

Preserving Dignity of Older People as an Individual and Common Goal in the Context of Social Responsibility

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Abstract

The concept of social responsibility encompasses dignity *per se*. In an aging society a special group of stakeholders has emerged, the population of older people. This is not a homogenous group and just because of that their dignity should be carefully treated, with respect. Being daily in contact with people living in centre for elderly my attention is paid to their dignity. At first categories as dignity, aging and age are shortly investigated and explained. Some observations of troubles people have with changing their living environment help to suggest a few possible improvements.

Keywords: age, aging, dignity, empathy, older people, social responsibility

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Ohranjanje dostojanstva starejših kot posameznika in skupen cilj v okviru družbene odgovornosti

Povzetek

Koncept družbene odgovornosti zajema dostojanstvo. V starajoči se družbi se je pojavila posebna skupina deležnikov, prebivalstvo starejših. To ni homogena skupina in že zaradi tega je treba za njihovo dostojanstvo ravnati skrbno in spoštljivo. Sem vsak dan v stiku z ljudmi, ki živijo v centru za starejše, zato je moja pozornost namenjena njihovem dostojanstvu. Najprej so kategorije dostojanstvo, staranje in starost na kratko raziskane in razložene. Nekatera opažanja težav, ki jih imajo ljudje s spreminjanjem njihovega življenjskega okolja, pomagajo predlagati nekaj možnih izboljšav.

Ključne besede: starost, staranje, dostojanstvo, empatija, starejši, družbena odgovornost



1 Introduction

In the early nineties of the last century the concept of social responsibility begun to enforce due to the initiative of the EU in the member states. At first it was related to corporations as Corporate Social Responsibility (CSR). By increasing of the sector of SMEs (Small and Medium Enterprises) worldwide the attention was redirected to them, as well (Knez-Riedl, 2002a). Parallel to the endeavours to increase environmental awareness the first actions were oriented towards the attitude of enterprises to the natural environment. In the field of Human Resources (HR) the severe problems were not exposed in this extent, but not long afterwards they become evident because of privatization, economic crisis and climate change. Human dignity, especially of people employed, was not much discussed, as dignity was treated as something self-evident, belonging to everyone. The concept of social responsibility encompasses dignity from the very beginning, as a fragile and not precisely defined category. In an aging society, where people are achieving honourable age, the attention regarding dignity was put to the population of old people. Dignity belongs to people in all phases of the life-cycle (from the childhood, growing up, active maturity and calming down in the last phase). But we should not forget the adults who are not capable of independent life, unemployed people and homeless. They have their dignity, too. Besides, dignity is not only human, it belongs to other beings (e.g. dignity of animals).

In my discussion I concentrate on the dignity of elderly, in the specific situation, living in institutions, centres for elderly. I choose this topic because I regularly visit such kind of institution (centre X), which enables observations and getting ideas on possible improvements. All the aspects of dignity, which are relevant, e.g. nowadays the importance in bioethics and humanity, cannot be taken into account. But we should be aware of them. At the beginning it is necessary shortly to explain some considerations and views on dignity, aging and age.

The concept of dignity is multifaceted, especially from the historical and philosophical aspects. I lean upon consideration, which equates dignity with character and behaviour of the person, his/her virtues. Because of them one deserves honour and respect. We can link dignity with honesty, reputation, nobility and position in society and inside the family (e.g. honour and respect given to the eldest family member). Nowadays family environments are drastically changing, from multigenerational to the so called nuclear families (Knez-Riedl, 2002b) to the single-parent families. In this way the special, respectful position of the eldest family members is changing, their former importance is gradually disappearing.

Etymologically we can link dignity with the Latin word *Dignitas* (worth, worthiness). In ancient Rome dignity was attributable to the men according to their behaviour, achievements and influence. They were generally nobles, statesmen, military leaders, scholars. In the Middle Age dignity was mainly explored by philosophers. In his work *Oration on the Dignity of Man* Renaissance philosopher Pico della Mirandola emphasised dignity of free arts (liberal arts). At the same time, he paved the way to the moral ethics, more profoundly explored and explained in the 18th century by Kant, who linked dignity with free will and the choice of one's own, honourable actions. He attributed dignity to everyone (Sensen, 2011).

It was always easier to illustrate dignity by autonyms, by dignity violations which diminish the worth and people's self-esteem. There are many kinds of violations and unfortunately they appear very often even nowadays. Just to mention humiliation, embarrassment, degradation,



dehumanization, that could be linked with slavery, torture, rape, forced labour and exploitation, last but not least with precariat, a new social class, other forms of social exclusion and marginalization. Special kind of dehumanization there are instrumentalisation and objectivisation, treating man as a thing, that could be commodified. Dignity can be damaged also by arrogance and ignorance. The latter appears in the case when people's preferences and wishes are not taken into account, impersonal, unscrupulous and exalted attitude in interpersonal relations (e.g. with care and medical personnel), shortly where there is lack of empathy.

As it is evident from the researches (e.g. Rusac et al, 2016) and personal observation people of all ages care very differently about dignity, some not much about their own dignity and even less about the dignity of other. E.g. the popular reality shows people are prepared to disclose their intimacy and are less or more voluntarily exposed to humiliation. Masochism, desperation, or merely hunger for being famous? Because of being very hard to define dignity is for some people just an empty word, not belonging to their values. The dignity of older people is in such circumstances even more threatened. But not only consideration about dignity, the consideration of who is old has also changed.

2 Aging and Age

We all are exposed to the process of aging, being quite individualized. Difference between chronological and biological age matters. In spite of defying aging, its troubles, many stereotypes are alive. Some of them are far from reality like pictures of lovely grey granny knitting for her grandchildren. Not all old people are incapable to use elevators, smart phone or PC. Time brings also new prejudices like disapproval of lively dressing of old women and men, e.g. Advanced Style. Paradoxically many people want longevity, but not want to be old. Several generations learned from older ones, they respected them and appreciated their opinions and advices. But obviously such a culture is vanishing. Just on the contrary, old people are disturbing some young ones, latter are wondering when older ones speak foreign languages better than they do. Some see old people as rivals and obstacle in their career.

But at the same time things are changing for the better, too. Now active people of middle age are more and more aware that they are, as a matter of fact, the future old people. The generation of Baby Boomers, born between 1945 and 1964, is feeling the pressure of younger generations, which act often impatiently and unscrupulously. At the same time, we get scarred of dehumanisation and appeal for more dignified aging. The population of older people is not homogenous at all; some are very youthful, vivid retired persons, on the other hand some experience old age as a very traumatic one.

Who is old, anyway (Hollywood, 2016)? The answer is not unique and easy. Old persons are getting older. Somebody, who was treated not so long ago as an old person at 50, nowadays will be described as a person of middle age. In this context definitions of old and very old persons are changing. But some prejudices are broken by people in high age, who are creative (writing, painting, playing instruments), who actively enjoy in several sports disciplines and travel a lot.

Back to the concept of social responsibility. Aging is mentioned in several documents of CSR being related to the old employees. The conflict between prolonged retirement age and working possibilities released is becoming severe. In the aging of society new stakeholder



group has emerged, old people as stakeholder. Mainly attention is put to the aging workforce (e.g. Gellert, 2012). But in wider context of social responsibility the not-employed older people (anymore or in general) should be taken into account in greater extent.

3 Preserving dignity in centres for elder people

Nowadays we hardly speak about families in a wider context, where younger family members, descendants, take care about older members; the pattern is quite different. Many old people are living alone in family houses or apartments. The children left their homes, spouses died. Because of health and financial problems people are searching for other possibilities like moving into smaller flat, deciding for home care, coexistence with other person or moving into secured apartment or centre for older people. How many of people are deciding upon one of these possibilities consciously, we do not know. How they feel in making such decision, we do not know either.

Just take a look, when somebody is choosing to move to the centre for elderly. In the best case, he or she can move into a one-bed room. Usually as a temporary solution one should accept living in two-beds room. Struggling between rational thinking and emotions must be horrible, both for old person and for his/her relatives. It is not possible to take all the things into new home, which have sentimental value, e.g. artistic paintings, books, lights, potted flowers and other things reminding of the old home. Coexistence may be problematic. Another person in the room, the roommate, could be difficult, strenuous person. They are cases of even more difficult relatives. Does anybody understand distress of people affected, help them to adopt to new circumstances? It's the question without proper answer. Especially when an unpleasant plot or surprise occurs. Do social services offer help in such cases? As it is seen in practice they rather leave the solving of conflicts to the inhabitants themselves. Therefore, the help of relatives is necessary. The should be very subtle in solving the problem in a way that nobody is harmed.

It is normal that House Rules should be respected. But it happens that some people, inhabitants and relatives, are ignoring the rules, changing them into their favour. People, who take care and health personnel are of different character, not always patient and kind. Of course, there are exceptions, born for this profession. They have no troubles with empathy. In comparison with them some other people are doing their jobs automatically without feelings, in bad mood and with their thought elsewhere. Is it really low salary that is behind such behaviour? One asks himself/herself about the criteria for getting job in centres for elderly. Do these people, working with old people, know, for whom they care? What were their clients and patients occupied with in their active life? They shouldn't be just »cases« and anonymous persons from the room »number this and that«. Without gazing them straight into eyes, by complaining about their slowness and hesitation, having disrespectful remarks, e.g. on their wardrobe such personnel is spreading negative atmosphere. It is not hard to discern such violations of dignity.

There are some solutions for improvement, offered by Report about home care from English New Castle (*Reeve, 2008*). It is useful also for care in general and care in centres for elderly. Dignity in care is emphasised as first and in this context the respect of autonomy, identity, empathy and reciprocity. It is important to treat people with equal respect as we wish it for our relatives, especially parents, and last but not least, for ourselves. The report distinguishes two kinds of needs that should be covered – the physical one (tangible needs) such as bathing,



eating, and intangible needs, the social ones. Great emphasis in the report is given to the training of care personnel about the dignity of older people. It is not only dignified personal care and eating but also dignified social contacts, the way and content of information, pain management, help when somebody is feeling bad or needs assistance at moving.

Visiting centre X and entering its residential part I walk along hallway passing a range of rooms. Each of them has its own story, its own history. Very seldom the doors are closed, usually they are open and the inhabitants intercept steps of who is coming. We say hello, wishing each other a nice day, sometimes some kind gesture helps them (e.g. call the nurse, pick up a fallen thing, lower the blinds when it is too sunny in the room). In many cases it is just a call for contact. By corner of the eye some trials to create home atmosphere can be seen – framed pictures of relatives on the shelf, behind books, vase on the table, once in former living room, with favourite flowers, television, seldom notebook. Change of environment is stressful itself, new-comers feel cramped, they are confused because of interventions into their everyday rhythm and habits, the new faces come into room, new arrangement of furniture and new time schedule (awakening, hygiene, meals, walks, therapy and other activities, night rest). They are overwhelmed with homesick, they miss their former little world, people, they were in touch with (neighbours, social workers, familiar faces from the street, shop, cafe and park). By retirement people lost their professional role, by growing up of children and grandchildren, passing of relatives they lost their role in the family. The circle of friends and acquaintances is narrowing as well. All this is a tremendous emotional stress, additionally increased by drastic changes of environment. The addressing of older people can be inappropriate, as well. They should be treated as adults with rich life experiences, not as children, as people who contributed a lot during their active life and left the trace in their environment. It is inadmissible when they are afraid of some of carers or medical personnel.

Of course, for better life in a centre for elderly many things are done like visiting gerontologist, conversation with social service or worker, but usually not initiated by inhabitants, who hesitate to talk or not. Besides there are physiotherapies, social events, visiting of volunteers, meditations available, too. Meditation contributes to calming down, to milder unpleasant experiences and discomfort.

All mentioned above is getting more serious when people are injured, ill, hospitalized. After such traumatic experience they come back to centre, not feeling it as their home. Besides rehabilitation after surgery they still suffer consequences like disorientation because of strong narcosis and pain therapy with narcotics. In such cases empathy is critical even more.

4 Conclusion

In the contribution it was possible to present only some observation regarding inclusion of older people into the life in centres for elderly. In the concept of social responsibility, old people are a special stakeholder group, very sensitive and vulnerable. Approaching people with more respect and empathy can make their living in centre relieved. Inhabitants are not a blank paper, nobody, they are people with different life experiences and interesting life paths. They deserve dignity. This is why personnel in centres (carers, nurses, social workers etc.) should perceive dignity, accept it as their own value. Dedicated education, training and workshops focused on empathy and dignity help to equip the staff with the soft properties and precious competences. In short, the culture of empathy should be built and shared persistently. In discussion about the future work, especially in the time of digitalisation, some like Richard



David Precht, German philosopher, predict the flourishing of so-called empathy jobs (nurses, social workers) (Maroldt, 2018), giving opportunity and spreading of dignity.

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