

EDITORIAL

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The theme of this year's **19th World Congress of Gerontology and Geriatrics** organized by the International Association of Gerontology and Geriatrics (IAGG) and taking place from 5-9 July in Paris, is '*Longevity, Health and Wealth*'. In most, if not all cultures of the world, these three qualities, broadly defined, constitute core elements of the kind of life that, to paraphrase Sen (1999:10), individuals '*have reason to value*'. Achieved at aggregate level, they are yardsticks of societies' success and progress.

The 4,416 abstracts accepted for the IAGG congress and assembled in this special issue offer perspectives on ageing, broadly related to different aspects of the congress theme from a wide range of biological, health, social and behavioural sciences, and from all world regions.

As Africans we are particularly heartened by the largest ever number (at an IAGG meeting) of contributions from Africa. Though still only a tiny fraction (one percent) of all congress papers, they are testimony to the IAGG's efforts – enthusiastically pursued and implemented by outgoing president Professor Renato Maia Guimaraes and to be continued under the incoming presidency of Professor Bruno Vellas – to actively promote Africa's inclusion in its global endeavour.

With 91 countries represented, the sheer geographic spread of the research findings to be discussed at this Paris congress impresses two important messages:

First, it underscores the diversity and, more to the point, the clear disparities in levels of health, wealth and longevity in old age that exist between and within developed and developing world populations.

Second, it stresses the urgent need, and stimulates the potential, for the forging of a unified scientific discourse on achieving, as Johnson (2005) puts it, a '*good but affordable old age*' across rich and poor world regions. Such an international discourse would provide an important complement to the broader and increasingly intense research debate on the attainment of social and economic '*development*' globally.

Increasingly, up to now at least, developed world societies have experienced healthy longevity in overall relatively wealthy contexts. In an unequal world this is, however, only part of the story.

A major difference between population ageing in the more developed and the still developing regions of the world is that ageing in the latter largely occurs against a backdrop of considerable economic, infrastructural and personal strain. Longevity, even if achieved, then often entails a life of

compromised health with scant access to general (let alone appropriate or specialized) care and similarly constrained financial resources. Contrary to what pertains in industrialized nations, the well-being of older persons is not (yet) a policy priority in most developing societies. Typically, issues of ageing and old age are often crowded-out by other ostensibly '*more pressing*' development needs.

Alongside such inter-regional or -national disparities, of course, exist equally alarming inequalities in old age *within* developed countries and, likely even more starkly, within developing world societies. One may speculate that both intra- and inter-national disparities will widen with the looming global financial and economic crisis. However, the quest for a unified discourse on '*ageing well*' requires going beyond the documentation or forecasting of inequalities.

Three areas, in particular, need more explicit and '*joined up*' reflection and debate:

The first are the mechanisms that operate at international, national or local levels that engender inequalities in old age between and within the world's societies. Specific attention should focus on processes, such as for example international care labour migration, that produce direct connections between conditions of old age in one part of the world and those in another.

Second, are the lessons that can be learnt from existing policy and practice to hone approaches for achieving an affordable '*good old age*' globally. Learning, in this context, must mean North-North and North-South, but crucially also South-North and South-South cross-fertilization of ideas.

Third, and fundamentally, are the similarities and possible differences in developed and developing world societies' conceptions of what a '*good old age*' entails - including the relative importance ascribed to longevity, health and wealth.

The abstracts in this issue provide the reader with a wealth of insights that, directly or indirectly, are of key relevance to the above areas.

We trust that their dissemination and presentation in Paris will not only advance debates in their respective disciplines, but will foster the shared, global discourse on '*ageing well*' we so urgently need.

References

1. Sen, A. 1999. *Development as Freedom*. Oxford: OUP
2. Johnson, M.L. 2005. General editor's preface. In: M.L. Johnson (Ed.).
3. *The Cambridge Handbook of Age and Ageing*. Cambridge: Cambridge University Press, pp. XXI – XXVI.