Exploring older people’s experiences of ageing and ageism

A pilot qualitative research piece from Costa Rica, The Gambia, Pakistan and Serbia
HelpAge International is a global network of organisations promoting the right of all older people to lead dignified, healthy and secure lives.

With thanks to Dr Cassandra Phoenix (Durham University, previously University of Bath), AGEKO (Costa Rica), Ageing with a Smile Initiative (The Gambia), Red Cross of Serbia, HelpAge International in Pakistan, and all the research participants who kindly dedicated their time to this project.

Exploring older people’s experiences of ageing and ageism in Serbia, Costa Rica, Pakistan and The Gambia

A pilot qualitative research piece

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Context

Research on experiences of ageism and age discrimination in lower and middle-income countries is rare. In order to advocate and campaign effectively for an end to ageism and age discrimination, an understanding of older people’s experiences of ageing, and how and where age discrimination manifests itself is needed. The aim of this project was to gain understanding of the meaning that individuals living in low-and-middle income countries ascribe to ageism and age discrimination.

Research aims

- To provide a platform for older people’s voices, enabling older people in lower-and middle-income countries to set the agenda around the meanings of ageism and thus how HelpAge takes forward further research, campaigning and advocacy in the future
- To begin to understand how ageing and ageism are experienced in these contexts
- To begin exploring what meanings individuals give to ageing and ageism
- To kickstart more ageism research in lower-and middle-income countries

Methods

Two focus groups were conducted in four countries (Serbia, Costa Rica, The Gambia, Pakistan) with individuals who self-identified as an older person. HelpAge partner organisations within each of these countries were responsible for recruiting participants and moderating the focus groups. These partners were selected based on their ability and availability to conduct the focus groups, and because all four of them advocate for mainstreaming of ageing and older people within national Sustainable Development Goal processes. It was felt the research could have added value with the results contributing to these efforts.

See table 1 for how participants were recruited. All participants were provided with information about the project in official languages (written and verbal), which included what the collection of data would involve, how it would be used, that their participation was voluntary, and that they could withdraw from the project at any time without consequence. Questions were asked to the group around their perceptions and experiences of ageing and ageism. A ‘mood board’ containing various images (see Annex 2) was used to elicit discussions around meanings of ageing. Participants were asked to explain their feelings about ageing using the images in the board. This technique, along with a mapping exercise to understand where ageism takes place and how frequently, was also incorporated into the discussion guide. A copy of the discussion guide can be found in annex 1.

With the participants’ permission, all focus groups were audio recorded. These recordings were translated into English and transcribed by

1 AGECO (Costa Rica), Ageing with a Smile Initiative (The Gambia), HelpAge International Pakistan, Red Cross of Serbia
Translators/transcribers identified by HelpAge. Data underwent a thematic analysis; a method that organises and describes the data collected by identifying, analysing and interpreting, and reporting patterns (that is, ‘themes’). All focus groups took place between March and May 2019.

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<td><strong>Costa Rica</strong></td>
<td>6 participants (2 men, 4 women)</td>
<td>Participants recruited through AGECO courses for older people</td>
<td>10 participants (1 man, 9 women)</td>
<td>Participants recruited through AGECO courses for older people</td>
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<td><strong>The Gambia</strong></td>
<td>8 participants (4 men, 4 women)</td>
<td>Took place in village. Participants selected through local teacher</td>
<td>8 participants (5 men, 3 women)</td>
<td>Took place in urban area. Ageing with a Smile Initiative volunteer approached people to take part.</td>
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<td><strong>Pakistan</strong></td>
<td>5 participants (5 men)</td>
<td>All men group. Took place in Karachi. Recruited through a local HelpAge project</td>
<td>11 participants (11 women)</td>
<td>All women group. Took place in Islamabad. Participants recruited through civil society volunteer6</td>
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<td><strong>Serbia</strong></td>
<td>8 participants (3 men, 5 women)</td>
<td>Took place in Belgrade. Red Cross of Serbia volunteers were asked to bring friends who were not part of the organisation</td>
<td>7 participants (3 men, 3 women, 1 unconfirmed)</td>
<td>Took place in small town. Red Cross of Serbia volunteers were asked to bring friends who were not part of the organisation</td>
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Table 1: Recruitment of participants

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Summary

Themes

The table below summarises the key themes by country. The themes were: ageing as decline; ageing as freedom; respect; family relations – care and contributions; experiences of discrimination; and being stuck.

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Table 1: Summary of key themes by country across the entire data set

Definitions of ageism

As part of the discussion, participants were asked to come up with a shared definition of ageism. Two groups came up with definitions.

- In Costa Rica, participants defined ageism as "... direct or indirect actions where someone is excluded, considered different, restricted, ignored, is treated as if they didn’t exist because of their age”
- In Serbia, participants defined ageism as "...any discriminatory act of an individual or system toward other person, based on age.”

Where discrimination is experienced

When asked about where participants felt they had experienced discrimination because of their age, they highlighted several times and places including:

- In healthcare provision
- Inadequate pensions
- In the financial sector where financial support was often denied
- When trying to access education
- In the workplace
- On public transport
- In the family where age appropriate behaviour was often reinforced by younger family members.

The following sections of this report outline these emerging themes and experiences of discrimination in more detail by country.
**Serbia**

**Being stuck**

Participants described various scenarios that depicted a sense of being stuck, which seemed to permeate the whole discussion. This involved feeling trapped in, and by, a space or a system that impacted negatively on their ageing experience. This space could be ideological (e.g. a political system), material (e.g. a physical place), or relational (e.g. with children, grandchildren). Participants seemed to feel a great deal of frustration with the political context and the impact this had on both young and old. There was a sense of resignation and sometimes hopelessness about how it might never change, with a suggestion of corruption and having nobody to turn to in relation to complaining.

**Examples from the data**

(Younger) moderator explains that she is involved in fixed term contract “project work”.

[P2]: This is, for example, discrimination for you, your parents and all young people. People work in projects because nobody can get a permanent job unless s/he is in a party. You have no money; you have no reason to stay. All young people leave the country. I do not blame them. And this is the discrimination of the older people because therefore we stay alone, without children. (Tomislav, FG1)

Now, in my old age, since my husband passed away, I manage somehow. Children have their own lives, grandsons are working and I cannot leave my house in Senjak although the roof is leaking. I have lived in this house with my husband for 50 years. And he passed away 15 years ago. (Slavka, FG1)

[Talking about her adult child who lives in Hurgada with her husband and dog [dog is blind and requires regular medicine], daughter asks mother to visit and take medicine with her because it’s cheaper than in Hurgada]... Where is the space for our peaceful old age there? This is how society perceives us, this is how it expects us to behave and this is how much they respect us. So we simply do not know what to do and how to move forward. [Vladimir, FG1]
Ageing as a time of decline

When describing how they felt about ageing (often when undertaking the ‘mood board’ task), participants typically responded in ways that foregrounded changes characterised by deficit and loss. This contributed to a fear of growing older and what was believed to inevitably await them in the future.

Examples from the data

[P2] We are old, meaning that we are no longer green, or fruits. This is a kind of reality for me ... I am not that young to think about some romantic experience. (Tomisla, FG1)

[P6] When you reach this age, you realize that perhaps you should have been more selfish and pay more attention to yourself. But now it is too late. And you do not think about old age when you are young. You know that it will come, that it is inevitable, you are afraid that your old age would be as unfortunate as my mother’s was. She was bed ridden for 10 years. Of course, you are afraid of it. And this is constantly somewhere in your sub-conscious. (Jelena, FG1)

Respect

Many participants reported experiencing what they perceived as a lack of respect from the society in which they lived. Specific examples were discussed in relation to the state, interactions with younger people, and family members. Experiencing a lack of respect seemed to heighten feelings of invisibility and uncertainty regarding how to find meaning in older age.
**Examples from the data**

[P6]: I think there is no understanding, no understanding by the community. People have become selfish. And they are getting more and more selfish. They are withdrawn, old people don’t interest them. (FG1)

[P3]: No, there is no connection. Because a young person has put on his ear phones and does not hear nor see. The sign says that the place is reserved for elderly people [on the bus] but he does not get up, just sits there. For example, once I have asked a boy to remove his back from the seat next to him so that I can sit down. He said no. Simply, no. (FG1)

[P7]: (Talking of journey to attend the focus group) ... I climb steps and see a man with cardboard saying ‘I am hungry’. At the stairway, there are 50 Arabs [Syrian refugees] out of 60 billions who fled their homes due to war. Near Knez Mihajlo monument, a lot of workers, a lot of dust, you have to go around, pass on the other side of the street. And this is how the state treats the old and the young. It does not care at all.

[P1]: I agree. Who respects who here? There is no respect.

[P4]: I agree.

[P8]: Me too. (FG1)

**Family relationships**

Importantly, participants noted how a lack of respect towards them was further demonstrated and reinforced by an expectation from their family to provide ongoing and often unlimited support and care. This included unpaid care work, the provision of expensive medicines, and other financial contributions. In some instances, this treatment of older family members shared characteristics with those of elder financial abuse and at times, involved physical abuse.

**Examples from the data**

[P7] (speaking of well qualified, employed daughter, who lives far away with her husband and pets) ... Now the dog has become blind. My daughter says “Mom, when are you coming?” And Mum will come on her own expense because daughter and son in law have not sent money. Medicines are expensive – 8,9,10 thousand dinars. She buys them here because they are not available there ... Where is the space for a peaceful old age there? This is how society perceives us. This is how it expects us to behave and this is how much they respect us. So, we simply do not know what to do and how to move forward. (FG1)

This scenario was especially complex because of its embeddedness with familial relations and older adults’ sense of responsibility toward helping their children within a challenging economic and political climate. More detailed accounts of ageism within the family setting may not have been reported due to matters of pride and respect for one’s wider family. This highlights the difficulties of gaining accurate insight when working alongside members of that community as an ‘outsider’. For example, consider the following passage:
Examples from the data

[P5]: A lot of things happen within the family
[P2]: These are individual cases.
[M]: Does anybody know about any individual case of discrimination in a family to tell us about, if you want?
[P2]: I do not know.
[P5]: Me neither.
[P1]: I would not know. (FG1)

[P5]: It is terrible that the old keep silent; they do not talk about the discrimination happening in their family. Not much is known about it because people are ashamed of this. (FG1)

Although participants did not report ageism within their own families, there were examples where they referred to stories of this nature that had been heard.

Examples from the data

(General discussion re what ageism means and how to define it)
[P7]: Exploitation: Family members or the others take away a pension from old pensioners they live with. They are aware that the old cannot do anything about it and exploit them in this way. There are cases of physical violence.

... 

[P3]: I, and you, knew the woman who died recently, she lived by the railroad. Her son punched and hit her to make her give him her 8000 dinars pension. (FG2).
A reluctance to report ageism within the family may have been exacerbated by older adults’ feelings of guilt, which came from a belief that their own youth and mid-life had been easier than their children’s. In this way, blame for such discriminative practices was often directed, once again, toward the state.

**Examples from the data**

[P2]: But we have to find excuse for our children. We are upset because we help them financially and with accommodation because they are lost in these times ... The West has imposed tempo which has swallowed us and our children. You should make money, raise children and pay for this and that, have to pay kindergarten and so on. I am in charge of a billion of these obligations. I can do nothing else because this is how much I help children. Take granddaughter (and pay for) music lessons, swimming – this is unbelievable. Dad, lend me 1000 dinars, drive somewhere. Children cannot. They are smothered. Our youth is smothered. They cannot make it, and all this came from the West ...

[P7]: I think less about my old age; I am more worried about those children and youth ...

[M]: So, you recognize the discrimination by the state of your children, what implies the discrimination of you.

[P8]: Yes, that's true. Look how many of us have children abroad just because of this state. If this is not discrimination, what is it?

[P6]: Half of our children are outside of this country.

[P2]: We are financing, shadowing 50% of their [children’s] life, we are supporting this society about which and about this devastating system there is nothing good to say. If we were not here for our children, they would be ruined. Trust me. (FG1)
Experiences of discrimination

Building further on the above points, some participants did not consider age discrimination to be exercised by individual members of their families or groups within their society/community. Rather, they commonly attributed negative actions toward older adults to be at the hands of “the system”. Participants highlighted a number of issues, which they felt impacted negatively on their life in relation to “the system” (e.g. health care provision – long waiting lists etc.). However, often, it was difficult to ascertain the extent to which the negative impacts of these were consequential of their age and therefore examples of ageism specifically.

Examples from the data

[P2]: “The system is guilty. Who discriminates us, system does.” (FG1)

[P2]: We are surviving, we join humanitarian organisation, participate in humanitarian work to survive. System does not provide anything. Look at the homes for the old, look at them! Horrible! (FG1)

[P6]: There are differences between generations, but there is no discrimination. Discrimination comes from the system. (FG1)

[P5]: [speaking of poor health care provision] “This is definitely discrimination of the old, see? Who needs health care most? (FG1)

Other examples demonstrated how certain opportunities were limited to older adults, because of their age.

Examples from the data

[P3]: It is very bad in the outpatient clinic. They absolutely do not have any respect for your old age, and that is how they behave. I have experienced it in a couple of cases, rude behaviour of physicians and nurses. You are old and now you even want me to give you a medical treatment p- this is their attitude. They do not say it, of course, but I got this impression in an outpatient clinic. (FG2)

[M]: Can anybody give an example of being faced with discrimination?
[P2]: In a bank. I receive a letter. People over 70 years are not allowed overdraft on their accounts. I ask what it is all about. I receive my pension regularly. I cannot be in debt. And he gives me the regulation that no overdraft is allowed to person over 70 (FG1).

Additional notes

It is worth noting that there was some discussion about care at the beginning of one focus group. Notably, that a care facility was generally deemed most suitable for older adults, rather than ageing at home. In the same focus group, there were reports of families relying on each other seemingly without any abuse of power. What distinguished these accounts from those in the previous focus...
group was the apparent financial security and health of the participants. What might happen when and if this changes?

Other examples of discrimination were discussed by participants, but these were often stories that the participants had heard about other people. For the purposes of this project, we have only included examples of discrimination that directly involve the participants themselves.
Costa Rica

Ageing as freedom

During the image task, participants often selected images through which they could describe their experiences of peace, tranquillity and freedom. In these instances, growing older meant being relinquished from previously constraining roles associated with raising a family and / or employment.

**Examples from within the data:**

[P5]: I chose image number eight because they’re balloons in the air and that’s how I feel. Free to do what I want. I don’t feel tied to anything. I have my children, my family, but everyone has their own responsibilities. So that’s the one [picture] that resembles my way of being. I feel good. I feel free. (FG1)

[P2]: I also feel that freedom. Since I turned 50, when I began to grow old, I’ve felt that freedom. I felt free, I’m happier, I live my life more. I observe small things. (FG1)

[P6]: So for me, this is the happiest time in my life. Today I feel happy, I can live how I want to, I do what I want, I go where I want. (FG2)

[P3]: (talks of former boss wanting her to liaise with numerous organisations to organise a day centre…) I said [to my boss] that’s not for me. What’s the point once you’re really old? You’ve done what you’ve done, and what you didn’t do, you didn’t do. And for what? … when you’re old, you’re useless, it’s not necessary. Now I don’t want to feel bad for what I’m saying, but it’s a way of thinking that’s very…Today I’m shocked at myself for what I said … I can now see that you can do when you are 70, 80, or 90 years old while the brain’s still working and your legs take you where you want to go. (FG1)
Many participants previously held negative perceptions of ageing based on how they witnessed their parents and grandparents ageing, but as they grew older themselves, these perceptions were also shifting. In this sense, ageing was often seen as a time of possibilities and an opportunity to guide younger generations; something that often brought a sense of purpose and empowerment.

**Examples from the data**

[P5]: Now, older people are given a lot of importance ... From what I lived through, from what I saw in my environment, how grandparents lived, parents, the criteria that existed for the older person, someone who had got to a certain point and no further, they have one foot in the grave/ They’re a waste of oxygen, and everything else you used to hear. So I thought what will happen to me when I turn 50? When I turned 50 I felt the same, I feel that I’ve not changed at all, it was like when I turned 40 or 30. (FG1)

[P4]: I had that stereotype that getting older meant getting to the chaos of illness. What changed my mind is reaching this age, having a pension, and having this energy that I have, this health. (FG1)

[P4]: I imagined it (ageing) as I saw my Mom. She was a very depressed and sad woman ... When I was a child, I thought that at 50 I was going to be old, depressed, sad and all that. But my life now is nothing to do with what I thought ... I’m grateful that our way of thinking has changed ... and I hope to live to be older than my mother was but with a different outlook. (FG2)

[P7]: I’ve always believed that old age is a time where you can keep doing things, you can keep growing; you don’t have to stop moving because of your age. (FG2)

[P1]: Now there are many more opportunities. There has been a change of consciousness ... Greater possibilities for taking care of your health, before, a 50 year old looked old, and now you see people who are much older and they’re well preserved, with a lot of vigour. (FG1)

[P8]: (Referring to image of a candle) I see that we are a light for the generations to come. Although we will all go out, it does not mean that the candle, even if it has a slightly dimmer flame, no longer glows. We are light. We guide the younger generation. (FG2).

[P2]: We see ageing differently from those who come after us. We had the example of our parents and grandparents being “old codgers” even when they were young. On the other hand, those of our children who have different attitudes towards ageing do not see the grandma in me (my grandchildren call me Mommy). They see us differently, and ageing will be different for the new generations thanks to us, as we look young, active and strong. (FG2)
These points noted, positive accounts and experiences of ageing seemed based on the premise of good physical and mental health. This, of course, raises the question of the extent to which people feel they can age without discrimination should they experience poor health and / or disability.

**Experiences of discrimination**

Participants seemed attuned to the power of societal views of ageing, and how these shaped notions of age appropriate behaviour (also see above re perceptions of their own parents / grandparents). Central to this were the views that younger family members had regarding how their older relatives should dress and behave.

**Examples from the data**

[P2]: Society also conditions you. If you get a new haircut, a suit etc. your children say that it’s not appropriate even if we like it. Society does condition the way we age [in physical terms? – unsure about this translation?] (FG2)

[?]: Sometimes it is our own family that labels us old, and with that comes the thought that you’re no longer useful, you can no longer do anything (elaborates) (FG2).

[P9]: It is our own children who criticize us the most for being old. They seem to think they will never get old, the way they carry on.
Participants reported examples of ageism (direct and indirect). Some had been experienced by the participants themselves. Others were based on hearsay or observations. Ageism occurred within a range of settings, including the family (also see comments above re family members reinforcing age appropriate behaviours), health care, education, the workplace, and public transport.

**Examples from the data**

[P4]: I was fired at 56. I still had 6 years to get to 62. To fire someone at 56 in this country is to throw him into the street to die of hunger because nobody is going to hire him [elaborates]. So it is a period when you have a lot of experience, and it’s not only my case, but in many cases, where senior citizens are fired and are thrown into the street. There’s a bit of discrimination. (FG1)

[P2]: I studied medicine for a few years, I did not finish but I always longed to work in a hospital... I was about 45 years old. I registered, I did the course. It had gone very well so I was very happy. When the course ended, to start working we had to commit to working for 10 years and in return we would earn a scholarship to study nursing professionally. I went to collect my results from the course, which was a pre-admission requirement, to know if they’d given me the scholarship. When I arrived they told me that I hadn’t passed. I said “but how? I did well, I had good results”... turned out that my average score was 100. So I asked why I hadn’t been admitted, and the answer was that they only accepted young people, and I, at 45, was going to be less productive that a person of 20. I was discriminated against even though I wasn’t “old” yet. (FG2).

[P6]: In the buses, young people sit in the priority seating and if they see a very old person with a cane, people who need to sit down, they don't get up. There are drivers who are attentive and ask for the seat, but most don’t.

[unknown] Most [bus drivers] don’t because sometimes they don’t even stop. When the buses see that there are older people they change lane and don’t stop. (FG1)

[?] (Talking about if you can no longer drive...) You have to take the bus or taxi. And sometimes the taxi’s don’t want to take us. It has to be UBER. Once day there was an elderly lady in a wheelchair and the son stopped a taxi. The taxi stopped and when he saw that the wheelchair was coming he set off because he had to wait or help the lady to get in. (FG1)

[?] [Discrimination] means exclusion. Being considered different. You no longer exist. It’s happened to me. I’ve arrived at a place to get served and they pretend like they can’t see me, as if I did not exist. Others arrive and they serve them. They ignore me. (FG1).

[?] We went to the Banco Popular, I took a ticket – they told me I had to take the senior citizen one. I took it. Someone else took a normal ticket, and she was served first, before me. (FG1)
Family relationships

Similar to the Serbian participants, the Costa Rica focus groups discussed how within the family unit, there was often an expectation that grandparents would provide care work. Often this was unpaid. It also impacted on women more greatly than men. While a small number of the participants welcomed the sense of purpose this could bring, others noted the inappropriateness of overburdening older relatives.

Examples from the data

[P2]: [t]he older person has to feel supported by their family. For example, making the grandmother or grandfather responsible for looking after the grandchildren in every sense of the word, is a lack of awareness on the part of the family. (FG1)

[P4]: There are sons and daughters who believe that they can automatically send their children over to their grandparents. And that’s totally wrong. (FG1)

[P5]: In the family environment, women are the most affected; they are always serving others, always looking after children. Men sometimes do it as well but for those types of activities everyone always depends on women.*

[P2]: I take care of my grandchildren, I help my grandchildren but I’m not doing it because they’re overburdening me but because it makes me feel useful. It makes me feel like me.

It is also worth noting here that because men are often reliant on women for their care, a danger is that widowed men may fare worse in later life than widowed women. That said, it was noted that women have less possibilities and experiences of leadership throughout their life, which might also negatively impact on their experiences of being widowed.

Examples from the data

[P5] In the family environment, women are most affected; they are always serving others, always looking after children. Men sometimes do it as well but for those types of activities, everyone always depends on the women. (FG1)

[P3] The woman is always the one who takes care of grandchildren, the one who sits down, takes care of the house; there has always been that machismo. It’s changing little by little but very slowly.

[P2] I think very much like her. You used to see Machismo much more. The woman is still dependent; she will never be a leader. It was seen as distasteful. I never saw myself in that sort of role ... (FG2)
Ageing as a time of decline

Similar to findings from the focus group discussions in Serbia, when describing how they felt about ageing (often when undertaking the ‘mood board’ task), participants from The Gambia typically responded in ways that foregrounded changes characterised by physical decline, deterioration and disengagement. Importantly, old age was equated with illness and disability. Being old was defined as a difficult time of life, characterised by struggle, suffering and in sometimes survival. This was due to physical changes (e.g. becoming weaker, experiencing pain, disability), but also the associated consequence of being unable to care for one’s family (also refer to later section Family relationships: Care and contributions). A lack of care, support, employment and related opportunities also contributed to this.

Examples from the data

[P1]: Being old is a challenge. We are not employed and survival has become difficult for us. (FG1-Male)

[P2]: Being old is a disability. When old age sets in, it is simply a disability because what you were able to do yesterday you can’t do today ... Ageing goes with sickness because being old, in itself, is a sickness. To achieve anything you need to be in good health. If you don’t nothing can be achieved. (FG1-Male)

[P3]: Being old is a very big task because even sitting or rising is painful. It’s all part of being old. (FG1)

[P4]: What has been said is indeed the truth. Human beings work when they are healthy. But when you get old, at a certain time, you won’t be able to do it despite having a family to take care of. When you are at this stage of your life, a lot of time is spent being sick and not gaining anything. You still have the will to do and achieve things but you just can’t. And that is the stage I’m at now. I used to do work but now because of health issues, I can’t. Now I’m sedentary and earning nothing; thus making life difficult. (FG1-Female)

[P1] With old age comes issues. If you want to build a house you would not be able to because you are old, ill and don’t have any resources. We still aspire to these things but it is not possible now that we are old and have no help. The problem is we have big aspirations but our body constrains us. (FG1-Male)

[P3]: Old age means untold pain and suffering and no assistance ... It has been 9 years since I’ve been able to do anything. Now all I do is beg. My leg has been amputated 3 times and I am now disabled. (FG2)
**Respect**

Similar to the focus group discussions in Serbia, many participants reported experiencing what they perceived as a lack of respect from the society in which they lived. Specific examples were discussed in relation to the state, interactions with younger people, and family members. Experiencing a lack of respect seemed to heighten feelings of invisibility and uncertainty regarding how to find meaning in older age.

**Examples from the data**

[?Male]: They regard us with pity saying “he was able to do that thing yesterday, but now he can’t” and when you hear that, you can’t do or say anything to them. If you insult the person, he/she will beat you up. [FG1]

*Note: In this discussion, the same person who made reference to fearing being beaten up spoke of themselves "beating" a younger person later in the discussion. This connects to our purpose and position as researchers. For example, are we approaching this data with a sensitivity towards older adults being treated badly and therefore highlighting examples where older adults report being beaten (or concerned about the possibility of being beaten) but not examples of where they have reported beating others? Similarly, it’s important to consider how we interpret words like ‘beat’ – are they actually akin to ‘scold’? What gets lost in translation? More integrated involvement by researchers within partner countries would help to solve issues like this*

[P3]: [t]he child of today looks down on us. When we talk they will say “these old men are not wise” but anytime they are in a challenging situation, they run back to us.” [FG1-Male]

**Family relationships**

The definition of this theme is similar to that of the other countries within the sample, in that it reflected the pressures and expectations experienced by older adults of caring responsibilities. It also drew attention to the increased difficulty of undertaking this role as changes to the body associated with the ageing process (e.g. pain, disability) took hold. Once again, the majority of care work seemed to be performed by women.
Examples from the data:
[P4]: I want to do some things but my current strength will not permit me to.
[M]: What kind of things are those?
[P4]: Daily survival and taking care of my needs. Even at this age I have a family to take care of. I can barely take care of my own needs let alone provide for / feed my family. I’m unable to do that. This, to me, is a disability. That’s my experience. (FG1-Female)

[P6]: I may be speaking cordially to you but my body is racked with pain. My hypertension and the state of my eyes are a problem. To be honest, I have family and when you have family and must work hard for them but the pain makes that difficult to do. (FG1-Female)

[P6]: Before I was along I used to do it (help them with everything) for my own kids, they grew up and married. I treat their spouses like my own children. I take care of them. And when they bare kids, I do everything for the kids. I only hand them over to their mother when they are going to bed. (FG1-Female)

[P2]: Being old means suffering for me because before I retired I was able to care for my wives and children. (FG2)

[M]: Are you supported by your family?
[P3]: Yes, the children wash my clothes and clean the house but when they are not there, I do all the work. (FG2)

[?female]: I am helped by my grandkids but I also do the work when they are not around. (FG2)

Additional notes
There was a strong emphasis on faith and religion, which permeated the focus groups discussions. The relationship between experiences of ageing, ageism, and faith is something which may require further exploration and analysis in the future.

Credit: Ageing with a Smile Initiative
**Pakistan**

**Respect**

Respecting older adults seemed deeply embedded within the culture and was commonly referred to within these focus groups; especially by male participants. That noted, this wasn’t always evident in practice as highlighted by one of the male participants who still worked within a health setting (see also ‘experiences of ageism/discrimination’ section). Moreover, it seemed that respect in older age was only afforded to those who acted appropriately for one’s age and had resources and status. In this sense, ensuring one was respected in older age was sometimes positioned as the responsibility of the older adult rather than those around them.

**Examples from the data**

[P3]: I have a positive approach towards it [ageing]. Till her death I respected my mother a lot. I have seen my mother as well. People Al Salaam when they pass by senior citizens. My mother got very respect, so I don’t have any negative approach towards it [ageing]. (FG1-Male)

[P?]: In our locality, mostly people respect elders. This generation respect old men and women alike. (FG2-female)

[P?]: We are also Kashmiri and so we have same approach about our elders. (FG2-female)

[P?): Yes, all people respect old people in our town. Nobody dare to disrespect us. Some young people come to us and say “please pray for us”. We pray for them happily. (FG2-female).

[P?): Give respect and have respect. We just want to be respected by others and also want to respect them. They should respect us like parents, and we do the same. (FG2-female)

[P1]: “There is no value of the aged people. They are not respected even when I am in the field. When I visit the hospital, especially in private sector, the doctors scold the old patients in spite of the fact that they are here just to serve the people. The reason for this is that we don’t have the etiquettes to talk to the elders and seniors. We still don’t know how to treat them nicely and good. (FG1-Male)

[P4]: They (older adults) are respected... aged person should realise that if he has the status, he is respected. For example, if I am wearing dirty clothes I won’t be respected. If I am clean, neat and not having smelled mouth I’ll be respected. (FG1-Male)
Family relationships

This theme seemed more pertinent to female participants and follows the definition outlined in earlier sections in this report. Much of the discussion around family relations specifically within the women’s focus group, took on the tone of concern; of changing traditions, consequences of limited resources, and the feeling of vulnerability in older age which resulted from the need to depend on others.

Examples from the data

[P?]: Old men and women face different problems in their old age. I think women suffer badly in her old age. Men can go outside. They can do something to earn and on the other hand women faces more problems. If she is dependent on his son or two sons, if she need anything, she will need to ask one son and if he refuse then she will ask from the other son. I think men is not dependent as women dependent on his sons. (FG2-female)

[P?): Parents can breed 10 children. But unfortunately, these ten children will not be able to take care of their old parents. This is a big question for us now. Children do not take care of their old parents. You know how parents take care of their children. They manage their education, marriage and everything. But, when they are older, their kids do not care. They have more concern about their spouses in every aspect but not their parents. It might be the case out of a hundred that there is a good daughter in law. If you do not have money, you will be neglected in old age. (FG2-female)

Additional notes

There are glimpses of other themes emerging from the focus groups in Pakistan. For example, in the women’s focus group discussion there are some responses which signal feelings of invisibility and being ignored; however there were some translation difficulties which means it is difficult to describe this as a theme. Similarly to The Gambia, faith and religion was deeply entwined with experiences of ageing. This is an area to explore in the future.
Considerations

This was a pilot piece of research, which contributed to our understanding and learnings around conducting qualitative research as a global network. Some challenges were encountered during the implementation of this research, which have all been documented in a separate learning report. For example, focus groups were run on a limited budget with some impact on how the groups were moderated and in turn the quality of the data collected. Secondly, data had to be transcribed and translated into English on a limited budget resulting in some of the meaning of what participants said being lost in translation.

Final remarks

Despite the considerations listed above, this has been an important exploratory study to examine the lived experiences of ageism within lower-and-middle-income countries. The analysis of this data highlighted the centrality of family relations for how ageism is perceived and experienced in a number of different lower-and-middle-income countries. In this regard, as often the primary carers within a family unit, older women are likely to be at greater risk. Respect was also a cross-cutting theme, with many older adults describing instances where they had felt it was lacking from others. In the future, it would be useful to explore the theme of respect further, looking at how at how it intersects with other parts of identity, such as gender and class differences. The analysis also signalled important cultural differences (e.g. the impact of a strong faith via religious beliefs, political climate, etc.) that impact on the experiences of ageing and ageism, which warrant further exploration.

If you want to get involved in campaigning to end ageism, or would like to help us generate more evidence in relation to experiences of ageing and ageism in lower-and-middle-income countries, please contact the Campaigns team at campaigns@helpage.org.
Annex 1

Discussion Guide: Exploring ageism and age discrimination

Objectives
- To identify how and where ageism manifests itself
- To understand older people’s experiences of ageism and age discrimination
- To explore the meaning that individuals ascribe to their experience of age and ageism and how this affects them

Materials: flip chart paper and stand (or tape to stick on wall), pens, post-it notes, mood board (please print one per person, in colour), audio recorder and phone/video recorder

Room set-up: Participants to sit in a circle/u-shape around a table where they can all see each other and the flipchart. If this is not possible, make sure you have a clear wall for the exercise in section 5 on mapping. Choose somewhere with no background noise.

Audio-recorder: Please make sure the audio recorder is switched on and working. Please ensure it is situated in a place where it will record everyone’s voices.

Please note: There should be a maximum of 8 participants for the group (6-8 is ideal), including a mix of women and men, and ages.

Guidance for the facilitator is written in pink

Introduction (5 Minutes)

Read this introduction and ground rules to participants

Welcome and thank you for volunteering to take part in this focus group. You have been asked to participate as your point of view is important and we appreciate your time.

For this discussion we are here to talk about ageing and your experience of ageing, and in particular we will be exploring times or incidences of ageism or age discrimination and how we and our community understand and respond to that discrimination. The discussion will last about 1 hour and a half. We will be recording and taking notes during the session, but I would like to assure you that the discussion will be anonymous and confidential, and the information will be used to inform our understanding and would not be attributed directly to you as individuals.

Ground rules
- The most important rule is that only one person speaks at a time. There may be a temptation to jump in when someone is talking but please wait until they have finished.
- There are no right or wrong answers
- You do not have to speak in any order
• When you do have something to say, please do so, it is important that I obtain the views of each of you and you feel free to be as open and honest as possible
• You do not have to agree with the views of other people in the group, but be open to sharing and hearing from each other
• You do not have to answer any questions if you do not feel comfortable, everything is voluntary, and you are free to leave at any point
• What you share with this group today should remain confidential. No one should repeat what is said outside of the group.
• The facilitator will guide the conversation which may mean sometimes discussion will be interrupted to ensure we stay focussed on the topic
• Does anyone have any questions? And is everyone happy to continue?

Section 1: Warm up (5 minutes)
Ask each of the participants to give a short introduction of themselves to the group.

Prompt:
• Name
• Family / who they live with / where they live
• If they work, what they do or if retired what they used to do for work
• Tell the group one thing they do every day that they enjoy

Section 2: Personal experience of ageing (25 minutes)
Introduction: As you know we are here to discuss ageing and learn more about how you feel and the experiences you have as older people. To begin with I would like to find out more about your own personal experiences.

Introduce the mood board: ask participants to look at the images on the board

From these pictures, which one captures well how you feel about ageing? It might be that the picture shows how you feel, or it might be just a colour in the image that draws you to it.

Ask participants to share their choice – remember to say the number out loud for the audio recording

Probe:
• Why did you choose this image?
• How does it make you feel in relation to growing older?
• Did anyone pick the same image? For the same reasons or different reasons?
• Did anyone pick a different image?
• Explore reasons for positive feelings or negative feelings (use ‘how?’ ‘why?’ questions to help with this and ask participants to illustrate their point with an example).

When you were younger what were your expectations about growing older?

Probe:
• How is your experience the same/different from your expectations?
• Differences between men and women
• How has life changed for you as you have gotten older?

**Probe:**
• Is there anything you can do now, that you couldn’t do when you were younger?
• Is there anything you feel you shouldn’t do because of your age? (Probe: How do you know that you shouldn’t do these things? From where do you get this information?)
• How, if at all, do you feel this differs for men and women? Why do you think there are these differences?

When you imagine yourself in 5, 10, or 15 years’ time, what concerns you? What interests or excites you?

**Section 3: Broader perceptions of ageing (15 minutes)**
In general, how do you think that you are perceived in your community as an older woman/man?
How do you think you are expected to behave as an older woman/man?
Are older people valued in your community or wider society?

**Probe:**
• Why/why not?
• Do you think that there are differences in the way that older women and older men are valued by the community? [Probe: example of where they have seen / experienced this]

Who or what do you think influences how people feel about getting older?
• Why do you say that?
• Do these things have a positive or a negative influence?

Give examples if needed. For example, media, family employers, local leaders, culture, laws etc.

**Section 4: Understanding of ageism and age discrimination (20 minutes)**
Have you heard the word ‘ageism’ or ‘age discrimination’ before?
• What does it mean to you? How else would you refer to it?
• How would you describe it to someone who hasn’t heard of it before?

Write responses on a flip chart. Try to come up with a shared definition that everyone agrees with to guide understanding for the next session. Make sure to read out the agreed definition clearly for the audio recording.

As a group I would like us to make a list of all the places or times that we are aware of, where we think older people are treated differently or in a negative way because of their age. For example, at home, at work, at the health clinic, when out shopping etc

Write each answer on a post-it note or ask participants to write themselves and stick up on flip-chart/wall so everyone can see. Please write only one time/place on each post-it note. This is important for
section 5. Remember to read out each time/place for the audio recording.

- What type of things can happen to an older person that are discriminatory?
- How common is it for older people to experience ageism here? Why?
- Who is the discrimination most likely to come from?
- What do you think the consequences of this might be for the older person?
- From the list of all times or places, which is the most common?

Section 5: Experience and the effects of ageism and age discrimination (25 minutes)

Mapping exercise: I would like to look at our list of times or places where age discrimination happens, but this time I would like to think about the different impact ageism can have on a person.

Use flipchart paper and draw a person in the middle
Use the post-it notes from the previous exercise. Ask participants to work together and agree where to map the places and times discrimination occurs from their earlier list. The closer the place is to the person indicates that this has a bigger impact on their wellbeing and happiness. The further away the less impact it has. Try to get the group to agree, but explore different thoughts and feelings where necessary

For the audio recording, please clearly read out what is written on the flipchart. When the map is complete, explore those closest to the person.

- Why are they here?
- What makes them to have the biggest impact?
- Are there any differences for men and women?
- Are there any differences for older people with a disability?
- How easy do you think it is to report this kind of discrimination? Why?
- Who could an older person go to for support?

Personal experience sharing:

Ask participants to share with the person next to them – write question on flip chart to refer to

Talk about your own thought and feelings, not those of other people. Use “I” and “my” rather than “they”, “we” or “our”.

Share a time when someone told you that you are too old to do something or treated you unfairly because of your age.

- Why do you think you were treated this way?
• What impact did it have on you?
• How did it make you feel? Refer to moodboard if it's helpful

Ask pairs to share their stories with the group (if comfortable)
• Has anybody had similar experience?
• How did you react / feel?

Section 6: Addressing ageism and wrap up (5 minutes)
• What do you think are the most important forms of ageism to address in your community?
• How could ageism be prevented?
• Who should / could be involved?
• Where can older people go to for support?

Do you have anything that we haven't discussed today, that you think is important to add or discuss?

Thank participants and close. Remember to turn off audio recorder and to take photographs of post-it notes.

Before everyone leaves, please make sure everyone is comfortable with everything discussed and shared and make sure they have contacts details of organisations they can contact for further support if necessary.
Annex 2: Moodboard