



Attitudes towards Old Age: A Study of the Self-Image of Aged

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ABSTRACT Aging occurs in a societal context, ranging from the micro scale of the family to the macro scale of the society. This context includes the attitudes, stereotypes and age norms, which determine age appropriate behavior for the aged (social-image). Further, the aged have an image of themselves (self-image) and an image of how they feel, the 'others' in the society perceive them (image of social image). The societal attitudes shape the social behavior towards the aged. The interactions of the aged in the social environment result in the self-image of the aged being reinforced by the social image. The present paper is an attempt to study the "self-image" of the aged, their "image of the social image", and the influence of "social image" on their "self-image".

INTRODUCTION

Images of aging exist at two levels; personal (our own), and societal (opinion of many people in the society) which are mutually reinforcing. To understand aging holistically, it is imperative to understand how the self-image is influenced by the process of aging including the social image.

An important component of this self-image is the "image of age" which includes knowledge of chronological age as well as subjective age (how old they feel and with which broad age group they relate to). Aging is judged by different criterion in different societies. The transition to old age is identified with several factors such as chronological age, ill health, retirement, physical/mental deterioration, and death of spouse. Studies reveal that changes in social role (widowhood, grandparenthood, retirement) and physical health dominate the definition of age identity. At the same time, studies also reveal that, like other age group, some aged separate illness or disability from aging. While they feel their health has deteriorated because of aging, their personality continues to remain the same. Thus, self-image remains unaltered, as the subjective image of age is not changed.

Chronological age is widely used, in spite of being an inadequate indicator of aging.

While society may consider people to be aged at 60/65 years, people of this age group may not feel they are aged but others of this age group do. This shows a discrepancy between the "self-image" of the aged and the "social-image".

Along with the image of their own attributes (self-image), the aged have an image of the way the rest of the society perceives them (image of the social image). This perception is based on

the societal attitudes towards the aged, which are in turn influenced by stereotypes. The social attitudes are favorable or unfavorable depending on stereotypes of aged. These stereotypes and attitudes are reflected in the way the social group treats the aged. Owing to these stereotypes, the aged develop favorable or unfavorable self-concepts. Self-image is thus reinforced by interaction with others in the social environment.

The inappropriate negative stereotypes lead to discrimination and prejudice (ageism) against the aged. "Ageism" coined by Butler (1999), was described as a process of systematic discrimination and stereotyping of the aged. Today, it has come to include any prejudice or discrimination, in favor of the aged as well. However, more often ageism is negative than positive.

The negative image typically includes a set of behavioral expectations or prescriptions which defines what a person is to do or not to do. The aged are expected to be forgetful, intellectually rigid, unproductive, asexual, and so on. The aged respond variedly to these expectations. Palmore (2003) has identified four common responses of elders to these prescriptions and expectations; acceptance, denial, avoidance or reform. The aged who accept the negative image "act old" even if it is contrary to their personality, denial includes lying about one's age, cosmetic surgery, hair transplant and dyes, use of anti-aging products. While these may not appear significant, they erode the morale. Avoidance may take the form of self-imposed isolation. Reform involves an effort by the aged to eliminate the ageist attitude individually or by joining some advocacy group. All these behaviors have a harmful effect on the aged (Pearlin and Schooler 1998).

Ageism can be intentional or inadvertent. The society we live in is permeated with ageism in varying degrees. Cultural stereotypes, pop cultures and media reinforce in a youth oriented society, "Young is beautiful". Further, the constant emphasis on youth, beauty, vitality and strength, indirectly strengthens the negative aspects of ageing. Literature reveals that younger people have negative image of ageing while the aged have a relatively positive image but at the same time the aged themselves had negative attitudes and perspectives of the other aged. It appears the aged themselves are impervious to negative stereotypes of aging being influenced by the social image. This bears proof to a maxim of social psychology which says, what we think of a person influences how we perceive him, how we perceive him influences how we behave towards him and how we behave towards him ultimately shapes who he is ? (Blau1973).

Early research on aging reinforced the negative stereotypes of ageing. There is an urgent need to study the self-image of the aged, the social image and how the social image influences the self-image of the aged.

The present paper is an endeavor in that direction. It is descriptive and exploratory and attempts to understand the 'self-image' of the aged and their 'image of the social image'.

MATERIAL AND METHODS

A sample of 25 elderly (age ranging from 60 to 75 years) was selected randomly and a set of questionnaire was administered to elicit information on transition to old age. response to aging (change in personality, change in life style, religiousity in old age, gender differential response to aging, aging), best and worst aspects of aging, aging well and poorly, changes in family and society, ageist attitudes, aged abuse, social image of the elderly-myths and misconceptions regarding the elderly, the need to change public perception and ways to do it, appropriate age norms for the aged, suggestions for successful aging, special entitlements, opinions on nursing homes . Further, an ageing quiz (Miller and Dodder 2000) was conducted to test their knowledge of ageing and check for influence of negative stereotypes on their perceptions of aged and ageing.

The factors cited to describe transition to old age include ill health, mental deterioration,

dependence, restricted social mobility, loss of spouse, retirement, less social contacts, general functional disability, lack of general interest in anything and frequent desire to rest/sleep, grand parenthood, and mental problems.

Chronologically, 50, 55, 60 years were described as the years that mark the beginning of the ageing process. However, deterioration of physical and mental health dominates the description of transition to old age (Orbach 1991).

RESULTS AND DISCUSSION

The response to aging included acceptance, denial, avoidance and reform. However, these responses varied with different aspects and also with age, gender, personality among other things. Most respondents accepted they were old. A 95 year old respondent stated that 'at his age one can be nothing else but old. 'An 85 year old responded that there was no question of consideration of old age, it was a graceful acceptance. One described himself as physically aged but not mentally (a very good example of separation of illness and image of age). Another opined in a similar vein that consideration of being old is "all in the mind", further, as he was not dependent he was not aged.

However, his wife, though younger, being dependent due to her ill health was old. It appears the young old (60-70) may or may not consider themselves and others of their age as old depending on subjective factors, while acceptance of aging was greater after 70 years of age.

In response to change in personality, most of the elderly emphasized their physical personality (aspects such as being physically less active, dependent and diagnosed with mental diseases that come with old age). At the psychological level, most believed they were compelled to change their personality.

Being confined to the home and having fewer visitors, results in progressive social isolation. Further, it was difficult to communicate as they could not hear properly and also they could not speak clearly because of aging. Change in personality was inevitable due to the other changes that occur with aging. As a result of change in role and status, one learns not to interfere and to submit to domination by children and daughter in-laws and at times even to grand children. If they desire to live with their sons they have to adjust and be more compromising. Fewer

still believed that personality does not change with old age if one has economic independence, good health, family support and God's grace. Very few believed that personality changes at every age of life and so also at old age.

The response to changes in life style appears to be predominantly negative. Aging seems to have disrupted "normalcy" for most of the aged. The changes that it brings are more detrimental than progressive. Changes have to be made in every aspect right from what one eats. Social disengagement is either forced or voluntary –One is forced to stay home and there are fewer visitors. Personality had to be changed to accept present trends and behaviors. One heart-rending response was "every minute haunts you from the first cup of tea". The time at their disposal increased when they had nothing to do. This was leisure for the young but for them it was being idle. Some respondents believed that when one is loved it is not difficult to make adjustments and compromises.

Do old people tend to become more religious with old age? For some who were religious, old age provides greater time for worship. For others, the sufferings of aging made them religious and that helped them in dealing with aging better. For some the temple or mosque was a place of regular visit, not for worship but as a meeting place for socializing and entertainment.

The best part of aging was leisure, more time for oneself and family, having fun with grand children. The worst part of aging was dependence, helplessness and the physical deterioration; having no cultural integrity, no financial security and having bad social relationships; forced leisure and circumscribed life; not getting the food that one desires to eat. It was difficult to bear the hitting of grandchildren if they were close to the grand parents. they were asked not to interfere in children's up bringing. One respondent said-it was hell to lose a progeny.

Losing friends and relatives was also very painful and curbed their desire to live. While some readily accepted the fear of death, some said they believed death was better for it would relieve them of their misery.

The three often cited factors for aging well includes, economic independence, some one to love and to be loved and good memories. Economic independence and planning for old

age were considered pivotal for freedom and dignity in old age. Having some one who cares

and someone to love gives a sense of belonging and was reported as very important for the mental well-being of the aged. Further, taking responsibility for someone added a sense worth to their living. Evidently, one's past and memories were significant in determining well-being of the aged. Further, the realization and acceptance that aging is natural and inevitable helped in adjusting well.

Ill health was considered the major factor that led to aging poorly. Loss of memory worsened things. Economic dependence was considered restricting, in all aspects of living, directly or indirectly, including how children treated the aged. Not having anyone who cared and knowing nobody will be there when in need, makes him or her feel insecure and unwanted. Estrangement with children only added to the woes. It made them feel that they had wasted all their life in bringing up ungrateful children.

Society forgets you and one is made to feel like a second-class citizen. Society becomes distant. The aged become more dependent on family and the more they depend on it the more helpless they feel. They are made to feel worthless, unwanted and alienated. Family starts treating them as a burden, they feel betrayed by their children for whom they had toiled all their life and sacrificed so much including their youth. Grand children whose responsibility they had taken and played an important role in their upbringing after growing up treat them like dirt. Their well-intentioned advices are treated as interference. They do not have the freedom to do anything. Even watching television depends on the mercy of the grand children. They have to tag along and are voiceless. They have to make compromises on everything: food, living space, movement, entertainment.

Children feel that having the elderly in the house is an unwanted disturbance in their private life. They are compelled to stay at home in spite of all this because of the insecurity that comes with being easy targets of victimization, exploitations, intimidation and crime.

A difficult adjustment that had to be made was learning to live with the death of spouse with whom one had spent a long time. Family separates and social importance reduces. One respondent was happy that his people took greater care of him because he was old. Another was unhappy that he had to move from one home to another every six months, being ill-treated by daughter in laws and having to bear his wife being abused by

them. Further, he was made to do household chores and babysit children; it was like a slave labor.

Most of the aged were hesitant to talk on elderly abuse and attitudes while they had an incidence of abuse to narrate. Most believed that financial position and culture in which one lived significantly influenced the attitudes. Some felt lucky they did not have to face it. Some took solace thinking that some other aged had more miserable lives with abuse.

The abuse at home upset those more than the one from strangers. At home it was so subtle it could not be stated as abuse but it was. Abuse often took the form of over working them, denying them their basic needs and hurting their dignity. One 85-year-old respondent said he was made to make his own tea, wash his clothes. While he lived with his son and daughter in law he did not dine with them and had to eat what was left over. This abuse he felt was worse than verbal abuse. Some felt that their helplessness was exploited. They were forced to exist without a voice and freedom, and their dignity was denied. They were deprived of any autonomy.

In some cases there was no abuse, but there was silence and distance, which the elderly said, was very difficult to deal with. And in some cases it was regular abuse at home. They felt that when the aged were financially independent they got better treatment. Some believed that in general people gave respect to the aged but that was on the decline.

According to most of the respondents, people's perception of the aged was predominantly negative. The younger generation believed that the aged are always nagging and they become obstinate. The younger generation starts to stereotype the aged and believe that whatever the aged person is doing or thinking is because of old age. There is no difference between aged and person: being aged it appears determines the personality and there is no room for differences. To bring about changes in these perceptions the aged felt that it was essential that sensitivity to the aged should be inculcated in upbringing. With the treatment of the elderly being a cultural factor, upbringing and the family background of the person determine his response to the aged. People should be made aware that the aged become helpless with age. A little love and caring will bring about a lot of change in their lives.

One respondent believed that it was more of

a family affair and if family values were restored aging will become a natural development. Modernization, understanding and tolerance have been cited as the appropriate age norms for the aged. Keep oneself busy, share things with grandchildren who are closer and more compromising and try to get along with everyone. Planning for financial security, insurance and bringing up children in a way they are sensitive to the aged will help in successful aging. It is all the more important now in these rapidly changing times, that children be taught to respect their parents and be trained to care for their parents in the future. Further, some respondents believed that, for a peaceful aged life one has to be contented with what one has and believe in divinity.

With regard to the special entitlements, the aged believed that they should have access to free medical treatment and those who did not have financial security, should be given a monthly allowance. Health care should be geared to the specific needs of the aged and they should be given more concessions.

The aging quiz indicated a significant influence of the social image on self-image of the aged. The societal perceptions and expectations seem to determine the way the aged person responds to aging. Further, the age norms perceived by the aged are supportive of the societal perceptions, while being inimical to their own welfare.

CONCLUSION

Evidently, there is a need to counteract ageism to enhance the quality of living of the aged. To understand ageism it becomes pertinent that we begin by understanding the stereotypes and put in our best efforts to abandon the negative stereotypes. A step in that direction would be to make social content elder friendly and sensitive. Systems perpetuating ageism have to be identified and appropriate measures to eradicate such attitudes should be undertaken. The fundamental approach is to minimize individual ageist attitudes. Thus identification of such attitudes become essential. Social action and reform will go a long way in negating ageism.

Cultural stereotypes should be encountered with awareness. The major source of creation and perpetuation of such attitudes and stereotypes is lack of information; the role of media cannot be overstated here. Intergenerational programs such

as “granny tales”, where the aged share their stories with children will not only be educative and fun for children but also keep the aged busy, happy and satisfied. Further, it will help in bridging the gap between the aged and children and in making them learn to love and respect the aged. There is an imminent need for sensitization to aged and ageing. As a part of formal instruction, children should be inculcated with respect for and understanding of aged. Youths should be made to realize that they would be old one day. They should be encouraged to plan for aging with dignity and independence. Elderly groups should be encouraged to form and function. They should volunteer for elderly welfare and form watch dog committees for monitoring policy and lobbying for their interests. Aging successfully relates to defying stereotypes and living long and happy lives. Multi generational groups should also be formed to monitor attitudes; media images of aged, to ensure aged are not exploited in the

name of welfare. “Aging fairs”, “aging stars”, older women groups and such similar innovative means, will help in keeping the aged busy and at the same time create awareness to negate stereotypes about the aged.

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