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Conference Abstract

Science and technology enabled changes in ability expectations: Challenges for successful aging of people with and without so called impairments

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Abstract

This presentation relates to the symposium entitled 'Diverse National Policies and Programs Supporting Inclusiveness and Healthy Living' organized by Dr. Jill Le Clair. Emerging and envisioned sciences and technologies enable changes in the abilities people cherish and vice versa. Advances in science and technology and the changing landscape of ability expectations increasingly enable two health related paradigm shifts. One is the move away from species-typical as the framework of reference of 'being healthy' towards a framework of 'health' which incorporates, condones, and even expects the modification of the human body beyond species- typical boundaries as one prerequisite of being 'healthy'. The other is the move towards patient-driven health care consumer models which includes the move towards a 'quantified self' (where people diagnose themselves), user generated data consumer personalized medicine, health social networks and 'participatory medicine 'in which networked patients shift from being mere passengers to responsible drivers of their health?[1]. These two paradigm shifts influence severely our vision of how we should age, aging and the elderly. The term ableism was originally developed by the disabled people rights movement and the academic field of disability studies to question the favouritism for species-typical and discrimination against as sub species-typical labelled body abilities and medicalization of such as sub species-typical labelled bodies.

However, the favouritism for abilities and ableism is a much broader phenomenon. Ableism can be used to look at climate change discourse[2], meaning of health[3], future of health care and rehabilitation(3), sport, human performance enhancement, governance of nanoscale science and technology the issue of inequality and inequity [4] and many other areas. The cherishing of abilities happens on the level of individuals, households, communities, groups, sectors, regions, countries and cultures has changed over time and will continue to change. Favoring certain abilities often morphs

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into ableism where one not only cherishes certain abilities but where one sees certain abilities in oneself or others as essential. Ableism leads to an ability-based and ability-justified understanding of oneself, one's body and one's relationship with others of one's species, other species and one's environment. Ableism as such is not negative it just highlights that one favours certain abilities and sees them as essential. Certain ableisms are used in a negative way to justify racism, sexism, ageism and other isms often leads to disablism, the lack of accommodation for the needs of people and other biological structures who are seen to not have certain abilities.

Keywords

ableism, participatory medicine, disability, older adults, aging

Presentation available from the FICCDAT Growing Older conference site

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