1 An introduction to social theory, social policy and ageing

Approaching age, theory and policy

In this book we attempt to cover the main issues facing the study of ageing in the first decades of the twenty-first century. As such, it should provide the reader with an overview of issues and challenges presented by demographic change for social theory, social policy and the social sciences. We present this challenge from an unashamedly critical perspective.

James Birren (Birren and Bengston 1988) makes the point that the study of ageing, or gerontology as it is called, is ‘data rich and theory poor’. What he means by this is that while a significant amount of data has been generated over the years (notably around issues such as health and social needs in old age) this has not been paralleled by an equivalent understanding of the meaning and place of ageing within the structure of contemporary society. One of the influential remedies suggested for gerontology has been presented by Robert Butler (in Moody 1993) in terms of ‘a union of science and advocacy’. In other words, progress in the expansion of a knowledge base, largely consisting of physical ageing and its bio-technical remedies, accompanied by a political desire to promote the interests of older adults and combat ageism, will prove to be the best way forward for gerontology and for older people themselves. Butler’s proposal draws attention to an important feature of the study of ageing, namely, its multidisciplinary and applied character. In consequence, the relationship between theory and policy has been especially close and can be seen in the different strands within sociology, economics, anthropology, psychology and other disciplines.

Policy and theory are both interpretive. Both go beyond data and ‘common-sense’ definitions, to formulate answers to the ‘why’ as well as the ‘what’ of contemporary ageing. They are affected by and exert an influence upon the politics of ageing and in so doing encounter powerful interests. Both can be seen as attempts to shape perspectives on ageing, drawing attention to certain aspects and ignoring or suppressing others. Policy and theory are not, in this respect, value-neutral.
Recent years have seen a growth of interest in ageing, increased research opportunities and the development of ageing studies as part of the mainstream disciplines within the social sciences. Allied to this has been the expansion of professional activities and concerns around the needs of an ageing population. This increase in concern and attention has not, however, been entirely benign. Different professional groups and interests (or what has been termed the ‘ageing enterprise’) (Estes 1979a) are able to define questions about growing old to their own advantage. This development itself raises difficult issues for the study of ageing. On the one hand, gerontology has undoubtedly benefited from the resurgence of funding and the need for policy-relevant studies. On the other, it also appears still trapped within a discourse subordinate to biomedical and related concerns.

It is precisely this conflict that has provided the inspiration for writing this book. Over the period of the 1980s and 1990s, critical gerontology emerged as a key intervention challenging traditional theories and perspectives within the study of ageing. Critical gerontology was a response to three major concerns arising from research into old age over this period. First, the need for a clearer understanding of what various researchers identified as the ‘social construction of dependency’ in old age. This was seen to have resulted from the development of services associated with the welfare state, from the continued financial impoverishment of a large section of the elderly population, and from the systematic stereotyping of older people (or ‘ageism’ as coined by Robert Butler (1975) in the late 1960s). Second was the critique of the biomedical model, a view that associated growing old with physical and mental deterioration and disease. Third was the individualistic focus of traditional gerontology, and the lack of attention to social structure and economic relationships.

Twenty years on from its initial development, critical gerontology has become a dominant force within social gerontology, with some of its key theoretical and policy contributions brought together in volumes such as those by Estes (1979a), Phillipson (1998), Biggs (1999a), Minkler and Estes (1999), Estes and Associates (2001) and Biggs et al. (2003). However, it is also clear that critical perspectives now face a different set of challenges as compared with the late 1970s and 1980s. Critical gerontology has itself broadened out to include the humanities as well as social science-based disciplines. Feminism and perspectives on gender have begun to exert greater influence in studies of ageing (Arber and Ginn 1991; Bernard and Meade 1993; Holstein 1999). Globalization, a process which has had profound influence on mainstream sociology (Beck 2000a), is also being recognized as a factor transforming the lives of older people in the developed world as much as in third world countries.

The above elements have helped to transform critical gerontology and have provided the justification for writing this book. Essentially, our aim is to provide the reader with an introduction to key debates within critical
gerontology, covering areas such as social theory and ageing, identity and subjectivity in old age, feminist perspectives, productive ageing, globalization, and the new politics of ageing. In essence our objective is to give the reader an overview of some of the key concerns of what has become an influential area within the study of later life.

**Adopting a critical perspective**

At various points in this book we refer to the need for ‘critical’ perspectives on ageing. What do we mean by this term? Essentially, our argument is that a critical approach to theory and policy is one that goes beyond everyday appearances and the unreflective acceptance of established positions. It examines the structural inequalities that shape the everyday experience of growing old. Critical gerontology asks why a particular analogy or metaphor is used to explain adult ageing and how the assumptions contained within theory and policy influence our understanding of the position of older people in society. It further examines areas such as the biomedical and economic forces driving globalization and the peculiarly capitalist vision of productive ageing. It seeks to analyse how and why gender, race, class and other inequalities are so often ignored and places questions about meaning and fulfilment in later life age back on the agenda in the search for solidarity between social groups.

As such a critical gerontology requires a fusion of the study of structural inequalities in society and the personal experience of ageing, because both are essential for social action and progressive change. Closely related to this is a commitment to the voice and interests of older people in alliance with recognition that elders, like any other group, are fractured by competing interests based on class, gender and race. This does not, however, imply an uncritical acceptance of whatever ‘older people’ might say, rather it suggests that questions have to be asked about whose voice is being heard, in whose interests and to what end. A critical approach, then, sees ‘common sense’ about age as a starting point, not as an answer in itself. The origin and influences of everyday attitudes and the energy put by powerful interests into maintaining a particular world view of age are its raw material. It is guided by the importance of recognizing and valuing differences between groups of people who are ageing; the possibilities for solidarity based on age, between generations and with social groups with shared interests; and in building dissent and progressive alternatives to established expectations.

Social policy is often portrayed as simply responding to issues and problems, although they are in fact socially constructed. Importantly it allows the release of resources and gives permission for professional intervention. It also has a symbolic function in the creation of social spaces that encourage certain forms of behaviour and sanction others. Contemporary policy on ageing evi-
dences a change of emphasis, from responses to isolated problems such as hypothermia, abuse, self-neglect and social support, to attempts to proscribe what it is to age well and responsibly. In other words social policy defines the parameters of legitimate ageing. There is also a tendency to fit older people into policies designed to solve other problems, just as theories are imported from other parts of the life course or generically assume a standard adult, usually in the first half of life, male and white and western in culture.

These solutions to the ‘problem of ageing’ are seductive to gerontology, because they seem to promise answers to age prejudice and marginalization. Biomedical ‘solutions’ address our fears about mental and physical incapacity. Productive ageing provides a response to wider economic concerns about an ageing population. Both generate funding for services and research. They also encourage certain forms of the politics of ageing (bureaucratic and institutional), a focus on age as a question of health and welfare, and a particular interpretation of the effects of globalization (in the uncritical extension of capital and corporate values). A critical analysis of ageing sees these phenomena as indicating particular sites of struggle in which definitions of ageing are to be contested and where possible alternatives can be developed.

The structure of the book

We have attempted in this book to identify key areas for the contemporary study of ageing and the links between them. Where areas are chronically underdeveloped – such as would appear to be the case on issues of race and age – we have attempted to weave them into existing topics addressed by policy and theory. All distinctions are to some extent arbitrary and every issue interlaces with others, so there will inevitably be overlaps and scope for further elaboration. Some of these are identified below as ‘linking issues’. In the end we came down on the following topics, each of which has a chapter dedicated to it: an overview of theories of ageing, identity and age; feminist approaches; questions of successful and productive ageing; biomedicine and bioethics; the effects of globalization on later life; and the prospect of a politics of ageing.

Chapter 2 examines the development of social theory and its relationship to the study of adult ageing. Key theories are outlined and placed in their socio-historical context. We develop a critique of theories that reproduce or legitimize functionalist definitions of age and attempt an initial integration of political economy, cultural and humanistic approaches. Particular attention has been given to historical attempts to define old age through activity, disengagement and life course models. In many ways this chapter forms a point of reference for the specific debates that are covered in the rest of the book. Links with other chapters include identifying the need for a combination of structural and personal approaches to adult ageing and the relative absence of
critiques based on inequalities, class, gender and race within mainstream gerontology.

Chapter 3 looks at changing perspectives on the relationship between identity and adult ageing. Identity is seen as having both social and personal characteristics. With respect to ageing, stability of identity can act as a source of restriction but also a grounding for social action. That the roles and expectations available to older adults are becoming more flexible, is examined as a source of choice and of fragmented identities. Special attention has been paid to the relationship between bodily and social aspects of ageing. The reader is encouraged to see age identity as negotiated and managed. Links with other chapters include an awareness of inequalities as determinants of lifestyle choice and life chances, the power of active, successful and productive ageing as attempts to shape age identity, and biomedicine and ethics as regulators of intergenerational and professional relations.

Chapter 4 addresses the development of a feminist approach to adult ageing and some implications for social policy. Key points include a critical analysis of the gendered state and the reproduction of patriarchal systems within it. A feminist political economy is suggested in order to critique contemporary social policy. Particular reference is made to the effects of neo-conservative moral ‘economies’ that attempt to define the relationship between social responsibility and age. Attention has also been paid to the politics of care and affirmation, and the development of different streams within feminist politics and social theory. These are seen to be crucial to the production of social movements, resistance and alternative visions of ageing. Linking issues include the structured relationship between body, social stereotyping and personal experience; biomedicine, globalization and the reproduction of structural inequality; and sex-gender systems, as influences on new social movements and political activity.

Chapter 5 examines attempts to define productive and successful ageing. It also looks at the way older people are increasingly encouraged to adopt strategies of self-surveillance, as an alternative to the external control of an ageing population. Key points include an analysis of active, successful and productive models of ageing as attempts to shape personal and social experience. It is suggested that each has been used institutionally and in terms of policy to define adult ageing and that in the case of productive ageing a state of hegemony is close to existing. Here, economic concern about the effects of an ageing population is intimately related to the construction of models of ‘ageing well’. This chapter emphasizes the close relationship between theory, policy and experience. Linking issues include the legitimation of particular age identities, the extension of western definitions of productive ageing to other societies and the possibilities for resistance to economic definitions of age value.

Chapter 6 critically assesses the role of biomedicine and ethics in the social construction of ageing. Key points include the role of anti-ageism,
political economy and experience in launching a challenge to biomedical definitions of later life. Biomedicine is examined as a hegemonic force that is often powerful enough to ignore other perspectives on ageing. It is, however, subject to commercial drivers of biomedical advance that are brought into conflict with the health needs of older people. Bioethics is examined as a means of regulating professional relationships with older people that more often than not makes the relationship between health, age and social inequality increasingly obscure. Linking issues include biomedicine as an influence on institutional and theoretical models of ageing; the reproduction of gender inequality through biomedical policy; and the impact of globalization and corporate power on responses to health and illness in later life. Political resistance to biomedical definitions of personal identity and public policy are a final link with other chapters.

Chapter 7 looks at the effects of globalization on adult ageing. This chapter begins by arguing that global challenges to the nation state hold profound implications for policy on ageing both locally and transnationally. The role of intergovernmental organizations is critically examined, given their role in shaping a new order for later life. These developments are seen to change the quality of life of older people living within the structures of existing institutions in the developed world and in terms of transnational ageing, migration and ageing in developing countries. Particular consideration is given to the implications for caring across borders, global care chains and political responses to old age. Linking issues include a movement from local to global theoretical approaches to old age; multiplicity, diversity and stability as factors in age identity; global challenges to social patriarchy and state masculinism; and the effects of cultural imperialism in defining a good old age.

Chapter 8 explores the development of a politics of ageing. Among the key issues addressed is an examination of the possibilities and limitations of old age activism. The chapter begins by critically assessing the role of the state and bureaucratic responses to ageing as it impinges on traditional political institutions. This is then contrasted with social movements and questions of diversity in old age, including the impact of arguments asserting civil rights in old age and the notion of citizenship. Examples are drawn primarily from the USA and Europe, with consideration given to the different avenues open to age politics depending upon local traditions and institutions. Linking issues include changing age identities; self-determination and social development through political action; the gendered state and age/gender issues for social movements; the relationship between policy making, political power, corporate power and global economic pressure; and the possibilities for resistance that are emerging through older activism and intergenerational alliances.

Chapter 9 summarizes the various arguments and identifies some major tasks for a critical gerontology to undertake, identifying in the process new challenges and issues for critical perspectives to address.
Each of the authors has worked previously, with differences in emphasis and style, on the question of how to develop a critical perspective on adult ageing that questions comfortable assumptions and powerful interests. We hope that this book challenges established ideas about old age and goes some way to provoke alternatives.