

From stigma to active and dignified ageing



The Universal Declaration on Human Rights states that “all human beings are born free and equal in dignity and rights”. This equality does not change with age: older men and women have the same rights as people at any other stage of life.

What does change is that many societies consider older women and men to be less valuable to society. Like many other groups that can be considered vulnerable in their communities, they are often highly stigmatized. They are portrayed as frail, out of date, unable to work, physically weak, mentally slow, disabled or helpless. Often, age is seen by the general public and the media as a dividing situation of young versus old.

The contrary is true. If given equal opportunity and treatment in all aspects of life, ageing persons, including those who retire from work and those who are ill or live with disabilities, can continue to participate and contribute.

Concepts of ageing are learned at an early stage, as young as 3 years of age, and over time as a person becomes an adult and then older person, a stigmatized identity develops. It does not come as a surprise then when older persons develop a poor image of themselves, holding them back.

The negative stereotypes reinforced in the media, in advertising, by younger generations, by older persons themselves, can lead to discrimination and abuse of older persons. As a result, older men and women have a hard time staying active, that is, participating in social, political, economic, cultural, spiritual and civic affairs. Staying active is, however, the most effective way to age well and stay healthy for as long as possible.

Ironically, negative stereotypes prevent us from appreciating the positive contributions many older persons could make if they stayed healthy and independent. This is a vicious cycle that can be broken through better awareness about the ageing process and older persons.

What are some of the stigmata that prevent us from ageing actively and in dignity? Here are the top 10.

1. Stigma 1: Older adults are all alike

Young people are not all the same, why should older persons be all the same? In fact, older adults are a highly diverse group. Life at age 60 is obviously very different from life at age 85. Globally, the “oldest-old” (80 and above) are the fastest growing age group. It is also the group which experiences the greatest rates of disability and disease. In general, the need for health and social care rises sharply with age: 41% of those aged 85 and over have severe disabilities compared with 1% of those aged 75–79. The rate of natural decline in health and well-being depends on many factors, not just biological. Women and men who have lived a life of poverty with poor nutrition and little, if any, access to education and health care risk to experience a faster decline. Older men and women are not the same either. For example, cardiovascular disease, mainly heart

attacks and stroke, often thought to be a “male” problem, is the main killer of older women. However, women often show different symptoms from men, which contributes to under diagnosis of heart disease in women. Women also tend to develop heart disease later in life than men. Older people come from various educational and cultural backgrounds and have years of wide-ranging experiences. In short, older adults are as diverse as humanity.

2. Stigma 2: Old age starts at “any age after 50”

Today, the age of 60 or 65, roughly equivalent to retirement ages in most countries of the Eastern Mediterranean Region, is said to be the beginning of old age. Life expectancy makes the definition of “old age” a relative concept. In the 1950s life expectancy in the Region was approximately 44 years; it is expected to reach nearly 77 years by the year 2050. Moreover, any arbitrary threshold equates calendar age with biological age, though the two are not necessarily the same. In many parts of the developing world, calendar age has little or no importance in the meaning of old age. Old age is rather seen to begin at the point when active contribution is no longer possible. This point is not arbitrarily set by society, but depends on the individual’s state of health and well-being.

3. Stigma 3: Older persons – it’s “them”

Whatever old age definition we choose, the truth is that we are all inevitably ageing and sooner or later it will be “us”. What’s more: the natural process of ageing starts before we are born. Whatever our age, how we live today has an impact on our health and well-being tomorrow. Under-nutrition in the womb, for example, may be linked to diabetes later in life. Respiratory infections in childhood may result in chronic bronchitis in adult life. Obese, or overweight, adolescents run the risk of developing chronic diseases like cancer as adults. Clearly, we cannot start early enough to age well across the life-course, from birth to death.

4. Stigma 4: Older persons are frail and disabled

The vast majority of people remain fit and able to care for themselves in later life. At age 70, men are usually capable of exerting about 80% and women around 65% of the maximum muscle strength they exerted at age 20. It is a minority of old people, mostly the very old, who become disabled to the point that they need care and assistance with the activities of daily living. And even when they do have illnesses, large numbers of older people feel perfectly healthy because the illnesses do not affect their quality of everyday life.

5. Stigma 5: Older persons are out of date

Older persons are the age group with the widest and most diverse experiences. Everywhere in our region, they contribute as leaders, workers, academics, scientists, volunteers, artists and advisers. In many countries, they are a key resource for others. The old have the wisdom of their experience of life to pass on to the children of today and of coming generations.

6. Stigma 6: Older persons are helpless

The fact that older people are particularly vulnerable in emergencies and remain as one of the most seriously affected groups does not mean that older persons in general are helpless. Especially during times of crisis, older persons help their families and communities to cope with and overcome the hardships. In many tribal and nomadic communities, it is common practice for community leaders to be selected based on their older age. During emergencies many older people are very resilient and their knowledge of the community, experience with past emergencies as well as positions of respect within families and communities make them valuable resources that should be drawn upon. Awareness of the needs and potential contributions of older persons can help in developing more effective interventions, including equitable access to essential health and social services by older people, during all phases of an emergency.

7. Stigma 7: Older persons will eventually become senile

Slower reaction time, temporary sadness and occasional minor memory lapses are normal signs of ageing. Uncertainty about how to perform simple tasks, difficulty in completing sentences and confusion about month or season are not. These are signs of Alzheimer disease, the most common cause of dementia, which is a loss of intellectual abilities. The risk of developing dementia symptoms rises steeply with age in people over 60, but it is not a formal part of ageing. In fact, out of the 9 billion people on the earth in 2050 (of which 2 billion will be above 60 years of age), 15 million will be living with dementia. Again, most older persons are fit and well. There is no reason to assume that older persons in general are less able to manage their financial affairs or day-to-day living or to provide informed consent for any treatment or medical intervention. In fact, some types of memory stay the same or even continue to improve with ageing. One example is semantic memory, which is the ability to recall concepts and general facts that are not related to specific experiences.

8. Stigma 8: Older persons are no fun

Emotional experiences of sadness, grief and temporary “blue” moods are normal. Chronic depression that interferes with a person’s ability to function is not. Major causes in old age are the death of spouses or friends, living in homes away from loving family members, negligence, role transition, lack of security and recognition. Moreover, elder maltreatment, a type of physical, sexual, psychological or emotional violence and financial or material abuse, can also lead to depression and anxiety. Around 4%–6% of people over the age of 60 have experienced some form of maltreatment while living at home. Depression is not a normal part of ageing; however, it is sometimes exacerbated by the consequences of age-related stigma. Depression at any age is a condition that can be treated effectively.

9. Stigma 9: Older women have less value than older men

There is a tendency to equate women’s worth with beauty, youth and reproduction. Yet, older women in the Region play key roles in their families and communities, caring for their partners, parents, children and grandchildren.

In many societies where the extended family predominates, older women often acquire enhanced social status when their children marry and have their own children. However, increasing urbanization and the trend towards more nuclear family structures can lead to isolation of older persons. Because women often marry older men, and because women usually live longer, many older women will be widows. In most cases, they adjust both emotionally and financially to their changed situation

10. Stigma 10: Older persons don’t deserve health care

Older persons claim that their age alone is handled as a disease: often they are dismissed without proper diagnosis. But health needs don’t stop at a particular stage of life; it is mainly society that sets arbitrary limits such as menopause. The risk for breast cancer increases with age – especially after age 50 – and only declines after the age of 80, yet breast cancer screening is scarce in women beyond reproductive age. Age alone is not an excuse for health care professionals to limit access to care and treatment.

This list of stigmas, while not exhaustive, makes it clear: it is not older people who are unable to contribute. It is individual and societal misconceptions, discrimination and abuse that prevent active and dignified ageing.



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