

Gender and Aging

Old age is a natural part of the life-cycle. It is a process of regular changes that occur in mature and genetically representative organism living under representative environmental conditions as they advance in chronological age. These changes can be anatomical, physiological, psychological and even social and economic.

Biological Aging refers to anatomical (changes in body structure) and physiological changes that occur with change. Biologists are of the opinion that aging begins when growth and development stops. Psychological aging consists of a general decline in the mental abilities that accompany old age. Generally, physical aging precedes mental aging though this is not always the case. The sociological aspect of individual aging is concerned with changes in the circumstances or situations of individual as a member of the family, community and society. Old age is generally associated with increased levels of illness and disability, however poor health depends on a range of factors, not only age.

The experience of aging and old age is different for women and men. Women's physical and mental health, housing and care arrangements, social connectedness and financial security change as they become aged. Aging is a biological and social construct that is influenced by a broad range of determinants. The social, economic and environmental conditions under which women live and age affects their health and their experience of old age. Gender is a key determinant of this and results in a different old age experience for women and men. The experience of aging also varies for diverse groups of women.

One legacy of the twentieth century has been the shift towards global population aging. Older women in particular are affected by this trend. Today, there are more than 575 million people worldwide over the age of 60 and this generation is growing rapidly. Women outlive men in nearly all countries. In the developed world, women live longer than men by a margin of 4 to 10 years; the margin is less in the developing regions. Currently, about 77 per cent of the increase in the older population occurs in the developing world, where about 58 per cent of older persons are women. Feminization of older population groups is a phenomenon observed throughout the world, because women survive to higher ages than men in a vast majority of countries. In 1998, there were 190 women per 100 men among the very old. The number of women per 100 men is 181 among octogenarians, but it is 287 for nonagenarians and 386 for centenarians.⁴

Aging has various meanings. First, ageing is a social construct. Societies assign different age expectations according to gender, sociocultural norms and role assignments. In many societies, for example, the social norms that govern marital age generally dictate older grooms and younger brides. Second, aging is a process. It encompasses a broad spectrum of experiences, including a subjective evaluation attached to age and biological ageing as influenced by genetics, anxieties and exposure to environmental hazards.

The elderly is a heterogeneous group. Its diversity reflects the gender, class, racial, ethnic and cultural differences found both in developing and developed countries. The elderly also incorporates diverse values, customs, beliefs and practices. Moreover, they reflect different religious precepts, political affiliation, levels of education and material well-being. Although they share some common situations, such as access to economic resources, care and services, and illness, the elderly are more individually distinct than any other segment of the population. Their longevity has given them more time to develop unique biographies based on personal and public experiences.

Gender inequalities shape older women's experiences, despite their majority status among the older population. In both developing and developed worlds, elder women continue to endure unequal and inadequate access to wealth, property and resources. These inequalities are often buttressed by legal and political institutions. Older women also suffer from the effects of poor nutrition, inadequate health care and support systems and environmental hazards.

Although a critical synthesis of gender theory and ageing is emerging, until recently, little research focused on the study of women and gerontology. While studies on ageing generally delved into age discrimination with only occasional attention to gender, those on gender systematically concluded that a women's world consists of persistent inequalities. Despite the influence of the ageing process on women's lives, very few feminist works analysed the interconnectedness of gender and ageing. Hence, the impact of ageing on gender inequalities requires more serious discussions and analysis. Only through these efforts can new visions of the plight and contributions of older women grow and policies be developed to remedy the problems.

Aging, gender and poverty

Age and gender inequalities are linked with poverty. Many studies have discussed the gendered nature of poverty and the relationship between the two on a global scale. Other research on poverty and aging has generally probed into the globalization of poverty in late life and recommended policies to eradicate the problem. There is, however, little systematic incorporation of gender into multifaceted studies of poverty and ageing.

Among the elderly worldwide, poverty appears in the form of social and economic insecurity, health hazards, loneliness, illiteracy and dependency. Poverty among older women is not accidental. It is multidimensional in that it stems from the multilayered inequalities that women experience during their lifetime because of their gender, class, race, ethnicity and marital status. Included in this group are older immigrants or refugee women who are poor and isolated. Throughout the world, older women are more likely to live in poverty than men and this group is increasing rapidly.

Older women's socio-economic status is partially rooted in the gender division of labour which assumes that women's primary involvement is in reproductive labour, unpaid household work, caregiving and unequal power relations at home. Such activities often restrict women's employment opportunities, mobility, educational attainment and skills development. When they actively participate in the labour market, most women are concentrated in low-wage, insignificant and demanding jobs, or are relegated to part-time employment with few benefits and little security. Nevertheless, during their lifetime, women spend more time on combined unpaid and paid work than men do. In their life cycle, women earn less and experience inequality at work, in the family and society. Thus, gender, aging and poverty are interrelated.

Economic inequalities combined with political and legal structures play an important role in exacerbating the overall contributions of older women. In some countries, inheritance laws and practices discriminate against women. For example, under certain legal systems, daughters inherit half as much as their brothers, and mothers less than their children; and if children die, mothers inherit less than fathers. Similarly, a widow can legally retain her children's custody upon the husband's death; however, the children's legal guardianship goes to the relatives of the deceased father. Consequently, the guardian, not the mother, administers and sometimes even collects the children's property or wealth.

The gender gap in poverty changes by differences in life expectancy. Generally, women outlive men, although the differences in life expectancy vary among regions. While in many developed countries, differences in life expectancy between women and men are significant and in some instances are growing, they are smaller in regions such as the Middle East and South Asia.

In addition, changes in marital status affect economic inequalities among the elderly. While most cultures encourage men to remarry, especially younger women, widows experience a severe social stigma if they remarry. Worldwide, widows are a larger group than widowers and a greater proportion of women are widowed at older ages than men. Of the proportion of women aged 65 or more, widows constitute 75 per cent in the Republic of Korea, 71 per cent in Morocco, 70 per cent in India, 61 per cent in Japan, 59 per cent in Hungary, 44 per cent in Switzerland, 35 per cent in Cuba, and 32 per cent in Haiti, respectively.²⁰ Overall, widowhood is increasing and most widows are more likely to be poor.

Public policies often adversely affect the economic problems of older women. Among some developed nations, age-based entitlements are built into the taxation systems. The most common arrangement is called the "pay-as-you-go" system, since currently working adults contribute to the programmes with their payroll taxes to finance the pensions of those who have already retired from the labour force. Because the aging population is growing faster than those who are working, public pensions spending will have to increase too. This system will also be challenged by the sharp decline in income that accompanies a long life, with more years spent in retirement.

combined with the influence of diminishing health and related rise in health-care costs. This is a particularly salient point for women whose pensions are generally lower.

In developed societies, older women's economic security varies depending on their access to retirement plans and pension policies. Older women are often disadvantaged because they have spent less time in the labour market in remunerated jobs than men, or because the benefits are tied to wages, and women have traditionally earned much less than men. As a result, their retirement benefits and pension coverage are almost always less than those of men.²³ For those women whose benefits are based on the husband as the main breadwinner, the economic situation deteriorates once they become widows because their main source of income, the pension fund, is reduced or halted by the spouse's death.

In developing countries, pension systems generally cover a minority of women, depending on the kind of employment their husbands had or the position they occupied in the labour market. Most elderly women rely on traditional support systems, namely, their children and other members of their extended families. Thus, the number of older women living alone is much lower than in developed countries.²⁴ But those without close kin are especially vulnerable, because they have little access to other means of support.²⁵ Besides, the traditional support systems for the elderly face severe challenges resulting from the rising share of the older population, caused by declining fertility rates in many countries, urbanization and a breakdown in traditional family patterns.

Gendered quality of life: health and eldercare

A woman's aging process varies according to her personal biopsychosocial blueprint. Women and men enter their later years with vastly different personal and social resources. Such differences are the culmination of lifetime experiences within social structures influenced by gender disparity.²⁶

Although aging occurs at varying rates, it takes a greater toll on women. Beyond multiple social inequalities, women also experience proportionately higher rates of chronic illness and disability in later life than men. Older women live with numerous chronic conditions, many of which are irreversible but not life-threatening. Most of these illnesses, such as senile dementia, have a deleterious effect on women's lives and social support networks. Yet the propensity for chronic illness places a disproportionate burden on older women compared to elderly men who especially suffer from acute conditions. Because health-care delivery is geared towards acute care programmes, it generally ignores the needs of older women who require greater homecare, not hospitalization.

Chronic afflictions have often led to the belief that older women are habitual complainers. But older women suffer from multiple and long-term illnesses, as well as greater social isolation in late life. They may require the greater help of others for long periods, or be institutionalized or displaced into a relative's home. Either way, their

- Dependence and autonomy are jeopardized. In contrast, the men who married younger women are more likely to have a spouse available to act as a primary caregiver in times of need.

The graying of the world's population also has significant consequences for eldercare. For centuries, the family took responsibility for the care of frail elders. In developing countries, despite the loosening of the family ties today, the elderly continue to rely on informal family networks.²⁹ In developed countries, most dependant older persons rely on support outside the family, although its shortcomings are increasingly under scrutiny and discussion in many countries.³⁰

Care giving demands on women are particularly high. Traditionally, women are expected to be care providers. Moreover, if those women are employed, they confront a dilemma between the responsibilities of their jobs and their care giving obligations. On the one hand, their need to work affects their ability and time to provide adequate care. On the other hand, if they withdraw from employment or opt for fewer hours of work, they will reduce lifetime earnings, pension and health-care coverage. Inevitably, these women will jeopardize their own future of financial security and well-being.

In short, longevity is a mixed blessing: many women are in a position to enjoy more years of life, yet they experience chronic ailment and often have insufficient access to resources. Thus, many elderly women live in poor health, isolation and loneliness.

Perceptions and misconceptions

Ageing is a process of distinction and disappointment: distinction, because it brings maturity, wisdom and respect; and disappointment, because it devalues social perceptions of older people. Despite global variations, perceptions of the aged range from positive traits such as sweet, pleasant, wise, giving and caring to such negative characteristics as slow, cranky and repetitive.³² Similarly, the dominance of gender inequalities historically and cross-culturally promoted stereotyping of the elderly by gender.

Older women's identities are frequently distorted by misconceptions. The negative social images that flourish with ageing devalues the elderly and their sexuality, rendering this generation invisible and insignificant.³³ Images of the old, especially in relation to adolescents, accentuate their vulnerability. Such biases adversely influence policies, social views and women's perceptions of themselves. They may also instill a tendency towards learned helplessness based on age perception, rather than on positive experiences and proven capabilities of past life.

Biology is often the perceived destiny for women. The image of the elderly carries a greater social stigma for women than for men. Part of the double standard concerns women's sexuality. At an older age, women are viewed as less alluring than men at older ages. Where older men are seen as handsome, women are less

active. Such a double standard for ageing is, in part, due to a tendency to judge women in line with the idea that youth and sexuality are equated with beauty and reproduction, while ageing goes with desexuality.³⁵

Thus, misconceptions parallel gender perceptions by age. "Routine media misrepresentation" is especially adversarial to older women who already suffer from more political, economic and social exclusion than like-aged men.³⁶ Similarly, the job market reinforces stereotyping by age and gender through advertisement directed at younger women only.³⁷ In sum, misconceptions foster a tainted and distorted image of older women.

Contribution of older women

Older women contribute to the global economy. Their work embodies a lifetime of learned expertise and experience. In the formal sector, they represent about 25 per cent of the economically active older workforce, although the nature of their work varies regionally.³⁸ In parts of Europe, for example, early retirement policies encourage older women to withdraw from the workforce permanently. In some countries in the Middle East, labour force participation of older women is lower than in other developing regions. In Jordan, less than 1 per cent of older women work for a wage. By contrast, in some African countries, labour force participation is higher: in Mozambique, for example, the rate is about 76 per cent.³⁹ Despite global differences, older women continue to remain active economically.

In addition, the informal sector of economies absorbs a large pool of older women. This is most evident in developing societies. Most women's work in the informal sector is wageless and considered unproductive.⁴⁰ Many older women work on family farms or participate in neighbours' or relatives' agricultural enterprises. They also contribute to business ventures in the countryside, or take in piece-work in addition to performing household tasks and caregiving duties. Older women's work in both agriculture and at home is growing, especially for families whose younger members are migrating to urban areas.⁴¹ Thus, many older women in all regions of the world remain an indispensable but unrecognized asset.

In many parts of the world, older women offer their services as unpaid contributors. They include fund-raisers, mentors, confidants, volunteers, historians, caregivers and grandparents or great-grandparents.⁴² Yet few, if any, of these efforts receive financial compensation. While this situation may be acceptable for those women who are economically secure, the majority are not in that position. For some elderly women, wages could make enough of a difference to exit poverty or near-poverty.⁴³ Thus, their contribution needs both recognition and remuneration.

Although older women's contributions remain significant, many of them, in particular those who are poor and disadvantaged, have remained invisible to the policy makers of the developed and developing countries. A market study of 151 countries unequivocally rejected the idea of older persons as "dependant retirees". It negated the

... as a "myth" and concluded that many older persons continue to work and contribute to the nation's economy.⁴⁶ Hence, approaching elderly women as a "development asset" reconceptualizes them as active contributors and highlights their value to polity, economy and society.

Recommendations

Based on the above analyses the following policy recommendations related to research, economic situation of elderly women, their well-being, empowerment and their portrayal by media can be considered.

Most of the contemporary research, including women's studies, failed to address the problems of ageing women. In order to fill the information gap, Governments, intergovernmental and non-governmental organizations, including research institutions, should, as appropriate:

- (a) Promote research on the interrelationship between poverty, ageing and gender;
- (b) Integrate the analysis of the situation of older women in research and studies related to all aspects of the situation of women;
- (c) Incorporate the elderly's voice in research designs and methodologies;
- (d) Conduct and record oral history reflecting the contributions of older women to society.

39. Women live longer and are less prosperous than men. In order to improve their living conditions, Governments should:

- (a) Design and implement policies that would provide minimal income and social safety nets for elderly in need, women and men alike;
- (b) Amend laws that discriminate against women with regard to property and inheritance rights;
- (c) Eliminate property taxes on residential homes of older women and provide housing for those who are property-less;
- (d) Create employment opportunities for older women free of discrimination and ensure adequate employment benefits;
- (e) Support family care leaves.

The analysis of the differential aspects of population aging should consider the context in which it occurs. In their attempts to support older women's well-being and health status, Governments, intergovernmental and non-governmental organizations should: .. governmental organizations should: ..

Educate health-care providers to recognize and address the specific needs of elderly women;

(b) Provide mental health services that target older women, recognizing their diversified backgrounds;

(c) Provide to older women suffering from chronic illnesses access to in-home assistance services in lieu of institutionalization;

(d) Encourage functionally challenged elders to maintain their independence by providing non-medical homecare services or appropriate assistive devices;

(e) Broaden the parameters of medical research to recognize heterogeneity in older women.

41. Despite some improvements in their status, older women continue to be marginalized and erroneously perceived. In order to empower older women and change their stereotyped perceptions, Governments, intergovernmental and non-governmental organizations, including the mass media, should join efforts to:

(a) Identify and address the diversity of needs of older women;

(b) Support their participation in educational opportunities for sharing personal experiences, histories, and accumulated observations;

(c) Encourage older women to form their own support groups and networks;

(d) Create an enabling environment for older women to focus on their personal development, including new careers, participation in public life and politics;

(e) Work towards altering misconceptions of ageing and eliminating negative stereotyping through school, the family, work environment, the media and advertising;

(f) Foster social support services at the local level for women to communicate with other women and, if possible, facilitate through training and free access to cyberspace the use of electronic media by older women, so that they can find new ways to participate in the society and the world at large