

DAY 2: 27 AUGUST 2013, MULTIPURPOSE HALL

India International Centre 40, Max Mueller Marg, New Delhi-110001

TIME: 3:00- 4:30 PM

The Session for Plenary: Ageing Women- Life Cycle Approach was taken by

1. Amita Joseph, Director, *Business & Community Foundation, India*
2. Dr. Suman Chahar, *Chairperson, International Academy of Environment Sanitation and Public Health*
3. Dr. Ginni Srivastava, *Founder Director, Astha Sansthan, Udaipur*
4. Dr. Vasantha Patri, *Chairperson, India Institute of Counselling*
5. Dr. SK Sharma, *Chairman- Ayurvedic Pharmacopoeia Committee*

Topics Covered:

- a) Challenges of Aged Women in the fast changing life perspectives by Dr. Suman Chahar, *Chairperson, International Academy of Environment Sanitation and Public Health*
- b) Ageing Women- Active Older citizen by Dr. Ginni Srivastava, *Founder Director, Astha Sansthan, Udaipur*
- c) Ageism As A Barrier To Productive Ageing by Dr. Vasantha Patri, *Chairperson, India Institute of Counselling*
- d) Health Issues Of Ageing Women And Economics of Ayurvedic Solutions by Dr. SK Sharma, *Chairman- Ayurvedic Pharmacopoeia Committee*

Abstracts from this sessions are:

1. Title: AGEISM, AS A BARRIER TO PRODUCTIVE AGEING

Author: Dr. Vasantha Patri, *Psychologist/ Counsellor*

Ageism is an age based prejudice of society towards older adults. It is negative and discriminatory. Ageism was a term coined by Robert N. Butler (Kaplan et., al 1994). Ageism is Universal and Omnipresent. It leads to stereotypes. Ultimately, all stereotypes are dehumanizing and leads to denial of rights and opportunities.

Ageism is also an Attitudinal Barrier

Some of the typical negative attitudes are:

- **Illness** – The elderly are seen as sick and/or disabled.
- **Impotency** – Most elders are viewed as sexless.

- **Ugliness** – Old people are generally viewed as being ugly.
- **Mental decline** – The elder persons are thought to be confused and poor in memory.
- **Mental illness** – mental illnesses are thought to be common and untreatable in the elderly.
- **Uselessness** – Older people are viewed as disposable.
- **Isolation** – They become isolated because of how they are treated.
- **Poverty** – Older people are seen as poorer.
- **Depression** – Because the older persons are seen as sick, disabled, useless, lonely, poor, senile etc., they are also seen as depressed. This is a misnomer, most of the time.

Ageism and older- women

Women who are married young and become grand-mothers early (late 30's) could also become widowed by this age. Such women suffer both **ageism** and **widowism**.

The Gender Dimension

Older widowed females are high on the hopelessness factor. Women lose their income & status and health problems are more in them. The widow is also bereft of her possessions, jewelry, fine clothes, adornments etc.

Technology, Science and Ageism

Ageing is seen as pathological and not a natural process of growing old. For example- For elderly men, impotence is redefined 'erectile dysfunction'. Menopause is considered as a disease and the label given as 'hormonal deficiency' (Palmlund 2006). This was treated with 'Hormonal Replacement Therapy'.

The Turn-around

- Focus on the capacities of the elders, not their deficits. Health care formulations need to performance or need based not only age- based.
- A paradigm shift is needed from the pathology model to the wellness model.

The Patri model of Inter-generational living

This is a model based on inter- locking of needs. The old can supervise and care for the young. The young adults can be livelihood earners and then care for their elderly. One needs to ensure that each of them do not come in the way of the other.

LET'S NOT KILL THE ELDERLY AHEAD OF THEIR TIME!