

# Pilates for Active Aging Adults

*At Peak Pilates®, we seek to bring the benefits of Joe's practice to every body. With that goal in mind, we wanted to bring seniors to the spotlight and explain the best way to lead them to a longer, stronger life with our Pilates instruction.*

The United States is aging, with 15.2% of Americans age 65 or older.[1] It is predicted that by 2030, 1 in 5 adults will be in this category.[2] While the benefits of exercise are numerous for every age group, for seniors who desire to maintain physical and mental wellness, preserve function and stay active, exercise is essential. Actually, there are only a few untreatable or serious medical conditions that might stop an older adult from participating in moderate to vigorous exercise.[3]

As the number of older adults in our population steadily increases, the need for greater knowledge regarding the effects of aging on the components of fitness combined with the understanding of the role exercise plays in staving off the negative effects of aging becomes more important than ever. As an instructor you must look beyond muscle strength, endurance and flexibility to create a program that includes motor coordination and balance as they contribute to functional performance. And you must factor in individual

needs such as well as joint and other health concerns, along with mental and emotional well being.

Studies show that lifestyle changes in diet, exercise, stress management and social support may result in longer telomeres, the part of the chromosomes that affect aging. Exercise recommendations are for moderate, daily exercise.[4] More and more studies are coming out that support these recommendations and underline the fact that our seniors are struggling with stress issues.

Pilates can be a powerful tool in the active aging arsenal helping them to improved wellness. Just as with all other students, individuals in the over-65 age group can range from the sedentary with chronic health issues to competitive athletes with strong training programs in place. As always, the session format acts as a framework in planning the workout. Recommendations for each part of the session for a Level I workout are as follows:

## **The Opening**

Greet your students warmly and sincerely, take the opportunity to learn more about them and help build rapport and trust. Inquire about their week and how they are feeling. Older students can be more isolated socially, and coming into the studio may be a big deal, so take the opportunity to engage them. Taking this time allows you to gather information about any special needs and to create a plan of what to exclude or include in the workout. Plan an educational focus. Adult learners want to do just that- learn. Share with students a bit of Pilates history, focus in on a Key Concept, and hone in on a movement pattern or a functional skill as a theme.

Every day is different and for older students those differences can be more pronounced. Be prepared to change your lesson plan on the fly, to offer more building blocks, props, supportive touch, or to slow the pace down after travel or a

hard weekend gardening. And be ready to up the game plan when they come in with a bounce in their step.

## **Part A / B: Mat and Reformer**

Decide where and how to start. When your student is achy, begin with mat on the Cadillac to allow them to ease into the work with fundamentals. Begin sessions with a focus on breathing as respiration is often compromised with aging, and the reality is that few students give conscious thought to breathing patterns. Deep breathing is also a great tool for dissipating stress. Provide extra mobilization exercises for those with arthritis or 'aches and pains' to get blood flow going. Generally, older students need a longer warm up time to connect mind and body.

Assist more de-conditioned seniors with getting on and off the reformer, help with apparatus changes and limit frequent changes of body positions until they are stronger. Once students have developed more strength use the positional changes as opportunities to teach functional skills such as getting in and out of bed, or up and down from a low surface.

For injections side center back fitness level. For example, in supine reformer positions, lighter springs can be easier to press against, but the student is left doing more work returning the carriage. They may also not have enough feedback from the springs, so you will want them to have something to press against that will help them increase strength. In non-supine

positions, springs lighter springs means a less stable carriage. Let your students ability to work with good alignment and biomechanics be your guide and keep the work in the workout.

Offer touch as a way of not only of supporting and guiding movement, but as a way of reassuring your seniors. Many seniors are living alone, have children who are gone and can be 'touch starved.' You can be a warm and inspiring force in their lives with your instruction.

Teach with the intention of protecting the spine by

## Guidelines for Working with Active Agers

- Conduct a thorough intake that includes current health status, posture, daily activities, and current physical activity level.
- Assess functional limitations and develop strategies to improve them.
- Refer out if the student has issues that are beyond your experience or skill level.
- Establish goals
- Evaluate posture and gait, then reflect on what is present in your choice of fundamentals, building blocks, preparatory exercises and variations.
- Use the fundamentals as movement screening tools.
- Adjust the apparatus and use props to provide extra assistance and support when needed.
- Use handles rather than loops to improve overall alignment of the arms and protect the wrist.
- Select spring settings with consideration to student needs for alignment, support and stability.
- Include balance training in every session
- Progress wisely, let moderation be the key
- Balance precision with flow and leave time for questions.
- Teach students how to get up from a fall.
- Use touch as a way of communicating not only movement, but care.
- Keep it fun!

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encouraging optimal alignment, improving stabilization, encouraging mobility and working from the powerhouse out. Pilates is great for overcoming the decompression of the spine caused by aging that often lead to loss of height. Students are really excited when their doctor visit indicates that height is being regained.

## **Part C: Individual Needs**

What does your senior student need to live a safely and full life? What are their goals? Start with these two questions. Then think about what is preventing them from living safely, fully and reaching their goals. For example, if a student's balance is compromised, that's a safety issue and a serious fall risk. Next, reflect on why? What are you seeing in their posture and gait, and in their mat and reformer work, that might provide a clue? Does she or he have balanced posture, are they symmetrical, do they have adequate leg and core strength...once you identify causes, then your plan will be easier.

What exercises on what apparatus will help address this missing or weak link? How should those exercises be sequenced for flow and maximum impact? Finally, add in a way to measure progress. For example a 10-20 second stand on one leg or on tip toes to gauge improvements in balance would be useful and motivating.

## **Part D: Endings**

Not just vertical – uplifted! Joe Pilates in his books, *Return to Life Through Contrology and Your Health*, states that Pilates is spiritually uplifting. Make sure your students leave feeling better than they arrived in mind, body and spirit. My mother used to say dessert was the part of the meal that people really remembered, so make your endings memorable. Yes, teach wall, power circle, ped-o-pul. But also think out of the box. Does your student ball room dance? How could you

incorporate that into an ending? If your senior plays golf, bring out the sandbags and make them part of the theme (you can say it's like working on their short game). Is she or he having trouble with climbing stairs? Work on that. Don't skip the ending; it is an essential part of the session and allows corrections to be taken functionally out of the studio into the world.

## Closing

End with warmth and a sincere compliment on their work, be specific on what they did well. If you are both huggers, share a hug! Have handouts on hand to provide homework references for fundamentals, stretches, posture, and the mat exercises, to keep them active daily. And of course, remind them of their next appointment!

***Ready to challenge yourself? Take the quiz and earn 1 CEC toward your recertification!***

**TAKE THE CEC QUIZ**

***This article was contributed by Zoey Trap, MS.***

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(1) U.S. Census Bureau (2016). *Income, Poverty and Health Insurance Coverage in the United States: 2016*. Retrieved from: <https://www.census.gov/newsroom/press-releases/2017/income-poverty.html>

(2) Administration on Aging (2011). *A Profile of Older Americans: 2011*. Retrieved from: <http://www.aarp.org/content/dam/aarp/livable-communities/learn/demographics/a-profile-of-older-americans-2011-aarp.pdf>

(3) Panton, Lynn B. PhD, FACSM, Loney, Brittany, MS, MA (2012). *Exercise for Older Adults: Health Provider Edition*.

Retrieved from:  
[http://file.lacounty.gov/SDSInter/dmh/216745\\_ExerciseforOlderAdultsHealthCareProviderManual.pdf](http://file.lacounty.gov/SDSInter/dmh/216745_ExerciseforOlderAdultsHealthCareProviderManual.pdf)  
(4) Ornish, D (2013). "Effect of comprehensive lifestyle changes on telomerase activity and telomere length in men with biopsy-proven low-risk prostate cancer: 5-year follow-up of a descriptive pilot study". DOI:  
[http://dx.doi.org/10.1016/S1470-2045\(13\)70366-8](http://dx.doi.org/10.1016/S1470-2045(13)70366-8)