



Australian Government

Office of the Aged Care Commissioner

University of Ballarat

Men's Learning & Wellbeing

Rhonda Parker
Aged Care Commissioner

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Introduction

Good morning and thank you for the opportunity to be with you today. Why bother about men's learning and wellbeing? Well, why not?

I'll return to the question at the close of my short address, but I want to open this panel discussion on men and learning and well-being in later life with a glance at:

- how things have changed so quickly,
- some of the evidence on ageing well that has been established in the last fifteen years or so, and
- the relevance to men, learning and well-being.

We live in a time of rapid change

- The average life expectancy in the time of the Roman Empire was 28.
- When Australia set the retirement age in 1909, average life expectancy was 58. On average, the Australian male died seven years before he reached retirement.
- If retirement policy had been indexed to average life expectancy over the last century, by the year 2000 the retirement age would have been around 80. I blame the mandated retirement age for creating the 'use-by-date' – the notion that an individual isn't fit for a purpose for all of their days.
- According to an Australian Government Actuary report in 2008, a 60 year old Australian male has 22 years left to live. If we use a football game as an analogy for the adult lifespan which commences at twenty, at 50 years of age the Australian male is just running onto the field for the second half of the game.
- Early thinking on retirement encouraged disengagement from life. The disengagement theory supported an orderly withdrawal from activity, to set matters in order for the ultimate disengagement – death. However, research evidence into ageing well has established that the 'Retire to Die' mindset should be replaced with a 'Retire to Live' mentality.
- If you don't feel prepared for this new era in your life, know that you have company. It is estimated that the average human lifespan has increased as much in the last 100 years as it did in the previous 5000. There are few who are ready for the change we find ourselves immersed in.

Never before has a generation of men had to learn to live well for years beyond the world of formal work.

The Science

So...what does the science say about ageing and the possibility of ageing well?

Until the 1980s much of what we knew about ageing was about the decline and diseases of later life. However, with the predictions of longer average lifespans, researchers started to look for the factors that were present in those who had high levels of health and satisfaction in their later life. We knew what contributed to decline, but what contributed to health and wellbeing in later life?

The contributors to wellbeing in later life as identified in the data can be grouped in a range of ways, but for our purposes here today I will identify three categories. Let's call them the KPIs for a successful later life. According to the data, they are:

1. to maintain a low risk of disease or disability
2. to maintain a high level of mental and physical function, and
3. to maintain a high level of engagement with life.

We don't have time to deal with each of the factors, but let me note a couple of things that I think are important for this forum today.

In regard to the second KPI, that is, maintaining high levels of mental and physical function, it should be first noted that recent research in relation to brain function in later life gives reason for great optimism.

Cognitive capacity, like physical capacity, is not pre-programmed to decline in ways we have previously understood. Whereas neuroscientists previously thought that cognitive slow-down in later life was inevitable and due to neuronal loss, new evidence confronts that thinking.

Research has established that we can and do continue to produce new neurons up until death. The slow down is more likely to be due to a failure in neurotransmission. That failure is impacted by the chemical environment in the brain, an environment we influence for better or for worse with lifestyle choices such as exercise or smoking. The brain will lose neurons if there is only little or repetitive activity and a poor environment for electrical transmission.

Of all the contributors to continued mental function and neuron production, continued learning is a critical factor. Continued learning builds new synapse pathways and generates new neuron growth, supporting ongoing mental sharpness. Research has proved that you can teach old dogs new tricks.

Let's now take a moment to look at the third KPI to ageing well. The third KPI to a successful later life is not sophisticated technology, expensive health treatments, nor leading a life of privilege. It is perhaps the most surprising factor in the data, the simplest and most elusive, and the least planned for or talked about. It's the engagement factor.

The engagement factor is about being connected to the outside world through two mechanisms.

The first of these engagement mechanisms is productive activity. The activity may be paid or unpaid, but it must be productive, it must produce goods or a service. For example, research shows that simply attending a group does not have the same health outcomes as attending and getting involved.

The second component of 'engagement' required for later life quality is connection through relationship.

Researchers will note that while they can't explain how these 'psychosocial' pathways to physical health work, there is clear evidence they exist.

For example, Harvard, Yale and the Rush Institute for Healthy Ageing found that social and productive activities are as effective as fitness activities in lowering the risk of death.

Interestingly, the online lifespan calculators that emerged in the 90s all included questions measuring levels of social interaction such as how many visitors you have to your home weekly or how many times in a week you left your home to socialise. These questions appeared alongside questions on blood pressure, smoking and frequency of exercise. There is hard data to support the view that having friends affects physical health just as, say, low cholesterol does.

One of the first longitudinal studies into ageing was the Berlin Study. It found one of the characteristics common in those who aged well and who had a rich experience as they aged were those who had 'a reason to get up in the morning'.

Sigmund Freud stated the fundamentals of human existence were love and work. In respect of how we age, time has proven his observation accurate.

And so, to men.....

In regard to issues relating to men and their ageing, may I make the following observations from my years of working with the 50+ age group.

Men face particular issues as they transition from the world of paid work to retirement.

Paid work is likely to define a man and his sense of worth more wholly than it does for a woman. He defines himself as the provider and protector, and that sense of self and purpose is often confronted by leaving the formal workforce.

A man is less likely than a woman to have spent periods of time in his adult life as a primary caregiver. As such, there has been little time in roles other than paid work to contribute to his sense of worth.

To complicate matters, the world of work has been the almost exclusive pathway to connecting with others. Women, by comparison, are more likely to assume the role of a nurturer as well as be productive members of the economy, and are more likely to have other pathways to connect with the world.

Leaving the world of work can be a silent, unsuspected and mystifying blow for a man.

Legislation stated man's use-by date was up by his 65th birthday. His commitment to the workforce (in a country with some of the longest working hours in the world) means he has had little time for other forms of engagement; and his sense of self has been built on his ability to be productive.

This may not have mattered 100 or even 50 years ago when the Australian male died before retirement, but he now has on average some 20 years to live after the end of his working life. In retirement, he may now be time-rich, but he may also be purpose and connection-poor. And as we know from the research evidence on ageing, those factors can directly, negatively affect health.

Why bother about men's learning and wellbeing, in particular that of older men? Because the health of men matters. They are husbands, partners, fathers, grandfathers and brothers. They are friends and mates. They are members of our communities. And if they can transition beyond the world of formal work into retirement with a sense of purpose and connection, then they, and the communities in which we live, will be the healthier for it.

For this to happen, we need a better awareness of the issues, a chance to talk about them, and a willingness to learn, change and grow. To that end, I welcome the reports being released today, and the discussion that will be generated by them.

If there are demons in later life, loneliness is the greatest of them all.

Here's to a generation of men who will discover how to live productive, connected and happy lives beyond the world of formal work.