



Health, citizenship and older adults in the context of ageism

The concept of health incorporates multiple meanings which overlap the natural state: as a social and cultural construct in the dimensions of everyday life from inter and trans-disciplinary perspectives; as a product of living conditions in a complex web of relations which man establishes between himself and nature through the act of work; and as a social right of citizenship.

It is important to point out that social recognition, as part of the fight for rights, goes beyond the strictly sectoral notion of formulating health policies, but serves as an element that permeates all government social policies, whereby the right to health is regarded not only as the right to access health services, but also the right to dignity in life.

In this sense, citizenship as a guarantee for a set of liberties, rights and duties established in a society should not be left to the government to define as it sees fit, but encompass articulations with social movements and the struggle for rights, which in turn calls for protagonism and the constitution of active individuals.

It is therefore necessary to strengthen the spaces supporting democratization and participation, albeit in the form of legal/institutional management boards or other entities which foster the participation of civil society.

The current scenario, with advances in the legal sphere regarding recognition of health as a citizen's right, raises numerous challenges in overcoming the gap between the formality of laws and the awareness and practice of social subjects. Citizenship, in its capacity as a measure of civilization that is constantly evolving in society requires, in order to thrive, a direct (active) form of participation, fueled both by the struggle to secure rights and to exercise them when held¹.

These challenges include the need to create open forums for reflection on the context of ageism, proposing alternatives that can modify negative thoughts (stereotypes), feelings (prejudices) and attitudes (discrimination) held about older age.

Ageism, a term defining stereotyping, prejudice and discrimination towards individuals on the basis of age, is a complex and multidimensional phenomenon which can take on structural (institutional), interpersonal (relational) or self-inflicted (directed toward oneself) forms². It is important to debunk the notion that older people are part of a homogenous vulnerable stratum of the population, and to broaden understanding about the heterogeneous and singular nature of the aging process.

In this context, a specific aspect warrants particular attention owing to the dearth of studies on the issue: the effects of layers of prejudices on the health of older adults. Such stigmas, still prevalent in society, perpetuate negative stereotypes and demeaning attitudes. It is important to listen to what older individuals – many of whom are black, gypsy (Romani), indigenous, LGBTQIAP+, obese, or people with disabilities – have to say about their coping strategies in the face of daily challenges and difficulties, and about their ability to mobilize as a collective resistance to promote trust, respect and esteem³.

Although historic social struggles have helped further citizens' rights, people rarely exercise, demand or make avail of these rights. A naturalized view of situations still predominates, where citizenship is not exercised to the full. In fact, citizenship is something which must be won, involving consolidation of democracy, transformations of government institutions, and changes in societal culture. One of the major challenges lies in articulating institutional changes with the creation and expansion of democratic practices and a culture of citizenship, particularly among (and with) older people.

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