Suffering: The darker side of ageing

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ABSTRACT

Much of the literature on ageing is presaged upon a model of advocacy that seeks to combat what is seen as the negative stereotyping of old age and old people. One consequence is that ageing studies has difficulty in confronting the darker side of ageing except in so far as age associated disability and distress can be attributed to extrinsic disadvantage, such as low income, poor housing and inadequate services. The pain and suffering associated with age itself tend to be neglected as subject experiences. This paper seeks to shed some light on these topics, considered under the general heading of ‘suffering’. Suffering can be viewed from the perspective of moral philosophy of medicine and of the social sciences. Serving as a witness to suffering has been proposed as the basis for an ethics of human dignity and as a call upon the collective moral agency of the community. Whether or not one accepts such an ethical viewpoint, it seems important for students of ageing to acknowledge document and explore the place of suffering in later life.

Introduction

Much of the literature on ageing is presaged upon a model of advocacy that seeks to combat what is seen as the negative stereotyping of old age and old people. One consequence is that ageing studies has difficulty in confronting the darker side of ageing except in so far as age associated disability and distress can be attributed to extrinsic disadvantage, such as low income, poor housing and inadequate services. The pain and suffering associated with age itself tend to be neglected as subject experiences. Although the ‘problems’ of ageing and old age are frequently addressed, the gerontological research community represents these largely as matters arising from exclusions and inequalities accumulated over the life course, occasioned by the conditions of later life or reflections of the inadequacies of services that are provided to individuals in later life. The possibility that ageing might be inherently deleterious and that old age, qua old age, is an undesirable state is virtually excluded from the discipline’s collective consciousness. Instead, regular polemics are published decrying the ‘ageism’ of various institutions, from the workplace to the market, from healthcare to housing, with the assumption that such ideologically guided misrepresentations of old age should be combatted with, and can be defeated by empirically objective data, data that once gathered must inevitably convey a more accurate, fairer image of old age and old people than that that pictured by ageism’s unconscious and unthinking allies. The slogan of ‘speaking truth to power’ seems to serve as the discipline’s dominant ideology.

At the same time those who promote too positive an image of age are also criticised, in this case for denying the ‘realities’ of old age. Such over-optimistic representations, it is claimed, risk further marginalising those who are already marginalised, those who fail to age ‘productively’, in effect penalising those who cannot succeed (Holstein, 2011: 239). Caught between the essentialism implicit in any attack on ideological representations of the world, and the desire to capture and convey the diversity and variety of old age, the goal of gerontological research seeks to achieve what renaissance writers called a ‘good’ old age (Gillear, 2013). By this is meant, not no old age, but an old age defined by personal content, physical health and social well-being where each and every person can become as thoroughly (authentically, virtually) old as it is possible for a person to be. Even when caution is called for in not over-idealising later life, there remains a marked reluctance to consider old age as anything but a desirable end; to consider it not simply as a source of disability or impairment, but also as a harbinger of abjection, indecency – in short, of suffering.

Erik Erikson complained about the misuse of what he saw as ‘his’ view of identity, that it was being treated as if it were some kind of achievement to be tucked under a person’s belt as an acquired and valued status. Rather, he pointed out, it should be more properly be conceived of as a continual process of becoming, of sometimes failing to become, of accommodating and of sometimes failing to accommodate to the wider world in which we realise our social being (Hoare, 2013). Just as Erikson felt that much psychosocial research ignored the ‘downside’ of identity, I want in this paper to suggest that gerontology – and ageing studies in general – have been equally prone to ignore or treat as merely superficial the downside of old age and its capacity to be
the site of distress, disgust and despair.1

While life and the course lives take can elicit such feelings quite independently of a person's age, the argument presented in this paper is that approaching and/or reaching old age brings into focus aspects of life that are rarely present at earlier periods. This includes not just a growing proximity to death and the likely chronicity of many health conditions, but the narrowing of life's opportunities and the intractability of a long life's miseries. Of course, for some people later life can prove a time for new directions, for opportunities to do things not done before, to undertake new friendships, new enterprises, new romantic partnerships and new collaborations. Such examples however are defined by their exceptionality. Any significant aesthetic, athletic, emotional, sexual or social achievements late in life becomes newsworthy, precisely because of their seeming reversal of the expected trajectory that a life takes. Most seventy, eighty or ninety year olds neither experience nor perhaps wish for such adventures. This is not to claim such things are impossible but simply that they form exceptions – events that counter the stream that later life usually takes.

My intent in considering the darker aspects of old age is neither to normalise nor to pathologise them, and certainly not to confound them by offering counter-examples of 'successful ageing'. At the same time, I do not wish to belittle the achievements of those who do realise 'success' and develop new 'styles' of living in later life. Rather the aim of this paper is to call for more attention to be paid to the sufferings of old age, for the discipline as a whole to act as a witness of that suffering and for it to be better represented and rendered in some sense at least a meaningful area of study, without resorting to the kind of theodicy that for it to be better represented and rendered in some sense at least a meaningful area of study, without resorting to the kind of theodicy that treats it as some kind of necessary 'journey' or 'becoming'. In so doing, the paper seeks common ground with those writers who have sought to explore the sufferings of those experiencing severe illness, impairment and adversity, including its 'unbearability' (Dees et al., 2011; Saetersdal, 1997; Struikamp, 2005; Verhofstadt, Thienpont & Peters, 2017). Setting the sufferings of old age within this broader framework, the aim is to acknowledge that even when access is improved, income secured and inclusion realised for the mass of older people, there remain the everyday humiliations of the aged body, the confrontations with pain and impossibility, and the existential despair that can be representative of both the social being and the subjectivities of older people.

While recognition has been given by gerontologists to the fact that "we cannot evade what is considered the dark side of aging" (Holstein, 2011: 238), the sufferings of old age are still 'infrequently discussed' in the gerontological literature (Black & Rubinstein, 2004: S17; Schulz et al., 2007: 5). This paradox can be seen as one that in some way seems inherent to ageing itself. Whether viewed as process or status, age is both familiar and yet alien, integral to and yet set apart from the course and segmentation of everyday life. Finding a framework (or frameworks) for acknowledging and representing the sufferings of age is worth undertaking even if, or perhaps particularly because, such suffering may prove an intractable accompaniment of agedness. It is no longer enough to conclude the tale of life with the idea of living happily into old age; those of us who are citizens of the developed economies of the world are living lives that more often than not extend well past that point. It is time to consider the more fateful consequences of such extensions and their accompanying extremities.

Suffering: a philosophical preface

Before addressing the particular sufferings of old age, it is helpful to consider the idea of suffering itself and the ways it has been understood. Medicine is often concerned with suffering and its alleviation. Its framing of suffering as a 'diagnosable condition' capable of being 'treated', is a position that has been well articulated by the late Eric Cassell, (Cassell, 1999). Such approaches imply a degree of empiricism that may pre-empt further consideration of suffering's ontological status. This section will consequently defer engaging with the more 'medicalised' approaches toward suffering, to concentrate instead upon suffering as a 'thing-in-itself', a 'disvalued and unwanted state of mind body or spirit' that 'range[s] widely over an indefinitely large territory of afflications, symptoms and complaints' (Shweder, Much, Mahapatra, & Park, 1997: 121).

There have been many attempts to categorise explanations of suffering (for an overview of some of the anthropological literature, see Shweder et al., 1997) but attempts to understand what suffering is – and not why it occurs – are less common. The philosopher most associated with the examination of suffering and its centrality to human life is Arthur Schopenhauer (1788–1860). Schopenhauer considered suffering as both the reflection of the active or positive experience of pain and misery coupled with the absence or loss of pleasure and well-being (Schopenhauer, 2006). For Schopenhauer, this coupling of pain with the absence of pleasure provided the constant backdrop to humanity's existence. Yet despite this pessimistic view, he nevertheless saw the existence of human suffering as the justification for human morality. Only through experiencing the other's suffering in the same way as they experience their own, he felt, could individuals surmount what otherwise was their fate, that of unbounded egoism.

In his essay, 'On the Basis of Morality', Schopenhauer wrote: "it is the everyday phenomenon of compassion, of the immediate participation, independent of all ulterior considerations, primarily in the suffering of another, and thus in the prevention or elimination of it.... As soon as compassion is aroused, the weal and woe of another are nearest to my heart in exactly the same way ... as otherwise only my own are. Hence the difference between him and me is now no longer absolute." (Schopenhauer, 1995: 144). Just as our own suffering moves us to seek its alleviation, so does our experience of another's misery provide us with the same kind of incentive to alleviate his or her suffering. For Schopenhauer, it is this sense of compassion that alone can overcome our egoism, revealing our status as members of a common, suffering humanity.

Emanuel Levinas has outlined a similar case for making sense of suffering, in two essays, 'Useless Suffering' and 'An Ethics of Suffering', (Levinas, 1988, 1994). Levinas believed, like Schopenhauer, that only by others bearing witness to suffering can meaning be given to it. From such bearing witness, he argued, can an ethics of suffering be constituted? Unlike Schopenhauer, however, he saw this not as the resolution of the problem of individual egoism and the dominance of the urge for self-preservation, but as the resolution of what otherwise was the senselessness of subjective suffering. From the individual, subjective experience of suffering, Levinas argued, it was impossible to create any meaning, let alone any morality. Suffering inculcates only alienation and passivity. The person who suffers can do nothing but suffer, unable either to accept or accommodate it (Levinas, 1994: 130). By serving as a witness to the suffering of others, however, a moral meaning can be created that establishes a common consciousness of human dignity and of human limitation. Levinas' principal concern is not about analysing or interrogating the unnameable, undefinable nature of suffering, precisely because he regarded the experience as incapable of further analysis (Levinas, 1994: 128). Rather, he sought to distinguish between the unanalysable, subjective dimension of suffering and its objective appearance to the other. In this relationship between the one who suffers and the one who observes that suffering, and only in that inter-subjective location, he argues, can sense be made out of suffering.

The medical ethicist, Bustan is uncomfortable with this formulation (Bustan, 2016). He finds it impossible to envisage an escape from the intrinsically self-absorbing quality of suffering. While acknowledging that suffering "encompasses a wide range of experiences – pain, torment, distress, agony and misery" for him, it differs from other feelings "in that...it has no object that can fully ...represent the experience of it"
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