

This Isn't Working:

Ageing in a Neoliberal Western Colonial Society.



Where I am & what position

(Location and Positionality)

I am a white (European/Western) cis het male raised with abundant privilege and power within Canada's settler-colonial society. I have great respect for all elders in Canada, regardless of heritage or skin colour. This was instilled by my parents and cemented by interactions with my grandparents. Despite that nontypical regard, it took many years to reach a place where I could recognize and challenge my ingrained colonial fabricated "reality." Within Canada's divisive society, lives

are violently and forcefully influenced, oppressed, and organized based on multiple variables: social class, race, ethnicity, and gender. Penultimately, the almost final act of Canada's internal colonialism is to shun, dislocate, and dispose of our elders. Diminishing their extraordinary accumulation of experiential knowledge and abruptly devaluing their remaining social status.

Why it isn't working

(Concepts and Theories)

Ageing and ageism are constructed on Colonial Euro-American ideals. These doctrines operate in a deficit when compared and contrasted with other cultures that emphasize the value of elders, experience, and eldership. Much like Khungay (2022) offers, ageing is a lifelong process that has morphed beyond the medical model and biological realities; therefore, "aged" is a socially constructed term better understood as a social process. Ageing in a neoliberal western colonial society does not work for anyone, as ageism is the one discrimination that no one can escape. Stereotypes of geriatric citizens inundate my mind as Ageism is the most accepted and tolerated form of discrimination in Canada. Age is a punchline, a running comedic routine, and a joke we routinely aim at ourselves and others. We view elderly citizens as either adorable or disgusting, and we treat them like children, except they have a lifetime of learning and knowledge packed into their brains. It is that insidiousness and persuasiveness that makes it so entangled and damaging.

Rozario & Derienzis (2009) proffer that a "...disjunction might lie in our ambivalence and internalized ageist attitudes towards the category of 'old'". We are conditioned to feel insecure and anxious about getting older as we are inundated with guilt, shame, and fear-based marketing that urges us to "rage against the dying of the light" (Thomas, 1947) by ingesting, rubbing, practicing anything that will keep us young. In line with other Settler Colonialism prejudices, pre-acquired privilege is the only way to mitigate ageism slightly. If you are white and/or wealthy and/or privileged somehow, you stand a chance of lessening the impact of ageing and ageism. A potential response to the rapidly ageing population is the concept of active ageing. Presented by the WHO (2002) to allow people, throughout their life course, to realize physical, social, and mental well-being as they participate in society while also providing protection, security, and care when they need it..



How I know it isn't working

(Experiential Knowledge)

The reality of my life is that I have lost most of my elders. With the exception of one grandparent, who died when I was six years old, all my grandparents and my dad passed in the span of four years in my early 20s, and my mom last year, although she was stolen by Alzheimer's before her passing. The mentors and elders I sought out and gained by working as a First Responder were dislocated from me by a PTSD injury and the subsequent fallout. However, it wasn't the loss of my elders that affected my knowledge of why our old age system is not working. It was years spent in the back of an ambulance attending many response calls to residences, senior homes, retirement centres, assisted and extended care facilities that formed direct experiential knowledge.

The realities of the neglect I observed were astounding and disgusting. Older adults who were roughly handled (Seniors are not as robust and must be moved as such) laying in bed with untreated broken bones and with non-banded cuts and scrapes; Bottles upon bottles of

prescription drugs that left them zombified; Geriatrics with giant pressure sores (bedsores: google it) from spending days on the floor unable to get back up; The "frequent flyers," essentially just waiting for their "time to be up," who would call an ambulance because they were living alone, isolated, and suffering from Metabolic Syndrome(s) and had no other way to get into the hospital or see their doctor.

The COVID-19 pandemic brought the shortcomings of our elder social services system into horrifying focus. These facilities were among the hardest hit by the COVID-19 pandemic in Canada. Statistics Canada (2002) informs us that during the first wave of the pandemic (March through August 2020), nursing and seniors' homes residents accounted for more than 80% of all reported COVID-19 deaths Superscript. It has also been during the pandemic that my mom's descent into Alzheimer's accelerated, and the previously available services evaporated. Every place, person, and organization we contacted was "closed for business," leaving her partner and myself scrambling to support her.

The Alternative to what isn't working

(Indigenous/Non-Western Views)

My experiences and recent education have left me believing that the Western Culture I was born and raised in is dying, which may not be a bad thing. We have displaced actual values and beliefs with stuff and things. Much like any Colonial social service system, there is an industry associated with ageing. Housing, medical, fitness, Ageing-Well Canada, the reality is that Canada isn't meeting the current needs of their ageing population and thus is ill-prepared to meet it as the population grows. As Rozario and Derienzis reaffirm, Eurocentric perspectives perceive ageing as a negative process, marked by a decline in physical and mental ability and loss of importance and contribution to society. This dichotic display of inability and forethought leads me to search for other paradigms. In opposition to Western (Dominant) Worldview's failings, I have begun to discover alternatives; Enter Indigenous Worldview and perspectives. In opposition to Western culture,

First Nation's perspectives on ageing are very positive and are vastly different. Indigenous communities are structured on kinship ties and collectivity; as such, elders are perceived to be the wisest and knowledgeable members of the community and thus are highly valued and respected. As Anderson (2011) tenders, Old age was eminently a very productive stage of life. Indigenous elders have much to contribute in that they are the teachers of history, tradition, language, and philosophy. Because understandings and education surrounding Indigenous elders are present in First Nations communities, old ones are entrusted and placed in distinguished positions of governance and leadership, keepers of traditions and performing ceremonies, as well as life, culture, and spiritual teachers. This results in keeping elders actively engaged in their society throughout their life cycle.



What 'making it work' means to practice

(SW practice)

With the intention to arrive and engage at the ultimate intersection of ageing and ageism, the implications on my Social Work (SW) practice will be many. As elders are undervalued and stereotyped in the Dominant (Western) culture, my critical self-reflection becomes paramount in continually challenging my language, terminology, and commutation. Azulai deftly opines that "Social workers and other helping professionals behave as humans do; they are not free from prejudicial beliefs. Moreover, these beliefs could potentially seep into the way social workers treat older clients, as well as how they approach gerontological practice and the extent to which they value their clinical practice with older adults." (Azulai, 2014). Stereotypes can also be pitfalls because they can fall into both positive or negative variants, as such, a balance of not under or over estimating must be struck. Having spent many years in an industry that adores and utilizes "Black/dark" offside humour as a tool and a weapon, I must lead from the ground level in helping change the narrative. No matter how self-aware and hilarious I may be or think I am.

As Azulai (2014) confirms, Encouraging self-awareness will temper personal biases and improve ethical conduct. A strength I bring to practice with elders is a healthy respect for their lived experiences and generated narratives. Regardless of their age or society, the want for autonomy and self-determination must be respected and balanced with their needs for understanding, support, and connection. As with any person seeking the assistance of a Social Worker, elderly clients will arrive with their own set of intersections because the reality is that many of Canada's cultural mosaic citizens come from different social locations and contain different concepts, theories, and actualities regarding age and ageing. This is where other learning regarding an Anti-Oppressive practice must be tendered as not implicate me as an oppressor, or perpetuate the history of oppression in Social Work. Canada lies directly on a precipice, and which way it falls will be determined by my actions and those of my social work contemporaries.



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