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Think you're not prejudiced? When it comes to seniors, think again.

October 1st is the United Nations-declared "International Day of the Older Person." The theme this year is ageism, a prejudice that the UN describes as the most socially-normalized form of discrimination worldwide. The term was coined in 1969 to describe a form of discrimination based on age. Since this time, we have seen a number of barriers broken: gay people can legally marry, women lead governments and the Supreme Court of Canada, people in wheelchairs hold public office and win gold medals, and the United States has elected an African-American as President. Yet, when it comes to age, our entrenched discrimination has remained relatively unchanged. If you think this prejudice doesn't apply to you, at some point it has or it will. It may be subtle, such as expressing surprise that 80-year-old Aunt Dorothy is still driving and going to the gym, or commenting "isn't that sweet" when describing someone going on a date at the age of 85. Think if we talked about the achievements of others in such patronizing ways— "He's so successful for a black man." "What a remarkable achievement, considering she is a woman." etc.

This past weekend, I met with my 30-member Council of Advisors, a highly diverse and engaged group of seniors who help guide the work of my office. We had a deep discussion about ageism. One of the more fascinating revelations was the acknowledgement that how seniors view themselves can also feed into ageism. The gathering of the Council was also another opportunity to be reminded that seniors don't all think the same way. Vigorous debate erupted around the tables about financial abuse and the line between a person's obligation for due diligence, which does not end at age 65, and the need to protect the truly vulnerable. Anyone who could have witnessed the discussion would have been reminded that age does not homogenize thinking or political views. The conversation also underscored the systemic ageism we practice in the care community when we presume to know what is "best" for seniors, as opposed to listening to what they actually want.

It's important to remember that all people of sound mind in our society are entitled to the right of self-determination. This is true for the 30-year-old climbing Mount Everest and should be equally true of the 92-year-old climbing stairs up to the bedroom they have slept in for 60 years. Both activities have risk associated with them, but we are inherently much better at accepting the 30-year-old's decision and may be impressed by their bravery and stamina, as opposed to stunned by the 92-year-old's cavalier recklessness. Many who are 92 are perfectly capable of understanding that they may fall and fracture a hip, but they accept that risk because what they have chosen to value more highly is to sleep in their own bedroom.

Stereotyping seniors and their behaviours is deeply entrenched in society. Contrary to some public perception, seniors are not all rich and enjoying the golf course; in fact, half of BC seniors have an income of less than \$24,000. We are not all headed for the nursing home; 85% of seniors over the age of 85 live independently. We are not all going to develop a dementia; 80% of seniors over the age of 85 do not have a diagnosis of dementia. The emergency departments are not flooded with seniors; in fact, only 22% of emergency department visits are from those over 65. I could go on, but you get the idea. Seniors are not a problem to be solved, a cost curve to be "bent," or victims simply by virtue of age. Wikipedia has one definition for ageism, but ironically quite a different one for the word "senior," a term defined as "a person of higher rank or standing than another, especially by virtue of longer service." So just like the Vice President of a company would listen attentively to the wishes of the "Senior" Vice President of the company, let us citizens listen a little more closely to the aspirations of the "senior" citizens of our society.

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