

Different theories of ageing



**ASSIGN
BUSTER**

One of the most significant achievements of modern society is the rise in human longevity. Since 1800, life expectancy at birth has gradually increased over the subsequent two centuries, from forty years to nearly eighty years (Bongaarts 2006). These remarkable changes in human biology have produced challenges for scientists, doctors, sociologists and policy-makers. Over the last century, the growing realization of the changing demography of ageing has provoked sociological and biological research to explain the effects of these changes on society. The aim of this essay is to discuss how different theories of ageing have tried to approach older people and their circumstances.

The study of ageing as social gerontology took root in the late 1940s, at a time of great social and demographic change. After World War 2, society in Europe and the United States of America (USA) had palpably changed, prompting sociological research into changes in ageing amongst other sociological phenomena (Vincent 1996). The modern political and economic environment viewed ageing, for the first time, as a ‘problem’ for society (Jones, 1993).

This view of ageing was at odds with the prevailing functionalist sociological theories of the time. Talcott Parsons was a key proponent of general functionalism, and viewed society from the ‘macro’ perspective of needing functioning parts in order to maintain its well-being. The analogy was with the body of an organism – just as the body has many specialized organs which are required for the body to function, society is also the sum of its parts: youth, family, education, labour force, professionals, religion,

government etc. Society required these parts to be working together in order for society to function with equilibrium (Giddens 1993).

The biology of ageing had been actively researched since the days of Darwin and Mendel, yet the interaction between ageing and society remained unexplored. Indeed, the Social Science Research Council in the USA concluded in 1948 that the scientific community had paid little attention to the interaction between biology and society (Achenbaum and Bengston). The first psychosocial theories on ageing and society took shape, and were published a decade later.

Social scientists Elaine Cummins and William Henry published the first important study of aging in 1961. They advanced what they called ‘ the disengagement theory of aging’. This theory was based on data from the Kansas City Study of Adult Life, in which researchers from the University of Chicago followed several hundred adults from middle to old age. The authors concluded from this study that growing old was a process of ‘ disengagement’, whereby the tendency of ageing adults was to withdraw from society and live out their ‘ declining’ years with as little interference with others as was possible. Whilst these findings reflected the social practice of the day – such as the ‘ granny flat’ or retirement home environment, the authors also proposed that this theory had advantages for the individual and society.

According to Cumming and Henry’s model, the major shift in interaction between the aged and the rest of society occurs when older people begin to realize their declining physical and cognitive functions and their mortality.

They propose that this leads to removal, both consciously and subconsciously, from social networks. Simultaneously, society distances itself from the elderly, and the roles and responsibilities of these elderly members of society are passed along to the younger ones.

From a sociological perspective, it has been suggested that disengagement has theoretical benefits (reference?). For the elderly, disengagement facilitates gradual withdrawal from society, whilst preserving social equilibrium. Ageing removes the capacity for older people to function as parents, professionals or working members of society, and therefore it promotes self-reflection for the elderly who are freed from roles of responsibility within society (ref?). Ultimately, it prepares the elderly for a decline in health and death.

From the perspective of society, disengagement allows knowledge, responsibility, wealth and power to be transferred from the older generation to the young. The roles of the old and the young in society evolve, such that disengagement from roles of responsibility ensures that the younger population have jobs and roles into which to develop. It makes it possible for society to continue functioning after valuable older members die.

Clearly, disengagement theory must be viewed in the context of the era in which it was developed. Largely, the theory of Cummings and Henry reflected the practice of the day. Elderly people in industrialized nations in the 1960s were encouraged to live out their declining years without ‘interfering’ with progress and development. In rural settings, elderly people may still have contributed through the use of learned practical skills,

although during a time of rapid technological advancement these skills were less valued than by earlier generations. This is a form of role discontinuity, whereby what is learned at one age may be useless or conflict with a subsequent period on one's life.

This contrasts with contemporary views of ageing, whereby aged populations are more familiar with the technological advances of the second half of the last century. Retirement and disengagement in this context may not be to the benefit of society or the individual. Moreover, until recently few positive role models for elderly individuals existed. Those in the public eye and the media have tended to be youthful in appearance, hindering the socialization to old age. However, with the demographic growth and visibility of the elderly population has come more role models of active and healthy ageing.

In this setting, disengagement of individuals before they reached the stage of imminent mortality, whilst they are still able contribute to roles in society, may cause both social and financial isolation and lack of self-worth. Loss of role through loss of spouse, divorce or retirement can lead to an erosion of identity and self-esteem (Rosow 1985). This, coupled with the relentless improvement in healthcare for the elderly, suggests that disengagement theory may be a product of the post-World War 2 era rather than universally applicable.

These problems with the universal validity of disengagement theory were recognised within a few years. Activity theory can be viewed as a counterpoint to disengagement theory. Activity theory views old age as an extension of middle age, rather than a separate psychological and biological

stage of life as proposed by disengagement theory. Activity theory actually pre-dates disengagement theory. In the 1950s Havighurst and Albrecht (1953 cited in Katz 1996) insisted ageing can be lively and creative experience. Any loss of roles, activities or relationships within old age, should be replaced by new roles or activities to ensure happiness, value consensus and well-being, and that this approach has benefits for the individual and society. The theory builds on the principle that the biological process of ageing can be modified by modern healthcare, and therefore the only differences between old age and middle age are these modifiable biological processes, not societal wants and needs (Schulz and Rockwood).

The basis of the theory is that there is a positive relationship between activity and life satisfaction, and the greater the role loss the lower the sense of self-worth or satisfaction (Lemon 1972). Therefore, a person's sense of self-worth is related to the roles held by that person i. e. retiring may not be so harmful if the person actively maintains other roles, such as familial roles, recreational roles, volunteer and community work. However, early research failed to substantiate a psychological benefit of continued engagement and activity. Lemon, Bengston and Peterson examined key elements of activity theory in a cross-sectional sample of future residents of a retirement community. In this study little connection was found between activity and satisfaction. However, this study suffers from similar criticisms as the Kansas City Study of Adult Life. The study group consisted of Caucasian, middle-class, married individuals interested in pursuing an active retirement. These issues reflect a common problem with sociological research into the theories of ageing – limited diversity of populations and the presence of confounding

factors such as attitudes towards activity and engagement, limit the universal applicability of findings and determination of causality.

A further problem with both these theories is their ‘macro’ approach to the sociological phenomenon of ageing. Activity theory neglects the individual issues of inequality and heterogeneity between age groups. It is clear both activity theory and disengagement theory may be suited to certain individuals or groups on society, and may not be universally applicable. Whilst Phillipson (1998) sees these functionalist schools as important in shaping social theory, such functionalist theories may ‘impose’ a sense of causality on aging by implying that an aged person will either ‘disengage’ or will be ‘active’. Thus, it can be argued that these arbitrary social theories are a form of ‘academic imperialism’, whereby the activities of individual elderly people are dictated by macro-orientated theories rather than taking account of individual experiences or using inductive reasoning.

Continuity theory incorporates aspects of activity theory and disengagement theory within the functionalist framework. Continuity theory maintains the social-psychological that were developed from the Kansas City Studies. The basis of continuity theory is that individuals maintain a consistent pattern of behaviour as they age, by replacing lost roles of adulthood with similar ones, and by maintaining a constant attitude of adaptation towards the social environment. Life satisfaction is determined by the consistency between current activities or lifestyles with one’s lifetime experiences (Neugarten, Havinghurst, Tobin 1968). This consistency in behaviour implies that central personality characteristics and core values become more pronounced with

age. That is, that people who have always been passive and withdrawn are unlikely to become active upon retirement, and vice versa.

Therefore, this theory does not advocate significant psychological change with age, unlike the other two ‘macro’ theories. It is a micro-level theory, encompassing individual experiences and adaptations. However, micro theories suffer from the limitation of not being generalisable, and therefore not being able to be empirically tested on a broader scale. Moreover, by focusing on the individual, micro-theories may overlook the role of social factors in modifying the ageing process (you need references for these points).

By contrast, the theory of political economy of old age is a macro-level theory that emerged as a reaction to functionalism, and focuses on social factors modifying ageing. The theory draws upon Marxist views of the capitalist nature of modern society and how old age was socially constructed to meet the needs of the modern economy (Estes 1979). This grew out of a wider move towards modernization in sociology, attempting to explain the changes in society as consequences of population ageing, industrialization and fertility decline. Therefore, socioeconomic and political factors, not individual factors, are the primary determinants of the experience of ageing. These include age and class, as well as gender, sexual orientation and race.

As Phillipson (1998) points out, in the UK huge forms of social expenditure were allocated to older people. Consequently, not only were older people viewed in medical terms but in resource terms by governments. This built

upon the idea of ageing as a ‘burden’ to modern society, as Phillipson (1998: 17) states:

‘Older people came to be viewed as a burden on western economies, with demographic change... seen as creating intolerable pressures on public expenditure’.

The major focus of the political economy of ageing was an interpretation of the relationship between aging and the economic structure. In the USA, political economy theory was brought to prominence by the work of Estes (1979), and Estes, Swan and Gerard (1982). Similarly, in the UK, the work of Walker (1981), Townsend (1981) and Phillipson (1982) contributed to understanding age and ageing in modern British society. In the USA, Estes, Swan and Gerard (1982) state that the class structure is the major determinant of the socio-economic position of older people in society. Estes justifies this position by using a Marxist view of society to explain how an individual’s social worth is dependent on their productivity. All subsequent policy towards age and ageing can be explained from this premise. Negative attitudes towards older people, and their impoverished position, can be explained by their loss of social worth brought about by their loss of a productive role in modern society. Estes (1979) also claims that political economy theory highlights the role of the state in contemporary society. Since the state dictates the allocation of resources, this determines the allocation of retirement and pension schemes, and is therefore a further key determinant of social worth of elderly people.

Phillipson (1982) builds on this point of view, and goes on to state that retirement is linked to the timing of economic reduction of wages and enforced withdrawal from work, and hence many older people in the UK in a financially insecure position. Therefore, the state can determine the social position and future of its elderly citizens, and indirectly shape prevailing social and cultural attitudes to the elderly. Indeed, any discussion about change in the welfare state leads to further legitimisation of the ‘burden’ stereotype of the elderly in society.

Echoing this point of view, Townsend (1981) states that society creates the social problems of old age through ‘structured dependency’ embedded in institutional ageism, through lack of material resources due to poverty, retirement policy, the negative consequences of residential care, and poor structure of community care. Townsend puts forward the idea that there is a ‘structural’ perspective of ‘rules and resources’ governing older people in modern society. Townsend claims that the approach is: ‘one whereby society is held to create the framework of institutions and rules within which the general problem of the elderly emerge or, indeed, “manufactured”. In the everyday management of the economy and the administration and development of social institutions the position of the elderly subtly changed and shaped’. (Townsend 1981: 9)

Similarly, Walker (1981) argues for a theory of ‘political economy of old age’ in order to understand the position of older people. In particular, Walker (1981: 77) builds on the idea that the structure of modern society propagates dependency among groups such as the elderly – a ‘social creation of dependency’. Phillipson (1982, 1986) writes in a similar vein, and <https://assignbuster.com/different-theories-of-ageing/>

considers how capitalism helps socially construct the social marginality of older people in key areas such as welfare. The key argument of these writers within the Marxist school of thought is inequalities in the distribution of resources should be understood in terms of the distribution of power within society, rather than in terms of variation between individuals.

In addition to the argument that social and governmental policy contributes to the socializing and marginalizing of old age, political economy theory criticizes the emphasis on community engagement and the consequent social devaluing of elderly people who cannot or choose not to engage in these activities. Activities such as participation in volunteer programmes and social work may be viewed as a way to meet public service gaps created by reduced public funding. Although the benefits of volunteering have been proposed by activity theory, from the point of view of political economy it is social and structural factors that influence the individuals decision to volunteer or participate. For example, elderly individuals who are also carers for their spouse or their grandchildren may not be able to take on additional social roles, and may leave the individual vulnerable to social criticism.

Indeed, it has been noted that a paradigm of ageing that only values productivity and civic-engagement can stigmatise and disempower elders who cannot contribute to society because of illness, disability or limited time and resources (reference?).

The life-course perspective is not necessarily a theory, but a framework of ageing as a lifelong process. It attempts to explain how ageing is shaped by earlier events, including social structure and history along with interactions with family and culture. Individual development of personality and cognition

interact with these other factors affecting life-course. Time is the key variable, since it influences relationships in three ways: life experiences influence relationships, family events and family transitions influence individuals and interactions, and events in a broader social historical context also influence social role and values. Social context interacts with individuals and influences them and their relationships.

This framework takes account of the diversity of roles and role changes across lifespan, since it views development as occurring at all stages and not just any one stage of life. It takes into account the gains and losses that occur through life-course, rather than viewing development as a linear process. Therefore, development is considered multidirectional, with stability or development in areas, and decline in others. For example, ageing may lead to impairment in short-term memory but not in creativity or social function. Therefore, this approach takes account of micro and macro levels of development and provides a framework to shape further sociological research into ageing.

In conclusion, sociological theories of ageing have evolved alongside changes in demography and economics since the early 20th century. The functionalist theories of activity and disengagement approached ageing in the context of the prevailing view of the time. Although based on empirical evidence – the observational studies from Kansas city – these studies were limited to middle-class Caucasian populations and yet were extrapolated to macro-level theories. As such, both these theories suffered criticisms for their lack of generalisability, and newer theories were developed as an immediate reaction.

In the context of economic troubles during the 1970s, the sociology of ageing began to be viewed in an economic perspective. The view of structural aspects of society interacting with healthy or unhealthy ageing has advanced sociological thought in this area, and laid the foundation for contemporary views of ageing. Current demographic issues such as the prevailing economic climate, declining fertility and improvements in healthcare have changed the sociological view of ageing. As such, these issues must be addressed as further research attempts to view life-course influences on ageing at both a macro- and micro-theoretical level.