ELDER EMPOWERMENT: IDENTIFYING AND ACHIEVING THIS GOAL

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Center for Elderly Suicide Prevention’s “Friendship Line” **800.971.0016**

24-Hour **Accredited** Crisis Intervention Telephone Hotline/Warmline, began service in 1973:

- **Call-In Service** – Confidential telephone discussions for people 60+ (their caregivers or younger disabled) who may be lonely, isolated, bereaved, depressed, anxious and/or thinking about death or suicide
- A caller does not need to be in a suicidal crisis to use the call-in service
- **Questions?** Mia Grigg, Friendship Line Director, Mgrigg@iaoging.org 415.750.4138
- Patrick Arbore, Founder & Director, CESP – parbore@ioaging.org or 415.750.4133
Friendship Line

• Call-Out Service – Friendship Line Staff or Trained Volunteers will make phone calls to older adults for emotional support – Referrals can be arranged by calling IOA Connect 415.750.4111

• Grief Services – Saturday Morning Drop-In Traumatic Loss Group – 10:30 a.m. – Noon; 8-week Traumatic Loss Grief Group and 8-week Advanced Traumatic Loss Grief Group – Contact IOA Connect for more Information: 415.750.4111
NO EXPERIENCE IS LOST

"Aging is far from being only a process of reducing, wilting and fading. Old age, like every other stage of life has its own merits, its own magic, its own wisdom, its own sorrow. In the peak periods of all cultures, old age was revered for good reasons. Today we worship adolescence and we won't hold it against the young that they see their phase as the best, but let us not believe this nonsense propaganda that old age is worthless... Whoever becomes old consciously, can observe that in spite of diminishing powers and potencies, every year brings an increase and an enhancement in the infinite web of relations and connections. As long as one is conscious, nothing temporary, no past experience is ever truly lost."

-Hermann Hesse, *The Seasons of the Soul*
Key Findings from January 2016 The Population Reference Bureau report, "Aging in the United States"

- The number of Americans ages 65 and older is projected to more than double from 46 million today to over 98 million by 2060, and the 65-and-older age group’s share of the total population will rise to nearly 24 percent from 15 percent.

- The older population is becoming more racially and ethnically diverse. Between 2014 and 2060 the share of the older population that is non-Hispanic white is projected to drop by 24 percentage points, from 78.3 percent to 54.6 percent.
Empowerment: It’s About Living

• We need to change the conversation about growing older in America – **empowerment in old age is an increasingly important issue due to these rapid demographic changes**
• We want to be acknowledged for who we are, not how old we are
• When we can embrace the passage of time, we can look forward to the possibilities of what life has in store for us
• It’s not just about aging; it’s about living
Birthdays and Ageism

• For many adults birthdays, especially the round birthdays are the worst days
• For decades turning 50 is met with anxiety and dread; 60 is worse; 70 is terrifying; etc
• Some people can’t contain their existential anxiety in those moments like they do most of the time.
• The defense mechanisms break down under the environmental pressure
• The anxiety comes in waves despite the cheerful veneer
Modern Gerontology

According to Schachter-Shalomi (1995):
• M.G. treats aging as a problem of social engineering to be solved through technological means
• The one-sided drive to alter, reverse, or somehow control the biological process of aging actually impoverishes its meaning.
• So-called positive aspects of aging turn out to be disguised efforts to restore youth instead of appreciating growing old as a fundamental part of the human experience
Aging Stereotypes

- Older individuals must navigate through a youth-centered society in which negative stereotypes of aging may literally harm the cognitive and physical functioning of older individuals.
- The internalizing of aging stereotypes begins in childhood.
- Allport (1954), “A child who adopts prejudice is taking over attitudes and stereotypes from his family or cultural environment.”
Aging Stereotypes

• The outcome of this process was illustrated when children, ranging from preschool to sixth grade, were shown drawings that depicted a man at four stages of life; participants as young as three were able to identify the drawing of the oldest man, and 67% of all the children considered the oldest man to be “helpless, incapable of caring for himself, and generally passive”
Advertisers, Marketers and Ageism

• “50 is the new 30”
• “60 is the new 40”
• “70 is the new 50” and so on
• What we know is true is that “50 is 50”; “60 is 60” and so on
• Who we should be and what is expected of us at a certain age is an outdated ageist stereotype
• Empowerment means embracing our age and accepting where we are in life
Ageism – Several Noteworthy Aspects

• The first step towards empowerment is to recognize that ageism exists
• The public in general maintains a negative view of the aging process and aged persons
• Among the common myths about older persons are the perceptions that we are all alike, all poor, all sick, all depressed, all living alone or in institutions, all senile, and most generally unable to function in society.
A 2014 published study by Yale researchers on content analysis of Facebook groups that had descriptions about individuals aged 60 years of age and older (mean age of group creators was 20-29 and no one > than 59) netted the following results:

- 74% of the total descriptions harshly criticized older people “they do not contribute to modern society at all”
Facebook Study Continued

• 41% of the descriptions referred to physical debilitation, 27% to cognitive debilitation, and 13% to both forms of debilitation

• An example: “I hate everything about them (old people), from their hair nets in the rain to their white Velcro sneakers. They are cheap, they smell like {expletive deleted}…they are senile…

• 37% of the descriptions advocated banning older people from public activities

• 26% of the descriptions infantilized older people
Facebook Study Continued

• In 37% of the groups, the creators advocated banning older individuals from various types of public activities

• Among the banning groups, driving was the activity most frequently targeted (35%)

• THE MEAN AGE OF THE GROUP CREATORS WAS 20-29 – Had a total of 25,489 members – 65% were men
According to Irving (2015)

- Ageism is not based just on poor information; ageism is morally wrong
- It interferes with opportunities for older people to continue working or to find viable work environments
- Ageism is a major concern for the baby boom cohort who have new expectations for work and retirement
- Two-thirds of this cohort plan to work past age 65; or they do not plan to retire at all
Ageism in the Workplace

According to an AARP Study (2013):

• “Approximately two-thirds of workers ages 45-74 state that they have seen or experienced age discrimination in the workplace

• Of those, a remarkable 92% state that age discrimination is very, or somewhat, common”
Ageism in the Workplace

According to Levy (2002):

• Even when younger workers have regular contact with older workers, they tend to cling to the inaccurate stereotype that older workers tend to be less productive than younger workers.

• As one way of eliminating dissonance, if a highly successful elder is encountered, this person may be categorized as an exception to the internalized category.
Co-Occurrence of Ageism and Abuse

• The negative attitudes that lead to ageist behavior also make it easier for the perceiver to regard the welfare and humanity of adults as less important than that of younger adults

• As such, ageism may indeed be a contributing factor that leads some younger adults to neglect, exploit, or otherwise abuse older adults
Yale University Social Psychologist Becca Levy

- In older adults, subliminal stereotypes caused heightened cardiovascular activity in older adults, an indicator of stress.
- Those findings, combined with evidence that factors such as overall optimism or loneliness can affect health and survival, led Levy to speculate that years worth of stereotypes might shorten life-spans.
- Participants who felt better about aging lived an average of 7.6 years longer than those who were disheartened.
Empowerment and Inequality

• Inequality becomes more pronounced at both ends of the life course
• The negative impact of inequality includes the capacity to be heard
• Disempowerment is closely connected to the denial of human rights
• Research suggests that the biggest threat to an older person’s autonomy may come from family members who begin to make decisions on behalf of the older person and thus disempower them
Self-Empowered Aging

Paul Irving (2015):
• Taking control of one’s life
• Learning, updating, and improving skills
• Taking risks
• Building confidence
• Assuming power over personal circumstances
• Developing the resilience to overcome inevitable challenges to come
Social Empowerment

- Based on evidence from program interventions and interviews with older people themselves: Involvement in local decision-making through their local organizations, including advocacy with and by older people, leads to tangible improvements in their lives.

- Older people self-help groups is an example of program intervention.
Social Empowerment

• Peer Education – widely accepted as the most effective way to increase knowledge, effect behavior change, and provide support for a number of issues – Education is transformative

• Actions that support older people to organize and advocate directly to policy makers enhances well-being and self-esteem
Health Empowerment

• We need to understand the difference between “normal” changes and serious disease, and take steps to improve your **brain health**
• Moments of forgetfulness happen to everyone—even the young; as we get older, forgetfulness may leave us wondering if we’re losing our mental edge; thoughts of Alzheimer’s disease may worry us
• These feelings are natural
Adult Brain

“The adult brain, and even the adult aging brain, is fine-tuned by experience in both its performance and its abilities, essentially organizing itself in accord with its experience to prepare for the future,” said the late Greenough, a neurobiologist at the University of Illinois at Urbana-Champaign. “Since one of the best predictors of future needs is past demands, having a brain that is optimally tuned to prior experience is ideal.” The brain’s capacity to structurally change by learning is what scientists call its plasticity.
Myths and Facts

Myth: You can't stop Alzheimer's disease
Fact: Medicine doesn't have a cure yet; research suggests that eating well, reducing stress, staying engaged with others and stimulating your brain with new activities can at least slow this devastating neurodegenerative disease. Eating a Mediterranean-style diet featuring plenty of fruits and vegetables and very little meat or sweets can reduce your risk of Alzheimer's and other forms of dementia by as much as 53 percent.
Myths and Facts

Myth: Your mind gets worse with age
Fact: The older brain actually has some big advantages. As brains age, the network of fibers that allow nerve cells to talk to each other gets richer. As a result, older people rely more on both sides of their brains than younger people do. Older adults also benefit from their superior "crystallized" intelligence, which includes the skills, knowledge and experience gained over a lifetime.
Myths and Facts

Myth: Old age should be a time of relaxation and enjoyment

Fact: Evidence suggests that a sense of purpose preserves mental edge and even reduces the risk of dementia. A recent study of nearly one thousand older people found those leading a more “purpose-driven” life retained their cognitive capacities significantly better over the next seven years and were far less likely than their peers to develop Alzheimer’s disease.
Myths and Facts

Myth: Older people have earned the right to be sedentary.

Fact: A healthy brain needs a healthy body. The brain’s vitality depends on a robust circulatory system, and there is abundant evidence that cardiovascular risk factors—high blood pressure, high cholesterol, smoking, obesity, and diabetes—also increase the risk of cognitive decline. The effects of poor vascular health can be devastating: brain damage caused by impaired circulation—gradual and acute—is responsible for or contributes to up to two-thirds of dementia.
Myths and Facts

Myth: Older people cannot learn new things
Fact: As we age, our ability to lay down new memories may be affected, making it harder to learn. It’s not that we forget more easily, but that initial encoding takes longer. If we take the time to commit the new information to memory—focus on it and fully learn it—then we will typically remember it as well as younger people.
Myths and Facts

Myth: The older brain slows and we inevitably forget prior knowledge

Fact: Skills we acquired earlier and have practiced over the years may be at their finest, whether they are mental, such as analyzing the stock market, or procedural, such as playing a musical instrument. As we age, we develop a richer, more extensive vocabulary and contextual history in which to use words effectively; recent research suggests that even the apparent slowdown in mental processing reflects, in part, the richer supply of information that the older brain must sort through.
Aging Wisely

“We can make the brain work better simply by accumulating more knowledge, which builds more networks of connections,” says Dr. McGaugh; “The wisdom we acquire can compensate for the decline that may be gradually occurring.”

Only recently have researchers begun to study the neurobiology of wisdom. One clue comes from understanding the brain’s life cycle. According to Jordan Grafman, Ph.D., the brain areas that develop first are the last to decline.
Aging Wisely

“The knowledge that we acquire early in life tends to be stored throughout life. As we age, we develop a history of life experiences, and we see the end of processes as well as the beginnings; Access to this wealth of information affords us advantages in understanding situations and reacting appropriately.
Purpose in Life

• Purpose in life, an indicator of human thriving, has long been hypothesized to be an important determinant of health outcomes

• In recent years, prospective studies have suggested that purpose in life and related aspects of wellbeing are associated with a substantially reduced risk of adverse cognitive health outcomes, including the risk of AD and its precursor, mild cognitive impairment, as well as a slower rate of cognitive decline even among older persons without AD or mild cognitive impairment
Purpose in Life

The ability to find meaning in life’s experiences and develop a sense of direction and intentionality requires:

• (1) self-reflection
• (2) integration of diverse experiences into a narrative
• (3) awareness of one’s role and potential within the broader context
• (4) establishment of goals and priorities
• (5) focus
Purpose of Life

• Purpose in life is related to aspects of psychological health, including happiness, satisfaction, personal growth, and better sleep.
• There are associations between purpose in life and aspects of personality (i.e., neuroticism, extraversion, and conscientiousness), as well as depressive symptoms, have been reported by researchers.
• Purpose in life also is associated with better treatment outcomes for persons with addiction.
Purpose in Life

• Taken together, the available data suggest that persons with higher levels of purpose tend to be goal-oriented and resilient, and their active pursuit of goals likely enhances the strength and efficiency of neural systems
Reflection and Learning

John Dewey: “We do not learn from experience … we learn from reflecting on experience.”

• Research by DiStefano and others suggest that individuals of all ages may increase their knowledge through reflection and learn “smarter,” not “harder.”

• Reflecting on emotions may be helpful to unlearn discrimination and oppression in order to abandon previously held beliefs and values.
A Future with Dignity

According to Al-Jen Poo (2015):

• We must achieve a profound cultural shift in how Americans feel about aging and care.

• Our new stories about care and aging must be told so that many different kinds of people can relate to them on an emotional level.

• Actually seeing older people as the complex people they are will be a huge relief for younger and middle-age adults who, consciously or unconsciously are plagued by unease about their own later years.
Our most cruel failure in how we treat the sick and the aged is the failure to recognize that they have priorities beyond merely being safe and living longer; that the chance to shape one’s story is essential to sustaining meaning in life; that we have the opportunity to refashion our institutions, our culture, and our conversations in ways that transform the possibilities for the last chapters of everyone’s lives. Gawande, p. 243
Empowerment and Health

• Health education can foster empowerment by increasing knowledge to make informed choices and facilitating disease management
• Enhance the individual’s ability to identify and set realistic goals; apply a problem-solving process to eliminate barriers to reach goals
• Manage stress related to the illness
• Identify and obtain social support
• Improve self-motivation
Wonderment

• Many older people achieve an attitude that has long been the goal of various religious traditions – a sense of the immediacy of life and a new ability to live in the present moment

• The elemental realities of life assume greater significance – children, plants, nature, music, physical and emotional touching, the textures of color and shape
Wonderment Continued

• The price of this birth of wonder is an acceptance of life’s limitations
• The discipline of acknowledging certain limits simplifies life – our vision is uncluttered
• Wonder is the prelude to gratitude
• Wonder arises from our natural curiosity about the adventure of life
Spirituality and Aging

- Few studies on aging have taken a spiritual view.
- The growing edge of discussion on the meaning of aging is its spiritual dimension.
- Spiritual means not just one compartment of life, but the deepest dimension of all of life.
- Spirituality includes our efforts to deal creatively with retirement and end of life.
- We need to find a purpose for our lives after our families have been raised.
- We need to find a purpose for our lives when our spouses or partners have died.
Becoming Aware

• Become aware of your fears – Whatever the feeling you must go to the root of the emotion, which is a part of your personality that you do not know about, or are too frightened or ashamed to acknowledge.

• We need to become aware because older age is a time for the cultivation of wisdom and integrity – older age is a time for going deeper into the self.
Becoming Aware

• Recognize how your body feels when it experiences the sensation of anger, sadness, disappointment, joy, delight etc. – speak with someone who will listen about your “inner” experience

• If you do not challenge your negative feelings, you will die with them – so change an aspect of yourself now
Challenges

• Some people have accepted the negative images of old age, made them their own, and begun to live out of these images of incompetence and insignificance.

• The task of a spirituality of aging is to convert the imaginations of both old and young to a new vision of the human.

• This can only happen if the old themselves refuse to let society define them – and instead internalize new images of the later years.
Empowerment

• May open many other options for improving one’s health
• A positive approach to health emphasizes: strengths, resilience, resources, and capabilities rather than existing pathology
"Aging is not lost youth but a new stage of opportunity and strength." Betty Friedan (1921-2006)
References


References


References


• Yalom, I.D. (2008). *Staring at the Sun: Overcoming the Terror of Death.*
References


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