



Coimisiún na hÉireann um Chearta
an Duine agus Comhionannas
Irish Human Rights and Equality Commission



**Age &
Opportunity**

Is Ageism Ever Acceptable?

Significant themes emerging from five online Citizens' Assemblies

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It was a health issue, but it became bigger than a health issue.

You didn't have any choices, really, so I do think that in the long run it will have an awful effect on an awful lot of people.

There was no talk about discrimination against elderly people.....But now, all of a sudden, it's discrimination because younger people won't be able to...eat inside.

The Government needs to be told in no uncertain terms that older people's rights have definitely been infringed to a large degree.

Next time, how are we going to confront the issue in a way that is...less likely to lead to ageism?

We'll have to start again. And fight back.

Background

In June 2021 Age & Opportunity held five online Citizens' Assemblies during which older people were facilitated to explain how they experienced "cocooning" and other pandemic-related restrictions and initiatives. The aim of the Assemblies was to:

- Consult with older people about their experiences of cocooning and its relationship to their human rights
- Prepare for a National Assembly of duty-holders to be held at IHREC in autumn 2021.

A rapporteur was engaged to:

- Take notes during the Assemblies
- Analyse contributions into key themes
- Submit a report, to include the themes, analysis and commentary.

Methodology

Following briefings from Age & Opportunity and attendance at one of the co-design meetings held in May 2021, the rapporteur attended five Assemblies of roughly two hours' duration. Her note-taking was supplemented by:

- Recordings and transcripts of proceedings, provided by the Assemblies' technology providers
- Notes taken (during four Assemblies) by a member of Age & Opportunity staff
- Debrief sessions with Age & Opportunity personnel, held immediately after each Assembly.

This report distils and analyses the experience and content of the five Assemblies.

About the Assemblies

Assembly participants were self-selected, having volunteered to take part. In total, some 35 people attended, representing around 68% of those who had registered for the events. Of the participants, six (17%) were men, with the rest identifying as women. Most, but not all, of the participants were aged 70 or over, and had experienced cocooning. One of the Assemblies was sign-language interpreted.

The Assemblies were facilitated by a staff member of Age & Opportunity. The facilitation style was organic and light-touch, aiming to prompt and probe contributions, rather than to steer participants towards pre-set topics.

After introductions and housekeeping announcements, a short video, comprising vox pops of six people over 70 talking about their experiences of cocooning, was shown as a stimulus to conversation. It was shown again after the tea-break which occurred roughly an hour from the start of each Assembly.

About this report

Both the overall report, and each significant section dealing with a key theme which arose during the Assemblies, starts with a selection of quotations from participants, shown in blue. Quotations cited throughout the text are also shown in blue.

The thematic sections contain analysis and interpretation of participants' contributions, taking their lead from the quotations on each topic. The themes are closely interlinked. A discussion section concludes the report.

Significant themes emerging from the Assemblies

Gratitude

I felt cared for.

The Government may be misguided but it was all for our good.

I totally appreciate the good intentions and I think that the Government did a reasonably good job.

The main thing the Government was trying to do was to keep down the numbers...maybe some of it was overkill but at the time it was very important.

I think that the Government was right to shut us down as much as they did, even though I didn't like it.

I think some good has come out of it even though it has been very sad for lots of people.

Many participants acknowledged the Government's good intentions and the caring actions of local communities. Most participants understood cocooning as a method for protecting older people from the ravages of a disease whose effects were generally more serious for older than for younger people. Even if they saw it as **overkill**, these participants were inclined to view it as benign in concept: **we didn't realise the damage that was done by just shutting us down**. These participants generally saw the unpleasant effects of cocooning as unintended consequences caused by lack of forethought, lack of consultation etc, which themselves resulted from the undervaluing of older people's contribution.

Resentment

I really resented people offering to buy me food and stuff. I felt I was capable of doing it myself.

I resented politicians...telling me that they were protecting me when I felt actually that the boot was on the other foot.

They took it that we were dopes.

Why me? We are the only ones staying in!

They [the Government] know nothing about older people, which is a very sad reflection.

Trying to make us feel as if we were special, while we were really being seriously restricted, was a bit hard to take.

All participants understood that everyone, not just older people, suffered during the pandemic but there was ambivalence about who was making sacrifices for the benefit of

whom. A minority of participants saw cocooning as a deliberate move on the part of the Government to marginalise and frighten older people, although no clear reason for this emerged.

Several participants saw the aim of cocooning as being to protect the health service from being overwhelmed by too many older people. For them, any protective effects of cocooning on older people were simply a by-product of shielding the health service, or to protect the wider population, not older people in particular: *At the time when all this cocooning came in...it was for the health of the nation*. These participants were generally the most vocal in naming the practice of cocooning as disproportionate and a breach of older people's rights. As the second quotation at the start of this section implies, they felt that, by cocooning, older people were the ones doing the protecting (of inadequate health services and Government), rather than being the ones in receipt of protection.

Infantilisation

We're not kindergarten children.

You don't lose your brain when you are 70. If you classed any other group of people [as vulnerable] and told them what to do, [people] would be enraged.

We've been around a long time...Most of us know quite well how to look after ourselves – and we get more careful as we get older.

We all behave ourselves really; we were all very, very conscious of our own safety and the safety of others.

I think you get better results if you don't patronise people.

No matter whether or not they saw the aim of cocooning as benign, the vast majority of participants were highly critical of the way in which it was implemented. They were furious about the blanket *order* to cocoon issued to everyone over 70.

Participants experienced the choice of the age of 70 as the starting-point of cocooning (a term they unanimously loathed) as arbitrary and ageist. They felt that advice to self-isolate should have been based only on health status and should have applied to people of all ages. Several participants in their 70s stressed their excellent fitness and health status, pointing out that they were fitter than younger friends and family members.

Participants were also highly critical of the way in which matters related to cocooning had been communicated (see also page 6). Most felt that cocooning should have been pitched as "advice", rather than implying that it was a regulation or legal requirement (see page 3).

In particular, participants were *annoyed by the way we were spoken to*, reading it as implying that they were stupid or infantile: *It was like, you sit at home now and we'll tell you when you can come out*. They pointed out that many people over 70 do high-powered jobs, including as politicians. This was discounted in the age-determined imperative to cocoon, and *the way older politicians and medical people approached ageing was disjointed: they didn't see themselves as old...they never look in the mirror and say, look, we're talking about ourselves*.

The broad range of participants believed that older people should have been given the facts and then trusted to make their own minds up about what to do in response to the dangers posed by the pandemic. *There was quite an appreciation by people in our generation of what the common good meant*, they said. Some felt that the Government's lack of trust in their capabilities was now mirrored by a lack of trust in Government on the part of older people: *As time went on we got a bit alienated*. The experience of nursing homes during the pandemic reinforced this view (see pages 11-12).

Family and community pressure

I had to hide my actions from one child from another child who was extremely protective – criticism from a younger generation out of love, really.

The children of older people, they became very bad advocates... "Oh, you must not go out. Oh, we cannot come to you, we can't go into the same field as you". They confirmed and strengthened that message... I have heard quite a number of... sensible people that I know, saying, "My daughter says I can't do this" or "My son won't allow me" ... That is one of the surprising outcomes of this, for me.

They suddenly started looking after me. I appreciate this is out of kindness and love, but I think I wasn't ready to be seen as an older person. That might be a failing on my part. Maybe I should accept it.

My children realised that I don't tell them what to do so they don't tell me what to do.

Participants talked of *being bossed about* by their children and other family members. One younger person was nicknamed *Sergeant Virus*. While understanding that protection was offered *out of love*, participants were inclined to read it as more evidence of infantilisation (see page 3) and the stereotype that older people are not capable of independent thought or action, or of being able to interpret modern life.

For some, as in the third quote at the start of this section, being looked after started a process of self-doubt about their own capability. Others saw it as driving a wedge into family relationships: *Even in my family I did things quietly, keep your counsel, not telling people what you were doing*. A participant observed, *We are turned into begrudgers, policing each other. It is pathetic that we, as an educated nation, should turn into those sorts of people. Fear has done this.*

There were some incidences of aggressive behaviour: *A cousin of mine was shouted at when she went out: "Get back in, you old person, don't come near us". She was crying*. There was also general unease: *You go out and you are just not welcome*. Participants interpreted these as examples of latent ageism liberated by the pandemic.

The belief that cocooning was a legal requirement (see page 6) and fear of being caught or cautioned by the Guards were among the reasons that some participants disguised themselves when going for a walk, or chose to go out very early in the morning, before most other people were up. They saw this behaviour as absurd but necessary for avoiding unwelcome comments and attention.

Enforced passivity

I was a very active person, contributing to society, and suddenly I'm sitting in, wrapped in cotton wool.

They shunted us to the side and shut us in a box.

Eventually I said, no, I can't comply with this any more, I'm going mad.

Many participants, especially those who had been active contributors and volunteers in their communities and beyond before the pandemic, were hurt and enraged by being told that they could not volunteer for Community Call, Track and Trace or other pandemic initiatives, solely on the grounds of their age. This **pure ageism** made them feel expendable and unappreciated, with their experience and enthusiasm counting for nothing. Several mused that, given this treatment and attitude, they would be disinclined to return to volunteering after the pandemic.

The experience of rejection undermined participants' sense of usefulness and their place in the social contract. Many participants said that they **never felt old before this pandemic**: it was the way they were treated during the pandemic, especially in relation to forced passivity, with others doing their shopping etc, which created the feeling of being "old" in the stereotypical sense of being needy recipients, rather than active contributors.

Conformity

We felt that we had to obey the cocooning because we really didn't know what the virus was and we had already cocooned before we looked into the pros and cons. After a while we knew what was happening.

It is ingrained in [over 70s] to do what we were told.

A lot of us were brought up with the sense of "I need to conform", you know, just to survive, even.

I know I am not following the rules but I'm not putting anyone in danger and nobody criticised me.

While understanding that the pandemic advice was **individual restriction for the common good**, older people felt that the conformity that had been instilled in them as children inhibited them from speaking out about perceived injustices. One participant equated obedience with **being old: I didn't feel old so I just did what I wanted to do, actually**. This remark relates also to internalised ageism (see page 7).

Interpretation of rules and guidance

I thought we couldn't go out, so we didn't; we walked around the garden and drove each other mad.

They should have given us more discretion – I felt resentful.

Far from me feeling protected, I felt as if I was actually doing my bit to help the community at large.

I did feel it was important to be seen to do my best, which was not to be seen to go out.

People thought cocooning was a legal requirement. I didn't comply with the cocooning but I did stay safe. It was a blunt instrument.

I had to [break cocooning rules] or else turn in on myself and become useless.]

They said, “Oh, but you can’t come along, you’ve only got one Astra Zeneca”. I won’t tell you what I said.

Most participants understood pandemic-related rules and guidance as legally and/or morally binding; some reported being regarded as super-spreaders by virtue simply of being older people. Participants resorted to [sneaking out](#) early in the morning (for example) in order to go for a walk, thinking that they were breaking the law. The advice given at the end of the first wave, that older people could go out for a walk but avoid speaking to anyone, was read as absurd and offensive: [It did not make sense that you could pick up an infection talking to somebody at five metres...away, so it was way too frightening.](#)

Terminology

The language was so oppressive: “cocooning”, “vulnerable”...

“Cocooning”: I hate that word...I always feel like I have to put it in inverted commas.

I felt like I was in jail and couldn’t go out at all – [cocooning] is really a negative word.

When I first heard the word “cocoon” I looked it up. Did the Government think that we would fly away like butterflies? But now we are locked away.

To be old is to be labelled as “vulnerable”.

The word “cocoon” was the most discriminatory word that could have been used and it was used deliberately...It was a blunt instrument.

Geriatric? We don’t refer to a younger person as a “paediatric”!

“Cocoon”? Me hole!!

Every participant loathed the word “cocooning” with its implications of being shut off from society (see page 3). It was universally seen as punitive in tone and execution. The anxieties it set off – of being seen as “old” and “vulnerable” – relate to both systemic and internalised ageism (see page 14).

Ageism

Attitudes to older people have taken a hit during Covid.

We are an ageist society... We have a “poor crathur” outlook to older people. This ageism is a societal thing, rather than just related to the pandemic.

Just because they were older, it did not mean that they were vulnerable. A lot of older people were healthier and fitter than young people.

They shunted us to the side and shut us in a box. It was a completely different experience between the generations.

I immediately felt some resistance. This was defining me as “old” – I was put in this category of being somewhat different.

Being old hasn’t moved with the times....It’s still somewhat stuck in a rut.

When we’re living to 110 or 120, will the definition of “old” still be 55?

Participants saw ageism as the background to and driver of the attitudes and restrictions applied to older people by both Government and the population at large during the pandemic. Prevented from volunteering or playing any kind of active role, they saw their exclusion as proof that they and their contribution were considered expendable (see page 14).

Participants understood ageism to be intrinsic to Irish society (see, for example, the quote at the start of this section). Several felt that the pandemic had reversed the gains of recent years concerning perceptions of older age and the inclusion and contribution of older people: *It took years to stop all the patronising and talking down to us*. According to participants, **the trope of “70 is the new 50” became “70 is the new 90”**, as the Government, and in many instances, people’s own families (see page 4), stressed their vulnerability, stripped away their agency and undermined perceptions of their decision-making capacity. While recognising that the aim of the restrictions and the way they were communicated may have been benevolent, their execution was seen as harsh and thoughtless, and older people experienced the effects as disempowering and ageist.

At the same time, “70 is the new 90” belies a level of internalised ageism. Some participants recognised that they had internalised ageist attitudes, seeing this as inevitable, given the predominance of ageism in Ireland. Comments of this sort included *I think I wasn’t ready to be seen as an older person. That might be a failing on my part. Maybe I should accept it* and *The big thing we’ve got to do is get over the prejudices that we have [about ageing]*. Creating solidarity between older people at different stages of their lives would be a useful tool in combatting overall ageism.

Lack of consultation

Nobody ever asked us; we were never asked.

All this was to save us from getting Covid – there was no opportunity for debate or resentment.

I think that we should have been consulted on the wider issue, for everyone’s human rights – our right to work, our right to participate in family life, the right to say goodbye to our loved ones...

Lack of consultation was seen to be at the core of poor decision-making, from the communication of cocooning at the start of the pandemic to, the following year, the location of vaccination centres in places which were difficult to access by public transport. Some participants understood the lack of consultation in itself to be a manifestation of ageism and a breach of human rights. The purely medical nature of NPHET was seen as a barrier to wide-ranging consultation with older people and others: *we would have got maybe a more considered series of measures* if a more broadly-constituted national emergency committee had been making the decisions.

The role of the media

The media...picked and kept on picking on older people... They kept on exaggerating...just to be argumentative.

The papers went for the sensational stuff all the time, rather than the ongoing really positive story, which was that the health service did survive. A lot people survived. Old wrinkly hands, God help us. That is how we are portrayed. That’s a societal thing as much as to do with the pandemic.

My grand-daughters pretending to be old with walking sticks – where did they get this? They eventually told the truth, I suppose. But maybe it was too late then, because the media already had all the stories at the beginning. And that’s the ones I remember, everything from the beginning. I’ve kind of stopped listening since then.

If they just couched it [as being] for the health of everybody...because it wasn't just older people that die from the blooming disease.

Participants felt that the media emphasised negative news, frightening older people in particular, and also stigmatising older people through the use of stereotyped imagery. Older people got the feeling that the older you were, the less likelihood that [hospitals] would try to save you, thus exacerbating their level of fear and also their sense of marginalisation and lower value. Added to that, the messaging was so confusing – what's right and wrong, adding to older people's sense of disorientation.

Awareness of human rights

Everyone has a human right to go out in the fresh air. That was wrong to make people feel like prisoners in their own home.

Older people's experience of being isolated...was not fair.

Instead of feeling like an equal society where everybody could contribute according to...their strength, we were put off into a box and corner.

Being set apart and categorised as "different", and being told what to do. I did feel that there was an infringement.

If you are being discriminated because of your age, then...I would consider that as a breach of human rights.

Nothing should happen about a group of people without consulting [them]...and linked into that is the patronising bit...other groups and institutions think they know what's best for us. Covid-19...certainly has given Government a kick in the pants about what it's doing in regard to our care as we get older and making it possible for us to live our best lives.

Just because you are over 70 doesn't mean that you aren't useful. This is a wake-up call for us all.

We should have been consulted on ...our right to work, our right to participate in family life [and] to say goodbye to ur loved ones.

Most participants did not think of issues related to ageing in the context of human rights. When prompted, there was some confusion, with some participants equating "human rights" with "special provision" or "privilege", rather than equality or equity. These participants preferred to consider issues related to ageing outside the context of human rights as they understood them. The confusion seemed to stem specifically from the word "rights".

Those participants with a clearer understanding of "human rights" as a concept generally saw cocooning, with its age-related separation of older people from the rest of the population, and its seemingly enforced dependency, as a violation of human rights. One of the Assemblies discussed the possibility of appointing an Ombudsman for Older People as a way of safeguarding their human rights.

Reactions to the issue of human rights during the Assemblies indicate that there is work to be done to inform and upskill older people about the extent and exercise of their rights.

Isolation, stress and fear

For me, the fear was the worst. The Government terrified older people.

People living on their own were told “we are all there for you”, yet no-one was there for them.

I was off the wall in 2020. The sense of abandonment was awful. The feeling of desperation and bordering on hysteria was a daily occurrence. I was so alone, and wallowed in the misery....Eventually I...discovered that I was not alone in my pain.

Keep your distance. Now, that’s for everybody, it’s not just us, but especially for us, because, when you’re over 70, if you get it you run a one-way ticket. You’re not coming back.

I found it difficult and stressful to be confined and cocooning.

My 92-year old mother-in-law was just left on her own and it was very difficult and unfair.

If you take on other people’s terror, you become a terror yourself.

This sense of being in prison in your own home all the time...

We were told [eventually] that it was not law for older people to cocoon, that it was merely guidance. That was such a relief. You really felt that you knew that, but it took the fear away, that the Guards were going to come down the road.

Once you engender fear in someone, it’s very hard to undo that. It has been done specifically...to older people.

Participants felt that the Government had deliberately engendered fear into older people, and then not taken account of the mental strain of the pandemic on them, particularly those who live alone or who face additional barriers (for example, older sign-language users, older people who are LGBTIQ+, older people living in inadequate accommodation, older men living alone, etc). The media were blamed for magnifying the level of fear (see also page 8).

Many felt that older people had been forced to make sacrifices to [save the bloody health system](#) for no credit and with little support. They felt that the isolating and confining effects of cocooning had not been considered adequately. Support for older people depended on voluntary effort, which some resented (see page 14) as being forced to accept charity and to take the role of grateful recipient. This was especially galling for those who had been enthusiastic contributors until the pandemic struck.

When the relief of realising that cocooning was not a legal requirement subsided, it was replaced by anger that this had not been made clear from the start. The damage to the image of older people had been done, and the path back to self-confidence was seen to be difficult.

Participants were aware that some older people faced more barriers than others during the pandemic. For example, older sign-language users who were not tech-savvy were understood to have experienced more isolation than most, and while mask-wearing made communication more difficult for lip-readers.

Restrictions on funeral attendance, while affecting everyone, were understood to have been especially hard on older people, many of whom lost life partners and long-time friends. Being cut off from the consolation of ritual, visits and community support intensified grief and loneliness: [no closure, no healing](#) (see page 12).

Losing confidence

I don't see the people who really need {name of organisation} coming out again – they've lost their confidence. A year and a half is a lifetime at my age.
I was dead scared to get into my car. I had to get my son to come with me. I had lost confidence in driving. Two years ago I drove [in another country] for 8 hours, no problem. I did feel better when I started going to the shops.
There are people who haven't left their houses yet.
Once you engender fear in people it is very hard to undo.
I have lived alone over 15 years now and I never had any problem with it but...my confidence was taken away all of a sudden and I lost my independence, which was a huge thing for me.
The more time you spend on your own, your confidence can be eroded.

Lower self-confidence was seen to have resulted from fear-inducing messages aimed primarily at older people, as well as from the length of the pandemic. Participants recognised a clear interplay between forced dependency and diminishing self-confidence.

Participants noted the effort that went into getting people to cocoon, and counselled that at least as much effort, if not more, would be needed to encourage older people back out into the world. Seeing no evidence of that, they concluded that their participation in society was not valued or welcomed.

Participants also worried that people who had [sat] for 16 months on the couch at home had lost muscle power, physical power..., confidence...with nobody to do anything or help them...there was nobody ranting and raving and saying that this is what will happen if you don't [exercise]. They were concerned that these people would never emerge back into mainstream society, especially as they were the ones least likely to use Zoom: The very people who needed it weren't able to access it.

Community action

"Your local council will look after you, your postman will look after you"...My postman was running away in case he got it off me because I'm old!
I'm absolutely thrilled by the sense of community that emerged.

While some participants had received increased care and attention from neighbours and local volunteers during the pandemic, others had less positive experiences. Some people made new contacts, while others grumbled that reserved shopping hours were too early in the day (and before alcohol sales began) and were interpreted as the only safe times that older people could shop. They read this as a form of forced separation.

Deterioration of services

They aren't doing bloods etc that people need, but no-one is pointing the finger or shouting about it.
The doctors didn't want to see people.
Regular check-ups all seem to have stopped. This has more impact on older people... The reason we are all healthier now is because we can prevent things... There will be more

serious issues that could have been prevented....People who would have been reluctant now have a great excuse not to go at all.

Health services which are not related to Covid-19 were said to have deteriorated. GPs' receptionists effectively conducting triage was seen as an attempt to discourage older people from seeking services, and was felt to constitute a breach of privacy. The reduction in screening services, physiotherapy and other non-Covid health services was of great concern to some participants, who feared that it would lead to more serious health problems among older people later, thus reinforcing perceptions of their fragility (see page 10).

During the pandemic, many home care services were discontinued or changed, sometimes in a way that infringed on older people's rights (for example, a visiting home carer refusing to deal with more than one family carer, resulting in the main carer, themselves an older person, not getting a break). Participants understood the deterioration in home care services to be another manifestation of low regard for older people's quality of life.

Community-based transport services were discontinued, affecting older people disproportionately and, especially since offering lifts was also off the table, increasing their isolation.

Nursing homes

If you were in a nursing home, your chances of surviving last year were very, very slim. There were people over 70 in nursing homes who died who would have lived if they had been at home.

They moved people to their individual rooms, no inspection... They discovered that people died in their rooms and the undertaker was the next person who saw them and the most the family could do was look in the window.

The nursing home is the variant that has to be examined most after Covid.

That attitude: "ah, sure, they're old anyway"...

I think it has shown up once and for all the shortcomings of the nursing home system.

On your hand you could list the rights that [nursing home residents]...have.

One good thing is that nobody is saying, "Now I will save up and go into a nursing home".

Most participants referred to nursing homes as **old folks' homes** and were both critical and afraid of them: **Even before the pandemic I was conscious of old folks' homes and how people were treated – "just sit over there"....lovely people who have just been left.** They were concerned mostly about the loss of independence and agency in nursing homes: **our ability to speak for ourselves – we lose that ability when we go into a nursing home, or it's taken away from you.**

The dire situation in nursing homes during the pandemic and the perceived lack of concern about residents' quality of life were understood to be clear breaches of rights, also spotlighting issues which pre-dated the pandemic. **Clearing the hospitals** of older people at the start of the pandemic was understood to have contributed to high death rates in nursing homes, and was seen to be the result of ageism and lack of concern about older people: **It started in the hospitals when they got rid of the older people into nursing homes that were**

ill-prepared and caused absolute catastrophe there...definitely clearing the beds for younger people. Participants called for an inquiry into these issues, along with the lack of psychological support for nursing home residents who survived the pandemic. They also favoured the introduction of advocacy services for all nursing home residents and people in hospital.

Something radical needs to be done about nursing homes, which were also seen to be symptomatic of Irish disrespect for older people. Demand for a coherent system of graduated supports to ageing in place is likely to grow: we have to give people more choice about home care and make the nursing homes better. Higher standards are essential: If we let [the situation in 2020-1] happen again, we'll all be to blame.

Bereavement

I lost my brother and I got in as number 10 to the funeral. It was so empty. It was shocking. My son whisked me away, he was like a bodyguard: I met nobody, no closure or healing. My son used to come and leave the messages on the doorstep. He wouldn't come in. This was within four months after my husband died...that was the worst part of it.

Participants were articulate about the long-term effects of disruptions to funerals and grieving. They were dismayed and hurt at being prevented from being with a dying loved one (see page 10) and distressed by the isolation of dying in nursing homes without loved ones nearby (see above).

Resilience and agency

I was determined to get on with my life.

As soon as they said you could go out I was out with my mask.

I did what I wanted to do but kept away from people.

We [chose] a route where the gardai wouldn't be.

It wasn't all bad. I learned about computers and we showed that we could learn.

I wasn't annoyed that I couldn't do usual things – I did other things.

You do adapt and you get on with things.

We just want to get on with life and do what we want to do, not be dictated to by other people.

I'm proud to be 70 but it took a while to get there.

We are here to make a contribution. We are here to be valued as people in the community who have life experience to share with others.

I am part of the society. I want to participate. I want to go out as well and do things like I used to....I need encouragement now, you know, more encouragement maybe than other groups in the population.

We won't be trodden on and we won't be told what to do.

No matter how little you have, you have a lot to share...We are important and we have a part to play in life.

As older people we had resources which just came from having lived through other bad times, and could say to the younger people, "Don't panic, you know, take a few precautions and be careful. We'll come right because it does, we survive, you know".

Despite all that had happened to them, participants were aware of their resilience and keen to regain their agency. They were keen to ensure that nothing like the experience of cocooning happened again without their involvement and consent, and that they were never again taken for granted: *Sometimes the Government forgets how powerful we are and the brain power we have between us; We won't be trodden on and we won't be told what to do.*

Discussion

Much of the resentment, anger and frustration that participants voiced during the Assemblies related to an overall sense of having being undervalued and cast aside. Without using rights language (see page 8), participants clearly believed that their voice, autonomy and agency had been undermined. Participants were grateful for the opportunity to express themselves at the Assemblies: *We haven't got a forum for to say how we felt, and this has given us a forum.*

Behind the resentment, anger and frustration was a discernible fear that *this is it now* – that older people had lost too much time and ground, and that it would not be possible to regain their previous position in their families, communities and Ireland as a whole. They felt that the way in which older people had been categorised during the pandemic, through cocooning and the constant reminders about vulnerability, had undone recent gains: *it did take years and years to build up to what we had got, that older people, you know, had great respect, and stopped all the patronising and talking down to us.* Government messages had not helped: *To be fair to the authorities, in relation to messaging about lockdown, that message did change as time went on but the first messages were so strong that they overrode that easing of the message, and there are still people who haven't left their houses yet.*

Now, instead, *70 is the new 90* (see page 7). Almost every participant said that they *never felt old until the pandemic* and most expressed pessimism about regaining lost ground: *I think confidence has been stripped away. I think it's going to be very slow to get people to go back out into society again.*

The image of being *shut in a box* (both literally and psychologically) recurred frequently, along with the sense of *being in prison*. Participants saw the requirement to cocoon as implicitly punitive, as though they presented a danger to the health services and society simply by virtue of being older people. The health services appeared to be entities which needed protecting *from* them, rather than being services which were there *for* them: *older people would be more likely to take up space in the hospitals, so keep them out of the way – you had that feeling.* Indeed, this feeling was amplified by the plea to avoid contacting doctors or hospitals unless there was an emergency: *I think we were actively discouraged.*

Furthermore, *the way it was presented very often was that we [older people] were the problem* and that deaths, especially in nursing homes, were unimportant: *Ah, sure, they were old anyway.* This blaming of older people is set to continue: with health issues ignored during the pandemic set to manifest as serious conditions in the coming months, demand on health services will increase and, with it, awareness and then blame that older people are “taking” a large proportion of limited resources, forcing up costs and so on. Along with

the lack of consideration of what cocooning would do to them, older people took the discouragement to use health services during the pandemic as evidence that their health and wellbeing were expendable.

Without using these exact words, it was clear that **participants understood “cocooning” to be an alternative term for “exclusion”**. They understood that exclusion to be the result of **ageism**. Opinions such as *there was no talk about discrimination against elderly people.....But now, all of a sudden, it's discrimination because younger people won't be able to...eat inside* show an acute awareness of the ways in which ageism privileges younger people.

On another level, *I really resented people offering to buy me food and stuff. I felt I was capable of doing it myself* typifies comments made to counteract negative stereotypes. The offer may have been related to cocooning, but it was read as an accusation of decrepitude or as infantilisation. Some participants stressed their level of health and fitness, partly in order to demonstrate the heterogeneity of older people and partly in order to distance themselves from negative stereotypes.

A few participants recognised that they had internalised ageist attitudes and that their anxiety to prove that they did not conform to ageist stereotypes was, in part, a manifestation of those views in themselves. Examples such as *I am active so I can get away with being 60 or 65* speak volumes about participants' urge to distance themselves from the stereotypes and the prejudice and discrimination that they engender. It is against this background that the universal opposition to *drawing the line* for cocooning at 70 can best be understood.

The **interplay between systemic societal ageism and internalised ageism in Ireland is complex and subtle** and worthy of further investigation. Examples from the Assemblies such as *I wasn't ready to be seen as an older person. That might be a failing on my part. Maybe I should accept it* illustrate this interplay clearly. People's resistance to being seen as “old” relates to their opposition to being seen to conform to ageist stereotypes – for example, being needy recipients with failing health and mobility. The necessity to cocoon forced many people over 70 into an apparent passivity which reflected this stereotype. Participants resented this status being thrust upon them and, without using this language, clearly understood it to be in contravention of their rights as well as damaging their confidence and self-image.

As a corollary to this, a participant raised **the issue of pride**, pointing out what it had achieved for the LGBT community, of which he is a member. He recognised the effort involved – *I'm proud to be 70, but it took a while to get there* – and mused on the merits of encouraging older people to be proud of their age and status.

Ageism is entrenched in Irish society and is not generally seen to be as urgent an issue as racism or sexism (for example). Reactions to the discussion of human rights during the Assemblies indicate that there is work to be done to inform and upskill older people about the extent and exercise of their rights (see page 7). Some, though, are raring to go: *I nearly*

hope we could organise a protest to Government because they are not listening at the moment, so we need to make them listen. They have their work cut out.

A final thought

I suppose it could have been worse. We could have been in England listening to Boris Johnson, but that's for another day, so.

Maureen Gilbert
Dublin, August 2021

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