

What Are Old People For?

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We are entering the most age-rich period in human history, and the graying of humankind offers us opportunities to adopt alternative perspectives and redefine issues and questions related to aging and longevity. William H. Thomas, a well-known geriatrician, questions current societal views of aging and the aged in his 2004 book, *What Are Old People For? How Elders Will Save the World*. Drawing on popular culture, history, science, and literature to explore what aging really is, Thomas presents elderhood as a developmental stage of life that is an essential part of a healthy society and is as important in its own way as childhood and active adulthood.

Thomas writes that there is a reason humans live decades after our productive years end, a reason obscured by references to “the golden years” and endless products designed to keep us young. He tells us “the truth is we need our elders to be elders” (p. 151). According to Thomas, old age is humanity’s greatest invention. However, accepting the predominant declinist assumption that aging is best viewed as a descent from youth precludes appreciation of the richness and complexity of old age. Thomas challenges us to see that while old age is a time of loss and decline, it is not only that. Thomas raises compelling issues that challenge gerontological nurses to reconsider our approach to practice, education, and research.

The War on Wrinkles

The current youth-obsessed culture has led millions to sacrifice their faces to the war on wrinkles. People fear wrinkles because of what they say about them. They tell our stories when we do not want our stories told. But wrinkles are us and we are them.

For a moment, let us reverse the war on wrinkles and replace it with wrinkle-promoting initiatives. What would it be like to live in a world that intentionally promoted those little lines at the corners of our mouths and eyes? Such a society would celebrate a face with character. Health resorts would pledge, “You will look 20 years older in just one week. You will have it all . . . wrinkles, crow’s feet, smile lines!” Preposterous? No less preposterous than suffering painful procedures to remove benign lines and gray hair that proclaim the exciting and demanding challenges of human longevity.

The Hidden Powers of Age

The loss and decline of old age are counterbalanced by a significant increase in the power of adaptation. The demands and limitations of aging require older adults to develop subtle and creative coping strategies. Yet adaptive abilities of older adults are regularly misinterpreted as substandard, as measured by the gold standard of youth.

We admire the long springy stride and coordinated smooth gait of youth. However, the tentative and inelegant stride of an older person is deceiving. You are witnessing the execution of a vastly evolved adaptation to age-related changes in strength, coordination, sensation, and reaction time. The older person’s feet are kept close to

the ground to maximize position sense, stance is widened to improve balance, and rate of steps is slowed to accommodate changes in reaction time. Keeping the human body upright and moving is a spectacular feat, especially in the eighth and ninth decades of life. Thomas writes, “In old age, the body instructs the mind in patience and forbearance while the mind tutors the body in creativity and flexibility” (p. 24).

Dynamic Interplay of Doing and Being

The physical decline that comes with aging actually clarifies the relationship between the old and the young. Dr. Thomas distinguishes between the *doing* orientation of the adult years and the tendencies of both the child and the older adult to experience life as *being* and limited in *doing*. *Doing* is what happens when individuals relate to and manipulate the material world around them. *Doing* is quantifiable. *Being* concerns itself with the intangible, the invisible, the meaning of experiences. Individuals talk of being in love, being yourself, being at peace. Children are masters at *being*-doing. When children play, they sail ships that cannot be seen, perform for audiences that cannot be heard, touch clouds that cannot be felt.

In old age, the physical body is transformed in ways that preclude the *doing*-being focus of adulthood. Elders transition to a life focused again on *being*-doing. Both children’s and older adults’ experience of time blurs the borders between past and present. Both drift easily from present to future through storytelling or daydreaming. Relationships and experiences are evaluated from the perspective of the quality of the emotions they elicit. *Being* matters very much. Adults appreciate the child’s right to play without the stress of adult responsibility, but society acts unjustly when it forces adulthood to extend into old age.

Senescence, “Growing Into Old Age”

Just as we recognize a transitional time of life called “adolescence,” Dr. Thomas proposes “senescence” as a similarly complex time. Senescence, like adolescence, is a time of letting go of the comfortable and familiar, and embracing something new and different. Adolescence is the transition to maturity; senescence is the transition to ripening.

Senescence prepares one for elderhood, the final stage of human development. The first sign of senescence is emerging awareness of the heavy burden of things one has to *do*. Gradually and tentatively, elderly adults begin to doubt the significance of their work and relationships. An understanding that one’s areas of *doing*, like work and family, are less distinctive than millions of other experiences develops intermittently. The insights slowly transform into a desire to leave behind “having to do” in favor of “wanting to do.” The important transition is the value on *being* rather than *doing*.

The Culture of Negativism

It has been said that the two places individuals never want to have to go in their lives are prison and a nursing home. According to Thomas, one might think entry into a nursing home would yield freedom from the expectations of *doing*, yet the opposite is true. Our long-term care system is founded on a negative mission: residents are best understood as failed adults—that is, staff are focused on “helping the residents compensate for their losses.” Thus, the millions of devoted individuals who work in the 18,000 nursing homes in the United States will always be limited in what they can achieve because they have an essentially negative mission.

Work in nursing homes revolves around the tireless efforts of good people, trying to return the residents they care for to the “glory of *doing*-being.” Success in a nursing home is determined by how well residents mirror the adults they used to be.

It is important and essential that we recognize the possibilities of life beyond adulthood. Yet, the notion of an elderhood with its own purposes and intents is absent, and *being* matters little or not at all. Thomas notes, “A society that cultivates the ability to bring a life worth living to the least among us enriches us beyond measure. When we honor those who can do nothing for others, we enlarge a capacity for compassion that serves all people” (p. 283).

The Three Plagues

The good news is that it is possible the elderly in nursing homes can enjoy a life worth living by addressing the root causes of their torment and suffering: loneliness, helplessness, and boredom. We, as a society, would probably all agree that loneliness causes more suffering and torment than congestive heart failure. Effective treatments for the latter exist, but what would be the most effective treatment for loneliness, or helplessness, or boredom?

Dr. Thomas proposes that these maladies, which cause the bulk of human suffering, reflect the failure of the nursing home environment and are impervious to the silver bullets of modern medicine. As a response to these plagues, Dr. Thomas developed The Eden Alternative in 1996, an approach to daily life that provides the proper antidotes to loneliness, helplessness, and boredom: loving companionship, opportunities to give care, and variety and spontaneity. The Edenizing movement continues today to reform the structure and practice of long-term care, so that old and young come together, eager and able to help and thrive, not just survive.

Reverse The Gerontological Paradigm

If we *reverse* the traditional gerontological paradigm and, like Dr. Thomas, see being unproductive and dependent as prominent values in elderhood, gerontological nursing practice and research would focus on concepts such as relaxation, rest, play, and creativity. Reversing the definition of normal or pathological physical aging would result in alternative propositions. Nurses would listen when elderly adults talk about death, let them speak, ask questions, and stimulate further thoughts. They would plan and organize quiet times for rest and meditation. Nurses would educate elderly adults and their families about senescence and actively identify and remove barriers to growth, and enlarge the capacity for growing into old age in institutions and communities. Society would see old age not as the source of its problems, but as a source of the answers that it needs. The truth is, old age is difficult, but it is essential because it teaches us how to live like human beings.

When society sets aside its worship of youth, aging can be seen as growth and development, full of complexity and contradictions. We are about to witness an immense triumph of longevity. As Thomas writes, “What name, other than success, could be applied to the modern ability to bring forth a generation imbued with the health, wealth, and wisdom not only to survive into old age, but also to thrive there?” (p. 82).

REFERENCE

Thomas, W.H. (2004). What are old people for? How elders will save the world. Acton, MA: VanderWyk & Burnham.