

Shuffleboard Gets Pushed to the Closet

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Linda Spillers for The New York Times

HEARTY Sara Levy, 91, foreground, works out with others at the Riderwood Village retirement center in Silver Spring, Md. She also swims and bikes.

FOR Liz and Herb Sumerfield, the move from Chicago to Frisco, high in the mountains of Colorado, in 1994 was nothing short of ideal. For 12 years, the couple skied, hiked and biked daily, until Mr. Sumerfield, who is now 69, developed problems with the altitude and they had to relocate.

Last year, the couple's daughter-in-law took them on a tour of [Anthem Ranch](#), a retirement community in Broomfield, Colo., outside Denver. After one look at the 30 or so fitness classes and programs — including snowshoeing, cycling, rock climbing, even sky diving — as well as brochures for a planned 33,000-square-foot fitness center, they were sold.

"I saw all those activities in the brochures, it was near our kids, why look anywhere else?" said Ms. Sumerfield, 67, who hikes, snowshoes, skis or cycles every day of the week.

Ms. Sumerfield is not alone in her desire to stay active as she gets older. To keep up with increasingly busy people like her, retirement communities are waving farewell to shuffleboard, Ping-Pong and bowling, and building gyms with air-pressurized fitness equipment that works in smaller increments in place of or in combination of weights.

A 2006 survey conducted by the International Council on Active Aging, an association for health and wellness providers, found that 45 percent of managers in retirement communities planned to develop new fitness or wellness centers or expand their existing locations in 2007 and 2008, and that 43 percent developed or expanded facilities in 2005 and 2006.

“Since 2004, the industry has hit a volcanic eruption stage, where if you don’t have a fitness center it becomes that much harder to compete in the marketplace,” said Colin Milner, the chief executive of the council. “Fifteen years ago, people in retirement communities would say it would kill their residents, ‘We could never put a center in.’ I’d say, ‘If you don’t put one in it will kill them quicker.’ ”

John Rude, the president of Age Dynamics, in Eugene, Ore., which helps retirement communities develop wellness programs, said the tenor of the programs had also changed.

Whereas in the 1980s most aging research focused on decline, disease, disengagement and death, today the focus is on growth, development and disease prevention. A 2007 report from the [Census Bureau](#) estimates that by 2030, about 72 million Americans will be over 65, and that the cost of caring for them could add 25 percent to the nation’s health care bill — unless people get in better shape.

One way to slow the aging process? Exercise, and plenty of it.

“We used to believe that people above 70 couldn’t handle stress, and so we treated them with kid gloves,” Mr. Rude said. “They would do very lightweight kind of exercise like stretching or seated activity when they could have done something much more rigorous.”

Generally, there are four kinds of retirement communities: independent-living facilities (age-restricted, multifamily properties); active adult communities (usually privately owned individual houses for people 55 and older); continuing-care retirement communities, or CCRCs (planned retirement communities incorporating independent and assisted living, as well as skilled nursing care); and assisted-living residences (which provide meals, housekeeping, transportation and personal care and health services). Many of the communities offer swimming, yoga, tai chi and Pilates classes, partly to attract a younger demographic. Some are also adding walking trails with fitness stations scattered throughout.

“You don’t see a CCRC or an active community being built that doesn’t have a pretty significant wellness component, including a gorgeous outfitting facility, swimming pool, exercise equipment and rooms for classes,” said Elinor Ginzler, the director for livable communities at [AARP](#). “They recognize that this is a good marketing tool to attract healthy people who want to stay fit, and to keep their residents fit so they stay healthy.”

Mr. Milner put it this way: “Part of the goal is to get the youngest person you can, so if they age with you they stay with you.”

Although it built extensive outdoor trails two years ago, the Episcopal Retirement Community at Still Hopes, in Columbia, S.C., had only one small exercise room with a few machines until February of this year. That is when it opened a \$4.2 million wellness center. The Amsterdam at Harborside, in Port Washington, N.Y., is building a \$1 million fitness center with an indoor swimming pool. Residents will also be able to get a baseline fitness evaluation and be monitored.

And 14 months ago, Patrice Cahill, a personal trainer in Lynn, Mass., took a job at the Woodbridge Assisted Living community in Peabody, Mass. For a half-hour a day five days a week, she helps residents — some as old as 99 — work out with resistance bands and sponge balls as well as the specialized weight machines.

“They do what they feel they can do,” she said, adding that the program has grown to about 30 clients from 15 clients. “You try to make the quality of life as best you can. They have something to look forward to every day.”

The program also gives residents a chance to socialize with their peers, especially when one spouse is no longer able to exercise, as Ms. Sumerfield has found. “My husband and I used to do everything together, and now he can’t because of his health,” she said. “I have friends right here in our community that I can do things with, and I think that’s a really important thing.”

In other cases, the accessibility to fitness centers has inspired people who never exercised before to get moving. Sara Levy, for example, lives at Riderwood Village, a 120-acre continuing-care retirement community in Silver Spring, Md. Five times a week (she takes Wednesdays off to play mah-jongg, and on Sundays she rests), Ms. Levy, 91, swims, bikes or walks on the treadmill — something she never did before moving there nearly four years ago.

“It does fill my time, and it keeps me going with all my aches and pains,” she said. “I come out of the pool and I’m fine.”