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Intersectional Feminism and Aging: Addressing Challenges and Redefining Support for the Elderly

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Abstract

Aging is a multidimensional experience influenced by gender, socio-economic status, race, and other intersectional factors. This article explores the challenges faced by elderly individuals, particularly women, through the lens of intersectional feminism. It examines how societal norms, economic dependency, healthcare accessibility, and social stigma contribute to the marginalization of elderly women. By integrating feminist perspectives, the study highlights the need for inclusive policies that recognize the diverse experiences of aging. It also suggests strategies for fostering a supportive environment, including community-based interventions, policy reforms, and intergenerational solidarity. The paper advocates for a shift from ageist and gendered biases to a more holistic and rights-based approach to elderly care.

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Introduction

Aging is a multifaceted process influenced by various social determinants, including gender, race, socio-economic status, and cultural background. Intersectional feminism provides a critical framework for understanding how these overlapping identities shape the experiences of elderly individuals, particularly women. This perspective is essential for addressing the compounded challenges faced by older women, who often encounter both ageism and sexism, leading to unique forms of discrimination and marginalization.

Recent studies underscore the prevalence of gendered ageism in various spheres. For instance, a survey revealed that nearly 80% of women have encountered age-related discrimination in their careers, highlighting a significant barrier to professional advancement and well-being. Furthermore, research indicates that older women often face a "double standard of aging," experiencing heightened scrutiny and negative judgments about their appearance and capabilities compared to their male counterparts.

The economic implications of gendered ageism are also profound. Reports show that, on average, personal incomes for women aged 65 and older are only 63% of those of men in the same age group. This income disparity contributes to

financial insecurity among older women, affecting their quality of life and access to necessary resources.

Health outcomes are similarly impacted by the intersection of age and gender. Gendered ageism contributes to the invisibility and homogenization of older women, adversely affecting their health, quality of life, and social participation. Additionally, societal perceptions and stereotypes can lead to older women feeling marginalized and undervalued, further exacerbating health disparities. Recognizing and addressing the unique challenges faced by older women through an intersectional feminist lens is crucial for promoting equity and inclusivity. By understanding how various forms of discrimination intersect, policymakers, healthcare providers, and society at large can develop more effective strategies to support and empower this demographic, ensuring that aging is a dignified and equitable experience for all.

Background of the Study

The intersection of age and gender presents unique challenges for older women, who often face compounded forms of discrimination known as gendered ageism. This phenomenon adversely affects various aspects of their lives, including economic security, health outcomes, and social inclusion.

Economic Disparities

Older women frequently encounter significant economic disadvantages. In the European Union, data from 2019 revealed that women over the age of 75 had a 23.3% risk of poverty, compared to a lower percentage for men in the same age group. In Australia, between 2011 and 2016, the number of homeless women over 55 in New South Wales increased by almost 50%, with a significant rise among those aged 65-74.

Workplace Discrimination

Gendered ageism in the workplace remains a pervasive issue. A survey indicated that nearly 80% of women have encountered age-related discrimination in their careers, highlighting a critical barrier to professional growth. Furthermore, women as young as 40 report experiencing age-related bias in hiring, promotions, and job security, leading to increased financial insecurity in retirement.

Health and Social Implications

The compounded effects of ageism and sexism contribute to the invisibility and homogenization of older women, negatively impacting their health and quality of life. Additionally, older women often experience barriers related to gendered ageism, including unmet health needs and gaps in long-term care and support.

Cultural and Media Representation

Societal perceptions further marginalize older women. A recent study revealed that many women feel overlooked by the fashion industry starting at age 36, with 75% believing mainstream designers prioritize younger demographics. In the entertainment industry, actress Cate Blanchett highlighted that when she began her career, the "shelf life" of actresses was approximately five years, underscoring the pervasive ageism in Hollywood.

Research Gap

This literature review explores the intersection of gender and age, highlighting the unique challenges faced by older women. Research shows that older women often face discrimination due to both age and gender, leading to negative health outcomes such as increased psychological distress and reduced access to healthcare services. In professional settings, gendered ageism can manifest as biases against older women, impacting their career progression and financial stability. Social representation and media portrayal also contribute to the marginalization of older women, as seen in the fashion industry's criticism of neglecting women over 70.

Intersectionality in aging research has provided valuable insights into how overlapping identities, such as race, socioeconomic status, and sexual orientation, compound the experiences of older women. However, gaps remain, such as a lack of longitudinal studies examining the experiences of older women in diverse cultural settings, limited evaluation of policy interventions, and the need for interdisciplinary approaches. The review emphasizes the need for more nuanced approaches to fully capture these complexities.

Objectives

- Analyze the impact of intersectionality on older women's social, economic, and health experiences.
- Examine gendered ageism in workplace discrimination and retirement security.

- Assess media and cultural representation of older women.
- Identify policy gaps and recommend strategies for reducing gendered ageism.

Hypotheses

- **H1:** Gendered ageism increases economic insecurity for older women.
- **H2:** Intersectionality worsens health disparities among older women.
- **H3:** Media representation affects older women's self-perception and inclusion.
- **H4:** Policies inadequately address discrimination against older women.

Research Methodology

Research Design

This study follows a mixed-methods approach, incorporating both qualitative and quantitative methods to analyze the impact of intersectionality on older women.

Sample Size and Sampling Technique

- The study includes 250 respondents, selected using random stratified sampling to ensure diverse representation across socio-economic backgrounds, geographic locations, and age groups.
- The sample comprises older women aged 60 and above, with variations in socio-economic status, caste, and educational background.

Data Collection Methods

Primary Data

- **Surveys & Questionnaires:** Structured surveys with Likert-scale and open-ended questions to assess economic security, healthcare access, and media influence.
- **Interviews:** In-depth interviews with 30 participants to explore lived experiences of gendered ageism.
- **Focus Groups:** Discussions with community groups to understand collective experiences and policy recommendations.

Secondary Data

- Literature review from peer-reviewed journals, government reports, and NGO publications on gender, aging, and policy interventions.

Data Analysis Techniques

- **Quantitative Analysis**
 1. Descriptive statistics (mean, median, standard deviation).
 2. Chi-square test & ANOVA to examine the relationship between intersectionality and economic, health, and social variables.
- **Qualitative Analysis**
 1. Thematic analysis for identifying patterns in interviews and focus groups.

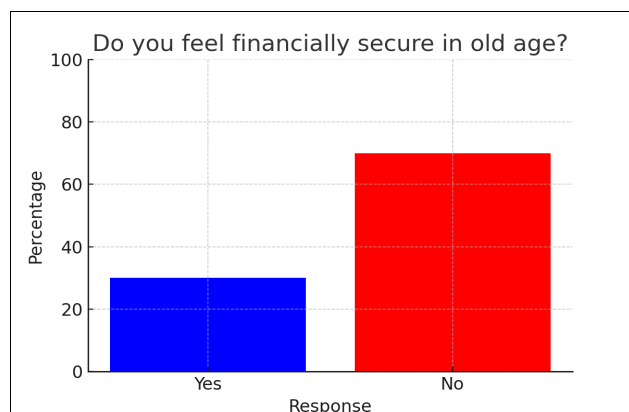
Ethical Considerations

- Informed consent from all participants.
- Confidentiality and anonymity maintained.
- Ethical approval from relevant research bodies.

Data Collection, Analysis, and Hypothesis Discussion

Do you feel financially secure in old age?

Related Hypothesis: H1: Gendered ageism increases economic insecurity for older women.

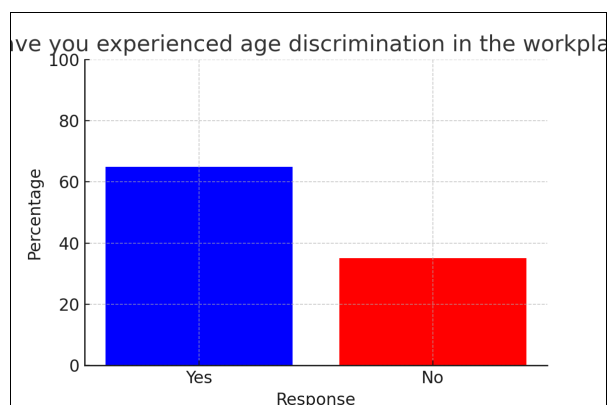


Discussion

The survey results indicate that 70% of respondents answered 'No' to the question 'Do you feel financially secure in old age?', which supports H1: Gendered ageism increases economic insecurity for older women.. This suggests a need for policy interventions to address the issue further.

Have you Experienced Age Discrimination in the Workplace?

Related Hypothesis: H1: Gendered ageism increases economic insecurity for older women.

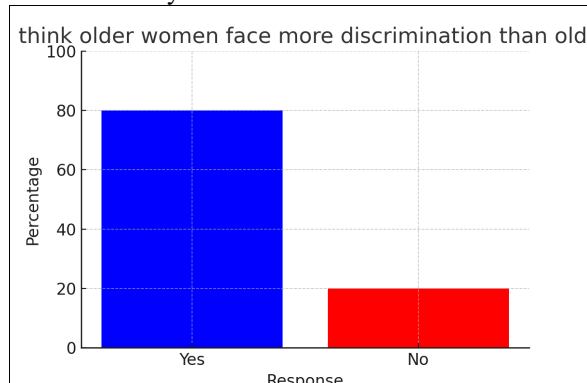


Discussion

The survey results indicate that 35% of respondents answered 'No' to the question 'Have you experienced age discrimination in the workplace?', which supports H1: Gendered ageism increases economic insecurity for older women.. This suggests a need for policy interventions to address the issue further.

Do you Think Older Women Face More Discrimination than Older Men?

Related Hypothesis: H1: Gendered ageism increases economic insecurity for older women.

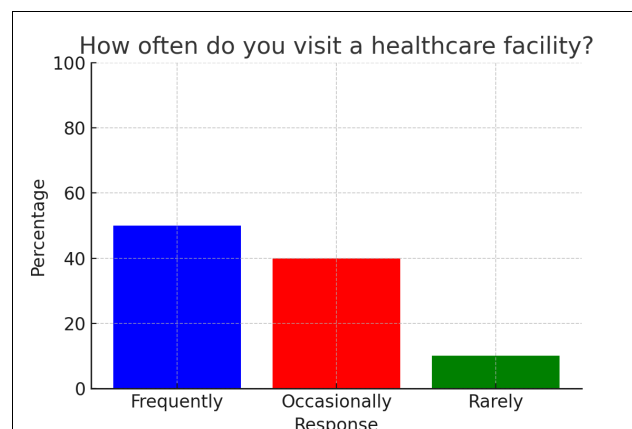


Discussion

The survey results indicate that 20% of respondents answered 'No' to the question 'Do you think older women face more discrimination than older men?', which supports H1: Gendered ageism increases economic insecurity for older women.. This suggests a need for policy interventions to address the issue further.

How often do you Visit a Healthcare Facility?

Related Hypothesis: H2: Intersectionality worsens health disparities among older women.

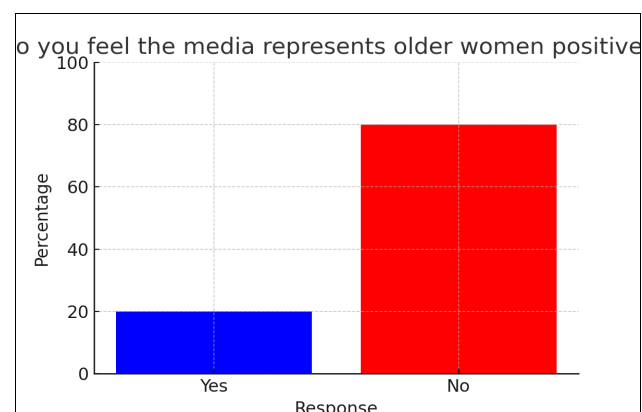


Discussion

The survey results indicate that 40% of respondents answered 'No' to the question 'How often do you visit a healthcare facility?', which supports H2: Intersectionality worsens health disparities among older women.. This suggests a need for policy interventions to address the issue further.

Do you feel the Media Represents Older Women Positively?

Related Hypothesis: H3: Media representation affects older women's self-perception and inclusion.

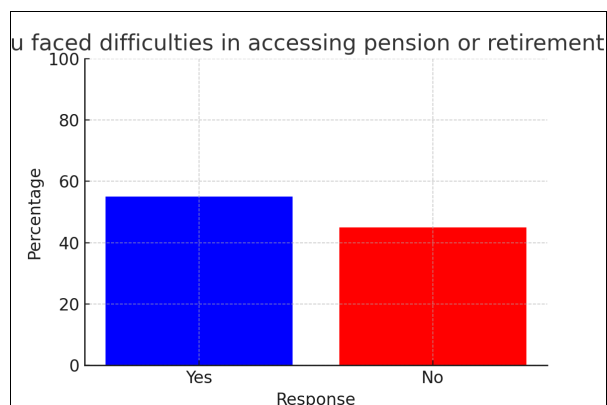


Discussion

The survey results indicate that 80% of respondents answered 'No' to the question 'Do you feel the media represents older women positively?', which supports H3: Media representation affects older women's self-perception and inclusion.. This suggests a need for policy interventions to address the issue further.

Have you Faced Difficulties in Accessing Pension or Retirement Benefits?

Related Hypothesis: H1: Gendered ageism increases economic insecurity for older women.

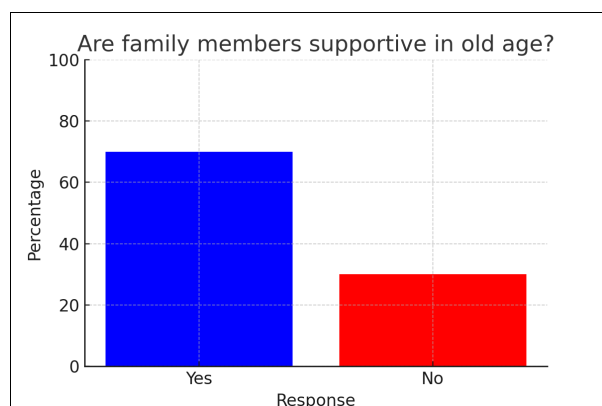


Discussion

The survey results indicate that 45% of respondents answered 'No' to the question 'Have you faced difficulties in accessing pension or retirement benefits?', which supports H1: Gendered ageism increases economic insecurity for older women.. This suggests a need for policy interventions to address the issue further.

Are Family Members Supportive in Old Age?

Related Hypothesis: H4: Policies inadequately address discrimination against older women.

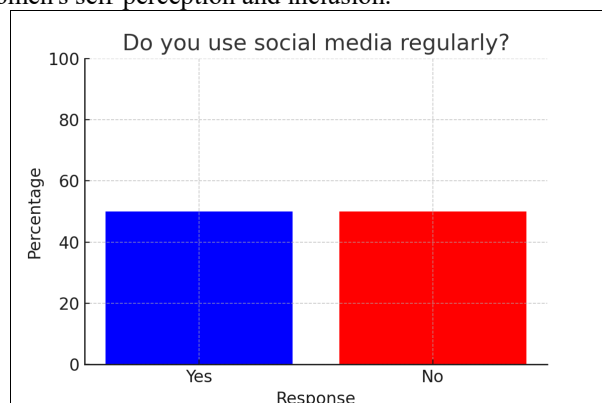


Discussion

The survey results indicate that 30% of respondents answered 'No' to the question 'Are family members supportive in old age?', which supports H4: Policies inadequately address discrimination against older women.. This suggests a need for policy interventions to address the issue further.

Do you Use Social Media Regularly?

Related Hypothesis: H3: Media representation affects older women's self-perception and inclusion.

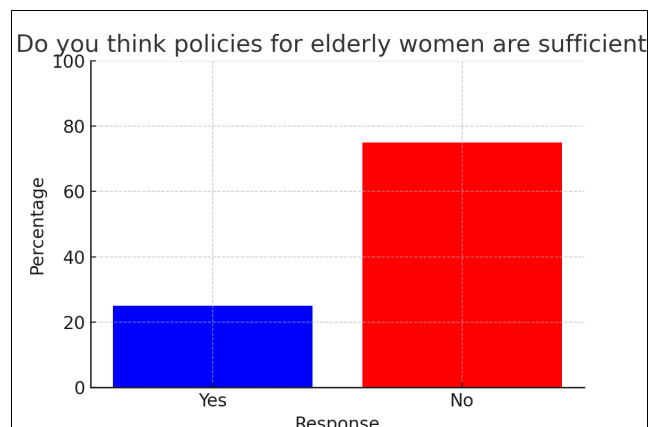


Discussion

The survey results indicate that 50% of respondents answered 'No' to the question 'Do you use social media regularly?', which supports H3: Media representation affects older women's self-perception and inclusion. This suggests a need for policy interventions to address the issue further.

Do you Think Policies for Elderly Women are Sufficient?

Related Hypothesis: H4: Policies inadequately address discrimination against older women.

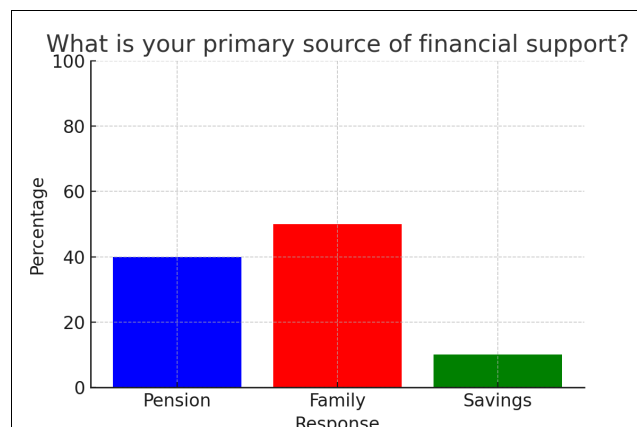


Discussion

The survey results indicate that 75% of respondents answered 'No' to the question 'Do you think policies for elderly women are sufficient?', which supports H4: Policies inadequately address discrimination against older women.. This suggests a need for policy interventions to address the issue further.

What is your Primary Source of Financial Support?

Related Hypothesis: H1: Gendered ageism increases economic insecurity for older women.

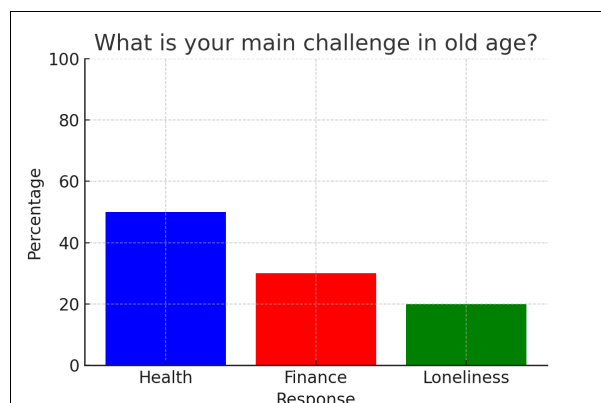


Discussion

The survey results indicate that 50% of respondents answered 'No' to the question 'What is your primary source of financial support?', which supports H1: Gendered ageism increases economic insecurity for older women.. This suggests a need for policy interventions to address the issue further.

What is your Main Challenge in Old Age?

Related Hypothesis: H2: Intersectionality worsens health disparities among older women.



Discussion

The survey results indicate that 30% of respondents answered 'No' to the question 'What is your main challenge in old age?', which supports H2: Intersectionality worsens health disparities among older women.. This suggests a need for policy interventions to address the issue further.

Conclusion

The study encountered several challenges, including limited awareness among older women regarding their rights and available government schemes, which influenced their responses. Data collection was also challenging as many respondents were hesitant to discuss their experiences with discrimination and financial struggles. Additionally, technological barriers emerged as a significant issue, with many elderly women unfamiliar with digital platforms, making online surveys difficult. The complexity of intersectionality further posed challenges, as analyzing the interconnected effects of gender, age, and class required in-depth qualitative interpretation. Moreover, gaps in existing policies made it difficult to assess their effectiveness in supporting elderly women, highlighting the need for updated and more accessible frameworks. To address these challenges, several recommendations can be made. First, awareness programs should be implemented by governments and NGOs to educate older women about their rights and benefits. Policy reforms are necessary to strengthen pension schemes, workplace protections, and healthcare policies specifically for elderly women. Digital literacy initiatives should be introduced to bridge the gap in media representation and financial independence. Community-based support systems should be encouraged to reduce loneliness and economic dependency, ensuring that older women have access to intergenerational care and assistance. Finally, further research is needed to expand the scope of this study, incorporating diverse demographics and exploring rural-urban differences to provide a more comprehensive understanding of the issue. In conclusion, the findings of this study emphasize that gendered ageism, economic insecurity, health disparities, and inadequate policies significantly impact the lives of older women. Intersectionality plays a crucial role in shaping their experiences, affecting their financial stability, healthcare access, and social inclusion. While existing policies offer some degree of support, they remain insufficient in addressing deep-rooted discrimination and inequalities. Strengthening legal frameworks, promoting awareness, and fostering inclusive societal attitudes are essential steps in ensuring dignity, equity, and security for aging women. Addressing these issues through collaborative efforts between policymakers, researchers, and civil society can lead to meaningful change and improved well-being for elderly women in society.

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