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OUR AGING WORLD

INTRODUCTION

For the first time in human history, there are more people in the world who are 60 years of age and older than below 5 years of age, and the world's older population (65+ years) is growing more than twice as fast as the world's total population (U.N. Department of Economic and Social Affairs, Population Division, 2017). In 2017, one in eight people in the world was aged 60 or above. This is predicted to increase to one in six people in 2030 (U.N. Department of Economic and Social Affairs, Population Division, 2017). Some countries already have seen a drastic change in their population's age structure. Japan, for example, has experienced incredible growth in the percentage of its people aged 65 and above, exploding from just 10% in 1985 to 26.5% in 2015 (Kojima et al., 2017). Small, less developed countries, too, like Kenya, have seen a threefold increase in people aged 65 and above in the past 50 years (U.N. Department of Economic and Social Affairs, Population Division, 2017), although Kenya's total percentage of older persons is still comparatively low (5% of the total population). In this opening chapter, we consider several aspects of aging as a global phenomenon, starting with the role of culture in shaping how we view old age and then turning to the far-reaching social and economic impacts of an aging world within countries and across regions.

CULTURE, "OLD AGE," AND AGING

It is important to pause a moment to think about what it means to be "old." "Old age" as a label describing a particular time in one's life may seem familiar at first. After all, each of us knows someone we consider to be "old." However, when we stop to think about how, when, and why we apply the label of "old" to a person or group, old age becomes something much more complex than the number of years a person has lived or his or her physical appearance. "Old" becomes an identity, a judgment, a category, or a right, depending on a variety of social and cultural

circumstances. To consider this larger question of "old" in the context of global aging, it is worthwhile to first consider the ways that culture influences stages of life and how those definitions influence one's place in a given society. The cultural framing of old age also includes examining stereotypes and myths associated with later life, terms used to describe older persons, ageism (or the systematic discrimination and devaluation of someone based on age or the appearance of age), and criteria used to define the concept of "old."

Culture and Old Age

Although **culture** is often used to describe the fine and performing arts (e.g., opera, literature, paintings), this book relies on the social science perspective on culture—the unwritten rules one must know to function in a given social group. The anthropologist Clifford Geertz (1973) defined culture as "an historically transmitted pattern of meanings embodied in symbols, a system of inherited conceptions expressed in symbolic forms by means of which [people] communicate, perpetuate, and develop their knowledge about and attitudes toward life" (p. 89). For Geertz and other scholars who study culture, the "rules" of a culture are transmitted and reinforced through the actions of others within the culture. Think, for example, of how you learned to shop for groceries. Most likely, you were not given a formal set of rules or lessons on how to shop for items, pay for them, and package them to take with you. In the United States, shopping generally involves visiting a large grocery store; taking a shopping cart; selecting items based on a preestablished, nonnegotiable price; placing items (sometimes enough to last several days or weeks) in the cart; waiting in line at a cashier to pay; and having a store employee place purchased items in paper or plastic disposable bags. In other countries, people might visit individual food sellers every day for fresh items such as vegetables, eggs, bread, fish, and so on, bringing with them their own bags to take the items home. The buyer and seller may negotiate (sometimes called "haggling") about the price. There may be no lines to wait in (i.e., the most aggressive and determined person wins). As this example illustrates, it may be only when we have an experience outside our cultural expectation that we realize something is "different." The "right" way to do something, like shop for groceries, is so culturally ingrained that we never have bothered to think that other people do it differently.

The same can be said for aging. Cultural definitions of who is "old" are transmitted in very subtle ways, so most people do not give much thought to it. In fact, one way that "aging" has been described is as a cultural interpretation of a biological phenomenon. In other words, biological changes that a person undergoes over time, such as graying hair, wrinkles, and changing vision, are given a cultural meaning. Consider gray hair. Advertising in the United States reinforces the idea that gray hair for women is unattractive. In contrast, advertisements encourage men to keep a "touch of gray" as a sign of distinction and power. In Bangladesh, though, women who have gray hair are associated with power and status, since

advancing age is how women assume positions of authority within households (Ahmed, 2014). In short, while gray hair is a product of biological change, the *meaning* of gray hair is culturally determined.

"Old" can be also defined through one's role in society or relationship to others. In the Bangladesh example, higher status may be conferred on people of advancing age not just because of appearance, but because of their position within the household. A woman in Bangladesh builds a family through marriage, children, and grandchildren. Her change in role from daughter-in-law to parent to grandparent further establishes her as "old" (in a positive way), regardless of chronological age.

Chronological Age

Of course, another way that "old" is defined is through chronological age. While the number of birthdays a person has had might seem like a straightforward way of defining the boundaries of "old," chronological age has its challenges. We all have had the experience of meeting someone, making a mental estimate of their age based on appearance or other observable traits, and then being surprised to learn that their chronological age differed from what we thought. This is because chronological age is a poor marker for many things. A person's physical environment (e.g., climate, exposure to harsh conditions), lifestyle choices (e.g., alcohol and tobacco use), and genetics all can influence how a person ages biologically; physical manifestations that may appear to be a reflection of chronological age may, in fact, be determined to a greater degree by things other than the passage of time.

Chronological age became important in the late 19th century during the development of social programs called the "welfare state." For citizens of the United States, the term "welfare" typically connotes a particular kind of government-funded program for people who are poor. However, the "welfare state" is a much broader concept. It describes the collection of social-assistance policies and programs provided by a government that takes the place of support traditionally provided by the family or by religious institutions. Such policies emerged as a result of industrialization and often included public old-age pensions, health care programs, family allowances, sickness and maternity/birth benefits, and unemployment compensation. Eligibility for programs such as when one can start earning a retirement pension (or must mandatorily retire) or the age at which someone is considered an adult is determined by chronological age. Some countries, such as Thailand, have a relatively low mandatory retirement age of 60 (see Social Security Administration, 2014). Many African countries use age 50 as the point when one is officially considered "old" (Naidoo et al., 2010). In the United States and several Western European countries, pension eligibility ages are being raised to reflect increasing life expectancy of retirees. For example, eligibility for Social Security in the United States has recently increased from 65 to 67 and will continue to increase incrementally over the next several years. The same can be said for Germany,

where, in 2017, the retirement age was 65, although that age also gradually will be raised over the next several years (Organization for Economic Co-operation and Development [OECD], 2019).

Ageism

Defining "old" is more difficult than one would think. While many people might associate later life with positive qualities such as wisdom or gained experience, more negative views of age—ageism—are present in many cultures. Ageism describes the systematic discrimination of people because of their age or the appearance of age (Cruikshank, 2013). Ageism can be intentional, whereby a person is openly ridiculed or devalued because of his or her age; or unintentional, as when someone thinks they are being kind to an older person by using terms such as "elderly," "senior citizen," or "cute," or calling a person "young lady" when she is clearly not a young lady. In the latter example, making a point of pretending someone is "young" underscores the idea that being "old" is bad or undesirable. Ageism can also be either external, which describes an outsider's behaviors toward someone else, or internal, which occurs when an older or even a middle-aged person uses self-deprecating words as a way of apologizing for being older, such as when a person who forgets a name says they are having a "senior moment." (Cruikshank, 2013). Ageism is problematic because ageist attitudes and portrayals in the media and other forms of popular culture ascribe negative attributes to older people, positioning them as weak, dependent, incompetent, and as somehow "less" than younger people. It is important to keep in mind that ageist portrayals can have negative consequences for older persons. Ageism positions older people as burdens, nullifies positive contributions that people make throughout their life course, and sets up a young/old dichotomy that separates people rather than bringing them together. Because of the pervasiveness and harmful effects of ageism worldwide, the World Health Organization (WHO) has launched a global campaign to combat it (Ayalon & Tesch-Römer, 2018).

Myths About Old Age in Different Cultures

Along with ageism, it is also important to be aware of myths—both positive and negative—about aging in various cultures across historical time. Many students new to gerontology and aging believe there was a time in the past when older people were revered and held in high respect within the community. However, rather than age alone being an indicator of respect, many scholars have suggested that social class, status, and value to society were stronger indicators of respect (Thane, 2000). For example, an older person who had mastered a unique skill (e.g., calligraphy) might be held in high esteem, whereas an older person who held a common skill (e.g., rice farming) might not. Since the poor comprised the majority in many cultures, people with wealth and social position, regardless of age, held much higher levels of respect than older persons from lower social classes.

Another common myth is that older persons are still revered in some parts of the world, especially East Asia. For example, in 1966 Japan officially established Respect for the Aged Day, celebrated on the third Monday in September. Although this day recognizes the importance of respecting older persons, to be respected is not the same as to be revered. In addition, while older persons may receive a formalized form of respect that includes honorific titles such as "aunt" or "father," many countries struggle with combatting mistreatment of older persons, including elder abuse. The WHO estimates that 15.7% of people aged 60 and above worldwide are victims of elder abuse. It believes this percentage is much lower than the actual occurrence, since many people may be unwilling to report such abuse (WHO, 2019a). Of the types of elder abuse (physical, sexual, psychological, or financial, and neglect) included in the WHO's research study database, neglect was most common; countries cited as having the highest median levels of elder neglect were Egypt, Israel, Spain, and China.

The high prevalence of neglect speaks to similar myths regarding the revered status of older persons, specifically in countries that practice **filial piety** versus countries where older people are not cared for by family in the same way. Filial piety (literally, "the devoted child") describes a Confucian and Buddhist value of respect for one's ancestors, elders, and parents. According to Charlotte Ikels (1993), China's traditional, precommunist culture of the early 20th century was based on Confucianism, "an ethic of familism that not only served as the standard to guide proper family organization for many centuries but was also codified into law" (p. 124). This system emphasized vertical family ties—those between the generations—as more important than horizontal ties, such as those between spouses, which were viewed primarily as a means by which to continue the lineage (or vertical line) through offspring. Confucian filial piety requires that each person respect his or her place in the family and show proper levels of respect to others according to their place (e.g., child to parent, adult to elder; Canda, 2013). While filial piety continues to be part of the cultural framework of many countries, this does not mean that older persons who live in these countries are without challenges or that all children are willing and able to provide care for older parents. China, for example, enacted legislation requiring children to be involved with their aging parents and to visit parents at least once a year (Cheung & Kwan, 2009). This raises a question: If legislation is necessary to ensure that children are looking after their parents, is filial piety as powerful a norm as we have assumed?

In contrast, families in Western countries often are viewed as having abandoned their older family members, since multigenerational households are not the norm in many of those countries. However, living arrangements of family members in developed countries are more a reflection of Western cultural values by both older and younger family members than of their views toward care for older family members. For example, people in the United States place great value on independence in family relationships across the life cycle, which translates into a preference for patterns such as "**intimacy at a distance**" (living near family members but not together) and older adults not wanting to "be a burden" on their children.

This value is reflected in contemporary living arrangements in many developed countries, such as retirement communities or "in-law suites" (freestanding apartments within a larger house), and has a long history. Historian and gerontologist Thomas Cole (1992), in his cultural history of aging in Western Europe, points out that older Europeans have long preferred to live near but not with their adult children. In addition to citing historical European records of parents signing formal contracts with their primary heir to guarantee future care should the parent require assistance, Cole points to Shakespeare's *King Lear* as an example of a cautionary tale about living with one's children. In the play, Lear divides his kingdom between two daughters (Regan and Goneril) who profess (albeit insincerely) the magnitude of their love for him. Later, they take away Lear's land and money, which leads to several tragic outcomes.

What to Call Older Persons

Finally, it is important to consider terms used to refer to older persons. Although the term "the elderly" is frequently used to describe older persons, often in a well-intentioned way, it could be considered offensive for several reasons. "Elderly" implies dependence, weakness, and frailty. It is a term generally used by people who do not consider themselves to be "elderly" to emphasize need, to garner sympathy, or to underscore helplessness. In effect, what the term "elderly" does is to stereotype a large group of people, generally those aged 65 and above. Although one easily can still find the word in print in various publications, several academic journals in the aging field prohibit its use (de Medeiros, 2018). The American Medical Association *Manual of Style* and the *Journal of the American Geriatrics Society* have taken a strong stand against ageist and ablest language. Authors are asked to avoid use of "elderly," "aged," "elders," or "seniors," and to use specific age ranges instead. While such a strong stance might initially seem like "political correctness" gone awry, it is important to remember that several studies report that people aged 65 and above overwhelmingly reject the terms "elderly" and "old," preferring the term "older persons" (Falconer & O'Neill, 2007).

USEFUL ECONOMIC AND POPULATION CONCEPTS

The previous section provided a framework for thinking about how culture influences aging. This section examines some basic economic concepts as a way to help understand how systems and supports for older persons function within countries. This section therefore provides a very basic overview of some population wide economic terms that are helpful in looking at global aging across countries and regions. The first, **gross domestic product** (GDP), is an indicator of a country's total economic activity. It is the monetary value of the goods and services produced by a country within a given time period (e.g., a year, a quarter). **GDP per capita** is the GDP for a given country divided by its total population. GDP

and GDP per capita can provide a snapshot of a country's wealth and standard of living. According to the U.S. Central Intelligence Agency (CIA) *World Factbook* (2019), the countries with the 10 highest GDP per capita in 2017 were Liechtenstein ($139,100), Qatar ($124,500), Monaco ($115,700), Macau ($111,600), Luxembourg ($106,300), Bermuda ($99,400), Singapore ($93,900), Isle of Man ($84,600), Brunei ($78,200), and Ireland ($75,000). The United States was 19th on this list, with a GDP per capita of $59,500. It is important to note that while GDP per capita provides information about the relative prosperity of a country, it does not account for differences in social class that might lead to unequal distributions of wealth or financial resources.

Inflation is another important economic term for global aging. Inflation describes the rate at which general prices for goods and services increase, which in turn decreases purchasing power. An inflation rate of 5% means that prices are 5% higher this year than they were last year. If a person's earnings did not rise by 5% or more, his or her earnings would pay for less, making them lower in purchasing power. Inflation is important to global aging since the value of funds in retirement savings and pension plans is affected by inflation, as is people's ability to purchase necessary goods and services. People living in countries with high inflation rates may find it difficult to cover their living expenses in later life, either through retirement funds for people in wealthier countries or through familial or other forms of aid for those in more socioeconomically disadvantaged regions. Governments also may find it difficult to support pension programs or other social programs if the value of currency and spending power is reduced through inflation. For example, in 2017, Argentina's inflation rate was estimated at 25.7%, compared to Japan, which had an inflation rate of 0.5% that same year (Central Intelligence Agency World Factbook, 2019). Although Japan struggles with increasing numbers of people drawing pensions, the small change in the price of goods means pension income holds its value. On the other hand, with such a high inflation rate, Argentina must worry about the devaluation of currency and its ability to help people meet their basic food and housing needs.

Another useful economic statistic is **health care spending**, which is the total expenditure on health care goods and services, including public health services, long-term care, rehabilitative care, and curative care (OECD, 2019). Spending on health per person is correlated with GDP and life expectancy. The WHO estimates that, although US$44 is needed per person in the world for basic health services, 26 WHO member countries spent less than that per person in 2011, and six spent less than US$20 (WHO, 2014). The country with the highest total per capita spending on health was Norway (US$9,908); the lowest was Eritrea (US$12). Norway also had the highest government spending on health per person (US$8,436) and Myanmar (also known as Burma) the lowest (US$3). Not surprisingly, Norway's **average life expectancy at birth** (the average number of years a person born at a given time and a given place can expect to live) in 2018 was 82 years, quite good compared to Eritrea (65.6 years) or Myanmar (68.6 years).

GEOGRAPHY AND GLOBAL AGING

In addition to economics, geography also plays an important role in global aging. This includes shifts in populations from rural to urban areas as well as movement among the general regions of the world.

Urban and Rural

Whether one lives in an urban or rural area likely will affect many aspects of aging. Tony Champion and Graeme Hugo (2017) point to the following differences between urban and rural areas. Urban areas are characterized by manufacturing, construction, and administrative and service occupations, while agriculture is the focus of rural areas. People in urban areas tend to have higher levels of education, access to services and information, and in-migration than rural areas. In contrast, rural areas tend to have higher fertility and mortality rates than do urban areas. In 2018, 55% of the world's population lived in an urban area. This is expected increase to 68% by 2050 (U.N. Department of Economic and Social Affairs, 2018). In addition, the United Nations reports that, with 37 million people, Tokyo is the world's largest city, followed by New Delhi, India (29 million); Shanghai, China (26 million); Mexico City, Mexico (22 million); Sao Paulo, Brazil (22 million); and 20 million each for Cairo, Egypt; Mumbai, India; Beijing, China; and Dhaka, Bangladesh.

The move from rural to urban areas is rooted in industrialization. One of the most important social changes influencing the need for, and development of, a welfare state is industrialization, which requires large concentrations of workers for factories and thus often induces a substantial migration from poorer rural farmlands to urban areas. This migration introduces a new way of life: Individuals are separated from the land and, frequently, from their extended families. Whereas rural farmers often have kin for neighbors, ensuring others nearby who can provide social and economic assistance when necessary, urban dwellers typically find themselves among strangers, separated from their traditional social-support networks. This new social living condition requires some mechanism to replace that lost family support, and this mechanism became the welfare state. The process that unfolded for Western Europe and the United States in the late 19th and early 20th centuries is similar to what is happening in the developing nations of the world today. In many countries, the migration of young people to cities in search of better jobs and a higher standard of living has resulted in isolation of older people in rural areas, which in turn has led to changes in family care. Sometimes, working-age parents need to leave their children to be raised by their grandparents. Other times, children who traditionally may have provided care for their parents (filial piety) are no longer close by and therefore unable to assist with care needs. This has resulted in millions of the rural older population, the so-called "left behind," being without reliable family support or care. (While this term appears to have originated in China, it is a common phenomenon in a growing number of developing countries.)

Country Classifications

Although classifying countries or regions is complicated, the categorization is based generally on the area's level of economic development. The U.N. Statistics Division (2019) cautions that such designations should be understood as a "statistical convenience" rather than a judgment and that no single, established standard exists for economic classification of nations. For our purposes, think of the designations as the result of a two-step process. First, the World Bank calculates a gross national income per person for each country, and then places each into one of four categories: low income, lower-middle income, upper-middle income, and high income. In the next step, high-income countries are defined as developed countries, and all remaining (low- and middle-income) countries are classified as developing countries. As a point of reference, the threshold for high-income (developed) countries in 2018 was a gross national income per person of greater than US$12,055; at the other end of the continuum, low-income countries were at or below US$995 per person, with the other groups in between (lower-middle income from US$996–$3,895 and upper-middle income from US$3,896–$12,055); see World Bank (2018). Even though these categorizations are only statistical conveniences, they do provide a general sense of the level of resources available in a country to address important needs, including those related to having an aging population.

A commonly used alternative to the World Bank categorization comes from the United Nations, which currently designates all of Europe and North America (Canada and the United States) plus Australia, New Zealand, and Japan as **more developed countries**; all others are **less developed** (or sometimes referred to in shorthand as "developed" and "developing"). Within the group of less developed countries is a special designation for **least developed countries** (LDCs). Several criteria are used to distinguish the nations in that category: (a) very low income per person, (b) economic vulnerability, and (c) poor human development indicators (population nutritional status, mortality, literacy, and education). LDCs currently include 34 African nations, 14 Asian countries, and Haiti (U.N. Department of Economic and Social Affairs, Population Division, 2017). For our exploration of global aging, these designations help to differentiate countries and regions of the world on a number of dimensions, including the current age of the country.

MORE DEVELOPED COUNTRIES

More developed countries currently have a much higher proportion of older people than do less or least developed countries. However, the populations of the less developed nations are aging much faster than did the populations of the developed nations during their modernization and population aging process in the latter half of the 19th and early 20th centuries. Consequently, the nations in these categories differ in the types of challenges they face related to population aging. For example, as the proportions of older people continue to grow, the relative size

of the available labor force shrinks, which has implications for the sustainability of pension programs and for the ability of a country to fill the jobs it needs to keep the economy vibrant. **Age dependency ratios** compare the size of the working-age population to that of the older population; this measure is called a dependency ratio because of the assumption that the working-age population will, to some degree and in some way, have to support the older population (usually through taxes to pay for programs and public pensions for older people). Japan, Italy, Finland, Portugal, and Germany currently have the most challenging age dependency ratios in the world—three working-age people for every one person aged 65 and older (World Bank, 2017). The viability of Germany's well-established (since 1889) and generous public pension program already is threatened by increasing percentages of older people and decreasing fertility rates. At present, Germany spends about 13% of its GDP on the pension system, one of the highest percentages in the world (He, Goodkind, & Kowal, 2016). The proposed solutions to the public pension problem in Germany include increasing the tax rate or the age at which a person is eligible to receive the pension and expanding immigration from other countries to admit more workers (to pay more taxes). The political viability and economic wisdom of any of these solutions is under heated debate in Germany (Haub, 2007), just as in other nations.

In addition to a long-standing public pension program, Germany has a well-developed system of services and programs for older people, including formal long-term services offered in institutions and in the community. Even so, the significant size of the older population poses challenges for the future. Germany's response to, and planning for, these challenges reflects basic cultural values, as illustrated in a recent national report on aging policies. These values include a shared responsibility and solidarity, generational equity, lifelong learning, and disease prevention (Kruse & Schmitt, 2009). In its focus on promoting healthy, active aging and lifelong opportunities for learning and civic engagement, Germany is very similar to the United States. Developed nations in general have the luxury of such a focus as long as their economies permit sufficient funding, but they may find themselves challenged as the percentage of older people increases.

LESS AND LEAST DEVELOPED COUNTRIES

At the risk of oversimplifying a complex situation, the general pattern is that nations in the less developed regions of the world are faced with the dilemmas of devising new programs, policies, and services for aging populations, whereas more developed regions are dealing with the problems of funding, adapting, or expanding existing policies and programs. It has been said that today's developed nations got rich before they got old, while developing nations are getting old before they get rich (National Institute on Aging & WHO, 2011). Given what we know about both economic development and aging, it also may be true that poor countries beginning to age may never get rich.

Today, more than 60% of all people 65 and older live in less or least developed countries (often described as "developing"); that proportion is expected to exceed 75% by 2040 (He et al., 2016). These numbers may seem surprising, given the relatively low proportions who are old today in many of these countries as well as their lower life expectancies and median ages. Take India as an example: Although only 5% of India's 1.28 billion people currently are aged 65 or older, that 5% represents more than 64 million older people. Because so much of the world's population is concentrated in these developing nations, and because the regions in which they are located are beginning to experience rapid population aging, it is easy to see how three fourths of the world's older people will be living in these areas in only a few decades.

Population aging in developing nations (such as India, Thailand, Kenya, Chile, and Guatemala) poses unique challenges to the governments, families, and individuals in those countries. Their populations are aging quickly, but they are less likely to have in place programs, policies, or health care systems prepared to meet the needs of older people. This structural lag in the development of options to deal with coming older populations can be explained by a combination of factors, including relatively poor economies with little revenue to invest in new programs or services; pressing concerns about general nutrition and maternal and child health; traditional value systems that emphasize norms of family care; and the very rapid pace of demographic and health transitions (mentioned earlier)—giving countries little time to adjust to the new realities of an aging society. Many nations in the developing regions of the world are simultaneously dealing with relatively high fertility, problems of poverty and hunger, population aging, and new demands for chronic health care.

In many African countries, the HIV/AIDS epidemic has had a profound effect on life expectancy at birth, resulting in changes in life expectancy in countries like South Africa from 62.2 years in 1991 to only 52.6 years in 2005 (World Bank, 2019). More recently, the WHO African Region saw an increase in life expectancy to 61.2 years, attributed to antiretrovirals for treatment of HIV and improved child survival rates (WHO, 2019b). For many older people, the HIV/AIDS epidemic translates into loss of their adult children and results in the necessity to care for their orphaned grandchildren. The HIV/AIDS epidemic in Africa is broad-based, involving both women and men. This means that both marital partners may contract the disease and, without expensive (and sometimes unavailable) medications, both may die. Whereas the majority of older people in Kenya live with family, some are now living in **skipped-generation households,** with the middle generation missing and grandparents acting as surrogate parents. Of course, many countries (including the United States) face this problem, created by a number of factors that include parental addiction, incarceration, and serious illnesses. In the United States in 2014, 10% of children lived in a household headed by a grandparent (U.S. Census Bureau, 2014). For more than one half of these children (numbering 2.7 million), the grandparents were the primary care provider (U.S. Census Bureau, 2014). Africa, however, has the highest proportion of older people living in such a

situation (around 20%), which is most often related to HIV/AIDS mortality of the middle generation (U.N. Department of Economic and Social Affairs, 2018).

In addition to the vast implications of HIV/AIDS mortality, older persons in many African countries face problems with poverty, illiteracy, poor nutrition, limited housing options, lack of income security, and few social service programs (Mwangi, 2014). In many nations across Africa, legal systems have not specifically recognized the rights of the older population and do not provide them with equal access to health care, social services, and income security or much protection from age discrimination, especially in matters of inheritance and property rights (HelpAge International, 2012).

THE STUDY OF GLOBAL AGING

While the previous sections have provided a context for issues and concepts related to global aging, this final section addresses why it is worthwhile to study global aging, regardless of one's career plans or academic major. As Whittington and Kunkel (2013) have argued elsewhere, studying global aging is important to everyone for three main reasons.

To Get Educated

Aging is a new, powerful social force—never seen before in human history—that already is changing the way Western societies are structured and how their citizens will live out their lives. For the first time in history, large numbers of the human species are living beyond their working years and confronting the personal and family issue of what to do with their time. Retirement is a concept that was unknown to most of our ancestors living during the first 70 centuries that civilized societies have been on Earth; now it must be designed and adapted to by more and more people. Part of being an educated person is having knowledge about this revolution in longevity.

Self-Interest

The world is globalizing—becoming, in the words of Marshall McLuhan (1962), a "global village." The twin revolutions in technology and communication that allow people in one part of the world to know what is happening in all other parts—and to go there quickly, as tourists, as temporary workers, or as permanent migrants—mean that we are not only connected but also *collected* with each other in important ways. If the economic and political well-being of the United States (or any other nation) is heavily dependent on the work and consumer behavior of 1.4 billion Chinese, the technical knowledge of 1.3 billion Indians, the religious tolerance of 260 million Indonesians, or even the political aspirations of 82 million Iranians, attention must be paid to what is going on in their countries. In the 2012

campaign for the Republican nomination for U.S. president, one of the candidates, Herman Cain, famously denied that it was of any importance that he should know the name of the president of Uzbekistan (he did not). But Uzbekistan is an important part of the connected world, and what happens among its 30 million residents may not remain isolated there. It can be quickly communicated, transmitted, or migrated to a neighborhood near you.

As aging transforms developing nations demographically and socially, it will create profound economic and developmental changes in these emerging world powers, along with exciting opportunities for the realization of human potential. Whatever is happening to the smallest, least-visible countries will affect the developed world in ways we can hardly imagine today. It is in the interest of all people that such far-reaching and fundamental changes be understood sooner rather than later.

The Smart Move

Each of us has a perspective on life and the world that is limited and shaped by our experience. Such limited perspectives can have unpleasant (even destructive) consequences when the nature, motives, and intents of others are misinterpreted by some—leading to prejudice, discrimination, racism, war, and even genocide. It is an article of faith of most educated people that expanding one's experience and broadening one's perspective can reduce such misunderstanding and destructive behavior. Learning about global aging will not, by itself, lead to world peace. However, it could contribute to a fuller, more accurate picture of how other people live, raise their families, care for their parents, and live out their lives. If that knowledge impresses us with the realization that aging is a universal experience, that all families, communities, and societies—no matter how different they may seem from our own—struggle as we do to cope with its results, and that many older people find it a productive, fulfilling time of life, we may begin to perceive our commonalities as greater than our differences. That would be the beginning of wisdom at least.

SUMMARY

The demographic reality of global aging is undeniable; clearly, the aging of a society is accompanied by, and is a catalyst for, enormous social reform. Global trends in longevity and population aging are heralded as a success story, but the challenges posed also are widely acknowledged (He et al., 2016). How these issues play out in specific countries or major regions of the world will vary, depending on a host of factors including demographics, economics, and cultural values.

Each region and each nation face both the challenge and the promise of aging societies. There has never been a clearer mandate for gerontology education and research. In response to this mandate, gerontology programs are beginning

to appear in countries worldwide. In some places, such as the United States, Germany, and the United Kingdom, gerontology is a well-developed discipline (de Medeiros, 2017), with credentials offered at several levels of higher education. In other places, such as China, Israel, and Mexico, gerontology is a specialty within other professional programs such as medicine, nursing, and social work (Carmel & Lowenstein, 2007; Kunkel, 2008). In still other countries, such as Kenya, gerontology education is offered primarily as training for direct-care workers. In recognition of the need for data about aging populations, many national and cross-national efforts are underway. Examples of such research initiatives include a survey of aging, health, and well-being conducted in Argentina, Mexico, Barbados, Uruguay, Chile, and Brazil; a longitudinal study of aging in India; the Survey of Health, Ageing and Retirement in Europe (SHARE); a massive study of the oldest old in China; and the WHO longitudinal study of global aging and adult health. These are but a few illustrations of the educational and research efforts underway to meet the challenge and the promise of global aging. The remainder of this book is devoted to its implications.

DISCUSSION QUESTIONS

1. Describe an ageist character or ageist portrayal in a commercial, show, or film. What, do you think, is the intended result of ageism in your example?

2. Name a cultural practice that you find to be silly or oppressive. How do you think this practice came into being? Do you think it should be challenged?

3. Why is it important to understand global aging?

4. Do you live in a developed or developing country? How can you tell?

5. What are the worst and best things about living where you do?

6. What is so important about population aging?

7. Why is it said that poor nations may never get rich?

8. Which part of the world do you think is likely to have the best environment for its older citizens 50 years from now?

9. Look up the GDP and life expectancy at birth for a least developed, less developed, and developed country. What can you say about the relationship between the country's classification, economic activity, and life expectancy?

10. How will global aging affect your major or your chosen career path?

KEY WORDS

Ageism	Culture
Biological age	Filial piety
Chronological age	Functional age

GDP	Life expectancy
Health care spending	More developed countries
Inflation	Rural
Least developed countries	Skipped-generation household
Left-behind generation	Welfare state
Less developed countries	Urban

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A GLOBAL PERSPECTIVE ON OLDER ADULTS IN ADVERTISING

JAYE ATKINSON

"He may be 73, but you wouldn't want to spill his Chianti."

"A seventy-year-old couple demonstrating the benefits of a Mediterranean diet."

(Williams, Ylanne, & Wadleigh, 2007, pp. 11–12)

Those quotations are captions in a United Kingdom advertising campaign for Olivio, a margarine made from olive oil (Williams et al., 2007). The first caption accompanies a picture of an older man with thinning, graying hair; not smiling, he is scantily clad in a tank-top shirt that reveals a physically fit body. The text underneath further emphasizes his strength: "Even at this ripe old age he's still as tough as old boots" (p. 11). The second caption accompanies a close-up picture of a window with closed shutters. The text explains that eating Olivio "has got to be good for your family's health, not to mention the . . .*ahem*. . . active part you and your partner will take in later life" (p. 12). These are just two of Olivio's 16 advertisements employing older adults as the main characters. According to the company responsible, Unilever, using older adults in their campaign increased their sales by approximately 150%!

People often are used in advertising campaigns to sell products and services to others; this is not new! The people in advertisements, however, are not often older than 50 years of age. This chapter explores the portrayals of older adults in advertising in the United Kingdom, the United States, and India with modest references to preliminary research in China and Germany. As many scholars have argued, the lack of intergenerational contact outside the family emphasizes the role media

portrayals will play in developing attitudes and beliefs about age and the aging process (Williams et al., 2007).

Williams and her colleagues used a case study approach to examine Olivio's seven-year advertising campaign. Detailed qualitative analysis of 11 of the 16 advertisements enabled them to identify four phases of the campaign and their connection to stereotypes of older adults. They argue that phase one was focused on educating the public about the health benefits of a Mediterranean diet and how their product fit into that lifestyle. This education focus required longer text with references to doctors, saturated fats, cholesterol, and other health-related information, but the main taglines describing the older adults pictured include:

> "She's never seen a JANE FONDA workout video, but she'll probably live longer than you."
>
> "It's not fame, glamour, and money that keeps them going."
>
> "They also hand down the secret of long life."
>
> <div align="right">(Williams et al., 2007, pp. 7–9)</div>

Older adults pictured in these advertisements, therefore, were examples of longevity and the positive versions of what consumers could become if they eat properly.

The opening quotations were from phase two of the campaign, a phase that these scholars argue focuses on the elders questioning our expectations; that is, negative "stereotypes are invoked (and by their invocation arguably reinforced) but mediated" (Williams et al., 2007, p. 19). In this phase, older adults are strong (as in the 73-year-old with Chianti), sexual (as in the closed shutters), and active (as in an older adult male standing by his bicycle with a race number pinned to his chest). The tagline says, "He's never won a race in his life. It's the early days though" (p. 10). Not only is he active, but that activity is expected to continue, and he is expected to become more successful.

Phase three focuses on older adults enjoying their lives, showing one older woman in a challenging yoga position (lifted lotus, for yogi readers) and another happily driving a fancy convertible. Accompanying texts play on the word "oil" as something that helps one remain flexible or keep running smoothly. Phase four employs pictures of older adults who are happy, attractive, and in love. Although most of the text focuses on Olivio's name change to Bertolli, it also describes the older adult models as "arm candy" and "babe magnet," contrasting with negative expectations of beauty and age.

Williams et al. (2007) identified an extremely interesting, provocative, and positive campaign employing older adults, one that apparently was quite successful in the United Kingdom. The images, however, pictured 19 older males and only five females. Those numbers are similar to findings of the quantitative gender portrayal research conducted in the United States and India by Raman, Harwood, Weis, Anderson, and Miller (2008). These researchers examined older

adult portrayals in U.S. and Indian magazine advertisements. From 40 randomly selected magazines across genres, they found 1,464 advertisements that included 1,445 people. They coded the ads for the presence of older people, type of product, and health and gender of the people. Older adults, those 50 years of age and older, were underrepresented in the ads in both cultures. In the U.S. sample, 145 of the 903 people depicted in the ads (16%) were 50 years of age or older, while in the Indian sample, 34 of 445 people (7.6%) were in that age group. According to the authors, those observed proportions significantly underrepresent the actual size of the 50-plus populations of both the United States (28%) and India (13%). Additionally, age and gender interacted such that older men appeared in ads more often than older women in both cultures, though this effect was stronger in the Indian sample. Men outnumbered women in the U.S. sample at age 50 and above, but men outnumbered women in the Indian sample at age 30 and above. This lower visibility of older people in marketing in both India and the United States reinforces the generation's lack of cultural importance and distorts the reality of gender ratios.

In both countries, older models were employed in ads focused on health products, but in India financial products also were sold by older adults. The authors also examined ad text and found that age references and associations between ill health and older adulthood were more common in the U.S. sample. Older adults were portrayed as unhealthy more often in the United States, especially for people above 60 years of age. This connection perpetuates a negative view of aging as inevitably unhealthy.

Unlike the Olivio campaign, these advertising images of older adults are less positive and yet very similar to those found by general age portrayal research (most of which focuses on U.S. media; see Atkinson & Plew, 2017 for a recent review). In China, too, advertising research has found that cultural values, such as filial piety (respect for older adults), are salient in television advertising (Zhang & Harwood, 2004). Zhang et al. (2006) summarize age portrayal research in Germany by stating that "analyses show that the predominantly negative images from the 1980s and 1990s (Bosch, 1990) have been modified by a tendency for positive, age-complimentary images, especially in television advertising" (p. 275).

Essentially, media portrayal research across the globe "is in its infancy" (Zhang et al., 2006, p. 278) and deserves further scholarly attention. Although particular images found in the Olivio campaign provide a diverse, healthy possibility for aging, the other research cited here suggests that negative stereotypes of older adulthood as inactive, unattractive, asexual/nonsexual, and unhealthy are alive and well. Earlier advertisements have more negative portrayals than more recent ones, but further research must be conducted to confirm or negate these findings. In fact, some of the aforementioned research, though the latest published, is already more than 10 years old, so final conclusions must await more current studies. Was the Olivio campaign unique and an aberration within particular cultural contexts (such as the United Kingdom or Germany), or is this truly a current, global trend? Other advertising research agendas could include examining multiple types of

advertisements (print and video) and comparing these across media types and within/between countries of origin. Portrayal research also should be expanded to include television and movies (e.g., Atkinson & Plew, 2017) and should focus on how shows are adapted across countries. We can assume those adaptations are influenced by cultural values, but it would be instructive to know if any of these cultural adaptations are age-related? If so, what messages about aging and older adulthood are being reinforced or contradicted?

Media portrayals of older adults have been studied extensively within the United States across a wide variety of genres. Similar research is just beginning in other countries. Williams et al. (2007) state, "We would like to think that people of all ages who view these [age-positive] ads are presented with the idea that older age has many varied possibilities above and beyond the rather tired and traditional stereotypes that we usually encounter" (p. 19). It is time to examine media portrayals of elders worldwide! Knowing what portrayals exist is the first step in advancing a diverse view of the possibilities of old age.

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GENDER, AGING, AND POWER IN RURAL BANGLADESH: GETTING OLDER AS THE PRIMING OF WOMEN

FAUZIA ERFAN AHMED

> I am running [for public office] because I see the injustice. And I saw that things could get even worse. We [women] have been repeatedly pushed and shoved [by society]; let us see what happens if we push back just once.
>
> —Alveerah, Muslim woman

Illiterate and with a low income, Alveerah is a middle-aged Muslim women in rural Bangladesh who is running for public office in local-level elections. Like many older women whom I interviewed during my ethnographic study of gender, power, and aging in a sharecropper village community, she is considered a leader in her community and exercises considerable power. In a gerontocratic culture, aging for women is also priming for power. It is a process of getting ready to accept the mantle of leadership, which means to be a role model and to act as a spokeswoman for other women in the community. Alveera looks forward to the future with determination, courage, and hope; opportunities, hitherto denied, are just beginning to open up for her.

In most Western societies, aging, especially for women, is seen as a general decline; and getting older is synonymous with the shrinking of opportunities. Older women are seen as less employable, less attractive, and less deserving of respect. This is even more true if they are less educated and have lower income. Further, women in Western cultures who are running for public office need to look as young as they possibly can.

Why are things different in Bangladesh? I explore the various dimensions of the answers to this question through an analysis of the nexus of gender, aging, and power in both the village (meso) and the national (macro) contexts.

AGING IN THE VILLAGE (MESO) LEVEL CONTEXT: TRADITIONAL PATHWAYS TO POWER

Rural society in Bangladesh is gerontocratic. What this means is that it is organized around a hierarchy based on age. Villages comprise *paras* (neighborhoods), and each *para* consists of several households (*baris*). A *bari* (household) constitutes several dwellings built around a courtyard. Though the extended family occupies a *bari*, the entire neighborhood is considered kin. When a bride first enters the *bari* as a daughter-in-law, she occupies the lowest rung of the ladder. Her mobility is restricted by *purdah* (a custom that defines relationships between men and women through segregated boundaries). Her conduct is regulated and proscribed by the *shalish*, an indigenous village court system, which consists of an all-male jury. Young and inexperienced in the ways of her *shoshur bari* (in-laws' household), she knows that she has to please everyone in the entire neighborhood, especially her mother–in-law. But she also knows that as she ages, she will climb the ladder to one day gain a position of authority, just like her mother-in-law.

Though *purdah* is oppressive to women in many ways, restricting access to education and jobs, opportunities for gaining authority exist even in this traditional system. When she sets foot in her in-laws' household, the young bride is primed for leadership through two pathways, both of which widen as she ages. First, she can look forward to greater geographic mobility. *Purdah* restrictions decrease with age. This resulting physical freedom is linked to increased kin ties, considered a tangible source of social capital in rural society. As a woman ages, her network expands to go beyond the neighborhood. Where they entered as outsiders, older women become insiders and have increased kin ties: they not only may arrange marriages of their own children, they also may arrange marriages of other young people in the village.

Second, in gerontocratic culture, increased equity in gender relations is an inevitable result of getting older. If, as the young daughter-in-law, Alveera kept quiet when addressed by male relatives, as a middle-aged woman, she now has a number of younger men, including her son(s) and nephews, who occupy a lower status. Aging also means that older women are addressed with an honorific, which specifically signifies the status that can only come with age. When she talks, these men have to listen respectfully, even if they do not agree with her. If she was compelled as the young bride to be subservient to her elders, as an elder now herself, she can expect subservience and *seva* (service) from those who are younger. In return, she is in the privileged position of conferring her blessings on the next generation.

Third, some older women like Alveerah are also midwives, and bringing children into the world is viewed as holy in village society. This status that emanates from her is also conferred on her husband. Such men often willingly take on household responsibilities, a switch in gender roles, because they know that their wives are compelled to leave the household at short notice without any definite indication of when they will return. Linked to the greater physical mobility allowed for midwives is the increase in kin ties. As they deliver babies, midwives create a permanent relationship with the infant and its parents. A younger woman who serves as an apprentice can look forward to the day when she gets older and also can "do work that gains Allah's blessings."

In addition to being a midwife, Alveerah also manages her own grocery store. She earns income through her entrepreneurial activities, has savings in the bank, and serves as the treasurer in the women's collective, where she has been a member for the past 10 years. She argues with the male relatives in her village about gender wage equity and the need for women to run for public office—something that no woman, of any age, would have been able to do in the past. This transformation has taken place because of structural changes in the national (macro) arena.

THE NATIONAL (MACRO) LEVEL CONTEXT: MODERN ROUTES TO POWER

In the four and a half decades since Bangladesh, a Muslim-majority nation of over 160 million people, gained independence, gender and development programs at the national level have contested the gender order. The fertility rate has decreased from 6.9 births per woman of childbearing age in 1970 to 2.1 (replacement rate) in 2016 (Bangladesh Bureau of Statistics, 2016). In 2015, the primary school completion rate for girls was 79%, higher than that of boys, which was 69% (World Bank, 2016), and maternal mortality has decreased from 574 per 100,000 births in 1990 to 178 in 2016. The percentage of girls enrolled in secondary school in 2016 was 73.1, higher than that of boys (63.8%) (Bangladesh Education Report, 2016). Approximately 34 million women utilize microcredit (Microcredit Regulatory Authority, 2015); it extends to about 60% of all poor households (Nahar, 2013), which, as a programmatic ideal, challenges the structure of patriarchal gender relations. Women's entrepreneurial activities have increased female mobility and their household income (Pitt, Cartwright, & Khandker, 2006). Women now can obtain microcredit loans with no collateral. With loans as small as $40, they increase their entrepreneurial skills and improve their household welfare. Defying oppressive notions of *purdah*, women now leave the *bari* for entrepreneurial activities, work in the fields alongside men, and run for public office. At least 3.6 million Bangladeshi women are employed in the garment industry, now the second largest in the world. Women's labor force participation increased from 4% in 1974 (Heintz, Kabeer, & Mahmud, 2018) to 33.1% in 2017.

These dramatic improvements underscore an even more dramatic reality: A tenacious and visionary women's movement is effectively forging alliances with all sectors of civil society in Bangladesh (Ahmed, 2006). Few know that older women like Alveerah constitute its popular leadership base. The success of the national family planning program is a result of the continuing discourse that older women led all over Bangladesh about Islamic principles and reproductive health. The reach of the movement is best understood by the effervescence of the *adda* (public discussions) led by such older village women; their vitality continues to change a male-dominated society on a daily basis. For these leaders of a widespread movement for social change, their *adda* goes beyond reproductive health to gender wage equality; more profoundly, village women now want to define Allah in their own terms.

How does Alveerah express her authority when she argues with male elders in her village? The shape and form of this new women's leadership combines oral traditions of village culture with modern perspectives. These women challenge patriarchal beliefs and make men understand (*boojhano*) through sheer eloquence and wit. In fact, *boojhano* was repeatedly mentioned by men as an important mechanism in how they reframed masculinity and became more aware of gender injustice. Villagers respect and see these qualities as evidence of forensic ability and leadership. Discussion (or *adda)* is not only a traditional way of resolving disputes; it is a forum for reflection. Villagers learn through a dialogue in a town meeting format that is rich in metaphor.

The level of analysis that these women leaders use, however, is entirely modern. It is a systematic analysis of village patriarchy, or the male-dominated system, that leads them to challenge patriarchal Islam by reframing religion. In particular, these older women reframe traditional notions of sin. They refer to the "patriarchal definition of Islam" as "a long list of don'ts." Such women use their gerontocratic authority to castigate a husband who refuses to allow his wife to have property in her own name as "having sin in his heart." In fact, men who commit such infractions, along with those who are violent, can be tried in a reformed *village court* that now includes women jurors, yet another innovation of the traditional system.

To summarize, modern transformations at the national level have built on traditional village mechanisms to give older women power, thereby priming poor women, at the lowest rung of society, for leadership. Getting older still has its problems: After years of hard labor, Alveerah complains of back problems, and the fees of the nearest doctor who lives in the city are too high for her. Notwithstanding, fundamental improvements at the national level, combined with the traditional respect for age, have given poor women opportunities for leadership that they could not even have imagined 40 years ago. It is not surprising that, happy and proud to be considered old, Alveerah feels she is in the prime of her life.

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