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Introductory notes on Australian social gerontology : edited transcript of a guest lecture for the unit "Human development", delivered at Claremont Campus on Tuesday, 29 May 1990

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*Centre for the
Development of
Human Resources*

INTRODUCTORY NOTES ON
AUSTRALIAN SOCIAL
GERONTOLOGY :

EDITED TRANSCRIPT OF A GUEST LECTURE
FOR THE UNIT 'HUMAN DEVELOPMENT',
DELIVERED AT CLAREMONT CAMPUS
ON TUESDAY, 29 MAY 1990

BY

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ABSTRACT

In a 'greying' Australia demographic realities should be articulated clearly so as to meet the challenges of the future. The aged population will 'peak' in 2021 A.D., and there is an increasing social awareness of this population trend. While the causes of longevity remain to be established, the improvement of individual life expectancy means that many seniors will spend decades in 'retirement'. Women, those of non-English speaking backgrounds, and aboriginals are sections of the aged population having special problems. Comparative social policy, however, suggests that the future funding of aged care is not problematical, though national commitment is required.

These demographic changes are likely to suggest a range of investigations for 'theoretical' gerontology, along with improving career opportunities for the range of aged care professionals. As a discipline, gerontology has shifted over time from mostly medical orientations to include more of a societal approach. Gerontology, concerned with the ageing of individuals and populations within their historical, cultural and societal contexts, exhibits a pluralist diversity with regard to its disciplinary origins and paradigmatic orientations. Applied gerontological research, particularly at the local level, often concentrates on seniors' perceptions and upon aged services. While the social custom of retirement remains as the main definitional determinant of 'old age', ongoing social change renders prediction about this institution difficult. While the typical Australian can now expect to enjoy a 'third age' of active retirement, contending social forces seem to be pushing for both 'early' and 'postponed' retirement. Hence maximum feasible personal choice should exist with regard to the timing and extent of retirement, with options such as partial and phased retirement being given greater social acceptance. The greying Australian population is gaining attention at all levels of government, which should enhance future social planning and program provisions, so with the vigorous development of gerontology and the diminution of ageist prejudice within the general society, seniors of the future should enjoy greater opportunities for a 'successful' ageing process in terms of biographical adjustment and continuing intergenerational contribution to the community.



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1.0 INTRODUCTION: REALITIES AND THEORIES IN AGEING

Now this lecture is going to be an 'abc' of social gerontology. The structure of today's talk is under these four headings. First, there is the 'demography' of ageing, so here we are talking about populations and the characteristics of the those populations. Then, second, I want to talk about the discipline of 'gerontology', to introduce you to this area of knowledge and theory, and knowledge for practice, too. Then, third, I want to identify the social prejudice of 'ageism', that is, the social stereotypes commonly attributed to old age. Fourth, I want to talk about what is called in the literature the 'social production' of old age or the 'social construction' of old age. I am passing around this 'glossy' newspaper enlargement dated Monday 14 May, which has the Premier Carmen Lawrence talking about how age discrimination is to be outlawed in relation to compulsory retirement, which shows that these 'ageing' issues are quite topical at the moment (Quekett, 1990).

2.0 THE DEMOGRAPHY OF AGEING

Now I want to talk about the demography of ageing. The media image with which you will be most familiar is that of the unusually long-lived older person. Let us take a recent example of that genre, from that eminent (!) source, the Sunday Times (1989). There is a story of a chap who has survived to 110 years, and has been smoking since the Boer War! In the photograph accompanying the story he is lifting his glass of beer in joyous celebration of his longevity. This is characteristic of this sort of media story. Usually these stories have something to say about why these folk have lived so long. Generally the themes of the stories divide into two categories: some seniors say that they have lived 'pure' or 'spartan' lives, and therefore have lived to this great old age, but others say that they have engaged in all sorts of pleasures and vices, and because of their enjoyment of life have similarly lived to a good age. So there is no real answer to that question of survival in these popular stories. However, in 'medical' gerontology there is of course, a whole literature on the causes of longevity. Interestingly this professional concern has now become more popular. This time last week, for instance, I was visiting the Lincoln Gerontology Centre in Melbourne, and on the way back through Tullamarine Airport, I accidentally discovered a new popular magazine called Longevity, and this one is not so much for seniors but more for the people my sort of age attempting to avoid old age, and it has all sorts of tips about the diet to have, the exercise to do, and so forth. Now what these media images of ageing and the invention of popular magazines illustrate is the growing social awareness that we live in an ageing society. Often media headings in newspapers concerned with this speak of a 'greying society' and so forth.

In fact it is the Japanese that are leading in the 'longevity stakes', with female life expectancy at birth now at 82 years while for males it is 75 years. Now the figures have a habit of gradually creeping up, as populations - particularly in the advanced western world - continue this process of 'greying' or becoming older. There are also some suggestions about why this is so. The Japanese diet tends to be a fish diet, low fat, and so on. The 'medical' gerontologists are now looking at some of the changes in those diets as Japan becomes more 'westernised' and adopts increasingly unhealthy western dietary patterns.

So what are our survival changes at birth at present in Australia? Well males at birth can expect to live to approximately 73 years, while female babies can expect 79 years. The obvious implication of this demographic fact is that ageing issues tend to be 'women's issues' because of this greater tendency towards longevity amongst women. Of course, there are further implications for social theory, and for the social policy and social programs that are designed to meet the needs of the aged. It is also useful to examine this situation across Australian history of the present century. From the Foster Report (1988) we can see the 'greying' of the Australian population over time. If we go back to 1901 - the turn of the present century - some 4 per cent of the population fell within the category of those aged 65 years and over. In 1933 - the time of the great Depression - the figure had risen to 6.5 per cent. By 1987 the aged population had risen to just under 11 per cent. Now looking to the future, demographers have lots of fun doing what they call population 'projections' or predictions, and they say that in the year 2021 AD the aged population is likely to fall somewhere within the range of 13 per cent to about 18 per cent.

Now the important thing about all this is that when you see newspaper and television stories on the aged they often portray the growth of the ageing population as a social 'problem', as a terrible cost 'burden' on the rest of us - the workers and taxpayers. The stories imply the question:

How are we going to support this enormous number of feeble old people, with their constant demand for medical services and all sorts of social services?

Now it is true that the increase in the absolute numbers of aged persons, particularly those in the category of the very oldest folk more prone to frailty and disability, will generate some increase in demand for community, medical, and residential services. However, in the Foster Report (1988) we see that there is no real cause for alarm. Chris Foster - a sober-minded, grey-suited bureaucrat - wrote this report on retirement incomes for the Social Security Review. This is part of the wider 'Cass Review' which is looking at all the provisions for various social welfare 'target' groups. What Foster draws our attention to is the demographic fact that in terms of actual population numbers we in Australia do not have a 'problem'. Foster (1988:53) reports that:

Sweden already had a higher proportion of older people in its population in 1980 that we are likely to have, even in 2020.

It may also occur to you that the advanced Western European countries such as the OECD members, tend to be rather more generous in their welfare and social provisions than contemporary Australia. They tend to be more advanced in the social welfare area. They already have these high proportions of the aged category within their populations, in countries such as the Netherlands, West Germany, Austria, Sweden, and they are coping with that demographic situation, the situation that we in Australia will only reach in thirty years time, depending upon the accuracy of those projections. So what we learn is that although we do have a growing aged population it is not an actual problem in terms of social resources. Some people on some sides of politics may say that it is a problem, but it isn't in real terms a problem to provide for seniors. It is more to do with the choices that we make as a society.

Part of that false alarm, though, has been concern about what is called the 'dependency ratio'. This dependency ratio is the proportion of the general population defined as 'dependent' - such as the young and the old, compared to the working and taxpaying section of the population which supports them. As an aside, it is interesting to note that 2021 AD is considered to be the year when this ageing process will reach its peak. Most of the demographers say that in 2021 this is the point where the 'baby boomers' hit the sixty-five mark, the bulge of aged people will occur then, and thereafter the proportion of the aged in the population should begin to decline.

Presumably a lot of geriatricians and age-related industries will go out of business then. Conversely, for the next thirty years the 'ageing' area and the provision of services for the aged and so forth will be a growth area in terms of job prospects. Now going back to the matter of 'dependency ratios', you can see that though the aged population is growing in absolute terms, the dependency ratio will also be affected by other variables such as future migration and fertility patterns, along with possible changes in the usual age of retirement. So if the 'dependency ratio' - the ratio of taxpayers to dependent populations - becomes less favourable, all the blame cannot be attributed to the senior section of society. Now one final point is that while media reports often suggest that we cannot as a nation afford to pay for this growing aged population, according to the sober-minded bureaucrats and demographers this is simply not the case.

Well, what is the case? What has changed over this century in Australia in particular, and in the advanced western world in general is that any one of us as an individual has a much greater chance of surviving to old age than one would have had one hundred years ago. For instance, Foster (1988:69) provides us with figures on past and present survival rates and on the related matter of the duration of Age Pension receipt.

TABLE 1: CHANCE OF SURVIVAL TO PENSIONABLE AGES

YEAR	CHANGE OF SURVIVAL	
	[Male]	[Female]
1910	50%	63%
198	75%	91%

The Age Pension system in Australia was invented in 1909. The table shows that while in the historical past one had an 'even money' change of reaching old age, nowadays one has a better chance than not of achieving old age.

Now what that does mean is that folk nowadays tend to be in receipt of the pension for longer periods of time.

TABLE 2: EXPECTED PERIOD OF PENSION RECEIPT

YEAR	PERIOD OF RECEIPT (YEARS)	
	[Male]	[Female]
1910	11	16
1988	14	22

It is important to note that for the present batch of seniors, they tend to be dependent on the Age Pension system. The table shows increases in the period of pension receipt, particularly in the case of women. And that 22 years of expected pension receipt for women was one of the major concerns of the Foster Report. You will already be aware that women tend to have less in the way of additional income sources to the pension, for the present cohort of women have had interrupted or non-existent work histories and were less likely to have had superannuation. Then they are forced to retire earlier at 60 years, but then live longer, so they are in receipt of the pension benefit for a longer period of time. The Foster Report was all about trying to plan a rational, predictable, and adequate retirement incomes systems into the twenty-first century.

Just to embellish this point a little further, Foster (1988:18) tells us that:

The life expectancy of a 65 year old man is currently around 14.6 years and for a woman of the same age it is 19.0 years.

What we see here is that for individuals the chance of longevity has improved, and that for each individual it is likely that a significant part of the life cycle will be spent in this situation of retirement. Now to take 'early' retirement, for instance, some occupations force folk to retire as early as 55 years. Some folk then could be spending thirty years - one third of their lives - in retirement. That raises all sorts of issues, which I want to look at a little later.

Now the other important aspect of these demographic trends is that most seniors are women. Women constitute the overwhelming majority of the elderly population. Graycar and Jamrozik (1989:254) portray the situation as follows:

Women are the overwhelming majority of our elderly population. At age 65, for every 100 men there are 108 women, at age 75, for every 100 men there are 137 women, and at age 85 and over there are 268 women for every 100 men.

Now what those figures suggest, of course, is that ageing is very much a 'women's issue'. For instance, there is now an entire journal entitled Aging and Women devoted to this matter. Among the present batch, or cohort, of women, they tend not to have driver's licenses. Take a city like Perth, which is a very car-based society, and these women tended to be in the batch where the man drove the woman around, and then they end up widowed in a society very much based on car ownership, and then of course, issues of social isolation begin to rise.

Another important characteristic of the ageing population is to do with its ethnicity. If we examine these trends we see a growth in that part of the ageing population labelled as 'non-English speaking' migrants.

TABLE 3: AGEING AND ETHNICITY

YEAR	CATEGORY		
	AUSTRALIAN BORN	ENGLISH SPEAKING	MIGRANT NON-ENGLISH SPEAKING
1986	73%	14%	13%
2001	64%	14%	22%

These figures from the Australian Bureau of Statistics (ABS) provide a projection ahead to the year 2001. Two trends are interesting. First, there is a decline predicted in the Australian born senior population, falling from around three quarters to about two thirds of the aged.

Second, there is likely to be almost a doubling of the non-English speaking aged migrant population. Already in response to these demographic changes there are service responses such as ethno-specific nursing homes. You know, if you come from Vietnam you might not find the nursing home version of 'meat and two vegetables' very attractive, or very appropriate to your past dietary patterns. There is also the issue of communication to consider with the non-English speaking migrant population. To negotiate social welfare systems in Australia one needs to be literate and assertive. It can be difficult even for those whose native language is English. Older migrants in the non-English speaking category, though, have often not had the opportunity or inclination to learn English. Then there is also a tendency of the aged to revert back to their first language, losing any language acquired later in life, so that there can be linguistic barriers to communication for these seniors. So it appears that the whole issue of 'ethnicity and ageing' will be a growth area in the coming decades, and those who have a second language - one of the relevant community language - are likely to have good future job prospects in working with the aged.

The other section of the aged population of interest is the aboriginal population. The Australian aboriginal is almost another gerontological issue. For a start, the survival of aboriginals is some twenty years less than that of the mainstream population. What happens in that population is that the ageing processes tend to be occurring at a much earlier time. Again, of course, there are problems with communication and access to the mainstream welfare organisations and institutions. Again, they are very much a minority because you are looking at about one per cent of the general population. Therefore, aboriginal ageing has not really had a lot of attention in the gerontological literature yet. There have been only a couple of reports. At the WA Council on the Ageing, Maisie Stokes wrote a report called We, The Forgotten Elders, and that was interesting because when she began I got this call in my office: "What's around on aboriginal ageing?" So I scratched my head and I found about one article in the literature, and that was about it! Since then Roberta Sykes (1988) in Sydney has produced a report, and there have been a couple of other items, but there is very little literature yet. Again, there are issues of the definition of 'ageing'. If aboriginal survival is so poor, then when does one define an aboriginal as 'aged'?

3.0 THE DISCIPLINE OF GERONTOLOGY

Going back a decade into the intellectual history of gerontology, I would like to draw attention to Bruce Ford's book called The Elderly Australian, which emerged in the 1979 Christmas book sales. This was one of the first books published in Australia on ageing. On that theme, the emergence of an Australian literature on the ageing has really only come about during the eighties. Even in terms of international journals, if you examine the volume numbers of those journals you will see that many of those journals have only been invented in the past two or three years. What that shows us is that the whole area of gerontology - and particularly 'social gerontology' - is a fairly new growth area. This is the emerging definition of 'social gerontology' in contrast to the earlier more medical area of 'clinical gerontology'. We see the latter emphasis in Ford's definition of gerontology as:

the science of the medical, physical, psychological, and physiological states and changes associated with old age (Ford, 1979:163).

While we are considering 'gerontology' it is important that ageing should not be equated with 'sickness'. Similarly, there is a difference between 'gerontology' which is the study of the normal ageing process, and 'geriatrics' which is the study of the diseases often associated with old age.

To call someone a 'geriatric' is not only nasty, but it is also inappropriate. So geriatrics is the study of 'diseases', while gerontology is the study of the 'ageing process'.

Now going back to Ford's definition, what we see is a fair emphasis upon the 'medical' or 'clinical' aspect of gerontology. Gerontology as a medical or scientific exercise does have a longer tradition. Arguably, what has happened over the decade of the eighties is that the definition of gerontology has very much widened. Nowadays when we talk about 'gerontology' this is more the sort of thing we mean:

Gerontology is the study of ageing individuals and populations with regard to their historical, cultural, and societal contexts.

Now to draw attention to some of these points, gerontology looks at ageing both as an individual process and in terms of one's population group. Ageing varies according to one's population group, for instance, in the Third World or aboriginal Australia survival chances are poor, while Japanese seniors live longer than our seniors. Ageing has changed through history, of course, with survival improving. The ageing experience varies according to its cultural context too. Some cultures value the aged more than others - the Eskimos used to abandon their seniors in the snow. Now as to societal context, ageing will vary according to each society. To take retirement as an example, the Japanese tend to have ways of retiring their seniors that are different from ours. In our society you are working 37½ hours one week and the next week you're stopped. In Japan they tend to redeploy their older workers so that they are working in different, less stressful jobs, and tend to 'phase out' their older workers. Now, though, they are beginning to experience labour shortages, so it will be interesting to see how this will affect retirement patterns and social norms about ageing. So the ageing experience is by no means eternal or universal, and is shaped by these historical, cultural, and societal variables.

Now with what does this discipline of gerontology concern itself? In the main, in the way that the term 'gerontology' is being used in the late eighties and as we approach the nineties, it is being used in the sense of 'social gerontology' that is to say, looking at the ageing process, but looking at it within a societal or social context. An example of that approach and philosophy would be the journal on your reading list entitled Ageing and Society. This is the most 'high-powered' gerontological journal that exists, and you see in that title 'Ageing and Society' that it is looking at the ageing process but within its social or societal context. Now according to Bytheway (1988), there are three main concerns of social gerontology. First, there is the individual ageing process. Second, gerontologists examine changes in national demography, looking at the national populations. Third, and arising out of the previous point, there is the study of the institutions and services created to meet seniors' needs. So a three-pronged approach is identified within social gerontology, concerned with the ageing process, national patterns, and policy and service responses for seniors. And, of course, the term 'seniors' is problematical.

There is a whole debate about: 'How do you use non-stigmatising terms?' Presently the term 'aged' is seen by some as being a stigmatised term. In fact some months ago the State Bureau for the Aged was thinking of changing its name, because of this sense of stigma thought to be attached to the name. The problem, I guess, is that if you have a group which does carry some social stereotype and stigma, then the stigma simply attaches to the new name, whatever it is. However, within the past three or four years in Perth, the push has been to use this term 'seniors', as a 'non-stigmatising' descriptive term for older citizens.

In gerontology, then, how do theorists and teachers explain the ageing process? There is, of course, a range of theories about ageing, because after all, the gerontologists have to keep themselves in a living. If we go back historically, and given the past medical domination of gerontology, the dominant model in the past was the 'biological decline' model of ageing. What folk within this school of thought tended to say was that the human body either 'wore out' over time or else the 'clock ran out'. There are two schools, 'time' theories or 'clock' theories - the body knows when to die, and 'obsolescence' theories - you 'wear out' like you wear out your car. So that is the 'biological decline' school of ageing theorists.

Now in contrast to the previous way of perceiving the ageing process, in an historic article Bennett and Ahammer (1977) expressed a completely different approach to ageing. This could be described as 'social deficit' theory. While the 'biological decline' model of ageing concentrates on the possible frailty, diseases, and disabilities of aged persons, 'social deficit' theory looks at the way society fails to compensate for whatever are the admitted frailties, disabilities, and diseases often associated with old age. So to take an example, Mrs 'Brown' can't get out to do her shopping because of her chronic arthritis. You could look at that example in terms of these two theories. In terms of 'biological decline' theory you'd say:

Oh, poor old Mrs Brown! Well you know arthritis is inevitable, and you can't help getting older. (She'll just have to put up with it!)

'Social deficit' theory, in contrast, might say:

Hey, what's wrong with the transport system, that we don't have a taxi that will come around and take Mrs Brown to the shop? Maybe it needs to be one with a special lift or hoist, wide-access doors, or something like that.

So 'social deficit' theory will look at the deficits within society that prevent the needs of seniors from being met. Now the thing you will see about these theories is that they are mirror-opposites of each other, and so the gerontologists can have lots of merry fights about theory, and the way that the problems of seniors should be solved.

Now the Americans are rather ahead of us in Australia in the area of gerontology, and there seems to be a terrific amount of money around in America, and there is an enormous list of gerontological institutes in America, and a lot of the emphasis in some of these institutes is to do with prolonging the human life span.

We now seem to be catching up with this trend in Australia. Now back in the sixties - if we now think about gerontological paradigms and models - the theory that held most sway in most of these American institutes and schools and courses in gerontology was 'disengagement' theory.

Now 'disengagement' theory says - more or less - that life is terribly stressful, you know, you have to work, and conduct relationships, and be involved in the community, and so forth. As you age, the theory suggests, one cannot keep up this pace, so the most harmonious way to age - both for the individual and for the society - is to 'disengage'. The notion is that one retires from paid work, withdraws from social activity and community involvement, and then sits in the rocking chair and waits for death to strike. Now that was a dominant theory back in the sixties.

Of course, fairly soon another school of gerontological theory emerged. This notion of 'disengagement' theory was then countered with 'activity' theory, which takes an opposite line of approach. The 'activity' theorists argue that the happiest and best way to age is to keep going at full speed on the full range of normal human activities until one drops dead from sheer exhaustion! Now an example of 'disengagement' theory would be back ten years ago when it was easier for seniors to get into nursing homes and hostels. Now in those days some seniors would say: 'Oh well, the end is coming. I'd better get into a nursing home'. So that would be an example of the 'disengagement' theory at work in society. The opposite approach - the 'activity' theory - is seen at work in the programs for seniors run by the Department of Sport and Recreation. They have all these demonstration projects, where they get seniors to go up in gliders, they have triathlons for seniors, they have these walks on Rottneest Island and along the coast, and swimming for seniors. They run all these physical activities, with a view to stopping the arthritis seizing up the joints and so forth, but there are also activities run with a view to improving the 'socialisation' opportunities for seniors. So in one of the local bureaucracies, the Department of Sport and Recreation, here is an example of the 'activity' theory at work.

There are of course, lots of other gerontological theories, because - of course - the gerontologists have to make a living. However, these are the dominant theories, and you can see that whether one sees the ageing process as 'terrible decline', or 'disengagement' from society or a season of 'vital activity' - the way one perceives the ageing process and the way society perceives the ageing process will shape the ageing experience itself, along with the way that programs and services are provided for seniors. For example, should seniors be 'plopped' in nursing homes, or should they be kept active and involved in the general community, and so able to participate in the life of the wider society?

The article by McCallum (1982) is also an historic article, as well as being an important introduction to gerontological theory. This was the very first volume and issue of the Australian Journal on Ageing, and in this article McCallum looks at the existing theories of ageing, and he places them within an interesting theoretical framework. This article is a very good summary of gerontological theory.

Now this type of gerontological tradition is currently continuing over in Victoria at the Lincoln Gerontology Centre of La Trobe University. The building is a lovely old convent, where they have taken this lovely old convent. The Centre has two functions. It is a teaching institute, so they have students doing diplomas in gerontology, and they have folk doing theses on gerontological subjects. Then it is concerned with the promotion of research, along with the dissemination of knowledge. They are bringing together a lot of Melbourne academics and professionals interested in the ageing research area. That's an institute and address of which you should be aware, if you become interested in this area. Be aware that this Centre exists, the only one within Australia. It is one of these 'key centres' being set up by the federal government. It looks at 'gerontology', and the emphasis seems to be strongly on 'social gerontology'.

Well, Melbourne is a long way away, and so what I am hearing you ask is 'What's happening in Perth?' A lot of research is going on, and some examples follow. A couple of years ago a group of my students, some ten students, went out into Nedlands and talked to seniors living in Nedlands about their 'unmet needs' while living in the general community. That was the If only I had... report (Wiles and Brienne, 1989). The most 'astonishing' finding - if you like - was that the seniors living in the relatively advantaged socio-economic area were fairly ignorant about the aged services in place to meet their needs. Then in 1988 two of my students went and talked to a small batch of seniors in South Perth. This was a small, qualitative, social survey. They questioned seniors about 'unmet needs'. They asked them about 'social isolation', and it was interesting that a surprisingly large proportion within this sample admitted that they were socially isolated. They asked about 'carers and caring', because there is a whole gerontological literature and social issue about 'community care'. Those who actually do the caring are often women, unmarried daughters, and female relatives, and so forth. That little report entitled Southcare Aged Needs Survey is due out within a couple of weeks (Wiles, Ewers, Ho, and Olley, 1990).

Now within Perth there has so far been very little in the way of well-resourced, large-scale, random sample, social survey work on seniors. However, in 1987 through to 1988 at Bayswater we were able to secure a fair amount of money to have a couple of field researchers. These two field researchers went and asked 160 seniors some 57 questions about their life circumstances. This report is due to appear shortly (Tomlins and Wiles, 1990). The interesting finding there, again, was that seniors were relatively ignorant about the services in place to meet their needs. Again, we found this gerontological verity that in the main most seniors want to stay at home for as long as possible.

Another interesting project in 1990 is the 'Anglican Homes' Research Project', where a group of us is looking at various aspects of life within retirement villages. This is looking at the residential village situation. What advantages do seniors see in living in a village? The other thing that we are exploring in this project is the current applications to live in the villages. We are looking at folk who are trying to come into the villages to see whether they are being 'attracted' into the village - do they want to come in because of the possibility of forming new friendships and networks? - or are they being 'pushed' into the villages because of the lack of community services, and perhaps they would really prefer to remain at home. So there are two aspects to that project.

Now these are just the projects with which I've been in some way associated, and of course, there are others happening around Perth. All of these projects either are - or will be - in the library. Now some of you may need to write papers and theses at some later stage, and it is interesting for you to know that there are all sorts of 'research questions' being generated. For example, the little Southcare study, involving only twenty-one respondents with four questions for each, eventually suggested some five areas for future theoretical investigation. So not only is 'ageing' an area of interest in terms of employment prospects, it is also interesting in 'theoretical' terms, in terms of the research projects that are possible.

4.0 THE SOCIAL PRODUCTION OF OLD AGE

That brings us to the issue of the 'social production' or the social construction' of old age. This is the sort of theme on which folk like to write research theses, and indeed the title or slogan 'The Social Construction of Old Age' comes from Chris Phillipson's book, and that is his edited version of his Ph.D. thesis (Phillipson, 1982). That book is a quite radical and stirring 'read', and might appeal to some of you and less to others, but it is interesting because it looks at the definition of old age by society, through the institutions, conventions, and customs of society. So this brings us to the classification of populations, and the definition of 'old age' (Wiles, 1987a). Now one of the most frequently used classifications of 'ageing' is a four-part typology. The 'first age' is described as the season of 'youth', while the 'second age' is that of 'adulthood'. Now, the 'third age' is asserted to be the time of 'active retirement'. You see that there are two points linked here, the notion of retirement from the paid workforce along with the idea of 'activity', and I suppose 'engagement' with the community. For instance, one of the groups that I am involved with is the WA Council on the Ageing, a non-government, non-profit, advocacy organisation. Now to look at the folk who staff these committees, they are mostly retired folk, and they work long hours. One chap, for instance, he is involved in two non-government organisations, and he divides his time between the two of them. He puts in a full working week, he is 73, he takes work home in his brief case, and this is retirement! So there will be individual variations on the theme of 'active retirement'. The term 'third age' should also start ringing little bells for you, with recollections of the term of the 'University of the Third Age'. This is the idea that folk in later life can keep learning, and that there is no necessary impediment to learning in later life. Sometimes 'universities of the third age' have more informal structures, so that they tend to draw upon their existing pool of expertise and form local learning groups. There are other U3As which are more formal, where the lecturer stands up and talks about a special area of knowledge. The U3As are important phenomena, though, showing an important lesson that one can continue to learn throughout life. Indeed there is also quite a psychological and gerontological literature about this matter of cognitive development through into later life. Barring illness, and given interest, then, there is no reason why one cannot continue to learn right up to the end of the life cycle. In this classification there is also the possible 'fourth age' which is that of 'dependency'. However, it is only an unfortunate minority of seniors that fall within this dependent category. In general, in the main, most seniors live at home, some 93 per cent, and while some have some health conditions most are not sick, and ageing is not to be equated with sickness (Wiles, 1987b).

Now the main definitional determinant of 'old age' in western society is, of course, the social custom or convention of 'retirement'. According to Foster (1988:73):

The 1986 ABS Retirement Survey showed that 24 per cent of those who had reached the compulsory retirement age in their job would have liked to have continued working full time.

That recent cutting from the West (Quekett, 1990) is responding to the above reality, which in turn responds to Butler's historic denunciation of the prejudice of ageism noted earlier. So one quarter of seniors don't want to retire. Now whether one wants to retire or not will very much depend upon whether one is enjoying the job. If one is working in a dirty, noisy, ill-paid factory job, one may be rather keen to get away from it. However, if one has a rewarding, professional sort of job, with social networks, a sense of achievement, social rewards and so on, there will be more tendency to want to keep working. And at the moment we have two conflicting social trends. We have the trend to 'early' retirement, folk rushing off to laze about in the sun at 55 years, and then we have the opposite where some folk want to continue on in paid employment.

What we have seen so far then, are some of the theoretical issues and the background context of the ageing experience. What I want to leave you with are just a few of the things that have been happening, nationally and locally, over the past couple of years, because this whole area of ageing has very much come into the forefront of the Australian social consciousness. First of all, it is interesting that the House of Representatives conducted an inquiry into the 'Community Involvement of Retired Persons'. They invited written submissions in 1988 (see for example, Wiles, 1988), and in 1989 they did a national tour inviting organisations and individuals to make verbal submissions (Hansard, 1989). They reached Perth in May 1989, and a delegation from the WA Council on the Ageing went along to talk to the committee about a range of concerns. The important point, I suppose, is simply that at a national level the government is looking at these issues such as the community involvement of retired persons.

In 1988 the previously-mentioned Foster Report was published. This report was concerned that as a nation we should create an adequate, sustainable, and fair retirement incomes policy into the twenty-first century. This is a comprehensive and well-organised report, a fine example of social policy writing. However it is a very thick report, and the outcome of these submissions and debates and hearings is seen in Howe (1989). The trends to which Foster alluded are developed, for instance, greater future reliance upon occupational schemes is suggested, but the Howe document pledges that the Age Pension shall remain as a central plank in income provision.

Just very quickly, this process occurred late in 1988 and early 1989, with all the debate and discussion happening about retirement incomes. Various community groups were very involved in making submissions to government about what should be done. What happened in the federal budget last year was that the government committed itself to maintaining Age Pensions at 25 per cent of Average Weekly Earning (AWE) and committed itself to maintaining that system into the twenty-first century. That was the good thing.

There is also to be more reliance on occupational superannuation schemes into the next century. A lot of the concern in this document was to do with the disrupted work histories of women and how to compensate women - and remember most seniors are women - how to compensate women into the next century. In general, most of the community groups felt that the federal government responses had been reasonable, in terms of the submissions that they had lodged. So in terms of gerontology and social policy, this series of events, the Foster Report and the Howe Review, have basically sorted out the retirement incomes systems hopefully through to 2021 when the greying population peaks.

There were also local events. We had the Equal Opportunity Commission begin to examine 'Age Discrimination' in 1989 (Equal Opportunity Commission, 1989). As a result of this process we had the recent announcements by the Premier Carmen Lawrence (Quekett, 1990). Interestingly, the things that Robert Butler was saying about 'ageism' twenty years ago have now been adopted by society. A twenty year lag between academic critique and societal response makes an interesting 'timeline'.

Actually there are now too many inquiries to which to respond. Now 93 per cent of seniors live in the general community, with 4 per cent in nursing homes and 3 per cent in hostels. So the great majority of seniors live in the general community. However, the unfortunate minority of frail, diseased, disabled, or demented seniors ending up in those institutions has also been the subject of governmental concern. A report last year provided a guide to residents' rights in residential settings (Department of Community Services and Health, 1989), and various monitoring teams seem to have been created to check up on nursing homes and hostels.

The last investigation that I want to mention is this local one on the Needs of Older Women (Kirwan, 1990). This has been running for some six or seven months. This report was produced under the auspices of the Bureau for the Aged. This one is 'hot off the press'. Now the single main need that this report identifies, again, is the need for improved information services. There is a whole long list of recommendations, but the major need that emerged was the need for information. Now that was the State Government looking into the needs of older women.

What this whole series of inquiries suggests is that governments at Federal and State levels are increasingly aware of this growing group of seniors - possibly because they are voters - but they are also becoming aware of the social needs and the service needs of this demographic group. This allows for the possible design of better social policies and programs (Australian Council on the Ageing, 1990).

5.0 CONCLUSION

What we have seen is that Australia does have an ageing population, but this demographic change does not constitute an insupportable burden. Rather, the 'greying' of Australia is a challenge in response to which we need to make certain decisions. Clarity of perception or policy is not helped by the ageist social stereotypes that do not tell the truth about the 'mainstream' ageing experience. Nevertheless, it appears that such stereotypes are now waning. Over the next thirty years the 'greying' Australian population will generate many opportunities in the labour market, and in terms of 'theory building' and research projects. Finally, though, the more that Australia comes to terms with its ageing population, and the better the social policies that are created, and the more appropriate and effective the services that are constructed, the better we will be when we all arrive in this state of old age.

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