Debunking Ageism, Myths & Right of Older Persons in Africa

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Abstract: Ageism has been established to be preconceived and discriminatory acts and tendencies against older adults, yet many people in Nigeria, have little or no knowledge about the meaning or the damages it can cause. This paper intended to demask ageism related attitudes while bringing the term to the forefront of the general public. The literature review method was used to outline the resultant attitudes and stereotypes of ageism, to demystify the phenomenon and to examine how it affects the well-being of the aging population. Findings revealed that ageism has personal and institutional perspectives, and are intentional or sometimes, unintentional. We also identified some age-related workplace discrimination, healthcare-related age discrimination, and may standing myths against older adults. We conclude by stating that most contemporary myths are mostly outright lies and concoctions not backed by any scientific evidence. Some of the myths originated from long-forgotten traditional folktales, and argued that such practices should be discouraged based on the established rights of elderly persons. Having debunked ageism practices and myths surrounding stereotypes against older persons, we believe that implication for practice include, but not limited to, unrelenting advocacy in citing that the rights of older persons stem from inalienable rights entrenched in international protocols and conventions. Making the general public to know that older adults have the right to independence, participation, care, self-fulfillment, and dignity. We suggest that upholding these rights are instrumental in reducing the menace of ageism, and in disrupting the standing myths against the aging population.

Keywords: Ageism, myths, stereotypes, workplace discrimination, rights of older persons

I. INTRODUCTION

Researchers from various backgrounds have viewed and explained the concept of ageism from different perspectives; however, Butler (as cited in Donizzetti, 2019) described ageism as “a process of systematic stereotyping of and discrimination against people because they are old” (p.1). Raina & Balodi (2014) argued that it is human nature to develop their social construction of people as they grow, and oftentimes, the younger ones tend to see the older ones as being different from themselves. They added that ageism accounts for the attitudes, beliefs, feelings, and dispositions directed towards another group. A good example is a discrimination against older adults by healthcare professionals who argue that expensive medical procedures should be reserved for the active members of the population (Robb, Chen & Haley, 2001). Yet, others believe that Medicare has helped to provide alternative treatment approaches for the aging population which are appropriate for their age in the USA. However, other determinants are therefore highlighted, such as; accessibility, assignment of staff to work with older adults and other policies which may a be stronger determinants of under service than attitudes (Robb, Chen & Haley, 2001).

Generally speaking, the majority of people residing in most communities in Nigeria do not have any idea about ageism when the issue is discussed. Many do not relate with the word, nor understand its consequences on the well-being of older adults. In a gathering in Gwagwalada area during a marriage celebration, we randomly selected few individuals and asked them to explain what they know about ageism, as expected, many confessed not being familiar with the word. For example, responding to the question, ”what is ageism,” one respondent said, ”I don't think I have come across it, I know of isms, I have come across many isms in books, but can't explain it.” However, very few respondents demonstrated micro-level of understanding of the notion of ageism and its meaning. Evidence-based research has shown that ageism is characterized as a form of age discrimination, and is considered to be a severe problem. Past studies support the idea that younger adults show the tendency to prefer people in their age category than others, and it was found to be the same for adults as well, but as people age, they begin to realize the intending consequences of such action and make needed readjustments (Chopik, Giasson, 2017). Sometimes, we fear our own aging when we refuse to stand tall against ageist stereotypes but continue to succumb to the phenomenon (Gendron, Welleford, Inker, John, White,2016). We can only begin to denounce ageism and all its counterparts by identifying what constitutes ageism and taking realizable measure against them.

II. INSTITUTIONAL AGEISM & AGE-RELATED WORKPLACE DISCRIMINATION

The institutional categorization of ageism in the workplace is difficult because it takes many forms, and are often swept under the carpet, making it uneasy to spot and identify. When a manager or team leader jokes about an employee in a manner that depicts the person's age, it is considered as workplace discrimination, although not much importance is attached to such jokes. But if an employee is intentionally excluded from a meeting which other teammates are bound to attend, and the only reason being that the
III. PERSONAL AGEISM

Cuddy, Norton, & Fiske (2005), opined that stereotypes or over-generalized belief about a particular category of people constitutes ageism, and relate to how younger people expect the older person to behave. In other words, it seems that younger people tend to make up their mind on what, when, and how they expect older persons to behave. Such actions are considered as inter-personal ageism, resulting from the interpersonal relationship between the older persons and their young counterparts. If the relationships are not adequately managed and rooted in mutual respect, it may later degenerate into establishing some aging stereotypes and establishing pre-determined expectations on how the elderly should behave. Among other stereotypes, as described by Cuddy, Norton, & Fiske (2005), relates to “succession.” Younger people often assume they are waiting for their turn in the scheme of things; therefore, older individuals should pave or make way for them to ascend. In Nigeria before 2015 general elections; most young politicians were using age as the primary tool of their campaign, arguing that the old politicians have had their turn and it is then the turn of the younger politicians. Unfortunately, not a lot was accomplished as those who have developed deep pockets over the years were able to meet the challenges of financial obligations inherent to the electioneering campaign in Nigeria. Yet, consumption pattern of older adults was another stereotype described by (Cuddy, Norton, Fiske, 2005), they are of the opinion that younger people frequently feel that in consideration of the scarcity or limitation of resources using the opportunity cost model, resources are justified when spent on younger people. This aspect is closely related to the thought where younger adults exhibit selfish behaviors, as they feel that rather than spending on older adults whose time have passed, the younger ones should be allowed to make use of their opportunities in seeking preferential treatment against older adults. They went further to comment on the identity of older adults as yet another stereotype about older adults (Cuddy, Norton, Fiske, 2005) Here the tendency is the belief or expectation that older persons should "act their age" and try not to "steal" the identities of younger people, among other things as speech patterns and dressing mannerism.

The same applies to retirees in many organizations, especially in government offices. Many are aware that when they visit their former offices for whatever assistance needed because it is not uncommon to hear the younger staff murmuring to the extent of questioning their intention of coming to the organization. Some associates often assume they are waiting for their turn in the scheme of things; therefore, older individuals should pave or make way for them to ascend. In Nigeria before 2015 general elections; most young politicians were using age as the primary tool of their campaign, arguing that the old politicians have had their turn and it is then the turn of the younger politicians. Unfortunately, not a lot was accomplished as those who have developed deep pockets over the years were able to meet the challenges of financial obligations inherent to the electioneering campaign in Nigeria.
IV. ESTABLISHED MYTHS AND STEREOTYPES AGAINST OLD ADULTS IN NIGERIA

Most myths as known today originated from the premise of traditional folktales which were mostly religious, as they analyzed the world to its inhabitants. At the onset, myths strengthened social order and values, viewing them as characterized with sanctioned generally accepted wisdom (Thornton, 2002). While heroic myths and folktales were primarily based on people experiences that were linked to mystical gnostic and beliefs, the contemporary functions of myths have shifted the basis of knowing and explaining events based on religious or mystical experiences and opinions that cannot be questioned. Today, myths are based on 'social and generational stereotypes,' and as a result, differing opinions and new realities of aging and being old have emerged (Thornton, 2002).

Research has shown that as scholars identify some aging process, myths being demystified as it relates to aging and ageism in contemporary societies. Among other factors, confusion is seen as a normal part of aging, and older persons are thought to be reserved and abandoned, while most are in poor health. (Salzman, 2006). The myth that most older adults have no interest in or capacity for sexual relation has also been demystified. Research has found that good health, not age, determines the reproductive relationships or ability throughout life. (Salzman, 2006). In Nigeria, there are many instances where people who are considered to be very old, fall in love, and marry girls who are deemed to be the age of their grandchildren. Often, it turns into heated battles between the two families, but after many power tussles, the older males often have their way. On the contrary, older females are frowned at when they fall in love with younger males, and sometimes, the community will intervene to prevent such union from taking place. While men can marry any woman, they so desire regardless of age, and societal discrimination is still meted against women as they are often resisted when they attempt marrying younger men. What we tried to establish here is the fact that age is far from being a determinant in reproductive capacity or behavior.

Another myth that researchers and employers have known to be false is that older workers are unproductive than younger workers. While it is common practice for active older adults to be discriminated upon for employment based on age, retirees constitute an important part of the workforce in the western hemisphere, especially in the private sector. Unfortunately, there is a general tendency to expect a person to disengage completely upon retirement in Africa, and their expertise is hardly tapped, leading to more significant workplace inefficiency. There are no justifiable reasons why teachers who attain retirement ages should not be employed as captains to solidify the quality of teachers in private schools. Our society must endeavor to tap into the many years of experience of our retirees, as such action will contribute towards resolving many societal problems. However, it is not uncommon to see ex-military men been recruited in various security outfits as guards where their wealth of experiences is put to good use. More needed to be done in the area as more and more able-bodied individuals retire but are not tired.

Another myth against most older adults is the claim that they are alone and lonely. Such a myth has been discredited by new realities as it is customary for most older people to maintain close affinities with relatives, children, and grandchildren. Relationships improve interaction with people, therefore reducing the myth that older people are alone and lonely. It is recorded that 80% of parents over the age of 65 can boast of interacting with their adult children not more than once on a two weeks basis (Salzman: 2006). In African societies, the myth of loneliness of aged or older persons is almost unimaginable mainly due to the extended family model of habitation, family members, neighbors and age mates/groups of the older persons are always there to cheer each other up.

Other myths posit that older people constitute the more significant number of those living with poor health conditions, but on the contrary, older persons have always described themselves as healthy. Recent interactions with many people 65 years of age have them reporting as having a state of excellent health. The fact that old age correlates positively with specific diseases such as arthritis, diabetes, cancer, and other related illnesses are discounted in the positive state of health among older adults. Many affirmed that these aforementioned conditions are expected as one live to be very old, adding that what matters is the available coping mechanisms to continue to live despite the challenges. The improvement in health conditions among older adults are attributable to the developments in health technology and medicine and is believed to have contributed immensely in reducing the scourge of health challenges among the older generations.

Others posit that most older people live in poverty. However, the myth has met a lot of mixed feelings. For example, the electioneering process in Nigeria is quite expensive, and only the affluent members of the society can meet up with the financial requirements and commitments. A look at the cross-sectional of members of the Senate and House of Representatives in Nigeria reveals a significant majority of older adults. Such a proportion of older adults to younger Nigerians representing the citizens can only allude to the fact that poverty is not synonymous to old age, as claimed. However, we must say in all fairness state that a more significant number of older adults in Nigeria live in abject poverty and have no real income to meet daily demands of old age.

In Nigeria, one can argue that the myth of poverty among older adults seem to be somewhat 'half-truth,' primarily because of the absence of those programs aimed at the older persons as practiced in the developed countries. The poverty level among older adults in Nigeria is cushioned by the rich African tradition, where it is customary for family
members to take care of their older persons to reduce their economic predicament. In Africa, the burden of age is borne by both immediate and extended family members of the older persons, and it is assumed that it is their responsibility to take care of their health issues and their bills if any. If these assumptions hold to be accurate, we can argue that the myth of extreme poverty among older adults in Africa can only be true to some extent.

Another myth that has persisted among older adults is the claim that they become more religious with age. Many share the opinion that older people frequent churches, mosques, or other religious activities as they tend to develop increased spiritual consciousness with age. This myth is also seen as others to be false. Personality has been argued to be consistent across the life span, and as such, those who attended religious events as young people will also have the tendency to do same, as they live to be older. However, it appears that as people advances in age, some who feel insecure about their end, and the financial ability of their loved ones to give them a befitting burial tend to join some form of a religious organization or another. When asked to ascertain reasons for frequenting religious organization, many responded that it was due to uncertainty about the end of life. Majority of those who attend religious activities at old age would not have engaged if they were sure that their loved ones were capable of meeting the financial and other demands of their transition rights alone. People that have not been religious at their prime or middle ages cannot just suddenly become religious people at an older age.

Many older adults would have loved to continue with their religious activities, but sometimes, they are challenged by some physiological health issues. Technology has become a common thing among many religious sects, and as such, many religious activities are screened life, and those who could not attend physically will watch the activities online or on television as the case may be. (Salzmann 2006) Debunked the myth that most older people end up in nursing homes. Unlike the other myths, he asserted that this is perhaps one of the most significant untruth statements about aging. In Africa, people frown at the nursing home as it is expected that people should age in their respective homes. The reality is that most older adults remain in their homes and age in their communities because the issue of nursing homes has been resisted in Africa. Nevertheless, we must sound a clear warning that the traditional model of aging at home will not be sustainable as globalization continues to weaken inter-generational ties. The traditional model of aging at home is quickly fading, and contemporary rehabilitation centers should be anticipated to provide temporary services for stroke, heart attack, or other age-related morbidities to those who will be in need.

Other myths tend towards the generalization of older adults, tagging all older adults as being the same. While it is true that society expects members of a particular age cohort to follow certain expectation, all older adults are far from being the same. Some countries set the retirement age at 65, but in Nigeria, people could retire either at age 65 or 70, depending on their chosen field of endeavor. University professors and Supreme Court judges are expected to retire at age 70, and the myth tends to posit that any person who has reached 65 or 70 years is considered an older person, and must all act or behave in the same manner.

We want to argue that chronological age does not translate to weakness across individuals. Many people still appear very strong and healthy even into their 90's and 100's. People often grow old and older in their mind based on how they feel, and not based on their actual chronological age. We encourage all adults to invoke their capacity and ability to change their attitude to aging, remaining fearless of the outcomes of aging and look forward to successful and healthy aging. Adopting a positive mindset to aging will in no doubt, affect our physical and mental health, and ultimately, our life expectancy. With the above, we have seen that the whole core of the myth surrounding older persons was entirely based on false premises, and have been established to be unfounded assumptions about older adults. Furthermore, older people are sometimes stereotyped "as being prone to memory loss, senile, and not having mental sharpness. However, the reality in Nigeria point to the fact that being old does not necessarily connote retardation of the psychological and cognitive faculties because aging differs across individuals.

Certain stereotypes constitute public knowledge in Nigeria, especially in the north, where Muslims predominantly resides. Older persons are not expected to wear certain kinds of clothing such as shirts, jeans, jackets, and all that are commonly referred to as "English dressing." Based on the predestined expectations, older persons seen wearing such clothing were exposed to some sort of mockery by the younger ones. It is not uncommon for many younger ones to voice their disapproval by making comments like "these old men have not realized that they are old, why wearing clothes meant for the younger generation."

V. ESTABLISHED RIGHTS OF OLDER PERSONS

We have reviewed some of the established discriminations, prejudice, and myths, mostly centered on older persons. We have also pointed to the fact that discriminatory societal practices tailored against the older adults such as age-related workplace discrimination, healthcare discrimination based on age, coupled with the standing myths constitute grounds for negative stereotyping on aging and promotes ageism. It is imperative to understudy some of the rights of older persons if any, to be able to address the issues of elder abuse.

The fundamental basis for deliberate global attempts to recognize the rights of the older persons was envisaged by an advisory committee to the human rights council headed by Ms. Chisung Chung, and the report latter came to be known as the “Chung report.” In particular, the growing number of human rights violations suffered globally by older persons led
to the recommendations that the human rights treaty was a priority, and therefore in section V of the report, a non-exhaustive list of human rights of the older persons, as prepared by the Yale law school was adopted (Udhayakmar & Ilango, 2013). Mainly the focus of the protocols and enunciation of the rights was to address all the attendant issues and challenges of older persons. For example, following the submission of Chung report, the United Nations General Assembly adopted the following principles for older persons on the 16th of December 1991, and they were widely known as resolution 46/91. The laws were mainly categorized into four distinct factors, namely; independence, participation, care, and self-fulfillment (Udhayakmar et al., 2013). Studies have shown that, far beyond the health and basic needs of daily living, older persons also require social care, safety, security, love, and respect (Nilamadhab, 2015). And these were all covered in the declaration by the United Nations General Assembly on the rights of older persons.

Other regional governmental and religious organizations in the third world also made protocols and declarations on the rights of the older persons. For example, in December 2003, the African Union launched an African Union Policy Framework and plan of action on aging, in Addis Ababa, Ethiopia. After addressing the main issues associated with aging and ageism, in his speech which among others, Help Age International Africa Regional Representative Tavengwa M. Nhono lamented on the prevailing attitudes towards the older people (Doron, & Mawhinney, 2007). He argued that it was not necessary to waste resources on people within certain age as they are considered to be approaching the end of their lives; instead, we should direct our efforts and resources towards the epidemics ravaging many African countries. While many African countries are still dragging their feet on old-age related policies, we must emphasize that countries like Mali, Mauritius, Rwanda, Mozambique, and Tanzania seem to be ahead on old-age related policies where the governments have approved some policies on older people. Unfortunately, in most of the aforementioned countries, many plans have been written, but they have not developed into legislation. (Doron, et al., 2007).

While attempts to establish a framework for the rights of older persons are at the infancy stage in Africa, Western countries have long taken center stage and have accomplished so much on the issues of rights of older persons. For example, in 1953, the European interim agreement on social security schemes relating to old age, invalidity, and survivors was drafted, and the agreement came into effect on the 1st of September 1954. Included were respect for old age, a system for social and medical assistance, benefits in respect of invalidity other than those awarded under an employment injury scheme (Doron et al., 2007). The non-governmental organization was not left behind in making deliberate, concerted efforts towards ameliorating the challenges of old age and its concomitant implications. In 1952 for example, the International Labor Organization (ILO), at its thirty-fourth session held at Geneva, decided upon the adoption of specific proposals with regard to minimum standards of social security, which included among others, medical care and old age benefit, so as to protect the interest of the older persons economically, socially and psychologically (Doron et al., 2007).

It will help to know that the efforts being made to guarantee the rights of the older persons were being championed from the western developed countries and the United States of America. For example, in 1994, the committee of ministers of member states of the European Union concerning older adults made some recommendations for the enhancement of the rights of the elderly. One of the intelligent recommendations of the committee was that older adults deserve as much dignity like everybody, and therefore the equal rights and duties imply that older adults should retain their rights to self-determination (Doron et al. 2007). More so society owes it to itself to recognize the past and present active roles and contributions of the older adults. The most elaborate enunciation of the rights of older persons was the one proclaimed by the international federation of aging in 1990, it is also correct to say that the proclamation was the same as envisaged in the resolution 46/91 of the United Nation General Assembly (Doron et al. 2007) among others, independence, participation, care, self-fulfillment, and dignity. By freedom, the proclamation entails that older persons should have as of right among others to obtain adequate food, water, shelter, clothing through the provision of income, family and community support and help. This right is one of the most practical rights in African societies, where older people are given the most attention by their family members and the community.

VI. RECOMMENDATIONS & IMPLICATIONS FOR POLICY

Based on discussions so far, we recommend that in addressing the challenges of forceful retirement, the protocol proclamation that it should be the right of the older persons to leave service “at-will” and determine when, and at what pace, they should retire from service should be adhered to. Rather than regimenting the lives of older persons at nursing homes and rehabilitation centers, though negligible in Africa, there is need to redirect our resources to supporting the right for an older person to reside at home for as long as possible. More so, to address the "old school" syndrome which helped to establish the myth that older persons are outdated and old fashioned, we should internalize the protocol which provided for older person access to educational and training programs to enhance literacy levels, facilitate employment and permit informed planning and decision making.

By participating in active advocacy, older persons must be allowed to exercise their inalienable right to exploit meaningful ways to advance the community, and to volunteer in areas of their interest. In other words, older persons must not be excluded from day to day running of progress, growth, and development of the society, and the community should as
a matter of priority, tap from their versed experience and intellectual resources. Staying aware from active scene has the tendency to send an older adult to an early grave, and such we recommend that older exercise their rights to form associations that will enhance their cause. (Doron 2007)

On the issue of care provision, the proclamation envisaged that older adults should benefit from family support and care that is consistent with the well-being of the family. This right is envisaged to solve the problems of neglect of the older persons in some societies by relatives and the community at large. The dignity of an older person must not be tampered with, should not be exploited, and any form of mental or physical abuse should be discouraged. Situations, whereby older persons are abandoned to their faith in some societies and are allowed to fend for themselves, should be a thing of the past. An older person should be encouraged to exercise their right to make decisions affecting their healthcare, the right to reject life-prolonging treatment, and the right to be dignified even in death. Older persons also have some responsibilities to remain active, capable, self-reliant and useful, to take advantage of literacy training, to plan and prepare for old age and retirement, to horn their knowledge, skills, experience, values, and to make informed decisions about their health care while stating their decisions about their terminal care to their physician and family.

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