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Bessie's Hope Service Learning

Blog topic prompt:

What measures can be taken to mitigate and eradicate ageism in healthcare?

It is possible to change both the negative stereotypes that culture holds of our ever-longer-living population, as well as the negative self-view we can gain of ourselves as we feel sidelined. In his book *Successful Aging*, Daniel Levitin speaks about how personality changes and blossoms past age 40.¹ There are decades we are experiencing now that prior generations never reached, and although with that comes a chance for personality to mature, so too it comes with less opportune changes in the brain such as the buildup of plaques. These can lead to declines in activity and mental acuity that only bolster the assumption that elders are “past it” or unable to function.

In United States culture overall, the idea that older people are meant to slowly remove themselves from society has been bolstered by the presence of retirement homes, assisted living, and even taking the process of caring for deceased relatives outside the home and family.² This has led to an incipient sense that our seniors are no longer useful functioning elements of society, and a spiraling chicken/egg predicament that takes the elderly ever more out of the public sphere for their care, and convinces us ever more firmly that this is the right thing to do. Perhaps, we tell ourselves, they don't want to be a part of it anyway. Levitin makes a firm argument that this is not the case.¹ He interviews and gives anecdotes of many teachers, scientists, and other professionals who began a slow (or sometimes quick) decline upon retirement or otherwise removing themselves from their sphere of influence, many of whom were able to return to prior levels of function upon returning to their vocation or avocation in their 70s, 80s, or 90s.

Healthcare, while believing itself to be supporting our aging population with medical and home care, is contributing to the problem by toeing the line of removing seniors from greater society.³ The very actions that are intended to be assistive, such as the creation of “retirement communities”, are themselves part of the idiopathic ageism our culture displays. Individual instances of caregivers or providers acting in a patronizing manner are only a symptom of the overarching approach. In many ways in order to fix this we must become interactive and engaged with our seniors again. One possible direction to take eldercare is a more community-based setting. Some cities have programs where elders living in care homes spend time in community centers or schools in order to stay involved with other generations. Unfortunately much of this has been curtailed due to Covid-19, but it should be prioritized

as vaccination levels increase. Healthcare professionals must be bulwarks in supporting overall change, but nurses and home health aides and specialists who may be an older person's primary caregivers may not be able to convince a family to take a more active role in care. And for those who may not have family nearby or available, assisted-living healthcare may be their only option, so those facilities must be instrumental in providing opportunities for their residents to engage with the community.

Just as we should not rely on preschool education for all of our childrens' needs, we should not pass our parents and grandparents entirely off to home health aides or eldercare. Nor should we convince ourselves that we are "doing the right thing" by so doing. This will require not only a shift in how healthcare addresses aging, but how our entire culture does. We cannot ask the institution of healthcare to behave differently towards our elders than we behave as a population. Levitin says it well when he discusses his own sea change in viewpoint during his own aging process.¹ We must gain the ability to have sympathy for our elders before we ourselves arrive at that point. Empathy once we reach a certain age does nothing to better the experience of those who arrived there years or decades before us. Only by recognizing that this is a future we all face, and questioning whether we ourselves want to be sidelined, can we begin to change.

References:

1. Levitin, Daniel J. *Successful Aging*. New York: Dutton, 2020.
2. Doughty, Caitlin. *Smoke Gets In Your Eyes*. New York: W.W. Norton, 2015.
3. Aronson, Louise. *Elderhood*. New York: Bloomsbury, 2019.