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Successful Aging in Comparative Religious Perspective

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Edited by Dr. Sarah Moses

I. Introduction

“Successful aging” is a seemingly undefinable phrase, lacking a general, overarching understanding in America as a whole today. To some, successful aging is secured by significant monetary gain; to others, it can only be assured through maintaining constant familial connection. Regardless of how one defines successful aging, one thing is certain: the challenge of aging and dying with dignity is a crucial ethical issue in America today. The elderly, our government, religious institutions, and society as a whole are confronted with the ethical issue of how to facilitate dignified aging, and to consider the elderly as dignified and valuable members of our society rather than as a problem.

Dr. Sarah Moses states in her innovative work, *Ethics and the Elderly*: “Whether the gains in longevity and the aging of populations can be experienced as a social good rather than a crisis and whether older people can maintain dignity in old age depend largely on whether society responds creatively to the ethical challenges of long-term care” (36). I agree with this statement—aging with dignity and personal successful aging can be a reality. But in order for this to be a reality, society as a whole must make considerable ethical strides and changes. In particular, there are three ethical areas which should be prioritized in order to ensure aging with dignity: acknowledging the elderly’s capacity for wisdom, promoting respect and familial care, and securing housing and community involvement. The religious ethical traditions of Christianity, Hinduism, and Judaism offer insights on these dimensions of old age, which can be relevant to shaping contemporary policies and programs.

Along with the study of religious texts and traditions, my community involvement at Canterbury Crest in Oxford, Mississippi has allowed me to witness and understand these three ethical dimensions of old age. Canterbury Crest, an independent living facility for the elderly, is designed for low-income elderly individuals ages 62 and over, or for the “physically handicapped or mobility impaired” (“Canterbury Crest”). Most of the individuals I visited every other week have incomes that do not exceed 30% of the median income in the area, and they are required to pay 30% of their monthly income in order to live at the facility (“Canterbury Crest”). Canterbury Crest is classified as government-subsidized housing, with more than two hundred thousand of these units in
America today. The units target elders in America who make very little money and have few other housing options (Libson 10). With this personal experience, it became easier for me to understand the conditions in which the elderly live—specifically the poor elderly—and some of the ethical dilemmas that arise in an aging population.

II. America: An Aging Society

First and foremost, it is essential to understand exactly what we are experiencing in terms of the aging demographics in modern-day America. America’s elderly population is growing at an astonishing rate—the average life expectancy is continuing to rise, and fertility continues to decline (Wilson 6). This pattern of decline in fertility and rise in life expectancy is a new phenomenon that will define the global population in the 21st century (Wilson 8).

For example, the aging population has skyrocketed in the past decade, with 3 million people aged 65 or older in 1900 compared to an astounding 41 million in 2011 (Moses 14). Continuing with this trend, the number of elderly individuals over the age of 65 is projected to almost double by 2030—increasing the elderly population to an overwhelming 70 million (Libson 9). It is obvious that the ethical issues concerning aging are especially poignant today with our nation’s elderly population escalating in staggering numbers. This is a phenomenon that will potentially impact each United States citizen, and therefore we cannot disregard the importance of discussing aging and the ethical problems that arise with it (Moses 177).

Not only are the elderly in our population living longer, but they are also living healthier. With continuous medical advances, the longevity of the elderly continues to increase, reflecting improvements in the overall health of the nation:

“The advent of sanitation and other public health measures sharply reduced the likelihood of death from infectious disease, especially in early childhood, and clinical advances dramatically reduced the mortality of childbirth and traumatic injuries... Medicine found ways to cut the mortality of heart attacks, respiratory illnesses, stroke, and numerous other conditions that threaten in adult life.” (Gawande 26)

Along with advances in health and medicine, the elderly are also becoming more active members of society, and exhibiting greater potential than ever before. For example, researchers at the Max Planck Institute for Human Development discovered that even individuals in their sixties and seventies have “considerable intellectual and cognitive resources” (Baltes 33). Therefore, although our population is aging significantly, they are living longer with better health, and with better cognitive and intellectual capability than ever before.
In sum, although there has been a significant increase in longevity and in population aging, we should not immediately deem this situation as a crisis (Moses 20). Advances in medicine and health have given us the opportunity to delay illness and chronic disability in old age, and have led to “extended vitality and activity” in the lives of our elderly, both physically and mentally (Moses 23). We should not see the growing number of elderly individuals as a problem, but rather focus on their capacity to age with dignity, and to promote respect for the aging population.

III. America’s Attitude Toward the Elderly

In this context, it is important to understand the American cultural attitudes hindering the possibility for aging and dying with dignity. Today, society approaches the growing elderly community with “ageism”: we ignore the social and financial issues involved with old age, we believe that our society has little use for “nonproducers,” and we attribute multiple negative stereotypes to the aging population (Butler 7). For example, our very language tends to evoke bad attitudes toward growing old; we label the elderly as “fading fast,” an “old crock,” “over the hill,” or “biddy” (Butler 2). Furthermore, society in general tends to have an overarching negative or disinterested opinion of the aging population, as Butler explains in his work *Tragedy of Old Age in America*: “current views of old age represent confusions, misunderstandings, or simply lack of knowledge about old age. Others may be completely inaccurate or biased, reflecting prejudice or outright hostility” (Butler 7). These negative views of our elderly population have hindered our capacity to ensure their dignity, even in the medical field.

A perfect example of how American society ignores the opportunity to positively impact the elderly community is in geriatrics. This medical specialty dealing with treating the elderly has consistently been treated as an insignificant branch of medicine. Dr. Atul Gawande vocalizes the desperate need for society to change in order to improve the situation of the aging population within the medical field by relating a true story about Chad Boul, a geriatrician at the University of Minnesota. Boul was a lead investigator in an experiment with 568 men and women seventy years of age or older who were suffering through health and cognitive problems in order to determine the importance of geriatrics in the lives of the elderly (Gawande 44). Half of the group was treated by regular physicians, and the other half by a team of geriatricians. The results of the experiment are fascinating:

“Within eighteen months, 10 percent of the patients in both groups had
died. But the patients who had seen a geriatrics team were a quarter less likely to become disabled and half as likely to develop depression. They were 40 percent less likely to require home health services.” (Gawande 44)

Shortly after this experiment, however, the University of Minnesota closed their geriatrics division because they “simply could not sustain the financial losses” (Gawande 45). This is a striking reality—regardless of the positive impact geriatrics has on the elderly population, it is simply not a priority in America today. In fact, fewer than three hundred doctors will be licensed geriatricians this year in the United States (Gawande 52).

IV. Religious Perspectives on Wisdom and the Elderly

In reconsidering negative views of the elderly in American society, one source of alternative viewpoints is religious traditions such as Christianity, Hinduism, and Judaism. It is important in comparative religious ethics to see the way certain ideals can cross cultures and traditions to tap into widely shared human values. Because aging is a common ethical issue, it is understood and approached by different religious traditions. Christianity, Hinduism, and Judaism tackle this subject in their belief systems, contemporary practice, and in sacred religious literature. Although the groups have different approaches to the ethical and moral issue of aging, there is one common element addressed: the association of wisdom with age. We can therefore apply these religious traditions to modern American views of aging, in order to further recognize the elderly’s capacity for wisdom and intellectual growth.

First, the Christian ethical tradition offers insights that could creatively engage America’s attitude toward the elderly. We tend to quickly deem the elderly as unable to continue to function intellectually, but this stereotype is challenged by sources in the Christian religious tradition. For example, in John 3.4, Nicodemus, an old man, comes to speak to Jesus and asks him: “How can anyone be born again after having grown old?” As Moses observes, Jesus replies that old age cannot hinder one from entering into God’s kingdom (100). Furthermore, the New Testament gives examples of older persons who have retained knowledge and wisdom throughout their old age. For example, the Gospel of Luke describes the story of Elizabeth and Zechariah, who continue to serve God and act as wise members of the community even to an old age (Moses 98). The Christian religious tradition continues to view the elderly as wise and valuable to the Christian community. Even in old age, the New Testament presents old people as being able to respond to God’s call of discipleship and wisdom.

Second, Hinduism also emphasizes the elderly’s capacity to grow in wisdom and continue to
function cognitively. Anthropologist Sarah Lamb noticed this ethical value during fieldwork in India, where the elderly readily acknowledge the reality of death and dying (Lamb 41). A Hindu elder is recognized as a wise person who can understand the transience of this life, and can make aging and death more meaningful (Lamb 134). She also noted the Hindu principles based on the elderly developing themselves not only emotionally and mentally, but also in spiritual wisdom (Lamb 131). In the Hindu tradition, the elderly are not seen as merely stagnant objects that cannot grow, but as individuals who can foster their wisdom and intelligence throughout the last years of life. In order to grow mentally and spiritually, the elderly in Hinduism engage in thought-provoking activities, including meditation, reading sacred scriptures, and speaking with a guru (Lamb 131).

Similar to Christianity and Hinduism, Judaism emphasizes the elderly as being wise, and Jewish texts offer further insights for improving the way American culture understands the aging population’s cognitive skill. In Jewish rabbinical tradition, the elderly are known for possessing great wisdom. From Hillel the elder to Rabbi Judah the Patriarch, the traditional editor of the Mishnah, teachers equate old age with an endowment of understanding (Harris 97). For example, in Berakhot 1.5, R. Eleazar announces that although he is as wise as a seventy year old man, he failed to understand something: “As R. Eleazar said to Azaraiah: ‘Lo, I am like to one who is seventy years old, yet failed to understand (prove) why the going forth from Egypt should be rehearsed at night’” (Harris 97). Furthermore, early rabbinical literature elaborates that even if someone were young, if they possessed remarkable intelligence it would be as if they were seventy years old (Harris 97). Therefore, we can see that old age is associated with having great wisdom. Moreover, the Mishnah equates the capability of being in a leadership position as requiring experience that comes from old age: “literature of that era normally associates eldership with old age. In this way Mishnaic passages legitimate leadership roles that ancient societies bestowed upon the elderly” (Harris 98). Thus, Rabbinic Judaism did not consider the elderly as unable to be intelligent or wise as we tend to in American society. Instead, Jewish tradition connects old age with wisdom.

In line with these themes of fostering wisdom and spiritual growth, I observed the residents at Canterbury Crest as encouraged to grow rather than as mentally limited. Mrs. Sarah, a resident at Canterbury Crest, loves to read. Regardless of her chronological age, she continues to further her intellectual development through reading. While unsure of her ability to grasp the rules, I also taught Mrs. Sarah how to play Scrabble. Not only did she learn how to play very quickly, but she actually enjoyed learning. From this
saw the importance of not deeming the elderly incapable of learning or possessing wisdom. The residents at Canterbury Crest are examples of what it means to not only retain wisdom, but also to have the capability to learn new things. Similar religious views of old age, the residents at Canterbury Crest are capable of fostering intelligence and can further develop wisdom in their last years of life. It is thus vital for American culture to encourage the elderly to utilize their intellectual capabilities, and to continue to learn and grow even until death.

Related to that perspective, I also encountered wisdom acquired by a long life at Canterbury Crest. “Never hike your skirt up,” Mr. Mike said to me as I walked out of the door of Canterbury Crest. “If you’re thirsty, just get some water!” he laughed as we were playing dominoes. “He’s always got a saying for everything,” his wife, Mrs. Sarah, said. Hearing Mr. Mike’s wise and witty words have been something I look forward to every week visiting Canterbury Crest, and he always has advice to impart before I leave the facility. Regardless of his age or physical disabilities, Mr. Mike is always ready with a sharp-witted response. Just as in Jewish rabbinical literature, it is important to see that the elderly have the potential of being wise—their insights and wisdom may deteriorate, but do not necessarily disintegrate with age.

V. Religious Perspectives on Family and Respect for the Elderly

The ethical framework in these three religious traditions can also be applied to how the elderly are respected within the family, including at death. It is common for American society to view the elderly as non-contributing members of our society, and therefore unworthy of respect. However, a common thread in these three religious traditions places direct emphasis on the necessity to respect and care for the old, especially within the family unit.

Throughout the New Testament, and even in the Christian community today, it is essential that the elderly are respected as equal members in the family of believers and as members of the Christian Church. The Christian religious tradition views older people as members of a close-knit family, and as disciples who continue to grow in Christian fellowship (Moses 126). This respect for the elderly is stressed even today, as Pope Francis declares that old age is a “vocation,” in which the elderly have the ability to continue to have Christian beliefs, and should be respected and seen as equal members of the Church (Francis, “The Elderly”). As an example, Pope Francis discusses the story of Simeon and Anna, who continue to serve as a priest and prophet even in old age (Francis, “The Elderly”).

The elderly are respected in the Christian community, and are received
with “equality and mutual love” (Moses 111). This, in turn, causes the Christian community to not only respect the elderly, but support them spiritually, psychologically, and emotionally (Moses 117). This “vocation” of the elderly as disciples of God and participants in Christian fellowship allows them to contribute to the Christian community; and Christians emphasize that they should be respected, regardless of their frailty (Moses 125). Pope Francis highlights this demand for respect for the elderly in the Christian community. He claims that the younger generations must respect the “wisdom of the elderly” and should not consider them burdens or “throw them away.” Pope Francis even views not respecting the elderly as a sin, and insists the Church should foster the elderly’s active involvement as members of this universal family of believers (Francis). Biblical tradition presents the family as responsible for honoring and respecting the old. For example, in Mark 7.5-13, Jesus condemns the Pharisees for failing to provide for their aging parents. Also, in Mark 10.19, Jesus emphasizes the importance of honoring father and mother when speaking to the wealthy man (Moses 91). Therefore, Christian tradition continues to emphasize the role of the family in respecting the old. This is a needed ideal American society can emphasize today—it is the family’s responsibility to care for and respect the old until death.

The Hindu tradition also pronounces “the principle of respect for elders and parents” as a prominent theme (Lamb 130). Due to their great wisdom and spiritual responsibilities, the elderly are not only to be respected, but demand constant responsibility from the family unit:

“There is a strong, pervasive sense in India that the most normal, culturally expected, and proper way to manage aging is within the context of the family, and that multigenerational joint-family living represents a quintessentially Indian and Hindu way of life, morality, and tradition.” (Lamb 132)

Children in Hindu families must not only respect their elders, but provide for their families in order to “repay the inerasable debts” to their parents because of all the provisions, material and emotional, given to them while they were growing up (Lamb 132). Children are required to support their parents in every way possible: food, physical belongings, a place to live, and emotional support throughout the lives of their elderly mothers and fathers (Lamb 134).

Finally, Judaism has a similar view on the importance of filial respect. The Talmud and Mishnah record the significance of devotion to parents (Harris 96). Harris continues to explain the demand for children to honor and respect their elders:

“Rabbinical teachings... never questioned the wisdom of elders and the absolute
nature of filial responsibilities. Children owed a debt of gratitude to parents and God, and therefore were impelled to show reverence and service to each. However, the rabbis taught that filial respect for parents, though unconditional, remained a religious duty for children.” (Harris 103)

Not only were children required to obey their elderly parents, they did so unconditionally as a religious obligation. Jewish children willingly gave respect to their parents by assisting them in their old age, respecting them for their wisdom and preserving their dignity (Harris 102).

I also viewed examples of familial respect at Canterbury Crest, but not to the same degree as in the Hindu tradition. I have seen sons and daughters visit with their elderly parents, and they always warmly hug them before they leave, allowing me to see the familial respect and love for some of the residents in the facility. However, the independent living of the Canterbury Crest residents differs from the worldview of traditional Hindu religion. In Hinduism, the elderly’s aging process is fulfilled within “the context of the home” (Lamb 131). Although respect for the elderly is obvious at Canterbury Crest, the lengths to which the residents’ children go to respect their parents are not as stringent as within an ideal Hindu family context.

The common theme of steadfast reverence for the elderly in Judaism is a valuable ideal, and I have seen some of this in my observations at Canterbury Crest. As mentioned earlier, familial respect and presence is obvious at the independent living site—some of the residents babysit their grandchildren during the day and visit with their children in the afternoon. However, others have families who do not visit them or rarely participate in any active way in their lives. Being deprived of family interaction is a sad reality for many of the residents, and reveals the importance of Jewish principles of unwavering respect.

VI. Taking Action: Adequate Housing and Community Involvement

Finally, not only can we utilize these religious traditions in order to add important perspectives in the public conversation concerning successful aging in America, but there are concrete policies and programs we can implement in order to accomplish this, especially in terms of improving housing and community involvement for the elderly and in long-term care. With the expanding aging population, several moral problems arise concerning how elderly housing and nursing homes have predisposed prejudices against the old. The tendency to view the elderly with prejudice causes the old to “disappear behind the numbers and eventually behind the walls of the institutions developed to solve the problem of their care” (May 45). Within these facilities, professional caregivers function at some “emotional distance”
from their patients (May 44). It is necessary for society, and especially health care providers, to approach aging in a more positive way, and to attend to the old “seriously enough as moral beings” (May 43). Two good examples of how to approach the challenges of housing and community involvement in America today are the Community of Sant’Egidio and the Green House Project. These are two proven ways to provide a better living environment for the old and to provide more community programs in order to ensure dignified aging and dying.

First, the Community of Sant’Egidio is an example of a church-based organization that fosters ethical treatment of the elderly. It is comprised of a large community of sixty thousand members worldwide (Moses 38). This community program is run mainly by lay people in the church, and gathers in prayer and provides outreach programs for the elderly and the poor. This Roman Catholic organization allows the elderly to be a part of their community and develop friendships with each other: “Sant’Egidio thus draws on the mutuality of friendship to guide both its internal life and its outreach to the poor. For Sant’Egidio, the emphasis on friendship has resulted in service programs shaped by a distinct spirit of personalism” (Moses 41). Sant’Egidio is a great example of how to foster friendship, individualism, and faith in the elderly community, and could serve as a model for similar organizations in America today.

Second, an excellent example of better housing for senior citizens is the Green House Project. This is a housing system developed by Bill Thomas, who sought to fight the “Three Plagues” of the nursing home: “boredom, loneliness, and helplessness” (Gawande 116). He first began this journey to better elderly housing by introducing plants and animals into the nursing home environment (Gawande 116). This brought more life into the home, brightening the lives of the elderly living there:

“The most important finding was that it is possible to provide them with reasons to live, period. Even residents with dementia so severe that they had lost the ability to grasp much of what was going on could experience a life with greater meaning and pleasure and satisfaction.” (Gawande 125)

Because of the incredible success of bringing animals and plants into the nursing home, Thomas then developed the Green House Project, a home built for frail elderly people who cannot live independently (Moses 60). These houses are built for ten to twelve residents, and are home-like spaces with a living room, an open kitchen, and a dining area with one large table around which residents can eat together (Moses 64). This type of housing allows the elderly to live as autonomously as possible, without schedules or daily requirements, and in a less institutional setting. The residents are cared for and
loved by the staff, and are able to live there happily and with dignity.

VII. Conclusion

In conclusion, the elderly in America are not insignificant, burdensome members of our society; they are valuable individuals, capable of making a positive impact in their community. It is the responsibility of our society to ensure that the elderly age with respect, and ultimately die with dignity. Although there are multiple ethical issues in need of improvement regarding the elderly, I chose three in particular: recognizing the elderly’s inherent wisdom, familial respect, and housing. Furthermore, religious texts and traditions, specifically Christianity, Hinduism, and Judaism, can be utilized for insights related to improving the condition of an increasingly aging population. These ideas are not simply abstract or unattainable, but there are concrete possibilities that have been and can be further instituted in America today in order to improve the condition of aging and dying. Examples include the Green House Project and the projects of Sant’Egidio. An elderly individual has the capacity to make contributions and to be active members of society, but this is not to be done alone: “older people’s exercise of these qualities of agency is done in relation to and in partial dependence on others rather that in isolation” (Moses 11). It is the duty of a just society to ensure the elderly population continues to remain engaged with their community and family—and to do so with dignity—and that is successful aging.

References


Pronunciation

