



Curriculum Units by Fellows of the Yale-New Haven Teachers Institute  
1983 Volume VI: Cross-Cultural Variation in Children and Families

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## Being Old

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“OLD” is a dirty word in the American vocabulary. Approximately one quarter of the lives of Americans are spent growing up, while the other three quarters are spent growing old, yet our society is obsessed with youth while steadfastly denying old age. Our society has become quite openminded about many former touchy topics, such as, sex, politics, religion, divorce, abortion, violence, but we revert to an ostrichlike attitude about aging and death, as if by not acknowledging these topics, they will simply disappear. I feel the need for adolescents to be more aware of, sensitive to, and understanding of the older generation, because adolescents, like us all, will someday be the older generation and even before that, they will be responsible for caring for an older generation.

Adolescents and the elderly have many differences, but I find many of the problems faced by today’s youth are mirrored by those faced by today’s senior citizens. Both are caught in the struggle between independence and dependency. Being in control of their life or at least feeling some degree of control has a tremendous effect on the “headset” of the individual, no matter what their age is. Teenagers constantly complain of having no or few choices in their lives. Senior citizens likewise feel they have few choices left in their lives due to health, financial, and social factors. The bridge from childhood to adulthood is never crossed but once. Many trips back and forth are made by adolescents. American society slowly weans teenagers into adulthood by treating adolescents as “adults” at times, but also as “children” at other times. This transition period is very difficult for most adolescents. Many senior citizens have great difficulty adjusting to the transition from productive, useful lives into what is perceived as useless existence. The bridge into another phase of their lives is not easily or willingly crossed either. The ambivalence felt by adolescents over their sexual desires has its counterpart in older people who are likewise asked by society to suppress their needs and desires. Society’s denial of the sexuality of adolescents and senior citizens occurs within a framework of heightened societal emphasis on sex. Sexuality is not something individuals obtained at voting age and then relinquished at retirement in exchange for social security. Adolescents are the victims of labeling and feel the injustice of stereotyping. “Juvenile Delinquent,” “Pot Head,” and “Lazy Leeches” are but a few of the many put downs quickly applied to all adolescents. Senior citizens are likewise victims of derogatory labels. “Old Foggies,” “Old Geezers,” “Old Maid,” and “Dirty Old Man” are but a few of the phrases applied to the older generation. Adolescents and senior citizens face two related problems, usefulness and monetary independence. Inactivity feeds into the sense of uselessness. What need is there for their existence? Our fast moving, gogettum society measures the value of an individual by their productivity and or reproductivity. Yet, we tell youth they need experience before we can employ them. But where and how do they break into the tight job market? We tell our senior citizens they must retire. They can not possibly be of service anymore. Lack of employment has two

direct spin-off results for both the young and the old, a loss of usefulness that is replaced by uselessness and a lack of monetary compensation that results in economic dependency. What a tragic waste of human potential, young and old. Adolescents frequently feel isolated. Their families are usually engaged in earning a living, many times more than one job per person is necessary. The family structure is one of isolated units within neighborhoods that usually offer no real support network for children after school time. There are few significant adults for adolescents to relate to. Senior citizens are frequently likewise isolated by families geographically removed, by death of friends and mates, and avoidance by those younger than them because older people serve as a reminder that old age and death await us all. Adolescents and senior citizens share a grim problem, suicidal behavior. Elderly suicide does not receive the attention that teenage suicide does, because society views their potentials differently. "While people over 65 make up 18 percent of the population, they commit 23 percent of all suicides in the country, according to the National Bureau of Statistics." (Barbara Stevens, 7883) I see a natural alliance and sharing between teenagers and senior citizens.

Today's American society has brainwashed everyone, young, old, and inbetween, to believe that we live in a youth culture, that aging is a loss, and old means useless and a nuisance. This attitude is not one held by all of the world cultures. It is said that to understand how a civilization behaves, you have but to look at how it treats their young and their aged. The reverence for the aged held by Oriental cultures is shown in their treatment with deference and respect. Yuan Jihui, dean of the department of sociology at Fudan University in Shanghai, stated, "The elderly in China have five guarantees; They're guaranteed enough to eat, enough to wear, enough to live (housing), enough medical care, and a funeral." (Joyce Mariani, 7883) Eskimo tribes choose their rulers from only the oldest members who performed their duties then left to die with dignity on the ice fields. Positions of wisdom, counseling, religious and health issues were delegated only to the aged members of many North American Indian tribes. European respect for the elders of the family is usually continued for the first generation immigrant family here in America. Americans are not the only people who grow old. Everyone grows old, but how old people are treated in America is different.

America was not always age prejudiced. The older American was a needed and valued member of our society. Early craftsmen were the backbone of our developing nation along with blacksmiths, carpenters, shipbuilders and sail makers. Our society was settled by extended family units within a strong community network. There was too much to be done by and learned from the older generation to discard them. The seeds of a person's worth being measured by his or her productivity and or reproductivity were being sowed at this early time in our history. Great personal pride in one's work and family was the word of the day. But entering on the stage of life came the Industrial Revolution with the development of factories with machines for manufacturing products and the use of power from steam, oil, or electricity in place of human and animal power. There was no longer the need for skilled hands, nor for as many hands at all. Personal quality that resulted from long years of apprenticeship and experience was now obsolete. With more workers than jobs, someone had to be sacrificed. So the old were let go. Machines could make it cheaper and faster.

Ageism, a negative attitude toward older people, exists in many forms in our society. Perhaps its seeds go back to the Greek philosophy, "Whom the Gods love die young." Their worship of youth and strength is the antithesis of old age and weakness. Having decided to squeeze the older worker out of the workforce, our society needed to rationalize this shift in allegiance to youth by idolizing all its attributes. Our present day preoccupation with youth, beauty and strength is most readily seen in how advertisements portray people. Desirability is exemplified in the young, beautiful and agile bodies of both females and males used in advertisements. Sexy, provocative bodies are used to show success, wealth and acceptance in connection with the products they are promoting. The role relegated to older people is one of ugliness, sloppiness, and

stupidity. Old people are used to show the negative element that can be changed by the use of their product. Madison Avenue advertising executives have decided that senior citizens, who are mainly on fixed incomes, are not a lucrative market worth cultivating. The main products promoted for and by older people are laxatives, denture materials, hair coloring, and pain killers. The message to all from the media is one of exclusion, nonexistence as a meaningful, viable entity in our society for the elderly. A student exercise is included on this significant topic.

In an article by Seltzer and Atchley, they discuss that the maligning of the elderly has some of its roots of socialization in the stories told to children. "An analysis of children's literature from the years 1870 to 1960 showed increasingly negative attitudes toward older people." (Lillian Dangott, p 14) "Hansel and Gretel," "Cinderella," and "Snow White" are but three examples of children's stories that portray older females as wicked villains ready to do children, youth, in. A student research topic is included on this point. Having sowed the seeds of a negative attitude toward the elderly in the minds of the young and coupling this with the taking away of a purpose for existing from the elderly, it is easy to see why everyone, young, old and inbetween, begins to believe that the only good old person is a dead old person.

The aged are seen by their children and society in general, as a burden and an expense without a "future." The elderly are viewed as being supported without contributing. They are the true parasites of society. The old have no useful purpose and present many problems. Adolescents and teachers can increase their understanding of the elderly by looking at some of the problems faced by the elderly in our society today. If we can try to stand in the shoes of the elderly, perhaps, we too can feel the pinch of how snug the fit is for them and how little room they have to adapt to the rapid changes occurring around them.

## FINANCIAL

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In a capitalistic society, money plays an important role. Without enough money to ensure an adequate standard of living numerous spinoff problems, poor health, shorter life expectancy, inadequate housing, higher crime rate and exploitation, develop for the poor no matter what their age. The problems faced by aged minorities are compounded by having spent their younger lives with inadequate incomes and unsatisfactory health services. The "poor get poorer." The White House Conference on Aging in 1971 reported that aged blacks are more than twice as likely to be poor as elderly whites. (Bert Kuger Smith, p 52) Minorities with language barriers are hampered even more by their lack of sound communications skills. The need is strong for outreach programs that can advise this particular group of elderly about existing services. A student exercise is included on this topic. The PreWhite House Conference on Aging reported that "the average age of death for the American Indian is 46 years." (Smith, p 58) No wonder the Indian in the television public service spot on antilittering had tears on his face. This native American's life expectancy is only about two-thirds that of the white settlers of his land. It is important to remember that there is a big difference between what is listed in government financial reports as being "adequate income" and geographic reality. Cost of living standards vary sharply within any state and therefore being able to make finances stretch in one community may not be enough in a nearby community. Poverty can occur in all places and in all ethnic groups in spite of thrift and past labor simply due to outliving diminished savings because of the greatly increased cost of living and not being able to take in enough new income to cover expenses. The battle of making ends meet is not only demeaning, it is wearing. Elderly people usually have decreased resilience to deal with hassles, officials in agencies, to wait in endless lines or to fight in court when their rights are violated.

Economic aspects of aging are complicated and difficult to separate from general economic and political issues of society. The basic problem is how to support, out of current and accumulated production, the non-productive members of the society, children, sick, old and others. The problem is relatively simple when the proportion of those needing help is small in relation to those providing, but becomes far more difficult when there are large numbers of needy. The problem can be dealt with in various ways, such as increased productivity, delayed retirement, or reduced benefits to the dependent. A depressed economy is not conducive to increased productivity. High rates of unemployment in the young and middleaged workers presents problems with extending the worklifespan. To decrease necessary spending on child related services would be short sighted, so the only place to target less support is on the elderly.

One attempt to deal with the burden of reduced finances during old age was the development of the Social Security system. The Social Security Act was passed in 1936 to help set up a system to provide for people when they could no longer be “productive” or for families where the breadwinner had died. Employers, employees and selfemployed people pay compulsory Social Security contributions into a pool of special funds that pay taxfree monthly benefits to the worker or his/her surviving dependents upon retirement, death or disability. Voluntary medical insurance, Medicare, is also available to those over sixtyfive from individual premiums and matching federal funds. About nine out of ten wage earners and selfemployed workers are enrolled in the Social Security program, but not all occupations are covered, so there is a void. Social Security benefits are based on total earnings and how many years worked in a complicated system of income averaging. Work credits are calculated by yearly quarters. A minimum of six credits is needed to be insured, but to receive maximum benefits, income, as well as, number of years of work is considered. (Sam Julty, p 279) In theory, the Social Security system made sense, but major economic problems have tarnished the dream of golden retirement on Social Security benefits. The latest bailout measure, the 1983 Social Security compromise, was signed on April 20, 1983. The American public is aware of the dubious future of the Social Security system. Many who are now paying contributions into the system are afraid the system will not be able to pay them when it is their turn to receive benefits. This shaky system contributes to feelings of animosity toward the elderly. There are many unresolved questions that arise around what happens to the Social Security system if the economy continues a downward spiraling and generally around what exactly the younger generation owes the older generations. A student exercise on the Social Security system is included.

There are other sources of income for the elderly, such as limited parttime jobs, pension plans, savings, private investments, properties, and insurance, term, whole, straight, and endowment. Food stamps have helped many on limited incomes struggling with inflated food prices. It should be remembered that the financial condition of the elderly has several direct implications on their lives. “Money can’t buy everything,” but it sure can pay the bills for housing, food and health needs, three major and interrelated problems for the elderly.

## ***HOUSING***

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The importance of where the elderly live has many facets. Is their home their choice? Can they, either by themselves or with help, maintain their homes both inside and outside? Is the running of their home too costly for their finances? Is the home suited for their needs? Are they isolated in their homes with little opportunity to communicate with various other people? How would they continue to manage their homes with increased health problems? Would a livein arrangement, either with relatives or nonrelatives, be more suitable for them?

How would they feel about moving in with relatives, into senior citizen housing, into smaller quarters, or into a nursing home?

The significance of one's space, housing, can not be over emphasized. Teenagers are frequently warring with their parents over their territory within the home. Teenagers need to feel in control of their own space and attempt to demonstrate this need by being sloppy, decorating with posters, playing music loudly, and demanding privacy. The need for possession of a space is likewise evident in the elderly. No matter where the elderly live, be it in their lifelong home, in a large retirement condo in Florida, in their children's home, in an apartment, or in a bed of a nursing home or the ward of a state hospital, they need to feel the ownership of a space. The "idea of self is diminished if there is not a corner which is his alone and where his treasures can stay with him. It has been said that home is where one feels safe to return. Without such a place a person is rootless." (Smith, p 48)

Nursing homes have become big time business in America. These institutions in theory, solve the problem of what to do with the elderly when they can not care for themselves, but in reality, nursing homes many times create more problems for the elderly. Nursing homes are expensive to run, IF done properly, because they require competent staff and specialized facilities. Some nursing homes are excellent, but far too many are not. The subcommittee on Long Term Care of the US Senate Committee on Aging listed five major causes of substandard nursing homes:

1. lack of a clear national policy with regard to the infirm elderly;
2. system of longterm care with inherent or built-in financial incentives in favor of poor care;
3. the absence of the physician from the nursing home setting and in general the deemphasis on geriatrics in American medicine;
4. reliance on untrained or inadequate nursing staff;
5. lack of enforcement of existing standards."(Smith, p 63)

My childhood memories of over thirty years ago include the poor house for the elderly on the site of the present New Haven Regional Center of the Department of Mental Retardation on Wintergreen Avenue. A look at the present New Haven telephone directory includes four related headings for the care of the elderly in the yellow pages which indicate businesses. 1) Convalescent Homes41 listings. 2) Boarding Homes14 listings. 3) Rest Homes18 listings. 4) Sanitariums2 listings. There is slight crosslisting, but most are singularly listed according to health care needed. This does not include nonprofit institutions such as the Jewish Home For The Aged on Davenport Avenue and city and state sites. The New Haven area is a prime location for the care of the aged. The New Haven Board of Education is presently establishing at Lee High School an Allied Health and Technical Careers alternative high school, because of the great number of jobs available in the New Haven region in the health care area. Local teenagers are frequently employed in convalescent/nursing homes because these jobs require low entrylevel skills. But I have found many teenagers become quickly frustrated with working conditions, pay, and are emotionally illequipped to deal with the headset of their job. They are not trained or prepared for the guilt and emotional pain that can arise when dealing with the elderly and death. Care of the elderly requires emotional commitment not detachment. The caring must start with the professionals who are responsible for the care of the elderly and filter on down to the general public. The elderly are living, breathing individuals, not merely commodities to make a profit off of.

## ***NUTRITION***

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The human body is a machine that requires fuel to keep running, no matter what the age of the individual, but the need for and distribution of food for energy, growth, maintenance and repair varies with the age of the individual. Poor nutrition in all ages has a direct relationship with health issues, but there are also psychological implications as well. Food symbolizes much more than nutrition to the average American. It is an important part of socialization. Meals are a time of sharing and companionship. If senior citizens are alone, why bother to fuss for just themselves, thus eating loses its significance and it becomes a chore that is either reduced or avoided altogether. Tight budgets also restrict being able to have company in or to go out to costly restaurants. Physical restrictions take their toll as well. Non-functioning taste buds and missing teeth or illfitting dentures make eating boring and difficult. Shopping for food presents a maze of different problems for the elderly. First, the sense of vulnerability with leaving home. Secondly, how to get to stores. What means of transportation, if any, is available? Thirdly, how to carry groceries home when purchased. Fourth, the expense of the food itself, especially if shopping for one. Small portions are usually more expensive and harder to obtain. Spoilage is usually greater with only one in the household. Poor or lack of proper refrigeration is a prime problem also. Meals at senior citizen centers and nursing homes are many times aesthetically unpleasing and lacking in texture, consistency and pleasant aroma. Forgetfulness plays havoc with elderly nutrition. Many senior citizens forget to eat and drink properly. They start preparing food and become preoccupied resulting in poor nutrition and safety problems. Nutrition programs offered at senior citizen centers provide the elderly with sound nutrition at affordable prices at least once a day, but equally important, they provide the elderly with human companionship and a place to go, to belong to. The problem many times is mobility. Many elderly can not obtain transportation to senior citizen centers. Programs such as MealsOnWheels help, but they reach only a minute percentage of those needing assistance. Many elderly are unaware of or too proud to ask for help in maintaining proper nutrition which is essential for good health at any age. Teenagers are likewise the victims of poor nutrition many times and they too suffer the physical repercussions.

## ***HEALTH***

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The care and upkeep of the aging body requires good nutrition and proper care, doctors, nurses, hospitals and medicine. The skyhigh cost of one extended hospital stay can easily wipe out the savings of the elderly. Many senior citizens do not avail themselves of preventive measures and sound health practices because of many factors; they can not afford proper nutrition and needed services; they can not get to clinics and doctors; they are afraid of discovering major illnesses. It should also be noted that elderly patients do not always exhibit the usual symptoms associated with different illnesses, so proper diagnosis is many times hampered by the lack of or misleading symptoms. Many doctors and health care facilities find it more expedient to OVER-medicate the elderly than to search out true causes of their problems. "Aging brings reduction of basal metabolism rate." (Smith, p 45) Changes in rates of metabolism affect how the body assimilates and reacts to different medications. Over medication of the elderly is both accidental and intentional. A sedated patient is easier to control and care for. "The elderly are at high risk for adverse drug reactions because of their use of multiple physicians, their own tendency toward polypharmacy, and limited knowledge about drug interaction and adverse side effects in the elderly population." (Leonard Poon, p 23) The study of the care of the elderly, geriatrics, by the medical profession needs heighten emphasis. It is also true that many elderly patients do not follow the instructions of their doctors and or take their medication as directed, many times because they

forget to. The following is a brief description of some of the common physical/health problems that plague the elderly.

### ***Sight***

Two of the major conditions that contribute to vision problems are GLAUCOMA which is increased pressure due to obstruction of normal fluid drainage and CATARACTS which is the progressive clouding of the lens. With reduction of vision, more accidents of falling, cuts, burns, etc., are much more likely to occur in the elderly plus impaired vision contributes greatly to the sense of isolation.

### ***Hearing***

Hearing loss begins in the normal adult around 30 years of age. As the loss increases it generally creates a real sense of isolation and it can feed into feelings of paranoid in the elderly. Conversations for the elderly become strained because they can not hear. They yell, do not respond, or ask to have things repeated. Hearing aids may or may not help the hearing loss, but they should not be obtained except on the sound advice of a doctor and not in response to a newspaper ad.

### ***Memory Loss***

Memory loss or deterioration is synonymous with old. A common refrain of even the young is, "Oh, I can't remember. I must be going senile." Senility is a process of mental decline with symptoms of forgetfulness, disorientation from time, place and person, and returning to earlier forms of coping with reality. Diagnosing between detachment resulting from depression and organic brain syndrome becomes very difficult. Actual brain damage can occur because of a stroke, interference with the blood supply to the brain, or because of several diseases that cause shrinkage and cell deterioration. Alcohol and other drugs have permanent and temporary effects on the brain as well. Most elderly people's speed of response slows down and their memory loss is slight, but usually there is no change in intelligence. (Alex Comfort, p 88) Development of programs at colleges and universities that encourage senior citizens to return for courses has met with great success. Not only do the elderly do well, but the experiences serve as stimulation for them and act as examples to "younger" classmates that older people are not necessarily "over the hill."

### ***Muscles/Strength/Mobility***

The simple act of moving can be a real problem for the elderly. The saying, "Use it, or lose it," applies in some degree to muscular activity in senior citizens. More and more the elderly are realizing, along with the younger generation, that continued sensible muscular activity helps to keep the body functioning well. A major problem for the elderly is ARTHRITIS, inflammatory damage to joints. It occurs in fingers, knees, hips and vertebrae in that order of frequency. It is usually a painful and limiting nuisance that is lessened somewhat by aspirin. In most cases, trying not to aggravate the inflamed joint by reducing excessive movement is about all that can be done. Eliminating fine muscular activities such as sewing and knitting, getting short hair styles, and cutting down on excessive stairs are other ways to lessen the impact of arthritis. The ability to get around, whether it is for short distances like at home and in the yard, or it is for longer distances like in the neighborhood, shopping or traveling, is often a major problem for the elderly. If they have cars, the cost of gas, maintenance, insurance, taxes and registration becomes astronomical on the fixed, limited income of the elderly. The elderly do have reduced reaction time and are criticized as being "Sunday drivers" on our fast, hurryup roadways. Teenagers often complain of the woes of not having "wheels," but at least they can avail themselves more readily of public transportation or walk to where they need to go. The elderly have difficulty even getting to the bus stop and simply climbing the steps onto the bus is like scaling Mt. Everest. If the elderly feel trapped and have limited contact with the outside world, they become more and more detached

and other problems surface and intensify. Student exercises on sense deprivation and mobility are included.

## SELF IMAGE

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The corrosive psychological effect of ageism on the self-image of the elderly has already been alluded to, but there are some physical effects that need to be addressed as well. Depending on how important the superficial physical appearance/ beauty has been and to what extent the inner qualities/sense of selfworth have been developed, the effects of the physical aging of the body vary greatly in the elderly. Some of the leading sources of concern are the following: *FLAB*- The human body loses muscle tone as it begins to age, but this can be lessened with sensible exercise. *FAT* Many older Americans are greatly overweight, but this can be lessened with sensible dieting while still satisfying nutritional needs. *HAIR LOSS /GRAYING* Balding is predominately a male problem and the result of genetic inheritance. It becomes a traumatic issue if the man is trying to maintain a youthful image especially for work. Hair loss can be counteracted by the use of hair pieces“rugs.” Hair color change usually bothers women more than men. Color change is due to actual loss of pigment cells and is therefore biologically irreversible. Hair color/length/texture is many times equated with sexuality and becomes of paramount importance in maintaining a youthful image. The fact that this is “a nation which spends more than 45 billion in 1970 on various cosmetics and hair dyes and only \$1.86 billion on Old Age Assistance,” (Smith, p 59) says something about our priorities. Graying hair can be changed by the use of hair dyes. *WRINKLES* The skin tissue loses its elasticity along with some degree of atrophy of the facial muscles as the body ages. Limiting exposure to sunlight, which accelerates the process, helps to reduce wrinkling. It is said that luckily failing eyesight often accompanies the appearance of balding, graying and wrinkling so that they can not be seen as well. The elderly need to care about their selfimage, both physical and mental, if their lives are to truly have worth and not merely be existence. Adolescents are frequently either criticized because they spend too little or too much time, effort, and money on how they look, while at the same time they give little attention to what goes on in their bodies and minds. We fail to realize that both the young and the old need to feel good about the outside “packaging” as well as the inner “mental contents.”

I have always been intrigued by people’s preoccupation with kittens, but their disregard for the same cat when it reaches maturity. Kittens personify youth, playfulness and innocence. Americans have difficulty dealing with their own mortality and find it easier to think only in terms of youth, because to do otherwise means they must deal with impending old age and their own death. Old age is viewed by many as a time of plowing under. The harvest of middle age has been reaped and the elderly have only to lie barren. This is not true! There are many successful and productive senior citizens who achieve much in the sunset years of their lives. A student exercise is included on researching the accomplishments of both renowned and local elderly who have made significant contributions to society in their golden years.

### *What It Feels Like To Be Elderly* *Sensory Deprivation*

This activity is designed to raise the sensitivity of the participants by having them simulate elderly sensory deprivation by desensitizing their senses.

#### *Materials Needed :*

Sunglasses/3D movie glasses filmed over with white poster paint to simulate cataract condition which limits vision.



Ear plugs/cotton to simulate hearing loss.

Elmer's Glue covering and dried on fingertips to simulate reduced sense of touch.

*Procedure* : Students will go through as much of a "normal" day with their reduced senses in an attempt to feel the frustrations felt by the elderly when they experience sensory loss. Students should pay attention to their feelings and report back to the class how they felt and what happened to them. In the follow up discussion it should be noted, if the students do not bring it up themselves, that they were able to "try" this experience, the elderly can not quit.

#### *What It Feels Like To Be Elderly Limited Mobility*

This activity is designed to raise the sensitivity of the participants by having them simulate limited/decreased mobility.

#### *Materials Needed :*

Masking tape placed on all/most of the finger/and other joints to simulate the difficulties that arise with arthritis.

Walkers and wheelchairs to demonstrate the difficulty in getting around with these aids.

*Procedure* : Students will go through as much of a "normal" day with limited mobility in an attempt to feel the frustrations felt by the elderly when they experience mobility loss. Student should be encouraged to make note of handicapped access to buildings that the elderly would need to use. They should also modify their step climbing by not skipping stairs. BOTH feet must touch EACH stair when going up and down stairs. Have students note how big a step up/down is required to enter/ exit from a bus. How easy of a feat would this be for a person with reduced mobility? How long do buses wait for the elderly to be seated before they start up?

#### *What It Feels Like To Be Elderly Attitudes*

This activity is designed to raise sensitivity of the participants by having them masquerade as elderly to gain first hand reactions and attitudes toward the elderly.

#### *Materials Needed:*

Wigs, clothing and makeup

*Procedure* : Students will dress up as senior citizens and simulate activities done by the elderly. For example, use public transportation, shop and attend local amusement centers. They will then report back to the class on treatment they received.

#### *The Elderly in Advertisements Magazines*

*Materials Needed* : Magazines, particularly women's magazines such as "Woman's Day," or "Family Circle."

Magazine advertisements are a widely utilized means of promoting a vast range of products to the buying public. Have students look over several different magazines bearing in mind the following questions:

What is the average age of the women and men used in most advertisements?

Are these individuals usually “good looking,” “slim” and “sexy?”

Is the implied message in these ads one of success, wealth and importance surrounding the individuals in these ads? How is this shown? Give specific examples of how this accomplished.

Now find examples of ads that contain older people.

Are these elderly people enjoying themselves? Functioning in competent roles? Appear to be successful, wealthy or important? Are they good looking, slim or sexy?

Are the products these older people are endorsing positive in nature and not negative or in a painful vain? Give specific examples to show your results.

*Spinoff Activity Create Your Own Elderly Advertisement*

Students will create their own ads that present the elderly in a positive light.

*The Elderly on Television Shows and Advertisements*

*Material Needed :*

Television set

The importance of television within our society is undeniable. Television stations transmit programs 24 hours a day, 7 days a week, all year long. This programming is frequently interrupted by numerous commercials. Have students analyze TV commercials bearing in mind the following questions:

What is the average age of the potential buyer for most products promoted on commercials?

What is the average age of the people used in most TV commercials?

Now find examples of TV commercials that are designed to sell products to the elderly.

What are the products being promoted in these commercials? Are these products of a “positive” nature?

Describe the individuals used in these commercials.

*Spinoff Activity Create Your Own Elderly TV Commercial*

Students will redesign commercials in a more positive light.

Have students analyze TV shows that have elderly on them.

What is the average age of the major characters on TV show? If there is a villain or victim, what is their age? Are the elderly depicted as oldfashioned, ill, inflexible, feeble and generally out of step with life?

*The Development of the Elderly as a Political Force \*\**

Senior citizens are a definite voting block of constituents that could be mobilized to exert political pressure.

This project entails a combination of researching and projecting. Students must find out about what has and

has not been done for and to the elderly and then must make certain decisions about what can be done in the future. The class may be broken into smaller groups to facilitate more detailed research and then they can collectively contribute their findings to form a class strategy on how to mobilize the elderly as a viable political force to be reckoned with. Possible topics of research to formulate a platform:

#### *PERIOD OF EARLY SOCIAL CONDITIONS*

Look at post World War II social legislation, New Deal, Fair Deal, New Frontier, Great Society, along with the advances made by civil rights and women's rights groups to understand the social conscious climate that indicated dissatisfaction and was translated into political pressure.

#### *PERIOD OF AGITATION AND AWAKENING*

Look at those individuals such as Margaret Kahn who vocally expressed concerns as well as the praises of the elderly.

#### *PERIOD OF ORGANIZATION*

Look at the American Association of Retired Persons, the National Council of Senior Citizens and the Gray Panthers.

#### *PERIOD OF ESTABLISHMENT OF IDEOLOGY AND GOALS*

Look at what the organizations that represent the elderly are fighting for.

#### *TACTICS*

Look at what these organizations and others are actually doing to draw attention to and to fight against ageism.

#### *RESPONSE AND EFFECTIVENESS*

Look at what the response of the general public and the government has been so far.

#### *RESULTS*

Look at the concrete accomplishments obtained for the elderly Social Security, Medicare and age discrimination laws.

#### *FUTURE*

Look at what has to be done and how the movement can be helped.

#### *Spinoff Activity Put Your Research To Work!*

This is an election year. Students can be encouraged to become politically active on the elderly issue and to get the elderly out and active around the local issues that will affect them.

\*\* This lesson is adapted from *Scholastic SOCIOLOGY The Search for Social Patterns Teacher's Resource Manual*, Larry Krieger, Scholastic Book Services, New York, 1980.

### *You're Not Getting Older, You're Getting Better!*

Kids need heroes and heroines. They are that make for inspiration. They are the models and rulers by which youngsters fashion, shape, mold and measure their lives after. The younger generation needs to be aware that the years after forty are not totally fruitless. That life is not over after forty! There are a multitude of elderly individuals whose accomplishments are as varied as they are different. There are many local, as well as world renowned celebrities and unsung heroes who are living productive and useful lives way after the halfcentury mark.

Have students research some of the suggested successful senior citizens and encourage them to interview family and friends who they feel have made significant contributions to be included on the honor roll of the elderly.

#### ***Examples of local elderly:***

Armand Zimmermann, former English teacher, Branford High School.

Tom Emerson, retired Dean of the Yale Law School, civil rights expert.

Richard C. Lee, former mayor of New Haven.

Examples of famous elderly: George Burns, Coco Chanel, Cecil B. DeMille, Thomas Edison, Gandhi, Jory Graham, Justice Holmes, Archibald MacLeish, Margaret Mead, Golda Meir, Michelangelo, Claude Monet, Anna Mary Moses, Pablo Picasso, Helena Rubinstein, Artur Rubinstein, Bertrand Russell, Albert Schweitzer, George Bernard Shaw, Casey Stengel, Leo Tolstoi, Giuseppe Verdi, John Wayne, Mae West, Frank Lloyd Wright.

#### *Portrayal of the Elderly in Children's Stories*

*Materials Needed : Access to a library Have students research the negative portrayal of the elderly in children's literature. Cite the actual passages.*

#### *NonEnglish Speaking Awareness of Assistance Available to the Elderly*

*Materials Needed : Literature on the Social Security System*

Have students check literature on services available to see if it is printed in any other language than English. Have students translate any available literature on services available to the elderly into different languages—Spanish, Portuguese. Check on whether literature is distributed to the nonEnglish speaking population in a meaningful manner. If it is not, brain-storm on how to get the information into the hands of the people who need it.

#### *The Social Security System*

*Materials Needed : Information on the Social Security System.*

Students should research the Social Security system from its establishment in 1936 to the present including all changes. Have students interview the elderly who are receiving benefits about the latest revisions and get their reactions to the latest changes. The following is a possible information sheet that students could use in interviewing.

The 1983 Social Security Compromise was signed on April 20, 1983 in an attempt to bailout the financially troubled system. Some of the important effects of this compromise are as follows:

1. July increases are delayed. Cost of living increases are delayed until January 1984 and will occur in January thereafter. Increases will be based on the lower of wages or prices instead of prices as is currently the practice.
2. Incentives to retire later. A 3 % a year delayed credit will go up to 8% over the 1990-2008 period. The "earning test" that reduces benefits \$1 for every \$2 earned will be changed to a \$1 cut for every \$3 earned.
3. Medicare fee structure. Hospital bills will be paid on fixed fees in advance rather than paying "reasonable" checkout charges.
4. Retirement age to rise. The 65 retirement will be raised to 67 in two ways. First, those born from 1938 on will be affected by a two-month-year increase to 66 from 2003-2009. Secondly, those born from 1955 on would be affected by a 2-month-year increase from 2021-2027. Workers could retire at 62, but would receive lower benefits.
5. Self-employed tax climbs. An increase from three-quarters of the combined employer-employee rate to full rate will occur for self-employed workers as of January.
6. Payroll tax to go up. The payroll tax now at 6.7% each for employer and employee will rise to 7% in 1984, 7.05% in 1985, 7.15% in 1986, 7.51% in 1988, and 7.65% in 1990. 7) Payments may be taxed. Total adjusted gross incomes above \$25,000 for singles and \$32,000 for couples will be taxed on half the benefits.

## Bibliography for Students

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Confort, Alex. *A Good Age*. New York; Crown Publishers, 1976.

In alphabetical listing are many topics pertaining to issues, problems and stereotypes about aging. It is written in an easy to read style with a very positive point of view and in many sketches and summaries of the accomplishments made by a large host of different elderly people from all over the world over the ages.

Diagram Group. *Man's Body ; An Owner's Manual* . New York; Bantam, 1976.

A useful book that covers a wide variety of topics that relate to man and his body. Section L deals with the process of aging and the decline of sensory and motor abilities.

Grollman, Earl. *Explaining Death to Children* . Beacon Press, 1967. *Suicide* . Beacon Press, 1971. *Concerning Death* . Beacon Press, 1972. *Talking About Death* . Beacon Press, 1976.

A series of books that are designed to help adults in discussing with children about the awareness and acceptance of death.

Hemingway, Ernest. *The Old Man and the Sea* . New York; Scribner, 1961.

The interaction between an old Cuban fisherman and a young boy during a fishing trip are described in Hemingway's short novel.

Juity, Sam. *Men's Bodies , Men's Selves* . New York; Delta Book.

An excellent book that covers a wide range of topics relevant to men. Contains an excellent section on aging that deals with atheism, male menopause, preparation for old age, death, social security and sex.

Smith, Bert Kruger. *Aging in America* . Boston; Beacon Press, 1973.

A MUST! An informative and literary description of aging in America. Includes many examples of the personal problems created by this country's treatment of the elderly. Includes programs tried and resources available for information on aging.

## **Bibliography for Teachers**

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Butler, Robert. *Why Survive ?* New York; Harper and Row, 1975.

Explains the gap between what should be and what is reality in the care of the elderly.

Dangott, Lillian and Richard Kalish. *A Time To Enjoy—The Pleasures of Aging* . Englewood; Prentice Hall, 1979.

A positive approach to many topics relating to the elderly with advice on how to live life to the fullest. Includes many references to studies and research already done.

Grollman, Earl and Sharon Grollman. *Caring For Your Aged Parents*. Boston; Beacon Press, 1979.

A compassionate treatment of the problems children must face in dealing with their aged parents in today's society.

Mendelson, Mary. *Tender Loving Greed* . New York; Alfred A. Knopf, 1974.

An in depth investigation of over 200 nursing homes that exposes the exploitation of the elderly patients and the need for more humane treatment of the elderly.

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