The Editor’s Note

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Research has shown that overall the world population is becoming older. An aging population is also accompanied by other demographic trends. People are living longer lives than in the past and fertility rates are declining in some places. In the United States, the population over 65-years-old will grow to 19% in 2030, up from 13% in 2009. The age group of 85+ will increase by 350% between 2000 and 2050 (Wiener and Tilly 2002). This trend is not unique to the United States. Other countries, like Japan, have seen an even more rapidly aging population.

Other regions and countries are also seeing an aging population, but not at such a fast pace. For instance, while the population in the Middle East and North Africa is also becoming older, it is still relatively young when compared to other regions. The percentage of the population over 65 in the MENA is about 5%, but the range varies depending on country with some, like Lebanon, having a higher percentage and others, like the United Arab Emirates, having a lower percentage of older adults (10% and 2% respectively). While fertility rates have declined worldwide with aging populations, they have remained somewhat steady in the Middle East and North Africa and are not decreasing as quickly as in some other places (Hajjar et al. 2013).

Aging raises a number of theoretical and empirical questions about culture, infrastructure, the body, experience, identity, memory, medicine, health, ethics, social services, and policy, as well as other topics that are prime for anthropological investigation. This is an exciting time for anthropologists who work on issues related to aging and the life course in both academia and applied settings, or a combination of the two. These demographic trends open up new topics and spaces for anthropological study and encourage us to re-think older ones in light of changing populations and their unique needs. They present the opportunity for anthropologists to further explore issues such as: age-related illnesses and health care, the development and application of different types of technologies in caring for older adults, gender and sexuality in aging, identity formation over the life course, aging-in-place, and the emotional and psychological aspects of aging.

With multiple opportunities for anthropologists today, I am honored to be the new co-editor of Anthropology & Aging and look forward to working with Philip Kao and the Editorial Board in developing issues that showcase the creativity and rigor of anthropological research on aging. I want to take the time to introduce myself to our readers. I am Assistant Professor in the Department of Sociology and Anthropology at George Mason University (Fairfax, VA), where I am also a faculty affiliate of Women and Gender Studies and a member of the Steering Committee for the Ali Vural Ak Center for Global Islamic Studies. I earned my BS in Anthropology from Iowa State University (with a minor in Psychology) and my MA and PhD in Sociocultural Anthropology from the University of California, Irvine.
My earlier ethnographic research in Rabat, Morocco (2005-09) examined the diverse dynamics that came into play in working-class women’s reproductive decisions and practices. In my book Islam, Development, and Urban Women’s Reproductive Practices (Routledge 2013), I analyze the impacts of the reorientation of development initiatives in Morocco from primarily economic to social development on women’s reproductive lives. I look at how a neoliberal rhetoric of self-governance, active participation, and responsibility—core components of this new social development initiative—shapes the ways reproductive health services are delivered to and received by working-class urban women and how they incorporate these practices into their ideas of citizenship. Part of my research included a cohort analysis. I compared the experiences of women who had older children versus those who had younger children to see how the shift in development rhetoric in Morocco informed the ways they think about reproduction, motherhood, and citizenship; these two cohorts of women had their first child under different government agendas for development and modernization (e.g., the older focus on economic development versus the more recent focus on social and human development).

The focus of my ethnographic work has shifted from reproductive health to end-of-life care, palliative medicine, and pain management. Since 2013, I have been engaged in ethnographic research on the diverse experiences of Sunni Muslims as they interact with the U.S. health care system during serious illnesses and the end-of-life. My ethnographic research is based in the Washington, D.C. area, although I have worked with individuals from around the country. I theorize how the introduction of medical technologies and the utilization of biomedical practices and principles transform or produce new Islamic beliefs and religious identities. Also, I investigate how faith interacts with medical discourses and recommendations as well as social, economic, cultural, and political factors to influence decision making about care and the end-of-life by patients, families, providers, and other caregivers.

In this research, I propose that the dying body is a site through which religiosity and religious identities are formed, changed, or contested. I use death and dying to view how Islamic understandings and identities are created or shifted across various spaces and through multiple temporalities. Instead of starting from the premise that religious identities and beliefs are created when living—interacting with others and reading sacred texts, for instance—I use the deteriorating and even dead body as the basis to explore individual Islamic understandings and Muslim identities.

My next ethnographic project will focus on palliative care and pain management during terminal illness and end-of-life care in Morocco. I conducted preliminary research on this topic in Rabat in 2014 and 2015. As part of my new project, I am interested in examining how physical pain and suffering intersect with individual Islamic beliefs about death, the body, and illness in Morocco, in addition to beliefs about being mortal and sin. Within this I intend to explore how a sense of self and personhood is connected to the use of prescription pain medication. A core component of the study is to analyze the use of pain medication within the larger political and economic context of Morocco given the government closely monitors opioid prescriptions (e.g., morphine), has strict regulations regarding which health care providers can prescribe these medications, and has limits on the amount that can be prescribed at a time. I am most interested in better understanding how the state, regulations, and bureaucracy impact the ways people suffer and experience their bodies as they deal with pain and illness.
I had the distinct pleasure of creating a Call for Papers for an upcoming issue of the journal that focuses on spirituality and religion. You can find the CfP “Religion, Spirituality, and Aging” on the Anthropology & Aging website. I encourage anyone interested in contributing to the special issue to submit by the deadline (January 15, 2018). I look forward to this special issue and to future issues of the journal that showcase innovative anthropological research on aging. I am very hopeful that Anthropology & Aging will continue to be staple not just in anthropology, but also in other disciplines that approach issues related to aging and the life course. I am eager to read all future submissions and to meet many of you at conferences or other events. Thank you for your continued support of the journal.

REFERENCES
