

National Council for the Elderly

PROCEEDINGS OF ROUND TABLE

**THEORIES OF AGEING AND ATTITUDES TO
AGEING IN IRELAND**

DR. STEEVENS' HOSPITAL, DUBLIN

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NATIONAL COUNCIL FOR THE ELDERLY

The National Council for the Elderly was established in January 1990 in succession to the National Council for the Aged which began in June, 1981. The terms of reference of the Council are:

To advise the Minister for Health on all aspects of ageing and the welfare of the elderly, either on its own initiative or at the request of the Minister, and in particular on

- *measures to promote the health of the elderly,*
- *the implementation of the recommendations of the Report, **The Years Ahead - A Policy for the Elderly**,*
- *methods of ensuring co-ordination between public bodies at national and local level in the planning and provision of services for the elderly,*
- *ways of encouraging greater partnership between statutory and voluntary bodies in providing services for the elderly,*
- *meeting the needs of the most vulnerable elderly,*
- *ways of encouraging positive attitudes to life after 65 years and the process of ageing,*
- *ways of encouraging greater participation by elderly people in the life of the community,*
- *models of good practice in the care of the elderly, and*
- *action, based on research, required to plan and develop services for the elderly*

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CONTENTS

Foreword	1
Reflections on the Round Table	2
Rapporteur's Note	5
Section 1	
Introduction and Purpose	6
Section 2	
Attitudes	7
Social Integration of Older People: Implications of the Eurobarometer Findings Mr.Eamon O'Shea	7
<i>Attitudes of Older Irish People Today: Survey of Over 65s</i> Dr.Tony Fahey	8
<i>What Do We Mean By Attitudes?</i> Dr. Ricca Edmondson	
Discussion: Attitudes to Ageing and Older People	9
Section 3	
Theories	10
Theories of Ageing: Implications for Promoting Positive Ageing Dr.Mary Davies	10
Discussion: Theories of Ageing	11
Section 4	
Perspectives	13
<i>Literary Perspectives on the Nature of the Ageing Experience</i> Professor Brendan Kennelly	13
<i>A Philosophical Perspective: Ageing and the Culture of Friendship</i> Professor Markus Wörner	15
Discussion: Developing a Theoretic Framework for the Promotion of Positive Attitudes to Ageing Chair: Dr. Francesca Lundström	16
Notes on Contributors	17
Appendices	
Appendix 1 Round Table Programme	19
Appendix 2 List of Delegates	20

FOREWORD

The National Council for the Elderly is an advisory body to the Minister for Health on all aspects of the welfare of the elderly. Its terms of reference include advising on ways of encouraging positive attitudes to life after 65 and the process of ageing and ways of encouraging greater participation by elderly people in the life of the community.

The Council's work in this context includes research on attitudes of young people to ageing and the elderly (Power 1987), the establishment in 1988 of *Age and Opportunity*, an independent national agency which promotes positive attitudes to ageing and the elderly in conjunction with a wide range of national and local bodies and individuals, and the publication in 1993 of two teachers' manuals which aim to promote positive attitudes to ageing and the elderly among the school going population. Recently the Council commissioned a major research project on the health and autonomy of older people in Ireland which will include information on their attitudes.

Arising from its experience and research, and in consultation with *Age and Opportunity*, the Council identified the need to develop a better theoretic understanding of ageing and attitudes to ageing in the Irish context and commissioned a *Literature Review of Theories of Ageing and Attitudes to Ageing*.

Following the success of the *European Year of Older People and Solidarity between Generations* in 1993, particularly in regard to its aims of highlighting the positive contribution of older people to society and of promoting intergenerational solidarity, the Council felt that it was time to consolidate and build on the gains made. It felt that one of the ways forward was to develop a coherent strategy to combat negative attitudes to ageing and older people based on a theoretic framework which takes account of relevant theories of ageing and a sound understanding of how attitudes, values and stereotypes are formed.

In this regard the Council organised an inter-disciplinary round table meeting at Dr. Steevens' Hospital, Dublin on 25th March 1994, to explore theories of ageing, concepts related to attitude formation and change, and cultural aspects of ageing in Ireland which it hoped would help to begin the process of developing a more focused programme for the promotion of positive attitudes to ageing and the elderly in Ireland. It was also intended that the round table would stimulate increased interest in social gerontology and foster an appreciation of the subject of ageing across a range of disciplines.

The meeting was attended by over fifty experts from different fields including philosophy, literature, psychology, sociology, medicine, health administration, psychiatry, education, social policy and the media as well as a wide range of practitioners directly involved in the area of promoting positive attitudes to ageing.

The summary of the proceedings of the round table which is presented here should be of interest to anyone who is concerned with combating negative attitudes to ageing and older people.

On behalf of the Council I would like to express our thanks to the speakers and the participants for their contributions to the round table discussion. I would also like to thank Mr. David Silke for undertaking the task of compiling and summarising these proceedings.

Mr. Michael White
Chairman

REFLECTIONS ON THE ROUND TABLE
POSITIVE AGEING - THE WAY FORWARD
Bob Carroll, Secretary and Trish Whelan, Projects Officer,
National Council for the Elderly

INTRODUCTION

The objectives of the round table -to begin the process of developing a more focused programme for the promotion of positive attitudes to ageing and the elderly in Ireland by exploring theories of ageing, concepts related to attitude formation and change, and cultural aspects of ageing in Ireland- were wide-ranging and ambitious. To what extent were these objectives realised?

While the round table did not reach any final conclusions regarding a theoretic framework for the promotion of positive attitudes to ageing or still less make any recommendations regarding what strategies should be adopted to this end in Ireland, it did succeed in identifying key issues which will be helpful in both regards.

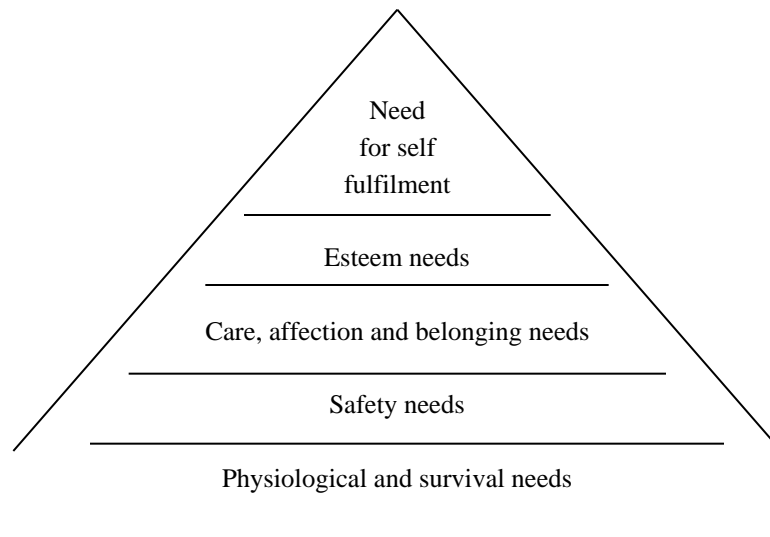
It may therefore be useful to highlight these issues for the attention of people concerned to change attitudes to ageing and the elderly in Ireland in a systematic way. In this context, it is suggested that the next task is to organise a further round table to explore what action should be taken in relation to the issues identified.

GENERAL CONCLUSIONS OF THE ROUND TABLE

Analyses of the proceedings of the round table allow one to identify the following conclusions:

- Multi-disciplinary collaboration is required for any meaningful understanding of ageing. Without such collaboration theories of ageing risk being one-dimensional and misleading.
- Multi-disciplinary collaboration is also required for any meaningful understanding of attitudes to ageing and older people. Without this collaboration attitudinal research will risk being methodologically limited and will fail to provide for the heterogeneity of the elderly population, for the complexity of attitude formation and for the different uses of language employed by both researchers and those whose attitudes are being researched.
- In consequence of the above, there is a need to promote gerontology more widely as a component part of third level training in the social sciences and other disciplines.
- The round table considered attitudes to ageing and older people, theories of ageing and perspectives on ageing. A unifying theme running through each discussion appeared to be a concern to determine what constitutes positive ageing and how positive ageing might be promoted.
- Positive ageing is determined by how successful older people are in meeting their personal and social needs as determined by their individuality and their particular circumstances. It is interesting to note that on analysis of the needs of older people touched upon throughout the round table one can find parallels corresponding with each of the levels of need in Maslow's *Hierarchy of Needs*, as follows:

Maslow's Hierarchy of Human Needs



It is therefore concluded that perhaps the focus of future attention might broaden from a promotion of positive attitudes to ageing to the promotion of *positive ageing* itself. In this context attention would not focus exclusively on combating negative images, attitudes, stereotypes and discriminatory practices but on promoting positive ageing as an attainable goal in its own right for all citizens.

PARTICULAR CONCLUSIONS OF THE ROUND TABLE REGARDING POSITIVE AGEING

- The survival rate of those aged 65 and over is lower in Ireland than in any other country in the Western world and many developing countries. Survival is the first prerequisite for positive ageing. Measures to promote the health of older people are therefore urgently needed in this country.
- The heterogeneity of the elderly population is not widely appreciated. The perception now is that older people in general are relatively well off. Little attention is therefore given to the significant minority of older people who find it difficult to make ends meet and to fulfil their basic needs.
- Ambivalent beliefs about the elderly population are widespread. While there is a general appreciation that older people are discriminated against in the labour market, many people also believe that older people should give way to younger people in this field, thus indirectly challenging their equal right to belong and to be self-fulfilled through participation in the labour force.
- The Eurobarometer survey found no strong evidence of loss of respect for older people across Europe. This is encouraging provided that by 'respect' is meant holding older people in high esteem rather than keeping them at a respectful distance, particularly those who are ill or incapacitated. In this context it is significant that only 22% in the survey believed that older people themselves should decide what services they require.
- The national survey conducted by the Economic and Social Research Institute on behalf of the National Council for the Elderly found that disability or freedom from disability was a central determinant of the well-being of older people in this country. Measures to assist incapacitated older people to cope with their circumstances are of central importance to those with disabilities. The identification and promotion of such measures

must therefore be a priority in any campaign for positive ageing. Moral and practical support for incapacitated older people will also benefit informal carers, many of whom are elderly themselves. The literary and philosophical perspectives on ageing considered at the round highlighted a number of important prerequisites for positive ageing. Successful positive ageing is a life-long and personal process which cannot be achieved in isolation from others or from ourselves as sensory beings.

- Developing and using our sensory perceptions is an effective way of keeping in touch with oneself and of relating to others. Old age can be a time of creative development when one has more time to pursue interests overlooked in earlier stages of life. Keeping in touch through the senses has also proved to be of great therapeutic value by the Sonas project and by reminiscence therapies.
- Maintaining intimacy, friendship and social contact in one's life appears to be one of the most important factors for positive ageing and is one of the most important characteristics of activities and groups specifically designed for older people e.g. active retirement groups. It is impossible to develop the art of living on one's own. Friendship is therefore central to positive living and to positive ageing.
- Intergenerational contact provides an opportunity for older people to share their knowledge and experience with younger people, helps older people to establish their rightful place in society and is a social resource which is currently underused and undervalued.
- Learning how to cope with mortality and coming to terms with death is an essential part of living which must be learned throughout life and not just in old age. This acceptance of mortality is an important prerequisite for positive ageing and a major factor in combating negative attitudes to ageing and older people. Successful living and positive ageing cannot be achieved without internalising the reality of death.

Dr. Mary Davies indicated the following prerequisites for positive ageing:

- that ageing is not denied,
- that our perceptions and understanding of ageing are not disempowering,
- that the differences between people are acknowledged.

Because our understanding of ageing in the 1990s has developed we can take a critical approach to theories of ageing articulated in the past. However, they do provide some useful indicators of what to promote and what to avoid in order to age positively, as follows:

Promote

acceptance of ageing
empowerment
individuality
physical activity
social contact/friendship
developing coping skills
valuing experience, knowledge etc.

Avoid

denial of ageing
disempowerment
being stereotyped
sedentary lifestyle
social withdrawal
psychological stress
overvaluing paid work

These are but summary reflections on the proceedings of the round table and do not pretend to include reference to all the ideas covered. It is therefore recommended that the summary of the proceedings be read in full. However, on reading the summary of Professor Brendan Kennelly's presentation, in particular, one must bear in mind how difficult it is to summarise and do justice to a presentation of this nature.

RAPPORTEUR'S NOTE

This paper summarises the proceedings of a round table discussion on *Theories of Ageing and Attitudes to Ageing in Ireland*. The paper follows the structure of the programme for the day (see Appendix 1). A list of those who attended the round table is attached as Appendix 2. An unpublished paper, *Literature Review of Theories of Ageing and Attitudes to Ageing*, which was prepared before the round table, is available from the National Council for the Elderly.

The proceedings are divided into four sections as follows:

1. Introduction and Purpose
2. Attitudes
3. Theories
4. Perspectives

I would like to emphasise that no one person could do justice to the depth and variety of discussions which took place. What follows are the key themes as I have seen them.

I would like to thank Bob Carroll, Joe Larragy and Trish Whelan of the National Council for the Elderly for their helpful comments. I take full responsibility for any inaccuracies which remain.

David Silke

CHAIR: MS. NOREEN KEARNEY

***SENIOR LECTURER IN SOCIAL WORK AND HEAD OF DEPARTMENT OF
SOCIAL STUDIES, TRINITY COLLEGE DUBLIN***

SECTION 1: INTRODUCTION AND PURPOSE

Participants were welcomed to Dr. Steevens' Hospital by Mr. Kieran Hickey, Chief Executive Officer of the Eastern Health Board. He congratulated the National Council for the Elderly for its contribution to the formation of national policy on the elderly. The Council's work in the promotion of positive attitudes towards the elderly and intergenerational solidarity is very important as is its focus on the ongoing needs of older people. He hoped that the focus of public policy would broaden to encompass the needs of all older people, including those who are not incapacitated.

As outgoing Chairman, Mr. Michael White* welcomed those present on behalf of the National Council for the Elderly. He said that, since its inception, the Council has been interested in the quality of life of older people. The Council soon identified questions of attitudes to ageing and older people as important issues to be addressed in the interest of the welfare of older people. The Council conducted some research on attitudes and last year, during the European Year of Older People and Solidarity between Generations, produced manuals for primary and post-primary school teachers.

Ms. Noreen Kearney, senior lecturer in Social Work at Trinity College, chaired the round table and began by outlining its objectives: to explore theories of ageing, concepts related to attitude formation and change, and cultural aspects of ageing in Ireland.

The purpose of the day was to bring together a small but diverse group of experts to begin the process of developing a coherent strategy to combat negative attitudes to ageing and older people based on a theoretic framework which takes account of relevant theories of ageing and a sound understanding of how attitudes, values and stereotypes are formed.

* Mr. Michael White has now been reappointed as Chairman of the National Council for the Elderly.

SECTION 2: ATTITUDES

Social Integration of Older People: Implications of the Eurobarometer Findings

Mr. Eamon O'Shea

This paper was based on the Eurobarometer survey on age and attitudes conducted in 1992.¹ Mr. O'Shea focused on the implications of the survey and some questions which the results pose, rather than the results themselves.

He said that surveys such as that of the Eurobarometer often raise as many questions as they answer. For example, this survey found no strong evidence that there was a loss of respect for older people across Europe. While this finding could be interpreted as positive,¹ it also raises the question as to what is meant by 'respect'. Respect may, for example, be negative if it is associated with perceptions of increased dependency as one gets older.

Although there was a high level of interaction between young and old in a community sense, one quarter said they had almost no contact with younger people. Contact was also found to decline as people grow older. This raises questions about what determines whether a person has high or low contact and why contact declines as we grow older.

The survey found that older people were generally active across Europe. However, when the results are analysed in more detail one finds that watching television was the 'activity' undertaken by the largest number. This raises questions about the lack of creativity in the lives of many older people.

The survey also found some attitudes to older people amongst the general public which raise questions about the degree to which older people are considered as equal participants in society. For example, the general public was asked who should decide on services for the elderly. The results reflect a passive image of older people. Only 22 per cent of the general public said that older people themselves should decide on services, 42 per cent said it should be a relative or friend and the remainder said it should be a provider.

There was also considerable ambiguity about solidarity and the labour force. The survey found that while there was widespread agreement that older people are discriminated against in the labour market, almost three in ten of the general population felt that people in their 50s should give way to younger people.

Mr. O'Shea stressed the importance of avoiding generalisations about older people. He gave the example that, while there is a general perception that poverty amongst older people is no longer a problem, the Eurobarometer survey found that one in eight (13%) of Irish respondents found it difficult to make ends meet. This raises questions such as what are the characteristics of these people and to what extent is poverty a life cycle problem (that people bring disadvantage with them into old age).

Detailed findings from this survey can be found in: Commission of the European Communities *Age and Attitudes: Main Results from a Eurobarometer Survey*, 1993.

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Attitudes of Older Irish People Today: Survey of Over 65s*

Dr. Tony Fahey

The paper presented by Dr. Tony Fahey was based on preliminary findings from a recent survey of the health and autonomy of older people conducted by the ESRI on behalf of the National Council for the Elderly.

Dr. Fahey said that attitudes towards the elderly and ageing are partly a matter of image and interpretation but are also influenced by the position occupied by the elderly in the social structure. Therefore, to understand general attitudes to ageing and the elderly and attitudes of the elderly themselves, we need to have some grasp of the social context which shapes those attitudes. The elderly in Ireland have a number of distinctive characteristics which have complex implications for attitudes.

Demographic information from this survey showed that the Irish population has not yet started to age as in other EU countries. In fact, the proportion aged over 65 has remained relatively stable since the 1960s, and is only slightly higher than that recorded in the 1926 census. This can be explained by high fertility rates and relatively low life expectancy by Western standards. The Irish survival rate up to age 45 is one of the highest in the Western world. However, the survival rate for those aged 65 and over is lower in Ireland than in any other country in the Western world and many developing countries. Indeed, life expectancy for elderly men in rural areas has declined over the last 60 years.

Another fact which distinguishes Ireland from other countries is the large family network. The survey found that the typical older person in Ireland has four or five surviving children, and two or three of these live less than ten miles away. One exception to this general trend is the never married elderly, about half of whom live alone and have few surviving relatives. The survey found that, contrary to popular stereotypes, this group was not obviously worse off in many ways than other older people (e.g. in terms of their experiences of loneliness). This further supported the need to avoid making assumptions about older people's needs.

Dr. Fahey said that the change from property to pensions was one of the most significant structural changes in the economic position of the elderly in recent decades. In the past, old men ruled because they were the property owners. This promoted a gerontocracy, based on the economic subordination of the young to the old, and a subsequent tension between the generations. In contrast, non-property owning older people were often marginalised. The survey found that pensions were now the main income source of almost 9 out of 10 respondents and that there was very little evidence of intergenerational dependency. This mutual economic independence has helped to reduce intergenerational tensions.

Dr. Fahey concluded that health was the major factor affecting the psychological well-being of older people. The survey found that loss of physical capacity and independence was the most crucial turning point in older people's lives. This transition can, for example, cause a change in the nature of their relationship with their family and can generate important economic demands on families. The survey also found that older people expressed a fear of becoming a burden on their families. A major focus on the impact of disability on older people and on attitudes to disability in old age is therefore called for.

*The text of this paper is available on request from the National Council for the Elderly.

What do We Mean by Attitudes? *

Dr. Ricca Edmondson

Dr. Ricca Edmondson's paper focused on the meaning of attitudes. She began by underlining Eamon O'Shea's point that large scale surveys can provoke fascinating questions about attitudes to ageing. To unravel these attitudes close-grained research into what people feel, think and do in their everyday lives is needed. She argued that much of the literature on attitudes is misleading because it suggests that attitudes are ideas we hold in our heads. While this may be true in some cases, attitudes are more varied and may be related to thinking, feeling and behaving in different ways in different circumstances. Therefore, to understand certain attitudes, observation of how people behave and interact is required. This has implications for the type of research methodology required when researching attitudes.

Dr. Edmondson distinguished between private or individual and public or social attitudes. For example, attitudes to death have a public dimension dictated by the social setting. She argued that research on attitudes to death should observe what people do as well as merely collect information on what people say in response to interviewers' questions. She identified two main problems with this latter research methodology. Firstly, language has different uses and meanings in different social settings and contexts. Secondly, many of our most important attitudes are difficult to express directly, for example attitudes to our families, to God and to our country. Dr. Edmondson concluded that attitudinal research should be an interactive and a long-term process of working with people using a variety of methods.

DISCUSSION: ATTITUDES TO AGEING AND OLDER PEOPLE

Language was considered important in fostering positive attitudes to ageing. The point was made that the term 'elderly' is very impersonal, for example. The question was asked as to whether attitudes to ageing are related to personality type (i.e. whether a person is introvert or extrovert). It was reported that psychological research indicates that adaptability and the ability to cope with change throughout life are important factors in determining older people's attitudes to ageing.

The view was expressed that everyone is entitled to the same amount of respect regardless of age. Some delegates worried however that respect can sometimes be a way of distancing ourselves from older people.

In contrast with the views expressed by the general population in the Eurobarometer study, it was agreed that the voice of older people themselves should prevail in determining provision of care. Developing ways of helping older people to cope with physical incapacities was considered important. For example, easier access to public places was suggested as a way of improving intergenerational solidarity. It was also felt that an educational process to improve people's psychological approach to their health in old age was needed. This approach would aim to educate people to realise that they can have a fulfilling life in old age even if they are incapacitated. Carers should be encouraged, for example, not to over-protect those they are caring for as this can lead to higher levels of dependency.

The importance of demographic information in planning services was stressed. National figures, with an urban and rural breakdown, are needed. A view was also expressed that it is necessary to keep in mind that attitudes to ageing are constantly changing and evolving. In this context, much can be gained from talking with older people.

*The text of this paper is available on request from the National Council for the Elderly.

SECTION 3: THEORIES

Theories of Ageing. Implications for Promoting Positive Ageing

Dr. Mary Davies

Despite considerable achievements in promoting positive attitudes to ageing, Dr. Davies said that much remains to be done. For example, there are still negative attitudes not only to old age but also to middle age. She stressed that positive ageing:

- must not deny ageing;
- must not be disempowering; and
- must address differences between people.

She outlined different theories of ageing and commented on the extent to which each stressed positive ageing.

The first theories outlined were biological theories which attempt to explain the cause of the decline of the physical functions of the body, including the nervous system. Examples are the 'wear and tear' theory, decline in energy theory, cross linkage theory (ageing due to chemical changes in the body which stiffen the elasticity of the body tissue), programmed ageing (genetic) and ageing due to decrease in function of the immune system. Dr. Davies felt that while these theories do not deny ageing, they are disempowering in approach and only the programmed ageing theory addresses individual differences. A further criticism of the biological approach is that it does not take into account cohort or generational differences.

Dr. Davies argued that one biological theory which deserves particular attention is the 'use it or lose it' theory which stresses the negative effects of leading a sedentary life, even on young people. An experiment was undertaken to test this theory on well-conditioned young men who were confined to bed rest for three weeks. At the end of the three week experiment they showed many of the physiological signs associated with ageing, particularly in the cardiovascular system. Dr. Davies concluded that this theory does not deny ageing, it is empowering and it also addresses individual differences.

Dr. Davies then discussed disengagement theory, a sociological theory which originated in the United States in the 1960s. This theory proposes that ageing entails a gradual withdrawal or disengagement from personal relationships or society in general. This results in the marginalisation of older people in society. However, this theory has been strongly criticised by researchers who found little evidence that older people disengage themselves from their surroundings. They found that while older people's social relationships change, and they have fewer social relationships, these are often deeper relationships. Where disengagement does occur it may be due to other factors such as disability, poverty, retirement or widowhood.

Another sociological theory discussed by Dr. Davies was the exchange theory which proposes that interaction is only sustained as long as it is profitable to the participants. This theory argues that as older people have less to give in an economic sense, they become powerless, passive and compliant. However this fails to acknowledge that older people have currencies other than money to barter with in their exchange with other people. These include knowledge and experience.

Activity theory is based on the concept that successful ageing is due to maintaining the attitudes and activities of middle age. While this theory seems more positive, Dr. Davies argued that it tends to deny ageing to a certain extent.

Three other theories which Dr. Davies considered negative were 'labelling', 'social stratification' and 'political economy' theories. Labelling theory views old age as a deviant condition and labels it as such. Older people become the victims of the stereotype and see themselves in a negative way. This creates the false impression that older people are a homogeneous group. The social stratification theory divides people according to age and age is viewed as a way of explaining how people should behave. If an older person does not behave in a certain way he/she might be considered as 'mutton dressed as lamb'. In this way the individuality of older people is denied. The political economy theory argues that ageing is shaped by social and economic factors and that the way many people experience ageing depends on the way society values older people. For example, if older people are seen as an economic burden in society this will cause intergenerational tensions and negative attitudes to ageing. Dr. Davies said that although these theories are negative they help us to understand how negative attitudes to ageing arise.

She felt that the continuity theory, which views life as a continuous process in which each stage in life helps us to prepare for the next stage, is more positive. She explained that life can be viewed as a series of strands and at different times in life some strands are more important than others, for example, the work strand or the family strand. Coping with getting older is also a management process in which individuals need to manage changes in a positive and empowering way.

Dr. Davies concluded by saying that most theories of ageing are negative, and asked why this is so. She wondered if it was because they were constructed by young working academics. She also felt that it might be because of the lack of an appropriate language with which to communicate feelings about ageing. (The importance of language was also stressed in Ricca Edmondson's paper.) We have all learnt ageist attitudes. We now need to unlearn these attitudes by examining them and where they come from. Finally, Dr. Davies felt that there is a need for older people themselves to be more involved in the development of theories of ageing and tackling ageism.

DISCUSSION: THEORIES OF AGEING

The discussion began with a focus on gender differences in coping with ageing. One female participant felt that there was a gender difference in attitudes to ageing and that women's attitudes were more positive than men's attitudes. She suggested that this could be because women are more biologically in touch with their bodies whereas men do not experience ageing until they leave work. New developments, such as increased female participation in the labour force, may have an impact on this balance. One male participant felt that disempowerment was more of a problem for men than women. Another participant added that, in keeping with the continuity theory, this could be because women have more 'strands' to dip in and out of than men. The view was also expressed that people do not think about their own age very much, but one of the first things we get to know about others is their age.

Referring to the political economy and the exchange theories, it was felt that, as society puts a high priority on productivity and economic activity, it was difficult to move away from that way of thinking and to value other forms of social exchange. Older people contribute to society in numerous ways. For example, older people provide a lot of informal care which is of economic benefit to society.

The view was expressed that, at the moment, the emphasis seems to be on able-bodied and active older people and there is a corresponding lack of interest in the needs of less active older people. It was felt that more thought should be given to the promotion of positive attitudes towards mentally impaired older people, the frail elderly and those living in institutional care, and that the assumption that independence is paramount should be challenged.

There was general agreement that all theories of ageing should be considered helpful as long as they contribute to overcoming problems and do not become self-fulfilling prophecies. It was felt that different theories can be applied depending on the situation and the individual. Finally, the point was made that theories of ageing should be used not just to develop policy and promote positive attitudes to ageing but also to help understand the ageing process itself from different disciplinary points of view.

SECTION 4: PERSPECTIVES

Literary Perspectives on the Nature of the Ageing Experience

Professor Brendan Kennelly

Using poetry² as a starting point for his reflections on ageing Professor Kennelly began with the following quotation: 'We are born with old souls and as we live our souls get younger and that constitutes the comedy of life. We are born with young bodies and our bodies get older and that constitutes the tragedy of life'. He said that in a sense one has to live one's life in a state of felt ambiguity about one's body and one's spirit. While some people get older in both the flesh and spirit, others get older in years while their spirit remains young. Professor Kennelly gave Eamon De Valera as an example of a person who had a youthfulness of spirit in his later years. He felt he had a commanding presence. Following a meeting with Eamon De Valera he wrote a poem, the beginning of which stresses the importance of solitude, something which Professor Kennelly felt was lacking in modern society -

*To sit here, past my ninetieth year,
Is a joy you might find hard to understand.
My wife is dead. For sixty years
She stood by me, although I know
She always kept a secret place in her heart
For herself. This I understood. There must always be
A secret place where one can go
And brood on what cannot be thought about
Where there is noise and men and women ...*

(De Valera at Ninety-Two)

Professor Kennelly felt that although we grow older, a part of us remembers the visions, sounds and smells of earlier life. He argued that we have moved away from using our sensory perceptions, particularly of touching and smelling others and that this distancing is regrettable. (In the discussions the point was made that older people in institutional care are particularly deprived of touch. The Sonas project was mentioned as an effective means of providing sensory stimulation and social interaction for older people in institutional and day care). Furthermore, he thought that these perceptions have been ignored by our education system. He used the following poem, about the smell of an old woman, his grandmother, as he knelt beside her in church as a young lad, to elaborate his point -

*... I knelt at her side, my shoulder brushing her black,
Her lips surrendered visions of her private heaven and hell.
Drugged by her whispers, my head sank into her side,
My body and soul, in that instant, entered her smell,

Not merely the smell of her skin, but the smell
Of her prayers and pain, the smell of her long loss,
The smell of the years that had whitened her head,
That made her whisper to the pallid Christ on his cross ...*

... Her smell opened her locked world ... (The Smell)

Following this poem, Professor Kennelly referred to an old custom he remembered from his

2 Professor Kennelly read from *A Time for Voices: Selected Poems 1960-1990*, Bloodaxe Books, Newcastle upon Tyne, 1990.

childhood where the youngest child would kiss someone who was dying in the house. The custom was based on the idea that a taste of the spittle of death would make a child appreciate the sweat of life. It viewed death as an essential part of life which raised the senses and could not be avoided. He wrote a poem about his own experience of kissing a dying man of over eighty years when he was nine years old. The experience has stayed with him and reminds him of the ambiguity of life.

*... I walked across the bedroom floor
And felt the ice in his hands enter mine.
His eyes were screwed up with sickness, his hair was wet,
His tongue hung, slapped back. Every bone*

*In my body chilled as I bent my head
To the smell and feel of the sickspittle on his lips.
I kissed him, I find it hard to say what I kissed
But I drank him into me when I kissed him.*

*I recognised something of what in him was ending,
Of what in me had scarcely begun.
He seems without fear, I think I gave him nothing,
He told me something of what it is to be alone*

(The Kiss)

Professor Kennelly said that he was of a generation that was told that everything to do with the body was wrong. He felt that this fear of the body and of touching is returning.

He argued that grandparents have much to offer their grandchildren which parents cannot offer. He felt that older people should not be marginalised in society but that they should be part of the family unit. He recited a poem about his grandmother making bread which reminds him of the great pool of experience and knowledge which older people have to pass on to the younger generations. Later this concept was developed in a proposal for a modern day Senate in every town or parish in Ireland like those in Roman times. The Senate would provide an opportunity for older people to air their opinions and give younger people the benefit of their wisdom while establishing their rightful place in society. Unfortunately 'The Expert' has now supplanted the important position which older people once held.

*A Philosophical Perspective: Ageing and the Culture of Friendship**

Professor Markus Wörner

Professor Wörner began by pointing out that in Europe life expectancy at birth has almost doubled since the beginning of the century. However, while the likelihood of a person living to old age has become more secure, the Instance of suicide amongst older people has grown. He argued that while we have managed to add days to life we seem to have failed to add life to days and that an increasing number of older people experience difficulties because of this.

Professor Wörner distinguished between two general theories of life. In the first, there is a belief in the existence of an eternal life while in the second this belief does not exist. As no definitive proof of either theory exists, Professor Wörner concentrated on the common ground between both theories, that is the concept of the 'good life'. In the first theory, even if a person's present life is unhappy or unfulfilled there is a chance that he/she will experience the 'good life' in his/her post-mortal existence. As there is no belief in post-mortal existence in the second theory, the 'good life' must be pursued between birth and death. Both approaches to life share the concept of the 'good life'. Where they differ is their metaphysical assumptions about the length of that 'lifetime'. Professor Wörner said that we need to determine how to achieve the 'good life'. Otherwise we live in a state of crisis management.

The art of living is an activity, not a permanent state of affairs. Learning how to live well involves learning to cope with mortality and coming to terms with death. Therefore, to learn how to live well involves learning how to die well. The desire to know, or the desire for knowledge, is an integral part of developing the art of living. Also, without developing our senses and virtues (i.e. forms of acting and reacting emotionally) there cannot be a 'good life'. These skills, techniques and attitudes have to be learned from youth in order to provide the basis for a 'good life' in old age.

Professor Wörner said that accepting that one is alive is fundamental, because without this acceptance, one neither accepts to live nor to die. However, this also implies acceptance of the ambiguity of life, which Professor Kennelly referred to. Existentialist philosophers consider two modes of thinking which help to explain this ambiguity. In the first mode life is seen as a burden, as depressive, a failure and as a 'sickness to death'. The other mode perceives life as succeeding and one experiences a feeling of joy, lightness and rebirth. Acceptance of this ambiguity of life is a necessary condition of living and of developing sensibility.

Professor Wörner argued that it is impossible to develop the art of living or the art of dying on one's own. It must be undertaken with the assistance of relevant others who can provide support and be supported. In this context, he stressed the importance of friendship, as Professor Kennelly had done, not just in old age but throughout life. He said that friendship is a virtue which must be learned throughout life. There must be a culture of friendship within a society and without it a culture of positive ageing cannot develop in society. He said that there has been a lack of social science research into friendship among the elderly. The concept of friendship is difficult to operationalise because it is often hidden among other themes. Further investigation of this concept is needed to enhance the welfare of older people and their attainment of the 'good life'.

Professor Wörner concluded his presentation with the following quotation from Aristotle, *"a life without friends is not worth living"*.

*The text of this paper is available on request from the National Council for the Elderly.

DISCUSSION: DEVELOPING A THEORETIC FRAMEWORK FOR THE PROMOTION OF POSITIVE ATTITUDES TO AGEING IN IRELAND

Chair: Dr. Francesca Lundström

In the final wide-ranging discussion a number of important issues were raised, though the conclusions reached were not as definitive as might have been anticipated originally by the organisers.

The point was made that like many minority groups, such as people with disabilities and the young unemployed, the elderly are often viewed as a problematic and dependent group in society. It was felt that this attitude exists because of society's failure to integrate minority groups of any age, rather than because these groups of people are problematic in their own right.

OECD figures show that social expenditure on older people is already greater than for the young. With an ageing of the population predicted for the near future, the importance of taking steps now to cope with future demands on social expenditure for health care and income maintenance for older people, was stressed.

It was suggested that in promoting positive attitudes to ageing, there should be a focus on the fact that older people as a group, have human rights. However, a fear was also expressed that focusing on older people in particular would lead to further marginalisation and stereotyping.

There was general agreement that friendships and relationships are important factors in the lives of older people who have a positive attitude to ageing and that how they maintain this social reality and identity is a key to positive ageing.

The view was expressed that as theories of ageing are structured and do not generally address differences between people, it is important to ensure that they do not nullify action.

One delegate asked if there is a difference between theories of ageing and theories of living and, theories of ageing and theories of caring.

There was general concern that in promoting positive attitudes to ageing, vulnerable categories of older people such as the frail elderly, those in institutions and the mentally infirm, should not be forgotten.

Finally, it was suggested that as we all know we are going to age, we should think about the society we would like in our old age and strive to achieve that now.

Professor Brendan Kennelly brought the day's discussion to a close with a poem about the questions asked by his daughter one night when she was three years old and could not sleep. The questions arose from looking at a vase of flowers whose petals had begun to fall. The poem began -

And will the flowers die?

And will the people die?

And every day do you grow old, do I

grow old, no I'm not old,

do flowers grow old?

Old things - do you throw them out?

Do you throw old people out? ...

(Poem from a Three Year Old)

NOTES ON CONTRIBUTORS

Dr. Mary Davies

Dr. Mary Davies is an Educationalist at the University of Surrey, England. She is also Director of the Pre-Retirement Association of Great Britain and Northern Ireland.

Dr. Ricca Edmondson

Dr. Ricca Edmondson is currently a lecturer in Sociology at the Department of Political Science and Sociology in University College Galway. She is interested in health and environmental studies and in the sociology of knowledge. She worked in England and Berlin before coming to Ireland.

Dr. Tony Fahey

Dr. Tony Fahey is a Research Officer at the Economic and Social Research Institute, Dublin. He is currently conducting research on the health and well-being of the elderly population in Ireland on behalf of the National Council for the Elderly. He is a former lecturer in Sociology at St Patrick's College, Maynooth.

Ms. Noreen Kearney

Ms. Noreen Kearney is currently Senior Lecturer in Social Work and Head of the Department of Social Studies in Trinity College Dublin. She is vice Chairperson of the Institute of European Affairs and, vice Chairperson and former Chairperson of the Combat Poverty Agency.

Professor Brendan Kennelly

Professor Brendan Kennelly is a renowned poet and Professor of Modern Literature in the Department of English at Trinity College Dublin.

Dr. Francesca Lundström

Dr. Francesca Lundström is a research consultant currently conducting research on home help services for the elderly in Ireland on behalf of the National Council for the Elderly. She has conducted various qualitative research projects on criminology and disability and has lectured in the U.S.A.

Mr. Eamon O'Shea

Mr. Eamon O'Shea is a lecturer in Economics at University College Galway and a member of the EU Observatory on Ageing and Older People. He is co-author of a report on *The Role and Future Development of Nursing Homes in Ireland* and author of a report on *The Impact of Social and Economic Policies on Older People in Ireland*, published by the National Council for the Elderly in September 1991 and January 1993, respectively. He is currently conducting research on the Economics and Financing of Long-Term Care of the Elderly in Ireland on behalf of the National Council for the Elderly.

Mr. Michael White

Mr. Michael White was appointed Chairman of the National Council for the Elderly in 1993, having been appointed to the first Council in 1981. He is the nominated representative of older people's interests on the National Economic and Social Forum.

Professor Markus Wörner

Professor Markus Wörner is currently Professor of Philosophy in the Department of Philosophy at University College Galway. He is interested in the philosophy of time and how human beings can live a good life in society today. He worked in Germany before coming to Ireland.

Appendix 1

PROGRAMME

CHAIR: Ms. NOREEN KEARNEY, SENIOR LECTURER IN SOCIAL WORK AND HEAD OF DEPARTMENT OF SOCIAL STUDIES, TRINITY COLLEGE DUBLIN

- 09.00 a.m. Registration end Morning Coffee
- 09.20 a.m. Welcome
- 09.30 a.m. ***Opening Address on the Purpose of the Round Table***
Ms. Noreen Kearney
- 09.45 a.m. ***Social Integration of Older People: Implications of the Eurobarometer Findings***
Mr. Eamon O'Shea, Lecturer in Economics, University College Galway and member of E.C. Observatory on Ageing and Older People
- 10.00 a.m. ***Attitudes of Older Irish People Today: Survey of Over 65s***
Dr. Tony Fahey, Research Officer, The Economic and Social Research Institute
- 10.15 a.m. ***What do We Mean By Attitudes?***
Dr. Ricca Edmontison, Department of Political Science and Sociology, University College Galway
- 10.30 a.m. ***Discussion: Attitudes to Ageing and Older People***
- 11.00 a.m. Coffee
- 11.15 a.m. ***Theories of Ageing: Implications for Promoting Positive Ageing***
Dr. Mary Davies, Educationalist, University of Surrey and Director, Pre-Retirement Association, Great Britain and Northern Ireland
- 11.45 a.m. Discussion: Theories of Ageing
- 12.15 p.m. Lunch
- 1.30 p.m. ***Literary Perspectives on the Nature of the Ageing Experience***
Professor Brendan Kennelly, Professor of Modern Literature, Trinity College Dublin
- 2.00 p.m. ***A Philosophical Perspective: Ageing and the Culture of Friendship***
Professor M.H. Wörmer, Department of Philosophy, University College Galway.
- 2.30 p.m. ***Discussion: Developing a Theoretic Framework for the Promotion of Positive Attitudes to Ageing in Ireland***
Chair: Dr. Francesca Lundström, Research Consultant
- 3.45 p.m. ***Synthesis and Way Forward: Strategies to Promote Positive Attitudes to Ageing and Older People***

Ms. Noreen Kearney

3.55 p.m. Close
Mr. Michael White, former Chairman, National Council for the Elderly

4.00 p.m. Afternoon Tea
Appendix 2

LIST OF DELEGATES

Ms. Christina Burke	North Dublin Psychiatry of Old Age Service
Fr. Liam Carey	Adult Education, St Patrick's College, Maynooth
Mr. Bob Carroll	National Council for the Elderly
Prof. Davis Coakley	Mercer's Institute for Research on Ageing / TCD
Ms. Maeve Conway-Piskorski	Age and Opportunity
Mr. Michael Coote	Alzheimer Society of Ireland
Dr. Finbarr Corkery	National Council for the Elderly
Mr. Damien Courtney	Dept of Social and General Studies, R.T.C., Cork
Dr. Mary Davies	Pre-Retirement Association Great Britain & Northern Ireland
Dr. Freda Donoghue	National College of Industrial Relations
Mr. Tony Downes	Adult Education, Riversdale Community College
Dr. Ricca Edmondson	Dept of Political Science & Sociology, U.C.G.
Dr. Tony Fahey	Economic and Social Research Institute
Dr. Kathleen Foley	International Year of the Family
Dr. John Gibbon	Waterford Regional Hospital
Mr. Frank Goodwin	Carers' Association
Mr. Michael Gorman	Dublin
Sr. Anne Harte-Barry	Association of Teachers of Home Economics
Mr. Kieran Hickey	Eastern Health Board
Ms. Mary Horkan	Dept of Social Science, U.C.D.
Dr. Mary Hurley	Eastern Health Board
Ms. Noreen Kearney	Dept of Social Studies, Trinity College
Prof. Brendan Kennelly	Dept of English, Trinity College
Ms. Geraldine Kenny	North Dublin Clinical Psychology Service
Mr. Joe Larragy	National Council for the Elderly
Fr. Paul Leonard	Jesuit Health Office
Mr. Bill Long	Radio Producer and Broadcaster
Dr. Francesca Lundström	Research Consultant
Dr. Sheila Lynch	Eastern Health Board
Ms. Catherine Mc Cann	Baggot Street Community Hospital
Dr. Geraldine Moane	Dept of Psychology, U.C.D.
Mr. Tommy Murray	Adult Education Service, V.E.C., Co. Roscommon
Prof Ciaran O' Boyle	Dept of Psychology, Royal College of Surgeons
Dr. Pat O'Connor	College of Humanities, University of Limerick

Ms. Anne O'Loughlin	St Mary's Hospital, Phoenix Park
Dr. Des O'Neill	Dept of Medicine for the Elderly, Meath Hospital
Mr. Eamon O'Shea	Dept of Economics, U.C.G.
Fr. Brian Power	Social Researcher / Parish Priest
Mr. Muiris Prenderville	Federation of Active Retirement Associations
Ms. Catherine Rose	European Year of Older People / Age and Opportunity
Mr. Hilary Shannon	Retirement Planning Council of Ireland
Mr. David Silke	Social Researcher
Sr. Mary Threadgold	Sonas Project
Mr. Robin Webster	Age Action Ireland
Ms. Trish Whelan	National Council for the Elderly
Mr. Michael White	National Council for the Elderly
Prof. M.H. Wörner	Dept of Philosophy, U.C.G.

NATIONAL COUNCIL FOR THE ELDERLY PUBLICATIONS

1. *Day Hospital Care*, April 1982
2. *Retirement A General Review*, December 1982
3. *First Annual Report*, December 1982
4. *Community Services for the Elderly*, September 1983
5. *Retirement Age: Fixed or Flexible* (Seminar Proceedings), October 1983
6. *The World of the Elderly: The Rural Experience*, May 1984
7. *Incomes of the Elderly in Ireland: And an Analysis of the State's Contribution*, May 1984
8. *Report on its Three Year Term of Office*, June 1984
9. *Home from Home? Report on Boarding Out Schemes for Older People in Ireland*, November 1985
10. *Housing of the Elderly in Ireland*, December 1985
11. *Institutional Care of the Elderly in Ireland*, December 1985
12. *This is Our World: Perspectives of Some Elderly People on Life in Suburban Dublin*, September 1986
13. *Nursing Homes in the Republic of Ireland: A Study of the Private and Voluntary Sector*, September 1986
14. *"Its Our Home": The Quality of Life in Private and Voluntary Nursing Homes in Ireland*, September 1986
15. *The Elderly in the Community: Transport and Access to Services in Rural Areas*, September 1986
16. *Attitudes of Young People to Ageing and the Elderly*, Second Edition 1992.
17. *Choices in Community Care: Day Centres for the Elderly in the Eastern Health Board*, September 1987
18. *Caring for the Elderly. Part I. A Study of Carers at Home and in the Community*, June 1988
19. *Caring for the Elderly, Part II. The Caring Process: A Study of Carers in the Home*, November 1988
20. *Sheltered Housing in Ireland: Its Role and Contribution in the Care of the Elderly*, May 1989
21. *Report on its Second Term of Office*, May 1989
22. *The Role and Future Development of Nursing Homes in Ireland*, September 1991.
- 23(a) *Co-ordinating Services for the Elderly at the Local Level: Swimming Against the Tide, A Report on Two Pilot Projects*, September 1992.
- 23(b) *Co-ordinating Services for the Elderly at the Local Level: Swimming Against the Tide, Summary of an Evaluation Report on Two Pilot Projects*, September 1992.
24. *The Impact of Social and Economic Policies on Older People in Ireland*, January 1993.
25. *Voluntary-Statutory Partnership in Community Care of the Elderly*, January 1993.
26. *Measures to Promote Health and Autonomy for Older People: A Position Paper*, August 1993.
27. *Co-ordination of Services for the Elderly at the Local Level*, (Seminar Proceedings) September 1993.
28. *Voluntary-Statutory Partnership in Community Care of the Elderly*, (Conference Proceedings) September 1993.
29. *Dementia Services Information and Development*, (Seminar Proceedings) September 1993.
30. *Bearing Fruit*, A Manual for Primary Schools, September 1993.
31. *In Due Season*, A Manual for Post Primary Schools, September 1993.
32. *Measures to Promote the Health and Autonomy of Older People in Ireland*, (Conference Proceedings) February 1994.

33. *Theories of Ageing and Attitudes to Ageing in Ireland* (Round Table Proceedings) May 1994.

	National Council for the Elderly Fact Sheets
Fact Sheet 1	<i>Caring for the Elderly at Home</i>
Fact Sheet 2	<i>Carers You Matter Too!</i>
Fact Sheet 3	<i>Ageing in Ireland: Some Basic Facts</i>
Fact Sheet 4	<i>Voluntary Sector Services in the Community</i>