112-118.
18. Bazrafshan MR, Hosseini MA, Rahgozar M, Sadat Maddah SB. (2008). The effect of exercise on quality of life of elderly member of daily center of Jahandidegan of Shiraz. *Journal of Aging*. 2(3).
19. Burns S. (1994). Medical - Surgical Nursing, 1994, 4-20, health care for the elderly. Translated by Azam Qorbani. Publication of human promoting.
20. Ebrahimi A. (2004). Study of relationship between the rate of depression in nursing home residents with their religious attitudes and practices of each month. *Research in Medical Sciences*, 2004.
21. Pour Reza A, Jonaidy Nemati R. (2007). Economy of health and aging, Journal of Aging, first year, second issue, Winter 2007.
22. Roukoei L, Kimiagar M, Ghafarpour M. (2006). Old age nutrition in Tehran on 1997 Tehran: Ashena Press: (Persian).
23. Pashe GhR, Safarzadeh S, Mashak R. (2009). Comparison General Health and social Support in elderly admitted in sanitarium with elderly sited in family, *The Quarterly journal of research family*; 9: 503- 517 (Persian).
24. Vander Zandeh. J. (2004). Development Psychology (Translator: Ganji. H Tehran, Publication development). (Persian).
25. Weeks DA. (1994). Review of loneliness With Particular reference to old age. *International Journal of Geriatric Psychiatry*; 9(5):345-355.
26. Wilsson A K et al. (2000). C3 and factor B deficient mice as a tool Study the role of the complement System in the pathogenesis of AD, presented at neuroscience Day, Lund May 2000,12-11 . [http://www.foronline se/nd2000/abstr 39 html](http://www.foronline.se/nd2000/abstr39.html).
27. Mcinnis GJ, White JH. (2001). A Phenomenological Exploration of Loneliness in the Older Adult Archives of Psychiatric.Nursing; XV (3): 128-139.17.
28. Kearns A, Parkinson M. (2001). The Significance of Neighborhood. *Urban Studies*; 38: 2103-2110.
29. Kunz JA, Soltys FG. (2007). Transformational Reminiscence: Life story work. New York: Springer Publishing.
30. Adams K, Sanders S, Auth E. (2004). Loneliness and depression in independent living retirement communities: task and resilience factors. *Aging and Mental Health*; 8:475-485.
31. Jonsdottir H, Jonsdottir G, Steingrimsdottir, E, Trygvadottir B. (2001). Group reminiscence among people with end-stage chronic lung diseases. *Issues and innovations in nursing practices*; 35 (1):79-87.
32. Pakzad J. (1997). Identify and convergence to the space. *Sofeh*; 6: 21-22.
33. Tavasoli M. (2000). Urban sociology Tehran, paime Noor University Press.
34. Bi shop AJ, Marth P. (2006). Happiness and congruence in older adulthoods of the community Dwelling Elderly in Hong Kong: Implications for tailoring a stress reduction program. *Journal Geriatric Nursing*; 25(2). 102-106

CITATION OF THIS ARTICLE

Farhad Z and Masoomeh S. The Review and Extension of Fitting Strategies of Communities Centers for elderly. *Bull. Env.Pharmacol. Life Sci*, Vol 4 [3] February 2015: 146-151