Aging: Rethinking *What* and *How* We Know

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Our Future is Aging:
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Critical Gerontology

1. Interdisciplinarity
2. Inside Aging
3. Data-rich but Theory-Poor
4. The Life of Ideas
5. Reflexivity
Examples of Critical Gerontology Literature

The Routledge Handbook of Cultural Gerontology (2015)

Ageing, Narrative and Identity (2013)

Ageing, Corporality and Embodiment (2013)


Age Matters: Realigning Feminist Thinking (2006)

Ageing, the Body and Social Change (2008)


Critical Gerontology: Perspectives from Political and Moral Economy (1999)
1. The Aging Population

Demographic Trends
Observed and projected youth, senior, and total demographic dependency ratios, Canada, 1971 to 2056

Number of "dependents" per 100 population of working age

Source: CANSIM Tables 051-0001 (1971 to 2008) and 052-0004 (2009 to 2056).
Baby Boomers: Five Reasons They Are Our Worst Generation
Ten thousand are retiring every day. Good riddance.

BY GENE MARKS  |  DECEMBER 13, 2013
* Apocalyptic Demography and Intergenerational Justice
Critical question: How and why did older people become part of a risky population?
'Far more than is usually assumed, successful aging is in our own hands .... Successful aging is dependent on individual choices and behaviours’ (Rowe & Kahn, 1998)

George Simmel: ‘a coerced individualism’

Max Weber: ‘the possibility of maintaining the life-style of a status group is usually conditioned on economics’

2. The Healthy Lifestyle
3. The Falling Body

USA -- 45%-61% of nursing home residents fall each year.
Canada -- second leading cause of hospitalization for women 65+ (fifth leading cause for men).
UK -- Falls most common cause of accidental deaths for 75+.

World Health Organization *Global Report on Falls Prevention in Older Age* (2007), 28%-35% of people 65+ fall at least one each year.
Today there are over 400 risk factors assumed to be related to falling.
What is a fall?  A fall is ‘inadvertently coming to rest on the ground, floor or other lower level, excluding intentional change in position to rest on furniture, wall or other objects.’  Such an operational definition is needed because otherwise research would leave ‘room for interpretation to study participants’ and ‘this results in many definitions of falls. For example, older people tend to describe a fall as a loss of balance, whereas health care professionals generally refer to events leading to injuries and ill health’ (WHO Global Report on Fall Prevention in Older Age 2007).

But slips, trips, slides. accidents and bumps are what it feels like to fall. How can we incorporate these ‘interpretations’ for fall prevention purposes?

Important factors: environments, technologies and gender.
Thank you for your attention