

research article

'Because I am a woman, an old woman, I have no voice': gendered ageism and disempowerment of older women in three African countries

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Background and objectives: Gendered ageism refers to the intersectionality of age and gender bias and discrimination. It is widely prevalent and leads to inequality, injustice, oppression, exploitation and disempowerment of older women. In this study, we explore the impacts of gendered ageism on three areas of older women's lives in three African countries. These areas are: (1) participation in public and political life and access to justice and law enforcement; (2) family relations, inheritance, and land and property ownership; and (3) violence, abuse and neglect.

Research design and methods: Eighteen women aged 54–85 years were interviewed for this study. Thematic analysis was undertaken to identify and explore disempowering impacts of gendered ageism on their lives and rights.

Results: In all areas of the participants' lives, their lack of voice in their inability to make choices, to claim their rights and to participate meaningfully in decision-making were highlighted. These manifested in the suppression of their interests, opinions and aspirations in public life; denial of justice; prejudice and discrimination within family settings; exploitation, harassment, abandonment and violence; and an overall devaluation, dehumanisation and silencing of older women.

Discussion: Women often outlive men and experience marginalisation for a greater proportion of their lives. Yet, their lived experiences receive limited acknowledgement and redressal. In developing countries, older women face multiple forms of oppression arising from gendered ageism. This study highlights such experiences with the expectation that this will generate awareness, garner support from stakeholders and help inform policies for the protection and equal treatment of older women.

Keywords rights • participation • access • voice • discrimination

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Introduction

Recognising the marginalisation and devaluation of older adults around the world is essential. To address these concerns, the United Nations General Assembly has designated the third decade of the 21st century as the United Nations Decade of Healthy Ageing (2021–30). This declaration aims to empower and uplift older individuals. It is closely aligned with the 17 Sustainable Development Goals, one of which is to achieve gender equality by 2030. This goal seeks to end all forms of discrimination against women and girls, eradicate violence and exploitation in both public and private spheres of life, promote equal leadership opportunities at all decision-making levels, ensure full and effective participation in political, economic and public life, and guarantee equal rights to economic resources, land, property, financial services, inheritance and natural resources ([United Nations Department of Economic and Social Affairs, nd](#)). Given the significant disparity between these goals and their achievement, this article engages with the concepts of ageism and sexism, collectively referred to as 'gendered ageism', to explore the disempowering experiences of older women in three African societies. This article is based on the findings of a qualitative study undertaken in Kenya, Rwanda and Uganda. The goal was to identify the manifestations and impacts of age and gender discrimination on older women's lives and rights, given prior research emphasising the silencing of older women's voices in the region ([Sossou and Yagtiba, 2015](#); [Ugwu et al, 2020](#); [Nagaddya, 2022](#); [Ekoh et al, 2023](#)). Our findings shed light on the often-invisible struggles of a vulnerable and under-represented population in both their private and public lives.

Ageism

Ageism is defined as stereotypes (thoughts), prejudice (feelings) and discrimination (actions) aimed towards people due to their chronological age ([Butler, 1969](#)). Although ageism may be experienced by all age groups, older people are more likely to suffer the consequences of such 'othering'. It has been reported that worldwide, one in two people have been ageist towards older people; ageism is more prevalent in low- and middle-income countries (LMICs; [World Health Organization, 2021](#)). Ageism operates at various levels: institutional (for example, within healthcare systems); interpersonal (for example, during interactions with family members); and self-directed/internal (for example, self-talk, beliefs about one's own worth or capabilities). Although ageism may be both positive ('older people are wise') and negative ('older people are incompetent'), the latter is associated with deleterious physical, emotional, mental and social health consequences, such as loneliness, social isolation, depression, poor quality of life, cognitive decline, slower recovery from disability, poverty and increased risk of violence and abuse ([Shiovitz-Ezra et al, 2018](#); [Phelan and Ayalon, 2020](#); [World Health Organization, 2021](#)). Like most social problems, ageism seldom occurs in isolation. Often, it intersects with diverse facets of an individual's (or group's) identity to shape their experience of ageing.

Intersectionality and gendered ageism

Intersectionality is a framework for understanding how various social identities – such as race, gender, class, ability, sexuality and age – intersect and interact to

create unique opportunities for discrimination. Coined by [Crenshaw \(1991\)](#), intersectionality recognises that individuals possess multiple interconnected identities that interact in complex ways to create discriminatory experiences which cannot be understood fully by looking at one aspect of their identity in isolation. For instance, the discrimination faced by an older woman is shaped by both her age and her gender. The combined effects of age- and gender-based discrimination are more complex than if each form of discrimination were considered separately. Intersectionality, therefore, allows for a more comprehensive understanding of the multifaceted nature of discrimination faced by marginalised groups. It reveals how compounded disadvantages, known as ‘double’ or ‘multiple jeopardy’, arise when two or more social identities intersect, leading to heightened inequality and discrimination ([King, 1988](#)).

Gendered ageism refers to the intersection of age and gender discrimination, where both age and gender biases combine to disproportionately disadvantage older women. It may be understood as a ‘double jeopardy’, whereby two power systems – patriarchal norms and societal preoccupation with youth – interact to rapidly diminish the social status of older women and increase their vulnerability ([Krekula et al, 2018](#)). This phenomenon is rooted in the intense scrutiny of women’s physical appearance and its association with their social value, with women being perceived as ‘old’ much earlier than men ([Calasanti, 2005](#)). Gendered ageism can manifest in various areas of older women’s lives, including at the workplace ([Jyrkenin, 2014](#)), within families ([Crockett et al, 2018](#)), in healthcare settings ([Chrisler et al, 2016](#)), in media representations ([Edström, 2022](#)) and in social practices like ‘widow inheritance’ and accusations of witchcraft ([McCleary-Sills et al, 2018](#)). Additionally, while external sources of gendered ageism may deprive older women of their rights and freedoms, leading to social invisibility and exclusion ([Westwood, 2023](#)), internalised gendered ageism can cause older women to self-exclude from opportunities and social interactions, thereby adversely affecting their ageing experience ([Swift et al, 2017](#)). Gendered ageism may limit older women from reaching their full potential and living with dignity. As older women live longer and represent a larger segment of the older population compared to men – a phenomenon known as the ‘feminisation of ageing’ – they may face the impacts of gendered ageism for a significant portion of their lives.

Older people's status in Africa

The conception of ‘old age’ varies across geographical regions. Although the United Nations recognises age 60 as the demarcation for old age, factors such as physical appearance, role in the family (for example, grandparent) and/or age-related health conditions may shape sociocultural definitions of old age. In African countries, the onset of old age is largely defined by the retirement ages set by governments. However, owing to lower life expectancies, relatively small sizes of older populations, and most older people working outside the formal sector and residing in rural areas, the standard measure of old age tied to pensionable age serves limited purpose ([Kowal and Doud, 2001](#)). Moreover, factors like poor nutrition, exposure to diseases and psychological/ psychosocial trauma associated with civil wars, famines and genocides may cause people to age faster than average ([United Nations High Commissioner for Refugees, 2023](#)). A combination of chronological, functional and social definitions of ‘old’ is

therefore considered appropriate for African countries, with age 50 as the proposed definition for older persons (Kowal and Doud, 2001). However, most African countries use age 60 as the official demarcation.

Aspects of both empowerment and disempowerment of older persons in Africa may be attributed to their age. For example, older people in African societies have traditionally been respected as repositories of indigenous skills and knowledge regarding culture, land, language, identity, community history and spirituality (Dei et al, 2022). Older women, especially grandmothers, are recognised for their contributions to family and community in the roles of herbalist, midwife, faith champion, psychologist, agriculturalist, economist, family advisor, family nurse, educator, family chef, babysitter and orphan advocate; they are valued as 'transmitters of culture', as 'wise' and as 'guardians of the secret of life' (Michel et al, 2019). For generations, African elders have held judicial powers, maintained social order, negotiated peace pacts with clans, communities and ethnic groups, settled disputes, facilitated reconciliations, formulated laws, overseen the sharing and distribution of community resources and presided over trials. They have acted as intermediaries between God and the people, appeased ancestors and spirits, prayed for their communities, led religious ceremonies and guided younger generations through life's challenges (Ajayi and Buhari, 2014; Kariuki, 2015; Gumo, 2017). Even today, many African countries are led by older leaders. This, however, is a controversial trend, as political power and wealth are often disproportionately concentrated within a minority of older men (Klobucista and Ferragamo, 2023), resulting in the disenfranchisement of younger generations/electoral candidates and older women. Still, older people have traditionally occupied a place of sociocultural importance in African societies.

The favourable view and treatment of older Africans is, however, undergoing rapid change. Older people are increasingly facing various forms of exclusion, discrimination and prejudice. Moreover, since people may be perceived as 'old' at relatively younger ages, they may begin to experience ageism and disempowerment from younger ages as well. Some disempowering experiences for older people include lack of government attention, inaccessibility of healthcare, medical errors in healthcare services, gender inequalities, loneliness, social isolation, mistreatment and victimisation (Mussie et al, 2022). Older people, especially older women, are more likely to be poor, head chronically poor households and bear responsibility for orphaned, fostered or ill dependents, often becoming primary caregivers to grandchildren and adult children with HIV/AIDS (HelpAge International and International HIV/AIDS Alliance, 2003; Schatz, 2007; ESR Review, 2011; Rutakumwa et al, 2015). Additionally, older people face various forms of abuse, abandonment and neglect, such as financial exploitation, emotional abuse and deprivation of food, clothing and medical care (Ferreira, 2004; Chane and Adamek, 2015). Older people in Africa also face high levels of internal displacement due to conflicts and are among the largest refugee populations on the continent (Böcker and Hunter, 2022). With the erosion of traditional value systems, evolution of sociocultural norms, loss of adult children and rising costs of living, the older population is gradually losing familial support systems, kinship networks and mutual aid societies, forcing them to address their own needs at advanced ages (Aboderin, 2004; Adamek et al, 2020). The empowerment of older people in Africa, through the provision of guaranteed income, microfinancing opportunities, affordable healthcare services, legal protections, housing and social grants/programmes/services, is emerging as an immediate need

(Tewodros, 2013). This need can only be met when older people are valued in society and their rights are accorded due priority. As ageism leads to the neglect of care provision, support services and opportunities for older people, it directly results in their disempowerment.

Disempowerment of older women

Disempowerment of older women is a consequence and manifestation of gendered ageism. Often, it is an extension of lifelong experience of gender discrimination combined with ageism once a woman begins to be perceived as 'old'. This is especially true of LMICs, where gender discrimination and disempowerment of (older) women are rooted in poverty; limited political participation; high prevalence of illiteracy; lack of awareness about basic rights, redressal mechanisms and welfare schemes; limited legal protections and support; scarce economic opportunities and freedoms; patriarchy; hegemonic masculinity; and cultural practices like forced or child marriage, female genital mutilation, the purdah custom that prevents girls and women from interacting with outsiders, trafficking of female children, slavery and the burden of household duties (Tuwor and Sussou, 2008; Agewell Foundation, 2015; Ganle et al, 2015; HelpAge India, 2023).

Older women also experience (lifetime) physical, emotional, psychological, financial, sexual and verbal abuse in addition to violence, neglect and controlling behaviours. Many older women are unable to access help and resources due to disability, social stigma or dependence on the perpetrators (HelpAge International, 2017; Pathak et al, 2019; Meyer et al, 2020). Notably, in some cases, economic and social empowerment may disempower women and result in greater domestic/intimate partner violence as empowered women are perceived to challenge the authority of their spouse by actively participating in household and financial decision-making (Ahinkorah et al, 2018). Older women, due to feminisation of ageing, are also more likely than older men to experience discrimination in access to food, income, meaningful work, credit, inheritance rights, control of property and land, political power and social security benefits (Kimani and Maina, 2010; Gutterman, 2022; Nagaddya, 2022). Due to their 'second-class' status, older women's healthcare needs may be neglected or ignored, resulting in disproportionate impacts of depression and disability, lifestyle-related non-communicable diseases and health conditions associated with traditional social roles, such as conditions related to inhalation of smoke while cooking with solid fuels in poorly ventilated homes (World Health Organization, 2017; Gutterman, 2022). Additionally, older women with dementia may be beaten, bullied, ostracised, stoned, burned or killed due to cultural associations of dementia with witchcraft (Mkhonto and Hanssen, 2017). Overall, the intersection of age and gender may lead to inequality, injustice, oppression, exploitation and disempowerment of older African women.

Study context

As indicated by He et al (2020), Africa is currently the youngest region in the world, with the lowest number of adults aged 60 and above, at 74.4 million in 2020. This number is projected to more than triple, reaching 235.1 million, by 2050. In Eastern Africa, the focus area of this study, there are currently around 20.1 million older

adults. While the circumstances of older adults across the continent vary widely, a few general trends may be observed. The population of older adults in Africa is largely concentrated in rural areas, although urbanisation among this age group is also on the rise. Most older Africans have limited geographic mobility, often staying in the same location for ten years or longer. The majority of older adults in Africa reside in large, multigenerational households, including skipped-generation households, and many live with young children. However, a significant number of older adults, especially older women, are increasingly living alone. Fewer than a quarter of older adults in sub-Saharan Africa are covered by a pension. Around 70 per cent of adults aged 60 to 64 and almost 50 per cent of adults aged 65 and older continue to remain in the labour force; these rates are higher than in all other world regions. Up to 90 per cent of older adults in some African countries have no formal education, and the prevalence is higher among older women. About 50 per cent of older Africans live in poor households. Those in rural areas are more likely to live in poverty. Similarly, older women are more likely to be poor. Most older adults have small social networks, limited to family members. However, they serve as community elders and leaders to provide advice, guidance and financial help to younger generations. Older women frequently assume caregiving and parenting responsibilities for orphans and adult children with HIV/AIDS (He et al, 2020).

Research design and methods

Data collection

This qualitative study was conducted by HelpAge International in Kenya, Rwanda and Uganda between September and November 2021. Data collection was undertaken by local civil society organisations (HelpAge network members) in the three countries. The partner organisations were selected for their ability to conduct in-depth interviews and for their experience in working on issues related to ageism and/or gender discrimination. The partner organisations were trained by HelpAge in the use of the interview tools. Women aged 54 to 85 years were selected through purposive sampling. This age range was chosen to capture a wide variety of experiences and perspectives. The participants were recruited by the partner organisations with the help of community representatives involved in Older People's Associations, who helped to identify potential participants. The interviews lasted between 1 and 2 hours (the average was 85 minutes). Most of the interviews were completed in local languages – Luganda and Lunyoro (Uganda), Kinyarwanda (Rwanda) and Kiswahili (Kenya) – and some were conducted in English where participants had a high standard of English. The interviews were held in or around the participants' residences in Uganda and Rwanda, and in the local chief's camp and at a day care centre in Kenya. All interviews were audio recorded with participant consent. The study received ethics approval from HelpAge International's Director of Global Impact and Head of Society for All Ages.

A total of 18 older women – 6 from each country – were interviewed for this study. In terms of participants' place of residence, 39 per cent lived in urban areas, 22 per cent lived in peri-urban areas (within 10–20 kilometres from urban centres; this includes slums of urban areas) and 39 per cent lived in rural areas. In terms of their highest level of education, 22 per cent did not have formal education, 6 per cent had less than high school education, 50 per cent had attended high school, 17

per cent had attained college education and 6 per cent had a postgraduate degree. In terms of marital status, 17 per cent were single, 28 per cent were married, 50 per cent were widowed and 6 per cent were divorced. In terms of living arrangements, 89 per cent lived in multigenerational households, with children and/or grandchildren, 6 per cent lived alone and 6 per cent lived with a sibling. Participant profiles are available in [Table 1](#).

Data analysis

Data analysis was undertaken by an independent researcher (first author). The process was guided by [Braun and Clarke's \(2006\)](#) six-stage thematic analysis framework. All interviews were transcribed by network members. The transcripts of interviews conducted in local languages were translated into English, while the English transcripts were retained in their original format. Transcripts were verified by the partner organisations before being made available for analysis. As the first step, the researcher read and re-read all 16 transcripts to familiarise herself with the data. This step also involved making notes about initial impressions and identifying questions for further examination. Once the researcher had gained an overall understanding of the data, all transcripts were uploaded onto Dedoose for data management. The researcher

Table 1: Participant profiles

Country	Age	Residence	Education	Marital status	Living arrangement
Kenya	85	Urban	College	Widowed	Alone
Kenya	66	Rural	High school	Widowed	Grandchildren
Kenya	61	Rural	College	Married	Husband and children
Kenya	70	Peri-urban	High school	Widowed	Son and grandchildren
Kenya	68	Peri-urban	Class 7	Widowed	Children
Kenya	68	Peri-urban	College	Widowed	Children
Rwanda	72	Urban	High school	Widowed	Grandchildren
Rwanda	54	Urban	Postgraduate	Married	Husband and children
Rwanda	74	Rural	No school	Single	Twin sister
Rwanda	80	Rural	No school	Married	Grandchildren
Rwanda	77	Urban	High school	Married	Children
Rwanda	75	Rural	No school	Married	Grandchildren
Uganda	62	Urban	High school	Single	Children and grandchildren
Uganda	66	Urban	High school	Single	Children and grandchildren
Uganda	77	Urban	High school	Widowed	Children and grandchildren
Uganda	72	Peri-urban	High school	Widowed	Children and grandchildren
Uganda	83	Rural	No school	Divorced	Grandchildren
Uganda	69	Rural	High school	Widowed	Grandchildren

then coded the data in an inclusive and comprehensive manner while simultaneously creating and refining a detailed codebook.

An important observation at this point pertained to the distinction between ageism experienced by older people in general and gendered ageism experienced by older women. Although the study focused on the latter, participants occasionally conflated their personal experiences with those common to all older people, regardless of gender. For example, sentiments such as 'older people should feel respected', 'old people have a lot to give' or 'older people need protection' encapsulate older women's own experiences and needs while also highlighting the plight of older people in general. In the data analysis process, the researcher was careful to distinguish between the two as much as possible. When participants used terms like 'I', 'we', 'us' or 'old(er) women', clearly referring to their own experiences with discrimination, prejudice or negative stereotypes, this was considered an instance of 'gendered ageism'. Generic statements about older people were coded for 'ageism'. On completion of the coding process, all data relevant to each code were collated. Following this, the researcher searched for themes that best captured the essence of the data. Three themes are discussed in this article. Throughout the data analysis process, illustrative and relevant quotes were extracted to build and support the themes.

Results

In this article, we focus on three areas of older women's lives: (1) gendered ageism in the right to participation in public and political life and to access to justice and law enforcement; (2) gendered ageism in family relations and in the right to family inheritance and to land and property ownership; and (3) gendered ageism in the right to live free from violence, abuse and neglect. These themes were selected to represent gendered ageism in the context of older women's absence of voice. In this study, 'voice' means older women's ability to claim their rights, to make choices and to participate meaningfully in decision-making. It includes participation, empowerment, agency, autonomy and accountability ([HelpAge International, 2023](#)). The themes, therefore, include aspects of older women's lives that have traditionally been governed by rigid, patriarchal sociocultural norms that deny them freedom and dignity by interfering with their human rights as enshrined in national, regional and international legal frameworks.

Theme 1: Gendered ageism in the right to participation in public and political life and to access to justice and law enforcement

Gendered ageism in this theme manifested in the suppression of older women's voices, interests, aspirations and safety when in interaction with the broader community. Participants believed that they were treated unfairly and unequally in village and community meetings due to their age and gender. They were frequently barred from speaking at these meetings, often by older men. Moreover, older men were more receptive to ideas from younger, educated women than from their older counterparts. The knowledge and expertise of older women were often deliberately overlooked, and they were frequently denied leadership roles, based on assumptions of incompetence.

Gender discrimination is very often in the rural areas whereby when you go to barazas [community meetings chaired by the chief], they wouldn't let a woman speak. The men are the ones that speak ... some of them [men] are even less educated than you are, but they won't give you that chance, because you are a woman ... old women or a woman is discriminated not to be at the same level with other people ... even if you are in a position ... you are given lesser powers than a man. (85, urban, Kenya)

I wanted to stand for a position in my community [as] a secretary for our savings group and the men refused me, saying I am so old I won't understand the figures and keeping people's money ... it hurt me ... I can still count money. (72, peri-urban, Uganda)

Gendered ageism in participation and leadership in public and political roles was compounded by older women's limited access to justice and law enforcement. Village chiefs and police often required them to be represented by a son in public matters. Without a son, older women received low priority or were denied justice. During instances of intergenerational altercation, those in power sided with younger generations and blamed older women for creating problems.

Even the chiefs ... they say, 'Mama, what have you come for?' Before you even tell him what you want, [he says]: 'Go and tell your son to come and see me.' You tell him you don't have a son; he tells you 'Sit there', and you will sit in that office the whole afternoon. Without [being] bothered that you, an old woman, is there. (85, urban, Kenya)

I was abused, and no one bothered. When you go to the police or chief, the chief would support the younger person and the old person will be told, 'Why don't you go home? Why are you bringing problems to the younger people?' (70, peri-urban, Kenya)

The participants felt that negative societal views about older women resulted in them being devalued and denied assistance and justice. Moreover, participants believed that, in general, younger women and men of all ages were held in higher regard than older women.

Theme 2: Gendered ageism in family relations and in the right to family inheritance and to land and property ownership

Participants experienced prejudice and discrimination within their families as well as immediate communities. This was expressed in two primary ways: in discriminatory attitudes towards older women; and in discriminatory practices related to inheritance and ownership of land and property.

Discriminatory attitudes of family and community were influenced by prevalent sociocultural norms, beliefs and values surrounding the reproductive choices and fates of older women. Participants believed that older women without children, especially

sons, were devalued within their families and communities. They were seen as having made a 'mistake' for which they were expected to face lifelong consequences. In their view, older women without children were not accorded the same respect and consideration traditionally granted to women with (male) offspring.

There are some older women who never had sons, they are harassed in the community ... the ones who never had sons, those who never had children ... people see it like you made a mistake, but it is not a mistake not to have children, or not to have sons. (66, rural, Kenya)

I want government to fight for the rights of women [who] have been with [their] husband and didn't give birth, so he gets a younger [woman] and they take all the property because [the wife] didn't give birth, and now they want [the wife] to go on the street. (66, urban, Uganda)

In addition to being discriminated against for not having (male) offspring, older women's marital decisions were used against them to deprive them of their rightful inheritance. Participants felt that they were considered unworthy of receiving an inheritance without a husband or a son by their side.

What I can say is that at my age, we are really hated because of not having a husband, not being married. I will go to claim land from my father ... [and] even if it is your brother, they hate you because you will go demanding a piece of land to cultivate. (68, peri-urban, Kenya)

Single older women, in addition to being deemed unworthy of an inheritance, were also considered incapable and undeserving of owning land, reflecting deep-rooted patriarchal norms that deprive them of economic independence and security. 'You cannot ask for things like land. Even when you try to buy land, it's not easy in many families for a woman to be accepted to have a title deed ... you are not allowed to own. Land is for the men' (61, rural, Kenya).

Typically, disputes over paternal or family property were kept within the family. In contrast, marital property disputes frequently involved community members exerting collective pressure on individuals to forfeit their rights to marital assets, property and inheritance.

The older women have no voice in my community ... when my husband passed on, he left me with a big shamba [farm] ... but to date they [community members] say: 'This woman cannot have ... this shamba.' I am already old, I don't have a child, so they say: 'This woman is finished. Let us take the shamba.' And they are taking the shamba by force. So, old women ... we don't have a voice. (85, urban, Kenya)

In the community, they don't treat women fairly ... us widows, because we are single, they sometimes think they can take the wealth you had with your husband ... your property. You don't have any voice after that. (68, peri-urban, Kenya)

These experiences are indicative of sociocultural norms and traditional laws that often supersede constitutional and formal laws to deprive older women of agency, autonomy, power and freedom to manage their lives independently.

Theme 3: Gendered ageism in the right to live free from violence, abuse and neglect

The prevalence of varied forms of violence, abuse and neglect in domestic and community settings were identified as significant sources of gendered ageism by the participants even though they had not been asked about such practices. According to the participants, older women, especially widows, were at risk of being abused, neglected and exploited, as they were commonly perceived to be alone and 'powerless'.

Within the family context, older women experienced physical, psychological and financial abuse in the form of stealing, domestic violence and sexual harassment. Such experiences affected the mental health of the participants and, in one case, engendered fear for her life.

This one [mentally ill adult son] really disturbs me ... when he is hungry ... he comes home very angry. I lock the house, keep quiet and sleep. Because he is mentally sick, he can kill you any time. (68, peri-urban, Kenya)

Violence and land grabbing ... the men and children beat their older women and the children also steal our property. ... I have seen ... my own daughter stealing my land and selling it without my permission. (83, rural, Uganda)

There is another old woman who told me her story about her grandson. The grandson wanted to sleep with her, but when she refused, the grandson disappeared. This has made the woman lack sleep and get sick worrying about her grandson. (70, peri-urban, Kenya)

Older women had to put up with multiple forms of abuse due to the perception that they were 'weak', lacked social support and were incapable of fighting back.

Participants also identified abandonment, conflict and neglect as creating stress within family relationships, especially with adult children. Additionally, they experienced lack of support and misunderstandings with family members. Owing to sociocultural perceptions of older women being 'useless', 'worthless' and 'unproductive', participants felt that their value and worth depended on making financial contributions to their families, failing which they could be perceived as a 'burden'.

The rent is paid by my child ... she told me in front of her husband: 'I pay for your rent and so cannot buy you food ... you should find someone who will buy you food, and your grandchildren should cater for your medicine.' So, it looks like the understanding is going to end, as it seems like I am disturbing her ... if I had died way back, I could not be disturbing them. (70, peri-urban, Kenya)

If you do not assist the family, the family will not like you ... if you do not send them money, they have no business with you. (68, peri-urban, Kenya)

You see, I'm old, I really should have been taken care of and valued as an older woman ... even if I'm at my daughter's house, they [don't] bring me food, I have to cook for myself. She can't even clean the house I live in ... no one of her children talks to me, as if I'm really bad woman and this makes me sad so that I get to the point of feeling as if I am asking God to kill me from this world ... I think they do all that just because I am old. (77, urban, Rwanda)

The transactional, sometimes hostile, nature of intragenerational relationships combined with a deficit of intergenerational solidarity and reciprocity left participants feeling alone, isolated and unworthy, sometimes wishing that they had died before such issues surfaced.

Participants also reflected on the prevalence of family violence and wanted younger generations to realise that inflicting violence on their mothers was a 'curse'.

Male children of today are alcoholics, smoke marijuana, [are] drug abusers, they beat up their parents. Back [in the day], a child would not dare hit his mother, because it was a big curse. We are trying to educate them that it is a curse to hit your mother, because your life won't be good. (68, peri-urban, Kenya)

I see some women being beaten by their husbands and their children. This is so bad and it's a curse, but they don't know it. (83, rural, Uganda)

Violence, abuse and neglect were also witnessed or experienced at the community level in the form of gerontocide, sexual exploitation, harassment and stealing, reflecting societal perceptions of older women, especially widows, as easy targets for exploitation. Additionally, participants described the suppression of their voices as a form of mistreatment.

We had a specific case ... in 2014 ... where the man had joined his son and they worked towards the mother's demise ... and that is a very specific case and was noted by the government. And it is happening even now ... older women are treated differently because of the white hair. (85, urban, Kenya)

There is a pastor across here ... first time I went to him, he prayed for me [for a cure for my disease]. The second time, and the third time, he told me to go at six in the morning ... he thought that when I go at six in the morning, we would have sex ... he knows I am an old woman, it is not right. (70, peri-urban, Kenya)

They [the youth] disturb us ... steal our things, like the goats and poultry ... so the older women are pressed. (69, rural, Uganda)

We are being mistreated. We don't have a voice. You don't [get] to talk because you are a woman, you are widow, you know? We get it rough in the community. (68, peri-urban, Kenya)

In most cases, older women had no choice but to endure violence, abuse and neglect while continuing to reside in close proximity to the perpetrators. None of the

women reported receiving help, support or a fair hearing when they reached out to the police or village chief. Rather, they encountered obstacles, inconveniences and dismissal for bothering younger generations. Moreover, participants did not mention the availability of any government support services to help them in times of distress.

Overall, participants believed that ‘older women are not recognised in the community as human beings’ and that they are ‘treated like second[-class] citizens’. They felt that they were perceived as ‘worthless’ and ‘incompetent’; that they were easily dismissed, devalued and treated ‘unfairly’ and ‘unequally’; and that they lacked a voice, were not counted ‘fully’ in society and were considered ‘nothing’ without a man. One woman summed up the experiences of older women being disempowered due to both age and gender: ‘If I wasn’t old, they could not be insulting me, and if I was not female, I could not be looked down upon, so they are equal.’

Discussion and implications

This study explored the disempowering impacts of gendered ageism on older women’s rights in Kenya, Rwanda and Uganda. Although the participants identified specific areas of their daily lives that were impacted, the common, underlying message was that of a ‘lack of voice’. Older women, who have traditionally been viewed as assets and resources within families and communities (Michel et al, 2019), are now struggling to make themselves heard. In addition, they are being viewed as ‘weak’, ‘useless’ and ‘powerless’, adjectives that, according to them, were unheard of in yesteryears in relation to older women. The findings of this study are consistent with past research on the pronounced state of age and gender discrimination in LMICs. Moreover, half the participants in this study were widowed, reflecting the growing trend of feminisation of ageing or women outliving men at older ages and experiencing unique challenges for longer periods of time. In this study, participants reported suffering due to poverty and income insecurity, limited political participation and the predominance of patriarchy. Some had experienced one or more forms of abuse, and most had low levels of educational attainment and little knowledge of welfare programmes. Participants also experienced discrimination in access to community resources, control over one’s own land and property, and access to healthcare, caregiving and family support. These are common experiences of disempowerment among older women in LMICs (Guterman, 2022). They are also symptoms of deeper inequalities, economic and social crises, lack of trust in government institutions and increase in conflict and violence at local, national and trans-border levels.

For several participants, age and gender discrimination were not necessarily separate constructs. Some of them had experienced gender discrimination from a young age due to sociocultural norms or lack of resources. As they grew older, their previously disadvantaged status as women was compounded by advancing age so that they became victims of both ageism and sexism. This in turn impacted their right to economic freedom, preventing them from leading lives of dignity and comfort. Additionally, they became vulnerable to abuse, neglect, violence, injustice and oppression. These factors combined with deteriorating health, declining physical strength, increased dependence on others and precarious financial situations created a state of ‘multiple jeopardy’ (King, 1988) that the participants experienced simultaneously and, in many cases, multiplicatively.

The accumulation of advantages or disadvantages over the life course is linked to fairness and equity in the distribution of opportunities and allocation of resources at different ages and stages of life. Consequently, individuals who face disadvantages early in life are likely to experience a trajectory that exacerbates inequalities and discrimination. Those who are chronically disadvantaged continue to accumulate additional risks impacting their health, wealth, wellbeing, social participation and ability to exercise their rights (Dannefer, 2003; Ferraro and Kelley-Moore, 2003). In this study, most participants experienced gender-based disadvantages from a young age. As they grew older, the ongoing lack of access to opportunities and resources led to economic insecurity, restricted freedoms, suppressed rights and diminished voices. Once perceived as 'old', these individuals encountered further disadvantages linked to ageism, resulting in their marginalisation, devaluation and neglect.

Participants also spoke of the transactional nature of family relationships and changing expectations surrounding caregiving responsibilities, indicating tensions in both intra- and intergenerational relationships. African countries, like most LMICs, rely heavily on informal support and family caregiving. However, in current times, older adults are expected to continue to be 'useful' if they wish to avoid being a 'burden' on their families. Whereas caregiver deficit may result from migration, mortality, (re)marriage or unemployment of adult children, unwillingness on the part of adult children to provide care for older parents may be attributed to changing sociocultural norms, high financial burden and lack of training to provide specialised care. Participants in this study also expressed disappointment in the life choices of younger generations, especially their abusive tendencies. The loosening of bonds of filial piety and lack of cooperation and reciprocity between generations have increased the struggles of older women, many of whom function as sole caregivers to young and adult children as well as (grand)children with terminal illnesses and disabilities (Oppong, 2006).

This study highlights the lack of voice of older women. It shows how several related disempowering factors, ranging from extreme forms of violence, abuse and neglect to less visible struggles of retaining independence and autonomy and gaining access to justice and political representation may operate to impact the health and wellbeing of older women. Disempowerment is a manifestation of ageism which, in the form of exclusion, depersonalisation, infantilisation, devaluation, blame and powerlessness, leads to elder mistreatment (Pillemer et al, 2021). Additional factors such as female gender, low income, poor health, exposure to domestic violence, social isolation and shared living situations – all of which apply to the participants in this study – further contribute to elder mistreatment and infringe on human rights (Pillemer et al, 2016).

This study also highlights the dearth of comprehensive legal protections for older women, as evidenced in their struggle to participate in public life, claim inheritance, own property, seek justice and live free from abuse and violence. Meaningful involvement of older women in decision-making processes that impact their lives and wellbeing is crucial for enhancing their voice and agency. However, in practice, they are rarely consulted or included in decisions that influence their daily experiences. Barriers such as entrenched gender roles, ageism, cultural beliefs, patriarchal norms and limited opportunities to participate and contribute meaningfully further exacerbate the challenges faced by older women.

Although this study broadens the scope of existing literature on the challenges faced by older women in African countries, it has some limitations. First, the majority of

participants were from urban or peri-urban areas, leaving rural and remote locations under-represented. Second, although the study addresses important dimensions of older women's lives, there is potential to explore additional areas that were not covered. Notwithstanding these limitations, this article has attempted to highlight the manifestation of gendered ageism and its disempowering effects on older women's lives. It calls attention to the (in)visible struggles of older women and advocates for their right to have a voice in matters of their own wellbeing.

Conclusion

This study provides insight into the impacts of gendered ageism on different aspects of older women's lives. Specifically, it highlights older women's lack of voice and their inability to exercise their choices, make decisions and enjoy their rights. The findings of this study can contribute to the goal of the World Health Organization, which recommends three evidence-based strategies to combat ageism: education, policy and intergenerational interventions (World Health Organization, 2021). The findings can be used to raise awareness about (systemic) gendered ageism, encourage intergenerational contact, include older women as stakeholders in decision-making, formulate laws to recognise and address the various forms of elder abuse and mistreatment, inform policies aimed towards the protection of equal rights of older women and provide financial and material resources to older women to lead lives of dignity and independence.

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Research ethics statement

The study followed the ethical guidelines established by HelpAge International and received approval from HelpAge International's Director of Global Impact and Head of Society for All Ages.

Data availability and sharing

Data and materials cannot be provided, because the authors have not completed their work with the data.

Conflict of interest

The authors declare that there is no conflict of interest.

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