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Permanent personhood or meaningful decline? Toward a critical anthropology of successful aging



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ABSTRACT

The current North American successful aging movement offers a particular normative model of how to age well, one tied to specific notions of individualist personhood especially valued in North America emphasizing independence, productivity, self-maintenance, and the individual self as project. This successful aging paradigm, with its various incarnations as active, healthy and productive aging, has received little scrutiny as to its cultural assumptions. Drawing on fieldwork data with elders from both India and the United States, this article offers an analysis of cultural assumptions underlying the North American successful aging paradigm as represented in prevailing popular and scientific discourse on how to age well. Four key themes in this public successful aging discourse are examined: individual agency and control; maintaining productive activity; the value of independence and importance of avoiding dependence; and permanent personhood, a vision of the ideal person as not really aging at all in late life, but rather maintaining the self of one's earlier years. Although the majority of the (Boston-area, well-educated, financially privileged) US elders making up this study, and some of the most cosmopolitan Indians, embrace and are inspired by the ideals of the successful aging movement, others critique the prevailing successful aging model for insufficiently incorporating attention to and acceptance of the human realities of mortality and decline. Ultimately, the article argues that the vision offered by the dominant successful aging paradigm is not only a particular cultural and biopolitical model but, despite its inspirational elements, in some ways a counterproductive one. Successful aging discourse might do well to come to better terms with conditions of human transience and decline, so that not all situations of dependence, debility and even mortality in late life will be viewed and experienced as "failures" in living well.

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Introduction

With the surge of an aging population, we have witnessed a flourishing of scientific research and public discourse on how to age well. According to the dominant biomedical, psychological, public health and popular cultural narrative prevailing in North America, we each have the potential—and, indeed, the moral and political obligation—to make our own aging "successful," staving off the potential disabilities and burdens of late life. As interrogating the North American

model of "successful aging" from the perspective of anthropology is a project I came to after years of studying aging in India, let me begin briefly in India.

During fieldwork in the West Bengal region of northeast India, I have been struck by how prevalent and expected is talk of readiness for death among older persons. This talk of death is not limited by any means to those who are in various states of frailty but is entirely normal even among those enjoying robust physical and mental health. One sharp-witted and energetic woman in her seventies, stylishly dressed and with salt-and-pepper hair, arose from an evening social gathering, leaving sooner than the others so that her driver, who lives far away, would not have to stay out too late. I voiced my farewell, "I hope I'll see you next year when I come back." She replied, smiling,

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“Who knows if I’ll still be here then or not? I may die before then,” and gave a cheerful good-bye wave.

Others frequently made similar casual comments, such as: “I say to God, ‘Whenever you are ready, take me.’” “I am not afraid of death, because it is inevitable. Because I am born, I know I have to die. No one born can escape death.” “We have to accept decay. I have accepted.” “When you next come back, I will probably be dead. I’m already more than seventy years! How much longer will I live, you tell me?”

When I relate such examples in a US context, many are surprised and perplexed. Are these people sick? No, I have to remind them, not at all. Talk of readiness for death and acceptance of decline, in fact, seems to be expected cultural discourse among older Indians, and highlights a widely held Hindu view of the transience of the human condition—the temporariness of any individual’s stay within any one human body amidst the natural cycle of births and deaths of worldly existence or *samsara*.

I have also been struck during fieldwork in India by the absence of a dedication to independence and to physical and mental exercise among many older Indians, in contrast to what I have found in my parallel research with older Boston-area Americans, who are frequently eminently concerned with the ideals of active, productive, independent aging. Boudi, a long-time Bengali Indian friend and informant,¹ a spirited, warm woman in her late sixties, has now settled into widowhood and mother-in-law-hood, in the intimate south-Kolkata flat she shares with her two sons, two daughters-in-law and two grandsons. She praised her descendants for all the loving care they extend to her. Asked what she does with her time now, she commended the fact that her juniors have taken over all the household chores, with the help of a few part-time servants. “Do you ever like to go out to walk?” I asked, thinking of my own favorite past-time in Kolkata during the winter months when the mornings and evenings are cool and the streets bustling with diverting vendors. “No, I don’t care to,” she said with a complacent smile. “I mostly just sit here all day long,” she gestured to the front sitting room of their compact, two-bedroom flat. Her vision of aging well emphasized less the maintenance of productive activity and independence, and more the residing intimately with and receiving respectful loving care from kin.

I open with these two anecdotes from research in India to begin to throw into relief assumptions and values built into North American models of successful aging. A burgeoning discourse on the topic of “successful aging”—sometimes alternatively labeled “active aging,” “healthy aging” or “productive aging”—has emerged over the past few decades in North America, arising out of the fields of medicine, gerontology, psychology and public health, and prevalent as well in popular discourse and self-help books. As I examine further below, this public cultural discourse highlights specific individualist notions of personhood especially valued in North America emphasizing independence; activity/productivity; the avoidance or denial of decline and mortality; and the individual self as project. From my perspective as a cultural anthropologist, I have been struck by the dearth of

critical scrutiny of culture and ideology in the successful aging discourse,² that is, by the dearth of recognition that particular cultural values, aspirations, assumptions, and visions of personhood must play a significant role in any person’s, group’s or scientist’s understanding of what it means to age well. It is perhaps partly because the successful aging discourse of “healthy” aging originated to a degree out of biomedicine—a field particularly prone to be viewed as culture free—that scholars and the public alike often seem not to sufficiently recognize culture and ideology in their successful aging models.

It perhaps should go without saying that conceptualizations of successful aging are naturally culturally determined; yet North American models of successful aging are so based on certain foundational cultural principles and visions of personhood—for instance, that decline in old age is bad, and that independence is ideal—that it has at times been difficult to recognize successful aging models as particular cultural visions. Perspectives on aging from outside North America such as from India can help to illuminate the cultural and ideological elements of successful aging models (cf. Hilton, Gonzalez, Saleh, Maitoza, & Anngela-Cole, 2012; Lewis, 2011; Torres, 2006). Contemplative US elders also offer both praise and critiques of their society’s successful aging paradigm which are useful to consider.

In these ways—drawing on the voices of elders from both India and the United States, as well as a critical scrutiny of some prominent conceptualizations of successful aging gerontological and public discourse—this anthropological investigation is in keeping with critical gerontology, “casting a critical eye on society and on gerontology itself” (Ray, 2008, p. 97). By engaging in such critical cultural scrutiny—unsettling familiar ways of thinking by revealing their often unrecognized underlying values and assumptions (Holstein & Minkler, 2003), the aim is to lead toward potentially new and better understandings, social arrangements and policies.

The image of healthy, successful aging seems to appear quite appealing to many North Americans (of all ages), and to many around the globe picking up the discourse, especially to those who envision themselves having the physical, financial and mental means to pursue lifelong health and activity. Yet, this article asks, does the currently prevailing successful aging model overemphasize independence, prolonging life, and declining to decline at the expense of coming to meaningful terms with late-life changes, situations of (inter)dependence, possibilities of frailty, and the condition of human transience?—setting up for “failure,” embarrassment, or loss of social personhood those who face inevitable bodily or cognitive impairments and impending mortality? (cf. Gilleard & Higgs, 2010; Holstein & Minkler, 2003; Minkler & Fadem, 2002; Rozanova, 2010; Taylor, 2008). The article suggests that the dominant successful aging paradigm is not only a particular cultural and biopolitical model but, despite its inspirational elements, in some ways a counterproductive one. Successful aging discourse might do well to come to better terms with

¹ In keeping with standard anthropological practice, I refer to my research subjects as “informants” or “interlocutors.” Pseudonyms are used in all cases to protect privacy.

² However, notable exceptions exist from the perspectives of critical gerontology and cross-cultural analysis, including Hilton et al., 2012; Holstein & Minkler, 2003; Hung, Kempen, & de Vries, 2010; Katz, 2000; Lewis, 2011; Rozanova, 2010; Torres, 2002, 2003, 2006. Cosco, Prina, et al. (2013, p. 8) note the “strong Anglophone bias” in the vast published literature on successful aging, and Moody (2009) and Liang and Luo (2012) both label the literature uncritically ethnocentric.

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