What is CARDI?
The Centre for Ageing Research and Development in Ireland (CARDI) is a not-for-profit organisation developed by leaders from the ageing field across Ireland (North and South) with support from The Atlantic Philanthropies. CARDI focuses on promoting research cooperation across sectors and disciplines and influencing the direction of research on ageing and older people.

CARDI’s mission is to advocate for and advance the ageing research agenda by identifying, coordinating, stimulating, and communicating strategic research on ageing and older people as a means to improve the lives of older people in Ireland especially those who are disadvantaged.

CARDI’s all-island approach focuses on:
- Identifying and establishing ageing research priorities relevant to policy and practice
- Promoting collaboration and cooperation to build an ageing research community
- Stimulating research in priority areas to inform policy and practice
- Communicating strategic research to raise the profile of ageing research

CARDI’s work includes:
- Grants Programme to stimulate inter-disciplinary research into ageing issues across the island of Ireland
- A Policy Support Programme to help develop greater links in policy areas between the research and policy community
- Communicating the latest news, research and funding opportunities relating to ageing research

CARDI’s website www.cardi.ie provides access to an extensive library of ageing research and policy reports, research contacts, funding opportunities, key events and the latest news on ageing research and older people.
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Foreword
We are growing older both as individuals and as an island.

Ireland, North and South, is witnessing a transformation in the meaning and experience of later life.

Ageing is increasingly a focus of government policy, service providers, the research community, media, and of course older people themselves.

Unfortunately, too often we see a focus on the “cost and burden” of an ageing population, rather than viewing ageing as a measure of our success and recognising the positive contribution older people make to society both economically and socially.

Questions are now being raised about the stereotypical perceptions of older people and the extent to which such perceptions feed into negative policy, practice, service provision and impact on our own aspirations.

CARDI commissioned this paper to provide an overview of how theories of ageing have developed and to illustrate how different theories influence approaches to welfare and shape public policy and practice in both jurisdictions in respect of age. This discussion paper is also intended to assist those involved in policy development to recognise assumptions and attitudes which influence and shape the lives of older people in Ireland, North and South.

Planning for the future is in everybody’s interest and through this paper we intend to stimulate discussion amongst key stakeholders on developing the evidence base required in moving forward with our increasing ageing population.

I hope this paper will contribute to discussions on policy development in showing how theories of ageing can be relevant and helpful to the wide range of stakeholders involved.

Finally, I would like to thank Dr. Maria Pierce and Dr. Virpi Timonen of the Social Policy and Ageing Research Centre, Trinity College Dublin for their work on this most important and timely discussion paper.

Dr Roger O’Sullivan
Director
Preface
Age-related social policy in Northern Ireland and the Republic of Ireland is over a century old. Social policies for older people on the island of Ireland have achieved significant scale and impact in the post-Second World War era.

In the 21st century, a vision for older people has been outlined in both Northern Ireland (NI) and the Republic of Ireland (ROI). In NI, as outlined in *Ageing in an Inclusive Society*, the vision is to "ensure that age-related policies and practices create an enabling environment, which offers everyone the opportunity to make informed choices so that they may pursue healthy, active and positive ageing" (OFMDFM, 2005: 13). In the ROI, there is a vision "of an Ireland which provides the supports, where necessary, to enable older people to maintain their health and well-being, as well as to live active and full lives, in an independent way, in their own homes and communities for as long as possible" (Government of Ireland, 2008: 60).

Northern Ireland and the Republic of Ireland are facing similar social policy challenges in their attempts to secure welfare for older people, particularly in the areas of pensions and long-term care for older people. These challenges are addressed in this paper in the context of theories of ageing.

A necessary precondition for understanding social policy as it relates to older people is to understand ageing (Walker, 2009). Theories of ageing can shed light both on the experience of ageing and the surrounding social contexts, including the policy context. Gerontology (the scientific study of ageing) has led to a wealth of data about ageing and theorising about ageing has evolved into a rich, diverse and complicated field.

This discussion paper draws attention to and encourages discussion on the relevance of theoretical debates on ageing for those stakeholders involved in the process of formulating and developing policies for older people in NI and ROI. It begins with the question: "why are theories important for social policy?" It then introduces readers to the theories of ageing and sketches some of the multiple and competing ways in which ageing is currently constructed in NI and the ROI at the macro level. The theories and constructions are in turn related to the overarching features of pensions policy and long-term care policy in the two jurisdictions.

The paper concludes with a number of questions to stimulate discussion on how the theories of ageing can influence those involved in policy development pertaining to older people.

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1 Pension legislation was introduced in 1908.
Chapter one

Introduction
This introduction argues that all social policy (including social policy for older people) is based on theory at some level. The discussion paper adheres to the simple but accurate definition that theory is “attempts to explain”\(^2\). Everyone involved in policymaking, individually and collectively, is engaged in “everyday theorising”. They hold articulated or unarticulated ideas about the behaviours and needs of people and what direction social policy could take.

Why are theories important in investigating social policy? The answer to this question is two-fold (O’Brien and Penna, 1998). There is no such thing as purely empirical policy. All social policy (including social policy for older people) is based on theory at some level. Bengtson et al. (2009: 4) define theory simply as “attempts to explain”. In this discussion paper, we adhere to this simple but accurate definition that also serves to demystify theory. Our premise is that theory is not an exercise conducted solely by academic professionals. As Marshall (2009: 573) points out, “to invoke a theoretical perspective is to say “look at it this way””. All people, individually and collectively, hold theories, articulated or unarticulated, about the behaviours and needs of people and what direction social policy could take. That is, they say “look at it this way”.

The general population, like those involved in policymaking, are seldom consciously aware of the different theories that they hold about social policy or about the details of these theories. As a matter of routine, they may accept, reject or modify a theory without any reflection on the exercise of theorising in which they are engaged. They may not know or be aware of how theories have been put together, of the assumptions upon which they are based, or of which theories may be useful in explaining different situations and experiences (O’Brien and Penna, 1998). Consulting and referring to theoretical frameworks is not typically a prominent part of the policymaking process. As such, formal theories of ageing have not significantly shaped ageing-related policy.

However, to understand social policy and social welfare, we need to be conscious of theory in two senses (O’Brien and Penna, 1998). First, it is necessary to be aware of the everyday theories and assumptions within which particular policies are formulated and implemented. Second, it is necessary to be aware that different theories bring different dimensions of the effects and consequences of policies into view. In this sense, theory does of course impact on policy. Many of the assumptions that underpin or shape theories of ageing have also impacted, or could in the future impact, on policy for older people.

\(^2\) Bengtson et al. (2009: 4)
This discussion paper is important for three reasons:

(1) Social policy and welfare services for older people are built on theoretical foundations. Indeed, Walker (2009) considers that understanding ageing is a necessary precondition to understanding social policy. Thus, understanding social policy for older people in NI and the ROI, which is complex and multi-faceted, necessitates an understanding of theories of ageing. This discussion paper presents an overview of the multiple perspectives that are evident today in relation to theorising about ageing. We have selected for closer inspection the theories of ageing that are of greatest relevance to understanding, and potentially reforming, approaches to the welfare of the older populations in ROI and NI.

(2) It sketches some of the multiple and competing ways in which ageing is constructed in NI and the ROI at the macro level. Including social constructions of ageing is important because it highlights that ageing is inextricably linked to social interaction and power relationships in society. It demonstrates that ageing is not only a biological process, but also socially determined. It helps policymakers and others involved in policy development to see that social policy has a role to play in establishing the taken-for-granted aspects of ageing.

For example, role and activity theories that were prevalent in the 1940s and 1950s were based on the assumption that inactivity is normal for older people and a problem for the individual because of the impact on their social and psychological well-being. The social policy response was to encourage older people to either maintain their existing activities or to find new ones to replace the ones that they had lost (Pierce, 2010). By contrast, the assumption underpinning the “structured dependency” thesis is that “society creates the framework of institutions and rules within which the general problems of the elderly emerge and, indeed, are manufactured” (Townsend, 1981: 9). This evokes a very different policy response, one that is more focused on higher level structures such as institutional care policies and settings. In this discussion paper, we pay particular attention to the parallels between the assumptions that are embedded, or could become embedded, both in theories and within policies.

Different theories bring different dimensions of the effects and consequences of policies into view. In this sense, theory does of course impact on policy.

3 Readers who are interested in an in-depth discussion of theories of ageing are referred to the Handbook of Theories of Aging (Bengtson et al., 2009).
This paper also applies theories of ageing to social policies for older people in NI and the ROI. We do not approach theories as causes of policy as it exists at the moment but rather:

- As lenses that can help to explain why policies are the way they are. Theories can help to view and explain different phenomena more clearly and simply. In other words, we can apply theories to make sense of policies, to explain why they are the way they are, and the kind of impacts they have.
- As signposts that may indicate future directions for policy, drawing on broader thinking on ageing and older people than has previously been the case. We can approach the very dense forest of theories with a view to extracting theories that have the biggest potential to change policy.

Social policy is concerned with practical solutions to practical problems (Spicker, 1995). Most theories of ageing are difficult to put into practice to the point of deriving individual social policies from them. Moreover, theories of ageing are often seen as being detached from the pressing need for practical responses to the problems facing older people (Bengston et al., 1999). Some theories of ageing can be characterised as prescriptive. In relation to social policy, this means that there are theories of ageing that put forward practical proposals for reform of social policy. They suggest how social policy for older people ought to be. This might range from prescribing a radical reform of a social policy for older people (e.g. a move from social assistance model of financing care provision to one based on long-term care insurance) to prescribing a modification to an existing social policy.

However, not all of the social theories of ageing that we present use a prescriptive framework. For example, post-structuralist perspectives of ageing seek to promote democratic and inclusive forms of policymaking in relation to ageing and older people, but do not wish to see their own ideals imposed upon others. We include non-prescriptive as well as prescriptive theories of ageing in our analysis, as they all offer critical insights about signposts for social policies for older people.
Chapter two

Theories of ageing
Chapter Two outlines the theories of ageing that are of greatest relevance to understanding, and potentially reforming, approaches to the welfare of the older populations in ROI and NI. In addition to a cursory review of biological theories of ageing, we summarise four key psychological theories and explore in greater depth nine significant contemporary social theories and theoretical frameworks:

1. Theorising on time, age and ageing.
2. The life course perspective.
3. The political economy of ageing perspective.
4. Cumulative advantage and disadvantage theory.
5. Feminist approaches.
6. The moral economy of ageing perspective.
8. Humanistic or cultural theories.

This discussion paper divides theories of ageing into three broad categories, namely:

- Biological theories
- Psychological theories
- Social scientific theories

Each theory brings a different perspective. They make different assumptions, use concepts in different ways, pose different questions and arrive at different explanations of the ageing process. Furthermore, there is much excitement about interdisciplinary theories of ageing that draw on concepts, ideas and data from two or more different disciplines. At the moment, however, these interdisciplinary theories are not sufficiently well developed to allow a discussion in their own right.

2.1 Biological theories of ageing

Biological theories address the processes of ageing at organism, cellular and molecular levels. There is no single all-encompassing theory to explain the complex processes that occur. Rather, biological theories can generally be summarised into two main groups: stochastic theories and programmed (or developmental-genetic) theories (Christafalo, 1996).

Stochastic theories postulate ageing to be primarily the result of random damage. They emphasise the environmental assaults that gradually cause things to go wrong. Examples include wear and tear theory, which holds that tissues and cells have vital parts that wear out; and somatic mutation theory, which postulates that genetic mutations occur and accumulate with age causing cells to deteriorate and malfunction.

Programmed theories suggest that ageing is a continuation of the biological processes that regulate childhood growth and development and that ageing is a genetically predetermined process. Examples include neuro-endocrine theories, which conjecture that gradual decreases in the function of nerve cells and associated hormones are central to the process of ageing; and immunological theories that attribute ageing to decline in the immune system (Effros, 2009).
2.2 Psychological theories of ageing

A move away from the conventional definition of ageing as a period of decline and loss of cognitive functioning has been an important historical change in the psychology of ageing.

The study of ageing in psychology is complex as it is a field comprising several subfields and topic areas. Across these different domains, psychological theories of ageing seek to explain the multiple psychological changes in individuals in the middle and later years of the lifespan (Bengtson, Putney and Johnson, 2005). It is not possible to provide an overview of the complex range of psychological theories here. Instead we consider a small number of psychological theories of ageing, selected on the basis of their relevance to policy formulation.

A move away from the conventional definition of ageing as a period of decline and loss of cognitive functioning has been an important historical change in the psychology of ageing (Baltes, Freund and Li, 2005). The lifespan development theory, one of the most notable explanatory frameworks in the psychology of ageing, encapsulates the move towards a conception of ageing as multidimensional and multidirectional. It is one that includes the possibility of growth, recovery and learning of new skills at older ages (Baltes, Freund and Li, 2005). This approach considers the complex processes of psychological development throughout the life of a person. It holds that the sequence of developmental stages which a person passes through during his or her lifetime is determined by both biological and social processes. This in turn is reflected in developmental differences among, and variability between, individuals. It also proposes that psychological development takes place throughout the entire lifetime including old age. The lifespan approach focuses primarily on developments at the individual level.

When an older individual is faced with declining resources because of age-related losses, they can engage in a process of selection by selecting goals that promote a fit between personal needs and preferences, demands and resources.
Lifespan development theory has given rise to an overall psychological theory of successful ageing, called **selective optimisation with compensation theory** (SOC) (Baltes and Baltes, 1990). SOC was devised to provide a general framework to explain how individuals manage adaptive or successful (social, cognitive and physical) development in later life. This model is based on the assumption that throughout their lives, individuals seek to successfully manage gains and losses through three fundamental mechanisms or strategies: selection, optimisation and compensation. When an older individual is faced with declining resources because of age-related losses, they can engage in a process of selection by selecting goals that promote a fit between personal needs and preferences, demands and resources. Optimisation reflects the view that older people acquire, refine and invest resources in the pursuit of the selected goals. Compensation refers to the resources that older people acquire and invest into selected domains of functioning to counteract loss or reduction of capacities. According to SOC, the lifelong process of selective optimisation with compensation allows people to age successfully, that is, to engage in a set of life tasks that are important to them despite restrictions due to a reduction in energy and function (Bengtson, Putney and Johnson, 2005; Schroots, 1996). There is therefore scope for adjustment and learning in older age.

Life span development and SOC theories have been extended by the **theory of cognitive plasticity**. It holds that when human development is seen as representing the individual’s lifelong capacity for adaptation, the notion of “plasticity” becomes central. In other words, development is assumed to be modifiable or “plastic” during all phases of the life span, including old age (Willis, Schaei and Martin, 2009). Central to this theory is the consideration of plasticity at multiple levels: in the brain, at the behavioural level and at the socio-cultural level. Recent research on plasticity at the behavioural level highlights the possibility for learning in older age and the role played by cognitive training interventions in bringing about behavioural improvements. Consideration is also being given to the impact of culture on developmental changes in older age.

The **convoy model of social relations** provides a theoretical base to describe, explain and understand the pervasive influence of social relations on health and well-being (Antonucci, Birditt and Akiyama, 2009: 247). The social network provides a foundation from which different types of social supports (aid, affect and affirmation) can be provided. The degree to which support is evaluated as satisfactory or dissatisfactory is also important. The convoy model suggests that social relations influence both physical and psychological health and recognises both the positive effects and the potential for social relationships to be negative and to have negative effects. Antonucci et al. (2009) suggest that there is the potential to develop prevention and intervention programs drawing on the convoy model that would maximise the health and well-being of the older person. The convoy model bears some
similarities to the notion of “linked lives”: individuals “nested” within families and social institutions (see Marshall, 2009).

2.3 Social theories of ageing
Most of the analysis of theories of ageing in this discussion paper pertains to social theories of ageing. Different schemes have been developed by social gerontologists to organise social theories of ageing (Bengston et al., 1997; Hendricks, 1992; Lynott and Lynott, 1996). We have selected nine significant contemporary social theories of ageing, but we do not champion any one theory. A limitation of this discussion paper is that it does not provide readers with an understanding of the evolution of social theories of ageing, and, therefore, the socio-historic context in which they have developed. A theory of ageing does not stand alone. Theory is a cumulative exercise. Each successive theory builds on and reacts to what has gone before (Hendricks and Powell, 2009).

1. Theoretical reflections on concepts of time, age and ageing

Human ageing is too rich to be reduced to chronological time and concepts such as chronological age, life expectancies and old age dependency ratios. There is, therefore, a need to reflect on the use of concepts such as these and to embrace other perspectives of time such as intrinsic time, that is, the personal and collective meanings given to time.

Ageing is often equated with chronological age, which has become an important instrument for regulating many welfare entitlements. The vast majority of social transfers for older people are currently based on chronological age, although some eligibility criteria also take into account income (means-testing), prior contributions (social insurance payments) and need (e.g. care needs). Theoretical reflection on the concepts of time, age and ageing, as provided by Baars (2009), is thus important and relevant to this discussion paper. Chronological time has become an important perspective in the study of ageing. However, Baars (2009) argues that defining ageing solely in terms of chronological age is problematic as it does not address differences that exist between people of the same age.

Addressing ageing solely in terms of chronological age can have limitations, for instance when it comes to pensions. Baars (2009: 94) highlights the paradoxes and unfortunate conflicts facing older people who are confronted with the rules of institutions and organisations that combine chronological age and participation or entitlement in areas such as employment, social services and care.

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A theory of ageing does not stand alone.

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4 Presenting an overview of social theories of ageing is particularly challenging as they are “extraordinarily complex and fluid” and because of the different epistemologies that researchers use in approaching their topics (Bengston et al., 2009: 14).
6 Social transfers are transfers in kind to individual households from government units, including social security benefits and reimbursements, or social assistance benefits.
2. The life course perspective

The life course perspective directs attention to the connection between individual’s lives and the historical and socio-economic context within which these lives unfold.

One of the most widely cited social theories of ageing is the life course perspective (LCP) (Dannefer and Uhlenburg, 1999, Dannefer and Kelley-Moore, 2009). As a concept, the life course refers to “age-graded life patterns embedded in social institutions and subject to historical change” (Marshall and Mueller, 2002: 2). As a theoretical perspective, it provides a framework for examining generational categories of ageing and the shifting of generational categories over time, the ways in which generational categories of ageing are embedded within culture and shaped by structural processes of social change (Marshall, 2009). The LCP also enables analysis of the diversity of ageing experiences by examining the different trajectories of transition from adulthood to old age for different social groups. The key principles and concepts underlying the LCP can be used to reassess existing policy. In contrast to the predominantly individual-focused lifespan approach, the life course approach highlights macro-level structures and processes such as societal roles, pathways, transitions and groups in society.

3. The political economy of ageing perspective

The political economy of ageing perspective (PEAP), grounded in Marx’s theory of class structure and Weber’s conception of stratification, views the problems of ageing in structural terms (Estes, 1979; Estes and Associates, 2001; Phillipson, 1998; Quadagno and Reid, 1999; Walker, 1981). It is concerned with “the social, political and economic processes involved in the distribution of scarce resources and the ways that the state and the market economy participate in shaping the redistribution effort” (Kail, Quadagno and Keene, 2009: 555).

A core assumption of the PEAP is that income supports and long-term care for older people are an outcome of the social struggles and dominant power relations at any given time.
in providing a critical analysis of social policy, income supports and services (Lynott and Lynott, 1996) and in challenging perceptions that population ageing is a major factor contributing to a crisis in public finances. As it provides a lens for understanding (in)equality in older age, it offers a promising approach for attempting to make sense of old age in the context of approaches to welfare in NI and ROI.

4. Cumulative advantage and disadvantage theory

Cumulative advantage and disadvantage theory emphasises that early advantage or disadvantage is critical to how cohorts become differentiated. As a result of inequalities, some people are advantaged in early life, an advantage that may accumulate over time, whereas others are disadvantaged and these disadvantages may also compound over time.

Cumulative advantage and disadvantage theory (CAD), a contemporary application of PEAP, is grounded in research on the life course. It argues that advantages or disadvantages accumulate over the lifetime, rendering people of the same chronological age into very different positions of strength or weakness in old age (Dannefer, 2003; O’Rand, 1996). There is strong evidence of increasing diversity and inequality with age, for example, income inequality in retirement (Stewart, 2005; Hughes and Stewart, 2007).

CAD focuses on the existence and sources of age-specific differences and inequalities. It is centrally relevant to this discussion paper because of its concern with questions of fairness in the distribution of opportunities and resources. CAD argues that social structures influence inequality over the life course and social systems play a role in generating inequality on multiple levels. Ferraro, Shippee and Schafer (2009) opt to use the name cumulative inequality theory (CI), which seeks to integrate CAD with life course theory. CI privileges the structural generation of inequality but counterbalances the structuralist view by considering the dialectic of structural forces and human agency.

5. Feminist theories of ageing / Theories of intersecting inequalities

There is no one feminist theory of ageing. Feminist approaches to social policy and ageing begin with the argument that any discussion of the field must consider gender issues. When examining social policy and ageing / approaches to welfare for older people through a feminist lens, critical insights appear.

Feminist theories of ageing provide insights into the gender differences that underlie relations of inequality in older age (Arber and Ginn, 1991, 1995; Minkler, 1996). Feminist theorising in social gerontology raises important questions relating to age and gender. They have helped to bring about the recognition that there are other intersecting inequalities arising from racial and ethnic differences as well as from sexual and class-based differences (Casalanti, 2009) and disability (Kennedy and Minkler, 1999). While feminist theorists have begun to theorise old age as a system of age relations that intersect with other
forms of inequality (Casalanti, 2003), issues of ethnicity remain under-researched in social gerontology (Powell and Longino, 2002). Critical theories have also been enhanced by what Minkler (1996: 468) refers to as “culturally relevant ways of thinking” about ageing (Dilworth-Anderson and Cohen, 2009).

6. The moral economy of ageing perspective

The moral economy of ageing perspective directs attention to the collectively shared moral assumptions and popular consensus that legitimate certain practices, and the role they play in the social integration and social control of older people.

The moral economy of ageing perspective (MEAP)\(^7\) has been developed as “one line of thought that can enrich the political economy of ageing” in critical gerontology (Minkler and Cole, 1999: 38). MEAP developed in response to the criticism that PEAP was too focused on social and economic control. It complements the PEAP by helping to make explicit the often implicit cultural beliefs and values underlying social policies that affect older people. The MEAP provides a helpful conceptual framework within which to analyse approaches to welfare as it examines the shared moral assumptions about concepts such as fairness, justice and reciprocity and how these are used to justify one particular solution as opposed to another at various times in different welfare states. Whereas the PEAP leads to a careful analysis of the larger structural forces that affect people’s welfare in older age, the MEAP connects values and policy differently. It draws attention to the prevailing social values underlying current public policy discussion about the way to provide welfare for older people and raises questions about the relative priorities of societies (Clark, 1999). Scholars working from MEAP focus on issues of distributive and economic justice and norms such as reciprocity and generational equity.

7. Post-structuralist theories of ageing

A major contribution of post-structuralist approaches is the analysis of social policy as a complex and contradictory space.

Post-structuralist theories of the relationship between ageing and the welfare state offer a strong contrast to PEAP. According to post-structuralism, the general trend in which governments are expecting individuals and families to take primary responsibility for risks that were previously covered collectively (e.g. through state pensions) is a demonstration of the breaking down of one of the major structures of modern society: the welfare state. This breakdown is in response to socio-cultural changes such as globalisation, individualisation, destandardisation of the life course and the pursuit of new lifestyle preferences and choices. This has serious implications for the welfare state, with some post-structuralists calling for the reconstruction of a welfare state that will respond to the new risks and uncertainty facing older people (such as the need for long-term care associated with longevity). Others call for new institutional responses that are more flexible than traditional welfare state responses.

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\(^7\) Also known as humanistic approaches or cultural gerontology.
8. Theories emphasising a sense of meaning

Humanistic or cultural theories of ageing begin with the argument that human beings seek meaning in life and that this is particularly significant in later life. This perspective seeks to understand what gives older people a sense of meaning and purpose in life.

Theories from the social sciences, as well as those from psychology and psychiatry, have highlighted the importance of finding a sense of meaning in later life. A wide range of social factors influence an older person’s sense of meaning and well-being. For example, social relationships may exert an important influence on whether an older person is able to derive a sense of meaning. Research suggests that older people who receive emotional support from family members and close relatives are more likely to find a sense of meaning in life than older adults who do not have well-developed social support systems (Krause, 2004). Krause (2009) suggests that a focus on sense of meaning in later life is important as research is beginning to suggest that deriving a sense of meaning in life may in turn affect health.

9. Phenomenology of ageing

Social phenomenologists focus their attention on ideas and presumed facts about ageing and how these are understood by the people who experience ageing.

The theory of phenomenology of ageing emphasises subjective experience of ageing and draws attention to the relationship between individuals and social life. When applied to social policy, this theory is useful for explicating the point of view of older people, whilst recognising that older people are actors involved in constructing the social world (Longino and Powell, 2009).

2.4 Emerging theorising of ageing

There are numerous influences on how ageing unfolds. The main contributing factors stem partly from one’s location in the social structure (e.g. gender, socio-economic position, race, age, cultural context), partly from psychosocial and behavioural factors at the individual level, and partly from biological processes. This has led to calls for an integrative biopsychosocial approach to ageing. For example, Ryff and Singer (2009) call for the study of healthy ageing to be approached in this way. Policy can influence most, but maybe not all of these contributing factors. It would, at least, be exceedingly difficult to influence some aspects of the biological mechanisms in the absence of currently unacceptable methods such as human genetic engineering, and also very difficult to impact on some aspects of behaviour and culture.
Social theories of ageing are not static. Notwithstanding theoretical continuity, there is also much change and fluidity. A number of issues pose significant challenges to existing theories of ageing and for the task of generating new theories (Settersten and Trauten, 2009). There is the question of how social institutions and social policies need to be redesigned and adjusted to reflect contemporary demographic conditions. There is also the question of how societies (including policy) will function when age-based norms have been undermined or even vanish. Furthermore, Walker (2009: 611) argues that the role of the welfare state should be “to empower people to negotiate their way through the rapidly changing life course”. However, this purpose is not very well served at the moment by welfare states that were largely shaped in the post-war era that was characterised by a very different social and economic context (including much younger population structures). Questions such as these present us with an opportunity to rethink not only theories of ageing but also the way we approach social policies for older people, and indeed the welfare of older people.
Chapter three

Constructions of ageing in Ireland, North and South: through the lens of political economy
Chapter Three discusses five key ways in which ageing is socially constructed in NI and the ROI.

- Institutionalised retirement has come to be associated on the one hand with freedom from paid work and deserved reward for a lifetime of work and on the other hand with dependency and exclusion from socially valued and economically rewarded roles.

- Positive constructions of ageing and improvements in the overall well-being of older people have generated new policy debates, most significantly on older people’s ability to engage in paid work.

- Pessimistic constructions of ageing find expression in social policy as it relates to older people in Ireland, North and South. In the 1990s population ageing was overtly constructed as an economic problem and this construction persists, albeit in more subtle forms.

- Older people: consumers of care services? A result of this phenomenon is the construction of older people as consumers of services.

- Individual risk: Discourse on the desirable balance between public and private responsibility is particularly evident in debates on pension policy.

Ageing is socially constructed by processes that occur at several levels. At one level, ageing is socially constructed within interpersonal relations such as between a daughter and a mother, a social care worker and a care recipient, or a doctor and a patient (Walker, 1999). Ageing is also constructed within organisational or institutional settings. Here, we use the lens of the political economy perspective to examine constructions of ageing at the macro level and, more specifically, through social policies aimed at older people in Ireland, North and South. Although there are multiple ways in which ageing can be constructed through social policy, we have selected five key ways in which ageing is constructed in NI and the ROI.

3.1 Institutionalised retirement

The origins of pensions policy in Ireland, North and South, date back to the Old Age Pension Act, 1908, which provided pensions for persons of 70 years and over following a means test using a simple cut-off point. The consolidation of national pensions systems contributed to the “institutionalisation of age-related retirement” and is one of the key ways in which ageing has become constructed in virtually all modern welfare states (Walker, 1999: 369). The consolidation of a national pension system in NI can be dated to the 1940s. The government of NI followed the broad parameters of the Beveridgean system of social security introduced in Britain in 1947, which entailed a comprehensive national system of social insurance and offered a flat-rate social insurance benefit in respect of retirement.
The ROI was slow to establish a national pension system. The Social Welfare Act, 1952, could be regarded as the establishment in the ROI of an overall national system of social security. However, it was limited in several ways, particularly as it excluded social insurance pensions. It was not until 1961 that the Old Age Contributory Pension (OACP) was introduced in the ROI. However, social insurance pensions were limited as the self-employed, public servants and people above a certain income threshold for social insurance contributions were excluded. The Retirement Pension (RP) was introduced in 1970, along with a reduction of the age of eligibility to 66 for OACP and 65 for RP. The income ceiling for contributors to social insurance was also abolished. As a result, public pension coverage was extended to a greater proportion of the population during the 1970s. This contributed to the spread of fixed age retirement in the ROI. In the 1980s, the OACP was extended to the self-employed.

The consolidation of a national pension system and the “institutionalisation of age-related retirement” has been an important influence on the meaning of ageing and old age in modern welfare states (Walker, 1999: 369). The reforms extended rights and entitlements to old age pensions. Associated with this is the image of retirement as a gateway to a new lifestyle, with leisure activities and creative hobbies (Phillipson, 1982). However, it also led to the widespread economic dependency of older people. It has encouraged a view that past a certain age an individual’s economic and social worth is diminished, which in turn has contributed to age discrimination. The fact that public pensions are set at rates considerably below average earnings has reinforced the view that older people need less income than the economically active (Walker, 1999). In addition, a strict adherence in the ROI to a wide range of policies up to the 1970s that institutionalised and reinforced women’s exclusion from social security and work has rendered older women especially vulnerable and dependent (Conroy Jackson, 1993; Kennedy, 1999). The promotion of private sector pensions as an alternative to state provision has tended to be unsympathetic to the particular needs and circumstances of women, particularly in NI where women are less likely than their counterparts in Britain to be in pensionable employment (Evason and Spence, 2002). In short, institutionalised retirement has come to be associated with both positive constructions (freedom from paid work, deserved reward for a lifetime of work) and dependency.
Institutionalised retirement has come to be associated with both positive constructions (freedom from paid work, deserved reward for a lifetime of work) and dependency.

The ambivalences and tensions attached to retirement are, therefore, evident, and no single construction of ageing characterises retirement and retirement-related entitlements.

### 3.2 Positive constructions of ageing

In the 21st century, discussions and depictions of population health data in Ireland, North and South, offer optimistic constructions of ageing. In both parts of Ireland, older people are living longer than before, although life expectancy in NI and the ROI does not compare favourably with the EU15 (pre-enlargement member states) (McGill, 2010). It is widely recognised that there have been notable improvements in the overall well-being of older people who are generally healthier, more able and active in comparison with earlier cohorts. Evason, Lloyd and McGee (2005) found that the majority of older people (67.2%) in NI reported their health to be good or fairly good and the majority of those with longstanding health problems were able to undertake basic tasks such as doing housework. A 2009 report on older people in Ireland\(^8\) shows that public attitudes towards older people were highly positive in 2008. Nevertheless, the report also showed a growing number of older people who feel that they are treated worse than the general population and perceptions of discrimination are also shown to have risen. However, it also found that 86% of people aged 65 and older agreed that older people needed to stand up more actively for their own rights, showing support for empowerment of older people.

Organisations representing older people on the island of Ireland are actively involved in demonstrating the potential for a positive meaning to be applied to ageing, as in other European countries (Walker, 1999: 374). In the ROI, organisations such as Age and Opportunity\(^9\) have encouraged the spread of positive images of ageing and the promotion of old age as a period of opportunity. Initiatives such as Age Action’s Positive Ageing Week aim to dispel any negativity around ageing and to emphasise the positive aspects that ageing holds for older people. Older and Bolder\(^10\), an alliance of non-governmental organisations (NGOs) established in 2006, aims to champion the rights of all older people and seeks to combat ageism. In NI, two long-established charities, Age Concern NI and Help the Aged in NI, amalgamated in 2009 to form Age NI.\(^11\) This followed the amalgamation of Age Concern and Help the Aged in the UK to form Age UK. The stated aims are to

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\(^8\) ARK Research update, *All our futures: attitudes to age and ageing in Northern Ireland* (2009)

\(^9\) [www.olderireland.ie](http://www.olderireland.ie)

\(^10\) Ibid.

\(^11\) [www.ageni.org](http://www.ageni.org)
“create a powerful new voice for older people” and to “make people think differently about what it means to get older because age affects everyone in many different ways”.

A growing number of other organisations in ROI and NI work within the area of interest representation and lobbying for older people. The growth and expansion of these organisations in the last decade has helped to promote the predominantly positive constructions of ageing that they put forward12.

Governments in ROI and NI are also actively involved in generating more positive constructions of ageing. A strategy for promoting social inclusion of older people, *Ageing in an Inclusive Society*13, has been developed in NI. Its vision is “to ensure that age related policies and practices create an enabling environment, which offers everyone the opportunity to make informed choices so that they may pursue healthy, active and positive ageing” (Office of the First Minister and Deputy Minister, 2005: 13). A *National Positive Ageing Strategy*14 is currently (2010) being developed in the ROI.

Constructions of ageing and improvements in the overall well-being of older people have generated new policy debates in Ireland, North and South. One of these is centred on older people’s ability to work. While the great majority of older people have left the labour force, the overall trend in NI and the ROI is towards a growing number of older people remaining in employment beyond the age of 65 (McGill, 2010). A growing number of older workers would prefer to have the choice of whether and when to retire rather than be forced to retire from the labour market through illness, unemployment or a mandatory retirement age. People who have a more advantaged financial position have greater choices about when to retire. For others, decisions about extending working are strongly motivated by the need for an income (Phillipson and Smith, 2005).

Legislative approaches go some way towards supporting older people’s participation in the labour market. In the ROI, the Employment Equality Act, 1998, offered protection against certain types of workplace discrimination for workers up to the age of 65 years. The upper age limit was removed with the passing of the Equality Act, 200415, although certain exemptions apply in relation to age. The Employment Equality (Age) Regulations (NI), 2006, implemented the age strand of EU Framework Employment Equality Directive 200016 in NI, making it unlawful to discriminate on the basis of age in employment and training, including vocational training and further and higher education.

12 Support from The Atlantic Philanthropies in particular has led to significant growth and expansion of an ageing focus in Ireland, North and South.
13 A review of *Ageing in an inclusive society* is currently underway, with a formal consultation phase due at the end of 2010.
14 See www.dohc.ie
A central element of government policy in the UK (which applies to NI) and in the ROI is to encourage older people to work up to and beyond retirement age. In the ROI the Public Service Superannuation (Miscellaneous Provisions) Act, signed into law in 2004, gave effect to increases in the pension age for new entrants to the public service. Under the terms of the Act, the minimum pension age was raised to 65 for most new entrants to the public service. A key element of the National Pensions Framework (Government of Ireland, 2010) is to increase the State Pension age to 68 years of age in 2028. In 2008 the NI Civil Service (NICS) removed the default age of retirement at age 65 for all staff, giving staff a wider choice of when to retire to suit their own personal circumstances and, for management, the opportunity to avail of the retention of experienced staff. The UK government (DWP, 2006a) has proposed that the State Pension age should be increased in a phased manner to 68 by the middle of the 21st century.

Despite initiatives by both the voluntary sector and governments aimed at generating positive views of older people, equality bodies in NI and the ROI (the Equality Commission for Northern Ireland (ECNI) and the Equality Authority respectively) together with other statutory agencies have highlighted that ageism in particular towards older people is widespread and that strong negative stereotypes of older people persist in their respective jurisdictions (Equality Authority, 2003; ECNI, 2008; McGivern, 2005; McGlone and Fitzgerald, 2005). Although a relatively small incidence of personal experiences of age discrimination was reported in a survey of the general public in NI commissioned in response to the equality regulations, the ECNI (2008) argued that this should be set against the growing number of age-related enquiries and complaints it is receiving. In the ROI, the Equality Authority (2003), in its report on Implementing Equality for Older People, has examined the issue of ageism and put forward an equality agenda comprising 72 recommendations cutting across seven wide-ranging headings with a view to changing the situation and experience of older people.

3.3 Pessimistic constructions of ageing
Provisions for a rise in the retirement age offer new work-related opportunities and incentives. They also allow a focus on the rich supply of valuable experiences, wisdom and skills that many older people possess. In these ways, the legislative and policy developments and reforms mentioned above provide an opportunity for older people to be constructed as productive members of society. This is important as it acknowledges the contemporary reality that not all older people wish to cease working and that not all older people are beyond employment. The development of constructs such as “productive ageing” as well as “healthy ageing” and “positive ageing” mark a move away from the traditional monolithic view of the old as “poor, frail, and unemployable” (Hudson, 2005: 10). However, images of ageing as productive can at times be overly

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17 The seven heading are legal status; general upper age limits; policy-making; working; income of older people; health and community services; and lifelong learning.
exaggerated and may not adequately reflect the reality of the day-to-day lives of many older people.

Furthermore, pessimistic constructions of ageing find expression in social policy as it relates to older people in Ireland, North and South. In the 1990s population ageing was constructed as an economic problem; it was construed as a threat to economic growth and to the affordability of existing social welfare entitlements (Phillipson, 1998). The main concern associated with such constructions of ageing is that with population ageing (and assuming no major increases in retirement age) there will be fewer people in employment to shoulder the cost of paying to support the large population of older people. Constructions of ageing as an economic problem found expression in social policy in the ROI in the 1990s, most notably in pension policy (Pierce, 2008). As Walker (1999: 375) points out, “the legacy of the past is very influential”. Concerns that an increase in the population of older people will give rise to unsustainable increases in the level of state spending on pensions and thus threaten affordability of the state pensions system can be found in current pension policy in the ROI, as illustrated by the following extract from the National Pensions Framework (Government of Ireland, 2010: 13):

“The task of financing increasing pension spending will fall to a diminishing share of the population as demographic projections indicate that there will be less than two people of working age to every person aged 65 or over by the middle of the century, compared to almost six people today.

The impact of demographic pressures: over the next 10 years, the number of people over the age of 65 is expected to increase by approximately 50%, while, by 2050 it is expected to have trebled.

The projected increase in spending on public pensions (social welfare pensions and public service occupational pensions) is from approximately 5.5% of GDP in 2008 to almost 15% in 2050. This rise in public expenditure is the equivalent of over €8 billion in present value terms”.

The UK White Paper on Pensions states that “[i]ncreasing longevity is something that we should celebrate, but it also raises significant challenges”. It goes on to state that “[w]e are about to experience a dramatic acceleration in the dependency ratio – the balance between the numbers of people of working age and those over State Pension age” and that “[t]his demographic shift is transforming the context for pensions policy” (DWP, 2006a: 7-8). As well as gains in average life expectancy, concerns about
the economic consequences for states of population ageing are used to legitimate reforms of the state pension age. In other words, positive constructions of older people as increasingly healthy can be used to generate and justify their construction as capable of remaining economically engaged for longer, a depiction that is seen by some as negative.

3.4 Older people: consumers of care services?
In the area of long-term care for older people, NI and the ROI have both embraced a “mixed economy of welfare”. This incorporates a market-oriented approach, which encourages private sector involvement in the care of older people. For example, in the ROI, private sector agencies have become a significant feature of the provision of home-based care for older people. The introduction of publicly-financed home care packages to provide financial support towards the care needs of older people in community settings is one of the factors driving the fast pace of expansion of this sector (Doyle, 2006). Among the rationales for this new policy instrument is the argument that it increases care recipients’ choice and autonomy (Timonen, Convery and Cahill 2006).

A consumer-based approach to the provision of long-term care for older people in NI and the ROI through welfare pluralism is simultaneously encouraged. For example, in the ROI the Study to Examine the Future Financing of Long-term Care stated that: “There is … a strong case to be made in favour of a more consumer-oriented approach, whereby people with care needs could choose among providers in accordance with their own unique preferences and circumstances (Government of Ireland, 2002: 87)”.

Cash-for-care programmes such as Direct Payments in NI and Home Care Grants in the ROI can be seen as an attempt to recast older people as consumers. They can bring a range of benefits that can enhance choice, control and well-being of older people. As such, they are often seen as a modern, positive policy measure, which casts older people in a positive way as empowered consumers.

However, a consumerist approach to the provision of care for older people has attracted criticism. According to Powell (2006: 54), a consumerist approach “leaves older people in a vulnerable position”. Gilleard and Higgs (1998: 234) argue that “the rhetoric of consumerism attributes to all older people a position of agency, which, as users of scarce and targeted resources, they
cannot fill”. In addition, choice of provider in the ROI is in most cases very limited as private providers are concentrated in urban areas and where they are available, a small number of providers tend to dominate the market in any given geographical area (Doyle, 2006).

3.5 Should ageing be an individual risk?
Inadequate income in old age, caused by inability to work, has been long recognised as a social risk. In the late 19th and 20th centuries, welfare states started to address this risk collectively through state pension schemes, which were tied to ideas about social rights and social citizenship, and intergenerational solidarity with risk sharing across generations and social groups.

Much contemporary debate on pension policy has focused on the balance between public and private responsibility in relation to the financing of income supports in older age. Pension policy in the UK (including NI) and the ROI has drawn heavily on policy at an international level and adopted a view that supports the expansion of private provision rather than state pension provision.

Promoting personal responsibility is one of the key principles underpinning reform of the pension system in the UK. (McCashin, 2004). Promoting personal responsibility is one of the key principles underpinning reform of the pension system in the UK. The reforms to the private pension system are aimed at enabling and encouraging more people to build up a private pension income to supplement the money received from their basic State Pension. Under the Pensions (No. 2) (NI) Act 2008, from 2012 workers in NI will either be automatically enrolled into their employer’s workplace pension scheme or entered into the new National Earnings Savings Trust (NEST) scheme.

In the ROI, one of the principles of pension policy is that the State Pension will continue to be the fundamental basis for the pension. However, it is also a principle that “supplementary pension coverage and contributions must be increased to improve adequacy of incomes in retirement systems” (Government of Ireland, 2010: 14). The promotion of private pensions places a greater responsibility on individuals to provide for their own future. It poses a major challenge to the position of older people (Estes, Biggs and Phillipson, 2003) and

Inadequate income in old age, caused by inability to work, has been long recognised as a social risk.

18 Set out in the White Paper Personal Accounts: A New Way to Save (DWP, 2006c)
leads to a reconstruction of ageing as an individual risk rather than a collectively shared risk.

One of the emerging hallmarks of old age is the new risks that old age brings, in particular the risk of inadequate or unaffordable care (Settersten and Trauten, 2009; Taylor-Gooby 2004). It is noteworthy that this risk is being increasingly recognised and addressed via long-term care policies such as “the Fair Deal” in ROI and emerging cost-sharing policies in the UK/NI. These indicate that there is a growing acceptance of the need to outline more clearly the boundaries of responsibility for the costs of long-term care. Until very recently, these policy efforts were primarily focused on costs of institutional care, but are gradually being extended to cover home care also.
Chapter four
Analysis of approaches to welfare in Ireland, North and South
Chapter Four provides an analysis of approaches to welfare for older people in Ireland, North and South, in light of the theories of ageing outlined in Section 2 and constructions of ageing discussed in Section 3. It analyses the ways in which theories of ageing draw attention to specific “disengaging” or “enabling” aspects of policy on the island of Ireland in relation to the two core areas under review, namely pensions and long-term care.

This document focuses on two core areas of social provisions for older people - social transfers and long-term care. The distinction between these two care areas is used to orient and structure the discussion that follows.

The social policy instruments (both cash payments and services) that apply to the older population in NI and the ROI can be characterised as “disengaging” (referring back to disengagement theory) or “enabling” (referring back to Walker, 2009). In addition to using this framework to analyse approaches to welfare in Ireland, North and South, we analyse the ways in which (mainly social) theories of ageing draw attention to specific “disengaging” or “enabling” aspects of policy on the island of Ireland in relation to the two core areas under review.

4.1 Pensions and other social transfers

Chronological age is an important instrument used in Ireland, North and South, to regulate state pensions, certain social transfer supplements and free schemes for older people. Thus, the ageing-related social transfers system in both jurisdictions may be understood as “chronological regimes”.

The state pension age in both NI and the ROI is set to increase. The debate around increasing the retirement age (as Section 3 shows) is often more to do with political economy considerations than with enabling individuals to be active or productive members of society. From a political economy of ageing perspective (PEAP), Walker’s (2009) view is that increasing state pension age would amount to “transforming older people again into a vulnerable population ... re residualising the aged”.

State pensions remain the primary source of income for Irish pensioners as a whole and provide in excess of 80% of the total retirement income for those in the two lowest income deciles.

19 The supporting document to this discussion paper (Pierce, Fitzgerald and Timonen, 2010) provides extensive background information on the social provisions for older people in Northern Ireland (NI) and the Republic of Ireland (ROI).

20 We do not employ the terms “disabling” and “enabling” in a normative sense here. We do not imply that “disengaging” benefits and services are always bad and “enabling” ones are unquestionably good. Rather, the intention is to use terminology employed in theories to highlight some fundamental differences in the justifications for and impacts of social policy instruments.

21 Emphasis added.
By and large, the latter view of state pensions as important entitlements for a deserving group of people has prevailed in the ROI since 1997. This is evidenced, for instance, by the significant increases in social welfare pensions over the decade 1997-2007 (Hicks, 2009). These increases managed to lift the ROI away from the “league of shame” of countries with highest levels of pensioner poverty and, most recently, by the decision to shield pensions against cutbacks in the December 2009 budget. But this has to be seen against the backdrop of a long period of underdevelopment in pension policy and the prominent role accorded to private pensions that bring about inequality in retirement incomes.

Furthermore, state pensions remain the primary source of income for Irish pensioners as a whole and provide in excess of 80% of the total retirement income for those in the two lowest income deciles (Stewart, 2005).

Proponents of PEAP are particularly critical of neoliberal policies and calls for private provision for older people. For example, the UK policy of encouraging private sector pensions and promoting personal responsibility (DWP, 2006a and 2006b) can be seen as a case of the state using its power to transfer responsibility for pension provision from the state onto individuals and to blame individuals for failing to provide for their income needs in retirement from their own savings. From a PEAP, blaming older people obscures the fact that problems such as pensioner poverty can be traced back to political decisions. Proponents of PEAP favour pensions policies based on “risk pooling” and “collective support” for older people; in other words, a universal social insurance model.

The PEAP is particularly useful for exploring the ways in which economic inequalities are structured by the state and the economy. To some extent, governments in NI and the ROI are addressing the issue of unequal entitlements. However, this tends to be in relation to the state pension system (social insurance and social assistance). The PEAP, however, draws attention to inherent inequalities in the “hidden welfare state”, e.g. tax breaks for pensions provided through the private sector. Social policy analysts in the ROI (Stewart, 2005; Hughes, 2005; Hughes and Stewart, 2007) have also drawn attention to such inequalities.

Over the last four decades, a wealth of literature shaped by feminist theories has emerged on the island of Ireland to provide valuable insights into the lives of women (Kennedy, 1999). Scholars in Ireland, North and South, have specifically addressed the issue of women and pensions (Daly, 2001;...
Evasion and Spence, 2002; Murphy and McCashin, 2008). Attention has been drawn to social policies that institutionalised and reinforced women’s exclusion from the labour market and social security (e.g. the compulsory exit of women from public and civil service employment upon marriage prior to 1973 in the ROI) and to women’s tendency to spend less time in the formal economy (Conroy Jackson, 1993; Kennedy, 1999). These have serious implications for women who in older age are hampered from gaining an entitlement to a full State (Contributory) Pension.

Older women are less likely than older men to have an adequate pension and tend to rely more on the state pension for their income. Whereas 80% of male pensioners are entitled to a state pension in the ROI, less than 60% of female pensioners have the same entitlement (Loftus, 2009). With a view to engendering the debate on pensions in the ROI, the National Women’s Council of Ireland (NWCI) set out its views from a women’s perspective (Murphy and McCashin, 2008). To some extent, governments have gone some way to address issues raised by feminist perspectives. For example, the Homemaker’s Scheme, introduced in the ROI in 1994, is enabling as it allows women to disregard up to 20 years spent caring for the purposes of a contributory pension. However, the fact that the scheme has not been applied retrospectively reduces its potential impact for many women.

A particular way of thinking about the life course and social policy has been put forward by the OECD (2007). Noting the changing nature of social risks and the increasing importance afforded to human capital, adaptability and flexibility, Bovenberg (2007: 23) discusses the life-course perspective and considers it usefulness in “developing proactive social policies that better fit the changing life-cycles of individuals who combine formal work with other activities on transitional labour markets”. A range of “new ways to absorb social risks over the life cycle” are recommended by Bovenberg (2007: 39), including a longer working life. This is to be achieved through, for example, raising retirement age in line with increased longevity, and decompressing the working life. Bovenberg (2007) also recommends a shift in public support from the old to the young.

In other words, future social policies should focus less on providing for older people through collective social transfer arrangements and more on encouraging younger individuals to take more responsibility in planning how they are going to finance their old age. Clearly, as Bovenberg (2007: 49) points out, “[t]he required reforms confront politicians with a major challenge”22. There is some common ground between pension reforms in both NI and the ROI (e.g. raising the state pension age and the move towards auto-enrolment to a pension scheme) and the OECD’s “new” thinking around life course and social policy.

From a post-structuralist perspective, the OECD’s “new” thinking around life course

22 Emphasis added.
and social policy is consistent with neoliberal discourse. A different way of looking at retirement and pension policy using the life course perspective is to consider the different trajectories of transition from adulthood to old age for different social groups as well as the concept of linked lives. For example, in the case of married couples, retirement tends not be an individual but a linked lives decision, as the timing of retirement among spouses often corresponds. Policy reforms aimed at encouraging women in particular to decompress the working life (as recommended by Bovenburg, 2007), ignores this point and the family lives individuals have lived up to the point of retirement, which conditions the retirement transition (Marshall and Mueller, 2002).

From a moral economy of ageing perspective (MEAP), Schokkaert and van Parijs (2003: 245) insist that “[n]o serious discussion of possible pension reforms can dispense with some conception of what social justice requires”. Taking the “European project” as their starting point, they carefully spell out the implications for pension systems of a conception of social justice that pronounces the values of freedom, efficiency and solidarity and proposes the introduction of a guaranteed minimum income. They consider a number of important policy issues in light of these values and this proposal, including the issue of increasing the retirement age, which is proposed as part of pension reforms in both NI and the ROI. According to Schokkaert and van Parijs (2003), where the concern is to achieve real freedom, people must be able to choose their pattern of life and as such flexibility with respect to retirement age is a crucial feature of pension policy. This implies that working later in life leads to a higher retirement pension, while retiring earlier should mean a lower pension, and is a trade-off that needs to be built into pension systems. They also note that the trend towards early retirement is partly or perhaps largely induced by government tax incentives, a distortion in their view that must be removed. They argue that governments should foster part-time working for older people. According to Myles (2003), increasing retirement age satisfies neither a proportional definition of fairness nor Rawls’s maximin criterion (whereby policies should seek to maximise the welfare of the worst-off in society) (Rawls 1971).

In 2007, the National Women’s Council of Ireland (NWCI) embarked on a project titled “women mobilising in rural areas”. The purpose of the project was to enhance the capacity of women in rural areas to influence the decisions taken in a range of policy arenas, as they affect women. One group of women focused on raising awareness of the inequalities of state pensions for women, resulting in a publication, Forgotten Women (NWCI, 2007). In it, women tell their own personal stories of the frustration, anger and sense of exclusion they feel in relation to the pensions system in the ROI. The project illustrates how elucidating the subjective experience of older people (in this case older women), which meets the requirements of phenomenology of ageing theory, can be used to highlight the (disengaging) impact of state pension systems at an individual level.
Social transfer measures that are fuel-related, i.e. the Winter Fuel Payment in NI and the National Fuel Allowance (under Household Benefits Package) in the ROI were introduced primarily with a view to alleviating poverty amongst older people (as well as other low-income households in the ROI). The ROI and NI have similarly high levels of fuel poverty, when compared to the rest of Europe. Older people are more likely to experience fuel poverty due to lower standards of housing coupled with lower incomes (McAvoy, 2007). The fuel-related payments have an important role to play in tackling fuel poverty amongst older people and are thus widely seen as a necessary measure that should be continued (Age Action, 2010; Healy, 2004; McAvoy, 2007). However, income subsidisation is regarded as an insufficient means of alleviating fuel poverty. In both jurisdictions, there is more awareness of and attention being paid to other more efficient ways of tackling fuel poverty such as improving thermal efficiency in poor housing and building regulations that include higher standards of thermal efficiency (Healy, 2004; McAvoy, 2007). The shift in policy attention illustrates the usefulness of “green” ideas, which have been influencing the study of social policy since the 1980s, for “looking at” approaches to welfare for older people. However, it appears that green perspectives of social policy are still underdeveloped and have yet to find their way into mainstream social theories of ageing.

4.2 Long-term care for older people
There is no specified age for the vast majority of care services/cash-for-care payments in NI or the ROI. Eligibility to these services and benefits is in the first instance based on need (dependency). Nevertheless, in the ROI, home care services and benefits are primarily aimed at older people. In NI care services are targeted at all ages. However, in the means test to assess charges for home help services in NI, chronological age becomes an important instrument. The means-test is relaxed for people over 60 years of age and removed altogether for people over 75 years (see Pierce, Fitzgerald and Timonen, 2010, for more details).

Chronological time is thus a feature of long-term care provision. Baars (2009) argues that there is a need to pay attention to and respect personal perspectives of ageing as living in time. For example, from a post-structuralist perspective, Twigg (2002) has explored the complex nature and perceptions of time in the care encounter between older people and domiciliary care workers. Twigg (2002) identifies three broad forms of time that are of significance in the analysis of community care:

1. Body time and related domestic times (e.g. washing, dressing and eating mark out the domestic ordering of time and the structure of the day), which is “a fundamental source of rhythm, order and wellbeing in our lives”.

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23 This is the measure used primarily in the ROI to combat fuel poverty. In the UK, there is a longer tradition of introducing measures aimed at improving energy efficiency (Healy, 2004).
2. Process time or the time of caring (which means letting the perceived needs of the care receivers, rather than the clock, determine temporal relations).
3. Clock time of economic production as embodied in service provision (e.g. the use of time allocation to manage domiciliary care).

Twigg (2002) argues that these different understandings of time create conflicts and difficulties for care. Exploration of time is relevant to long-term care provision in NI, where guidelines exist in relation to the allocation of hours based on task times for recipients of home care. It is anticipated that the Task Force established within the HSE to draft guidelines on the operation and delivery of Home Care Packages in the ROI will set down guidelines in relation to the allocation of time for various home care tasks by domiciliary care workers.

The political economy of ageing perspective (PEAP) provides a very important lens through which to look at inequalities in the long-term care systems for older people in NI and the ROI. Neither of the two jurisdictions has a universal long-term care system that would guarantee some degree of access to all older people or a long-term care insurance system whereby individuals would be entitled to a level of service or payments corresponding to their need for care. The provision of long-term care in NI and nursing home care in the ROI rely heavily on means tests and co-payments. Older people make substantial contributions towards the cost of their care through co-payments for state-funded care. They also contribute through “voluntary” contributions (towards home care services in the ROI), and through expenditure to purchase care privately in order to make up for the shortfall in care. Furthermore, in the ROI the justification for the Fair Deal scheme is that it removes financial responsibility from families for long-term care. At the same time, the scheme imposes the penalty of recouping costs posthumously from an individual’s estate if full costs are not covered while the person is in care. In this way, the Fair Deal scheme throws part of the financial responsibility for care of older people back onto families, albeit at a delay.

In their analysis of care services for older people, feminist theorists bring a focus to the relationship between the state and the family. They draw attention to the importance of unpaid work, primarily carried out by women within the family home, and raise substantive issues facing older women as both providers and recipients of care. All of these are relevant for looking at the provision of care for older people in NI and the ROI. NI and the ROI continue to have low levels of formal social care provision for older people. Policy is underpinned by an assumption that the family will take most responsibility for the care of older people. For example, with respect to Direct Payments in NI, it is expected that families (or friends) will assume an important role in assisting a recipient who needs help in managing the money to purchase care.

Although the disability movement has tended to focus on issues affecting people with disabilities who are of working age and below (Priestley, 2003), applying the social model of disability to the situation of older
people with impairments is useful (Oldman, 2000). The application of the social model of
disability (which, amongst others, seeks to
broaden and enable care recipients’ choice
and control) to long-term care provision for
older people is illustrated in NI by Direct
Payments. In the ROI, ageing and disability
have tended to be treated separately.
Conroy and Mangan (2006) outline the
policy implications of this. For example, they
point out that funding for service provision
for older people that is separate from
funding for service provision for people with
disabilities “militates against boundary-
crossing of both professionals and clients,
and creates a variety of difficult situations for
older people with disabilities” (Conroy and
Mangan, 2006: 27). There are some signs in
the ROI of an intention to move away from
using Home Care Packages (see Pierce,
Fitzgerald and Timonen, 2010) and towards
a greater reliance on publicly-funded care
services (provided directly or indirectly by
the state). This shift, which is driven by
“concerns regarding management and audit”
(DoHC, 2009: 16) presents one of these
difficult situations for older people with
disabilities.

Most notably, it disregards one of the
motivations in other countries for introducing
cash-for-care programmes, i.e. to extend
choice and autonomy for people who require
care. There is scope for joint working
between ageing and disability groups on
common issues of concern. In addition to
user-directed services, Conroy and Mangan
(1996: 37) suggest that person-centred
planning, creating “liveable communities”,
and integration and co-ordination between
service sectors for older people and people
with disabilities as areas that are relevant to
both groups. These areas also offer
opportunities for collaboration and service
reform.

Increasingly, scholars on the island of
Ireland have been drawing attention to the
need for policy to take account of migrant
care workers (Doyle and Timonen, 2009;
Timonen and Doyle, 2010). However, there
has been much less emphasis on the ethnic
dimension to care for older people with
disabilities (Pierce, 2006). Where this is
addressed in policy documents, older people
with care needs from minority ethnic
communities tend to be dealt with in a
perfunctory way. For example, in its report
on Care for Older People, the NESF (2005:
82) addressed the care of older people from
minority ethnic communities by devoting a
total of six sentences to members of the
Traveller Community or ethnic minority
groups. These groups were identified as two
of the 11 groups of older people considered
to be at particular risk of marginalisation.

With respect to the provision of care for
older people in NI and the ROI, the moral
economy of ageing perspective (MEAP)
offers a particularly useful lens for looking at
how concepts such as fairness, justice and
social obligations are used to justify
particular solutions rather than other
solutions. For example, the Fair Deal
scheme has been justified by the state on
the basis that it equalises state support for
older people receiving long-term care by
applying the scheme across public, private
and voluntary nursing homes. However, the
fairness of the scheme can be questioned.
The MEAP draws attention to the question of
whether it is fair to expect older people who are unfortunate enough to have a limiting long-term condition to bear the cost of co-payment for home-based and institutional care as opposed to sharing the cost more equally among the population through a system of long-term care insurance.

Practices such as care needs assessment (which are well-established in NI and are increasingly used in the ROI) can be understood at one level to be necessary in order to determine the most appropriate setting (residential or home) in which to care for an older person. For post-structuralists (particularly those drawing on insights from Foucault), the practice of conducting care needs assessments, typically undertaken by nursing and other professionals, can be linked to biomedical techniques that are used to classify older people and construct older people as objects of power. In addition, far from moving away from constructions of ageing as a period of decline, these practices represent an expansion of the biomedical gaze into the area of long-term care policy and practice. Together with care needs assessments, financial assessments, and the regulation and inspections of residential and home care agencies can all be understood as new forms of social regulation associated with the increased complexity of modern society.

Traditionally, older people have been seen as passive recipients of care. However, there have been some important new developments to illustrate older people’s view of care. One notable example comes from the drafting of the National Quality Standards for Residential Care Settings for Older People in Ireland in the ROI (2008). As part of the process of drafting the Quality Standards, focus groups were held with nursing home residents in institutional care settings to hear their views on the key issues relating to safety and quality of care in such care settings and to consider the extent to which those issues were addressed within the draft standards. Developments such as these fit well with phenomenology of ageing perspectives, which emphasise older people’s subjective experience of ageing and care (e.g. Begley, 2009; Murphy et al., 2006; Murphy et al., 2007). The Age Action Ireland call on older people to submit accounts of their experiences of applying for the Fair Deal scheme (in summer 2010) is an example of an application of this perspective.

Although older people are increasingly consulted on their views about care services (e.g. in the drafting of positive ageing strategies in NI and the ROI), older people’s sense of meaning and wellbeing is under-emphasised in official policy. However, these are strongly emphasised in the conversations of older people. A prominent strand of older people’s stories on care is that “older people are social beings” (Pierce, 2010). This consideration is at present only very inadequately taken into account in formulating long-term care policies. The idea of older people as social beings is expressed in policy on care in NI through the home help service (which covers social care tasks) and Direct Payments (which can be used by older people to enable them to get out and about or go to new social settings). This is not a feature of the equivalent care services in the ROI.
Summary
It is important to acknowledge that a social policy, an income transfer or a care service, is rarely straightforwardly “disengaging” or “enabling”. Social policies may be considered both disengaging and enabling by different audiences. For instance, retirement and pensions may be considered to be disengaging by some groups (e.g. an interest group that promotes the cause of older workers who feel they have been forced to retire) and enabling by others (e.g. an association that celebrates and promotes leisure activities for older people as a deserved reward for their careers in paid employment). On the one hand, compulsory retirement and pensions (especially where they are low, leading to pensioner poverty) are seen as instruments of forcible disengagement that deprive older people of valued roles in society and render them into a position of dependency and poverty. On the other hand, the pooling of risks and social solidarity that some pension systems reflect and embody is seen as a very important historical achievement that has had a dramatically positive impact on older people’s incomes and independence. However, a strong case for seeing pensions as enabling can be made where pensions allow for choice of retirement age and where income from pensions and from work can be combined.

Similarly, care services may be considered to be disengaging by some (e.g. older people and their care workers) where care tasks are dictated by the clock. This leaves little space for the development of the care relationship and the associated social interaction that many older people crave. Yet, task-oriented care may be considered to be enabling by others for administrative reasons, e.g. care needs assessors and care managers who welcome guidelines to facilitate easier allocation of resources.
Chapter five

Concluding remarks and areas for further discussion
Chapter Five emphasises that theories should be seen as lenses for viewing ageing and policy in new ways. Theories of ageing can be used to provide different lenses with which to look at various aspects of social policy as it relates to older people. Policies should be developed in a way that seeks to maximise the extent to which they are seen by different stakeholders as enabling and this in turn involves building a lot of flexibility into them. We conclude by arguing that theories of ageing are relevant to and helpful in the complex but necessary task of reforming policy as it applies to older people in the Republic of Ireland and Northern Ireland.

There are a number of questions on the theories and their application to policymaking that are intended to encourage further discussion.

1. Theories of ageing are rich, diverse and complicated. How can these theories be fed into the process of formulating policy for older people in NI and the ROI?

2. An influential view among social theorists of ageing is that ageing is socially constructed or socially determined though a variety of economic, social and political processes. Social policy has a significant role to play in (re)constructing views about ageing. There are multiple constructions of ageing, no single one of which is valid or superior. Neither are constructions straightforwardly positive or negative. For example, whilst institutionalised retirement has come to be associated with positive meanings for some, others connect it to dependency. Whereas consumerist approaches to care are unquestionably about enhancing choice and control for older people for some, for others the limitations of such an approach are paramount. What effect will the positive and negative constructions of ageing have on policymaking for older people?

3. There is no single “right” theory of ageing that explains all aspects of ageing and related policies. Neither are theories of ageing straightforward guides to reforming policy. Rather, theories should be seen as lenses for viewing ageing and policy in new and different ways. Theories of ageing can be used to provide different lenses with which to look at various aspects of social policy as it relates to older people. From our analysis, it is clear that attitudes towards and conceptualisations of care, retirement and pensions differ widely among theorists. Is there a danger that different stakeholders will pick a single theory of ageing, whilst ignoring others? What is the best strategy for bringing the breadth and value of theoretical knowledge to bear on policy development?

4. Policies should be developed in a way that seeks to maximise the extent to which they are seen by different stakeholders as enabling and this in turn involves building a lot of flexibility into them. With respect to retirement and pensions, this would mean, for instance, greater flexibility in allowing gradual retirement, in contrast to the current model of a sudden and complete transition to retirement. In the area of care
services, there is enormous potential to re-design services, practices and policies that govern them in a way that fosters maintenance and acquisition of abilities in line with the cognitive plasticity and selective optimisation with compensation theories, in contrast to the current practices which arguably in many cases foster dependency. How can policy take cue from these approaches more effectively?

5. Those developing policy, and ultimately older people, would benefit from a greater awareness of the psychological theories that tend to focus on the individual and his or her immediate social context (the convoy model of social relations and the notion of “linked lives”), while at the same time recognising that the broader social context, and policy in particular, shape the individual experiences. The lifespan and lifecourse theories help to highlight the fact that ageing is a life-long process, with strong links between earlier and later stages, which in turn brings to attention the processes of cumulative advantage (and disadvantage) which are of particular relevance to pension policy. Should policy development be more firmly based on recognised theoretical perspectives? Why?

6. Theories of ageing should prove to be of interest to and be an important resource for policymakers, researchers and non-government organisations. Theories of ageing can be used in policy development to provide insights into various aspects of social policy, both income transfers and care services. They can also challenge anyone involved in developing policy to think in different ways about social policy. Policymakers and older people engage in everyday theorising about ageing (Pierce, 2010). To what degree are policymakers and others involved in policy development influenced, or willing to be influenced, by contemporary theoretical thinking (which is continually developing)?

Expert theorists of ageing hope that policymakers and other key policy actors read about theories and theoretical insights, absorb them and take action. We hope that this Discussion Paper will go some way towards persuading those working in policy development that theories of ageing are relevant to and helpful in the complex but necessary task of reforming policy as it applies to older people in the Republic of Ireland and Northern Ireland.
Appendix: Nine social theories of ageing

1. Theoretical reflections on concepts of time, age and ageing: Human ageing is too rich to be reduced to chronological time and concepts such as chronological age, life expectancies and old age dependency ratios. There is, therefore, a need to reflect on the use of concepts such as these and to embrace other perspectives of time such as intrinsic time, that is, the personal and collective meanings given to time.

2. The life course perspective: The life course perspective directs attention to the connection between individuals’ lives and the historical and social-economic context within which these lives unfold.

3. The political economy of ageing perspective: The political economy of ageing perspective seeks to understand variations in the treatment of older people and to relate these to the polity, economy and society in advanced capitalist societies. The relative power of the state, business, labour and other social groups and the role of the economy and polity are central concerns.

4. Cumulative advantage and disadvantage theory: Cumulative advantage and disadvantage theory emphasises that early advantage or disadvantage is critical to how cohorts become differentiated. As a result of inequalities, some people are advantaged in early life, an advantage that may accumulate over time, whereas others are disadvantaged and these disadvantages may also compound over time.

5. Feminist theories of ageing / Theories of intersecting inequalities: There is no one feminist theory of ageing. Feminist approaches to social policy and ageing begin with the argument that any discussion of the field must consider gender issues. When examining social policy and ageing / approaches to welfare for older people through a feminist lens, critical insights appear.

6. The moral economy of ageing perspective: The moral economy of ageing perspective directs attention to the collectively shared moral assumptions and popular consensus that legitimate certain practices, and the role they play in the social integration and social control of older people.

7. Post-structuralist theories of ageing: A major contribution of post-structuralist approaches is the analysis of social policy as a complex and contradictory space.

8. Theories emphasising a sense of meaning: Humanistic or cultural theories of ageing begin with the argument that human beings seek meaning in life and that this is particularly significant in later life. This perspective seeks to understand what gives older people a sense of meaning and purpose in life.

9. Phenomenology of ageing: Social phenomenologists focus their attention on ideas and presumed facts about ageing and how these are understood by the people who experience ageing.
References


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