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# Ageing as a Unique Experience

Interdisciplinary Approaches to Ageing and Later Life from Social and Humanities Perspectives

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Edited by

Ieva Stončikaitė and Lucie Vidovičová

Printed Edition of the Special Issue Published in *Societies*

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Editors

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# About the Editors

## Ieva Stončikaitė

Ieva Stončikaitė, Ph.D., is a postdoctoral researcher and English literature instructor at the Humanities Department of the Pompeu Fabra University in Barcelona, Spain. She is also a member of the research group Dedal-Lit at the University of Lleida, where she taught as assistant professor in comparative literature and co-taught courses in literature and cinema and short story in English. Ieva's long-term interests include interdisciplinary age studies with a special focus on cultural and literary expressions of ageing, active and healthy ageing, silver tourism, travel writing, and care and dementia. She is also interested in the fourth age, adult education, life writing, and ageing masculinities. A special attention is given to unvoiced ageing individuals and the ways they manage their personal crisis and 'modern pathologies' in a neoliberal society. She has carried out her doctoral research in Spain (University of Lleida), Switzerland (University of Fribourg) and Canada (Trent University). Her doctoral thesis (2017) explored the discourses of female ageing in the works of Erica Jong. Ieva has participated in different national and international research projects and conferences, and published in several high-rank peer-reviewed journals and books. She has first author articles in *The Gerontologist*, *Journal of Aging Studies*, *Life Writing*, *Educational Gerontology* and book chapters in Routledge. Her most recent publications include a Routledge book chapter (2022) on human rights and older women in Europe, and an article on autoethnography in critical geragogy in *Educational Gerontology* (2023).

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# **Preface to "Ageing as a Unique Experience: Interdisciplinary Approaches to Ageing and Later Life from Social and Humanities Perspectives"**

Ageing is a diverse and multifaceted experience that is unique to each person. The process of ageing is lived differently according to each individual's socio-cultural, historical, religious, and political context, among other significant factors. However, the stereotype of homogeneity is still one of the strongest aspects related to later life. This Special Issue covers manuscripts of original research that critically examine the experience of old age and the process of growing older from different perspectives that range from social sciences to humanities and include social gerontology, cultural and literary gerontology, environmental gerontology, gerotechnological studies, social anthropology, and gender studies. The published articles explore and deepen our knowledge on body politics, sexuality, active and healthy ageing, space and place, age-friendly politics, human-robot interaction, media environments, digitalisation, the fourth age, ageism, narrative inquiry, creative writing, retirement management, and policy discourses among other topics. They collect arguments that show the variables and uniqueness of later life, and expand on the current theoretical frameworks in the field of age studies and beyond. The overall aim of this Special Issue is to broaden the gerontological scholarship and develop critical thought of old age and the life course beyond the merely biological processes of growing older and their sociocultural constructs. This Special Issue can be of interest to scholars, practitioners, stakeholders, and individuals concerned with the current dynamics of later life as well as the futures of ageing. Ultimately, the Guest Editors are very grateful to all the authors for their valuable contributions, the reviewers for their critical feedback, and the Journal and the Editorial Board for the opportunity to create and prepare this Special Issue.

**Ieva Stončikaitė and Lucie Vidovičová**

*Editors*



Article

# Materiality, Corporeality, and Relationality in Older Human–Robot Interaction (OHRI)

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**Abstract:** This article presents interdisciplinary research on the social and technological aspects of interactions between older adults and the humanoid robot Pepper (SoftBank Robotics). Our case study is based on the regular meetings that are a part of an experimental intervention taking place at the Active Ageing Centre for older adults in Prague, run by the NGO Life 90. Through the methods of participant observation, unstructured interviews, analyses of video recordings from interventions with Pepper, and subsequent reflections on the “user” experience with the robot, we have unpacked the complexity of materiality and corporeality in older human–robot interactions (OHRI) in the context of age and gender. The project brings new applied knowledge, exploring OHRI using concepts relevant to gerotechnologies, informed by studies of materiality and ageing studies.

**Keywords:** ageing; materiality; corporeality; humanoid robot Pepper; human–robot interactions; gender

## 1. Introduction

In recent decades, many types of developing technologies have moved from the private sphere into the lives of older adults in social and health care institutions. Through digital and robotic devices, technologies aim to provide better healthcare and communication support, fostering educational and leisure-time activities and interactions [1]. Understanding the relationship between ageing and technology has become a research aim for various interdisciplinary projects and research teams [2–4]. Technological innovations are often introduced as a solution to demographic changes in the population [5], even though this ageing-and-innovation discourse has been criticised as a (partly ageist) rhetorical device which prevents the development of meaningful technologies for older adults [6,7]. This study turns its gaze away from the grand narratives of demographic changes to the fundamentals of meaningful interactions between older adults and technologies and to the embodied materiality of these relations. Using the specific example of interactions between older adults and the social humanoid robot Pepper (SoftBank Robotics) in a community environment, we argue that the materiality of technology plays a significant role in the development of personal relationships with the robot, to the robot, and because of the robot, shaping the form and intensity of these interactions. At the same time, the humanoid form of the robot Pepper enables us to analyse the corporeality of human–robot interactions, with special attention to the ageing bodies of human actors.

## 2. Background

### 2.1. Corporeality, Materiality, and the Relationality of Technologies and (Ageing) Actors

Until the late 1960s, sociological research on materiality, the human body, and its role in social relationships had been rather scarce [8]. The re-orientation to the body brought to light the process of ageing, both in its material and embodied aspects, through which the human body simultaneously shapes and is shaped by society and culture [9] (pp. 16–19). In this article, we build on Gilleard and Higgs’ argument [9] by focusing on the corporeality of robotic and human bodies as social actants, with embodiment understood from the

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position of performing actions on or by the body in realising the social [10] (pp. 5–6); [11] (pp. 100–101). The research orientation toward the corporeality of ageing bodies allows us to better understand the relational dimension of ageing and its production in the interaction with technologies. As [12] points out, not only ageing bodies but also technologies are co-producers of the materiality of ageing, and they cannot be fully understood beyond their relationality [12] (p. 71). Bearing this in mind, our research follows up the three notions introduced by [13] (p. 1): (a) how age, as a social phenomenon, is being enacted with and through technologies; (b) how human and non-human agents are equally involved in this process; and (c) how the actions of these agents emerge from the agency distributed among them and structured through the power relations between them.

## 2.2. *The “Failing” Body of the Technological “Other”*

The rapidly evolving field of robotics has introduced a great number of technologies over the past decade. Based on a review of the existing literature, [14] propose a categorization of robots for older users, with respect to their function, into three groups: (a) robots as an aid in treatment; (b) robots as social assistants or home companions; and (c) robots as custodial caregivers. These functions (or software solutions) can be “embodied” in various physical forms through different types of hardware. These can basically be divided into five subgroups: machine, humanoid, animal, “wearables”, and AAL (ambient assisted living, typically as a system of inbuilt sensors spread within the built environment of one’s home connected by wire[less] communication systems). Humanoid robots may well serve as pre-programmed “puppets” when operated by professionals, for activation and motivation to support entertainment for older adults [15] (p. 189). The software that controls all the functions of the robot, from bodily motion to verbal expressions, is a product bound with and by its digital design, its architects, and their relationships and material environments. Various authors [16] seek to capture the complexity of these relationships through the concept of “digital materiality”, which includes computation and software. The algorithms designed to make the technology accessible and interactive are, therefore, a part of a vast social and cultural space of technological development, whose materiality is, to some extent, projected onto robots.

The robot, Pepper, is an example of a humanoid robot [17,18]. The robot has 17 joints to mimic human gestures and three wheels for omnidirectional movement (20 degrees of freedom in total). Pepper has four microphones on its head, two cameras, a 3D sensor in one of the “eyes”, and other inner and outer sensors. A tablet on Pepper’s chest can be used to show pictures or videos. The shape and size of Pepper’s body resemble an 8-to-10-year-old child of approximately 120 cm in height. It has a white plastic cover on its body with a light grey colour on the moving parts, such as the fingers and palm of the hand. Despite quite well-developed systems of motor machinery, its motoric capabilities are not suitable for precise tasks (the robotic hand is able to grasp only smaller soft objects). The “eyes” can be lit with different colours, signalling the inner processes, such as the colour blue or green when the robot is ready to listen to the command or an answer provided by the user. The red “eye” colour was conceived as threatening by the older users in our project (cf. our previous report on the technical features and project results in [19]). In terms of “hearing and speaking”, [20] conclude that several features need to be improved, such as the intonation of the words vocalized by Pepper, resulting in inappropriate responses by the older adult; differences in question-response time (i.e., the timing between Pepper’s questions and the responses of the older adult not timely and not matching, leading to confusion among the older users); and the inability to communicate with multiple older adults. In this paper, we offer some perspectives on how these “bodily features” resonate in the interactions between the robot and agentic active agers in community settings.

The preferred areas of Pepper’s application include social interaction and entertainment. There are two main components in the software for the Pepper robot. The first is a conversational agent, or chatbot, which converses with the user. The second is a set of entertainment applications, such as quizzes or games. Both of these components are

activated upon user request [19]. The logic of the interaction follows the structure provided by pre-designed dialogue trees, which are always commenced by the robot. This technical feature guarantees a controlled flow of the topics in the conversational mode, as well as access to the menus in the entertainment mode. While all these features are understandable from a technical point of view, they also have symbolic value for the evaluation of the level of the partnership or control within the conversational exchanges. In other words, if the human actor is not behaving (speaking) in a way the robot is programmed to understand, or the human's answers are not recorded in the available answer bank, the conversational exchange will not occur or evolve as one would expect in human-to-human exchanges. The "failure", especially if too frequent, is recognized by the users as a technological shortcoming, resulting in various consequences for the dis/continuation of the interaction. As the "failure" of the robot (presented by the technological optimist as a supposedly compensatory machine) surprises the users, it reflects the high expectations brought into the relational (conversational) exchange, based mainly on popular culture as the main source of information on advanced technologies. However, there are few debates on the limitations of advanced technologies to deliver compensatory tasks, or even to perform the planned tasks in general (cf. [12,21]). From this point of view, it is not the "ageing bodies" who fail and underperform, but rather the technologies that do not deliver. This failure may be further interpreted in two ways, as a mirror (a meeting of two not-so-able-bodied bodies), or as a stepping stone. In the latter, the human body is viewed as better performing than the robot's, despite the ageing processes, because it is still driven by the person's will, as opposed to the robot's will, whose software and computation power are too weak to perform as expected [20].<sup>1</sup>

### 3. Materials and Methods

The use of the humanoid robot Pepper (SoftBank Robotics) for older adults has been enabled through the project The use of the humanoid robot in promoting active ageing in older men and women (HUMR), conducted between 2019 and 2021 in the Czech Republic. This applied science project was set up as a collaboration between the Czech Institute of Informatics, Robotics and Cybernetics (CIIRC) of the Czech Technical University in Prague, the civic organisation, Gerontological Institute of Life 90 (Život 90), in Prague, and the sociology department of the Faculty of Social Studies at Masaryk University in Brno. The primary goal of the project was to establish interdisciplinary cooperation in making the robot Pepper "age-friendly" in three ways: (a) through improving the robot's ability to use the Czech language better and in age-relevant topical contexts; (b) through the technical quality of its speech and overall presence that would be more comprehensible to older adults; and, (c) through the production of new software and content that would be of interest to this specific generational and social group of active agers. As a secondary goal, we have aimed to reopen the debates on the active ageing concept, its meanings, contents, and evaluations (cf. [22]), by reconsidering the still prevalent "three box life model" [23], and by underlining the positive effects of re-introducing the concept of "play" (e.g., in the form of edutainment, but also more generally in the form of humour, creativity, and playfulness) into the later life programme.

The robot was introduced to older adult groups associated with the educational and community activities of the Centre for Active Ageing (CAA), a part of the organisation Life 90 (Život 90, z.ú., Prague), through three types of interventions. Firstly, a small group of seniors (N = 12 participants, one man and 11 women) met regularly (twice per month) with the project team in the context of the series, "Lectures on Robotics for Seniors I", for frontal instruction on the history of robotics, robots in popular culture, and the principles of programming content for a chatbot. As part of these activities, regular unstructured group "meetings" with the humanoid robot Pepper were also implemented. Secondly, the robot was placed in the CAA community space and offered to engage in unstructured interaction. Finally, during the COVID-19 pandemic, the "Lectures on Robotics for Seniors II" took place in the online environment of the Zoom application, with a smaller group of

nine participants (one man, eight women) meeting regularly (weekly) to discuss the topic of creating “age-friendly” dialogue trees and content scenarios for the robot. Therefore, the robot Pepper and the human–robot interactions, although at the centre of the research attention, were also embedded in a series of interactions with other types of technologies (such as computer programmes for creating dialogue trees and online Zoom meetings with lectures and discussions, in which the participants could discuss their view on the robot’s visual image and behaviour). These activities, as well as the human–robot interactions, aimed at bridging the digital divide by closing the educational gap among older cohorts with regard to the latest technologies, machine learning, and artificial intelligence, and embedding interactions with the robot in the wider realm of working with technology.

In this article, we engage in the debate on (older) human–robot interaction (OHRI), looking more closely at its materiality, corporeality, and relationality. These three concepts had not previously been incorporated into the project objectives; instead, they were brought to our attention through the very processes of OHRI and follow-up human-to-human interactions (both online and offline), inspiring both internal and external interpretations. Through the methods of participant observation, unstructured interviews, analyses of video and audio recordings from the interventions with Pepper, and subsequent reflections on the “user” experience with the robot, we have unpacked the complexity of materiality and corporeality in older human–robot interactions. The video and audio recordings of interventions with Pepper were part of the “Lectures on Robotics for Seniors I” in 2019—video-capture interactions during the initial introduction of Pepper to the participants in October 2019—as well as two videos from a public presentation of the robot in the Life 90 centre as a part of “Academy for Seniors” programme in September 2020 in which the visitors could interact with the robot in the main hall of the centre, an open, public space. We estimate that there were about 200 encounters with the robot during this period, with an unknown share of repeated contacts and unknown sociodemographic characteristics of the older participants due to the nature of the space and intervention design. Additionally, during the COVID-19 pandemic in 2020 and 2021, the regular meetings with participants took place in the form of “Lectures on Robotics for Seniors II”. Meetings were held online (participants were writing dialogue trees for Pepper, sharing and discussing the media and popular culture contents on the social robots, and attending lectures on “the art of a dialogue” delivered by an external lecturer) and, during the last official meeting in April 2021, the interaction between the robot and participants was conducted over Zoom. Participants could observe how the robot implemented their dialogue trees in real-life communication. The project participants were recruited mainly from existing Life 90 clients, who are predominantly women. Therefore, although the activities were publicly advertised, the majority of the core group of participants were women, as well.

As stated above, this project was primarily designed as an intervention, but it was altered considerably due to the COVID-19 restrictions in effect for most of the duration of the project, affecting the methodologies and data available to us. This article therefore utilises a particular OHRI exchange as a case study (video, screenshots, and transcription are provided below), enriched by the knowledge gained throughout the project duration.

## 4. Results

### 4.1. Relationality, Humour, and the Repositioning of Power

Even though robots like Pepper should be able to fully participate in verbal interaction, there are still serious limitations in the computational and processing capacity of the robot, as well as its adaptability to older adults’ needs (see the support of development through the heterogeneity of experiences and user-centred design in [24]). During our interventions, there were several problematic points in the older human–robot interactions. The “body” and materiality of the robot are limited with regard to the recognition of weaker voices and changes in interaction which haven’t been pre-programmed into its system. Such interactions, then, had the tendency to result a mix of slight frustration and humorous scenarios, such as the one in this example:<sup>2</sup>

Pepper: Sorry, I lost track; what did you want to talk about?

Woman1: I wanted to ask you if you also can sing. Can you sing?

Pepper: I understand. I want to ask you what was the weirdest thing you ever had to eat...

Woman1: Hey, listen, but I was asking you if you can sing...

Pepper: It doesn't matter. (people burst out laughing; Pepper inaudible)

Woman1: Can you sing? Will you sing for us? (*the lady raises her voice*)

Pepper: (*silent*)

Woman1: He is stuck, on the food...

Woman2: Are you thinking right now?

Pepper: That is good; too much sugar can be dangerous for your health  
(*people burst out laughing*)

Pepper: What do you usually have for breakfast?

The issue that manifested in the above situation concerned the power relations in the dialogue. The robot is programmed to be the one who always starts the communication with a question and therefore sets the interaction to suit its possibilities and limitations. The user must adjust to the communication style and use only selected questions and answers to lead a meaningful conversation. If the user attempts to take over and dominate the dialogue, the robot will try to incorporate the interaction back into its pre-prepared options, thus either changing the topic or the style of the conversation. The interaction then becomes a social field of power relations pre-structured by technology [13]. However, older users being unaware of the "rules" concerning who is in charge of the conversation, or deliberately attempting to work around these rules, led to situations perceived and labelled as humorous and entertaining, repositioning Pepper as a joker (or the Joker).

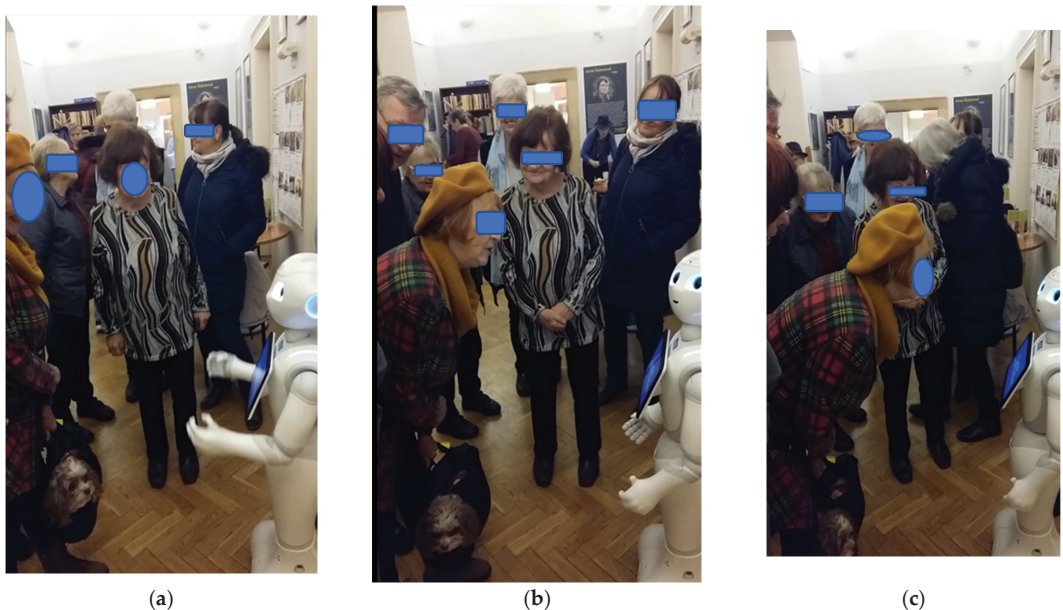
#### 4.2. Relational Proximity and Distance

For the community part of the experimental intervention through meetings of the older active agers with the Pepper robot, the NGO project partners decided to display the robot in a busy hall on the first floor of the community centre building. The hall is used as a meeting point for the visitors to the Centre for Active Ageing. This space is a place of constant movement, with people coming and going, but also has places for people to sit, wait, read, and drink their coffee, alone or in interaction with others. It is a place for gazing and observation. Some of the seating allows users to see people coming out of the elevators, other allows people to watch the preparation of hot beverages in the small, open, self-service kitchen, while some spots offer a view of the open atrium and terraces used by the employees and visitors as a designated smoking area. It is also a drop-off place, a transitional spot to rearrange one's possessions, coats, and bags when coming into the classrooms connected to the hall or when preparing to leave the building. The purpose of this place is to foster community. People enter into various types of encounters and relations here. As a technological object, Pepper was brought into this community and has become part of it by its sheer existence within the space previously not taken up by any other physical object belonging to it, other than for its original purpose (as would be a chair, a coat rack, a coffee table, a library, etc.). As expected, the novelty and unexpectedness would become important factors in the "presence" of the object, in being seen, but also in being seen as "inviting" for proximity, openness, and engendering curiosity. In this sense, Pepper's presence aroused the curiosity of the visitors—the older participants would come near the robot, curious and excited to see what the object is and how it works. Other older participants knew that the robot is at the centre and came just to see it in "real life", as one woman commented: "Now that I've read about it, I had to come and see what it does, and I am all over it (smiling and making excited gestures towards the robot)".



During the interactional exchanges in the community centre, the materiality of the robot Pepper played a twofold role: as a “strange” material object that modified the environment of the centre, needed to be navigated around, taken into account when crossing the hall, etc., and as an entertainment tool that people can talk with, talk to, or talk about. These two roles often blended into each other and diversely reflected the materiality of ageing. The typical interaction with Pepper and the older participants in the centre consisted of a small group standing in a semi-circle in front of the robot and leaving a space of around one metre between the robot and the group. The space gap between the human and robot bodies reflected both respectable caution “not to destroy an expensive machine” and the hesitance to physically interact with new and unfamiliar technology. Those who were also participants in the “Lectures on Robotics for Seniors I” built a greater sense of familiarity over time. More frequent experience with the robot led to a narrowing of the gap and greater acceptance of the technology over the long term. These participants would take on the role of the robot’s ambassadors, always standing close by, but not keeping the robot for themselves, rather inviting other people to come and try to talk to Pepper. This role was not provisioned within the project design but was rather spontaneously embraced by those who would see the most benefit from the experiment, and it very efficiently supported the peer-to-peer segment of the teaching/learning component of the edutainment programme and technological divide closure.

Figure 1a–c: The dynamic of the human bodies in relation to the object-body of the robot Pepper.



**Figure 1.** Talking to the robot and about the robot (in the background) (a). Paying attention to the human actor (b). Getting closer but maintaining distance (c). Photographer: Lucie Vidovičová; photographs taken in public space with the actors’ permission.

Humanoid robots in a caring environment are often designed to be smaller and have only a few human traits. Several studies have shown that people above 65 years view the taller height of the robot and more anthropomorphic traits as intimidating and less acceptable [25,26]. However, due to Pepper’s short height (120 cm), there were only three types of positions that the older participants could adopt. They either had to (1) bow

down to the robot to maintain “eye contact”, (2) move away from the robot and increase the distance, or (3) sit down in front of the robot. The participants in the group often tried to make “eye contact” with Pepper to establish more human-like communication. At the same time, Pepper is able to make “eye contact” only with one person at a time and is unequipped to communicate with more people at once. That sometimes caused a situation in which several people addressed Pepper at the same time trying to gain the robot’s attention so it would turn its head towards them but, as a result, Pepper would lose the ability to follow up with the pre-programmed conversational tree. This scenario would make the materiality of the distance between the robot and surrounding human bystanders irrelevant to relationship establishment.

#### 4.3. Bodies and Genders in Interaction

The limitations of the robot were sometimes also interwoven with the limitations of the ageing bodies of participants in the form of poor hearing and not understanding the robot’s voice. For this reason, Pepper was programmed to talk rather loudly, which resulted in inconvenience for other visitors coming in for other reasons, such as language lessons or dancing. The other limitation of the robotic body was revealed when Pepper couldn’t climb stairs to the centre and had to be carried to places that even less-abled human bodies would be able to navigate but were not barrier-free for its wheels. In this manner, the materiality of the robot reflected the corporeality of ageing, as understood by [10], and generated responses in older users culturally reflective of interacting with and caring for a child or an older person.

The process of designing robots has been explored from a gender studies approach in the context of human-gender stereotypes [27], the importance of a robot’s “gender” in human–robot interactions [28,29], and gendered differences in attitudes toward robots [30]. The robot Pepper is advertised as a gender-neutral robot and has a childish voice, intended to be perceived as non-threatening to all genders. At the centre, only a few men participated in interactions with the robot. When Pepper was having trouble completing a task, and a professional was trying to adjust the robot, older participants (mostly women) began urging the worker to “leave the poor thing alone”, using a typical soft but firm protective/caring type of voice. The robot’s limitations in having trouble hearing, interacting, and “walking” up the stairs, along with its relatively small height and childish voice, triggered a nurturing instinct in some women users and reversed the role of care from robot to human.

The question of gender differences also arises in bodily human–robot interaction in relation to touch, which, in a caretaking environment, is sometimes addressed as a crucial part of the client relationship [15]. The physical contact in older human–robot interactions is greatly influenced by the materiality of the technologies. For example, the robotic seal, Paro, is a product created for the purpose of therapeutic effects from close physical interaction such as cuddling [31,32]. In the humanoid Pepper, there are only a few built-in contacts and tactile sensors, at the centre of the robot’s head and hands. These sensors also represent the reason Pepper was never dressed in clothes or accessories during the interventions, even though, during the reflections with older participants, there emerged a positive disposition towards the robot having clothes that would represent its character. However, even though the sensors were left uncovered, not many older users took the opportunity to touch Pepper. Only a few of the more experienced women users tried to pat Pepper on the head in the manner of caressing a child. They would do it with visible caution and hesitation, which would, however, dissolve after gaining some experience, but it would not become “a thing” except when taking “selfie” photographs to be shared with family and friends. In general, people would avoid touching Pepper’s hands, which moved more than the rest of the upper part of the body but not in any particularly unexpected or apparently threatening ways. Czech culture in general is not very tactile ([33], but cf. [34]); even greetings between friends usually take place at a distance, without handshakes or hugs, especially among older generations. Therefore, avoiding close touching of the robot may also be interpreted as a cultural standard, and/or a generational characteristic, as noted by [35].

The only male participant in the group meetings, when asked about what interests him in the robot, and what he would like to do “next”, repeatedly shared that he would like to “look inside of it”, remove the covers and see the hardware machinery. Notably, he was also the most hearing-impaired participant, unable to engage in most of the conversational content, but intensively engaging in gazing and enjoying “just the presence of Pepper”, demonstrating that his more “analytical” or technical interests did not rule out the more caring and social aspects this man was enjoying (as well as investing in) as a part of the experience.

The cultural embeddedness of human–robot interactions is also infamously known to reflect some of the gender, racial, and ageist biases occurring in human-to-human communication. According to [36], the technology design itself is formed by age-based assumptions. Apart from biases toward old age and ageing in AI design systems and machine learning algorithms [14,37], the reinforcement of digital ageism appears in the research. In the study of academic publications [38] points out that many of the studies in the field of human–robot interactions represent the relationship between technologies and older adults as inherently uneven, and are predisposed to view technologies as “enablers” and “fixers” of older age problems and inactivity. The older adults are, consequently, considered frail, burdensome, and responsible for “fixing” themselves by interacting with the technology. According to [38], this essentialist approach has been overcome by only a few authors trying to “acknowledge the heterogeneity of older adults and study them in a naturalistic setting” [38] (p. 462).

To reflect upon this criticism during the HUMR project, we followed the approach of actively involving the clients of the centre, not only in reflection but also in the creation of the content of the human–robot interactions. The clients of the centre actively participated in creating inputs for meaningful and age-friendly dialogues for Pepper and had the opportunity to try out dialogue-writing software. However, due to the difficulty with programming useful and usable dialogue trees, we decided, after hearing the reflections of older participants, to focus on creating short stand-up routines that would resonate better with the participants. If the interaction is conducted more like a stand-up, the power relations change to the benefit of the user—the robot has the position of a mere “king’s fool”, providing services and entertainment. The stand-up comedy approach is also more accessible for creating humorous situations. Humour is an integral part of social interaction, and, in some caring contexts, it serves as a coping strategy with mental and physical health effects [39]. According to [40], technologies such as robots and hand-held equipment could represent a tool to bring humour and joy into the everyday lives and events of older adults through human–robot interaction. An approach to interaction, in which the robot tells jokes, funny stories, and news, instead of small talk about hobbies, weather, and one’s health, was also suggested by older participants during our sessions, underscoring the point made by Wanka and Gallistl, that future research in socio-gerontechnology needs to focus more on the involvement of older adults in designing and negotiating meaningful technologies and their usage [41]. Active involvement seems to be the only way to avoid ageist and generationally based misconceptions about the type and content of the OHRI, especially in edutainment components.

## 5. Discussion and Conclusions

There were several layers of materiality, corporality, and relationality of the OHRI, which we were able to observe over the course of our project. First, the robot as a material, physical, hard, bright-white plastic object was part of the built environment, the physical space, taking up relatively small but still notable square decimetres. Secondly, there was materiality in the ways people would navigate their bodies around the robot as a physical object, both as a part of their journey through the space, towards the object, away from it, or around it during their more or less mindful trips to different destinations. Thirdly, there were distinct patterns of how the humans would relate to the robot and embody the relationship to/with it/him<sup>3</sup>. The relations and conversational exchanges (or attempts at

such exchanges) would be embodied by the bodily posture, distance kept from the robot as a physical object, and facial expressions. At the same time, the humanoid form of the Pepper robot, per se, has “a body”, resembling a human in both its shape and its limitations. The relationality would materialise within the instances when the robot becomes both the subject and object of the newly established relations. Not only would participants (attempt to) relate to the robot, but people would enter into (new) conversational exchanges because of the robot, including both other members of the Life 90 community, as well as (but less frequently) with (younger) members of the project team supervising the functionality of the robot.<sup>4</sup> With these observations, we follow up on the few studies that address the issue of materiality and corporeality of technologies in relation to older human bodies utilizing a more holistic approach [13]. There are several studies evaluating the Pepper robot and its social acceptability [43,44], and its ability to support care delivery [45,46] in care (nursing) home settings [47–49] with the patients and other users needing care, including dementia patients [20,50]. These studies generally arrive at similar conclusions as [51], namely, that the robot is able to meet various needs, such as making a person’s environment safe by alerting contact persons, reminding the user of health-related tasks, enabling “doubt-removal”, maintaining social relationships, and following the user. As such, a majority of these studies are concerned with safety (cf. [20,52]) and functionality; they neither test the agentic involvement of users nor look for the subtle hints on the material and corporeal aspects of the relationality between agentic active agers and entertaining technologies in humanoid, embodied forms. We offer our observations as a starting point for similar future endeavours.

At the same time, the project has shown that in OHRI interactions, the physical body of the robot (= hardware + its software drivers) is often only an intermediary between the user-agent and more or less hidden agents, who are themselves often dislocated in time and space from each other. Based on the data gathered for the HUMR project, we are able to show how these three elements and processes play out within the specific material composition of the relations between the corporealities of the users’ ageing bodies and the limited/disabled/malfunctioning body of the robot. In many aspects, we focused on the conventional (older) human–robot interaction concept [53] but from a different perspective on “human–human production interaction”, in which the human production part of the equation may be susceptible to a number of structural and individual factors, including ageism in design [54]. Therefore, the older users would often struggle, not with the technology in its materiality as such, but rather with the embedded expectations about the able-bodied, cognitively intact, and somewhat dull user. The fact that these elements are typically hidden when we observe and talk about OHRI as a mere dyad is intriguing. When researching interactions with Pepper, many of the studies present to the older participants only a ready-made object for interaction [47]. With this approach, the functions and interactions of the robot are hidden behind a “black box” effect. In our research, we have tried to bridge this gap by letting participants not only interact with the robot but also actively “administrate” his learning process and dialogue creation. In this way, we are going beyond “participatory design” [55] by evolving the interaction in “creative co-production”. Our attempt to make Pepper a more age-friendly product allowed us to observe the generational communication misunderstandings in the relational square of older adults, active ageing centre employees, social gerontologists, and programmers, including diminished expectations about the physical and learning limits of older users, accompanied by a lower interest in the outcomes, failing to see the older user as a valid (future) customer with solicited and appreciated feedback.

### *Limitations*

As with any study, our approach had limitations to be dealt with in future endeavours. The original research plan involved weekly on-site interactions allowing for pre- and post-interaction empirical measurements that would capture the possible effects with quantitative methodologies. However, the uncertainty of several lockdowns and other

preventive measures against the COVID-19 pandemic in Czechia severely interrupted the course of the project and considerably limited the pool of potential participants, as well as the possibilities to test various new software content. As mentioned earlier, the project was unable to increase interactions with the robot among older male users. All the aspects of the intervention activities were dominated by women and technology users. Additional actors and more variant topics of OHRI may produce wider observations on materiality, corporality, and relationality. Different results might also be achieved through the use of non-human robots. On one occasion, we tried using very similar content delivered by hardware covered in a brown paper box the size of a box of paper tissues. In this case, the actor's body posture would still conform to the technology, but it appeared more like an embrace rather than contact at a distance. Further attention could be devoted to humanoid (or animal-like) robots, as opposed to more functional shapes of hardware. Informing other disciplines in this interdisciplinary endeavour, we, of course, confirm that the physical world has an undeniable power over the ageing (body) experience, but we need more studies to use socio-gerontological lenses to study things and objects "with wires" as a part of the physical environment and, possibly in the foreseeable future, as a part of age-friendly homes in the capacity of an entertainment/infotainment tool rather than substitutional carer or companion. We need to strive for a balance between a critical approach pointing at the embeddedness of technological ageism in the design, marketing, production, and distribution of advanced technologies, on the one side, and the healthy challenges posed by the higher expectations placed on agentic older users on the other. We have also learned about the underlying power disbalance resulting from the generational differences between us, as researchers bringing the newest technologies, just as the mythological Prometheus brought fire from the gods, and the older centre users, waiting to be entertained and being subjected to the functionality of the robot, the availability of staff to support the activity, etc. (cf. the above mentioned "puppet" analogy). If possible, future studies and interventions should further ensure the peer-to-peer support of the infotainment functions and make better use of the older technology champions.

These setbacks, however, did not influence our primary finding, namely, that using the humanoid robot Pepper can assist older adults in achieving a sense of connection to the larger world, even when mobility has decreased. Our data also suggest that humour can not only enhance human–robot interactions and is a viable way to access meaningful communication [43,53] but can also improve the older adult's level of optimism and hope, thereby embodying the potential to decrease stress, anxiety, and loneliness. Age-friendly robotic design can further help to develop gero-technology and the use of technologies that both promote independence and autonomy in old age and strengthen the support networks of older people [56]. As opposed to care technologies designed to work in one-to-one settings, with goals such as remote surveillance and fighting loneliness, the community use of social robots seems to be better fitted to fulfil this mission.

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## Notes

- <sup>1</sup> However, these expectations are also a reflection of expectations concerning able-bodiedness and high performance, typically based on popular culture notions of advanced robots who are equal or superior to humans, at least in body strength and endurance.
- <sup>2</sup> For the video of the interactional exchange, please visit: <https://youtu.be/QvfpU4tPogU> (accessed on 25 November 2022) (original in Czech, automatic translation available)
- <sup>3</sup> In the Czech language, robot, a Czech word by origin [42], is a masculine (he, him). The label Pepper is also understood by the Czechs as a male name. The HUMR project participants have chosen to call the robot Pepa (nickname for Joseph). As a result, we also opt to use the pronoun "he/him" instead of the inanimate "it". There are possible variations to distinguish humanoid from non-humanoid robots in the Czech language (roboti vs. roboty), but these grammatical distinctions are not widely used by lay social actors.
- <sup>4</sup> The functionalities of the robot are supported by an online application running on a separate laptop computer. During the interventions, as the robot performed, the technical support would be hidden in one of the classrooms on the same floor of the four-story building. Occasionally, other project team members would be present in the cafeteria or close to the robot to observe the interactions, and this would present itself as an opportunity for the Life 90 visitors to pose questions or to share their ideas about the robot.

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## Article

# Transformative Processes of Gerontological Responses in Different Models of Public Providentialism in the COVID-19 Context: A Bibliometric Review

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**Abstract:** The COVID-19 pandemic has affected the entire world population at multiple levels. Within the most vulnerable population, the elderly have seen their usual fragilities worsened in an epidemiological context. Thus, it was necessary to reinforce the gerontological response to aging at home, or in place, framed in situations of comorbidities, health problems, economic need and isolation, among other situations of premeditated situations of aging fragility. **Objective:** Seeking to explain a model of gerontological response to aging-in-place in future pandemic situations. For that purpose, we have explored, through a scientific literature review, the relationship between public participation and the gerontological response to aging-in-place during COVID-19, considering the four main European welfare models. During this analysis we also intended to identify the reconfigurations from those responses, considering their place-based/neutral order. **Methodology:** To proceed in this analysis, we used a Systematic Literature Review (SLR) to identify a series of articles that add value to this problem. Next, in order to identify current research trends, we undertook a Bibliometric Analysis (BA), using the metadata from the same set of articles collected from Scopus and Web of Science. **Results:** The literature on the subject is interdisciplinary, dispersed throughout areas such as health; social sciences; politics; and computational, molecular, and even environmental fields of study. Through the use of keywords, the literature found on the relationship between the type of gerontological responses to aging-in-place and providence systems is still insufficient. There are, however, other research possibilities, such as exploring indicators of gerontological responses, of public expenditure or of the type of support from interlocutor stakeholders through a comparative study between countries, which allowed us to robustly answer the central question: Is there any relationship between the different public welfare systems and the public participation model, which included community participation, in the gerontological response to aging-in-place during the COVID-19 pandemic?

**Keywords:** COVID-19; older people; public participation; European welfare states; gerontological responses; pandemic management

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## 1. Introduction

With the crisis of the pandemic, associated with SARS-CoV-2, the aged population was exposed to various risks. On one hand, they face the risk of infection by the virus, the lethality levels of which are high; on the other hand, they face the deterioration through clinical conditions associated with comorbidities and degenerative diseases. Furthermore, the social circumstances of many older people (especially of those residing alone at home) were also aggravated due to the risk of isolation/abandonment, poverty and inaccessibility to essential goods and services [1–3].

In this study we aim to build some preliminary assumptions related to gerontological responses to older people residing at home during the COVID-19 pandemic in different welfare models. We may consider these responses as strategies implemented in immediate

or urgent contexts, not only in terms of health emergencies but also as social crisis. The worsening of these conditions required a reorganization of social/geriatric support in order to safeguard the well-being of this population in institutional and non-institutional situations (aging-in-place) [4–6]. Especially in this last context, several theoretical contributions claim that this transformative process occurred in two directions: in terms of forms of governance and in terms of forms of participation [7,8].

When we talk about forms of governance, we refer to the decision process in which a policy may be implemented either nationally or territorially. They can be categorized as place-neutral, place-based or multilevel governance. The first model follows a generalist and centralized logic, in terms of territorial management, where its specific realities are not taken into account [9–11]; the second model corresponds to a logic that is aware of the characteristics of each territory and based on a more decentralized system [12]; the last model, however, is a mixed paradox where place-based and place-neutral approaches combine so the more decentralized approaches fits into a broader set of guidelines, as in the case of policies that promote national and international territorial cohesion [13].

In terms of forms of participation, we based our analysis on Arnstein's Ladder of Participation [14]. On the one hand, there are forms of participation motivated by institutional forces (which motivate the public to mobilize), generated in a top-down sense. On the other hand, there are also forms of participation generated by the community, where the population itself creates their own initiatives, through a bottom-up logic. However, there are also, in the "Center of the Ladder", forms of participation that are created in a collaborative consortium between institutions and the community [14,15].

The literature shows evidence that the strategy adopted should undergo a multilevel governance system [13,16]. Thus, responses to these forms of vulnerability should desirably be a product of coordination between central, regional and local governments [17]. However, in contradiction to what would be expected, European states responded mostly through centralized and place-neutral approaches. This fact was possibly due to the quick responses applied in order to mitigate the spread of the virus (first vaccinating the older population and creating/reinforcing subsidies that would provide support to those who were in a situation of socio-economic instability), while maintaining the normal functioning of the state [18].

However, local governments have taken a greater responsibility [19] in pandemic management and in mitigating social vulnerabilities. The mobilization of several institutional actors (Municipalities, Civil Protection, Social Security, Local Health Units, among others) allowed a more effective articulation of responses, somewhat closer to a place-based governance model. In general, the configuration of responses was predominantly place-neutral [20]. The main responses to older adults involved raising or purchasing essential goods to be delivered in the form of "baskets" to households in the most precarious positions, offering transport to health centers, testing/vaccination and social support through the purchase of medicines. These measures were coordinated by local entities, sometimes involving the population itself [17,21–23].

Essentially, community participation underwent a major reorganization process at the local level [24]. In the initial phase of the recognition of the pandemic situation, and due to the lack of knowledge about the transmissibility of the virus, public involvement in terms of the provision of support to older individuals was reorganized with several online systems being developed to signal situations of greater vulnerability, to increase the awareness of the population for the risks associated with older adults and to aid in the installation of digital tools that allowed the individuals aging-in-place to contact their families [17,25,26].

Public providentialism models have effects on governance and public management processes. Therefore, the territorial planning of these responses, as well as the forms of participation on their construction and implementation, also varied from state to state. According to Esping-Anderson and others [27,28] there are four welfare regimes (i.e., welfare states) that standardize the functioning of the public politics in each state. In countries

with social-democratic regimes, there is greater investment in public policies [28] focused on the management of vulnerabilities related to individuals aging-in-place; in countries with Anglo-Saxon-type regimes, there is less preponderance for such investment. On the other hand, countries with continental and Mediterranean models, despite the reasonable investment in public policies, do not reach the level of coverage that the social-democratic models achieve [27,29]. In other words, we suggest that both forms of governance and participation are conditioned by the existence of a more (or less) robust providentialism. The (in)existence of public responses, which tend to be universal, may lead to lower/greater community involvement in supporting the people in an aging-in-place situation during the pandemic context. However, there is still no theoretical-empirical consensus that shows a standardization between public providentialism, governance and participation management and even gerontological responses during the COVID-19 crisis [30].

It is, therefore, important to carry out a preliminary analysis, which allows us to collect some of this theoretical evidence, but also to define some pillars of this analysis, since it is related to a new health and social phenomenon. It is our intention to carry out an initial metadata study using scientific articles, which will lead us to the understanding of how the relationship between models of public providentialism and the forms of responses (in terms of governance and participation) have been addressed in the ageing-in-place pandemic context [30]. We also used the same metadata to define the starting point of a more in-depth study related to this issue by understanding the tendencies of the already-published investigations.

## 2. Materials and Methods

As previously mentioned, the main objective of this article was to identify and describe the trends in scientific research referring to the relationship between models of public providentialism and the use of multilevel participatory responses in vulnerable older people during the COVID-19 pandemic. This preliminary analysis requires the use of techniques that allowed us to identify the existence of bibliographic resources in some scientific databases [31].

In the case of this study, a systematization process was implemented in eight phases (See Table 1). The first consisted in choosing the databases from which the articles were collected and systematized (namely Scopus and the Web of Science). This selection was justified by the fact that both databases gather a huge set of scientific articles, from many different scientifically certified journals. In a second phase, a choice of keywords was made, which were input into the two search engines to start the systematization process. Those keywords that obtained the most relevant results were: “COVID-19”; “Pandemics”; “Vulnerabilities”; “Older People”; “Aged, 80 and over”; “Public Participation”; “Civic Engagement”; “Community Participation”; “Participatory Approach”; “Social Policy”; “Welfare State”; “Social Welfare”; “Governance” and “Public Management”; “Decision Making”. It is important to mention that several of these expressions are already predefined by the two databases.

In the third phase, we choose the period used for the present analysis. Considering that the COVID-19 pandemic is still a recent phenomenon, there are no studies that allowed us to draw any conclusions in a year prior to 2019. As such, the systematized studies are in the time frame between 2019 and 2022. Following the logic of the systematization tools, from Scopus and Web of Science, the fourth phase consisted of determining which scientific areas are more pertinent to our analysis. For this purpose, it was decided that the two most relevant were “Social Science” and “Decision Sciences”.

After proceeding with the systematization on both virtual sources, the repeated articles were removed in the fifth phase. Afterwards, in the sixth phase, a superficial reading of the collected articles was carried out. By analyzing the abstracts and conclusions of the works, those that did not fit the general objectives of the present investigation were removed. This same process was repeated before a more careful reading during phase 7 of this systematization process, ultimately obtaining the total number of articles used for this study.

**Table 1.** Systematization Process.

Organization of the Systematization Process	
Phase 1—Choice of database	Scopus and Web of Science “COVID-19”; “Pandemics”; “Vulnerabilities”; “Older People”; “Aged 80 and over”; “Public Participation”;
Phase 2—Choice of key expressions	“Civic Engagement”; “Community Engagement”; “Participatory Approach”; “Welfare State”; “Social Welfare”; “Governance”; “Public Management”; and “Decision Making
Phase 3—Publication years	Publications between 2019–2022”
Phase 4—Research area	Social Sciences and Decision Sciences
Phase 5—Repetitions removal	Removal of repeated articles between both databases
Phase 6—Preliminary reading	Abstract, introduction and conclusion analysis
Phase 7—In-depth reading	Full article Reading
Phase 8—Total systematized articles	Find product of systematized articles

To carry out the preliminary and in-depth readings (phases 6 and 7), a set of inclusion indicators were determined:

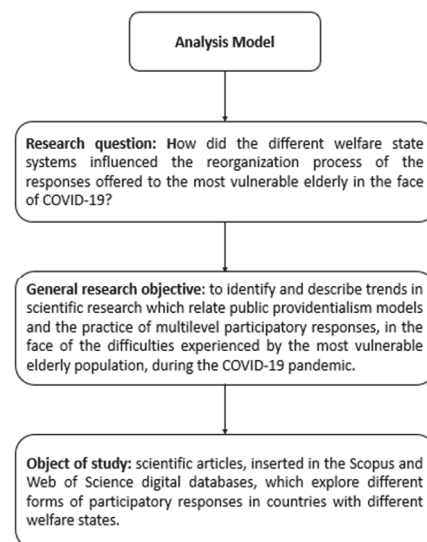
(a) Papers/articles that explore the reconfiguration of policies towards the most vulnerable older people during the COVID-19 pandemic.

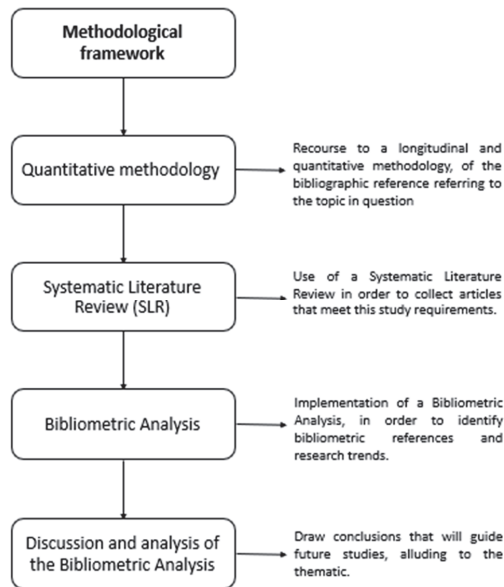
(b) Papers/articles that relate welfare states with forms of participatory/community responses towards the most vulnerable older people during the COVID-19 pandemic.

(c) Papers/articles that make the comparison between different European welfare states and the reconfiguration of participatory responses towards the most vulnerable older people.

Based on the collected and systematized articles, a bibliometric analysis was carried out to measure current research trends [2,32]. For that purpose, we used the statistical tools from the databases (Scopus and Web of Science), to measure the following bibliometric factors: (a) Evolution of the number of publications per year; (b) Publications by scientific area; (c) Countries with the highest number of publications; (d) Institutions with the highest number of publications; (g) Journals with the highest number of publications.

Next, we present a summary of the analysis model used, as well as the methodological frameworks explored in this chapter (see Figures 1 and 2).

**Figure 1.** Summary of the analysis model of the present study.



**Figure 2.** Summary of the methodological framework of the present study.

### 3. Results

#### 3.1. Systematic Review of Literature

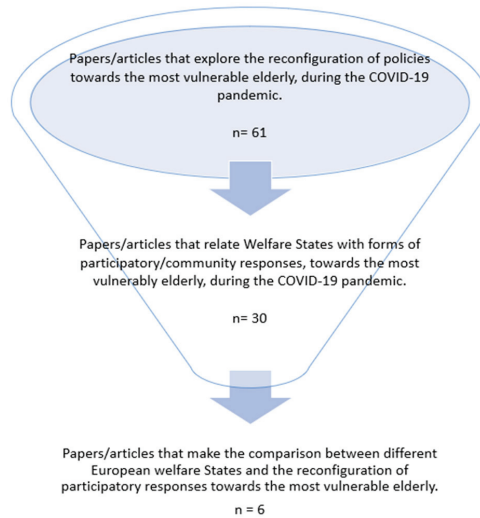
Regarding the articles included in the indicator (a), 61 articles were counted out of the 221 collected. Of these, 41 were collected from Scopus and 20 from the Web of Science. Thus, it is possible to infer that most of these scientific works are, in fact, alluding to the reconfiguration of social responses traditionally used, with people residing in aging-in-place contexts in the face of the current pandemic crisis.

We also had the opportunity to verify that within these 61 articles, research trends point to the individualized analysis of resilience processes and geriatric and gerontological responses, from different countries. The imminence of the worsening of the mental health of older adults was one of the forms of vulnerability most covered in the articles collected.

It is also worth noting that the topic most developed in these studies was community involvement in participatory governance logics, as well as the use of new Information and Communication Technologies (ICT), in terms of responses to the isolation of older adults. There is also a high incidence of studies on institutionalized older adults. It is also possible to verify a greater number of publications that engaged with the forms of governance than the forms of public participation, which supported the responses to older people in a pandemic context.

In turn, regarding indicator (b), 30 of the 221 systematized works discussed models of public providentialism, with the forms of governance and participation inherent to social responses to older people during the pandemic context. Of these, 27 were collected from Scopus and 3 from the Web of Science.

In other words, these 21 articles made it possible to identify the forms of governance and participation inherent to the responses presented in different countries. However, only 6 of the 221 articles allowed the establishment of a comparison of responses in the elderly in different models of public providentialism (see Figure 3).



**Figure 3.** Number of publications obtained, according to the indicators traced in the literature systematization process.

Thus, the six publications identified referred to at the end of the previous scheme are the following (See Table 2.):

**Table 2.** The six articles referring to indicator (c) “works that make the comparison between different European welfare states, and the way they saw the protection of the older people, with the emergence of COVID-19”.

Sources	Title of Publication	Authors	Year of Publication	DOI
Scopus	Organization of the State, model of health system and COVID-19 health outcomes in six European countries during the first months of the COVID-19 epidemic in 2020	Simoes, J., et al.	2021	10.1002/hpm.3271
	Smart technology and the meaning in life of older adults during COVID-19 public health emergency period: a cross-cultural qualitative study	von Humboldt, S., et al.	2020	10.1080/09540261.2020.1810643
	Taking stock of COVID-19 policy measures to protect Europe’s elderly living in long-term care facilities	Doetter, L., Preuss, B., and Rothgang, H.	2021	10.1177/146801812111013717
	COVID-19, Inequality and Older People: Developing Community-Centered Interventions	Philipson, C., et al.	2021	10.3390/ijerph18158064
Web of Science	The interplay between Public Health, Wellbeing, and Population Aging in Europe: An Advanced Structural Equation Modeling and Gaussian Network Approach	Cristea, M., et al.	2021	10.3390/ijerph18042015
	Unmet needs, health policies, and actions during the COVID-19 pandemic: a report from six European countries	Miralles, O., et al.	2021	10.1007/s41999-020-00415-x

Thus, the systematic literature review became relevant to collecting and aggregating a set of articles relevant to this study. However, it allowed us to understand that research trends do not go through the comparative analysis between participatory responses in older adults in different models of welfare states during the COVID-19 pandemic.

We were also able to conclude that there is a relationship between the three indicators: welfare states; gerontological responses during the COVID-19; and governance and participation management. Through these six articles, we may consider that the level of public providentialism is the stronger, and the tendency for a community engagement in creating gerontological responses during the COVID-19 has been less representative. This fact is related to the existence of public responses that are able reach the most vulnerable individuals aging-in-place, as they are more universal than the ones existing in liberal Welfare States (such the Anglo-Saxon). Therefore, it was unnecessary for the community to mobilize itself to promote the wellbeing of this vulnerable population. On the other hand, we may deduce that while engagement has increased greatly, public providentialism has been weakened, because there were fewer accessible responses to the poorer aging-in-place population.

Next, the results of the bibliometric analysis are presented, referring to the 221 articles collected, which reinforce this last conclusion and claim the need to better explore this theme. All the articles are grouped in terms of the respective database from which they were collected.

### 3.2. Bibliometric Analysis

#### 3.2.1. Evolution of the Number of Publications per Year (see Figures 4 and 5)

Regarding the number of publications conducted per year; it is important to bear in mind the fact that the COVID-19 pandemic is still a very recent phenomenon. As such, at the time of the systematization process, the publications collected were limited to the years 2019 to 2022, which does not allow a coherent analysis of the evolutionary process of the publications over the years. However, the two bibliometric analyses indicate that there was an increase in publications between 2019 and 2021 and a slight reduction between 2021 and 2022. To be more specific, in the case of the Scopus articles, there was a reduction from 93 publications (2021) to 53 publications (2022). That fact is not so evident in the case of WOS articles, since they were fewer. In this case there was a constant reduction of articles between the year 2020 and 2022.

Is not possible to make a cohesive quantitative analysis referring only to these few data. However, due to the small number of studies which focus on the relationship between models of public providentialism and the type of responses to older people in a pandemic context, there is an urgent need to carry out more studies that promote scientific knowledge on this topic.

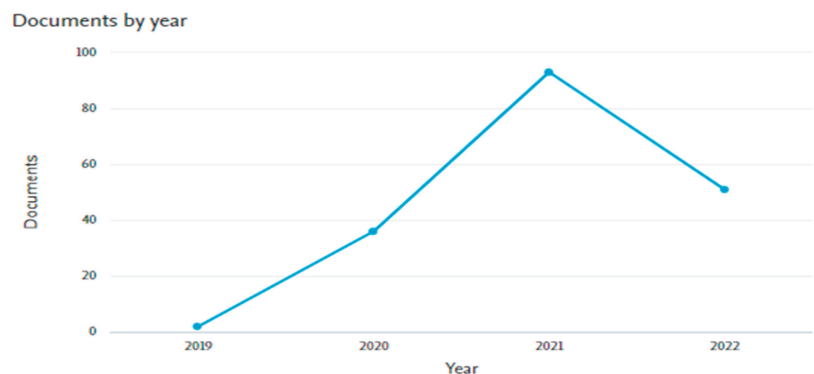


Figure 4. Evolution of the number of publications per year—Scopus.



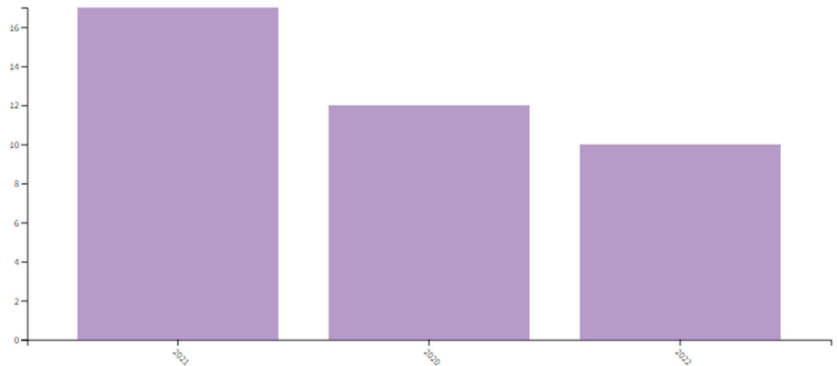


Figure 5. Evolution of the number of publications per year—Web of Science.

### 3.2.2. Publications by Scientific Area (see Figures 6 and 7)

Regarding scientific areas, referring to publications collected and systematized through Scopus, it was ascertained that 34.6% correspond to Medicine; 21.7% to Social Sciences and 10.5% to other non-specific areas. These results emphasize the need to resort to interdisciplinary studies in order to understand the reconfiguration of participatory responses to the elderly in the COVID-19 context. They also reflect the need to envision this phenomenon from a biomedical and social perspective, considering the types of vulnerability that most affect this older demographic.

In other hand, according to the articles collected through the Web of Science, eleven publications fall within the scientific area of Public Environmental Occupational Health, nine publications in Psychiatry, and five in Neurosciences. Once again, the interdisciplinarity can be seen in the analysis of this phenomenon. Regarding the two articles alluding to Environmental Sciences, it should be noted that they portray the relationship between forms of governance and the construction of public policies and well-being for the elderly in several European countries. In this way, such scientific works fit the objectives of this quantitative analysis.

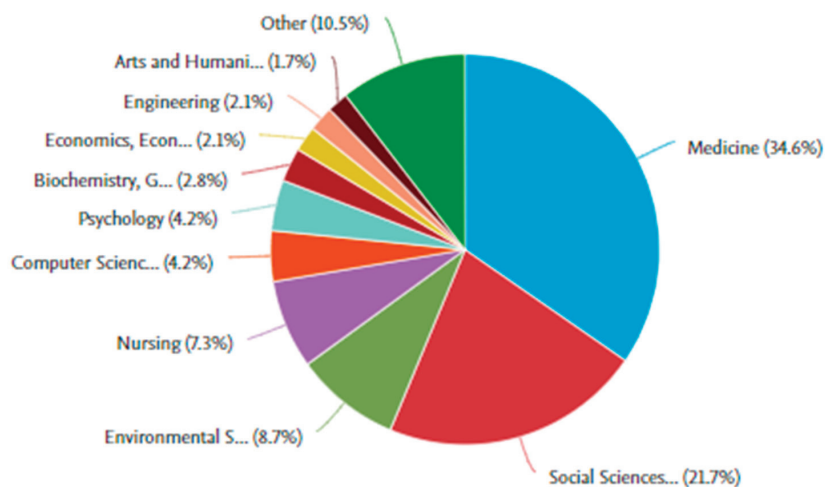


Figure 6. Publications by scientific area—Scopus.

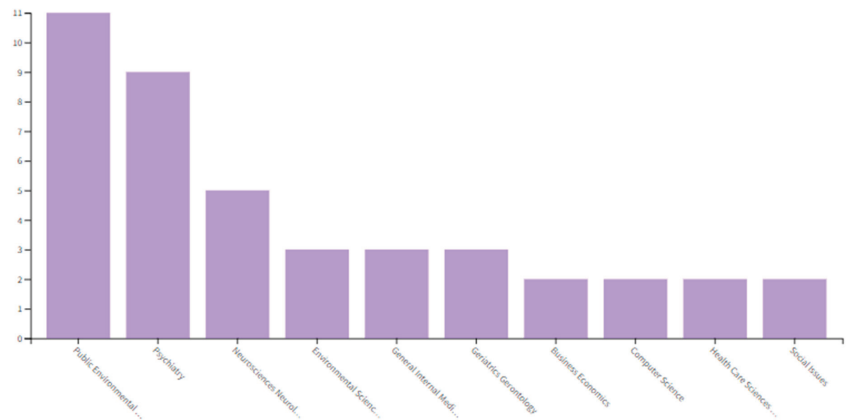


Figure 7. Publications by scientific area—Web of Science.

### 3.2.3. Countries with the Highest Number of Publications (see Figures 8 and 9)

The three countries with the highest number of publications on Scopus are the United States (34 articles), United Kingdom (26 articles) and Japan (21 articles). On the other hand, on the Web of Science, the three most representative countries are the United States (9 articles), Italy (6 articles) and Japan (6 articles).

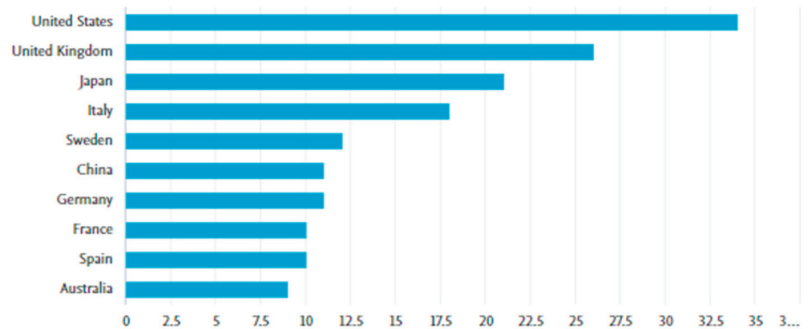


Figure 8. Countries with the highest number of publications—Scopus.

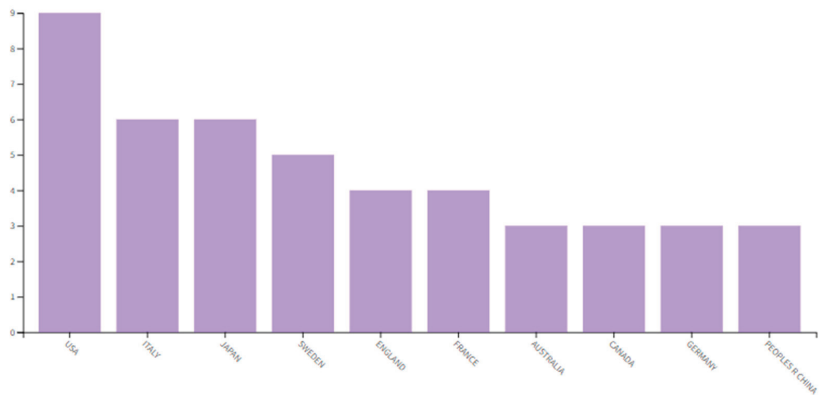


Figure 9. Countries with the highest number of publications—Web of Science.

It is thus possible to verify that the origin of the most relevant publications for this study come from the USA, the UK and Japan, although there is also significant article representation from countries such as Sweden, France, Italy and Australia. This fact leads us to have these countries as a reference regarding a possible new bibliographic collection for the development of this study.

3.2.4. Institutions with the Highest Number of Publications (see Figures 10 and 11)

Concerning the institutions with the highest number of publications, many correspond to the country analysis already made in this article. Therefore, the institutions are the following: Inserm Institut; Assistance Publique Hopitaux Paris APHP; Karolinska Institute; and the Florida A&M University.

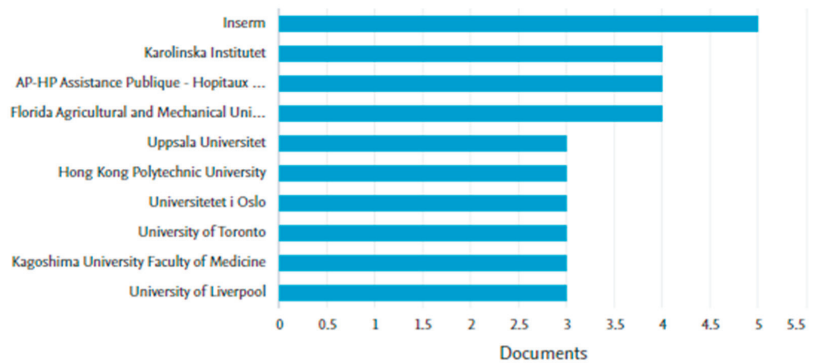


Figure 10. Institutions with the highest number of publications—Scopus.

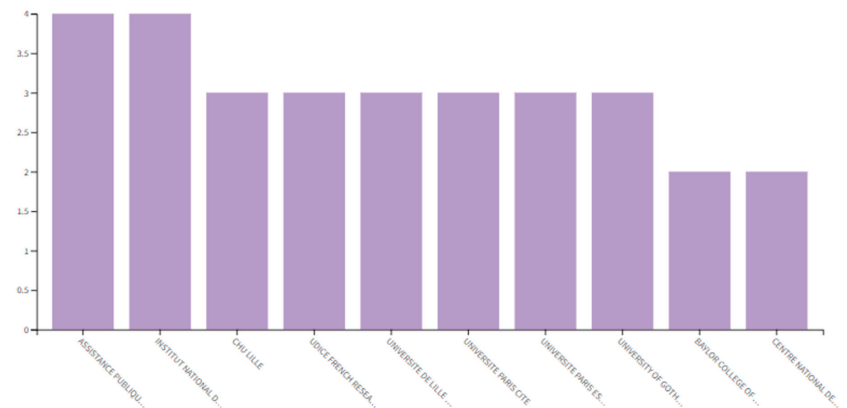


Figure 11. Institutions with the highest number of publications—Web of Science.

3.2.5. Journals with the Highest Number of Publications (see Figures 12 and 13)

Of all the journals in the present analysis, the Japan Society for the Promotion of Science (nine publications), the Academy of Finland (five publications), *l'encéphale revue de psychiatrie clinique biologique et thérapeutique* (three publications), and *Frontiers in Psychiatry* (three publications) were the those that presented the most studies within this theme. Once again, due to the low incidence of studies and the short space of time, there are not many studies that allow, as a reference, a set of journals that carry out research on the subject in question, in addition to the two aforementioned.

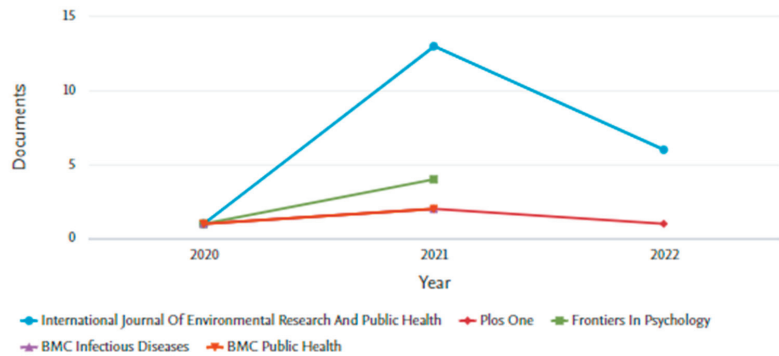


Figure 12. Journals with the highest number of publications—Scopus.

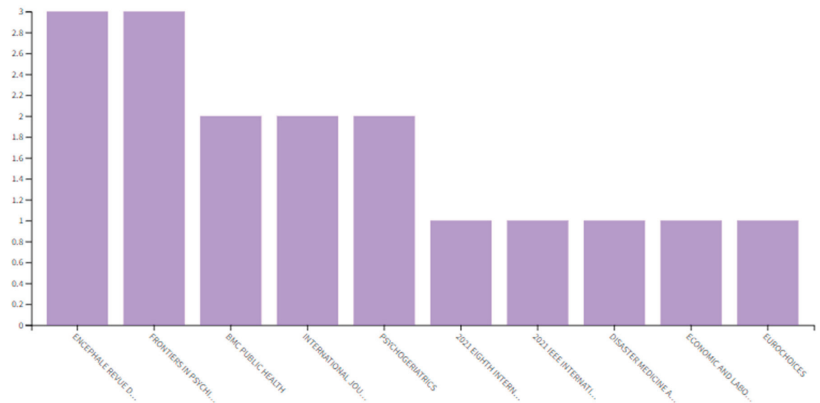


Figure 13. Journals with the highest number of publications—Web of Science.

#### 4. Discussion

Through the present study, it was possible to determine that there is still no great theoretical framework reflecting the influence of public providentialism models in the transformative process of participatory responses in older adults in the face of the emergence of the COVID-19 pandemic.

Based on this investigation, it was our aim to understand whether the studies carried out in 2022 (inclusive) consider the relationship between European public providentialism models and participatory responses to the vulnerabilities of older people during the COVID-19 pandemic. The results obtained allowed us to assimilate, preliminarily, the relevance of this topic by considering the existence (or non-existence) of its scientific content. The scarcity of studies on the relationship between public providence principles for aging and place-based social participation around the construction of local gerontological support systems demonstrates that the scientific interest of the extant research aims to increase the understanding of these processes in order to envision a model of gerontological support for aging-in-place in pandemic situations.

This perception may be useful for finding a standardization of public policies used by the many welfare state models during the COVID-19 pandemic. By finding these patterns it would also be possible to perceive the resilience of those policies and their processes, thus improving our knowledge for future health crises.

Therefore, based on the systematic literature review (SLR), it was possible to verify that 61 of the 221 publications collected referred to studies that explored the reconfiguration

of responses to vulnerabilities in older people during the COVID-19 pandemic. However, only 30 of these studies envisaged the relationship that such approaches would have with the providential configuration of the states in which they fit. However, only six publications carried out contrasts/comparisons between models of public providentialism.

Based on the reading of this set of articles, it became possible to trace some lines of investigation. We can thus speculate for future investigations that there is indeed a relationship between welfare state models and the process of the reconfiguration of governmental and participatory management of gerontological responses towards people in an aging-in-place situation.

Although it was not entirely evident, after reading the six articles, we can speculate that in countries with more reinforced welfare state models (universalist models) there was a greater predisposition towards institutional participation. This is due to the prior existence of public responses that intervene in situations of aging-in-place. Regarding the scope of government management, we believe that the responses are generally designed in more national and generalist contexts (place-neutral approaches).

On the opposite axis, we reflect that in more weakened welfare state models (liberal models), there has been a greater incidence in the creation of more territorial (place-based) and community responses. This is due to the lack of public responses and the consequent inability to access private services to older and more vulnerable populations residing at home during the COVID-19 pandemic.

These first impressions are an important milestone for future studies. These are references that, through a more in-depth study, will allow us to draw pictures of the transformative processes of gerontological responses in different models of public providentialism during the COVID-19 pandemic.

Although, through this first technique, was also possible to verify the lack of scientific research, referring to the comparative analysis between models of public providentialism and the standardization of participatory responses in older people. There are a many studies that portray vulnerabilities in older adults in the context of COVID-19, as well as the subsequent responses developed by several states. However, these do not reflect the public configurations of each state, much less contrasted in the face of the specificities of the forms of governance and participation in terms of the configuration of responses to the elderly.

It is also possible to draw some conclusions through the bibliometric analysis itself. According to the various parameters analyzed, there was also a limited number of studies and analytical coherence between the two databases used. This fact is related to the limited period, referring to the years of publication, which are not yet sufficient to trace trends in scientific research. The SARS-CoV-2 virus was only discovered at the end of 2019, so studies regarding its effects and responses in the elderly were only published between 2020 and 2022.

Even so, among the works systematized in this first approach, the need for interdisciplinarity in the analysis of the risks associated with the population of older adults in a pandemic context, as well as the geriatric and gerontological responses themselves, was considerable. As a result, there was a predominance of studies in the areas of social and biomedical sciences but also in other disciplines, such as the technological sciences. For possible future analyses, this holistic and interdisciplinary analysis is crucial for understanding the transformative process of participatory responses in favor of the well-being and safety of older people in a pandemic context.

The literature demonstrates that the structural response capacity that exists in each country tends to be complemented with the organization of community support systems [33], which act in support aging-in-place vulnerabilities and even more active in pandemic situations.

Given that the EU and its member states have developed common approaches to controlling the spread of the pandemic, coordinating screening strategies and providing protection resources, there is a need to improve preparation for the promotion of solidarity and local, national and European decisive elements in the fight against pandemic situations.

We believe it would be beneficial to create, a priori, a set of political frameworks that could be adapted to every welfare state model in future pandemic crises. Furthermore, these same frameworks should have a multilevel and cooperative approach in terms of governance and participative management of gerontological responses during an eventual future health crisis. Through the analysis of these sets of articles, we assume it is beneficial to create approaches that consider the characteristics of a macro-territory (such as countries) and the specificities of meso- and micro-territories (regions and counties). It is important, however, to promote an elasticity of the public policies of each countries in order to do so. Additionally, the involvement of the community with local and national institutions would have a great impact on the efficiency of creating better gerontological responses to individuals aging-in-place during a similar pandemic crisis.

In turn, through collected and systematized publications, we were also able to conclude that the United Kingdom, Spain and the United States were the countries that published the most works on this topic. However, the discrepancy in the number of publications conducted compared to countries such as Canada, Italy, Norway or even Portugal is not significant. We suspect that the existence of a greater number of publications, in the three countries is related to the high level of the incidence of cases of viral contraction associated with SARS-CoV-2 during the years 2020 and 2021; however, this analysis is not provided with any empirical basis from the data analyzed in this study.

In summary, through these and the other parameters analyzed above, we can conclude that there is still a huge research gap that allows for the standardization of participatory responses to older adults in different models of public providentialism. The analysis of the present study seems to us, in fact, to be decisive for the construction of future models of gerontological intervention in times of public crisis. In addition, its realization consistently and methodologically supports the need to carry out a comparative analysis between different welfare states in terms of the forms of participation and governance inherent in responses to the elderly during the COVID-19 pandemic.

## 5. Conclusions

This initial study arose from the need to identify trends in scientific research regarding the relationship between gerontological responses and different models of providentialism in the current COVID-19 pandemic context. For this purpose, two techniques enabled the obtaining of a set of publications alluding to this theme, namely the Systematic Literature Review (SLR) and the Bibliometric Analysis.

The first conclusion that we can draw from the implementation of both techniques is that there are not enough studies to create solid conclusions in order to compare the type of responses in states with different models of providentialism. There are, however, studies that describe the transformative process of these approaches, although not in a way that contrasts with the configurations of the public policies in which they fit. Consequently, there are also no studies that allow for a standardization of participatory gerontological responses used in different models of public providentialism during the current pandemic crisis.

This study played a fundamental role in the process of diagnosis and the analysis of existing studies within this theme. It allows us to substantiate the need to carry out more studies that correlate public providentialism models with participatory responses, developed in the context of protecting and promoting the well-being of older people in the current pandemic context. Investment in such studies not only makes it possible to fill in existing research gaps but may also provide a theoretical basis that supports intervention plans for older people in possible public health crises, so it is relevant to reinforce the few existing scientific contributions.

It is our intention, in the next step of this investigation, to develop a more in-depth analysis concerning a set of European countries with different welfare state models in order to standardize the governance/participation management processes in creating geriatric responses during the COVID-19 pandemic. However, and as we have been arguing, this study is the pillar on which the crucial data necessary to begin that investigation rests.

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Article

# Examining Social Relationships among Older Muslim Immigrants Living in Canada: A Narrative Inquiry

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**Abstract:** Social connectedness and engagement are particularly important among groups who are at risk of experiencing social isolation, such as immigrant older adults. The objective of our study was to understand the social relationships of aging Muslim Lebanese immigrants living in Canada by exploring their lives in their ethnic and wider communities. This study used a life course perspective and adopted a constructivist narrative inquiry to understand the diverse lived experiences of four older adults who immigrated to Canada during early adulthood. Participants engaged in a narrative interview and follow-up session in which they storied their lived experiences. Findings describe one core theme, cultivating social relationships through family, friends, and community interdependence, and three related sub-themes: (1) navigating and creating family interdependence and planting new roots; (2) family interdependence in later life: the important role of grandchildren; and (3) cultivating ethnic and local interdependence to support aging in place. The participants' stories provided an understanding of how culture, religion, aging, family, and immigration experiences interrelated throughout their life course and shaped their social relationships during later life. This study sheds new insight on the importance of culturally tailored activities and awareness about the social needs of immigrant older adults.

**Keywords:** culture; interdependence; life course perspective; older immigrants; religious minority; social relationships

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## 1. Introduction

Two key forces are currently shaping the demographics of countries in the Organization for Economic Co-operation and Development (OECD): aging and immigration [1]. Like other OECD member countries, Canada has strategically used immigration policy to manage demographic trends over time [2] and now has an increasing population of aging immigrants. According to the Canadian Institute for Health Information [3], older adults make up the fastest-growing age group in Canada; in 2017, 6.2 million Canadians were 65 years of age or older and this number is estimated to double by 2036. Alongside a rapidly growing aging population, there are approximately 7.5 million foreign-born individuals living in Canada, with approximately 300,000 new immigrants entering Canada each year since 2015 [4]. Immigrants now represent approximately 30 percent of the country's older adult population [5].

Canada's changing demographics have prompted a drive for researchers to understand the needs of ethnically and religiously diverse aging immigrants [6–8]. Our study examines the experiences of aging Muslim Lebanese Canadians to understand what has shaped their social connectedness and engagement across the life course. Immigrants of ethnic and religious minority are one of the most vulnerable groups in Canada, as they fall into a triple jeopardy through the intersectionality of old age, immigration status, and

religious affiliation [9,10]. Intersecting identity markers, including race, class, gender, and ethnicity [11] shape older Muslim immigrants' experiences of social connectedness and social engagement. These intersections can lead to experiences of discrimination or exclusion in their new community [12]. Muslims have formed a growing segment of Canada's contemporary immigrant population [13]. The Lebanese community in particular, many of whom are Muslim, has doubled in size in Canada since 2001 [14] and is likely to continue increasing given recent and ongoing arrivals of refugees from Syria and Afghanistan and private refugee sponsorship programs [15]. In 2016, 219,555 Canadians identified as Lebanese [16].

Immigration can be considered a major life transition because immigrants may experience acculturation stress, intergenerational conflicts, and depression [17–19]. Scholars point to social isolation and loneliness as being public health risks among older adults, especially among immigrant older adults, as they face many challenges when working to re-establish ways to engage in meaningful social activities in an unfamiliar cultural context during later life [20–22]. Building and maintaining strong supportive social relationships with family and community members have been shown to prevent stress, facilitate belonging, and provide access to important social supports among immigrant older adults [23,24]. How older immigrants build and maintain social relationships is not well understood; therefore, this paper aims to describe the experiences of social connectedness and engagement within one immigrant group, Lebanese Muslim Canadians, who immigrated in early adulthood.

Toepoel [25] drew on the works of Bourdieu [26,27] and Coleman [28] to explain that social connectedness is the quality and quantity of social relationships. Social engagement refers to a person's participation in activities with others or the wider community [29]. Social connectedness and social engagement are interrelated, as social ties provide opportunities to engage in social activities, which can create an environment promoting social networks and feelings of belonging. For older Muslim Lebanese Canadians, immigrating from a collectivist culture can shape the forms of social connectedness and engagement sought in the host society. Collectivism is characterized by collectivistic self-representation, linked to contextual obligations, and is motivated by the expectations of groups [30,31]. Navigating ways to maintain connectedness, traditional practices, and religious identity when moving from one country to another is an important goal for many aging Muslim immigrants [32,33]. Furthermore, collectivist social connection and engagement, characterized by forms of interdependence (e.g., multigenerational households), may require cultivation by immigrants arriving in more individualistically oriented societies such as Canada.

Arriving in a new country can result in Muslim Lebanese immigrant families experiencing loss of social support and increased stress because they have shifted away from relying on extended family in their homeland [30,31]. Furthermore, Ajrouch [34] found that family was the first source of social support for many participants in her study and that access to diverse sources of support beyond the family unit was limited. Similarly, Oglake and Hussein [35] found that aging Muslim immigrants experienced belonging in a close community ethnic group who assisted in information exchange and employment opportunities, which also led to social isolation from the wider community because they spent more time within their ethnic groups [35].

Aging Muslim immigrants may maintain social connectedness and engagement in old age by engaging in caregiving responsibilities, which was found as beneficial for both grandchildren and the older adult [36,37]. Caring for their grandchildren was a way for them to preserve their cultural and religious identities because they engaged in passing along traditions, culture, and language to their grandchildren. Maintaining a strong ethnic identity has been found to be connected to gender-specific roles for care tasks for aging Muslim immigrants [12]. For example, care migration among Bulgarian Muslims is a female-dominated role; however, a rising demand for more help from their adult children presented a new role for grandfathers, who also migrated for care obligations. While caring was perceived as a stigmatized role among men, they became more socially engaged in educating their grandchildren [12]. De Jong's [37] study also revealed the

importance of gendered intergenerational kin relationships and tasks after marriage in relation to identity among Muslim older adults. Aging Muslim women often cared for adult children and grandchildren, and supervised homework, while aging Muslim men cared for grandchildren and engaged in leisure time and outdoor tasks [37]. Aging Muslim women were found to care for their spouses who were experiencing health issues and men cared for their grandchildren and family finances [38].

Social connections and social engagement can promote wellbeing and provide opportunities to engage in social activities, which facilitates a sense of identity [39]. More research is needed to understand how social relationships are built and maintained over time as Muslim immigrants age in Canada. This study sought to unpack narratives of older Lebanese Muslim women and men to examine their experiences of immigrating and settling in Canada, with a focus on how they built and maintained social relationships as they aged.

## 2. Materials and Methods

Our study was conducted in London, Ontario, Canada, which has a relatively sizeable Lebanese population. We used narrative inquiry to address the purpose of this study for several important reasons: to examine various periods in an individual's life span; to unpack a wide range of social, environmental, institutional, and political influences; and to rebuild perspectives and actions that are connected to meaning making in place and time [40,41]. Thus, narrative inquiry was used to understand the lived experiences of older Lebanese Muslim immigrants by eliciting stories to investigate and understand how they made sense of their social relationships over the life course [42]. Narrative methodology addresses how people give meaning to their experiences [43] and enabled us to capture how the participants navigated their social connections and engagement with family, the Muslim Lebanese community, and the wider Canadian society across diverse contexts.

Subjectivity and reflexivity are two important components of qualitative research that were applied in this study [44]. Subjectivity was applied by bringing in our own histories, assumptions, values, and perspectives into the research design and execution [44]. In addition, we asked each participant a broad question in order to prompt their life story. We engaged in reflexivity throughout the data collection, analysis, and writing stages by paying attention to the ways in which our positionalities, assumptions, and perspectives influence the research and participant data. With our continued on-going self-evaluation and awareness during the research process, we were able to achieve rich rigor, sincerity, and transparency [45].

Grounded by a life course perspective that posits that lived experiences are socially constructed, connected to social change, and developed over time [46], four stories were co-constructed by the first author and participants. This perspective supports a holistic approach to lived experiences that does not examine age in segments [47] and considers participants' agency in constructing their own life course through the decisions and actions they make when challenges or opportunities arise. Participants chose, interpreted, and emphasized different aspects of their lives using their own voices, filtered through what they remembered from the past, present, or envisioned for the future [48]. The first author's positionality as a Muslim Lebanese Canadian young adult helped build rapport as all participants developed an immediate connection with her through shared religious and cultural identity. We purposefully recruited four participants for this study using the following inclusion criteria: English or Arabic speaking, Muslim immigrants from Lebanon, 60 years of age and over, and immigrated to Canada in early adulthood. In our study, we based our sample size on four important qualitative research factors: study purpose, paradigm, epistemology, and methodology [49]. The purpose of our study was to provide in-depth insights into how aging Muslim immigrants navigated their social relationships when living in an unfamiliar place. We selected participants based on purposeful sampling; thus, we selected specific individuals who could provide rich data that would help answer our research question. To promote gender representation, we recruited two men and

two women, and we were able to intensely study their lives. This sample size is reflective of other studies adopting a similar approach, as “often narrative inquiry research has a few participants, sometimes only one but more commonly 4–6 participants” [50] (p. 3) For instance, other studies [51–57] each had one to five participants in their research. Further, in conducting multiple interviews with each participant, our findings are drawn from data across 12 transcripts. All participants immigrated to Canada during the 1950s–1970s, and their age at immigration ranged from 14 to 25 years. At the time of the study, their ages ranged from 63 to 86 years. The study received ethics approval from Western University, and participants are referred to using pseudonyms.

Stories were co-constructed with participants through narrative interviews using Wengraf’s [58] biographic-narrative approach. This method entailed three meetings with the participants to conduct one broad narrative interview, one follow-up interview, and one collaborative session to discuss the written narratives. The interviews ranged from approximately 30 to 180 min. The narrative interview involved an initial prompt, “I would like you to tell me your story about immigrating to Canada and then continuing to live here. Once you settled in London, Ontario, how did you get to know people around the community? What sorts of social activities do you do with others in the community, including your family, friends, and others?”. Participants were able to create a long narrative connected to past, present, and future events [41]. The aim was to elicit a broad narrative through which participants shared stories about their immigration and how they became and remained socially connected over time. A preliminary analysis of each participant’s initial story was completed, and a list of questions was formed for the follow-up interview to elicit further narrative data. The third, collaborative session entailed giving participants a re-written narrative account of their story and discussing it with the participants to ensure that their stories and voices were appropriately represented [58].

Lieblich, Tuval-Mashiach and Zilber [59] holistic content approach was adopted to analyze all parts of the participants’ stories and form a whole narrative. Stage one involved transcribing the interviews and writing reflexive notes pertaining to social connectedness and social engagement, such as family values, language barriers, occupations, social environment, or challenging experiences [59]. We examined each participants’ data together and identified key ideas and threads. Stage two entailed applying a holistic-content perspective by initially reading through each transcript several times, and then considering all transcripts together, looking across participants for key ideas, quotes, contradictions, unusual remarks, and important events, activities, and places. All transcripts were then coded in Quirkos [60] using an iterative coding structure based on the ideas and codes we had developed during these first stages of analysis. The results of this process were discussed amongst all authors who engaged in a process of collective reflexivity [61] to generate further reflexive notes about initial findings. We outlined an overarching theme and associated sub-themes and revisited the data to describe and refine the themes. Stage three included interpreting and “restorying” the narratives into a framework. Our approach is similar to that adopted by Cho [52] and Shemirani and O’Connor [51] in their study of the narratives of immigrant older adults living in North America, in which narratives were not constructed temporally, but instead focus on what was emphasized, meaningful, or commonly intertwined throughout each story regarding social connectedness and engagement [62].

### 3. Results

Before describing the core theme and related sub-themes we introduce the four participants by sharing summaries of their stories to provide some context for the findings from our thematic analysis.

Mahmoud Abbas was in his mid-80s and lived with his wife. He immigrated to Canada in the 1940s with his brother and mother at the age of 15. He described how there was a small number of Lebanese people living in London before his arrival, who gave him and his family hope, a sense of belonging, and feelings of comfort. This drove his

passion for helping newcomers find their place in London and motivated him to become socially engaged in cultural and religious groups. Mahmoud became an entrepreneur and owned different businesses in the city. He described himself as hard working, and it became his purpose in life to keep people socially connected and engaged in the community. Throughout his narrative, Mahmoud emphasized the importance of his family supporting him in all his endeavors and that he would not have come so far without them, and Allah's (God's) will.

Aya Abdul-Karim was in her early 60s, retired and living with her husband. Her sister sponsored her to immigrate to Canada when she was 19 years old, and she described her settlement process as a shock. Despite living with several family members, she often felt lost and misunderstood; thus, she actively worked to find herself within her new context. Aya reflected on her multiple struggles and challenges raising her children in the Canadian context, and how she was able to work through many issues with support from her neighbor and best friend. At the time of the study, she spent most of her time caring for her grandchildren and being with her family and friends. She also emphasized how her understandings of the Quran facilitated her social connections within the Muslim and broader community.

Ali Hussein was a retired grandfather of four in his mid-60s. He lived in a multigenerational household with his wife, a few of their children and a grandchild. Most of his children were married with families of their own and lived in the same city. Ali immigrated to Canada when he was 19 years old to live with his uncles who were business owners, later becoming an entrepreneur himself. He lived transnationally, moving back and forth between Canada and Lebanon over time. Ali felt as though his societal contributions had earned him his retirement and reflected that the most important thing in his life was the happiness and health of his family; thus, he strove to help them in any way that he could.

Nabila Jamal was in her late 60s and was the primary caregiver of her husband who was diagnosed with dementia, having lived in London for about a year at the time of the study. Nabila was 14 years old when she immigrated to Canada with her parents and sibling after the civil war in Lebanon and returned to their home country years later. Nabila got married and had children, but ultimately returned to Canada, settling in London with her brother before eventually getting remarried and moving to another province. She worked hard in multiple jobs, while raising her daughter. As Nabila aged her daughter grew up and moved away, she tried to keep herself occupied and returned to London with her husband in order to be close family and friends.

### *3.1. Cultivating Social Relationships through Family, Friends, and Community Interdependence*

All participants migrated from Lebanon, a country known for its rich collectivist culture, to Canada, which participants described as being characterized by an individualistic culture. Accordingly, all participants enacted deeply rooted collectivist values, such as living near or with extended family to preserve and protect relationships, organizing family gatherings at meaningful places, and engaging in social activities within and outside their ethnic community. They expressed difficulty adjusting to the lifestyle when they first arrived in Canada, and actively worked to create interdependence in their communities. The core theme identified in this study outlines ways that participants cultivated family, friends, and community interdependence to support their integration and inclusion in the host society. This core theme is supported by three sub-themes, including (1) navigating and creating family interdependence and planting new roots; (2) family interdependence in later life: the important role of grandchildren; and (3) cultivating ethnic and local community interdependence to support aging in place. Together, these thematic findings illustrate how the participants sought to create an interdependent way of living in their new country through various meaningful ways. For example, participants integrated by re-establishing and/or establishing social connections with family members and spent most of their late-life bonding with their grandchildren. They also formed meaningful social connections with neighbors and interacted with others in their local community, which supported

feelings of inclusion. Participants described the hardships they faced after immigrating and adapting to their new environments, such as experiences of culture shock, lack of social interaction, and experiences of social isolation within and outside their family circle. To overcome these challenges, we found that they worked hard in unique ways to cultivate supportive family, friends, and community social relationships that helped support their integration over time and enabled them to age in place.

### 3.2. *Navigating and Creating Family Interdependence and Planting New Roots*

Family support during resettlement seemed to play a vital role in integration and provided a stable social environment to facilitate social connectedness and social engagement for participants. All participants arrived in Canada during young adulthood and received sponsorship to immigrate and social support from their family members. This support created a foundation for participants to gain a sense of belonging and feel included in their new communities. A foundation built on family support led to several opportunities for participants to enact meaningful activities, which helped to expand their social networks, and continued into later life. The participants narrated several ways that family interdependence shaped their experiences and helped them plant new roots. They described living with family members, particularly within multigenerational households, and how engaging in activities with family members (or not, in some cases) influenced their integration experiences. Beyond housing, family members supported their integration in other ways, such as providing economic, moral, and emotional support. Family members encouraged participants to become more socially engaged by contributing to their new community through volunteering, advocacy, employment, charity walks, donation, being a mentor, and attending community meetings.

All participants lived in a multi-family member household when they first immigrated to Canada. For some, living with family members was challenging because participants had to navigate relationships among family members within a foreign space. Close family supports shaped participants' experiences of settlement and integration. For instance, Aya explained that her sister sponsored her to come to Canada to establish family interdependence, "she kept saying 'come and visit me I'm lonely I wanna see you, I want my sister to come to Canada', I'm missing her so and I want to see her and see a different country. I just want to see my sister I go see different life". Aya lived with her sister for the first few months upon her initial arrival in Canada, which she described as being a common practice in her collectivist Lebanese culture. Like Aya, Ali lived with extended family members for a few years when he first arrived in Canada while he found his way around his new community and later purchased his own home. Ali described that receiving family support contributed to his sense of rootedness in Canada. Ali said, "I've always felt like I belong here, even though I have come when I was 20. I had my education here, I went to university here, I am from here. I never felt strange". Living arrangements for all participants changed after marriage as they moved to live in their own homes with their spouses. However, most participants still found ways to maintain interdependence with their family members while living apart. Later in life, many participants again lived in multigenerational households with their children and grandchildren.

Beyond the tangible support of providing a roof over one's head upon arrival, participants also spoke to the ways that living interdependently with family members provided additional supports. For instance, Nabila narrated how she left what she described as a toxic marriage in Lebanon in her early 20s, moving to Canada to live with her brother who she depended upon for immigration sponsorship, as well as financial and social support upon arrival. She expressed how much she valued her relationship with her brother and described the year she lived with him, as a young woman, as the "best year of my life". She seemed to appreciate both the support from her brother and the sense of freedom from the family she left behind in Lebanon, explaining: "When it was just me and my brother, we would go, come back and nobody would tell us "Where are you?", "Where were you?". At this point in Nabila's life, her brother was her only source of social and emotional

support and she engaged in meaningful activities with him, such as watching movies, walking around the neighborhood, or going out for ice cream. In addition, Ali described the crucial role played by his family members in supporting his economic integration into the community. His uncles owned a business in Canada and with their support, Ali attended university and afterwards established his own retail store in London. Ali said, "So I came back to London, I had a lot of relatives and friends here and I opened my business, clothing, jeans and stuff in 1975 and stayed in London for a long time. I enjoy being in this city because it's a city but it has a climate of a little town or village".

Participants also described ways that their family members encouraged them to expand their social connections, such as participating in larger family gatherings or through volunteering at local community events. For example, Mahmoud's sister, who was known in the local community as a passionate advocate for multiculturalism and who sponsored his immigration, advised him to build interdependence by becoming more socially engaged in the Muslim and broader local community. Mahmoud emphasized the importance of not forgetting his culture and religion; thus, he wanted to engage in activity that brought the Muslim community together. Mahmoud said, "So we come to this country, the country open the door. So we appreciate it but we are not going to forget our religion, our culture, we gonna work on it. I want the people not to drift away, like a melting pot, I want them to be involved and do better than we did. I feel I bring the people together ok, because I don't want them to be isolated, I want them to be proud about where they came from". Bringing people together for an important cause was something he embodied. He said, "After we registered and we start and the newcomers start coming in '55, we had the first convention in London. We had 1000 Muslims attending and it was the best ever we had in Canada. And 800 Muslims came from the US". This convention motivated Mahmoud to continue supporting the Muslim community in any way that he could. He continued playing an active role in his community in his old age. For example, he became involved in helping Syrian refugees settle in London. Aya also engaged in activities that took place in the community; for example, she did a fundraising run for an important cause with her siblings and friend.

In contrast, family interdependence did not necessarily lead to the support needed for all participants when they first arrived in Canada. For example, while Aya initially lived with her sister, she described feeling she lacked the emotional support she had hoped to get from her. This led to feelings of discomfort, which she felt initially prevented her from gaining a sense of connectedness and belonging. Aya explained, "Instead of, I came to this country I needed her—like her expectation was I should know better. The way they do things that—it's different from back home, you make one mistake they laugh, make you feel uncomfortable instead of telling you this is how it's done this is what you should do. She also expressed feeling lonely, out of place and burdensome when living with her sister: "I did feel lonely a lot because they were kind of, I don't know how to explain like my sister was busy with her family ... Her life and they didn't—pay attention to me much—Her expectation was me helping here". Thus, Aya experienced family interdependence but not in the ways that she had hoped, pushing her to seek out alternative social opportunities by attending English school and joining social clubs at her local mosque.

Each participant experienced and cultivated interdependence differently, achieving social connectedness and engagement in their own ways. Participants lived with and depended on their family members to a certain degree, typically benefitting from family interdependence but at times feeling that support was lacking. Family members were found to have played an important role supporting participants' immigration process, initial living arrangements, and were the first sources of social support providing a foundation for them to build a new life in Canada. Family interdependence, multigenerational living, and close family friendships acted as an important source of social support in most of the stages in their life-course. Ultimately, participants appeared to embrace family interdependence (with the exception noted above) as sources of social connectedness and social engagement,



which facilitated feelings of belonging over time. Participants built their social lives on these connections which followed them as they aged in place.

### 3.3. Family Interdependence in Later Life: The Important Role of Grandchildren

All participants expressed how their grandchildren played a key role in facilitating interdependence and their experiences of social connectedness and engagement in later life. In particular, the participants described how they transmitted important traditional and cultural knowledge to their grandchildren. They also discussed how they enjoyed spending leisure time with them. This intergenerational interdependence seemed to fulfill a sense of reciprocity among the participants.

Participants talked about the importance of fulfilling their care obligations by teaching their grandchildren as a way to build and maintain social connections. They all expressed that they were not able to spend a lot of time with their own children who spent most of their days at work. The participants were all retired at the time of data collection and expressed the significance of spending most of their time with their grandchildren, with whom they described having strong emotional relationships that profoundly shaped interdependence in different ways. For example, Aya talked about how taking care of her grandchildren four days a week filled her with positive energy: “And you fill up your life, you fill your life and the kids come”. She described how when her grandchildren visited, she would teach them how to speak Arabic and dance to traditional Arabic music visit. Aya explained how her grandchildren “complete” her life and keep her “young and active”, which made her feel that she was not in her old age. She experienced mutual interdependence with her grandchildren, who were constantly learning from her and provided her with regular and social engagement, which facilitated strong social connections with all her grandchildren.

Similar sentiments were shared in Mahmoud’s narrative as he spent most of his time with his grandchildren, and taught them about the Quran, how to read Arabic, and encouraged them to get involved in their local and Muslim community. Mahmoud offered his grandchildren wisdom and they in turn provided him with continued interdependence and a way to stay socially active. Mahmoud also mentioned that he enjoyed having all his grandchildren for dinner at least once a month, requesting that they put away their cell phones and focus on valuable family time. For Mahmoud, interdependence was further maintained through these monthly dinners because he and his wife also taught their grandchildren how to cook traditional Lebanese dishes.

Feelings of mutual interdependence did not only stem from teaching grandchildren important aspects of the Muslim Lebanese culture, but also involved engaging in leisure activities and having fun together. For instance, Ali expressed how much he enjoyed spending leisure time with his grandchildren, playing with them in the backyard and going on daily walks with them around the neighborhood, which kept him “involved seeing how they are doing”. Ali had several grandchildren under the age of five and he explained how these connections filled him with gratitude because he was still physically able to play and build social bonds with them. Ali said, “Yes actually this is the most important thing in life, your children. You feel happy when you did what you are supposed to do. Like money or anything, I don’t care about that, it can be reachable. But I care about their ethics and that we have raised decent people. So, I am happy for that, I think that is the main reason why I am quite satisfied”. He also enjoyed helping his sons with their businesses by giving them advice when they need it.

Mahmoud, Ali, and Aya were grateful they lived near their grandchildren because this allowed them to spend a lot of time together. Achieving interdependence with grandchildren was more challenging for Nabila whose daughter and granddaughter lived in a different country. Bonding with her grandchild was nonetheless also important to Nabila, who used technology to communicate with them and described how much she enjoyed video calling her daughter and grandchild. She expressed feeling unable to fulfill her role as a grandmother because she had to spend most of her time caring for her husband who had dementia, which prevented her from traveling to see her grandchild. Furthermore, unlike

the other participants, Nabila felt a sense of emptiness because she could not re-establish relationships with her two sons and their children. As mentioned earlier, Nabila divorced her husband in Lebanon and left her two children with her husband and his mother. She said, "I'm a mom. And they took my kids from me. Their father took them from me. When I see a mother buying toys for her kids, I get hurt from the inside. When I see a father walking with his sons, I look around and see a shadow and say where are my sons? Days, I would go outside and walk around, open the window, sit on the balcony, days I open the TV. If I screamed and cried, no one would know. I would ask myself questions, why did this happen to me?". Nabila said she tried to be a part of her sons' lives, but they refused to connect with her. Nabila hoped that one day she could connect with her children and grandchildren.

Aging in place helped participants build and maintain consistent social connections and engage in activities that supported their wellbeing. Most participants chose to stay in Canada for the very reason that their children and grandchildren were nearby. The participants all appeared to strongly value their role and identity as grandparents, which helped them gain a sense of inter-connectedness across generations.

### *3.4. Cultivating Ethnic and Local Community Interdependence to Support Aging in Place*

After immigrating to Canada, many of the participants' social ties initially diminished due to the absence of extended family and they navigated ways to establish new ties. In addition to the forms of family interdependence cultivated upon arrival and later in life described above, the participants also narrated ways that they built new connections that provided social support during their life course. They described seeking ways to contribute to their ethnic and local communities, resulting in social connectedness and feelings of belonging. Findings illustrated ways that they formed social connections within their neighborhoods, within their faith-based community with other Muslims, as well as with people in the broader community. These social connections often grew from their ties with family and friends who facilitated the participants' social engagement in the wider community.

As participants aged, they developed a range of relationships through which they gained support in their communities, facilitating interdependence and helping them develop resilience and a sense of inclusion. For example, Aya repeated several times a quote from the Quran, which helped her reach out to cultivate interdependence by forming strong social connections with her neighbors. She said "Prophet Muhammed, Peace Be Upon Him, said to be good and kind to your neighbors and you're more than a neighbor" and narrated how she and one of her neighbors had built a strong connection that had lasted for over two decades. Aya considered this neighbor as her own sister, explaining "She's the one who used to take me and sit with me [pause], not my own blood sister. She's the one. And my sister wasn't that far away from me [geographically]". She expressed that her life would be different if it did not include being socially connected and regularly engaging with her neighbors, for example, by exchanging cultural meals and recipes with them, and looking after each other's homes (e.g., collecting mail) when they were on vacation, which provided feelings of safety and social inclusion. Participants described not only their connections to their neighbors, but also within their neighborhoods more generally. Ali had lived in his current home for nearly a decade and talked about how much he liked the nearby amenities, making it was easy for him to drive to a café every morning where he met his friends to socialize about the community and politics. Ali said, "It's a nice quiet neighborhood. Everything is nearby, Tim Hortons, restaurants, Food Basics, shoppers drug mart, you have a lot of services". The café was a meaningful place for Ali, where he could enact important social activities with his friends and relatives, which promoted his level of social engagement. He stated, "I'm retired now I don't do anything . . . , except having coffee and playing cards. Having coffee everyday with friends". Like Ali, Nabila moved to London in her old age to be among her relatives. She said, "The people who stay happy live among those from their village. You reminisce about the past together, the children of

your country, you live together, weddings you are dancing together, you are happy. We play cards, we play with everything, and we are all happy is what I mean. See the child of my country, my village, we were raised together and drank from the same water, and we walked on the same road". Despite being among relatives, Nabila mentioned that she has yet to build relationships with her neighbors.

Beyond their immediate neighborhoods, practicing their Muslim religion fostered participants' social connections and engagement, encouraging them to volunteer and participate in faith-based community gatherings and associations. For example, Aya made her first social connections at her local Mosque, where she learned to cook cultural foods. She volunteered at the Mosque, an important activity she continued to do as she aged. Aya said, "We were all working really hard at the mosque making fatayer, making zatar, umm dinners, everything! And that's how we learned, and I got to know people that way". Through these social connections and engaging in meaningful activities at the mosque such as cooking, socializing, organizing dinners, and cultural bazaars, Aya mentioned that it helped her become a well-known member of the local Muslim community. She continued her involvement at the mosque while raising her children, who also took on similar roles in the community when they grew up. Mahmoud was also highly connected to the Muslim community. He narrated how upon his arrival, the existing Muslim Lebanese community, whom he referred to as "the pioneers" were involved in social and political activities and inspired him to strive toward fostering community interdependence: "These people they made us feel welcomed. They didn't ignore us, they make us feel comfortable and they said, "Canada is the best country, you are lucky . . . you are with us now and you are going to have a tough time to adjust for the language or the weather but we went through too so . . . just keep on going . . . you know they give you that lift and they make you feel proud, we are very fortunate". In the spirit of paying forward the generosity he experienced, Mahmoud, members of his family, and the larger Muslim community established cultural and religious clubs in the city. They cultivated community interdependence by working together and subsequently by participating in these organizations. Helping others and showing them ways to become more involved in social activities within the Muslim community had been one of his lifelong goals.

Ways that participants became involved in the broader community were also described. For example, Aya talked about participating in fundraising events and volunteering with her sister and adult children. She was repeatedly involved in an initiative that distributed food for the homeless around her community every year and volunteered for a Syrian refugee support group. She explained how engaging in such activities helped her build a strong social network and helped her make a difference in people's lives, which fostered interdependent relationships within her community. Finding ways to becoming involved within the broader community seemed especially important for one of the participants, who had left the city and returned years later, leading to a sense of social exclusion from the local Muslim Lebanese community. Nabila explained how she enjoyed attending traditional Lebanese weddings but felt unacknowledged by friends, "There are people who pass by me, and we use to be good friends. They pass by and put their heads in the ground. And they don't speak with me. I was friends with them since I was little, I mean like in Lebanon". Despite having more recently relocated to London, she lived among most of her relatives now, but still expressed feelings of loneliness and disconnection from her ethnic community. Not having been able to re-establish interdependence among her ethnic community, she invested most of her time in the quality of the few relationships she had.

For all participants, it was clear that a critical aspect of aging was gaining a sense of connectedness and belonging with others. When moving to a new country, many worked towards building interdependence by creating places of meaning to socialize with family and friends, which supported their continuity in later life. Cultivating and maintaining forms of ethnic and local community interdependence was essential to enhancing their sense of belonging to the community. Participants worked hard to achieve interdependence

with their family, friends, and local community members, which supported stability and aging in place.

#### 4. Discussion

Our study explored social relationships among older Muslim Lebanese immigrants living in London, Ontario, Canada. Findings illuminated many ways these four older adults built and maintained social connectedness and engagement with family members and individuals in their ethnic and local communities over the life course. Rather than emphasize the number of participants, we highlight the number of data collection points. We drew our data from interviewing each participant three times; thus, we analyzed 12 interview transcripts. We were able to deeply understand what factors shaped, supported and hindered participants' experiences when actively working to rebuild their social networks. Our results, derived using narrative inquiry, add new insights to the literature on older adult immigrant minority groups, particularly concerning the critical role of family members, including immediate and extended family members upon arrival, as well as grandchildren in later life, and of neighbors and community members more broadly, including those within and beyond the Muslim Lebanese community.

A large part of each participant's narrative revolved around cultivating interdependence with family members, which provided social and moral support and facilitated feelings of belonging, safety, and comfort. Participants socialized primarily with family members and expressed that the most important aspect of their lives was their family members. Similarly, Palmberger's [39] study found that visiting family members was an integral part of Muslim older adults' everyday life, which supported social connectedness. Fallor and Marcon [32] also found that family became a direct source of informal support that supported wellbeing for Muslim Lebanese living in Brazil.

Our study contributes new knowledge regarding the major role that grandchildren may play in the lives of older adults, as participants spent substantial amounts of time providing care, sharing knowledge, and spending leisure time with their grandchildren. Research shows that activities of aging Muslim immigrants often involved playing and spending time with their grandchildren [63]. Grandchildren were also found to be a source of care and emotional and social support and influenced aging Muslims' quality of life [64]. In the current study, the participants assumed traditional gender roles as well as challenged them. For example, grandfathers seemed to embrace a close and caregiving role with their grandchildren. This reflects findings from research with other immigrant ethnic groups, such as a study by Guglani, Comeman, and Sonuga-Barke [65] which found that Indian immigrant older adults who lived in Britain expressed their cultural and ethnic identities through connecting with grandchildren and passing on cultural traditions. Similarly, Zhou [66] found that Chinese immigrant older adults associated their identity with the ability of their grandchildren to remember their heritage and speak their language of origin. In both studies, practices of passing on their ethnic identity to their grandchildren was a way they built and maintained social connectedness and reflect our study findings.

The literature suggests that older immigrants of various ethnicities are profoundly connected within the boundaries of ethnic enclaves [67–69], which not only serves to combat social isolation and feelings of loneliness [70] but also shapes their experiences of social connectedness and social engagement [71,72]. We found a similar pattern among all four narrative accounts, as each participant expressed how their family and Muslim Lebanese community worked to facilitate social interactions and build close quality relationships, forming their own social enclaves, which helped build resilience. Resilience is often defined as a personality characteristic, which describes an individual who can adapt to difficult circumstances and stay optimistic [73]. In the context of immigration and aging, resilience was present in all the participants' narratives as they worked to cultivate the various forms of interdependence highlighted by our findings. Additionally, we found that participants established relationships and engaged socially with individuals outside of their Muslim community, including neighbors of the same gender and life

situation. These relationships sometimes supported participants in everyday ways that family members could not, especially when family members lived at a distance. Many other articles (e.g., Buffel & Phillipson, 2011; Morioka-Douglas, Sacks & Yeo, 2004; Oglak & Hussein, 2016) [35,74,75] reported that aging Muslim immigrants did not form relationships outside of their ethnic enclave, which limited their social connectedness and engagement with the wider community. However, our findings demonstrate ways in which older Muslim immigrants pushed beyond the typical limits of ethnic enclaves and built and maintained relationships with individuals in their wider community [76].

Findings from this study contribute to the literature regarding aging in place. Participants built and maintained a collectivist support system in Canada's generally individualistic society through engaging others, particularly with members of the city's Muslim Lebanese community. Participants harnessed and developed their skills and built new networks through engaging in meaningful activities and sharing their embodied cultural heritage with others, in places such as the neighborhood, community centers, and the mosque. Religiosity and culture also shaped their experiences of social connectedness and engagement, which is consistent with findings in prior research with various religious and ethnic groups [76,77]. Through these experiences, participants expanded their connections with other Arabic-speaking people, which was another way participants built and maintained social connections.

The co-constructed narratives and themes revealed how older Muslim Lebanese immigrants positioned themselves in Canadian society over time and how aspects of their life course, such as social connectedness and engagement were shaped by forms of interdependence cultivated over time. The life course perspective helped to interpret these findings. Immigration is a life course transition and may influence how individuals build and maintain social connections with family, friends and communities as they try to navigate new territory and establish roots [78]. Socially connecting with others and engaging in activities as they established their lives in Canada was critical to the participants' wellbeing, especially when participants moved towards old age. The study findings also relate to the life course perspective principle of agency, which involves individuals constructing their own life course through the decisions, choices, and actions they make when opportunities and challenges arise [46]. The current study participants were active agents as they established social connectedness and engagement. Further, the life course perspective principle of linked lives involves the idea that individuals live their life depending on one another, with socio-historical influences playing a large role in their network of interdependent relationships [46]. For this study, findings revealed that social relationships and networks shaped participants' lives by giving them the opportunities to find places to express their identities and fostered participants to become more socially engaged in their community. The study also discovered that experiences from early adulthood were the foundation for connections in later life for all participants. Some participants were raised by their parents to be proactive and become involved members of the community, while others had a difficult time making new friends as they integrated.

A few limitations of the current study should be considered when further interpreting the findings. The interviews were conducted by the first author, a young Muslim Lebanese female, whose cultural positioning may have influenced what the participants decided to share with her. Additionally, as participants were recruited through a mosque, potential participants fitting the inclusion criteria who did not attend the mosque and whose experiences of social connectedness may differ as a result, were not recruited. Future research on social connectedness and engagement among aging Muslims should seek a maximum variation sample that could reflect a more diverse range of experiences related to religious and secular aging Muslims.

## 5. Conclusions

Our study worked towards valuing and understanding a local Muslim Lebanese culture in London, Ontario, particularly focusing on how family and community interde-

pendence are interrelated with experiences of social connectedness and social engagement. This study contributes to the ongoing discussion on immigration, aging, and social relationships and adds to the limited but growing literature on religious minorities in Canada.

Our study illustrated how strongly valued interdependence was woven throughout experiences of building and maintaining strong social ties for older Muslim Lebanese Canadians. In understanding this group's social relations, it is important to note how they also worked to maintain and strengthen their city's Muslim community. Our research showed that multiple factors contributed to how and why Muslim immigrant older adults built and maintained social relationships involving a complex negotiation between collectivist social thinking and individual agency. Being Muslim was a major and direct source of how the participants built their social networks. This narrative study provided insight into how older Muslim Lebanese Canadians built and maintained social connectedness and social engagement, especially how they gave meaning to diverse social experiences throughout their life course.

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## Article

# (Non-)Politicized Ageism: Exploring the Multiple Identities of Older Activists

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**Abstract:** The increase in ageing populations has spurred predictions on the growth of a politically powerful old-age bloc. While their protest mobilizations have risen to reach youth standards, there is scarce scholarly evidence of the role of multiple identities in older activists' involvement. We address this gap by interviewing activists in Iaioflautas, an older adults' social movement emerging from the heat of the protest cycles in Spain in 2011. In-depth interviews with 15 members of varying levels of involvement revealed the paramount role of the movement in the identity construction of its participants. Iaioflautas endows a strong sense of collective identity based on intergenerational solidarity and enables to counter the culturally devalued identity of older adults and retirees. Whereas perceptions of widespread ageist stereotypes against older adults abound in this group, they omit to view the movement through an old-age identity politics lens. Furthermore, they reproduce ageist attitudes against age peers refraining from active involvement. This paradox suggests that the non-politicization of ageism restrains the development of a collective identity based on old age. We highlight how an increase in ageing populations might advance this issue in future research.

**Keywords:** activism; ageism; Iaioflautas; identity; intergenerational solidarity; politicization; older adults; social movements

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## 1. Introduction

Nonviolent civil resistance campaigns have experienced an eruptive growth in the twenty-first century [1]. Contrary to the standard narrative that portrays older adults as socially disengaged and politically “insular” [2], research has shown that, in some countries, they are as likely to be involved in non-institutional political activities as their younger counterparts [3,4]. Scholarship has documented cases of social movements led by older adults addressing different issues, from social justice to environmental protection to international solidarity to ageism [5–8]. Nonetheless, while social movements' studies have long established the critical role of identities in collective action processes [9], the arrangements of identities that individual older activists make and experience in this setting have received scarce scholarly attention. At the same time, when compared to other social categories of discrimination such as gender, ethnicity, sexual orientation, or functional diversity, old age has seldom configured a political identity capable of attracting and mobilizing potential participants into action [10]. Despite widespread yet implicit ageism against older adults in contemporary societies [11], old age has thus far predominantly failed in framing the discrimination and social exclusion experienced by the constituents of this group as a political matter [10]. In other words, older adults have not significantly crafted a politicized collective identity comparable to other well-established identity politics [12].

Born out of the outburst of mobilizations in Spain in 2011 under the umbrella of 15M—also known as the “Indignados” movement—the emergence of Iaioflautas serves as a timely opportunity to assess the relevance of the older identity among its activists. Regarded as an older people's social movement, Iaioflautas publicly discloses its old-age identity to convey the centrality of intergenerational solidarity as its “raison d'être” [13,14].

In addition, media outlets often resort to labels such as “older adults,” “grandparents,” and “retirees” to describe the movement’s distinctive traits [15]. These myriad descriptors hint at the group identification older activists might go through once involved in an older persons’ social movement. However, scant scholarly accounts to date on the identity-building processes experienced by older activists raise questions on what exactly are the identities that surface in these circumstances and how they are managed and arranged. In short, what are older activists’ real and experienced identity ascriptions? In this article, we examine the prominence and relevance of multiple identities among older activists in Iaioflautas and how these identities relate to their involvement in the movement. More concretely, we ask, (1) what are the relevant identities that emerge among older activists in Iaioflautas? and (2) what is the role of an older-person identity in their involvement?

### 1.1. Identity Building and Older Adults

Identity is a construct that different disciplines have long approached in the social sciences. Drawing from psychology, social psychology, and sociology, scholarship accounts for three primary levels in which identity unfolds [16]. First, identity at a personal or individual level alludes to a set of characteristics and attributes that may define the individual, such as values, beliefs, desires, or fears. Second, identity at a relational level refers to a person’s role in relation to other people, as in being a daughter, neighbor, colleague, or customer of one or multiple others. Third, identity at a collective level relates to people’s identification with a group or social category of which they are members and, thereby, share a set of values, beliefs, and attitudes. Drawing from this identity pool, an individual may actively create and negotiate multiple identities simultaneously [17]. Moreover, depending on the context, one particular identity may become more salient than the others [18].

The issue of competing identities is significant in social movement studies. In some circumstances, individuals may struggle to conciliate their different identities if they do not coalesce or push in the same direction [19]. However, social movements can also devise a collective identity that speaks to their constituents, despite stark differences on the issues of interest, the strategies adopted, or their ideological stances [20]. For instance, longstanding and multigenerational feminist movements have endured over time, despite the constant flux of new activists of different ages joining the collective [21,22]. In her study, Borland [21] shows how self-identification as historical, intermediate, or younger cohort members in Buenos Aires’ feminist movement is sharply delineated. Nevertheless, questions arise on which identity becomes more salient when more than one could be summoned in certain cases and circumstances. Prior research on mobilized older adults reveals a strong predominance of self-identifying with the social movement or political organization they are involved in rather than with the age group they belong to [12,23,24]. Simon and Klandermans [12] attributed this phenomenon to the politicized collective identity that social movements endow activists and, conversely, the lack of a politicized identity of the older age category.

Social movements collectively craft a politicized identity in terms of defining their common grievances, claims, and adversaries [25]. Activists may assemble in social movements to deconstruct a stigmatized or devalued identity based on social categories—e.g., gender, ethnicity, sexual orientation—a type of political action referred to in the literature as “identity politics” [26]. However, identity politics based on the social category of age have fared differently. While youth movements might place the quest for a distinctive identity with political content as of primary interest [27,28], most of their older counterparts do not seem to follow the same drive [3]. Gilleard and Higgs [10,29] argue that, with few exceptions, the increasing wealth disparities and, consequently, consumer lifestyles among retirees have led to the individualization of retirement, conducive to a fragmentation rather than a coalescence of an old age-based identity. In this sense, although research documents older adults’ political organization in pensioners’ political parties [30] and pensioners’ social movements [31–33], some of the observed cases of older persons’ mobilizations confirm the lack of a common and unified political identity based on old age [3,34]. The Gray Panthers

in the U.S. [8] and the Raging Grannies in Canada [7] stand as a few well established and renowned exceptions that appeal to a politically driven identity based on old age. Nevertheless, the increased popularity of non-institutional political activity among older adults invites to revise the role of identities in this contemporary political surge.

At the same time, accounts of prejudice, discrimination, and exclusion suffered by older adults have long been revealed in the past [35,36]. What Butler [35] initially coined “ageism”, as another form of bigotry comparable to racism, sexism, or classism, has been increasingly acknowledged in gerontological scholarship yet remains widely implicit, invisible, and unchallenged in society at large [37]. As the concept suggests, ageism entails discriminatory beliefs and attitudes against people based on their age, and while young people can also be subjected to ageism, its most predominant form targets older adults [11,38]. Ageist prejudices are so culturally embedded [39] that they can be held by young people, middle-aged adults, and older adults themselves [40]. Levy [41] reveals that permanent exposure to a culture of ageism causes people to deploy ageist stereotypes against themselves once they reach old age. Research shows how “remaining active”—i.e., staying physically fit, intellectually challenged, spiritually positive, or socially engaged—in later life is a way older adults cope with the negative imagery of old age while also allowing the dissociation of the older self from the stereotypical old group [42].

In times of increasingly ageing populations in most societies worldwide, addressing ageism and the potential for older adults’ organized contention based on their age identity merits greater attention [43]. Castells [44] argues that contemporary power relationships determine the social construction of legitimizing identities (individuals in groups and institutions that abide by the dominant elite’s imposed identities), resistance identities (holders of devalued or stigmatized identities who actively resist the elite-imposed principles), and project identities (the construction of newly defined identities that changes its constituents’ position in society). Since ageism is widely ubiquitous and unrecognized, it is unsurprising that a political identity based on old age has largely conformed to a legitimizing identity that abides by the dominant discourses on ageing. Although active contention against these imposed identities aiming at social change has been observed occasionally, it remains to be explored whether increased awareness of the negative social constructions of old age will pave the way for the proliferation of resistance and project identities in the upcoming years.

### 1.2. *Iaioflautas Social Movement*

Iaioflautas was born as part of an array of several grassroots collectives emerging from the 15M movement—internationally known as the “Indignados”—in Spain in 2011. The overarching 15M, which stands for May 15 as a commemoration of the first action that ignited the wave of protests that followed thereafter, reached most cities throughout the country as well as numerous cities abroad [45]. It assembled multiple voices in response to governmental measures on multiple economic, social, and political issues: from critiques against budget cuts, bank bailouts, political corruption, or youth unemployment to demands of real democracy, affordable housing, decent work conditions, or environmental protection, among many others [46]. The 15M movement started predominantly as a youth movement [46] but gradually became intergenerational [47]. Older adults joined the cycle of protests in sectoral initiatives supporting public health and education, social services, and water as a human right [48]. Iaioflautas was first formed in Barcelona in October 2011 and rapidly spread in different cities at the state level [49]. As such, Iaioflautas gained public notoriety in what was popularly recognized as 15M’s older adults’ wing.

The movement’s name came about as a vindication of the derogatory label “perroflauta”—literally “dog-flutes”—used by right-wing incumbent authorities and media outlets against young activists occupying Madrid’s main public square, Puerta del Sol, during 15M’s early days [50]. Iaioflautas adapts the label to older adults, “iaio” meaning grandfather in Catalan (to be precise, the label Iaioflautas combines the Catalan term for grandfather (iaio) and the Spanish term “flautas”, a lexical creation that reflects the bilingual character of the Barcelonian society). Therefore, Iaioflautas roughly translates as flute-grandparents. Their

fundamental claim demands the right to existence and decent living conditions related to the welfare state developed in the late Francoist regime and consolidated afterward, which they summarize in the motto “we are the generation that fought and got a better life for our children” [50]. The movement diverges from prototypical single-issue mobilizations as it explicitly articulates multiple demands: (1) no more public expenditure for bank bailouts; (2) quality public education, health, and services; (3) reversal of labor and retirement reforms; (4) rights to social housing and annulment of evictions; (5) a universal basic income; and (6) civil, political, and reproductive rights and liberties [49].

In advancing such demands, Iaioflautas performs nonviolent civil disobedience [49] through what they call “travesuras”—mischief. These “travesuras” draw from a repertoire of different direct actions, such as demonstrations, marches, occupations, sit-ins, or picketing in public and private spaces [14]. Mirroring the communicational tactics deployed by 15M activists, Iaioflautas members rely on digital media platforms to communicate their claims and disseminate some of their actions and activities [51]. The movement’s chapters in different cities post and share messages, audiovisual material, and links on their blogs, Twitter, Facebook, and Instagram accounts, many of which are currently active. However, Iaioflautas also resorts to organizational practices found in clandestine resistance against Franco’s dictatorial regime, which are based on secrecy methods and imply a high level of trust among members [14,49]. The movement, thus, blends knowledge and experiences of the past and present to perform peaceful resistance actions still to this day, despite the partial hiatus of its offline activities forced by the COVID-19 pandemic.

The unexpected mobilization of older adults in a political grassroots collective in the heat of a wave of social unrest, their publicly elicited generational identity and intergenerational concern, the societal reach of the issues they address, and the combination of old and new methods of political contention constitute an interesting case to inquire the identities older activists build, organize, and “connect” with. We describe how we attempted to tackle this identity issue in what follows.

## 2. Methods

We approached members of the Iaioflautas based in Barcelona, the movement’s place of birth, in 2013 to conduct individual in-depth interviews. We reached potential participants at the movement’s, at the time, usual meeting point—a cultural–political neighborhood association—following a snowball sampling logic with a focus on assembling a heterogeneous group in terms of level of involvement in the movement. Fifteen members confirmed their participation and were interviewed following a semi-structured format with open-ended questions addressing topics such as personal political trajectory, motives for participating, modes of participation, and the feedback they received from their social surroundings. Both authors agreed on the final outline of the questions after discussing the design proposed by the second author. Noteworthy, while we did not explicitly introduce the topic of identity in our questions, it constantly surfaced across the subjects discussed, suggesting that the relevance of identity matters in this group.

The first author conducted the interviews in locations of the participant’s preference (i.e., home, park, cafeteria, office, or cultural center) between July and September 2013, nearly two years after the movement’s acknowledged formation. Such a timeline brings insights to the movement once it has achieved a certain stability, which should allow a more nuanced perspective in the points of view of its members. The interviews were conducted in Spanish, spanning from 1 to 3 h in length, and voice recorded. At the outset of the interviews, participants were informed about the interview’s topic, goals, and outline and their right to withdraw from the interview during its course. They were also assured confidentiality in the management of their data and anonymity in the writing of reports and publications. A short survey was administered at the end of each interview to collect sociodemographic information for descriptive purposes. We followed the usual ethical protocols established in the university where the research was designed and conducted.

The group of participants included highly committed “core” movement members (i.e., members with committee duties and involved in all actions) and less involved, “peripheral” members (i.e., people with no responsibilities and occasional participation). In regard to the participants’ characteristics, they were mostly in their 60s at the moment of the interviews, with ages ranging from 54 to 84. The group was reasonably balanced gender-wise: seven women and eight men. Most of them were retired, while others were still in the labor market (either working or unemployed).

The first author transcribed the interviews verbatim and translated into English the quoted material in this article. We analyzed the transcriptions using ATLAS.ti version 8, adopting an inductive thematic analysis to identify the emergence of topics that build the overall story of the participants in this study [52]. With this in mind, we read the transcriptions and the first author coded them, focusing on the participants’ discourses that conveyed identity constructions and distinctions. After several iterations of discussion, we agreed on the codes and the general themes for the analysis. Finally, codes were screened for quotations.

### 3. Results

An underlying concept present throughout the different themes that emerged in our interviews is that of elderhood. Old age, the older self, and the older age group were constantly alluded to in the participants’ testimonies about their self-reported identities. Nonetheless, the articulation of elderhood was expressed differently according to the topic at stake, whether talking about the movement, their age peers, or the younger generations. Accordingly, we identified the following three themes stemming from the participants’ stories: (a) *Iaioflautas* as a collective and symbolic innovation; (b) inter- and intragenerational relationships; and (c) intergenerational solidarity as an identity motto. Throughout these themes, older activists alluded to older and younger age groups in negative and positive terms, suggesting the ambivalent nature of their discourses despite the overtly altruistic orientation of the movement. These themes and discursive elements are described below and supported by exemplifying quotes from the interview transcriptions. The participants’ pseudonym, gender, and age when interviewed follow each of the selected quotes.

#### 3.1. *Iaioflautas* as a Collective and Symbolic Innovation

Older activists in the study expressed great satisfaction with the formation of the movement, in general, and with their involvement, in particular. Participants manifested enthusiasm on the type of action group they were contributing to create, as it blends traits ascribed to traditional political organizations with novel ways of organizing, communicating, and mobilizing. Consequently, they experience the movement as a new kind of organization, regardless of their prior experience in political organizations. Gustavo (male, 70) illustrates the distinction of their movement with other associations:

The thing is *Iaioflautas* is a movement, but it’s also obvious that it’s minimally organized because we meet monthly, we have a coordinating group, a finance group ... [ ... ] But the difference is this: an organization is a structure from top to bottom; ours is from bottom to top.

The organizational dimension was often stressed as a decisive issue for the well-functioning of similar social movements. This concern is ingrained particularly among experienced members in political organizations. Although they celebrate the sizable uprising of a mobilized youth and take pride in being involved thanks to them—“I feel proud of being one of them, one of the eldest sons of 15M.” (Mario, male, 84)—they do not spare some criticism for their utter opposition to any form of political praxis known until then. Dalia (female, 74), a lifelong republican activist, pinpoints 15M’s lack of organization as a barrier to advancing the movement’s goals:

When I went to Plaça Catalunya [15M’s main protest venue in Barcelona], I saw a lot of good intentions, much rebelliousness, but no organization. And without

organization, there are no ideas. [ . . . ] Young people think that individually or with a friend . . . If there is no organization, ideas disappear.

Different from traditional political organizations, older activists in *Iaioflautas* also took pride in the freedom of participation the movement grants to its members partly due to its lack of legal ascription as an entity. Although organizational tasks demand some level of commitment, participants have an unbinding link with the movement and are free to join the activities and actions of their interest. Participants emphasized the movement's nonpartisan character and its pragmatic orientation, which attracts a heterogeneous composition of membership in terms of political adherence. Antón (male, 63), a longtime communist, held these features as the movement's defining identity. "The only thing that gets close to what we probably are is a collective imaginary of a group of people that meets up to achieve things," because "what matters is not what you bring [to the movement], but what you do." Accordingly, the interviews revealed how the movement constantly explores new ideas and experiments with methods and activities that keep them challenged and motivated. Antón (male, 63) further explained:

Now everyone is thinking about how we renew ourselves. [ . . . ] We already occupied a bank, a bus, the Catalan employers' association, the Ministry of Internal Affairs, we stepped in and got ourselves kicked out of the Catalan government's [head office], the German consulate . . . We can keep doing things like these, but we have to try new stuff.

Processes and practices such as these, which foster continued exploration, learning, and transformation, contribute to creating a sense of cohesion with the collectivity that has scant resemblance with other political organizations they have known before. In this light, *Iaioflautas* represents an innovative political initiative for older adults that infuses feelings of joy among its activists. "I'm happy of being in this movement. Which, as a communist, I cannot say, 'I'm happy of being in the Communist Party.' I think I'm where I should be, but I'm not necessarily happy. Here, people are happy and excited!" (Biel, male, 62).

Apart from the novelties participants experience in the movement, they also concurred that its core feature is that it is comprised of older adults. While their actions intend to denounce the government's cutbacks on social rights and protection programs, their original goal was to "recruit" older peers from the sizable, retired population in the country. Addressing this population provided the movement with a wide age range among members, as Hortensia (female, 54) and Mario (male, 84) illustrated. However, importantly, and as older adults themselves, most of them acknowledged the negative stereotypes commonly attributed to older retirees, expressing their annoyance with several labels and images of the old.

Culturally widespread ageist beliefs were a significant notion that emerged in the interviews. To the participants, such beliefs are inherently associated with retirement status and reasoned about the perceived uselessness of people in this role originating from their withdrawal from the "productive" labor market. Antón (male, 63) stated clearly how this belief is imbued structurally in society:

The system educates us for work, productive work. [ . . . ] And when the system arrives at the conclusion that we are no longer useful from a productive point of view, whatever that means, it makes it look as if our lives ran out.

He provides a further reflection on how this stereotype is drawn to a meso level, wherein organizations manage their elder members unequally depending on their position in the organizational hierarchy:

The unions: "you are useless"; the parties: "you are useless, you are retired." Bankers do not retire, even if they are 90 years old. But there is an attitude, I believe wrong, that once you reach a certain age, they cannot count on you [anymore].

Criticism abounded on the assumed disengagement of older adults from society once they enter retirement. Participants often elicited the image of elders spending their

spare time in “Casals de Gent Gran”—municipal civic centers for older adults—as the stereotypical portrayal of retirees. While such spaces usually offer a range of cultural, ludic, and sports activities to older citizens, our interviews suggested that the predominant image of its users are elders playing cards, dominoes, or “petanca”—bocce ball. Kristina (female, 58) argued that this image renders retirees as being “too comfortable” with their lives: “[there is a stereotype] of a certain kind of older people. For example, someone who worked all their life and now receives a pension and that’s it, there is nothing else . . .”. Adding to this socially disengaged portrayal is the notion of older adults as great consumers of public resources, a concomitant belief that combined generates attitudes toward older adults of being worthless or devoid of value. Gustavo (male, 70) illustrated this idea clearly:

I believe that older people are in a life stage that is viewed, like, as something negative, right? “You are no longer productive,” meaning, “What is your contribution? Are you going to cause us any trouble?” Because you are going to be sick more often than when you were 40 years old. You are going to cause more expenditure to the system. So, I am not saying this is [what] everybody [thinks], but I believe that a majority of the people that come behind us have that concept.

However, feelings of being perceived as boring, aloof, close-minded, or annoying seemed to be neutralized once older adults joined Iaioflautas. Indeed, participants described the way in which involvement in the movement restored a sense of value and self-worth among its members. Biel (male, 62) forcefully expressed how being part of Iaioflautas constitutes a process of dignification of older adults because:

It is not only that they are useful, but that they are needed. And that gives you a personal value in your own life that the system intended to make you lose. It brings back your dignity. You are no longer a being that is used and thrown away.

The reported testimonies point out that members felt happy and satisfied when participating in the activities and actions the movement carried out, fostering a sense of belonging to the group. Engaging in such activities “has brought me back to life,” asserted Mario (male, 84), a long-time syndicalist. It also prompted Jaime (male, 69) to “show that even if you are 69 years old, you are not dead and that you can keep on fighting.” The public display of their actions and resonance through legacy and digital media outlets seemed to infuse a sense of social respect and admiration toward the movements’ members, explicitly expressed via their social media platforms and on-the-ground actions:

When I say I am in Iaioflautas, they applaud me! Can you imagine [for] someone like me that has never joined anything; that has been in Iaioflautas for a couple of years? When we get to places, people applaud us! They get me here [pointing to her heart] (Olivia, female, 63).

Active involvement in the movement, thus, would provide members positive feelings of self-value and an opportunity to counter ageist stereotypes about older adults. Nonetheless, whether or not combatting ageism was a factor driving their engagement, their reports yield no consensus. While a handful of participants stated that they did not feel targeted with discriminatory attitudes based on their age, a few assured how decisive these preconceived ideas were for their involvement. Antón (male, 63) described how “the decision to occupy a bank is a conscious attitude of saying ‘Hey, I might be older, but I can still do things.’” Jaime (male, 69) further elaborated this conviction by stressing the way they adapt their actions to their physical capacities:

I believe we still have much to say and do. There are people 80 years old carrying their canes, and they are always there. [It is about] showing that fighting is ageless. What we have to do is adapt our fight to the physical conditions we have nowadays.

Some remarked how the focus on adjusting their activities to their capacities allowed them to be themselves. Luisa (female, 68) clearly emphasized, “I want to be older and



do things like an older person. I do not want to pretend to be younger.” Participants acknowledged and embraced their ageing selves and bodies, which shows in the public display of their interventions. Consequently, there is a general sense that the movement collectively contributes to debunking ageist stereotyping of older people, at least to some extent. Biel (male, 62) argued in favor:

I believe that Iaioflautas as a movement is indeed breaking stereotypes, [but] I do not know if [it is the case of] every Iaioflauta individually. Because in my life, I have met older people very concerned with [certain] issues. What I had never seen was a movement of older people.

Contrary to other participants, only Antón (male, 63) viewed widespread ageist beliefs as a standalone political issue. In his view, the system’s undisputed promotion of youth and vitality runs rampant throughout society, which excludes people who fail to match the model’s expectations. When reflecting on the ubiquity of this social norm, he highlights how it remains unseen even for most of his age-peers: “I know this can give the impression that it is not very social or political. But I disagree; I think it is very much.” Hence, while others neglected the sociopolitical angle of a predominantly ageist culture, to him, it was a profoundly ingrained political issue that deserved greater awareness.

### 3.2. Inter- and Intragenerational Relationships

Inherently linked to the participants’ enthusiasm for a movement such as Iaioflautas is their sense of inter- and intragenerational relationships. Being part of an older adults’ social movement entails an awareness of belonging to an age group that contrasts with other age groups. Moreover, intergenerational relationships have been a cornerstone of the movement since its inception in 2011. Although essentially comprised of older activists, several participants recalled the presence of old and young people when the idea of setting up a movement surfaced. Dalia (female, 74) remembered what her fellow retirees said:

Well, young people are demonstrating in the public squares, and we retirees are only known for playing bocce ball, dominoes, and going to centers for the retired. [But] it is inconceivable that we do not try to mobilize all those millions of retirees. With the current situation, we have to start doing something.

In this line, participants praised the young for 15M’s rise and subsequent mobilizations, referring to it as a trigger or a breath of fresh air. Some highlighted their spirit and creativity, while others remarked how they “brought back to the table values that were always there” (Antón, male, 63). Relatedly, young activists’ rejection of any established form of political praxis concentrated one stream of criticism from the participants. In their view, this may be related to youth’s lack of experience in politics, resulting in them neglecting the history of political ideas and struggles that preceded them. Although willing to work together, Hortensia (female, 54) revealed how this influences where she allocates her efforts:

I could join 15M and listen to what they say, but I would feel more displaced than in Iaioflautas. I do not feel discriminated [against] but displaced because there are people twenty, twenty-one, twenty-two years old. [ . . . ] And there are things they are, like, discovering that you already know that go nowhere.

Nonetheless, many participants’ main avenue of criticism targeted people refraining from the momentum of mobilizations, regardless of their age. On the one hand, some wished for greater involvement of younger generations on issues of their own interest (e.g., protesting university fees), while others aspired for more mutual support in each other’s actions. On the other hand, many demanded more significant involvement of their older peers and, interestingly, often demonized those who preferred to spend their time at the “Casals de Gent Gran”. This apparent contradiction in their discourse suggests the prominence of their identity as mobilized older adults in the Iaioflautas collective over that of the general old age category, a remark that serves as a distinction from the ageist imaginary of the stereotypical older person prevalent in this context. Participants

emphasized the urge to have more older adults mobilized in the streets from the pool of retirees and critically acknowledged the negative response from users of these “casals”. Based on his experience, Jaime (male, 69) expressed his dislike bluntly for these centers:

The “casal” has always given me the feeling that it is the entrance to the cemetery. It smells like death to me when you go to a place like this, seeing the people there playing cards, dominoes, spending hours, and doing nothing else. [...] From there to the grave.

Nino (male, 62) understands that the critical factor is “consciousness,” either long-established or recently awakened and that Iaioflautas assembles older adults bearing this consciousness. At the same time, he blames older adults for not connecting with the new generations. Dalia (female, 74) and Hortensia (female, 54) also criticize the older people in terms of being unable to attract youth to their causes, transferring or sharing their knowledge or delegating their responsibilities onto others. These criticisms also point to themselves and their fellow activists, who feel somewhat responsible for this neglect. This (self-)criticism exercise suggests the paramount concern older activists in the Iaioflautas pose on the younger generations, from middle adulthood to younger ages.

### 3.3. Intergenerational Solidarity as an Identity Motto

The movement’s foundational principle is protecting the younger generations’ welfare and living conditions. Accordingly, this guiding principle emerged in the discourse of all the participants as the primary motive for their involvement. Although some of their claims and actions addressed issues of interest of their age category (e.g., retirement pensions, care aids), these were also justified as an intergenerational matter since they were “defending their [younger people’s] pensions” (Dalia, female, 74) as well. However, their priority rested on their younger counterparts:

One thing I believe is important is to think about the generations that come behind us. Because I am not saying that we do not matter. But damn, what are we going to leave our children? A situation with no [labor] contract, [unfair] labor relations, no pensions. Are we going to leave them that? (Antón, male, 63).

Concern on the legacy they pass on to the younger generations was frequently evoked in the interviews. The inheritance of quality services, welfare programs, and public policies gathered the most concerns. This resonated particularly among those with more political experience since they were witnessing the dismantling of rights and benefits that they contributed to achieving in the past. These regressive measures generated a sense of empathy toward the younger generations that risk experiencing the adversities they faced in their earlier years: “Most of us are very old. We know how to value what has cost us [effort]. We understand the situation of today’s youth. And that is what motivates us. [...] That makes you take responsibility” (Mario, male, 84).

Some allude to a sense of moral obligation as a relevant drive for their involvement in Iaioflautas. “It is a way of being at peace with your conscience” (Gustavo, male, 70), or “[this way] I can look at myself in the mirror” (Biel, male, 62) are excerpts that reflect their sense of responsibility toward others. In this line, Dalia (female, 74) reported: “I am not one of those who sets before their self-comfort, being quiet at home, listening to my music, and isolating myself from society. It is not in my nature. I bear my responsibility as a citizen very deeply.”

Ultimately, the sense of responsibility for helping others—and more concretely, solidarity toward the younger generations—is the movement’s identity mark. It constitutes the primal definition of the movement as a whole and its activists in particular. To Hortensia (female, 54), more than being a group of older adults, “the motto that says ‘we are from the generation that fought and . . . ;’ that is what identifies you.”

#### 4. Discussion

Examining the subjective experiences of activists in a social movement of older adults allows us to inquire on the motives and identity construction processes that shape, and are shaped by, their involvement in a collective political endeavor. In this light, the participants' reflections suggest that their involvement in *Iaioflautas* is not driven mainly for older adults' benefit. Although they take action on matters of older citizens' concern and collaborate with contemporary pensioners' movements [53], their intergenerational focus is vastly echoed in our interviews. Scholarly accounts of older adults' solidarity movements have been documented [6,54], contradicting popular beliefs of older generations' selfishness and self-centeredness [55]. Activists in *Iaioflautas* make their intergenerational concern their motive and identity marker simultaneously, a feature that distinguishes the movement when compared to other similar cases.

Nonetheless, the backbone of older activists' multiple reported and suggested identities revolves around their sense of elderhood. On a personal level, older activists are aware of the physical limitations their ages might impose on them. However, they manage to sustain their participation by adapting *Iaioflautas*' interventions to their bodies' capacities. On the relational level, the participants adopt the shared frame of being "grandparents" protesting for society's "children" and "grandchildren," despite some participants reporting not having offspring. In addition, those retired and close-to-retirement acknowledged this social role when alluding to the broader social (productive) system, yet they rejected being lumped together with the stereotypical imagery of retirees. On the collective level is where older activists placed their preferred identity alignment, more specifically on *Iaioflautas*. The movement's collectively defined identity simultaneously alludes to people belonging to an in-group—i.e., older adults—committed to people outside the group—i.e., all younger generations—which amalgamates activists of diverse backgrounds, interests, and ideological stances.

Involvement in the *Iaioflautas* movement brought significant changes to the activists we interviewed on two different levels. On the one hand, the group's organizational aspect represents an innovative way for older generations to perform collective action as they introduce new dynamics of functioning inspired by contemporary grassroots movements—e.g., 15M itself, Arab Spring—into well-established forms of organized political action—e.g., demonstrations, rallies. *Iaioflautas* functions more as a fluid and organic entity rather than as a rigid organization, a feature that attracts the politically experienced and non-experienced. A prevalence of pragmatics over abstract ideologies, a focus on concerted action instead of personal background, an interest in constantly exploring and experimenting, and the freedom to partake in activities of each one's choice are all attributes that interviewees appreciate greatly about the movement. More specifically, the collective's open and flexible character are key elements that mark distances from the dynamics of traditional political organizations such as parties and labor unions, a finding that supports previous research on older adults' activism [34].

On the other hand, the active involvement of older adults in the cycle of protests in 2011 through a social movement of their own making served as an opportunity to cast light on the social imagery of the older population and dispute widespread ageist stereotypes held against their age group. Activists in *Iaioflautas* could counter extended assumptions about older people in Barcelona—and Spain at large—of being self-centered, close-minded, and disengaged from society, in part stemming from retirement from the labor market and the allocation of different public resources and services to this age group. The public display of the activities and actions of *Iaioflautas* reinstates a sense of self-worth and usefulness to its members and inspires feelings of admiration and respect in others, reinstalling a sense of dignity as older adults. Therefore, active engagement and involvement in the movement contribute to questioning the supposed passiveness associated with older people and help debunk, to some extent, negative stereotypes derived from this belief.

In this line, the participants' feelings of belonging to the *Iaioflautas* collective are notably more salient and predominant compared to their sense of belonging to their age

groups. This result supports previous research on the primacy of a collective identity linked to a social movement instead of a group identity based on their old age [12,23,24]. While the participants reveal a sense of sharing the same “generational unit” [56]—adults who lived through and opposed meager social protection and restricted liberties in a totalitarian context in the past—there are no reports on such commonality regarding older people as a social group. This finding echoes studies reporting a lack of a unified age-based identity among mobilized older adults [3,10,34], further contradicting unsubstantiated fears on the growing political influence of an older population acting as a homogenous bloc [57]. Heterogeneity in later life is a well-known fact in social gerontological scholarship [58], a stage in life where the usual political cleavages found in earlier stages—e.g., social class, gender, ethnic heritage, or partisan adherence—are pervasive as well [57]. Accordingly, the participants highlighted and positively assessed the heterogeneous membership in *Iaioflautas*. Furthermore, while reports acknowledge old age as the movement’s core feature, it is not the factor that summons its constituents onto mobilization since it has not been collectively framed as an oppressed group. Although the participants perceived bearing a stigmatized identity based on their age, this oppression has not been envisioned as a problem with political reach [12]. Provided that old age is not politicized as a discriminated social group, identity politics based on elderhood does not surface.

The non-politicization of ageism hampers the development of a collective consciousness of belonging to the same stigmatized group, even among mobilized older activists reporting being targeted with negative prejudices about their age. Widespread ageism is not regarded as a problem, and thus, it remains unchallenged. Therefore, older adults end up reproducing ageist stereotypes against other age peers as well as themselves [41]. In addition, the culturally pervasive mandate of remaining active well into later life contributes to perpetuating ageist beliefs against the relatively “inactive” [42]. Following this thread, the participants’ preference in setting their group identification on the *Iaioflautas* movement suggests a mechanism of distinction between active and inactive older adults and a dissociation from the ageist imagery of the old. This phenomenon is clearly observed when participants articulate their criticism of fellow older adults who spend their spare time in ludic activities at the “*Casals de Gent Gran*,” a profile that represents the stereotypical portrayal of the retired population in Barcelona. In this sense, even if challenging ageist beliefs was a driver for the engagement of a few participants, they did not deploy their resistance on behalf of the age group at large but rather on the social movement in particular.

Being politically organized and mobilized mainly for the benefit of the younger generations is the movement’s core claim and the participants’ primal motive for being involved. As such, it is not surprising that combatting rampant ageism against older adults is not featured in the movement’s public agenda. Nonetheless, the reported perceptions of being negatively prejudged due to their old age and the reproduction of ageist beliefs and attitudes upon age peers refraining from joining the movement raise some questions about whether ageism should be addressed more integrally in older adults’ social movements. In Barcelona—and Spain as a whole—old age has, thus far, largely conformed to a culturally imposed identity construction that is legitimized by its constituents and remains undisputed. However, if ageism becomes increasingly visible, questioned, and problematized, conditions might be fit for transitioning into a project identity that reconstructs the meanings attached to old age and relocates the position of its members in society, as Castells [44] argues. Given the ever-growing ageing of the population and the popularity of nonviolent civil resistance actions, there are interesting prospects for future research in examining whether ageism is tackled more from a political lens by (older) activists and whether an old-age identity politics crystallizes in this cultural setting.

## 5. Conclusions

Among the multiple identities older activists draw from their active involvement in an older people’s social movement such as *Iaioflautas*, the strongest and most salient one is

being a member of the movement. The collective identity crafted around the movement is greatly appealing to its members as it represents an innovative grassroots organization for older adults that fights for younger people. Consistent with the centrality of intergenerational solidarity, a generational identity also surfaces, especially among the participants with an extended trajectory in political participation. The “grandparent” identity is visible in the movement’s name and adopted by all participants regardless of the representativeness of this social role in each case. However, while a shared sense of elderhood is latent in these narratives, the heavily stigmatized old-age category prevents a more robust identification with the group overall. Ultimately, joining *Iaioflautas* serves as a distinction that separates members from the common portrayals of older people. Despite their diversity and heterogeneity, as long as widespread ageist stereotypes remain unchallenged and non-politicized, it is unlikely that an identity politics based on old age emerges. Our findings, thus, respond to the current gap in the literature on the disposition of multiple identities among older activists, a group that is understudied in non-institutional politics. Accordingly, we bring together social movement studies and social gerontology, two fields that seldom intersect in recent scholarship.

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## Article

# Place-Making through Media: How Media Environments Make a Difference for Long-Term Care Residents' Agency

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**Abstract:** This paper explores the unique relationships care home residents have with communication media. Drawing on findings from an ethnographic case study at a long-term care site in British Columbia, Canada, I describe how care home residents' everyday media practices are intertwined with their negotiations of longstanding attachments and new living spaces. The research draws connections between the spatiotemporal contexts of media use and residents' experiences of social agency. Long-term care residents in this research were challenged to engage with the wider community, maintain friendships, or stay current with events and politics because their preferred ways of using communication media were not possible in long-term care. The communication inequalities experienced by care home residents were not simply about their lack of access to media or content but about their inability to find continuity with their established media habits in terms of time and place. While most research about communication media in care homes has been intervention oriented, this research suggests that long-term care service and funding policies require greater attention to create flexible, diverse, and supportive media environments.

**Keywords:** older adults' media practices; older adults' media biographies; long-term care; social isolation in later life; social agency; person-centered care; information and communication technology (ICT); life course perspective; communicative ecology mapping; focused ethnography

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## 1. Introduction

The recent events of the COVID-19 pandemic have put long-term care systems, and their many flaws, in the public eye [1–3]. In British Columbia, Canada, depression, low levels of social engagement, and the administration of psychotropics without a supporting diagnosis are ongoing issues [4]. Person-centered care approaches that consider lifelong habits have been connected to reductions in the inappropriate use of antipsychotics and restraints in long-term care [5,6]. The few studies there are on care home residents' everyday media practices [7–9] have drawn attention to the differential attachments and identities that shape later life media choices. Such studies suggest that more individualized approaches to communication media services in care homes may help residents feel more at home.

Research shows that care home residents' sense of home is enhanced when routines are flexible, and residents can exercise choice and control over their daily activities and immediate surroundings [10,11]. Place-making has been theorized as the processes by which individuals' interactions with their social and material surroundings influence their sense of belonging, identity, and personal independence [12–14]. In care homes, personal possessions have been long noted to support place-making as they provide comfort and lend continuity to everyday lives [10,15,16]. Moreover, the social practices surrounding material belongings in care homes, such as displaying and gifting, can facilitate meaningful relationships among residents and between residents and staff [17]. Regular social connections both inside and outside the care home can be important for residents' quality of life and sense of purpose [18,19]. Care home residents' levels of social engagement are often low [4,20], which can negatively impact their overall health and wellbeing [21,22].



The past two years have seen strict visitation restrictions at care homes around the world due to COVID-19 infection prevention measures and studies report increased levels of loneliness, stress, and depression among care home residents [23–27]. For months at a time in many locations, care home residents have not been able to meet with their spouses or their children, or meetings have been restricted to brief exchanges through a window or doorway. A growing number of studies account the impacts of remote communication, such as video-calling, on resident–family relationships and resident well-being during the pandemic, primarily from the perspectives of family caregivers or staff [25,28–30]. Even before the pandemic, loneliness was prevalent among care home residents and a widely recognized issue for long-term care systems [31–33]. Yet, the standpoints of care home residents about their everyday uses of communication media have been largely overlooked (counterexamples include [7–9]).

Paradigm shifts in social gerontology have incited interest in the cultural aspects of older adults ‘doings’ with communication media [34,35], with research areas spanning older adults’ online communities [36,37], digital leisure practices [38,39], and uses of communication technologies for political activism [40–42]. Yet, when it comes to care homes, most studies about communication media have been intervention oriented. In intervention studies, researchers or practitioners implement a technology, service, or training programme that is new to the research context and evaluate its impacts on pre-defined aims. Media-related interventions in nursing homes include telepresence robots [43,44], video-calling services [45–48], hand-held radios [49], augmented newspapers [50], and touchscreen installations [51–53]. While outcomes vary, longitudinal studies suggest that the positive influences of interventions on residents’ levels of social engagement are often not lasting [54,55].

Where much prior work has tried to find the right communication technology for care home contexts, this research draws attention to the diverse and unique relationships that care home residents have with communication media. The paper builds an understanding of how care home residents’ everyday interactions with communication media influence their experiences of social agency. I present findings from an ethnographic case study conducted in a face-to-face format in late 2019 shortly before the COVID-19 pandemic brought about social distancing measures. Research was conducted with 12 individuals living at a long-term care site on Vancouver Island, British Columbia, Canada. I describe the intertwining of participants’ everyday media practices with living spaces and emotional attachments and argue that a diverse array of media and media support systems would support residents to find continuity with their established media habits and to gain a stronger sense of social and communicative agency.

## 2. Materials and Methods

### 2.1. Design

The research approach was based on a form of critical, collaborative ethnography that explores lived experiences—or the ways individuals ascribe meaning to and gain knowledge from their experiences—to build understanding on systemic forms of marginalization [56,57]. Unlike conventional ethnography, a case study design was used, and the research procedures and timeframe were delimited at the outset. Research was conducted in an intensive format over a two-week period along the lines of what Knoblauch has called focused ethnography [58].

The study was designed in partnership with a privately owned, long-term care site in an urban location on Vancouver Island, British Columbia. The research aimed to understand the everyday communication and social practices of residents with no or mild cognitive impairments and to devise practical solutions to support their social agency. Methods combined participant observation (57 h) and a three-part interview procedure (12 interviews) designed to promote collaborative reflection and problem-solving with participants. Findings were initially summarized in a practical report prepared for the site. The report accounted participants’ experiences using communication media at the site,

summarized their wants and needs for communicating and socializing, and relayed their specific requests for changes.

The research focused on the situation for residents with no or mild cognitive impairments who form a minority within the long-term care system in British Columbia [4] and whose social needs can be overlooked due to their low proportional representation [59]. In the context of this research, mild cognitive impairment refers to difficulties with memory, language, or thinking that do not severely impact an individual's daily activities or decision-making capacity [60,61]. In line with the Adult Guardianship Act in British Columbia, residents were presumed capable of making decisions unless the contrary had been demonstrated. In keeping with the research objectives, residents who had been designated a statutory guardian or who had been deemed incapable of managing themselves or their own affairs were not invited to participate in the study. No further exclusion criteria were used.

Fifteen eligible residents were invited to voluntarily partake in the study, which resulted in twelve participants:<sup>1</sup> ten women and two men, ranging from 57 years to 101 years of age with an average age of 84 years. Participant characteristics are summarized in Table 1. The study group involved 10 per cent of all residents at the site and 80 percent of residents who met the inclusion criteria. All participants were able to consent on their own behalf and provided their informed consent prior to their involvement in the research project.

**Table 1.** Characteristics of participants.

Participant <sup>1</sup>	Age	Living Situation	Personally Owned Technologies	Most Valued Medium
Barbara	73	Personal room	Radio	Phone <sup>2</sup> (in lounge)
Doris	91	Personal room	TV, phone	Newspaper (personal subscription)
George	73	Personal room	Cell phone, radio (doesn't work)	TV (in lounge) + cell phone
Helen	86	Personal room	CD player (unable to use)	Magazines (personal collection)
Irene	57	Personal room	TV, e-reader, cell phone	e-reader + cell phone
Lois	83	Personal room	Phone (needs help with outgoing calls)	Common spaces (talking to staff and residents in the hallways and lounge)
Mabel	94	Personal room	Phone (needs help with outgoing calls), Radio	Radio (in room)
Mary	96	Personal room	Phone (needs help with outgoing calls)	Books (personal collection)
Patricia	81	Shared room	Radio (unable to use)	Window
Ruth	90	Shared room	Phone, TV	Phone (in room)
Shirley	101	Personal room	Phone (needs help with outgoing calls), CD player	Phone (in room) + CD player
Thomas	82	Personal room	TV	TV (in room)

<sup>1</sup> Names have been changed to preserve confidentiality. <sup>2</sup> 'Phone' refers to landline telephone.

## 2.2. Context

In British Columbia, long-term care sites are publicly subsidized nursing homes for individuals who cannot obtain the care they need at home or at another type of residential facility due to cognitive impairment, behavioral problems, physical dependency, and/or complex medical issues. Long-term care residents in British Columbia typically stay in a facility for two-and-a-half years [4] and contribute a rate of 80 per cent of their after-tax

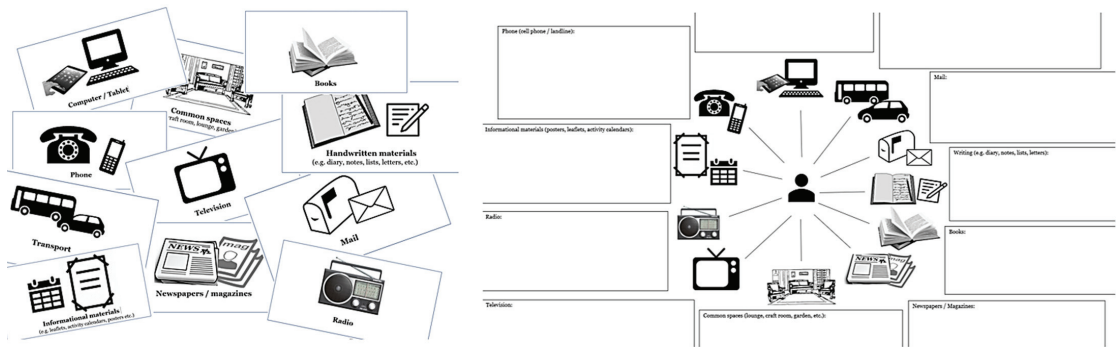
income. Publicly subsidized services at long-term care sites include accommodation, meals, laundry service, recreational activities, hygiene and medical supplies (including basic wheelchairs), and clinical support services. What comes out-of-pocket for the resident is telephone connection, cable television, magazine and newspaper subscriptions, companion services, and equipment such as hearing aids and walkers [62].

At the long-term care site of this research most residents resided in private rooms spread across five floors. While in principle each floor housed residents with similar dependency levels, in practice this was challenged by the fact that bed availability at the time of admission determined floor placement. In effect, the three floors where the research was conducted housed residents with differing levels of cognitive impairments. Each floor had its own dining area, a small television lounge and a small, themed room, such as a fitness room or library, while the ground floor had a larger lounge, an events room, and a garden. Most residents were not able to leave the floor independently and for some, walking up and down the corridor was a typical past time and a way to get exercise or a different view out the window. None of the twelve research participants could leave the site independently as per the advice of care management. While most participants spent most of their time on their own floor, three participants could independently use the elevator and visit the garden and lounge on the ground floor.

### 2.3. Methods

The interviews were on average 50 min in length and combined narrative inquiry, mapping exercises and a guided tour. Participants were prompted to narrate their experiences of moving into the care home and the changes they had experienced to their usual communication modes throughout their lives. Using tactics for narrative interviewing described by Schütze [63], I avoided cross-examination and used non-verbal encouragement. While Schütze's ideal of self-sustained narration, where the interviewee tells a lengthy and complete story without further prompts, was most often not obtained, immanent questioning was used to create an open space for respondents to indicate what was most relevant for them.

The second phase of the interview involved two mapping procedures. First, respondents were asked to describe in detail the people, places, and activities of their daily lives which I mapped out on a large piece of paper. Second, drawing on the communicative ecology mapping used by Hearn et al. [64], I presented respondents with picture cards of 11 media that could support communication and/or information retrieval: television; radio; telephone (including cell phones and landline phones); computers and tablets; books; newspapers and magazines; mail; writing materials (e.g., diaries); informational materials (e.g., activity calendar); transport (e.g., bus tours, family members' cars); and the care home's common spaces. Respondents identified the media they valued most, and each medium was discussed in detail. I used the participants' own way of speaking to frame questions. Attention was given to the interrelations of media and reasons for non-use [65]. Assets, drawbacks, and current and former use patterns were recorded on a large sheet (Figure 1 below). Where possible, participants verified the information displayed on the mapping sheets.



**Figure 1.** Picture cards and mapping sheet used for communicative ecology mapping.

For the final portion of the interview, most respondents<sup>2</sup> gave a guided tour of the places in the care home where they socialize and use communication media, along the lines of the indoor walking interviews described by Ratzenböck [66]. As Ratzenböck found in her interviews, the guided tours allowed respondents to revise, contradict, or emphasize the information they had given, which resulted in a more complex portrayal of their relationships with different media.

Participant observation was conducted for 57 h spanning different times of the day from 8 am to 8 pm. I spent time in the common spaces, partook in a wide range of activities and events, and engaged participants in casual discussions about their daily activities and about my analysis. In this way, the participant observation provided a space for collaborative reflection on the research findings ([67], pp. 173–178).

The research generated 235 pages of transcribed interviews, 15 pages of interview reflections, and 29 pages of participant observation notes. All data files were uploaded to Atlas.ti qualitative data analysis software for organizational purposes. The analysis was conducted in two phases. In the first phase, I inductively moved from codes using participants' own phrasing to thematic categories and concepts [68]. Following the initial emergence of a code hierarchy, I re-analyzed the dataset from each participant to find causal strands within individual participants' standpoints. This second phase of the analysis was used to draw connections between present day media practices and participants' lifelong habits.

### 3. Results

#### 3.1. Negotiating New Social Spaces and Dependencies

Most participants found the social environment in the care home challenging. Friendships with other residents were not common among participants. George, a 73-year-old man who had been living in the care home for five months found it difficult to talk to most residents on his floor: "I'm so frustrated. I hate it here. The [staff] are nice, the majority of them are ... I've been friendly with [two residents] but the other [residents], we don't associate." George found the care home "quiet" and explained most residents spent the day in their own rooms: "I sometimes wonder what they're doing, but I don't know." Similarly, 81-year-old Patricia explained, "There's things I sometimes think I want to talk about, but I don't know who to talk to, so I just keep it in my head."

Other participants, such as 90-year-old Ruth and 86-year-old Helen, felt the ambience of the care home was so institutional that it was difficult to socialize. Helen explained, "It's hard to meet people when you live in a place like this ... it just seems like it's not as easy to get to talk to other people I guess." Ruth explained that mealtimes felt rushed and functional: "It is very quiet, nobody talks, except the staff."

Ruth previously lived in an assisted living facility, where "the ambience" and the way they were treated was much different. She explained, "I didn't decide to come here, and I

don't think my son knew what this was . . . I didn't realize that this is the end of the line pretty much." Shirley, a 101-year-old woman who had also moved from an assisted living facility, found the adjustment difficult as there were few opportunities for socializing in the long-term care home.

I was in other places [assisted living facilities], and this is oriented mostly towards people with dementia . . . People just don't do it here [make friendships]. Before I broke my hip, I was getting around in my wheelchair by myself and, uh, by just peddling my feet, you know. I can say there's hardly anybody up and down the aisles that I know anything about except maybe some of the ones that we are seated with at the dining room . . . but you don't [get to know them] either because your food comes, and you have to get on with it and get the meal over with because they need the room. . . . It's not very social . . . It's not that I'm not that friendly. They all just go back to their rooms, and that's what it is.

While daily recreational programming was offered, such as singalongs and art classes, ten of the twelve participants explained they rarely or never attended in-house activities apart from the fitness class. Seven of these participants further explained they found it difficult to communicate with their peers. Eighty-two-year-old Thomas explained, "I more or less try to keep to myself anyway because I'm not in the same state as most of them in here." Thomas found the decision to move into long-term care a difficult one, one which required him to recognize his dependency:

For two or three years I just declined it [moving into long-term care], I just stayed away from it. You don't want to give up your individuality and your independence. So finally I reached a point where I agreed with them that I couldn't handle things for myself anymore . . . The more I get into this place, I find that I have a feeling for a certain comradery with staff because they seem to understand where I'm coming from . . . You know, because it's quite a change, as I say, giving up your independence. I won't say losing it, but giving it up.

Similarly, 94-year-old Mabel explained, "Very hard, I found it very difficult [moving into the care home]. I don't know why. I guess when you get up in years you've been gradually doing it, and having your say, and doing pretty well what you want, it becomes a little hard when you get a little older."

That most participants felt the care home lacked a favorable social environment made the adjustment more challenging. However, two participants, 73-year-old Barbara and 83-year-old Lois, found meaning in their relationships with their peers and regularly partook in the classes and events. Both had been caretakers in their working life, including the caretaking of older adults and individuals with intellectual disabilities. Barbara explained, "A lot of [the residents] can't talk . . . so that they make sense . . . But I pay attention and I listen . . . I'm helping a lot of people . . . I just talk to them as easy as I can, and calmly. And I get them to understand." Similarly, Lois explained,

It took me a little while to get used to the people here. . . . and [then] I thought, you know, I am helping someone . . . it gives me something to do besides sitting in the [room] . . . guess I'm more or less here to help people and this is what I want.

### 3.2. Media Habits and Attachments

Most participants had developed strong attachments to a communication medium, whether television, newspapers, magazines, or the view from a window, which played a central role in their daily lives. Respondents made explicit connections between their preferred media and their former habits and values or an important event in their lives. Thomas, for example, who spent most days in his room watching his television explained, "My TV's there, it's my best friend . . . I would just prefer to just be here with my best friend." He recalled the excitement when television first came into his life:

We used to read the comic books about TV. In the comic books, people had TV! “Well, there it is there, they’ve got it!” It was so far advanced and everything, but nobody ever had one. And then all of a sudden it came out.

Mary, a 96-year-old woman, considered herself “not a TV watcher.” She explained that along with her husband she had been an “outdoors person”. While she would like to “explore the neighborhood,” she also enjoyed the quietude of her own room for reading—“I read an awful lot, oh yes”—and rarely went in the TV lounge. Patricia also rarely went in the TV lounge but in her case, it was because she saw it as a male space: “All the men go in there. It’s for the men. . . . Sometimes I hear about something I might want to watch, and I don’t have a TV, but it doesn’t bother me that much.”

Respondents described the importance of watching or reading in an environment that fit with their usual habits. George, for example, was an avid television watcher but did not want his own TV as he was not accustomed to spending time alone: “My son was going to bring in a TV in here for me, but I don’t want it . . . I’d rather be in there [the TV lounge], than just in here [his room].” George considered himself a social person, and preferred to watch television in a social setting even though this was often disruptive: “[Another resident] will roll up and you’re sitting there [in the TV lounge], and he’ll roll up and turn it off, and then take off, and all that . . . And he makes so much noise.”

Helen had also been socially active throughout her life with large friendship networks. As George, she did not want to be on her own. She spent most days reading in the dining room. Lately she had been trying to read a novel, but this was becoming difficult, and she was increasingly turning to more pictorial magazines. She explained,

I’ve been reading it [a novel] forever it seems like . . . and I keep going back and going over it again. I’m not trying to do that, but it’s what happens. I always have to go back and see how did that come about.

She carried around a pile of “Hello” magazines in her walker, a magazine series she had a longstanding affinity for: “You know, my mother always made sure that I was on this [the Hello magazine subscription] list”.

Similarly, 91-year-old Doris spent her mornings looking through sections of the newspaper that aligned with old habits: “I’m particularly looking at Thrifty Foods [grocery store flyer], I used to order from them when I lived in my apartment.” Doris didn’t consider herself a social person and was content spending most of her time in her room next to a table full of books, magazines, and the daily newspaper to which she subscribed. Doris was well-adjusted to living in the care home. Surrounded by familiar furniture and reading the same newspaper as she had at home, Doris experienced a sense of continuity of place.

Participants also developed new habits to adapt to the changing circumstances of living in long-term care or their changing abilities. Irene, a 57-year-old woman who was experiencing progressive degeneration of manual dexterity found it difficult to hold and turn the pages of books. She had been an avid reader throughout her life and had developed a strong attachment to her e-reader, which she stored under her pillow.

For two respondents who did not watch television, the window had become an important communication medium that provided access to the outside world. Both respondents had formed a bond with a particular viewpoint. Helen preferred her bedroom window where she watched the float planes land. On the guided tour, Patricia led me into a small library across from her room. She hadn’t looked at the books or sat on the couch in this room, but she went in a couple times a day to look out the window where she could see children playing.

### 3.3. Making Outside Connections

Whereas Patricia and Helen found comfort in seeing daily city life out the window, the window aroused anger and frustration for George. Looking out his bedroom window, George explained,

Something's gotta give for me. You know I look at that building over there, and I got a friend, a few years ago . . . and he stayed there and we went for a breakfast there every morning, the one on the left . . . and it was pretty good. And so, it was a lot of fun, but, I'm stuck here.

George used to enjoy walking around the neighborhood. He would go on long walks with his dog. This freedom to walk the streets was one of the things he missed most since moving into the care home. He explained, "I'm hoping to get out of here soon." Similarly, Thomas explained he enjoyed getting out of the care home to see the changes in the city.

I've lived in the city all my life . . . . Every part of the town has changed to some degree. Every part. It's a lot of years you know. The thing I do, I like to get a bus trip . . . go around and look at the changes.

The care home arranged weekly scenic bus trips which came at a cost of 25 dollars to residents and were typically offered to the residents of each floor once a month. While some residents appreciated this opportunity, such as Doris—"I go on every one [bus trip] I can"—many residents couldn't afford them and some found it frustrating that they couldn't get off the bus. George explained, "I won't go on them again . . . they sit on the bus all the time. I wanted to get out of the bus, and I wanted to walk around." Ruth was also more interested in walking the streets than sitting on a bus. She explained, "The fact that I have to have somebody take me [if she wants to leave the care facility], it's very restrictive. Because I know I could walk over to the Safeway [grocery store] and it would be nice."

Ruth paid for costly companion services when she had appointments, but otherwise she rarely had the opportunity to leave the care home. While she was from Ontario originally, she had a good network of friends in Victoria, but lately she rarely saw them. She felt this was because there were no appropriate places to host visitors—"There's no place really to sit!" She explained further about the regularity of visitors she received:

Since I've been in here, it's [the number of visitors she receives] not as much as in the [assisted living facility]. Because when I was in the [assisted living facility] I could invite them for lunch, afternoon tea. It was a more normal life for me, whatever normal is.

Since moving into the care home, phone calls had become the most important communication mode for Ruth, as she rarely spoke to staff or other residents, or received visitors. Most days, the only conversation she had was by phone with her sister in Ontario. However, Ruth lamented that there was no privacy for her calls as she lived in a shared room.

Barbara also expressed concern about the lack of quietude and privacy for phone calls. While she didn't have a phone in her room, nightly calls from the phone in the downstairs lounge allowed her to have a shared routine with her husband: "At six-o'clock [her husband] knows the call is coming. He's got his chair. He's got his pot of coffee made." Similar to Barbara, Lois regularly chatted with her peers in the care home; she also valued her phone to keep in touch with those outside the care home: "I still converse with my girlfriends, they always phone me and tell me what's going on. So, it's fine." She explained further, "I like the phone because I can hear their voice . . . I like to hear the voice and how they are." Thomas who didn't like the phone found it useful while living in the care home, "I could do without [the phone] if I had to . . . I don't like phones, I never have. But I got to get in touch with my daughter, so I have it."

Wi-Fi was available in all rooms in the care home but was not used by participants. Six participants had formerly used a computer, four of whom described using the Internet for emails or information searching. Yet, as there was no computer room in the care home, these participants did not have a familiar way to access the Internet. George, the only participant with an Internet enabled device, a smartphone, used his phone for photo taking and voice calls only. He explained,

Oh, I don't know [if he can access the Internet on his phone]. I don't like texting. I phone. My eyes aren't the greatest. I can't see the small print and I can't make my finger go like this. You know, I don't bother.

Other participants described difficulties using landline phones. Shirley explained, "I usually try to get somebody to help me because I can't see the . . . numbers. And sometimes I try to do it myself and then they say, 'Hang up and try again,' type of thing." Mary explained, "She's [her daughter] moved, so she has a different phone number. And for the life of me I can't remember it, and I wrote it down somewhere and I can't find it."

Patricia also didn't know how to contact her family members. She didn't have a phone in her room and wasn't sure how to use the public phone or what numbers to call. While she felt isolated—"Nobody hardly knows I'm here!"—this did not cause her much concern, as she habitually spent a lot of time alone: "I kind of stick to myself. But I've always been like that . . . and I got my coloring." Without a television or newspaper subscription, Patricia relied on mindfulness coloring books that her son had brought in. While she enjoyed coloring, she also liked reading the news: "I used to [read the newspaper], but I don't get one. Sometimes I like to, if I see one lying around, I pick it up to see what's going on . . . I like to have something to read sometimes."

Lois and Barbara also found it challenging to access news media since moving into the care home. Lois explained, "I like watching it, I like to keep up with the news, and stuff, but here it's hard." Lois didn't have her own TV and as half of the participants in this study she did not know how to use the TV in the lounge. While the TV was on in the lounges throughout the day showing a variety of reality shows, comedies, dramas, and films, residents usually spent the evenings in their own rooms or at an organized event, such as a movie night. The only respondents who watched news programs did so in the evenings using their personal televisions.

While Barbara knew how to use the TV in the lounge, she felt excluded from news programs as she couldn't watch them in the comfort of her own room in the evenings. She expressed concern about her dwindling levels of civic engagement over the four years that she'd been living in the care home. Barbara couldn't afford any of the 'extra' services. While she accepted regular interruptions to her evening calls with her husband on the public phone as part of group living, she particularly missed not being able to keep up on news. She explained,

I don't have a TV in my room, I don't get the newspaper cause it costs money, and I don't have any, so I don't know what's going on in the world. I mean I read the newspaper when I find one laying around . . . I mean I don't know really what's going on, and who's the best person [to vote for], I mean I've got no way of knowing. I mean if I watched the news on a regular basis, yeah, I would figure it out, but I don't have a TV.

#### 4. Discussion

Communication media not only were tools to facilitate communication or retrieve information, but also provided a form of friendship or a source of comfort. The relationships individuals develop with personal media devices such as mobile phones have been found to involve a range of emotional responses [69]. Among older adults, research has shown that emotional attachments towards digital technologies typically arise from frequent use, feelings of dependency on the device, and a high-level of social interactivity facilitated by the device [70]. In the long-term care context of this research where emotional bonds with traditional media were commonplace, these bonds often did not relate to the medium's level of social interactivity or to its perceived necessity. Rather, I suggest, the attachments I saw, which were recreated through frequent use, arose in connection to lifelong habits and experiences.

The spatiotemporal structuring of media use was an important facet of residents' efforts to rebuild continuity [71] with former social practices. This related both to social surroundings and to daily routines. George, for example, prioritized the habit of watching



television in the social space of a lounge over having undisrupted and personal access to TV programming in his room. While Mary and Doris enjoyed reading quietly in their rooms, Helen who identified as a social person liked to sit in the most socially active place—the dining room—while reading. Access to a diverse array of media supported residents to adapt to their changing abilities in ways that were meaningful, such as Irene who replaced paper books with an e-reader, and Helen who increasingly turned to her favorite magazine as novels became difficult to understand.

While other studies suggest that television is overused by care home residents [52], most participants in this research did not watch TV during the day. Other than Thomas who considered his TV a friend, participants with personal televisions watched evening programs, particularly the news, as they had done before moving into long-term care. As found by Östlund [8], television use reflected previous habits and provided comfort by giving structure to the day. Having a personal television was important in this sense as it provided access to evening programming in a private, comfortable space.

Some respondents were challenged to find continuity with lifelong media habits due to the lack of individualized support with communication media and the costliness of in-room cable television, private phone connections, newspaper subscriptions, bus trips, and companion services. While Ruth and Barbara did not have a private space for phone calls, Patricia and Helen were not able to use the phone at all. Moreover, participants without their own TVs or newspaper subscriptions felt cut off from world events. Personal ownership of media provided the flexibility needed for some respondents to recreate old habits and this supported them to make connections outside the care home.

Outside connections were important not only for friendship and recreation but also as an avenue to express an *extra-care* home identity. Participants such as Thomas, Ruth, and Shirley found the move challenging because they felt ‘different’ than the typical care home resident. Routinized, daily phone calls with family members helped reduce feelings of separation from external social worlds. Most participants did not feel socially engaged within the care home because making friends was difficult. Yet, there can be much diversity in the significance this has in residents’ daily lives [72]. Participants in this research had varying expectations and desires for friendships which related to their life course experiences and daily habits. While Barbara and Lois reconnected with former work roles and found meaning in helping their peers, Doris and Mary did not feel the need to socialize with their peers as they enjoyed the familiarity of solitary reading. Other participants, such as Ruth, George, and Helen, who sought out companionship, were frustrated with the institutional and unsocial ambience of the care home.

Research has shown that flexible routines that give residents control over the timing and place of their daily activities can make long-term care feel more home-like [10,11]. This paper draws attention to the importance of enhancing flexibility in the routines surrounding communication media use in long-term care. As found by Swane at a Danish nursing home [7], when residents could reintegrate their familiar habits of reading and watching into their daily routines this supported them to recreate a sense of place and belonging in the care home. What this research further shows is that the spatiotemporal practices surrounding media use in long-term care are intimately connected with residents’ levels of social and civic engagement.

The communication inequalities participants experienced were thus not simply about a lack of access to media or content but about the spatiotemporal contexts surrounding media use. When participants could not find familiar and comfortable ways of using media, this became a use barrier. Barbara and Patricia, for example, felt cut off from world events not because news programs weren’t available, but because they could not watch the evening news in the comfort of their own rooms. Reading the newspaper over breakfast or phoning a friend for a private chat were familiar ways of feeling engaged that were no longer possible for some participants. Findings suggest that the personal ownership of information and communication devices can help give residents the flexibility they need to meaningfully engage in social life.

In line with funding policies in British Columbia, the care home offered a range of in-house recreation activities free of charge, from crafts classes to singalongs and bell ringing. While these activities were attended by many residents, most research participants felt the activities were not relevant to their preferred modes of social engagement. What participants lacked, and what was not funded, were personal televisions and phones, newspaper subscriptions, companion services for neighborhood walks, and designated staff hours for support with media devices. This had implications not only for residents' wellbeing but also for their levels of social and civic engagement.

## 5. Conclusions

This paper explored everyday experiences of communicating and socializing among 12 residents with no or mild cognitive impairments at a long-term care site in British Columbia, Canada. Findings showed that long-term care residents can be challenged to engage with the wider community, maintain friendships, or stay current with events and politics because their preferred ways of using communication media are not possible in residential care. Participants of this research would have benefited from more control over when, where, and how they use communication media, and thus from funding for the personal ownership of media technologies and from funding for regular one-on-one support with communication devices. While most research about communication media in care homes has been intervention oriented [43–53], this paper suggests that long-term care service and funding policies will require greater attention to create flexible, diverse, and supportive media environments. The findings presented in this paper reflect the experiences of 12 residents at one site and, while not generalizable, they show that the spatiotemporal contexts surrounding media use can be an important factor for care home residents' social and civic agency.

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## Notes

- <sup>1</sup> Two residents declined and one was in hospital at the planned interview time.
- <sup>2</sup> Two interview participants did not give a guided tour: one was bedridden at the time of research and the other did not usually move around the care home and preferred to stay in the room.

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Article

# “With Friends Like These”: Unpacking Panicked Metaphors for Population Ageing

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**Abstract:** Age studies scholars have long noted problems with using a tsunami metaphor to describe population ageing. Age-friendly offers a new way to respond to an increase in older adults. Though critical gerontologists identify the related movement’s limits, “age-friendly” itself is rarely recognized as a metaphor. This paper proposes that, while the metaphor of age-friendly is more benign than that of the tsunami, it still portrays an ageing population as a homogenous problem to be solved through morally obligatory individual actions, thereby participating in a form of age panic. The analysis draws on a humanities-based close reading of the World Health Organization’s 2007 “Global Age-Friendly Cities: A Guide.” The method uncovers attitudes that anchor the metaphor and hamper the movement’s effectiveness, particularly when trying to reach people who have not already been well served all their lives. The emphasis on a narrow version of active ageing feeds a neoliberal imagination that affects how value is assigned to an ageing population. That underlying emphasis needs to shift before new metaphors, policies and practices for population ageing—that allow for the variability and uniqueness of late-life experience—can take hold. How might we reconceptualize the ageing population if we focus on contributions and meaning instead?

**Keywords:** active ageing; age-friendly; age panic; metaphor; neoliberal imagination

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## 1. Introduction

The silver tsunami, a persistent metaphor to describe population ageing, encourages people to dread and fear not only an increase in older adults but, above all, an increase in so-called frail older people and, even more so, people with dementia. The metaphor is effective because it has shock value, it relies on the idea that people do not want to grow old if doing so involves physical or mental decline, and it implies that the sheer numbers of older adults will soon enough swamp younger generations, preventing the relatively youthful from their otherwise expected contributions, especially to the economy. This ubiquitous comparison to natural disaster feeds what I call age panic, a concept that draws on an elucidation of moral panic [1–3]. The incited panic makes ongoing good health, narrowly defined, the moral responsibility of the individual ageing person.

Critical age studies scholars identify this highly negative and obviously ageist tsunami metaphor as a tired ploy for attention to a set of pressing issues, usually to economize biological, social, and cultural ageing [4–12]. Contributing to that discussion, Amanda Barusch acknowledges attempts to find a better metaphor (than the tsunami) for the ageing population, explicitly referencing the World Health Organization’s (WHO) “benign metaphor of city as friend in its initiative to promote ‘age-friendly’ communities” [8] (p. 183). Barusch thereby raises the essential point that an entire movement created to resist ageism relies upon a metaphor that is rarely recognized as figurative language.

The tsunami and age-friendly metaphors invoke seemingly disparate images of natural disaster and interpersonal relations to assign responsibility for ageing well to the individual. A metaphor is a figure of speech that yokes together two dissimilar objects—that literary scholars name the tenor and the vehicle—without adding a comparator word such as “like” or “as.” The comparisons thereby emphasize both the differences and the similarities

between the two. I here follow an age studies tradition of metaphorical analysis in pointing out that the connections are not merely linguistic but also have cultural, material, and social consequences because of the concepts they rely upon [7,9,12]. As George Lakoff aptly explains of similar everyday metaphors, “the locus of metaphor is not in language at all, but in the way we conceptualize one mental domain in terms of another” [13] (p. 202). At first glance, the mental domain of the tsunami metaphor is quite different from the mental domain of the friendly metaphor. However, each metaphor draws on its vehicle to compare these domains—of natural disaster and of amicability—with the effects of an ageing population that they reduce to a set of health care and financial problems to be solved. Barusch is right to indicate that we need new metaphors to describe the effects of population ageing. However, to develop better ones, a broader conceptual shift is necessary. New metaphors—and practices—for ageing are more likely to become possible when we stop reducing the ageing population to a set of problems in need of solutions. Rather than joining Susan Sontag in indicting metaphorical thinking, it is imperative to challenge the thinking that motivates dominant metaphors, some of which—such as the tsunami—are more widely acknowledged as figurative than others—such as age-friendly [14] (p. 3).

## 2. Materials and Methods

To increase understanding of the mechanisms that incite age panic and provide a foundation for strategies to combat it, this article adapts humanities methods to explore the possibilities and limitations of the seemingly benign metaphor of friendliness, promulgated by a WHO-inspired movement that responds to the population ageing that drives the tsunami metaphor. The argument is grounded in an analysis of the WHO’s “Global Age-Friendly Cities: A Guide,” which lays out how their framework for age-friendly communities relies on and promotes active ageing. The text is ripe for analysis because it reflects consultations that provided the foundation of the age-friendly movement. As such, it conveys not only an official organization’s position but also the spirit of what people able to attend consultations shared. The Guide continues to be a central reference in the formulation of age-friendly plans for municipalities and communities who seek age-friendly designations, so it remains a powerful document that invites interrogation of its powerful implications. In particular, the reliance within the Guide on active ageing poses a problem because it turns active ageing into a moral imperative to the extent that the age-friendly movement ironically risks increasing age panic rather than assuaging it as intended [15].

To elucidate the implications of the age-friendly metaphor, I draw on a literary technique to offer a close-reading of the 2007 Guide that launched the age-friendly movement. Those original guidelines persist as a source of information and ideas for communities seeking age-friendly status, even though they are continually revised and updated. Close reading derived from literary studies requires careful, sustained attention to form, patterns, language choice, syntax, themes, and figures of speech. It thereby offers a way to understand the Guide fully and access the at times hidden motivations behind the movement the Guide buttressed. That process allows for a way to think about the implications of implementing practices based on a Guide that is unintentionally rife with bias. Additionally, it makes it possible to do so in a way that does not blame or condemn individuals for their role in creating a document under constraints and based on a genuine attempt at consultation. While the original emergence of close reading resisted context, my adapted approach draws on close reading techniques to illuminate and evaluate the broader milieu in which the Guide operates, such as the austerity context within which consultations took place (which I discuss in more detail in Section 4.2). Recognizing the ideological context in which age-friendly has developed heightens the significance of the textual findings and may help improve the movement’s reach. Better understanding the less obvious implications of the age-friendly movement offers a basis from which to reorient age-friendly actions towards the urgent need to work with groups of people—such as migrant workers, people cycling in and out of poverty, care workers, people with dementia and other forms

of mental illness—who have not benefited from a cumulative set of advantages over time. Those communities within communities fall just outside the purview of many age-friendly projects, despite age-friendly councils and committees' best intentions [16].

I first review critical perspectives from age studies scholars on the implications of the tsunami metaphor, situating it within core concepts from the field. I then offer the close reading of the WHO's "Global Age-Friendly Cities: A Guide" to explain the implications of the age-friendly metaphor as both departing from and reinforcing the assumptions behind the more harmful tsunami metaphor. Finally, I conclude by situating these figures of speech in relation to active ageing and age panic to show how those troubling approaches must be fully understood and interrogated throughout what the WHO has declared the United Nations Decade of Healthy Ageing 2021–2030. That reckoning must occur so that we can genuinely develop more equitable policies and practices for ageing in the twenty-first century, based on the contributions and meaning that an ageing population brings.

### 3. Metaphorical Thinking about Population Ageing

#### 3.1. *The Tsunami Metaphor*

It does not require much analysis to conclude that the tsunami metaphor is inaccurate, harmful, and demands reinvention, resistance, or rejection. As Stephen Katz writes, "the aging population . . . is projected as a monstrous entity set upon destroying welfare states and generational futures" [17] (p. 18). The tsunami metaphor hosts the threat that global population ageing will result in a deluge of needy older adults whose decrepitude will swamp with obligation and debt the younger generations who wait helplessly on the shore without hope of secure employment, adequate health care insurance, nor the pensions supposedly enjoyed by the "silver foxes" and "tired hags" who are riding the wave. In the ongoing context of austerity, the behaviour of these "greedy geezers" is intensely threatening because of "debt morality," by whose terms to characterize any social group as a drain on resources is to damn them [18].

Perhaps this all sounds logical. An understandable rhetorical move at this point in popular articles that rely on the concept of population ageing is to cite alarming statistics. The repetitive reliance via the tsunami metaphor on such apocalyptic demography [19] ignores the significant ramifications of literal tsunamis and misinterprets changing dependency ratios. As Andrea Charise has most prominently argued, "the fatal immediacy of the [2011 Japan tsunami] should shock us out of this crude, familiar metaphor. For what could be more 'abstract' than comparing the instantaneous destruction of cities, food and water supplies with the progressive aging of society?" [7] (p. 2). Typically, alarmist demographic predictions indicate a stark increase in dependency ratios, simply described as the number of productive adults available to support the number of supposedly dependent adults. However, as Barusch points out, "children are left out of the dependency ratios used to amplify the aging tsunami message" [8] (p. 182). Including children under fifteen switches the demographic prediction to a decrease rather than an increase in the dependency ratio. Toni Calasanti digs more deeply into the ageism behind the interpretation of dependency ratios, arguing that "both the total and economic dependency ratios were higher in the 1970s, yet I am unaware of government or pundits complaining of too many children then, or the need to cut back on spending on youth" [12] (p. 204). Calasanti also emphasizes how dependency ratios define contribution solely in terms of paid labour, ignoring unpaid labour, let alone other forms of human value.

What lies beneath the tsunami rhetoric is, of course, deep ageism, a casual or systematic set of prejudices and discrimination based on age. However, it is also gerontophobia, which implies a fear of older people and a fear of being recruited to become one, together with the moral imperative to refuse to become a certain kind of older person [20] (p. 21). The tsunami metaphor relies on assumptions about contribution, deserving, and consumption, abandoning old age to a limiting narrative of decline [21]. Further, that decline story is relevant not only because of the apparent decay of the body but also because it foregrounds how older adults will burden the economy through increasing over-reliance on health care



systems, understood in terms of financial cost. Fear arises from the mistaken idea that these older people will further sap the more valuable time of younger generations who should themselves both contribute to the economy and attend to self-care so as not to be swept away by the wave themselves.

Of course, everyone will be old if they live long enough. However, the tsunami discourse is not about chronological age so much as it is about age occupying a social space and acting as a cultural field [22]. Fear arises not from the prospect of living into what some sociologists call the third age, loosely denominating a group of wealthy active agers in relatively good health [23]. Fear arises instead from the prospect of entering the fourth age, which theorists explain is not only a chronological but more so a social and cultural shift from the third age. As Chris Gilleard and Paul Higgs explain it, “It is when people are no longer ‘getting by,’ when they are seen as not managing the daily round, when they become third persons in others’ age-based discourse, within others’ rules, that they become subjects of a fourth age” [22] (p. 122). That is, it is when they are swept up by the wave rather than left waiting on the shore.

Liz Lloyd describes the fourth age as “characterised by the combination of advanced chronological age, bodily decline, loss of functional health and mobility and increasing dependency on others for help with everyday activities” [24] (p. 261). Put simply, for wealthy Western people, one is not “old” unless (rather than until) one is in the fourth age. That is also to say one is not old until one experiences decrepitude, which is the disposition that most elicits age panic. Thus, the panic evoked by the tsunami metaphor and related rhetoric is motivated not only by ageism and gerontophobia but also by ableism, a casual or systematic set of prejudices and discrimination based on ability along with typically ignored intersections with race, gender, class, sexuality, and wealth especially when those arise from cumulative advantages and disadvantages over time. The implication is that the individual must take specific actions to prevent the physical changes that connote growing old in the fourth-age sense of the term.

### 3.2. *The Age-Friendly Metaphor*

The age-friendly metaphor requires more analysis than the tsunami metaphor because its implications are less obvious and have largely escaped attention from age studies scholars beyond Barusch. Unlike the tsunami metaphor, with its hyperbolic flourishes, age-friendly has always already been a dead metaphor, with the forgotten tenor being the urban environment and the vehicle being a pleasant companion. A much-needed soothing balm to the age panic that drives the tsunami usage, the age-friendly movement is nonetheless motivated by the same dread and fear of a needy ageing population, this time addressed more constructively. There’s nothing wrong with the age-friendly metaphor itself—Barusch is right to call it benign. However, as Lakoff reminds us, it is not the language itself but the relational conceptualization that is of concern. Unpacking the metaphor’s implications might remove some barriers to achieving the putative goals of the age-friendly movement. To unpack those implications, I turn to a foundational document that continues to anchor the movement.

#### Global Age-Friendly Cities and Communities

Launched in 2005, the WHO Global Network for Age-Friendly Cities and Communities involves hundreds of cities and communities, reaching about 130 million people. Though definitions are elusive and contextual, a generally agreed-upon definition of an age-friendly community is a “place where older people are actively involved, valued, and supported with infrastructure and services that effectively accommodate their needs” [25] (p. 4). To operationalize “age-friendly,” the WHO recruited cities, developed a research protocol, and consulted older adults to create the 2007 WHO “Global Age-friendly Cities: A Guide” and an associated checklist [15]. The research and consultations that led to the Guide were funded and supported by organizations in Canada, the United Kingdom, Lebanon, Brazil, Mexico, Australia, and the United States. Based on research conducted in

33 cities in 21 countries on six continents, the 82 page Guide offers recommendations for transforming an urban environment into a place that welcomes older adults.

As the Guide explains, “Informed by the WHO’s approach to active ageing, the purpose of this Guide is to engage cities to become more age-friendly so as to tap the potential that older people represent for humanity” [15] (p. 1). The Guide lays out ways for cities to be adapted so that they are “accessible to and inclusive of older people with varying needs and capacities” [15] (p. 1). As such, it draws on feedback from older people (as well as caregivers and service providers) in the range of cities where consultations took place to make recommendations to municipalities for changes that enrich the participation and lives of the older population. It gathers recommendations for its named target audience, which consists of “individuals and groups interested in making their city more age-friendly, including governments, voluntary organizations, the private sector and citizens’ groups” [15] (p. 11). After explaining the context of population ageing during rapid urbanization, introducing active ageing as a basis, summarizing the research process, and offering ideas of how to use the checklists, the Guide divides its findings into eight categories, which are illustrated as petals on a flower to indicate a lack of hierarchy. The areas align with conventional ideas of infrastructure along with social attitudes: outdoor spaces and buildings; transportation; housing; social participation; respect and social inclusion; civic participation and employment; communication and information; and community support and health services. [15] (p. 1). The Guide concludes by repeating that the research on which it is based does “not focus specifically on the cross-cutting active ageing determinants of gender and culture” [15] (p. 75), offering a hint about whose perspectives came through most clearly during the consultation process, which was understandably limited to those older adults and other stakeholders who have the means and capacity to participate. The final lines of the Guide reveal how it is enmeshed in economic motivations: “Active ageing in supportive, enabling cities will serve as one of the most effective approaches to *maintaining* quality of life and *prosperity* in an increasingly older and more urban world” [15] (emphasis added, p. 75). The term “maintaining” reveals how this movement started out by focusing on people with adequate quality of life and prosperity, rather than seeking to help those who could benefit from improvements. The term “prosperity” speaks to the neoliberal and austerity contexts within which the Guide was developed and within which the movement has flourished.

In the Guide, the WHO personifies the age-friendly city as an adaptable space that “encourages active ageing” [15] (p. 1). In animating the inanimate entity of the city, the Guide imagines cities to be imbued with human characteristics. The personified city is not just any person, but specifically an affable civil servant, polite and full of good ideas about inclusivity and diversity with limited budget and means to implement them. As is usually the case with an underfunded, overworked civil service, the age-friendly city faces an added pressure to be welcoming without the necessary support and resources to make that feasible. However, the Guide does not make as evident this lack of support and resources, emphasizing the need for approachability rather than the means to create change. The compliant figure the WHO Guide evokes is friendly but distinctly not a *friend*; this is more about appearance than it is about relationship; it is the “friendly” of a sports match not intended to be part of regular season play. Age-friendly does not imply the mutuality of friendship: the Guide does not exhort older adults to be friendly to their physical and social environments in return. Municipalities, and their representatives, must take on this friendly approach aimed at older adults. However, as I discuss in Section 4.1, a closer reading of the Guide raises questions about which older adults appear to deserve a friendly approach (with implications that older adults that do not live up to certain expectations do not merit friendly treatment).

Adding an adverb to the adjective “friendly” is part of a broad linguistic trend in English. Typically, doing so indicates an inclination rather than a concrete plan or policy. Since the 1980s, the English language has welcomed eco-friendly, planet-friendly, butterfly-friendly, dog-friendly, tourist-friendly, bike-friendly, development-friendly, family-friendly,

child-friendly, and queer-friendly. Similarly, gluten-friendly has counterintuitively become a way to refer to foods that are less likely to cause upset to people sensitive to gluten, without fitting the regulated description “gluten-free.” The phrasing is counterintuitive because gluten-*friendly* foods are quite hostile to gluten but hospitable to people who cannot tolerate the protein. This last usage indicates how adding “-friendly” risks becoming a branding exercise that emulates broader social awareness without having to adhere to related regulations. As Tine Buffel and Chris Phillipson have pointed out, the age-friendly designation similarly risks morphing into a normative white, middle-class brand [16] (p. 174). My close reading suggests that is particularly the case due to the Guide and movement’s emphasis on activity and narrow view of participation.

The list of entities that make up the desired target audience (“governments, voluntary organizations, the private sector, and citizens’ groups” [15] (p. 11)) implies parallelism among these individuals and groups despite the hopefully quite different goals of each. Of course, in an austerity-driven neoliberal era, the distance between the private and public sector continually decreases; the individual person discursively functions as a microcosm of the social, and vice versa [26]. My close reading of the Guide itself, however, reveals a narrower implied audience through its interpellation of an ideal older adult, familiar from advertisements in which thin, active, usually white, seniors, apparently youthful despite their silvered hair, work in “heterohappy” pairs to buy things and take responsibility for their savings, their health, and their children’s futures [27]. Despite the range of consultations, the description of older adults throughout the Guide does not match the expressed desire for inclusivity and accessibility. Instead, the Guide comes across as coercing those older adults who might read it into a particular form of ageing. Even more worrying, the Guide appears to influence policymakers and city planners toward a narrow vision of older citizens that does not challenge the damaging thinking behind the ubiquitous tsunami metaphor. This framing of the ideal senior ignores considerable agency as well as diversity among older adults, especially considering the vast geographical reach of the Guide.

Though many older adults have the desire and capacity to resist this construction, the WHO Guide implies a normative, relatively wealthy, presumably house-owning, hetero, married-once-until-death [15] (p. 41) older adult who welcomes surveillance cameras with nothing to fear from them [15] (p. 15), who needs to learn to ride the bus having apparently always previously owned and driven a car [15] (p. 23, p. 25), who has enjoyed a traditional career arc including a welcomed and easily prepared for retirement [15] (p. 40) during which they volunteer to give back to their communities, and who is now being served rather than serving in the customer service industry. An engaged, lively, fit citizen, they might need to go to a few more medical appointments than before and have a bit more trouble navigating their way to them. Hence, apparently, their need for age-friendly design.

The interpellation of this ideal senior helps to show how and why the movement continually struggles to embrace diversity in a meaningful way and has not yet managed to reach those most likely to live outside of age-friendly spaces who are more vulnerable to the inequitable distribution of resources [16]. From reading the Guide alone, one could easily conclude that age-friendly does not focus so much on communities, as implied by the title, as on a collection of dangerously inspiring third-age individuals, such as one might expect to see pictured on the cover of a retirement magazine or in an advertisement for financial planning. That is especially dangerous if it leads to individual older adults responding to age-friendly initiatives by trying to match this inspirational model rather than by bringing their ongoing needs and ideas to the table. However, it is also worrying when it influences municipal policy and practices.

While the WHO Guide includes the occasional reference to poverty and lower-income [15] (pp. 29–31, 49, 50, 53, 56, 61, 64, 69, 70), it largely assumes a relatively wealthy older population based on Western norms of work life that imply a period of training in young adulthood, followed by gainful employment, and retirement in early old age. The brevity of asides stating that not everyone can expect to retire comfortably betrays the

underlying normative expectations, such as “in some areas, economic circumstances force older people to take paid work long after they should have retired” [15] (p. 51). Overall, the Guide implies that people past a certain age would only continue paid employment out of need, rather than out of choice or even desire to continue contributing in that way. What is more, situating these mentions as asides implies that needing to work past the expected retirement age is exceptional. The Guide promotes the assumption that, rather than work, older adults would choose to take on volunteer roles, described as opportunities, to gain a “sense of self worth, of feeling active, and of maintaining their health and social connections” [15] (p. 51). The Guide recommends measuring and assessing these elements in keeping with new public management practices, which treat public institutions as businesses. The Guide goes so far as to suggest that older adults should volunteer to make up for shortfalls in the health care system, rather than highlighting how structural problems lead to volunteers doing healthcare work that should be well paid.

#### 4. Discussion

##### 4.1. *The Trouble with Active Aging*

The WHO Guide does not emphasize the structural constraints that arise from the austerity context, such as the shortcomings that make health care systems rely on volunteers to function. As a result, the version of active ageing it musters is particularly troubling, with roots in normative, harmful, neoliberal ideas of health that make the individual responsible [2,28]. The age-friendly movement thereby risks participating in the same conceptual framework of contributing, deserving and consuming that motivates the tsunami discourse. The Guide promotes the creation of inclusive and accessible urban environments that promote active ageing, revealing its central assumption that active ageing is both possible and desirable for all.

Active ageing may come across as a seemingly harmless descriptor of healthy actions required to procure a desirable or even bearable late life, to appear youthful so as not to scare the actually youthful, and to save the economy from the burden of healthcare needs. However, active ageing in this context refers not to the potential individual benefits of physical activity but to a policy discourse that has seeped into popular usage. It joins related terms, such as successful ageing and healthy ageing, under a broader but vague banner of “aging well” [29] (p. 84). While active ageing—more prominent in Europe—moves beyond successful ageing—more prominent in the U. S.—which focuses on ability and functional capacity, active ageing mirrors much of that concept’s normative force, particularly in how the WHO Guide deploys it [30]. As framed within the Guide, active ageing becomes both the anchor for creating age-friendly communities and a broader way of conveying to an ageing population who and what they should be, through what they ought to be able and want to do. As critical gerontologists and age studies scholars have firmly and repeatedly established, active ageing runs the risk of wedding late-life success to the neoliberal imagination when it becomes the individual’s responsibility [29,31]. Being active in late life is not necessarily a bad thing. Still, there is a dangerous imperative in a euphemistically conceived, marketable “active ageing” that makes individuals responsible for adopting consumerist practices that have little to do with actual health and more to do with alleviating the state from social and financial obligation for an ageing population. Calling an approach that pressures individuals into that responsibility “friendly” covers up the more worrying implications of the movement’s reliance on activity, narrowly understood.

Further, within policy discourse, active ageing tends to appear as opposite to or even an antidote for care, especially long-term care [32], which is, of course, thought to be the burden that a younger population would have to bear. As Frode Jacobsen explains, active ageing’s normative force extends beyond the imperative to be busy, productive, and healthy to being busy and productive in a particular way. As he puts it,

The ideal older people are portrayed as active in sports or going to the gym and participants in voluntary organizations, rather than spending time watching soap

operas, enjoying horse races or other activities perhaps more associated with a working-class than an educated middle-class lifestyle. [32] (p. 6)

The risk goes beyond but includes creating a “deserving elder” whose flipside is, of course, another older adult who does not deserve, that is, has not earned through action, social supports that they may need even more later in life. If that older adult needs long-term care, the implication is that their inactivity led to this need. It thereby comes across as a form of preventable greediness rather than as the deserving earned by someone who took all the individual approved steps but somehow still ended up requiring long-term care. The discourse promotes the dangerous idea that remaining within the third age, forever delaying the fourth age, is within individual control and even becomes a moral responsibility.

Invoking a third-age figure and side-lining the so-called fourth age, the Guide leans on friendliness to benignly welcome those who have long been welcome in urban spaces. It does so without meaningfully opening the door for those who, as Buffel and Phillipson put it, experience “the unequal impact of life events and accumulation of . . . disadvantages over the life course” [16] (p. 180). Again, this is appearance rather than relationship; this is a customer service rather than a public service approach. This form of active ageing can participate in ageism, not to mention being deeply gendered, racialized and class-based. Additionally, while it is not gerontophobic, ableism drives the form of ageism promoted by this form of active ageing. It, too, is dangerous since, as Joy explains, the age-friendly movement offers a way to produce ideal citizens because “the active senior becomes a symbol to live up to that helps to justify austerity cuts” [33] (p. 2). Following the Guide’s logic, the imagined subject has a good quality of life and considerable prosperity that they can only lose due to decline. Individuals must remain active, productive citizens, if no longer gainfully employed, offering their time and efforts through volunteer opportunities to maintain a failing social system.

Similar to that behind age panic, the fear the WHO Guide promotes is of decline tied to debt morality. The Guide declares that “functional capacity . . . eventually declines,” with the only hope being that people might intervene in the “speed of decline” [15] (p. 6), or at least hide it. Tied to a normative, cohort and class-specific, culturally determined life trajectory, the Guide exhorts the ideal older adult to “confident mobility, healthy behaviour, social participation and self-determination or, conversely, to fearful isolation, inactivity and social exclusion” [15] (p. 72). This coercive language openly requires not just mobility but also confidence. As the Guide conceives it, behaviours and attitudes rather than structures determine “health,” and they are the behaviours and attitudes—confident, healthy, social, self—that underwrite a societal structure based on a competitive marketplace rather than on other values that might prevail. The term “self-determination” directly implies responsibility down to the level of individuals governing themselves, a process Wendy Brown calls responsibilization [34]. This characterization leaves little room for the older person who might have legitimate reasons for not wanting to be part of the prescribed collective or desiring collaborative support. As Jacobsen asks, “is there no room for voluntary disengagement?” [32] (p. 8), not to mention, of course, involuntary disengagement. Indeed, the Guide describes such desires as deviant. For example, the Guide reveals that “there is some concern about encroachment into public seating areas by people or groups who are intimidating or who display anti-social behaviour” [15] (p. 13). Is the environment not meant to be “friendly” to those “intimidating” “anti-social” people too?

#### 4.2. *Age Panic and the Neoliberal Imagination*

Like the tsunami metaphor, the age-friendly metaphor ties human value to economic contributions. Attitudes about and experiences of ageing, especially of growing older, suffer when a reductive form of politics that treats everything as a marketplace harnesses the popular imagination. Because we are less likely to achieve (and even desire) what neoliberal thinking values—productivity, efficiency, performance—as we age, this impoverishment

of the imagination significantly affects older adults. To counter the harm done through these metaphors, we must recognize how they ignite the “neoliberal imagination,” a term I take from Ronen Shamir, who describes how the “neoliberal imagination” “collapses the epistemological distinction between economy and society” [26] (p. 6). Under the neoliberal imagination, the social sphere becomes a “specific instance of the economic domain” [26] (p. 6). This process stealthily infiltrates even those elements of contemporary society many might expect to be least vulnerable to ideas of use-value and commodity, such as higher education and health care, even when they remain primarily publicly funded [35].

Neoliberalism focuses on the market, especially on enabling competition, and neoliberal austerity focuses on saving money to increase participation in that market. Under neoliberal austerity, debt—especially costing the state money—has become a primary economic taboo. Following what Mark Blyth labels a dangerous (and false) idea—that widespread cutbacks will yield economic growth—we are led to believe that if we individually cut back, we will somehow both prosper and contribute to social prosperity [36]. Even if we emerge from this era of austerity, its deeply moral ways of thinking will linger as part of what Shamir calls “a constantly evolving and adapting neoliberal imagination” [26] (p. 3). So, cutbacks and other austerity measures matter, but their deeply internalized effects will take longer to eradicate even if the overt cuts eventually end.

The problems with the age-friendly metaphor match well with the shortcomings of the age-friendly framework itself. The neoliberal imagination incongruously hampers the WHO age-friendly framework and the movement that follows from it. As Joy pinpoints, “AFCs are a policy experiment that can be used to enhance democracy and equity or to extend austerity more deeply into urban governance” [33] (p. 1). They hold great promise not yet fulfilled and perhaps already subverted. Without a clear handle on ageist discourse and the associated beliefs and actions, they risk becoming what Joy wryly calls austerity-friendly communities. Additionally, they hold the worrying potential to become so by responsabilizing the very people they are designed to serve, which is, frankly, not particularly friendly.

## 5. Conclusions

The age-friendly movement offers a constructive response to population aging. My linguistic and conceptual analysis is not meant to diminish or slow down the considerable improvements cities and communities have made worldwide as they prepare to better welcome older adults, contributing to their quality of life and prosperity, as the Guide puts it. However, the positive elements of the movement do not preclude digging deeper so as to better reframe population aging and create changes that consider “the cross-cutting active ageing determinants of gender and culture” and mitigate against age panic [15] (p. 75). Ideally, the frame of active ageing will give way to a more equitable way to think about later life, something that is not obviously promised by the shift to a Decade of Healthy Ageing.

That said, this analysis is not just about language use, and the problem with the age-friendly metaphor is more significant than the resonant language in which it participates. Removing that register does not mitigate the panic that ensues from imagining population ageing as an inevitable financial disaster on the brink of engulfing the younger people in the world. We do need new metaphors for the ageing population, and age studies scholars have already started to find them in literary and cultural production that increasingly considers ageing a central topic worthy of aesthetic and philosophical attention. However, beyond those new metaphors, we need to shift the underlying approaches to the ageing population.

The language matters, but so too does the thinking behind it. Of course, older people can be profitable and productive, including in decidedly neoliberal ways. However, if we consider the broader meaning of human life, using the ageing population as a long-awaited opportunity to do so, many people stand to benefit not only from new metaphors but also from new policies and practices of ageing that consider the variability and uniqueness of late-life experience.

Ageing is not solely a problem in need of a solution. When we reconfigure human value beyond profit and productivity, what new ways of thinking about an abundance of older adults might prevail? How might we figuratively capture the surfeit of experience, knowledge, and acceptance that often accompanies later life? When we recognize our collective responsibilities, how might we conceive of population ageing? If we push back against narrowly defined active ageing to embrace a more imaginative range of participation and contribution, what metaphors might we live by?

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## Article

# Co-Design as Learning: The Differences of Learning When Involving Older People in Digitalization in Four Countries

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**Abstract:** Involving older people through co-design has become increasingly attractive as an approach to develop technologies for them. However, less attention has been paid to the internal dynamics and localized socio-material arrangements that enact this method in practice. In this paper, we show how the outcomes that can be achieved with user involvement often pertain to learning, but their content can differ significantly based on how the approach is implemented in practice. Combining explorative, qualitative findings from co-design conducted in four countries (Canada, the Netherlands, Spain, and Sweden), we illustrate how different types of learning occurred as design workshops engaged the experiences and skills of older people in different ways. Our findings make visible how learning can be a core outcome of co-design activities with older adults, while raising awareness of the role of the power relations and socio-material arrangements that structure these design practices in particular ways. To benefit from the full wealth of insights that can be learned by involving older people, deeper knowledge is needed of the implicit features of design, the materials, meanings, and power aspects involved.

**Keywords:** ageing; design practice; user involvement; participatory design; socio-gerontechnology

## 1. Introduction

Technologies for older people are of pertinent interest to both sociologists and designers, not only due to increasingly ageing populations, but also because older people actively engage with technologies in various ways [1–5]. This has become especially evident during the COVID-19 pandemic, where older people in many countries are encouraged to isolate themselves at home. Here, technically mediated communication is seen as one way to help older people stay connected with the outside world [6–9]. Likewise, “ageing in place” reforms and digitalization have given additional force to efforts aimed at understanding how technical applications should be designed to best address the needs of ageing populations [10–14].

To design technologies that speak to the needs and requirements of older people, involving them in co-design procedures is attracting more and more popularity [15–18]. Co-design is a more recent procedure that is part of the broader discipline of participatory design (PD), and foregrounds the role of designers as equal partners to the participants [19,20].

One outcome of involving older people that is often emphasized in PD and co-design is “mutual learning” [21–23]: By bringing designers together with users, participatory design may spur knowledge transfer between both groups so that members gradually learn about the corresponding experiences of each other. The implementation itself is seen as a learning process for both those who lead the design process and for those who participate. This learning can lead to competent participants, close to “expert” users [24], who can formulate ideas and ask questions in an increasingly initiated way. However, mutual learning does not automatically result from PD activities. For innovative solutions to emerge in design, a certain degree of openness is required to be able to see things in new ways [25]. Therefore, PD scholars argue that mutual learning is particularly successful in design environments in which both designers and participants are able to share and widen their individual perspectives, thereby enabling designers and participants to build on each other’s experiences [21,26].

Besides the general recognition of mutual learning as a particular outcome of design activities enabled by an open and trusting collaboration, the precise content of these learning outcomes has not received extensive attention within the PD literature. Despite recent efforts devoted to providing a deeper understanding of design practices (e.g., [27–29]), including calls to examine the social life of methods in general practice [30–32], we are still short of a detailed account of how co-design and learning activities are closely intertwined.

To attend to this gap, we turn to the rich and prolific literature stream on learning [33], which has more profoundly examined the interconnectedness between learning and the contextual aspects of social practices. Lave and Wenger [34], in their proposal of “situated learning,” show how opportunities for learning are intricately tied in with the social environments and legitimizing practices in which learning occurs. Based on their findings, they argue that learning should not be seen as an individual activity, but rather as occurring within “communities of practice.” In this view, learning is founded on the premises of participation in communities and engagement in group work, and defined by the power structures and interrelations of these communal practices. Likewise, activity theorists have underscored the collective nature of learning [35,36], and “social learning” has become a popular research subject that investigates how learning takes place in a co-evolutionary manner through collective engagement of designers and users [37–39]. Taken together, these insights on learning as a social and collective practice open up new possibilities to relate design to the socio-material aspects of human and nonhuman practices, its underlying power dynamics, and arrangements [40–44]. In this reading, design workshops that involve older people can be seen as particular “communities of practice” in which social learning occurs collectively, situated within localized socio-material arrangements and power relations. Investigating how learning takes place in these different contexts and social structures of design practices, hence, is a promising means to further illuminate our understanding of how design projects can be tailored to facilitate meaningful and suitable designs for older people.

Our study speaks to this need and particularly explores design workshops as communities of practices in which learning occurs, including their contextual aspects. To do so, we draw on ideas by philosopher Donald Schön [45], whose work interrogated the role of contextual aspects for different practices. Dealing more particularly with the professional work actions of practitioners, Schön argued that much of professional work overwhelmingly focuses on technical rationality to solve problems, and thereby ignores the problem setting. He defines the problem setting as “the process in which, interactively, we name the thing to which we will attend and frame the context in which we will attend to them” (ibid p. 40, *emphases original*). His conclusion is that ignoring the problem setting is hampering the ability to handle complex, uncertain, unstable, and unique situations (ibid). Translating this notion into doing design today, we take the problem setting—including the practices, materials, and symbols it entails [46–49]—as crucial in framing how and what can be learned from involving older people in design.

Following Schön's [45] call for "reflection in action" of different "problem settings," in this paper, we aim to explore and reflect on the problem setting in co-design workshops involving older people and other stakeholders. The main research question is: What are the outcomes of involving older people in different design settings? What significance do different problem settings have? With a particular eye on the socio-material arrangements that make up different "problem settings," we combine our findings from four different countries with different disciplinary backgrounds and cultural views of age (Canada, the Netherlands, Spain, and Sweden), and present the analogies regarding what can be learned from involving older people in different co-design settings.

Our findings emerged out of an international collaboration in a joint research project, which we engaged in over the last three years from 2018 to 2020. It is part of the European program More Years Better Life, and includes partners from Canada, the Netherlands, Spain, and Sweden. Partners from these four countries have established "Academic Work Places" (AWPs) adapted to networks available at these universities and aiming "at bringing academics and practitioners together, on a continuous basis, to work on a common project, in order to make practice more evidence-based as well as to make academic evidence more practice-based" [50] (p. 573). The research project, including the selection of respondents, the procedure for collection of data, confidentiality, and protection of individual integrity was approved by the Swedish Board for Ethical Vetting (2018/839-31/5), in Spain by the Ethics Committee of the Universitat Oberta de Catalunya (28 September 2018), and in Canada by the Trent University Research Ethics Board (file #25591). For the Netherlands, the funding agency ZONMW did not request additional ethical vetting (project number 9003037411).

While some partners collaborated with social movements organizing older people or older citizens in order to bring about political change, others formed ties with businesses or educational organizers. Moreover, there were differences regarding access to, and thus experiences of, digitalization. In what follows, we will outline our methodology, present our combined findings of how co-design takes place as learning in different settings, and discuss the relevance of these findings both for studies on learning and practitioners in design.

## 2. Methodology

### 2.1. Research Approach

To generate findings that provide rich, in-depth insights across cultural and contextual differences, we followed a qualitative, multiple case study design spanning the sites of four different countries [51], and adopted Vaughan's [52] "analogical" theorizing as an overall approach. We pursued analogical theorizing specifically because it encourages researchers to purposefully select certain settings that are relevant to the research question and to systematically search for analogies between them. In particular, we deliberately selected the different sites of the Academic Work Places to include different welfare states and care regimes—where Spain represents the Mediterranean Regime, the Netherlands represents the Continental Regime, Canada the Anglo-American Regime, and Sweden the Scandinavian Regime [53,54]. Our approach is based on the recognition that co-design with older people is a global phenomenon, which is "localized" into different cultural frames and institutional settings for ageing and health care. These differences provide a diverse and necessary context that makes it possible to theorize the outcomes of co-design practices across a variety of sites. Following analogical theorizing allowed us to thoroughly engage with the data generated at these different sites, and relate the insights obtained from the various cultural contexts into a more comprehensive understanding of "design as learning" that holds across the diverse socio-political settings at the "middle range" [55,56]. See Figure 1 for an illustration of the research procedure.

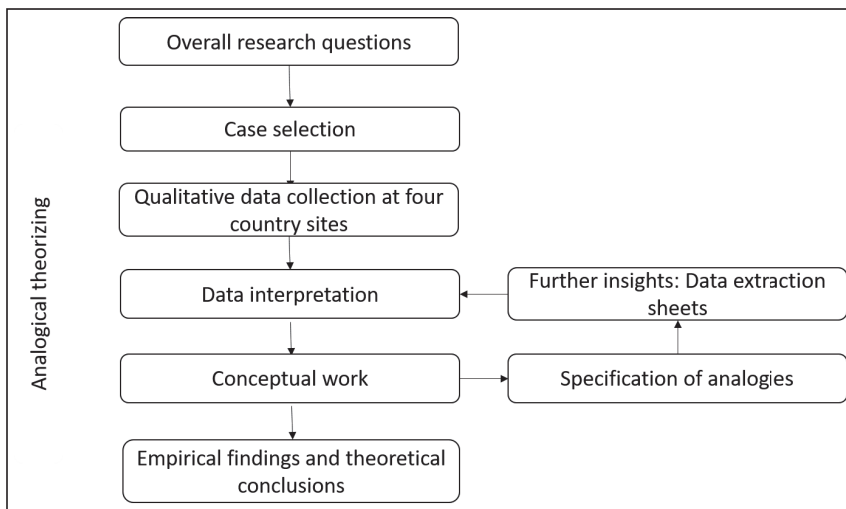


Figure 1. Outline of research process.

## 2.2. Co-Design Procedure and Data Collection

A pilot design workshop was held at a project meeting in 2018 in Sweden. The purpose was to apply co-design and test a co-design procedure and discuss the possibilities to apply somewhat similar co-design procedures in all participating research sites [57]. This pilot workshop included a modified version of a four-step co-design procedure: creating choices, selecting among choices, concretizing choices, and evaluating choices [22,58]. Following this pilot run, we added two further steps of importance: introduction and closing the workshop. As the base for co-design, the procedure tested in Sweden in 2018 was adapted to the AWP's available in the four partner countries. Hence, although we developed a particular procedure for co-design workshops, it was applied differently in practice. Different countries used modified versions of the design workshops, and one partner developed the workshop into an approach closer to focus groups, based on their particular circumstances (i.e., background, living situation, socioeconomic status, and age). To collect data on how the design workshops unfolded in practice, the local research groups were provided with data collection sheets with open questions regarding how the different stakeholder groups contributed at the different stages, which alternatives were suggested/selected/modified, which feedback the included members provided, at what the level the stakeholders were involved according to Arnstein's [59] ladder of citizen participation, and what could be said about the influence of the involved group in the design procedure.

For our purposes, we adapted Arnstein's ladder of citizen participation into three levels of involvement corresponding to how much influence is given to users (see [57]). The highest level represents how users themselves are in control, initiating and driving design to accomplish something. The intermediate level corresponds to people participating as experts on their own life situation, negotiating and collaborating with designers in partnership as consultants. The lower level refers to users functioning more as informants with the ability to comment on already made-up plans or designs, or testing prototypes. However, the data collection method was flexible to the extent that each research group could highlight and describe freely what their experiences of the design procedures were, and what the outcomes were. Hence, not all open questions were answered for each stage; rather, the local design settings [45] were the driver in determining the content of the data

that were collected [60]. In this way, we believed we could collect data that were thoroughly grounded in—and respectful of—the social context of each case [61].

In Canada, the design workshops were organized in a style similar to focus groups aiming at understanding which digital technologies older people use in their everyday lives, what understandings older adults associate with “technology,” and where, how, and why these technologies are used. Four sessions, recorded and averaging one and a half hours in length, were held in two cities, one in a large urban center (population 3 million) and three in a smaller city (population 80,000). Two of the sessions were held in retirement residences with participants recruited internally, and the other two sessions were held at a public library, with participants recruited through posters advertised throughout the downtown core.

In the Netherlands, the workshops were aimed at learning about older people’s everyday use of smartphones. Four sessions with four participants each were conducted in a health technology laboratory, each of which lasted a little longer than one hour. The laboratory approach adopted was based on the older people bringing their own smartphones to share their experiences. The sessions strictly followed the proposed methodology tested in the pilot, creating discussions both about everyday practices and the meaningfulness of communication using smartphone technology. The responsible organizers maintained field notes regarding the articulated experiences, practices, and happenings during these workshops.

In Catalonia, Spain, two workshops were conducted using a prototype app developed in an EU-supported project following the principles of a usability test that lasted for half an hour. The aim was to design and develop software for a prototype of a mobile application within which problems took a large part of the discussions. The workshops took place at different design stages (from instruments of data collection to answers, the results, and the final design implementations), and were observed by two researchers, focusing on how the procedure unfolded, the insights gained, and the modifications made during the design process.

In Sweden, four design workshops with four different groups of stakeholders, two with older people and two with design students and nursing teachers, were conducted. The aim was to understand what makes up meaningful digitalization in later life, including robots, smartphones, and digital home assistants by suggesting modifications that would improve these applications. The workshops took place in the settings where the participating groups normally meet and lasted between two and four hours, including a brief introduction about digitization provided by a professor at the university.

### *2.3. Participants and Stakeholders*

In total, 14 workshops were conducted with 120 participants (44 men, 75 women, 1 undefined), distributed among four different kinds of stakeholders: older people, engineers, students in product development, and teachers of home care workers. All workshop participants gave prior consent to take part in the research and workshops. Older people included different groups ranging from 55 to 94 years old, retired for a short or long time, or part-time employed. People over 55 years were identified as belonging to the group of “older people” in order to account for the diversity and heterogeneity amongst this group [62–64]. Choosing an age range of “older participants” is a very contested and debated issue, with arguments, for example, that numerical age should not at all be the defining feature (cf. [65]). We chose 55 years because it allowed us to account for the heterogeneity in the older population [62], and because it is quite frequently used as the lowest demarcation for belonging to the group of older people (cf. [63,64]). See Table 1.

**Table 1.** Participants distributed over partner country, number of design workshops, number of participants and their gender and age, and profile of stakeholders.

Country	Workshops	Participants: Number, Age, Gender	Stakeholder Profile
Canada	4	29 (20 female, 9 male) Age: 55–94 years old	All 4: older people, low, middle, and upper class
Netherlands	4	16 (8 female, 8 male) Age: 65 years and older	All 4: older people
Spain	2	12 (6 female, 5 male, 1 not defined) Age: 23–78 years old	All 2: general Internet users, including 3 older people
Sweden	4	63 (41 female, 22 male) Age: 20–79 years old	Nursing teachers, retired older engineers, design students, retired older persons
Total	14	120, including 75 female, 44 male, 1 undefined	

#### 2.4. Data Analysis

We analyzed our data from the various different empirical settings in three stages. First, each research group analyzed the observations of their workshops locally in their country. This was done qualitatively [66] and resulted in descriptive text reports of the observed workshops, as well as descriptive replies to open questions in the distributed data collection sheet. At the end of this step, all four partners compiled their findings and observations and sent them to the coordinating research group in Sweden. In a second step, the data were combined and again analyzed qualitatively to find meaning in the texts and identify themes and broader aspects that appeared relevant across all four countries [60,66]. The analysis revealed how learning was of central importance in the co-design workshops of all four partner groups, but the particular outcome of learning differed. Furthermore, it brought to the fore the relevance of the power aspects and internal dynamics underlying design workshops in creating different “problem settings” [45] within different “communities of practice” [34]. In a third step, with the Swedish team leading (B.F.), the research groups jointly worked together to present their empirical findings in a coherent way, emphasizing learning and how learning is related to different problem settings.

### 3. Design as Learning

#### 3.1. Learning about Older People’s Everyday Experiences with Digital Technologies (Canada)

In Canada, we learned about the ways that older people use digital technologies in their everyday lives, as well as their understandings of “technology” more broadly. In Arnstein’s [59] categorization, this could be situated at the lower level of involvement as informants. Group discussions were prompted through questions about the digital technologies most used, those they may have previously used and stopped using, whether technologies were used for health purposes, whether they felt pressure (whether originating externally or internally) to use digital technologies, how they felt about the cost of relevant technologies, and finally, which devices or applications they could imagine for the future. Overall, these discussions challenged many of the common assumptions about older people as technological laggards or as primarily concerned with family and health. The researchers found that technologies were thoughtfully and carefully considered (or resisted), and that, although technologies were used to “connect,” it was not necessarily families or caregivers they were interested in connecting with. Health was not at all a major focus in any of the four focus groups.

Participants indicated a multiplicity of apps and devices that were used: These included devices such as smart phones, iPads and tablets, laptops, e-readers, alert pendants, digital cameras, digital kilns and digital vaporizers, and apps for a range of activities, including apps for meditation and for painting-by-numbers, GPS apps for fishing, on-

line conferencing software, and YouTube videos for learning all sorts of different skills. Conversations also revealed that participants were mindful of the impact of their participation in the digital sphere. They were careful about the amount of time they spend online, and two reasons emerged for this. First, some expressed concern that different technologies could complicate their desire to “be present” and to use their time wisely. As one participant explained,

*“Maybe it’s because we’re older and I . . . realize how old I am . . . and how much of my life is gone . . . How much do I want to devote to sitting in front of a screen or do I want to enjoy the real world that’s out there? Because you don’t know how long it’s going to last.”*

Second, there was some resistance to the labor that digital tools impose on individuals. Another participant expressed concern that digital technologies were “taking away jobs that somebody got paid for and we’re doing it for free.” Cost was also brought up on a number of occasions as an important consideration that determined which devices participants might purchase or use (having a smartphone because it is too costly to have both a landline and mobile phone, using a digital camera because it is cheaper than film) or where they might use technologies (e.g., going to the local public library to access email). Participants were also quite wary of their safety and privacy online (as well as of online misinformation) and also noted that “humanity” seemed to be missing from current iterations of digital tools.

Although a number of participants in the focus groups that took place in the public library spoke of the different apps (WhatsApp, Skype, FaceTime, or Instagram, for example) that they were using in order to stay in touch with children and grandchildren, they also used these apps to connect with broader communities, such as one participant who used video conferencing software to connect with church members across the country. Participants living in retirement residences tended to use digital technologies to stay in touch with and organize events amongst themselves in the building. This included, for example, letting each other know which person was hosting an upcoming morning coffee, and Facebook, for example, was highlighted as a resource that was used to share favorite songs or requested recipes.

One of the more surprising findings was that the use of technologies related to health concerns and risk management did not figure centrally in any of the sessions. This contrasts sharply with the emphasis on monitoring, maintaining, and/or improving health in later life in the development and marketing of technologies to older people [10]. Only one participant spoke explicitly about health, and described how he used his iPhone to input information about his blood pressure and blood sugar levels:

*“It’s the Apple app with the heart on it . . . it’s got incredible depth to it. You go down, vital signs and then you can put whatever you want in there. Plus your emergency information which is your blood type . . . But you have to be disciplined! And when your life is at stake, you’re disciplined!”*

Another participant spoke about her experience with an alert pendant, suggesting that rather than increasing her sense of personal safety, it served to limit her movement out of her apartment complex as it did not, for example, work in the parking garage where there was little signal available.

Interestingly, despite demonstrating that they were quite savvy and creative with regards to digital technologies, a number of participants described themselves as “dinosaurs” or “old school,” perhaps indicative that they had internalized ageist attitudes in technological narratives about ageing and generational differences. Defying these stereotypes, facilitators were especially impressed at the mutual learning of participants that was evident as they made notes of apps mentioned by others during the discussions and as participants lingered after the end of the focus group to chat and share tech tips and recommendations with one another. The majority of participants indicated that they would have enjoyed additional time to engage in these sorts of conversations. This suggests perhaps



that too few spaces exist for older people to learn from one another about technologies, and to engage in collectively imagining those that might be meaningful in their everyday lives.

### 3.2. *Learning about Older People's Everyday Smartphone Use (The Netherlands)*

The Dutch workshops also found that the older participants mainly acted as informants according to Arnstein's [59] ladder. During the Dutch design workshops, participants were asked to bring their smartphones with them. All of the participants did possess a smartphone, yet as expected, their uses of them varied significantly. The workshops were designed to probe into the variety of everyday practices in which smartphones were entangled and meaningful to the participants, but even more importantly to stimulate a discussion among participants about their smartphone use practices. In this regard, it is interesting that sometimes long portions of the talk proceeded without the interviewer's interference, which indicates that smartphones are generally a theme that the respondents find interesting. Quite often, the respondents disagreed about the usefulness of features, such as an electronic agenda, which some used and others did not. Although it is not surprising that older users, just like other age groups, are a diverse group of smartphone users, it is noteworthy that they generally seemed to have very deliberate opinions about features, even if they did not use them. So, non-use does not seem to be associated with being a laggard, but rather with deliberate decisions to be selective or to weigh the usefulness of a smartphone against other (sometimes "older") technologies, like a paper agenda or a traditional alarm clock.

It is interesting that some of the participants were using their smartphones extensively. These participants were able to show a broad range of apps installed on their phones, were in possession of the latest smartphone models, and seemed to see smartphone use as a creative and meaningful field of activity in itself. For instance, Henk, one of the anonymized participants, is a heavy tech user that knows his iPhone (the newest generation) very well, and is not shy to brag about it. He seems to almost excessively use his phone (more intensively than many younger people or teenagers), and identifies with the excessive use as part of signifying tech savviness. The phone here seems to be a resource of identity building and an occupation (rather than a means) in itself. Henk also "volunteered" on many occasions to explain to other, less literal participants the many possibilities that a smartphone (allegedly) offers.

At such instances, the groups themselves turned into both sites of learning and sites of power relations among participants. Here, Henk seemed to be an outlier example, as he clearly dominated some discussions among participants. As he was showing the extensive app libraries and using specialized jargon to describe the uses of these apps, other participants seemed to feel slightly uncomfortable with what they perhaps then considered to be "inferior" uses of their smartphones. For instance, Ingrid, another anonymized participant—who had just told an elaborate story about how she was using WhatsApp to organize volunteer work in her local running community—became very interested in Henk's experience, but also seemed to think that just using WhatsApp was not appropriate, and that better, probably more bespoke apps would be available for the same purpose. For us as observers, this was interesting, as it seemed to indicate that the context of the workshop as a setting explicitly dedicated to exploring smartphone use seemed to have introduced an implicit hierarchy among participants, whereby those less confident about their smartphone literacy experienced this as a deficit. It remains an interesting question whether this would have happened with younger respondents, too, or whether we were observing a form of internalized ageism, whereby incompetent smartphone use was seen as a signifier of negative effect of old age.

Regarding learning more broadly, participants also discussed their learning strategies. This further corroborated that smartphone use was both a means and an object of learning and social connectedness. For instance, many participants mentioned how they used smartphones to organize meetings of a local running club, or to support their work, for instance, as treasurer for a local sports club. However, they also mentioned how asking

children and grandchildren for advice became an opportunity to stay in contact. Participants thus not only shared their experiences with using smartphones and learned from each other in this regard, but they also discussed their experiences with learning to learn. Such experiences ranged from exchanging ideas about how to avoid being overwhelmed by the many features of a smartphone, how to focus on key aspects when learning how to use it, telling stories about how learning smartphone use became a meaningful topic to discuss with grandchildren, and stories about how participants themselves had discovered usages of which their children and grandchildren were not aware.

### 3.3. Learning When Designing a Smartphone App (Spain)

In Spain, we observed and took part in usability tests conducted as part of the design and development of a software application. Also in this context, the participation of older people was more as informants on the lower levels of the scales, but sometimes as consultants at intermediate levels [59]. The application stores and manages data, generated and gathered by users, for broader communal use, with appropriate privacy protections. The system allows for storing data, which is often required for processes ranging from registration to signing citizen petitions in a digital democracy platform. The system provides a connection with different websites or apps. When those websites or apps require the information stored in the application, there is the option to control which data are shared in the process. The system also allows users to register to new systems or to sign petitions anonymously. The app is part of a data activism project aimed at challenging the existing power relationships in personal data management. The usability test explored topics related to interface design but also topics related to the concept of the technology, including digital sovereignty, anonymity, privacy, and security. Most of the young participants were aware of the project previously because of their work in related topics, whereas the older participants were not aware of the project.

A first type of learning centered on the usability issues that were targeted with the tests. Here, we learned how the older people were more likely to require explicit explanations about the purpose of each feature and to require no technical language in these explanations. One of the older participants pointed at the fact that he would like guidance in the use of a new app by a “warm” expert. In general, they were more prone to identifying usability problems than most of the younger participants. Thus, although they were keen to support the idea of the app, it was difficult for them to explore it autonomously. Moreover, the design of the study shaped the possibility for participants to influence the design choices. In general, this experience helped us to appreciate how the design of the usability test, the instruments designed to collect data, and the analysis of the results shaped the possibilities of the group of participants to influence the design choices.

Beyond these usability issues, we also learned about the attitudes of participants towards this disruptive technology. The sample gave us the opportunity to see how people of different ages position themselves in a usability study. We learned about the divergences between the expectations of designers about older people and these disruptive technologies and the older people’s attitudes. Although the designers of the tools who conducted the workshop expected older people not to understand the concept of the app, the three older participants, with different levels of expertise with digital technologies and backgrounds, understood the goal of the app and identified the values of the app. They were keen to support this disruptive technology. Particularly, they worried more about privacy issues and the control of personal data than some of the younger participants and valued these aspects of the app, despite young participants being aware of the purpose of the app before the study. All participants showed less interest in security issues and in the blockchain technology used to pursue these goals. In general terms, the participants showed that they trusted the system; however, their trust in the system was more related to the context of the study than to the technology used. One of the older participants went further and argued that he would trust the system depending on the person who suggested he should use it.

In addition, we learned about the different perceptions of the people about their role in the usability test, depending on the age and the related stereotypes. Whereas middle-age participants assumed they were invited because they were target users of the app and their responses were based on their previous experiences with related technologies, young and old participants assumed they were invited to represent an underrepresented collective that requires special considerations. Older people assumed they were invited because it is more difficult for them to learn to use new technologies, and younger people because they feel they are not often involved in movements of data activism. These self-stereotypes influenced their contribution to the sessions.

#### *3.4. Learning about How Technologies Might Be Meaningful for Older People's Lives (Sweden)*

In Sweden, the workshops were designed to allow stakeholders to articulate their perspectives about design ideas and to make suggestions for modifications of digital applications to fit later life [25]. During these design workshops, we learned a great deal about what technological futures different stakeholders found meaningful for older people. Hence, we learned how older people had a keen interest in technological devices aimed at supporting their daily life activities. They were particularly appreciative of technologies able to link them through calls and sustain their continued life course. Examples are roles envisioned for technologies in finding lost glasses, cleaning up when something is dropped on the floor, helping with guiding lights at night, opening and closing windows, issuing reminders to take medicine, or staying connected with their networks of families, friends, and home help services. The older people particularly saw a use in smartphones to be extended to one or some of these functions, but that smart home devices and robots, they claimed, could also be used in a similar fashion. Rather than technophobes, older people presented themselves as technophiles, interested in and forward-thinking about design ideas.

We also learned from other stakeholder groups about their insights. We learned from the experiences of the design students who highlighted the benefits of telecommunication technologies for older adults to stay in touch with their families and grandchildren by sharing pictures and text messages, as well as the desirability to have a bigger screen for older adults to better navigate these technologies, as some may have problems with buttons. From the nursing teachers as experts in providing care for older people, we learned about their experiences and visions of older people and how technology might help to facilitate care for older adults. For example, their design ideas pertained to communication technology being able to translate different languages for communication between international doctors and nurses, or to support the care of older people with seeing problems through sensors attached to the arm, taking over the role of a seeing-eye dog. Overall, we gathered an abundance of design ideas for technologies for older people, ranging from technologies for older women and men, healthy and frail, lonely and social, and third and fourth age [65]. By engaging older participants as well as other stakeholders, the diversity and heterogeneity of older adults became clear, as did plenty of design ideas; we learned about the technological interest of older people as much as about the various roles for technologies to play in older adults' everyday lives.

From a procedural perspective, we believe that involving stakeholders in a more open manner allowed for their responses to be more explorative, based on their own life experiences and backgrounds. To be sure, we do not mean that over-simplification or a reduction of complexity of the design aspects would have enabled the participants to be meaningfully involved. As a consequence, we did not highlight the role of continued explanation or effortful guidance to support older participants during the process. In practice, such guidance appears as rather derogatory attitudes towards older people, and would have in fact limited their confidence to contribute to new technological design ideas. Rather, we mean that by providing sufficient information about current technological developments at the onset while remaining open to the responses expressed by our stakeholders, an environment was created in which the stakeholders were encouraged to disclose their

own perspectives and ideas [25]. In so doing, all anecdotes uttered were treated as relevant to the design ideas. We felt this setting was a central feature to enable learning from the involved stakeholders.

In this procedure, the retired engineers and people were mostly involved at an intermediate level, being consulted about their inputs and ideas, yet not having a say in fully embodying their ideas into specific technological objects. Their role can best be described in terms of delegation and partnership, as participating experts in their own life situation [59]. Other stakeholders appeared to be involved at a similar level. The nursing teachers participated as consultants by contributing their own views but not primarily basing them on their own life experiences. The role of the design students also took the shape of consultants, based on their experiences with older relatives and friends. In our observations, we did not experience particularly negative stereotypes. Rather, as all participants had some connection with older people, in fact, we observed how older people were treated quite equally in terms of their interest in technologies that they already lived with. The Swedish workshops, however, did not result in concrete design objects, but purely ideational instantiations of participants' design ideas for older people.

## 4. Discussion

### 4.1. Learning in Design Processes

Our findings outline the significance of the problem setting for learning. They show how the way co-design is organized not only determines the result, but also how its internal dynamics and socio-material arrangements are closely intertwined with different learning outcomes. Previous literature on participatory design has frequently highlighted mutual learning as a core outcome of co-design activities [21,26]. It has fallen short, however, of examining the precise nature of learning outcomes during design processes. Our findings go beyond the simplistic recognition of learning as an important design outcome, towards interrogating the actual design settings that produce learning outcomes in different contexts. In this regard, our study makes visible *how* the content of what is learned can vary significantly from design setting to design setting. In the Swedish design settings, new knowledge was gained about which technologies could be meaningful for the lives of older adults, whereas in the Dutch design settings, the new knowledge obtained pertained to older people's creative engagement with smartphones. In the Spanish design settings, the designers learned about older adults' views and feedback on smartphone app prototypes, whereas in the Canadian design settings, the learning centered on what mattered to older people during their everyday life. This makes clear that although learning is a likely and desirable outcome of co-designing with older people, what precisely it entails can take radically different shapes in different design contexts.

Our findings thus suggest that learning in design depends on a range of contextual aspects and elements of the "problem settings" [45] and "communities of practice" [34] in which it operates. In particular, different socio-material assemblages [41,43,46–49] formed key roles in "defining" the nature and content of learning in our different design settings. For example, rather open-ended design settings in Sweden played a role in how the designers acquired novel knowledge about where technologies could support older people, whereas more pre-determined design procedures with prototype testing activities structured the nature of learning in the Spanish design settings and resulted in particular design adjustments. Similarly, specific arrangements came with different roles and levels of involvement [59] for participants as informants (Canada, the Netherlands), idea developers and consultants (Sweden, Spain), and testers (Spain). Socio-material features were also relevant in enacting the interrelations among participants: The prototype app in the Spanish design workshops helped to serve as a mediating device for communicating only some types of feedback from older adults to designers, and the confidence and interests of different participants in the Dutch setting resulted in some people's voices becoming more prominent than others.

Among those features, a central role was performed by the *purpose* towards which the different design settings were oriented. With designers asking particular questions, providing certain materials, and encouraging certain answers, they purposefully elicited one type of knowledge from the older participants, while side-lining potentially other ones. This was evident in all four of our design settings. It is, for example, only possible to learn from older participants about their daily life as a relevant input to design activities if those insights are asked for and listened to. On the other hand, existing prototype apps can only be tailored to feedback by older adults if prototype tests are indeed a part of the design procedure. The setting of such purposes may be related to a number of other socio-material factors, including cultural differences among countries or care and welfare regimes, as may have been the case in our comparison of four different country contexts. Our findings of different design settings outline a plethora of different design performances, ranging across interests about technology possibilities (Sweden) and meaningful technologies (Canada) to current usage of existing devices (the Netherlands) and adjusting particular design prototypes (Spain). Together, these joint findings highlight that there is not just a desirable mutual learning outcome in design, as is commonly presumed in PD literature [21,26], but rather that different types of learning can occur depending on the design practices (and settings) in which they are enacted.

#### 4.2. Design with Older People

The finding that learning cannot be simply assumed as a design outcome, but rather is embedded in collective design activities structured by power relations and socio-material features, we contend, marks an important agenda point for contemporary debates revolving around co-design and older participants [17,18]. Although previous studies have begun to cast doubt on the link between co-design activities with older people and specific design outcomes (e.g., [27,67–69]), our findings underscore the relevance of the settings of design practices themselves in structuring the type of learning outcomes that can be obtained. Specifically, we observed how different design settings enacted different learning outcomes. As such, how and what is learned is deeply entangled with a range of features, such as the cultural context, the levels of involvement, the materials included, or the interrelations enacted. What appears crucial, therefore, is for practitioners in design to acknowledge the intricate nature of design processes, and to be mindful of the socio-materiality entangled and the power relations enacted in the design procedures they craft.

Such a recognition, in turn, opens up novel action points for co-designing with older people. Here, the relevant implication from our study is that it is indeed possible for designers to obtain different outcomes of learning. In turn, this means that designers are able not only to reflect on what types of aspects they wish to learn by involving older people, but also achieve a certain outcome by incorporating these ambitions into their practices. Against this background, we view this study as a critical step towards developing more appropriate co-design practices with older people. The findings we presented here indicate that learning in co-design practice is far more than the simple transmission or exchange of available expert knowledge. In order to understand the different learning outcomes that can be achieved, rather, we need to critically interrogate the problem setting, contextual features, meanings, and materials involved. Thus, design practitioners may wish to trace the different socio-material aspects that populate their design practices to the ongoing learning outcomes, and use this understanding to adjust their design procedures towards their intended purpose.

This, of course, goes hand in hand with the awareness that by pursuing one particular ambition, alternative aspects of learning might be excluded. Altering the different variables in co-design, therefore, is always a balancing act, making one version of learning possible while possibly ignoring another one. In this regard, the current state of affairs, with ongoing uncertainty about the outcomes of co-design methods with older adults [69,70] and gerontechnologies struggling to gain momentum [71,72], suggests that the internal dynamics of co-design practices with older people and user involvement as a method are

worthy of more thorough exploration. Future research could seek to shed light on how such balancing acts in co-design projects can be organized in order to lead to more meaningful technologies for older people. We wish to see our study as a starting point to understand more systematically the connection between learning and design procedures. It is our hope that eventually, these insights can support designers in navigating the complexity of co-design with a demographic as diverse and rich as the ageing population.

#### 4.3. Limitations

We want to caution that our findings are built on a single cross-national study in four different institutional regimes in Canada, the Netherlands, Spain, and Sweden. Other institutional environments were not considered. Our findings of design as different types of learning, therefore, should be examined in different contexts than ours, and across multiple different cultural backgrounds. This is particularly pertinent given the relevance of the problem setting for different learning outcomes [45]. Thus, we encourage other researchers to investigate our findings in their contexts, thereby developing our insights further. Furthermore, the group of people we took as belonging to the “older” population segment is rather large (above 55 years). Although it allowed us to include a broad variety of older people and resembled previous choices in the literature (see [62–64]), this choice also runs the risk of creating the impression that the responses obtained are in any way representative of all older people. We would like to caution against such a reading of our findings, and rather ask for them to be seen as snippets from a rather large segment with possibly many additional insights to offer (We thank one anonymous reviewer for bringing this to our attention.). Future research could tap into these insights, allowing for a further exploration of the broad diversity and heterogeneity of life experiences and knowledge that the group often referred to as “older” may offer.

#### 5. Conclusions

Unsurprisingly for sociologists, age scholars, and designers, the results from co-design depend on how workshops and other procedures are organized and who participates. This paper, however, contributes to a deeper understanding of how local socio-material arrangements affect the design process and how co-design and learning activities are closely intertwined. In particular, we have shown how power features, materials, and problem settings mattered for different learning outcomes in four different countries. Our finding that learning is not just a straightforward design result, but rather emerges out of design activities characterized by power-related aspects and socio-material assemblages, implies a central shift in thinking about co-designing for, and with, older participants. To thoroughly get hold of how different learning outcomes can be obtained in such projects, we need a more profound understanding of the implicit features of design and their accompanying practices. Future research, we hope, will further advance our knowledge of these dynamics, and illuminate the intricacies and complexities surrounding design involving older people.

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Article

# Aging in Place with Age-Related Cognitive Changes: The Impact of Caregiving Support and Finances

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**Abstract:** In the United States, aging in place is a common concept that refers to older adults' desire to remain in their homes as they age. However, this ability to age in place is a complex process that is not only impacted by the home's accessibility or individual functional abilities. This paper aims to examine different factors, such as home environment and home modification, caregivers, finances, and other supports present in the participants' lives, that impact older adults with age-related cognitive changes (ARCC) (in)ability to age in place. Qualitative interviews with older adults with ARCC ( $n = 5$ ) and their caregivers ( $n = 5$ ) were conducted. The participants' experiences while aging in place indicate that finances and caregiving support greatly impacted their lives at home and ability to age in place. Personal finances dictated where some of the participants could age and the support, they could afford from home health aides. Additionally, informal and formal caregivers were an important source of support that aided in the older adults' ability to remain home. As researchers, we need to continue to address personal finances and the support that the individual has in their lives to most effectively promote aging in place and their life at home.

**Keywords:** aging in place; older adults; dementia; cognitive changes; home

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## 1. Introduction

In the United States, the term aging in place commonly refers to older adult's desire to remain in their home instead of transitioning to an institutional setting as they grow older. The overall goal of the knowledge produced from this literature is to increase the likelihood that older adults will remain in their homes, in the community, safely [1,2].

To age in place with advanced cognitive decline, beyond what is seen in typical aging adults, can create further complications and difficulties to age in place. People with Alzheimer's disease or dementia are at a higher rate for nursing home admission compared to older adults who do not have Alzheimer's disease or dementia [3]. 50.4% of individuals in institutional settings have a diagnosis of Alzheimer's or other age-related cognitive change diagnoses [4]. This statistic further indicates the difficulties this population faces to be able to age in place. In this paper, this group of aging adults is referred to as older adults with age-related cognitive changes (ARCC). The term includes those diagnosed with dementia or Alzheimer's disease and those with cognitive changes that are more advanced than what is typically seen in aging adults that impact their daily lives.

Caregivers, informal or formal, provide the necessary support to older adults with ARCC to remain in their homes. For all older adults in general, 83% of the care these individuals receive is provided by an informal caregiver. Informal caregiving is highly gendered, and daughters are more likely than sons to provide informal care [5]. It was reported that older adults with ARCC who are aging in place require over 100 h of care a month [6]. Caregivers, formal or informal, assist with basic care needs, home management, and medication management. They ensure the older adult is safe while in the home. Additionally, caregivers support the coordination of medical care and utilization of medical services. Research demonstrated that older adults with ARCC with the support of a caregiver utilized health services and had increased less difficulty with coordination of care

compared to those who live alone [7,8]. The role that caregivers play in the lives of older adults with ARCC is vital, caregiver stress and burden increases placement of nursing home admission, further supporting the necessity that caregivers play to promote aging in place [9,10].

A large subsection of the aging in place literature focuses on home modification to promote accessibility throughout the home. Safety concerns are often the main priority when performing home modifications [11–13]. Modifications to the built environment increase adults' independence and allow for routines to continue to be performed [14]. Home modification limit the decline in performance of activities of daily living and instrumental activities of daily living [15]. However, there is a balance to the implementation of modifications; certain modifications can disrupt an individual's with ARCC physical space too much, especially if the home modifications are not chosen by the person who lives in the house [14]. Although physical modifications can increase accessibility, they can also confuse the individual with ARCC and irritate them. The increase in confusion and irritation is a fear that family members of those with ARCC have if they modify their homes [16]. Home modifications should support an individual's physical and cognitive needs. Unfortunately, home modifications to support a person's cognitive needs are not made at the same rate that modifications are made to compensate for the physical change that occurs [12].

There are many older adults whose lack of financial instability threatens their ability to remain in their homes [17]. Often lower-income older adults' households are unhealthy environments and cause adverse health effects because of poor housing conditions, including injuries, respiratory infections, lead poisoning, and other chronic conditions [18]. The current poverty level for adults in the United States aged 65 and older is 9.7% [19]. However, not included in the poverty measure are out-of-pocket health costs and other measures including but not limited to capital losses and gains and income and payroll taxes. With the inclusion of additional measures that are not uncommon in older adults' lives, poverty rates are 57–89% higher than the official poverty rate [20]. In other words, as people age, the additional costs associated with the aging process impact the financial stability of older adults. If they are included, it increases the number of older adults living in poverty dramatically.

There is an assumption that older adults have limited housing-related expenses because they live in homes paid off. However, in the United States, one in three older adult households experience the burden of high housing costs [21]. In 2015, almost 44% of older adult households spent 1/3rd or more of their income on housing costs [22]. Some older adults live on a fixed income, making it financially difficult to afford a home when housing prices are constantly rising [23]. There is often a choice that needs to be made regarding individuals' use of financial resources [24].

Although there is an extensive amount of research that exists about aging in place, there is no one size fits all answer to aging in place or where an older adult should live [25,26]. However, someone's (in)ability to age in place is dependent on a multitude of different factors. Difficulties older adults with ARCC face while aging in place include safety-related problems, an inability to complete ADLs, medicine management, caregiver stress, and a lack of formal care [27]. Compounded, these difficulties, without intervention, can create an almost impossible situation for aging in place. To most effectively promote aging in place for this population, the difficulties and differences that exist in each person's life need to be explored from their perspective directly and addressed.

The aim of this research was to document the experiences older adults with ARCC faced while aging in place to document the aspects in their life that allowed them (or made it difficult) to age in place. Secondly, this paper examined how the factors that they identified that supported or did not support their ability to age in place interacted with one another. These supports include the home environment and home modification, caregivers, finances, and other supports present in the participants' lives. It is expected that the older adults who have more supports in their life can age in place safer and remain in their

home longer than those who do not have the necessary supports. The examination of this population of older adults' lives is important because older adults' ability to remain in their home as they age is dependent on many factors that interact. How different factors interact need to be further explored to advance the field and more effectively promote aging in place.

## 2. Materials and Method

### 2.1. Participants and Recruitment

Participants were recruited from organizations that support individuals with ARCC and their families. Staff members in the organization shared basic information about the study and the researcher's contact information to their members who fit the inclusion and exclusion criteria. To participate in the study, an individual needed to be at least 60-years old, living in a home within the community. Participants could not live in an assisted-living facility, independent living facility, group home, nursing home, or institutional setting.

Additionally, participants had to be diagnosed (or be suspected of having) dementia or Alzheimer's disease or had cognitive changes that began as they aged, which impacted their daily lives. Examples of cognitive changes that impacted their daily life included needing assistance completing activities of daily living or additional assistance to complete tasks around their home safely.

Caregivers of the participants with ARCC were encouraged to participate in the study to inform the research question and as a form of triangulation. This could include formal or informal caregivers, friends, neighbors, or individuals who support the older adults' life at home. The study sample consisted of five participants with ARCC and five caregivers. See Table 1 for demographic information of the participants.

Table 1. Participant Characteristics ( $n = 10$ ).

Name of Older Adult with Age-Related Cognitive Changes (ARCC) ( $n = 5$ )	Age/Gender	Race/Ethnicity	Number of Years with Cognitive Changes	Caregiver/Relation to the Older Adult with ARCC ( $n = 5$ )
Mary-Ann	86/Female	Caucasian	1	Deborah (Daughter)
Maria	76/Female	Caucasian	7	Richard (Husband)
Carol	90/Female	Caucasian	Unknown	Aviva (Friend)
Henry	90/Male	Caucasian	2	Diane (Home Health Aide)
Colleen	64/Female	Caucasian	1	Sandy (Daughter)
				N/A

### 2.2. Methods

Participants consented to interviews, diary keeping, and observation sessions to allow participants with different cognitive abilities to participate. Different methods were included in the research design to be as inclusive as possible to different participants and their different abilities. All the participants could verbally communicate their thoughts and experiences; therefore, interviews were the primary medium for data collection. Interview questions sought to understand the participants life at home and the different factors in their life that supported their life at home. Interviews with caregivers confirmed information stated by the individual with ARCC and provided additional information about the older adult with ARCC life at home.

Interviews were completed in the participant's home because their home gave the person environmental cues and contexts to the interview topics [28]. The CORTE (Consent, maximizing Responses, Telling the story, and Ending on a high) was adapted to promote the participant's inclusion and active involvement in the research [29]. Participants were interviewed multiple times to gain additional information and not overwhelm the participants with one long interview session. However, retention of participants was difficult. Two of the participants with ARCC passed away, one moved to a nursing home, and

another participant had recurrent falls, which resulted in hospitalizations and long-term stays in rehabilitation centers.

### 2.3. Data Analysis

The qualitative software, NVivo, was used to analyze the data. The analysis began with the open coding stage, where general codes are assigned to the data [30,31]. Each participant's data was looked at, and the items in their life that impacted their ability to age in place were coded. After each participant's data was coded, these codes were brought together to create larger categories representing the participants' important experiences and adequately worked towards answering the research question, axial coding [30,32]. Throughout this iterative process also comes selective coding, where codes are re-conceptualized and made to tell a story of the data collected [31,33].

### 2.4. Study Approval

The Institutional Review Board at SUNY Stony Brook University (protocol code 1181693, date of approval 18 May 2018) approved this study protocol. Participation in this study was voluntary, and all identifying details were changed to protect the participants' identity. Written informed consent was obtained from the participants to publish this paper. The participants with ARCC needed to pass a capacity-to-consent assessment before signing the consent form. If the individual was unable to pass the capacity-to-consent form, their caregiver signed for them.

## 3. Results

The participants' revealed that the main aspects in their life that contributed to their ability to age in place were caregiving support and finances. The participants' finances were brought up in terms of the home they could afford to live in and affording to hire a formal caregiver. The support provided by caregivers was a necessity in the participants lives. However, these two just mentioned, findings worked together, and sometimes against each other, to foster the participants' ability to age in place. Despite it being a large subset of the literature within their field of study, home modifications were not found to significantly impact any participants' lives or ability to remain in their homes.

### 3.1. Finances

#### 3.1.1. Housing

The participants discussed their financial situation as promoting their ability to remain in their home or threatening their ability to remain in their home. Some of the participants financial situation dictated where they were able to age in place. For the others, their financial security ensured that they could remain in the home they loved. The examples from the participants Mary-Ann and Colleen highlight the impact of finances on the place they could live in based on their financial situation.

Mary-Ann, at the time of her involvement in the study, had been living for the past two years in an affordable housing apartment complex. When she was asked if she could see herself staying in the apartment moving forward, she was unsure. She said, "I can't say if I've got the money tomorrow." Her daughter added that one of the reasons she liked her mother's apartment was the affordability of it. Mary-Ann moved out of her two previous homes because of her inability to afford them. Her first home she moved out of was a large home but it was too big for her, and "[she] needed the money [she] could get out of it." The second place she moved out of was an apartment that was move expensive than her current residence. Mary-Ann spoke with fonder memories of her old apartment than she did her current residence. She liked the apartment she was living in; however, she explained, "It's not like let's see, I lived in [a different complex] for a while- rented there. But it's a whole different world there, they have money. They have retired, and their husband died, and I had a lot of friends that I knew before that lived there. So, I rented for a while."

Similarly, Colleen was concerned about her financial status and her ability to remain in her home. Colleen lived in affordable housing with two roommates. She paid for her rent with her Social Security Disability Income (SSDI) payments. However, the possibility that her SSDI would be cut and the inability to pay rent in the future was a source of stress in her life. The possibility of not being able to pay her rent worried Colleen so much that she felt that moving to a nursing home would be better for her. She explained, "I don't know what's gonna happen. I won't even make the rent with what they cut me, you know?" She went on to say, "so I was just praying I could go into a nursing home." Both Mary-Ann's and Colleen's financial status impacts the home an older adult lived in now and will be able to live in as they continue to age.

### 3.1.2. Affording Formal Caregiving

The participants' financial status also impacted the formal caregiving they could (or could not) have in the home. This was illustrated best in the lives of Carol and Henry. Both of the participants had home health aides (HHAs) in their home supporting their daily life. The support provided by the HHA was necessary to ensure that they could remain at home safely.

According to Carol's close friend, Aviva, Carol would not be able to live in her home without having a 24 h HHA living with her. Carol had experienced numerous falls and her son decided it was unsafe for her to be living alone. Her finances afforded her the ability to hire and pay, out of pocket, for a 24 h aide to live with her.

Unlike Carol, Henry and his daughter Sally did not have the financial means to pay for additional help; they needed to apply for Medicaid to receive assistance from a HHA. Sally said it would be impossible to pay for the HHAs out of pocket. Sally took care of all of Henry's finances. Detailed extensively by her, the Medicaid application process was complicated, and she faced barriers along the way. To begin applying for Medicaid, Sally started with collecting statements to prove her father's financial status. The process to be approved for Medicaid took eight months, even with help from an elder attorney and Henry's other adult daughter.

The personal finances of the older adults impacted their ability to hire necessary caregiving support. Carol's ability to pay out of pocket for a HHA was simpler compared to Henry and his daughter's experience applying for Medicaid.

### 3.2. Caregiving Support

Caregivers, informal or formal, were a key support in the lives of the participants. All five of the participants had caregiving support in some capacity. However, the amount of support that the family or formal caregivers provided varied. Family members supported the individual with ARCC with managing finances, medication management, grocery shopping, activities of daily living, and basic tasks around the home. All of the activities that the informal caregivers provided was to ensure that the older adult was safe in their home. For some of the participants, the support provided to them made it possible to live safely at home. If it were not for the older adults' caregivers, they would not be able to remain in their homes.

The support and assistance of a caregiver, informal or formal, was important for the older adults in this study and was highlighted through Colleen's experiences at home. Colleen had two adult children, one who lived in a different state and helped her with tasks like laundry and ensured she had food in her fridge, and one who lived locally but did not visit frequently. Colleen would have preferred to live with her daughter; she explained, "[my daughter] thinks I'm not um-you know she thinks I'm too much." Colleen's current level of need would be too difficult for her daughter, who worked full time and had a newborn baby, to provide the necessary support. While interviewing Colleen, she expressed a desire to move to a nursing home. Colleen accepted the likelihood that she would not be able to maintain her life at home and accepted the possibility that she would need to move to a nursing home.

#### 4. Discussion

The aim of this research was to understand the different aspects within the lives of five older adults with ARCC that supported or created barriers to aging in place. Older adults desire to remain in their homes [34]. Older adults with ARCC value being able to remain in their home because of the security their home affords them [35,36]. For some older adults, leaving their homes is unimaginable [37]. The participants in this study echoed this sentiment. However, only if they had the financial means to remain in their home. For some of the participants, the living expenses and housing unaffordability impacted where they could live. After interviewing the older adults with ARCC and their caregivers, the participants revealed that finances and caregiving greatly impacted their life at home.

When researching aging in place, the older adults' finances must be considered because one in three older adults experience a financial burden due to high housing costs [21]. This was true for the participants in this study, two of the participants lived in a rented house/apartment, and their financial situation dictated where they could live. Colleen's affinity towards their home was not enough to support her ability to remain at home. In other words, despite her preference to live in her apartment in the community, her limited finances and her declining functional abilities did not support her life at home.

Colleen's experience paralleled other low-income older adults' experiences. As the cost of housing increases, a larger percentage of older adults' fixed income goes towards housing costs, making it more difficult to afford to live there [23]. Research found that aging in place might not be possible for low-income seniors [17]. Low-income older adults have different needs to age in place compared to older adults who are financially secure. Additionally, the reported high costs of health care expenditures of living with dementia compared to other disease in older adulthood further supports the need to address the financial security of this population [38]. With the known difficulties low-income seniors face as they age in place, an older adult's financial situation should not be neglected in aging in place research.

The second area that was found to impact the participants' life at home and ability to age in place was the support provided by caregivers (informal and formal). Caregivers are vital to support older adults with ARCC life at home as it was found that older adults who live alone have more unmet care needs and additional difficulties compared to those who live with their caregiver [8,39,40]. The older adults in this sample relied heavily on their loved ones and formal caregivers to support their life at home. The importance and necessity of informal caregivers in the lives of the participants in this study aligns with previous research [41].

However, the ability to hire a formal caregiver, a HHA, was impacted by the older adults' financial means. Researchers found that an aide in the home acts as a facilitator to aging in place because this population commonly requires additional care in the home [41]. It was not surprising to find that the presence of HHAs was dictated by the participants' ability to pay for their services. On average, the cost of hiring a HHA is about \$12 an hour [42]. This amount of money can become burdensome for the person paying for the services, especially given the amount of care a person with ARCC can require. A second way older adults have to afford the cost of a HHA is through Medicaid.

Although older adults age 65 and older receive Medicare, it does not cover the cost of HHAs. Medicaid is a federal and state program that provides health coverage for those who qualify for it across the United States. Medicaid will pay, if a person qualifies, for caregiving support from HHAs, as well as other medical services [43]. Medicaid requirements vary by state. The Medicaid application is difficult, and people often experience difficulties throughout the process. People with more health problems and less education were found to have greater difficulty with the application and faced more barriers than those with more education and fewer health problems [44]. The participants, Henry and his daughter, were one example of the difficult and lengthy process people face when applying for Medicaid.

All the factors that impact an older adult with ARCC are linked together in complex ways. As researchers, we need to be aware of the variety of connecting factors in their

lives to effectively understand their experiences and promote aging in place in meaningful and lasting ways that benefit aging adults across various socioeconomic factors. Although, when someone ages in place, they are doing so in their home, it does not mean that the discussion surrounding aging in place needs to focus on functional abilities and the house they live in, in isolation. This study pointed to key areas, finances and caregiving support, in older adults' lives that impacts aging in place and the ability to do so.

## 5. Conclusions and Future Directions

Although aging in place, on paper, presents as a simple concept, it should not be simplistically understood or applied to a person's life. One reason for this is the complexity that exists in a person's life. The financial situation of older adults with ARCC had great impacts on their (in)ability to age in place. It also impacted the support that they could or could not afford. The support of informal caregivers was paramount for the lives of older adults with ARCC. Aging in place is more than just an older adult and the home they live in. Future research should examine the just mentioned aspects of older adults as well as other aspects of older adults lives that contribute to older adults (in)ability to age in place.

One area, related to this topic, that could be explored further is health literacy. Health literacy is important for this population as older adults often have chronic conditions and other age-related functional losses that require a certain level of health literacy [45]. Research based on a nationally representative study found that adults with the lowest average health literacy were those aged 65 years old and above. When considering older adults with cognitive changes, cognitive changes further create challenges while navigating the health care system. Research found significant results for the association of impaired verbal fluency and memory and inadequate health literacy [46]. Older adults with ARCC are at higher rates of difficulty understanding and then acting upon their health condition based on the advice given to them by medical professionals. The challenges to understand the health care system or processes like applying for Medicaid impacts the services that older adults with ARCC can access such as caregiving services/support. Thus, impacting older adults' ability to age in place.

Finally, future research should continue to explore this area amongst racially diverse aging adults and investigate how intersections of race impact the factors that impact aging in place that were identified in this study. African Americans over the age of 65, compared to other racial groups in this age group, face higher rates of poverty [19,47]. Higher rates of poverty impact the ability to age in place [17]. Previous studies identified how racial minorities are less likely to stay in their current residence compared to Caucasian seniors [48]. However, additional research is needed to further support different groups of aging adults based on their differences and identified needs.

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Article

# Representation and Agency of Aging Superheroes in Popular Culture and Contemporary Society

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**Abstract:** The figure of the superhero has always been regarded as an iconic representative of American society. Since the birth of the first superhero, it has been shaped by the most important historical, political, and social events, which were echoed in different comic issues. In principle, in the superhero genre, there has never been a place for aging superheroes, for they stand as a symbol of power and protection for the nation. Indeed, their mythical portrayal of young and strong broad-chested men with superpowers cannot be shattered showing them fragile or disabled. The aim of this article is to delve into the complex paradigm of the passage of time in comics and to analyze one of the most famous superheroes of all times, Superman, in terms of his archetypal representation across time. From the perspective of cultural and literary gerontology, the different issues of *Action Comics* will be examined, as well as an alternative graphic novel *Kingdom Come* (2008) by Mark Waid and Alex Ross, where Superman appears as an aged man. Although it breaks the standards of the genre, in the end it does not succeed to challenge the many stereotypes embedded in society in regard to aging, associated with physical, cognitive, and emotional decline. Furthermore, this article will show how a symbolic use of the monomythical representation of a superhero may penetrate into other cultural expressions to instill a more positive and realistic portrayal of aging.

**Keywords:** cultural and literary gerontology; aging and society; agism; popular culture and comics; DC superheroes

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## 1. Introduction

In ancient mythology, the term hero used to represent a being born from a God or a Goddess and a human, placing them between these two: a demigod, such as Achilles or Hercules. These demigods were mortal and living among the mortals. After death, their last journey to the underworld was a psychological and aesthetical mean to overcome their own mortality:

The journey to [ . . . ] the underworld is the ultimate experience for the epic hero, representing the imaginative limits of human hope. The tenacity and power of the myth successful confrontation with the world of the dead, and the concept of rebirth and resurrection it implies, demonstrate the almost obsessive need for human beings of all cultures to come to grips with their own mortality by opposing it, psychologically and aesthetically, with stories of its being overcome [1] (pp. 29–30).

Later on, the term hero was used to refer to people who were made immortal symbolically in epic poems, which narrated their incredible deeds in life. Moreover, as it was believed that their souls eternally dwelled underground, they were offered sacrifices to praise their glory as if they were Gods. Yet, these rites were still different from the ones to Gods, as they were performed on lower altars, the sacrificed animals were killed facing the ground, in the direction of their underworld, not divine, home [2].

In the comic genre, many scholars have interpreted American superheroes from comic books as modern Gods and Goddesses, mainly from Greek and Norse mythology [3].

Although they are considered beings with special powers, they do not possess the gift of immortality as Greek Gods did. Superman, for instance, is strong and made of steel, but has a well-known weakness: the kryptonite. Similarly, Achilles is brave and invincible except for his heel. Therefore, the comic superhero corresponds to a Greek demigod, to the hero in the original meaning of the word. Yet, as the term has been corrupted and now denotes whoever whose deeds are somehow remarkable (not necessarily because of extraordinary or supernatural powers), the prefix super- is needed in order to place them on the same level with demigods, “on the edge of two worlds: the divine and the human” [4] (p. 201). For these reasons, it can be assumed that the gift of immortality has always been exclusively in possession of Gods, albeit yearned for by humans since the world’s origins, because it was the only difference which separated them from the Divine. The American superhero has become a symbol of strength and power and for this reason, it may seem highly improbable to find any who challenges the portrayal of this archetype and is depicted as an aged or aging man. However, if this happens, as is in the cases discussed in this paper, it is of extreme relevance to examine how he is represented and what is his agency in the story, for superhero comics are very popular and have the capacity to reach a broad and diverse readership. Moreover, superhero genre not only reflects society’s mind-set, but it can also be influential in challenging cultural stereotypes in regard to aging.

## 2. Aging in Comics

During the history of American comic art, very few comics have introduced older characters. Due to commercial need of continuity of comic series with established stock characters, these can never grow old. If this were not so, no comic saga could exist longer than the life expectancy of a particular character. In the short history of comics, it was not until 1918 that the comic author Frank King introduced characters who aged over time in his comic strips *Gasoline Alley* (1918–1969). The protagonist, an unmarried man named Walt, very keen on car engines, finds an abandoned baby and decides to adopt it. From that moment on, the nature of this series changes and becomes a family saga of daily life of this newly composed family. According to Santiago García, this comic represents a giant leap in comic history:

King seems to capture the passage of time and, in fact, if there is something distinctive about *Gasoline Alley*, it is the fact that time really passes by. The characters grow older, like real human beings. Skee-zix [the adopted boy] will potentially grow, go to war, get married and have his own children, whereas Walt [the foster father] will also get married and have biological children with his wife [5] (p. 75).

With this family drama, King introduced a real time continuity into comic art, which captures the physiological growth of the protagonist up to old age. For its long-run duration, it is also of great relevance in terms of mirroring a century of social changes in American society. After this important milestone, it is not until the sixties that writers raise awareness in regard to the paradigm of physical aging in comics. Hand in hand with the tendency of adding more realism to the fictional comic world, it is then that artists start to reflect on the ways of how to introduce the dimension of time in their works. For instance, conscious of the relevant contribution of King in comic art, Chris Ware edited the saga under the name of *Walt and Skee-zix* (2005), and admitted a great influence of the author on his *oeuvre*.

On the other hand, a study published by Heather Hanlon, Judy Farnworth and Judy Murray in 1997, analyzed 20 years (1972–1992) of history of comic strips where older characters appear, with a special emphasis on their societal roles. The results showed that the elderly were underrepresented in American comic strips (women more than men), and their roles were rather negative and stereotyped (men were depicted more frequently in negative roles than women, but the overall numbers pointed to negative portrayals of the older generation in general). Therefore, the final conclusion of the scholars was that “this

form of communication supports ageism and has the potential to promote stereotypes of ageing" [6] (pp. 302–303).

Fortunately, this tendency towards agism in comics has changed over the years. In fact, in the first decades of the 21st century, there is an important number of graphic novels, where the old characters are depicted if not in a positive light, at least in a realistic way, as a heterogeneous group, and given necessary visibility. Among these works can be found titles such as *Tangles* (2012) by Sarah Leavitt, *Can't We Talk about Something More Pleasant?* (2014) by Roz Chast, *Special Exits* (2014) by Joyce Farmer, or *Displacement* (2015) by Lucy Knisley, to name the most relevant ones. Nevertheless, it is also important to bear in mind that there is an important difference between graphic novels and comics. Whereas the former has acquired the status of high literature, the latter still belongs to popular culture which is stigmatized for disseminating cultural stereotypes.

On the American comic scene belonging to pop culture, a dominant position is held by the genre of superheroes as "the hero with superhuman powers appeared just as modern American comic book publishing was in its infancy and quickly dominated the output of the nascent industry during the late 1930s and early 1940s" [7] (p. 362). In fact, since its first mention in 1917, the term superhero was used to refer to a public figure of great accomplishments. The American superhero was born as a result of "decades of pulp, film and penny dreadful predecessors" [3] (p. 17), and coincides with the times of the Great Depression when this kind of savior was needed. A superhero soon becomes an inseparable part of American culture, a kind of symbol. In June 1938, Jerry Siegel's and Joe Shuster's Superman made his debut in *Action Comics*, lifting a car above his head on the front page of the first issue. It was a complete success and the 200,000 copies were soon sold out [5]. The first authors of superhero comics belonged to the working class as well as their readership. According to Brooker, "these earliest examples express a deep and underlying distrust of capitalism and a strong desire to change society for the better via a seemingly simplistic mission to right wrongs and fight crime" [7] (p. 362).

### 3. A Brief Historical Overview of the Most Famous American Superhero, Superman

Superheroes' origins are embedded in mythology, as stated before. However, it is not only because they deal with topics such as good and evil, structure and entropy, or friend and enemy, but because "superhero stories also carry the dominant moral values of a culture", and "offer ideological representations of gender, race, sexuality and nation" [8] (p. 2). In a similar light, Joseph Campbell claims that the hero's journey as a type of a monomyth is very much needed in many cultures [4]. Therefore, the first Superman fights the ills of capitalism in the midst of the Great Depression, and serves as a direct response to the morality, as well as a voice of the oppressed working class in the late American 1930s.

During the World War II, and specifically after the Japanese attack on Pearl Harbor in 1941, Superman mirrors American positioning within the conflict, and adopts the paper of a protector and a patriotic symbol. "As war propaganda, many comics promoted this mentality to encourage the loyalty and determination of American people to their country and the war effort" [9] (p. 12). Superman's fights no longer involve solely American citizens, but he fights against foreign enemies such as Hitler and the Nazis (Figure 1), the Japanese, and even Joseph Stalin. Within the *Action Comics*, he also adopts the role of a spokesman, encouraging his readership to contribute to supporting the war heroes and the cause.

This time coincides with the period of the First Heroic Age, generally known as the Golden Age of the superhero genre, for there was a great boom of superheroes published by almost every known publisher (Among these, Brooker names The Shield, The Wizard, Hangman, Black Hood, The Comet by ML J Magazines, or Doll Man, Quicksilver, Uncle Sam and Human Bomb by Quality Comic Group, etc., see [7] (p. 363). Those superheroes that have endured until nowadays are considered the archetypes of the genre: Superman, Batman, Wonder Woman, Green Lantern, Flash, or Hawkman by DC, and Captain America, Sub-Mariner, or Human Torch by Marvel, to name the most relevant ones [7].



Figure 1. *Action Comics* #44, “The Caveman Criminal” (January 1942) [10].

In the early 1950s, “American’s life mostly revolved around two things: the nuclear family and work. There was also an emphasis on obeying the law and social norms. Alternatively, because of the creation of the atomic bomb and the start of the Cold War with the Soviet Union, this era saw paranoia like no other under the constant threat of nuclear warfare and Russian spies” [9] (p. 17). On the other hand, Superman’s popularity decreases as it was thought that this kind of comic, constantly showing crime and violence, could possibly have a psychological and corrupting effect on America’s youth. A crusade led by Frederic Wertham against these comics caused new stories with Superman to be directed toward an adult audience and for children, there would be an alternative version of Superboy [7]. In the Silver Age of comics, the different episodes would become less violent, turning their focus on domestic life (Figure 2). In this period, Superman’s girlfriend Lois Lane is announced, making Superman more humanlike and becoming a symbol of comfort after the horrors of WWII. Kryptonite is introduced as Superman’s Achilles’ Heel, putting more emphasis on his vulnerability. In general terms, there is “a change conducive to the emphasis on his supporting cast, while a greater focus on Superman’s personal life and friendships becomes the norm in his narratives [11] (p. 801). This, however, does not meet the trends of the counterculture of the 1960s, and therefore Marvel’s superheroes become trendier and more aligned with the role of reflecting American society.



Figure 2. *Action Comics* #143, “The Bride of Superman” (April 1950) (In this period, women begin to appear in the different covers of the *Action Comics* issues, representing the sentimental as well as domestic side of Superman in the 1950s) [10].

In the 1970s, Superman undergoes an important change again. Firstly, as technology had progressed in a significant way, the issues from this period point to possibly no need of his services. Superman represents traditional values in a changing world, which were also in crisis. The focus of Superman's narratives in this period of time lies in more socially conscious topics of a morally crippled society, such as racism or drug abuse, and on the other hand, it mirrors the increasing popularity of rock music and fascination with space missions. Moreover, Superman enters into 'high culture' thanks to Andy Warhol's art, and the interest of Umberto Eco and Natalie Chilton in carrying out an important scholarship about his archetypical relevance. The 1980s are still marked by fear of the Soviet menace and Superman is reduced to a weapon of political propaganda of Reagan's times, with a sharp, aggressive, and militaristic character.

Finally, the 1990s are marked by the end of the Cold War and the search for a new American identity. It is also time of the terrorist menace and many superhero comics echo this fear. "The 90 s was a reflection of 70 s issues in the sense that it was a decade where both Superman and American Society struggled to find their new identity" [9] (p. 30). On the other hand, Martha and Jonathan Kent, Superman's adoptive parents, take on a more prominent role in the series, but without any further development in regard to their psychological or physiological level, rendering them visible but flat.

#### 4. Physical Appearance of Superman across Time

It is curious that even though Superman as a character undergoes different phases of development regarding the plot and focus in the series, he hardly changes physically. In fact, it may seem that in the superhero genre, there is apparently no place for old protagonists, as they would not be able to fulfil the archetypical expectations of what a canonical superhero is supposed to represent. Revising the evolution of the most famous superhero of times, Superman, it is shown that from his very arrival up to the 1990s, the reader is offered an unchanged image of a strong and muscular man, with his stylish velvety black quiff (This physical representation is slightly changed in the representation of Superman by Denis Rodier (September 1993–September 1997) who depicts him with longer curly hair. However, Stuart Immonen goes back to the archetypical hairstyle the readership was used to from previous issues), who actually never grows old, save some exceptions that will be discussed hereunder.

The first physical change of Superman into an aged man can be found in *Action Comics* #251, titled "The Oldest Man in Metropolis" (April 1959). The authors introduce a scientist who tries to invent a serum to increase human's life span, and which is tested on Superman. The effects of this serum make him grow old overnight, and his superpowers do not result to work in his elderly body. He is depicted with a walking stick and a long white beard (Figure 3), a typecast portrayal of an old man. However, in this issue, Superman takes advantage of his fragile appearance, which helps him to fight the enemies.



Figure 3. *Action Comics* #251, "The Oldest Man in Metropolis" (April 1959) [10].



In a similar way, *Action Comics* #270 titled “The Old Man of Metropolis!” (November 1960) displays Superman as an old man (Figure 4). In this issue, Superman visits an orphanage and is given an essay where he is described as having grown old, and how the author of that paper, once becoming an adult, would take his place. After an accidental exposition to Kryptonite, he is transported to the future and finds himself as an old man being replaced by the now adult Superwoman. His superpowers are weakened by the age, and he also needs to wear glasses to read. Although it turns to be only a dream, this issue explores an alternative reality with an old Superman, but still perpetuates the portrayal of the elderly as useless and unproductive members of society.



Figure 4. *Action Comics* #270, “The Old Man of Metropolis!” (November 1960) [10].

In the *Action Comics* #327 titled “The Three Generations of Superman” (August, 1965), The Man of Steel appears as an aged, retired man, together with Jor-El II in the role of his son and successor, and Kal-El II as his grandson (Figure 5). Superman is retired and is portrayed as a physically active agent, taking part in his grandson’s adventures, and telling him stories from times before his retirement. Even though Superman is still depicted as a man whose powers are weakened by age whereas the grandson’s are full, this issue offers an interesting insight on positive intergenerational relationships, as they both work together in order to fight masked crooks.



Figure 5. *Action Comics* #327, “The Three Generations of Superman” (August 1965) [10].

In the 1970s, there are three consecutive issues which deal with immortality, aging, and death. These issues coincide with the period where Superman enters in crisis due to technological development, which eventually renders him useless. Superman, representing traditional values in a changing world, becomes outdated, and therefore is placed in a distant future where he might find some reasons for his existence. In the *Action Comics* #385, titled “The Immortal Superman!” (February 1970), Superman travels to the future

through a kind of time-bubble, where he is trapped and cannot come back. He starts to age because of a defect in the time-bubble, but his powers are maintained. On the cover, he is portrayed with grey hair, but still muscular and hearty (Figure 6). In a further future, he meets three superheroes who make him immune to his weaknesses, rendering him immortal. Superman is 100,000 years old and doctors state that he became immortal. However, as all his beloved people are dead, it is not a positive message for Superman (The concept of immortality has been broadly discussed in popular culture and literature. The special breed of *struldbrugs* in *Gulliver's Travels* (1899) by Jonathan Swift, or the song by Brian May "Who Wants to Live Forever?" in the movie *Highlander* (1986) transmit a similar message. According to Swift in his novel, eternity brings nothing but enough time to suffer from loneliness and all the ills that old age brings, reproducing one of the commonest stereotypes embedded in our society in relation to senescence. Despite that, immortality has been always yearned for by humans from the world's origins to today's efforts to combat aging in the field of science and transhumanist theories).

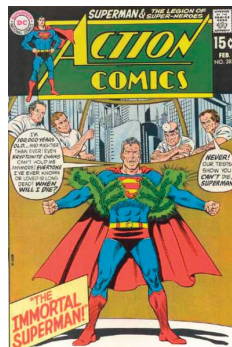


Figure 6. Action Comics #385, "The Immortal Superman!" (February 1970) [10].

In the Issue #386 titled "The Home for Old Super-Heroes!" (March 1970), Superman travels even further into the future, and finds himself in an alternative world, in a retirement home with other aged superheroes. The cover depicts aging men in colorful costumes reminiscing about their glorious past as superheroes, and they all share the same story which left them in this situation (Figure 7): "And I was Superman on the planet Earth! But like the rest of you, I've outlived my usefulness! No one wants me around anymore!" Once again, this issue points to the general perception of the elderly as useless and unproductive members of society set apart.



Figure 7. Action Comics #386, "The Home for Old Super-Heroes!" (March 1970) [10].

The following issue, “Even A Superman Dies!” (April 1970), sets the plot in a far future where Superman does not have anything to do but to live in “an eternity of boredom”. He is eventually killed by radiation from a small spacecraft and floats inert in the universe. Finally, he is saved by a robotic healer (Figure 8) who brings him back to life: “I saved your life!” “WHAT? Why did you do a fool thing like that? I’m over a million years old... I’ve outlived everything and everybody I cared about.... I WANTED to die!”. For an old Superman, in a future without any friends and any tasks to fulfil, there is no reason to live.



Figure 8. *Action Comics* #387, “Even A Superman Dies!” (April 1970) [10].

In *Action Comics* #396 titled “The Super-Panhandler of Metropolis!” (January 1971), Superman appears in a wheelchair (Figure 9), almost powerless, and observes how technological development replaced the need for Superman. Similarly, in the following issue, #397 titled “The Secret of the Wheel-Chair Superman!” (February 1971), Superman, in the condition of a beggar and with fading superpowers, starts to suffer from mental hysteria as a result of not being needed by society (Figure 10). As his existence is rendered useless, he flies away to look for any other possible universe in need of a superhero.

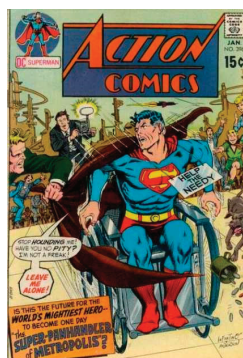


Figure 9. *Action Comics* #396, “The Super-Panhandler of Metropolis!” (January 1971) [10].

In a nutshell, what can be found in the different issues of Superman in *Action Comics* since 1939, is an unchanged portrayal of the Man of Steel, representing the American icon who dwells for the well-being of American citizens. His archetypal representation of a broad-chest muscular man with superpowers is key for the development of different plots throughout history. As Brooker puts it, “Superheroes emerge from this same mythic tradition, but are changed and further mutated by the historical context of their development” [7] (p. 365). Even though Superman has undergone different changes mirroring the key events in American society, he has not evolved physically except for the eight examples

discussed, where the authors experiment with alternative realities, but doing so, they do nothing but perpetuate a biased portrayal of an aged man with white hair, wearing glasses or being prostrate in a wheelchair, with fading superpowers due to his age and, especially, as an inactive agent, set apart from society because he is no longer productive or needed. This portrayal coincides with the one coined in society that has been challenged these last few decades. This reductionism of the later stage of life to frailty and decay has long been fought against, and new policies have been implemented with the concept of ‘active’ or ‘positive’ aging, where old people have been empowered to take an active role in their life and well-being [12,13]. This recent tendency on the social level goes far beyond the efforts of science, which, instead, looks for ways to slow down the process of aging.



**Figure 10.** *Action Comics* #397, “The Secret of the Wheel-Chair Superman!” (February 1971) [10].

## 5. Superhero and Myth

The fact that Superman never grows old can be explained through the theory of ‘mythification of images’, attributing to them an iconic value [14]. In the Middle Ages, this theory consisted in allocating symbolic meanings to certain images by clericals in order to embed them in collective consciousness. This was done by capturing the iconic value of certain archetypal images and borrowing elements from the whole logical and iconographical tradition which were, in popular fantasy, associated with specific psychological, moral, or supernatural events. In popular culture, the image of Superman has been gradually mythicized and added to other symbolic heroes such as Hercules, Siegfried, Orlando, Pantagruel, or even Peter Pan. Eco claims that “a positive hero has to embody [ . . . ] the power demands which the average citizen nurtures but cannot satisfy” [14] (p. 14). However, according to Neal Curtis, “What they call the American monomyth is a deeply anti-social, if not sociopathic, adaptation of Campbell’s classic version of the hero’s journey” [8] (p. 3).

Superman is, according to Eco, the best example of such a hero. Although originally from another planet, he lives among ordinary people, but unlike them, he is extremely strong, able to fly and travel in time, cut woods, perforate mountains, has X-ray vision, ultrasensitive hearing, etc. (In regard to all his superpowers, these were added progressively alongside his evolution as a character). Moreover, “he is kind, handsome, modest, and helpful; his life is dedicated to the battle against the forces of evil and the police find him an untiring collaborator” [14] (p. 14). In Greek mythology, Superman would correspond to a demigod (both share an ordinary life with the rest of the citizens), until the moment he is needed; by means of a disguise, he switches his identity from a journalist Clark Kent to an infallible superhero.

Gavaler ascribes one of the possible reasons for the popularity of superhero comics to cognitive psychology. According to several studies, “members of different cultures produce similar stories not because they share a collective unconscious, but because they share similar brains” [3] (p. 19). To think that the superheroes will never die of natural causes, can fly, or have supernatural powers is more conceivable because these characteristics are

intuitive. Alberto Luque also affirms that this kind of visual narratives is perceived as realistic, given the fact that the objects, scenarios, and actions assume an organic consistency of the real, and the plot develops according to the human logic [15].

For instance, Spiderman, having been bitten by a spider, has spiderlike abilities. However, if the superheroes were charged with too many disconnected abilities, they would not be that easily recallable because their superpowers would not make any sense to the established logic. Superman is a good example: “Although Superman can fly, shoots lasers from his eyes, and even travels back in time, Siegel’s and Shuster’s original had only advanced muscles” [3] (p. 21). The increase of his superpowers has therefore been a gradual process which has permitted the audience to accept him as a superhuman who fights against gradually more sophisticated and more dangerous menaces. From the narrative point of view, it is a necessary adjustment as the villains have been acquiring more strength and becoming more powerful.

In this sense, the archetype molds with society mirroring its needs and concerns, but according to Curtis, this reinforcement of society’s moral values can be just one of the possibilities to exploit in the superhero genre. Another way could be that superheroes become “agents of social change that actively call for a break with the dominant and herald [ . . . ] [8] (p. 2). As mentioned before, Superman fought against injustice and various menaces coming from the inside as well as outside of America, even from other alternative universes. He fought for social causes such as against racism or drug abuse, and he could become a weapon to address other topics in regard to stereotypes of ethnicity, sexuality, gender, or aging. Taking advantage of the power of the mythical value of a superhero, this genre could “open a path to social and political change” [8] (p. 2). However, since the origins of Superman, he has represented a rather conservative icon of the American way of life “defined around the four pillars of capitalism, patriarchy, heterosexuality and white supremacy [8] (p. 9). Although there have been efforts to break with this outdated representation which no longer reflects the mind-set of American society, these were not effective as to combat the stereotypes deeply embedded in society. That is also the case of the graphic novel *Kingdom Come*, which will be discussed hereunder. On the contrary, taking the symbolic meaning of what a superhero’s costume represents, a couple of examples will be provided to demonstrate that superheroes can indeed challenge agism in an effective way.

## 6. Image of Aging in *Kingdom Come*

In regard to the evolution of Superman as the most famous superhero of our times, it is not until 1996 that DC comic industry allows to break in the law of permanency and publishes an alternative four-issue miniseries *Kingdom Come*, written by Mark Waid and Alex Ross, which was later converted into a single volume graphic novel with the same title (2008), where the readership can find a Superman who grew old. Although it may seem like a giant leap in the genre, the book mainly reproduces several stereotypes rooted in American society. In the opening scene, an old man introduced as Wesley narrates a nightmare of Apocalypse to his friend who is a priest, and who is said that his nightmare is a product of his decreasing health and coming senility, a stereotype of old age associated with “dependence, decrepitude and death” [16] (p. 10). Moreover, Wesley is presented as an archetype of an old grump, yearning for old times where superheroes, the “costumed champions” [17] (p. 18), used to contribute to maintaining a peaceful life on Earth, and represented the old values which have been progressively forgotten. According to Ortega y Gasset [18], the olden times are yearned for when a society does not feel the plenitude of their present and when its deficiencies are perceived in comparison to classical times. Those were presented as broader, richer, and more perfect in detriment of the decadence of the present. Therefore, the comic highlights a popular belief that old people do not understand the world that surrounds them, which is another cliché to break.

In the same light, Superman is portrayed as a retired man living on a Midwestern farm. He is dressed in overalls, his hair is grey and long with sideburns, tight in a ponytail.

His face is ridden by wrinkles on his forehead and brows. Superman in *Kingdom Come* is set apart from society, and prefers to be addressed by his original name from his planet Krypton, Kal. This last fact detaches him even more from the rest of humans, as he tries to suppress the humanlike part of his dual identity. This kind of crisis can be compared to the biased cultural image of the elderly, hidden from public view, involved in equally biased gendered activities.

The person behind Superman's retirement is one of the new breeds of heroes called Magog who was chosen by the people as a new younger version of a superhero: "Vox populi, man. Out with the old, in with the new. Brighter, faster, meaner . . . next year's model. That's what the hungry crowd always wants" [17] (p. 96). Similarly, Batman also makes Superman see that they are both offstage, in a similar light as the episode "The Home for Old Super-Heroes!" in *Action Comics* #386: "Once ordinary folks decided you and I were too gentle and old-fashioned to face the challenges of the 21st century. They wanted their 'heroes' stronger and ruthless" [17] (p. 73). He states that they were set apart since they are obsolete and of no particular use. Again, the authors reproduce the stereotype related to the old age and uselessness.

Another stereotype present in the comic is the dichotomy of young and old generation. The present is ruled by the young ones, who are the children and grandchildren of the old superheroes. However, they neither maintain nor believe in the old values of their parents. Instead, they instill violence as they fight for the sake of fighting. Whereas the old generation represents the values of truth and justice, the young one is military-based and does not care about humans. While the young ones are strong but with their morals besmirched, the old ones have aged faces and bodies, but they are noble and wise, with a strong sense of justice and welfare, which posits an interesting dichotomy of wisdom and frailty in regard to old age. The values of strength, power, and youth are promoted in this literary manifestation of popular culture as a product of contemporary consumer culture [16], in detriment of values linked to the natural process of aging. However, as the present society led by young generation seems in crisis, Waid and Ross challenge the typecast dichotomy by calling the old generation back on stage.

In need of allies, Superman visits a disco where young people usually gather. In that kind of place, a person with his old-fashioned haircut is visibly seen as an intruder and thus is quickly challenged by one of the youngsters: "Ain't it past your bedtime, grampa? What does the 'S' stand for? Senile?" [17] (p. 86). Out of his comfort zone and in minority, Superman is mocked and not taken seriously. His polite ways are no longer valid in the present corrupted world. However, the manner to impose their ways through violence is something that Superman refuses to accept, for it disagrees with his personal ethics. Throughout history, Superman has encountered many kinds of enemies: Nazis, Russians, or nuclear threats, but as an old man, he is unable to adjust to a society which no longer shares the same values, and which he does not understand. In the "Apocrypha" of *Kingdom Come*, Waid explains the following:

Superman is the one who has changed the least over the years. Unfortunately, the world has changed outrageously. Shunned by a public that has instead grown enamoured with the more savage, bloodthirsty, chrome-suited avengers of tomorrow, Superman is completely mystified as to what his role in society should be. He's never lost his sense of decency, but he has no idea how to apply it in a world so seemingly disinterested in decency [17] (p. 216).

Superman is not used to being challenged by anybody and especially not by the young ones. The ones who rebel against him are imprisoned by force in a sort of gulag and are full of anger now. One typecast youngster with a tattooed face, piercings and leather necklace with spikes representing the new generation shouts: "'Man of tomorrow', my ass. Try 'man of the nineteen-fifties!' Times change . . . But he still expects everyone to live up to some cobwebbed code! [ . . . ] I'm sick of this medieval thinking!" [17] (p. 117). It is evident how an important generational clash is taking form in this story. Indeed, the opinion of the new generation is related to the negative image of the elderly whose ideas are obsolete

and no longer valid for younger generations. The young generation in *Kingdom Come* pays tribute to the cult of youth representing vigor and power, and, on the other hand, questions the wisdom of the old ones gathered throughout life experience, which is relegated to the fringe.

In *Kingdom Come*, Superman is portrayed as an aging man in existential crisis, quite humanlike, despite the effort of getting rid of all his human nature. Nor does he find his place in the modern society, and experiences “an internal struggle over who [he is] and what [his] role is in a changed world” [12] (p. 144). He was already retired from public life, working on his farm, but had to come back because his moral code, and of course his archetypal nature, obliged him to serve the community once more. The authors put into his hands a very difficult decision of whether to save humanity from a nuclear catastrophe, or sacrifice others of his kind. Nevertheless, the real challenge for Superman resides in finding a way to adjust to a new world and, moreover, learn to forgive himself for past failures. Like our aging population, he experiences a psychological challenge related to growing old which is managing ego preoccupation of what has been done wrong and right, what could have been done or what should have been done [13].

If the authors wanted to denounce the predominantly negative image of aging in popular culture, they failed; for they reproduce many other stereotypes in characters’ depiction, both physical as well as psychological. Regarding physical features of the characters, they all have grey hair and wrinkles. Even though their strength seems to be kept, it is because of their supernatural origins; however, Batman, who is originally a human, wears a kind of exoskeleton which highlights his physical fragility. In addition, although Wonder Woman does not age and cannot die, she is depicted with grey hair too. Batman, having discovered she was pregnant, makes the following sexist comment: “For an ageless amazon of perfect physique, you’ve put on a pound or two” [17] (p. 210).

From the psychological point of view, the aged superheroes depicted in *Kingdom Come* stereotypically embody the tradition and old values, clashing with the young generation of superhumans, portrayed typecast, having bald heads, dyed hair, piercings and tattoos. Both generations do not move from the hackneyed cultural portrayals of the young-old dichotomy and therefore do not challenge any cultural stereotype set in American society. The aged Superman is a result and a biased social portrayal of the elderly in greying America [12].

## 7. The Symbolic Dimension of a Superhero’s Costume in American Society

Far from comic art, the superhero’s costume has become something more than just a dress code; it has acquired a symbolic meaning which has progressively detached from the body that wears it. Therefore, it does not belong exclusively to the superhero, but it is shared by society as a symbol of empowerment. Consequently, it is broadly used for different purposes in our society, beyond its literary meaning, which will be discussed hereunder.

The first case of using a superhero’s garment as a symbol of empowerment is a campaign against prostate cancer in aging men, started in 2002 and presented to the public in 2007 to raise awareness about this health problem. This campaign uses an aging superhero, a common man with prostate problems called Prostate Man (Due to a reserved copyright, see the illustrations of the Prostate Man in the article by Lyzun, K. and A. McMullen [19]):

‘Take It Like a Man’, encouraging men age 50 and over to be aware of their risk for prostate cancer, recognize the signs and symptoms of prostate cancer, and talk with their healthcare provider about prostate cancer testing. This paper focuses on the most recent campaign iteration: ‘Take It Like a Man – Prostate Man’. Created in 2007, this multimedia campaign features a middle-aged superhero, Prostate Man, who comes to terms with the reality of ageing. An interactive online comic book, also available in hard copy, follows Prostate Man in his quest for knowledge about the risk factors, signs and symptoms of prostate cancer,

providing actionable advice for men to lower their risk for prostate cancer [19] (p. 7).

This humor-based Canadian campaign achieved immediate success and developed different variations on the theme for six years after its release. Prostate Man “uses bold, classic comic book imagery and humor to garner attention and motivate discussion among men aged fifty and over on this important topic in men’s health” [19] (p. 8). It is therefore no surprise that this way of raising awareness about the prostate cancer in North-western Ontario was more effective than taken as ‘serious or threatening’. It proved that men appeared to respond better to humor-based health promotion because the target audience was, in fact, able to “self-identify with the campaign’s imagery and the campaign’s ability to maintain a consistent, distinct identity to ensure audience recollection and stimulate conversation” [19] (p.13).

According to Scott McCloud, the successful reception of this character is given to the universality of cartoon imagery: “The more cartoony a face is, for instance, the more people it could be said to describe” [20] (p. 31). He makes a distinction between a realistic portrait in which one can see a face of another person, and a cartoony face, where one tends to see themselves. “I believe this is the primary cause of our childhood fascination with cartoons [ . . . ] the cartoon is a vacuum into which our identity and awareness are pulled” [20] (p. 36). In this sense, the Prostate Man, a middle-aged man (but “young at heart”) in yellow tights, “sporting the uniform, but [is] overweight and living a more sedentary lifestyle” and, after some years, “begins to follow his own advice, loses weight, and feels like a superhero for taking responsibility for his health” [19] (pp. 13–15), becomes a perfect mirror for the target audience who is, in broad terms, like him.

The second case of superhero imagery beyond literature comes from an artistic project of a contemporary artist Jason Bard Yarmosky called “Wintered Fields” (2016), in which he portrays his grandmother, suffering from Alzheimer, in a Wonder Woman costume against wintry landscape (Due to a reserved copyright, see the examples of Yarmosky’s exposition on his personal webpage [21]). On his personal webpage he posted an article published by *The Wall Street Journal* where he states: “My grandmother was a wonder woman to me . . . I wanted to contrast her age and predicament with this symbolic costume to show both the heroism and vulnerability of the human condition” [22]. Though not exactly the same as the previous case, each use of superhero imagery focuses on one particular characteristic of a superhero; whereas in the first one it adopts the role to encourage middle-aged men to undergo an important medical check to reduce prostate cancer, in the second example it works as a tribute to the artist’s personal hero, his grandmother, and offers a frank portrayal of an aged body, pointing to the uniqueness of our elderly. In both cases, it breaks the biased imagery of a young and vigorous body of an archetypical superhero.

## 8. Conclusions

The phenomenon of aging has acquired varying connotations across historical periods and cultures. In fact, social constructionists assert that the perception of growing old is an individual experience which is influenced by society and culture; therefore, it is not pre-given [16]. Indeed, age is a social construct [23] and the general view of the process of aging is a result of how it is portrayed in different kinds of media.

It has been shown that the superhero comic genre reproduces, seen from the perspective of literary and cultural gerontology, many stereotypes in regard to old age. *A priori*, the superhero must conserve his youth because his image is connected to strength and strength to his ability to fight evil, the main mission of all kinds of superheroes. The discussed alternative graphic novel *Kingdom Come* (2008) introduces an aged Superman, but beholds one main perspective: in the contemporary world, there is scarcely a place for old heroes, which also echoes infrequent presence of the elderly in the media [16]. The merit of this *oeuvre* could possibly lie in shedding light on a social problem of intergenerational clash in America, as well as on the place and agency of the growing population of the older generation. The old Superman from *Kingdom Come* is no longer needed in the present,



a fact that reverberates in the disengagement of the elderly from the society after their retirement. Once Superman is retired, he takes his experience, wisdom and values with himself. From the socio-environmental perspective, the elderly should become active agents within society “as guides, role models, and mentors to younger generations” [12] (p. 152), a role that Wonder Woman adopts in *Kingdom Come* at the very end of the story.

In this sense, the graphic novel provides visibility for an evident social need for change in how the older part of the population is seen and depicted in literature and culture. In the case of the superhero genre, it has been demonstrated that although there are cases of superheroes who aged, these representations remain stereotypical and therefore do not challenge agism grounded in society’s mind-set. Fortunately, there are some alternative graphic narratives that use the symbolism of a superhero costume to pay tribute to the elderly. For instance, the Spanish author David Robles in his graphic novel *Recuerdos de mi Primer Domingo* depicts his grandfather, taller than skyscrapers, with an undulating cravat instead of the superhero’s cape, seen from a low perspective of an admiring child. The illustration is accompanied by the following lines: “My personal superhero always appeared at work with a costume, but this one was made up of a jacket and a dazzling shield . . . ” [24] (n.p.). In this graphic novel, the grandfather is an active member of society, described with many facets that make him a unique individual and a round character. Even though his hair is white, it is symbolically compared to a snowed peak of a high mountain, which also connotes the protagonist’s exceptionality. In my opinion, this kind of graphic narratives stand as successful alternatives to a senior typecast superhero, for they are portrayed as distinctive individuals with unique personality traits, as well as set in realistic, non-stereotypical settings, engaged in variety of behaviors. Moreover, they interact with younger generations and these relationships are depicted as mutually beneficial and satisfying. Therefore, the symbolic meaning of the superhero’s costume as a symbol of empowerment has the ability to break social and cultural stereotypes related to aging. We do not possess the Holy Grail to avoid biological aging, but we do have interesting tools which can provide a better and more realistic portrayal of what it means to be old in our contemporary society.

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Article

# Fourth Ageism: Real and Imaginary Old Age

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**Abstract:** This paper is concerned with the issue of ageism and its salience in current debates about the COVID-19 pandemic. In it, we address the question of how best to interpret the impact that the pandemic has had on the older population. While many feel angry at what they see as discriminatory lock-down practices confining older people to their homes, others are equally concerned by the failure of state responses to protect and preserve the health of older people, especially those receiving long-term care. This contrast in framing ageist responses to the pandemic, we suggest, arises from differing social representations of later life, reflecting the selective foregrounding of third versus fourth age imaginaries. Recognising the tension between social and biological parameters of ageing and its social categorisations, we suggest, may offer a more measured, as well as a less discriminatory, approach to addressing the selective use of chronological age as a line of demarcation within society.

**Keywords:** ageism; COVID-19; fourth age; nursing homes; third age

## 1. Introduction

In a paper on ageism published in 2020, we argued that the term ageism has become a concept that has been extended too far, and used so broadly that it fails to specify exactly what it is that is being discussed [1]. Ageism is applied to all sorts of circumstances and levels as a way of explaining nearly all the negative situations and consequences associated with old age. Such overgeneralised use risks leading to an over-determination of processes on the basis of a single opposition, so much so that ageism becomes the explanation for all that is untoward in the lives of older people. Whether presented as the articulation of a set of beliefs serving the interests of a particular group, or as representing a particular logic underlying an external structural process within society, this all-encompassing, essentialisation of ageism covers up too many theoretical gaps. Consequently, we argued, it fails to provide a useful analytical framework for understanding the diverse social space that older people occupy in society.

This diversity has emerged most notably in the last decades of the 20th century and the early decades of this one. The consequence has been a profound transformation in the social relations of later life [2,3]. From an ascribed terminal destination in the life course, later life has become a more actively constructed social space. No longer reduced to a category of need set apart from the relations of production, later life has provided a widening arena for the emergence of what we have called cultures of the third age. This has encouraged a rejection of this residual location, whether as a personal identity or as a social category [4,5]. Seeing age as representing “nothing but a number” has become a popular motif driving a more socially and culturally inclusive agenda [6,7]. It also serves as a resource for combatting negative images of agedness as the essence of older people. At the same time, these third age cultural tropes have become a stimulus for distancing the ‘young old’ ‘the not yet old’ and the ‘still middle-aged’ from those whose lives seem closer to the stereotype of decline and dependency of a ‘real’ old age in which ‘older people’ have been wrapped up for so long [8].

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## 2. Old Age, Later Life, and Their Third and Fourth Age Frameworks

There are many ways of attributing causality to the emergence of these distinctions in shaping later life. Whether it is the pervasiveness of a consumerist youth culture that valorises an ‘ageless ageing’, or the progressive destandardisation of the institutionalised life course creating this desire for a more flexible identity, is open to debate [9–11]. What is less debatable, however, is that the vicissitudes of physiological ageing, including age-related cognitive impairments requires some conceptual separation within the expanding social space of later life. Paul Baltes [12] and Peter Laslett [13] are two of the more notable gerontologists who have used the idea of a fourth age to define one such category, applied to those where the combination of chronology and chronic illness betokens a terminal phase in people’s lives. Less explicitly, Matilda White Riley used the term ‘oldest old’ to mark off that growing segment of the older population aged over 85 whose health is deemed a key factor in their experience of ageing [14].

While these conceptualisations of a ‘real’ old age—whether framed as a fourth age or the oldest old—diverge on what are its most salient features, they share a common position in seeking some line of distinction in the diversity of later life. Baltes, Laslett and Riley, each in their different ways, selected chronological age—typically 80 or 85 years—on which to draw a qualitative divide between those who are and those who are not yet ‘really’ old [15]. Most recently, the Japanese Gerontological Society have distinguished between a ‘pre-old age’ (from 65 to 74 years of age.) and a ‘real’ old age, reached on or after an individual’s 75th birthday [16]. Some writers contend that this distinction should not be based upon chronology at all. They suggest an emphasis upon gender (with a ‘masculine’ agentic third age contrasted with a ‘feminine’ passive fourth age [17]). Others have argued that the distinction represents a switch in register. In this framework, the cultural, economic and social dimensions of life in the third age are contrasted to the corporeal, pathological experiences of the fourth age [18].

In our own work on the fourth age, we have argued for a conceptual dichotomy between the third and the fourth ages [19]. Each position necessarily leans upon the other, but less because of numerical ascription and more because of the cultural imaginary through which each is framed. The cultures of the third age operate against the shadows of a social imaginary of the fourth. Fears of an unwanted old age defined by physical frailty, immobility, and the diminution of agency serve as key motivating forces for third age consumerism. The fourth age is defined less by what it actually is than by what it is not. Its imaginary is shaped through its antithetical projection of a dependent old age and not the youthful, vital, healthy and successful ageing that feature so much in the range of books and magazines promoting third age lifestyles. Rather than the body being a site of performance, the body in the fourth age is one conjuring up pathos. It is within this tension between the opposing cultural frames of ageing that the idea of ageism needs situating. The more that later life is represented as an arena of lifestyle choice and fulfilment, the more age related frailty and disability become distanced from it, and become part of the “eternally aged other” [20] (p. 64).

It is unsurprising then, that the nursing home and assisted living facilities become the condensed image of this rejected old age. They represent a fate to be resisted, if not avoided altogether, a fate worse than death [21]. This fear cannot be reduced to the over determining ideology of ageism [22], nor to the cultural product of a ‘malignant social psychology’ permeating the long-term care system; one that undervalues the personhood of mentally and physically frail individuals [23]. Avoiding the ‘natural’ association of chronological agedness with illness and impairment is a salient feature of the cultures of the third age and its general resistance to decline narratives. The emphasis on health, leisure and self-actualisation flows naturally from currents already present within consumer society. The third age, in short, is directed toward a different set of outcomes, furthering the desire for a clear distinction from those seen to be displaying the markers of the fourth age. In contrast to the embodied freedoms and leisure by which third age lifestyles are promoted, in the fourth age we are presented with the disembodied images of physical

aids such as strollers and walking frames, or various forms of ‘granny’ wear or old-age products such as hearing aids, incontinence pads and dressing sticks.

The antipathy towards nursing homes as sites epitomising the fourth age extends to geriatric medicine as a whole, as well as other initiatives addressing the ‘needs’ and ‘risks’ imputed to older adults such as domiciliary services, meals on wheels and senior citizen centres. In a similar fashion to the subtle distinctions present in youth sub-cultures [24], these distinctions pervade the social space of later life. They now extend to the various public health responses to Covid-19 to which we now turn.

### 3. Third and Fourth Age Responses to COVID 19

There has been a relatively consistent worldwide response to the COVID-19 pandemic [25]. Lockdowns, quarantines, physical and social distancing, the wearing of masks and increased hand washing as well as sanitisation, are all policies that have been adopted by a variety of countries. This has resulted in a multiplicity of reactions from many differing political positions. Ageing and old age have not been immune to these fault lines. The inclusion of older people, along with people with various ‘underlying’ health conditions in lists of those needing to be shielded (and by implication kept apart from the rest of society) has provoked anger among many older age groups, incensed by these attributions of frailty. The use of chronological demarcations between those in the ‘normal’ population and those deemed automatically vulnerable has fuelled accusations of ageism [26]. If age is really just a number, however, what injustice is being perpetrated by selecting age as a cut-off used to place older people in a category as no different to the sick and infirm? There are many individuals aged over 70, they claim, whose fitness and flourishing is on a par with, or indeed may be somewhat better than the health of some of those in younger cohorts. Why should we, they ask, have our liberties curtailed by enforced ‘shielding’ on the dubious grounds of age [27]?

Viewing chronologically categorised older people en bloc as physically vulnerable, challenges the post-work identities that prior to the pandemic had been treated as relatively unproblematic. Such policies appear to be undermining the distinctions that have become so salient between a third and a fourth age. The high death rates of older people in nursing homes, in particular, has been one of the most noteworthy internationally reported features of the pandemic. In what seems to be a confluence of abjection [28], in country after country, nursing home residents have succumbed to the virus because of policies that did not prioritise their lives and effectively put them at greater risk [29]. The reasons vary from one government to another. In the UK, the fear of the NHS being overwhelmed led to older hospital patients being discharged from hospitals to nursing homes without first being tested for the virus [30]. In Sweden, a focus on giving citizens personal responsibility for taking precautions rather than implementing a mandatory lockdown contributed to Covid 19 coming into facilities for older people via the vector of care workers mingling with the population at large [31]. In Spain, the spread of the pandemic was such that some nursing home residents were abandoned by their fearful carers. Later these residents were to be found dead by army units sent to discover what had happened to them [32].

All these examples show how the impact of the pandemic was considerably worse for those enveloped within the institutions marked by the fourth age. Here ageism was undoubtedly occurring but it was a very specific form of ageism. There was an implicit assumption that this group (the care home population) constituted a less important category for policymakers than other groups when decisions about their needs were being made<sup>1</sup>. Their lack of significance was often underpinned by arguments that their deaths were inevitable or were a distraction from fighting for the lives of those more needing of and more likely to benefit from attention [33]. In the UK, some GP (family doctor) services had policies to issue ‘Do Not Attempt Resuscitation’ (DNAR) forms to their older and

<sup>1</sup> It has not been only the oldest people in care homes who have been relatively ‘unprotected’. Many younger adults with mental and physical disabilities have also been reported to have been unnecessarily exposed to the virus and unnecessarily neglected when ill [32].

vulnerable patients, irrespective of whether or not they had been requested [34]. The UK National Institute for Health and Care Excellence (NICE) initially advised against the treatment of those categorised as ‘frail’ in order to restrict demand for hospital beds. However, when this was potentially also applied to younger, rather than just older, patients it was rapidly revised [35].

It is in the emergence of such practices where a more focused notion of ‘*fourth ageism*’ has its use. The assumption that such lives need less consideration: as did the lives of those employed to look after them (in contrast to the heroism attributed to hospital staff). This ageism we term ‘*fourth ageism*’ because it is directed toward those who represent the unwanted, distasteful side of later life; in effect, those living under the shadow of the fourth age. As such, it is a very different matter from the issues connected to age discrimination that is often challenged at cultural, legal and political levels, not least by those rendered subject to such discrimination.

#### 4. Symbolic Struggles and Social Spaces

The symbolic struggles over the place and position of later life in society have, we suggest, become more salient in recent years. Central to this development has been the emergence of third age cultures and third age lifestyles. Such cultures have become particularly significant for the consumer-driven economy of contemporary ageing societies. Within the context of this ‘grey economy’, and the refocusing of the state toward a greater emphasis upon citizens as consumers, it is predictable that ‘old’ ways of viewing ‘old age’ are seen as such: old-fashioned and outdated. Expressed with hardly any fervour a half century ago, the contemporary complaints over the ‘invisibility’ of older people reflect, if not their visibility, at least their voice, in opposing the oppression of non-recognition. In 2020 the worldwide media coverage of two men in their seventies battling for a position of immense power in one of the most powerful countries in the world is testimony to the visibility of agedness, or at least the continuing visibility of (some) older people. The presence of ‘age’ can be rendered invisible for reasons other than that of marginality. Among leaders of nation states, owners of property empires, the ‘tycoons’ of industrial capital, and the literary and artistic establishment, chronological age slips easily under the radar in comparison with other more socially salient characteristics- such as their wealth, power and celebrity status. In the fields of the third age, both in its objective and symbolic formation, the assets and resources attached to cultural, financial and social capital matter more than ‘mere’ chronology or corporeality.

As regards the fourth age, the reverse is more often the case. There are few ‘symbolic’ struggles over its meaning, status and value. Rather, such struggles as are evident, are those among those living and working alongside the most old, frail and infirm. They largely focus upon definitional entry to state controlled resources for long-term care, whether at home or in an institutional setting. The fourth age is neither a cultural field developed by the active practices of those assigned to its settings, nor is it a socio-cultural space where choice, distinction and self-expression are exercised. What social agency is realised is that of others, those neither aged, nor frail: the clinicians, family members and social care workers. Members of these groups determine the rules, establish the ‘dividing practices’ and frame what is to be done, albeit within a network of negotiations that notionally involve but which are never determined in the last instance by those citizens at most risk of being placed under the aegis of the fourth age.

#### 5. Ageism: Real and Imaginary Old Age

Ignoring the significance of this divide between the third and fourth age causes much critical traction to be lost in combatting discrimination and marginalisation in later life. Applied without precision or focus, ageism becomes a more diffuse concept and risks striking a conspiratorial note that sees ageism behind everything that is in any way age-related. As we noted in our earlier paper on the ideology of ageism, the theoretical confusion regarding the causality of ageism leads to its over-extension, placing phenomena

under the same framework that reflect quite different trajectories, and which are embedded in different structures and are realised through very different lifestyles [1]. The neglect and isolation of residents in nursing homes is a tragedy not visited upon them purely because of their corporeality; there are many equally frail persons living in their own homes or with their families. It arises not least because of their invisibility as fellow citizens, but because they are counted less than those who are living ‘freely’ in the community, and because they have fewer people to count on. Such neglect, such marginality, can arguably be treated as the consequences of a ‘fourth ageism’. This is where society and its institutions, avoids what Baltes called the ‘darker side of ageing’, and consequently fails to recognise residents of care homes and nursing homes as equal members of the public whose health is meant to be protected by the state, on behalf of the whole community.

The widespread anger felt by many older people toward the restrictions imposed by public health authorities in the pandemic, reflects a different matter: an equal mix of reality and imaginary whereby age is considered as ‘nothing but a number’. On the one hand, it is important to stress that engagement with third age cultures is not contingent upon physical fitness and health status. A complex variety of individual, social and national factors play a significant part in creating the opportunities for and the space in which third age lifestyles can be realised through a different set of materialities than those attached to the fourth age. On the other hand, distinctions are important. Maintaining a sense of fitness-mental as much as physical-acts as a powerful motivating force in asserting the boundaries of the field and keeping the ‘feared’ form of old age at bay as is being angered by unthinking assumptions of decline and senescence.

At the same time, chronology also plays a part, both through the impact of social time (i.e., cohort and period effects) as well as through personal time (years spent ageing). As a social phenomenon, the internalised ‘ageism’ evident in the generational advocacy of an ‘ageless ageing’ is of a different character from that associated with the judged indignities and abjection of dependency and infirmity. While the former may be considered to reflect at most some kind of ‘bad faith’, or even ‘inauthenticity’, such tropes are considerably less restricting and life shortening than that other, more pernicious prejudice which both fears and forms the imaginary of the fourth age and its chronological countdown. This latter feature of fourth ageism does both. It mystifies infirmity while undermining moral status and human dignity. Whether or not a person dyes his or her hair, uses anti-ageing cream, receives periodic Botox injections, or is flattered by being judged ‘young for their age’ does not diminish his or her status, nor shorten his or her life. Middle-class, mid-life misgivings over age and ageing have become one part of the symbolic struggles of which contemporary life is constructed. Such imaginings are active, agentic and often necessarily adversarial; they involve participation through performance and consumption, as well as discourses and practices designed to assert distinction. This is quite unlike the social imaginary of the fourth age, which we would argue lacks both agency and contested subjectivity.

Here the realisation of such imaginings-of impairment and infirmity, of abjection agitation and suffering-arise in the discourses and practices that characterise the institutions and the practices of health and long-term, social care. These include crucially the conditions of labour characterising those care settings<sup>2</sup>. Social policies directed toward enlightening, improving, or reconstructing those institutions that operate under the *aegis* of the fourth age are however both imaginable and realisable. One of the legacies of the Covid 19 pandemic may be to expose and unveil the fourth ageism present in societies’ arrangements for social care and thereby “give us the impetus to provide some more meaningful, lasting, and credible solutions to the funding and provision of social care” [36]. It is such realisations that may help fashion a fairer and more inclusive approach to all forms of long-term care, long after the over-seventies are back on the street, seeking to make themselves, not their age, visible players in society.

<sup>2</sup> Of course similar criticisms could be made of many aspects of health care. Unlike social care, however, health care has long sought to avoid too close an encounter with age, as the history of ‘geriatric medicine’ well illustrates.



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Article

# Moving from the Margins: Towards an Inclusive Urban Representation of Older People in Zimbabwe's Policy Discourse

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**Abstract:** Population ageing has become a major global demographic shift but perhaps less noticeable in the Global South. Zimbabwe, like many African countries, is experiencing and will continue to witness an increase in older age, hence questioning its readiness to handle such change. Ageing in Zimbabwe is currently occurring in the context of increasing poverty, political unrest, changing family structures, and weakening infrastructures. Despite this, Zimbabwe is committed to promoting change and betterment for its citizens through adherence to international agendas and national development strategies. However, the first step towards the realisation of an inclusive urban environment begins with a fair representation of the various actors and social groups. This review paper is aimed at examining the representation of Zimbabwe's older people, a subject that has rarely been the focus of critical analysis, concentrating on the political discourse in urban development programmes. A sample of 45 international and national policy documents published post-2002, was carefully selected and inspected to determine the level of presence of older people using discourse analysis. The findings reveal that in the context of the efforts made towards a Zimbabwe that is inclusive of all citizens, the idea of older persons as subjects of rights and active participants has yet to truly gain sufficient currency. There is a dominance of a one-dimensional perspective across the majority of the publications, with older people constructed as "dependent", "vulnerable" and "passive", overseeing vital contributions to society. A realistic and more empowering representation of this social group, showing them as active caregivers rather than passive recipients is therefore a necessity if Zimbabwe is to fulfil its vision of inclusivity.

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**Keywords:** ageing; inclusivity; Zimbabwe; urban environments; discourse analysis; urban policy; Africa

## 1. Introduction

Previous studies concerning the urban physical environment and occupants' health have provided credible evidence and a range of interventions that can lead to better living conditions contributing to residents' well-being. Older persons, among the various age groups, are often the most vulnerable to the influence of the urban characteristics of their living environment. As people age, they experience losses in physical capabilities and social support thus affecting their interactions with the surrounding context [1,2]. The significance of the city and the quality of the urban environment for older people's health has been gaining recognition in recent decades, nevertheless most of the current scholarly contributions tend to address issues that are associated with demographic changes and ageing in developed nations. On the contrary, research into ageing and the implications of the changing demographics in Global South countries is fairly recent. It has only been in the past 20 years that an expanding, though limited, body of literature on older people in urban Africa, has emerged covering a range of topics across diverse regions [3–12]. Part of the current interest in Africa's ageing population was initially triggered by the increasing volume of Non-Governmental Organisation (NGO) programmes and the advocacy for the

well-being of older people living in urban areas led by the World Health Organisation's (WHO) initiatives and other foundations. Across Africa and despite the specificity of the challenges facing each nation separately, there have been some common issues that initiated the need for change and subsequently have stimulated the discourse on the visibility, the rights, and the lives of older people. As a result, several international agendas have been put forward as part of regional development policies such as the African Union Policy Framework and Plan of Action on Ageing, addressing some of the region's most pressing issues on ageing including rising urban poverty, informality, the effects of the HIV/AIDS pandemic, changing family support structures, complex migration flows, fiscal constraints, and inadequate social security schemes. However, despite this encouraging recognition, the representation of urban ageing in African, both in academic publications and policy discourse remains very low in comparison to the well-documented research and the overall awareness of the implications of ageing in cities in Global North countries [13–19]. This knowledge gap and the state of research on ageing in the region is concerning as Global South countries not only have the same demographic trends that characterise high-income countries, but they are also experiencing substantial population growth in urban areas [20,21].

Concerns over Africa's changing age profile and the welfare of older persons have already been raised in studies by [3,4,6,9–12], and others who had examined Africa's urban ageing in the context of health, poverty, and social change. The findings of these studies not only indicate a shift in the discourse on urban ageing, but also make a case for a detailed evaluation of the recognition and representation of the lives of older people in policy discourse. A 'discourse' is a term often used to refer to a specific ensemble of ideas, concepts, and categorizations that are produced, reproduced, and transformed in a particular set of practices and through which meaning is given to physical and social realities [22,23]). Discourses and policy documents generated by local and national government bodies are important artefacts as these organisations play a significant role in shaping or putting forward certain viewpoints and values of the lives of citizens. How people including senior citizens are represented through the written language encodes the ideas and assumptions that constitute the prevailing culture and ideologies surrounding their lives. Therefore, discourse analysis and artefacts evaluation are useful to identify the construction of a certain phenomenon or reality, such as urban ageing in a nation, how it is framed, and how the future representation is envisioned in society, in policy, and practice.

This paper contributes to research on African urban ageing through the examination of the representation of older people in the official policy discourse focusing on one of the continent's most complex socio-economic and political urban contexts, the state of Zimbabwe. The paper examines the state of the representation of older people in Zimbabwe's urban policy discourse and measures in place to address their demands. It brings together different bodies of knowledge on urban ageing, policy discourse, and inclusive urban development in the country. The emerging themes discussed in the paper are therefore critical to the debate on inclusivity [24] and the creation of inclusive urban environments, a concept that recognises the different needs, (cap)abilities, and requirements of people during their life course [25], thus advocates for the presence of diverse voices through processes of co-production and co-design.

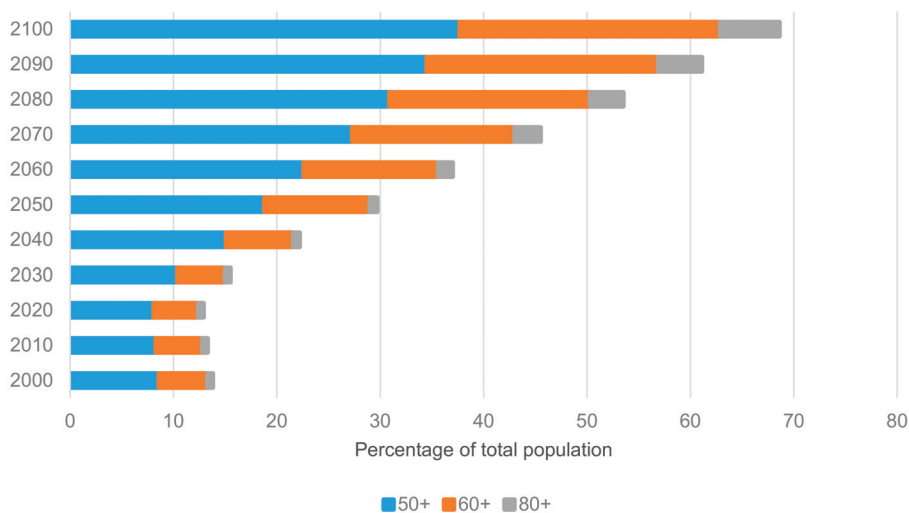
The paper is structured in six sections; the introduction discusses the structure and background of the paper. It is preceded by Section 2 which presents the landscape on urban ageing in Zimbabwe. Section 3 discusses the utilised methodology and textual examination of the documents. Section 4 discusses four thematic groups of discourse emerging from the analysis followed by the discussion of the findings in Section 5 and lastly, the Section 6 ends with concluding statements.

## 2. Urban Ageing in Zimbabwe

Zimbabwe's urban areas, like many other cities in Africa, have been experiencing some drastic changes in the urban environment as a result of the increasing rate of ur-

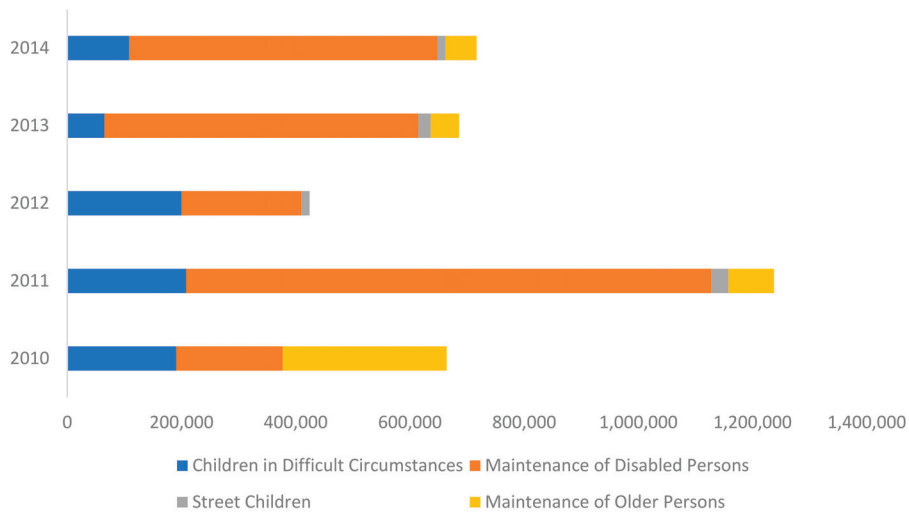
banisation caused by complex rural-to-urban migration flows, socio-political tensions, and extreme strain on basic services. Over the years, significant parts of urban Zimbabwe has been progressively forced into urban poverty and informality as a consequence of the dire socio-economic climate and state-led evictions [26–28]. The reality of this complex socio-political urban context has resulted in the establishment of a scholarly discourse investigating “why and what” are the key factors at play in the current urban environment and “how” Zimbabwe’s urban areas can promote inclusivity and improvement of quality of life for urban Zimbabweans. This includes research into issues of urbanisation, politics, and planning [20,29,30], informality [20,31–34], inclusivity [35], rights and citizenship [36]. Parallel to these research efforts is the commitment in the policy discourse on promoting rhetoric of change and betterment for the citizens through adherence to international agendas and national development strategies. Such commitment to international development programmes could open up opportunities for the country to benefit from the abilities and contributions of older people within the community.

In the middle of the rising urban challenges facing the country, Zimbabwe is also experiencing an increase in the absolute numbers of older people residing in urban areas [37–46]. Figure 1 demonstrates how the percentage of the total population over the age of 50 is expected to quadruple, from 8.6 percent in 2000 to nearly 38 percent in 2100. The proportion of older people over the age of 60 years is also projected to increase more than 5 times, from 4.7 percent in 2000 to 25.2 percent in 2100 [47]. This demographic shift brings its own challenges to the state of Zimbabwe. With increasing age, numerous underlying physiological changes occur, and the risk of age-related losses and non-communicable diseases [37,38]. But the changes that constitute and influence ageing in urban Zimbabwe are far more complex and beyond these biological losses. The small corpus of Zimbabwean scholarly discourse evidences the social and economic implications of urban ageing. Publications from early post-colonial Zimbabwe were concerned with increasing housing demands for older people [39,40], demands for social care and institutionalisation [41,42], changes in intergenerational transfers [43,44] and changes in family support, structures and households [45,46] for older people in Zimbabwean cities and towns. A common finding from these researchers indicated that many older black people particularly migrants from neighbouring countries were found to be homeless, living in informal housing, and working in the informal sector such as working as street vendors. An environment that [48] describes as one of “marginalisation and increasing pauperisation”.



**Figure 1.** Predicted change in the proportion of the Zimbabwean population in older age groups (Authors adapted from United Nations, Department of Economic and Social Affairs, Population Division (2015)).

More recent studies on Zimbabwe's urban ageing prove that the narrative of older people living in urban areas has not made any significant strides from the past. Most older people are still found to be working longer [49], living in poorer conditions with little care and support [50,51], and experiencing significant barriers in the urban space such as accessing healthcare and transportation [35]. There is increasing research on an older person's health and well-being and the intersections with urban space. A cross-sectional survey by [52] on social support and institutionalisation in Bulawayo found most older people were at risk and experiencing poor mental health within care homes. Research by [53] on older people in an urban district in Harare, found that older people were excluded from certain activities in urban areas such as key information, education, and communication campaigns for HIV and AIDS because they are incorrectly regarded as sexually inactive and not susceptible to contracting sexually transmitted infections. Systematic evaluations of social security provisions in Zimbabwe over the past two decades describe consistent experiences of old age under persistent poverty and resource constraints [50,54,55]. The social assistance programs and maintenance of older persons in specific have been negatively impacted by the weak performance of the economy. It is a situation that has persisted for many years as shown in Figure 2 which illustrates the significantly low provision of maintenance of older persons when compared with other groups [56,57]. Contrary to the persistent narrative of marginalisation of Zimbabwe's older urban citizens, are findings from studies indicating the valuable roles that older people, particularly older women play in urban communities such as through community building programmes [58,59], crucial caregivers and family contributors [55,60,61], sharing knowledge and building symbiotic relationships between older persons and their families [62].



**Figure 2.** Social assistance programs from 2010 to 2014 (Authors adapted from (Government of Zimbabwe and The World Bank, 2016)).

Whereas these studies have provided valuable insights into urban ageing in Zimbabwe, to the authors' knowledge, to date there has been no evaluation of the discourse that is created and used to shape the lived realities of older people and identify their needs.

### 3. Methodology

To facilitate the investigation of the visibility of older people in Zimbabwe's policy discourse, a collection of 45 documents produced for international and national urban development programmes specific to the region was selected. The documents were chosen

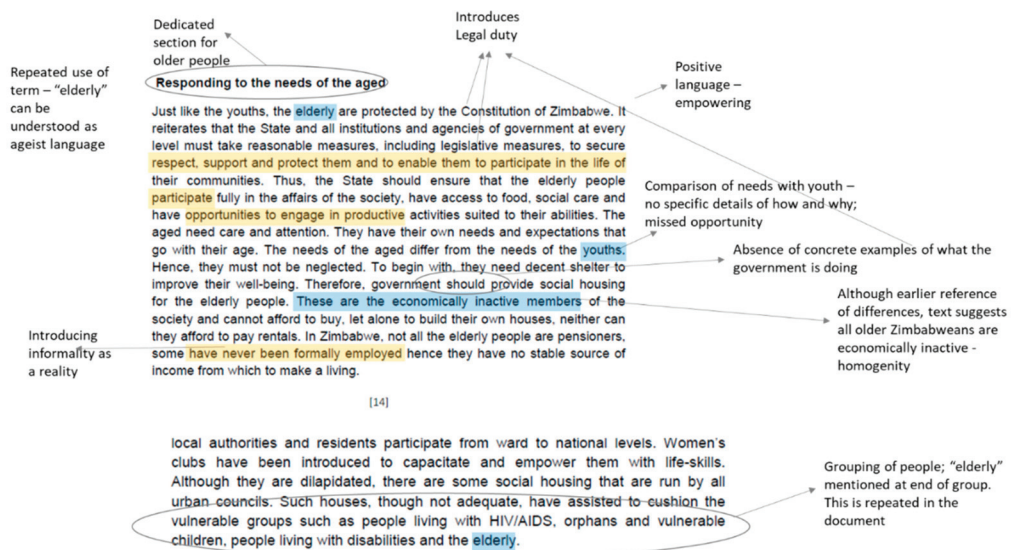
following a systematic search for relevant publications and according to the selection criteria given in Table 1. The search identified literature published after 2002 justified by the first global acknowledgment to improve the lives of older people made by Zimbabwe at the Second World Assembly on Ageing in 2002 as well as in the African Union Policy Framework and Plan of Action on Ageing adopted in the same year. Therefore, the selected documents are intended to trace the change in the representation of older people in policy discourse from the first steps of international commitment in 2002 until present.

**Table 1.** Inclusion criteria for reviewed literature.

Aspect	Criteria
Language of Publication	English, Shona or Ndebele
Years Published	2002–2019
Country Focus	Zimbabwe
Document Focus	Key themes related to the lives of older Zimbabweans living in urban environments: Ageing, health, sustainable development, urbanism, rural, community development and gender, rural to urban migration/urban to rural migration, family
Document Providers	Government of Zimbabwe and government departments, city councils, international and national Non-Governmental Organisations
Types of Data Sources	Policy documents, strategies, research reports, policy statements and working papers

The search engine Google was used to locate websites operated by the Government of Zimbabwe, ministerial bodies, and Non-Governmental Organisations involved in sustainable development and the promotion of inclusive communities. Targeted searches were conducted for documents through snowballing, identifying publications in reference lists, and expert recommendations. For ease of review, the publications were grouped into four main categories: first, policy documents and strategies produced by the Government of Zimbabwe and government departments (no = 17); second, a national review for Sustainable Development Goals (SDGs) and the progress reports produced by the Government for the Millennium Development Goals committed to at the Fifty-Fifth Sessions of the United Nations General Assembly in September 2010 (no = 6); third, periodic review reports and key documents reflecting national priorities and interventions authored by the Government for the United Nations and African Commission (no = 8) and, lastly, papers and research reports published by Non-Governmental Organisations working on the improvement of the lives of Zimbabwean citizens including reports focused solely on older persons (no = 14). NVivo 10, a well-known qualitative data analysis software tool, was used to help the systematic storing, retrieval, evaluation, and interpretation of the texts. A key aspect of the analysis was to examine the “form” and “texture”, the relations between the elements of the text as well as its characteristics including language and style. An example of these aspects of the analysis is presented in an Excerpt from the 2015 National Report for Habitat III in Figure 3. Further information on the content of this document is given in the discussion sub-sections. Figures 4–6 give further details about the selected documents and the word frequency results.





**Figure 3.** Example of textual analysis (language) in in the National Report for Habitat III (Republic of Zimbabwe, 2015) (N.B: This image shows two different coding colours, “blue” for negative terms and “gold” for positive terms).

No	Date	Author	Geographical focus	Report Title	Documents authored by the Government of Zimbabwe (policies, strategies, key reports)			Purpose of the document			Context in which older person mentioned
					Older Person	Children	Youth	Older Person	Children	Youth	
1	2007	The Government of Zimbabwe	National	Zimbabwe Urban Councils Act	10	6	4	An Act to provide for the conferring of town and city status on growth points, municipalities and towns	Reference to Pension		
2	2004	The Ministry of Health and Child Welfare	National	Zimbabwe National Mental Health Policy	0	1	0	To harmonise mental health activities and improve the quality of care	No direct reference		
3	2006	National AIDS Council, Ministry of Health and Child Welfare	National	Zimbabwe National HIV and AIDS Strategic Plan 2006-2010	1	43	28	Provides the national framework for all HIV and AIDS interventions in Zimbabwe	Impact mitigation strategies for older persons		
4	2005	Ministry of Public Services, Labour and Social Welfare	National	National Action Plan for orphans and Vulnerable Children 2004-2010	0	304	1	Address the plight of orphans and vulnerable children in Zimbabwe	No direct reference		
5	2009	The Ministry of Health and Child Welfare	National	The National Health Strategy for Zimbabwe (2009-2013)	1	22	0	To improve the quality of life of Zimbabweans and set the agenda for launching the health sector until 2013 Affecting Zimbabweans	Demographic and Specific Diseases Affecting Zimbabweans		
6	2010	The Ministry of National Housing and Social Amenities	National	National Housing Policy	2	0	0	To develop a coordinated housing sector which addresses the needs and interests of all stakeholders for maximum performance.	Reference to Pension		
7	2012	The Government of Zimbabwe	National	Older Persons Act	79	0	0	To provide for the well-being of older persons; the establishment of an Older Persons Board; to create an Older Persons Fund	Focused solely on the affairs of older persons		
8	2013	The Government of Zimbabwe	National	The Constitution of Zimbabwe	26	10	1	This Constitution is the supreme law of Zimbabwe	Dedicated section on older persons		
9	2013	The Republic of Zimbabwe, Ministry of Women Affairs, Gender and Community Development	National	National Gender Policy	0	6	6	Address women issues and the emerging issue	Indirect mentions		
10	2013	The Government of Zimbabwe	National	Zimbabwe Asset Agenda for Sustainability	3	7	4	To achieve sustainable development and social equity persons – social service delivery	Reference to households headed by older persons – social service delivery		
11	2014	Ministry of Health and Child Care	National	The Zimbabwe National Strategic Plan for Mental Health Services 2014-2018	0	1	0	Set out a clear direction for the implementation of mental health and psychiatric services in Zimbabwe	No direct reference		
12	2014	The Government of Zimbabwe	National	Zimbabwe National Nutrition Strategy 2014 – 2018	4	207	7	Promote and ensure adequate food and nutrition security for all people at all times in Zimbabwe	limited statistics on nutritional status of older people (part to be filled)		
13	2010	Harare City Council	Harare (Capital)	Harare City Health Strategic plan 2010-2015	0	61	5	To strategise world class primary health care services through the provision of comprehensive health services	Indirect grouping - Grouped with vulnerable		
14	2016	The Ministry of Health and Child Care	National	The National Health Strategy for Zimbabwe 2016-2020	7	92	10	To sustain the gains achieved thus far through a comprehensive response to the burden of disease and strengthening of the health system	Improving the quality of life for older people		
15	2016	Ministry of Environment, Water and Climate	National	Zimbabwe Climate Change Policy	1	6	4	It provides a framework that calls for a means to integrate and mainstream climate change into different socio-economic sectors	Impact of Climate Change		
16	2016	Ministry of Finance & Economic Development	National	Zimbabwe Interim Poverty Reduction Strategy Paper (IPRS) 2016-2018	10	121	113	A report to detail the approach to mitigate poverty	Poverty and old age: Older people have higher poverty levels than the economically active group		
17	2016	Zimbabwe National Statistics Agency	National	Zimbabwe Population Census 2012 Women and Men Profile Summary Report	4	99	20	The report explores the gender dimensions in Zimbabwe in key policy areas based on the final results of the 2012 Population Census.	Household Size, Older persons and poverty		

Figure 4. Word frequency and collocation of documents authored by the Government of Zimbabwe (policies, strategies, key reports).

No	Date	Author	Geographical focus	Report Title	Older Person	Children	Youth	Purpose of the document	Context in which OP mentioned
Sustainable Development Goals (SDGs) Report produced by the Government of Zimbabwe									
18	2017	The Government of Zimbabwe	National	Zimbabwe Voluntary National Review (VNR) of SDGs For the High-Level Political Forum	3	16	29	National review of Sustainable Development Goals (SDGs)	Older persons being cared for, ref to Constitution, climate resilient infrastructure
Millennium Development Reports (MDGs) produced by the Government of Zimbabwe									
19	2004	The Government of Zimbabwe, UNDP Zimbabwe	National	MDGs Progress Report	2	115	36	The Report provides an analytical summary of the development progress made so far, the key challenges, priority areas for intervention to achieve the set national targets by 2015.	General grouped reference
20	2007	The Government of Zimbabwe, UNDP Zimbabwe	National	MDGs Progress Report 2000 to 2007	4	106	90	This report acts as a guide and monitoring tool to measure successes realized and challenges encountered.	Goal 6 combat HIV and aids malaria and other diseases; intergenerational sexual patterns between older men and younger women
21	2010	The Government of Zimbabwe, UNDP Zimbabwe	National	MDGs Progress Report	2	49	55	It provides the current implementation status on each of the MDGs in Zimbabwe and identifies trends over the last decade in terms of the progress attained in socio-economic development.	Grouped reference to lack of existing user fee policy
22	2012	The Government of Zimbabwe, UNDP Zimbabwe	National	MDGs Progress Report	0	66	51	Report on the country's progress in terms of the attainment of the MDG targets.	No direct reference
23	2015	The Government of Zimbabwe, UNDP Zimbabwe	National	MDGs Final Report 2000 to 2015	6	126	233	Report on the country's progress in terms of the attainment of the MDG targets.	Indirect reference to the disintegration of pensions
Reports produced by the Government of Zimbabwe for the United Nations (UNDP, UN-Habitat) and the African Commission									
24	2006	The Government of Zimbabwe	National	7th, 8th 9th and 10th combined state report to African Commission report	8	92	5	This Report addresses measures taken to implement provisions of the African Charter on Human and Peoples' Rights ("The African Charter") from 1996 to May 2006.	No direct reference
25	2010	The Government of Zimbabwe and the United Nations Country Team	National	UN Country Analysis report for Zimbabwe	11	29	19	This report provides the basis for the selection of national development priorities and the formulation of outcomes.	General reference to HIV poverty caregiving
26	2012	The Government of Zimbabwe	National	The future we want: A report to the United Nations Conference on Sustainable Development	0	7	7	To support sustainable development decision making through the provision of credible environmental information.	No direct reference
27	2016	The Government of Zimbabwe	National	UN General Assembly national report Human Rights	3	31	1	National report on the progress of Human Rights.	Government free user policy Grouped reference
28	2015	Independent Evaluation Office of UNDP	National	Independent Assessment UNDP	0	11	18	This Assessment of Development Results (ADR) primarily covers UNDP initiatives undertaken under the current funding cycle since 2011.	No direct reference
29	2015	UNDP in Zimbabwe	National	UNDP Zimbabwe Supporting a sustainable future	1	14	11	Report to provide details about the Universal Periodic Review process.	Indirect reference on community - level interventions
30	2016	The Government of Zimbabwe	National	Zimbabwe United Nations Development Assistance Framework 2016 - 2020	2	23	32	Progress report on Inclusive Growth & Sustainable Development from 2016 - 2020	Grouping reference to income security and poor households
31	2016	The Ministry of Local Government, Public Works and National Housing	National (urban areas)	National Report for Habitat III	10	2	25	This Country Report gives a synopsis of what the Government of Zimbabwe is doing in order to improve the standard of living through enhanced service delivery.	Dedicated section on addressing the needs and concerns of older persons

Figure 5. Word frequency and collocation of documents for international agenda.

No	Date	Author	Geographical focus	Report Title	Older Person	Children	Youth	Purpose of the document	Context in which OP mentioned
<p>Reports written by Non-governmental Organisations (NGOs) focusing on social issues, specific groups including older Zimbabweans</p>									
32	2002	World Health Organization, Ministry of Health and Child Welfare	National, rural and urban	Impact of AIDS on older people in Africa Zimbabwe Case Study	236	125	3	To examine the impact of HIV/AIDS on older caregivers preliminary in Zimbabwe.	Understanding the plight of older people in the context of the AIDS epidemic.
33	2007	Africa Fighting Malaria	National	The destruction of healthcare in Zimbabwe	2	23	5	Presents a perspective of the increasingly chaotic healthcare situation in Zimbabwe.	Homelessness and isolation and poverty due to adult children migration.
34	2012	HeiPage International and partners	Rural	Older Farmers: An integral part of the food security equation in Zimbabwe	56	2	5	Review key policies in the agricultural sector and examine structural and institutional challenges and opportunities for older farmers.	Examine structural and institutional challenges and opportunities for older farmers (rural focus).
35	2012	Centre for Community Development Solutions, HeiPage Zimbabwe	National, Rural (Chiredzi)	Towards an ageing network in Zimbabwe	81	1	8	Discuss issues of ageing nationwide.	Ageing issues in Zimbabwe and intergenerational approaches towards promoting sustainable agriculture.
36	2015	Plan Canada & Zimbabwe	Rural (Chipingwe, Mutare, Mutasa)	Plan Men Matter Engaging Men for Better MNCH Outcomes	21	60	25	Male engagement in maternal, newborn and child health.	Promoting male engagement in communities.
37	2015	Plan Canada & WATCH	Rural (Village)	WATCH Women and Their Children's Health	9	64	28	Improving maternal, neonatal and child health in Zimbabwe.	Increasing the use of preventative and responsive practices in maternal, newborn and child health by community members.
38	2016	HeiPage International's partners Zimbabwe Farmers' Union and HeiPage Zimbabwe	National, Rural	Scoping the Policy and Institutional Arena in Support of Older Farmers in Zimbabwe	217	4	27	Scoping of issues and trends in the agriculture sector affecting older people.	Supporting older farmers especially older women (rural focus).
39	2016	Plan International Zimbabwe	National, rural and urban	Counting the Invisible Girls: rights and realities Technical report Zimbabwe	3	108	105	To examine how intersecting vulnerabilities shape and determine the opportunities available to adolescent girls.	Including older people in strategies for amplifying young girls' voices and choices in the community.
40	2017	United States of America Bureau of Democracy, Human Rights and Labor	National	Zimbabwe Humans Rights Report	1	38	17	Report on human rights in Zimbabwe post-change of government.	Older farmers challenges.
41	2017	HeiPage International	National, rural and urban	Cash transfers and older people's access to healthcare	207	14	1	To study the relationship between cash transfers and older people's access to health services.	Challenges related to healthcare provision.
42	2017	Oxfam	Rural	Infrastructure and equipment for unpaid care work household survey findings	3	181	36	Tests which infrastructure, equipment and other factors influence care-work patterns.	Unpaid care and domestic work and the perceptions of care.
43	2018	Oxfam	Rural	Understanding norms around the gendered division of labour results from focus group discussions in Zimbabwe	3	181	1	Seeking to understand how the responsibility for providing unpaid care and domestic work limits women's choices and their ability to engage.	Older person's vulnerability and being taken care off.
44	2018	Oxfam	Rural	Exploring the need for gender-equitable fiscal policies for a human economy	0	21	4	Identifies unpaid care and domestic work as a key area where fiscal policy has a significant impact on gender equality.	No direct reference.
45	2019	HeiPage International	Rural and urban	Older people's perceptions of health and wellbeing	266	1	0	To provide a better understanding of health and care in older age.	Understand health and care in older age.

Figure 6. Word frequency and collocation of documents written by Non-Governmental Organisations (NGOs) focusing on social issues, specific groups including older Zimbabweans.

## 4. Findings

The key thematic discourses that emerged from the document(s) review are presented in the following section. The findings of the analysis are discussed under four sub-sections of discourse: invisibility (Section 4.1), vulnerabilities (Section 4.2), rights (Section 4.3), gender, care, and contribution (Section 4.4).

### 4.1. Discourses of Invisibility

There is a clear paucity of mention of older persons in the content of the analysed documents, suggesting that the *sekuru* (older man) or *gogo* (older woman) is not a priority age group in Zimbabwe. Across the majority of the documents published by the Government from 2002 to 2017 (Figure 4) the word “older people” was only mentioned about 150 times in comparison to other groups (977 times for “children” and 225 for “youth”). The only exception with a word frequency of 305 was the current national healthy ageing strategy, a document that was solely published to “promote healthy ageing and delay functional inability among older persons” (Figure 4, document no. 16). A similar trend on the paucity of mention of older persons was also found across all the documents produced for the international agenda (Figure 5) (word frequency = 52) and in over half of the documents written by Non-Governmental Organisations apart from those specifically written to target certain ageing issues (Figure 6, documents no. 32, 34, 35, 38, 41 and 45). Disappointingly, the document review also reveals an inconsistency in the policy definition of older people. Section 82 of the Zimbabwean Constitution (Figure 4, no. 7) describes an older person as a person who is above the age of 70 years, whilst the Old Persons’ Act (Figure 4, no. 6) defines an older person as “a citizen of Zimbabwe aged 65 years or above, who is ordinarily resident”. To add to the confusion, the United Nations and Africa Union guidelines refer to an older person as someone who is 60 years and above whereas research conducted by Non-Governmental Organisations in Zimbabwe (Figure 5) uses the age 50 and over to define older persons. Therefore, data collected using the official national definitions risk missing out on vulnerable older people.

Older persons are referred to indirectly in groupings such as “the disadvantaged”, “the poor”, and “the vulnerable” (example in Figure 3). While there was no evidence to suggest that older people have been included in any of them, no definition of who is/was encompassed by these terms was given either. An illustration of this style of writing is shown in Excerpt (1) below from the Zimbabwe National HIV and Aids Strategic Plan (Figure 4, no. 3), which discusses mitigation efforts for households. Older person headed households are not included in the plans for mitigation despite evidence-based research suggesting the existence of such structures as a result of the HIV/AIDS epidemic [63]. Another dimension of exclusion is displayed through the level of participation and consultation for the development of the documents. Aside from the reports solely focused on the issues of older people (Figure 6), the mention of older persons is minimal across the sample. In some cases, a list of groups and persons consulted in the production of the reports is included, however, in general, no explicit reference to older person groups is mentioned. An example of this lack of engagement with senior persons is evident in Excerpt (2) taken from the 2017 Zimbabwe Voluntary National Review of Sustainable Development Goals (Figure 5, no. 18). Surprisingly, some documents with a large focus on older persons such as the Social Security Policy only mentioned one person out of 84 representing older people. This lack of representation is despite consistent rhetoric within the document championing inclusive consultation (Excerpt 2). Several documents such as the National Healthy Ageing Strategy displayed a robust list of participating organizations during the strategy development process. Although noticeably organisations representing less visible older persons, such as older people living in informality and disabled older people, were not explicitly mentioned.

Mitigation programmes include programmes to support OVCs with a minimum package of services, and food aid, nutritional support and other assistance to vulnerable households and communities, including *women-and child-headed house-*

holds and those with chronically sick family members. (Excerpt 1, UNAIDS, 2006, pg 19 (emphasis added))

Social protection policies and programmes will be based on evidence gathered from research and consultations to ensure that the policies and programmes address the needs identified and target people who meet the eligibility criteria. To this end, the government will collaborate with academia, public and private research institutes and consultancy companies to gather the evidence. (Excerpt 2, The Government of Zimbabwe, 2017, pg 33).

In coming up with the position paper, (the) Government undertook a wide consultation process which entailed multi-stakeholder workshops, and several follow up meetings. The stakeholders included government departments, private sector, civil society, academia, people with disabilities, UN Agencies and other development partners. (Excerpt 3, The Government of Zimbabwe, 2017, pg 12).

The Habitat III report (2015) improves on the details of consultation by listing an attendance register for a country workshop. This register includes representatives from local city councils, Non-Governmental Organisations, and private companies, as well as organisations representing the youth such as the Young Voices Network. However, the workshop was not attended by any organisations representing older people such as HelpAge Zimbabwe. Interestingly, in this report, participation strategies were mentioned explicitly in the sections concerning youth and women, however there was no mention in the section dedicated to older persons. This is despite the evidence of statements such as the one below (Excerpt 4) made in the foreword by the Minister of Local Government, Public Works and National Housing. Other documents such as the MDG progress reports (Figure 5, no. 19–23) mention the terms “all stakeholders” or “multi-stakeholder” in reference to consultation for the report without further elucidation as to who these stakeholders are and what they represent. A quote from the 2015 Habitat III report (Excerpt 5) below describes plainly the absence of a culture of participation and inclusion in developing urban development strategies.

This will be achieved through the *active participation of all the critical stakeholders* such as local authorities, financial institutions, private land developers, Community Based Organisations, investors (both local and international), civic society organisations employer and more critically, the end beneficiary. (Excerpt 4, The Government of Zimbabwe, 2019, pg 5 (emphasis added)).

Currently, there is a *lack of platforms* that promote the voices of the vulnerable and *marginalised social groups* to be heard. As a result, there is (a) manipulation of citizens by different powerful groups to enhance their own interests . . . Government and local authorities should be amenable to working with a diverse range of groups to promote participatory and inclusive approaches to urban development integrated with local economic development approaches for sustainability (Excerpt 5, The Ministry of Local Government, Public Works and National Housing, 2015, pg 19 (emphasis added)).

This absence of public voice may suggest that the majority group consisted of high-level government officials and scanty representation from members of civil society and Non-Governmental Organisations. On the contrary, the reports contain generic terms that appear to encompass all social groups of society, such as “users”, “consumers” and “households”. With older people left behind in consultation and participation, this removes any opportunity for them to contest negative identities related to ageing and ageing in poverty and informality.

#### 4.2. Discourses of Vulnerability

In the reports authored by the Government for the United Nations (Figure 3) the language presents itself as standard, assuming that the reader will be familiar with the UN

written approach. This standardised style of writing may exclude non-academic readers or readers with difficulty understanding UN jargon. The term “elderly” to represent older people is widely used in almost all the documents that mention older people. This is a term that can be viewed as ageist, presenting older people as being a homogeneous group always being viewed under the lens of vulnerability, as objects of pity and a burden [64]. A significant turn from the use of the term is shown in the 2016 Zimbabwe National Healthy Ageing Strategic Plan (Figure 4, no. 16), which only uses the term “older persons” to refer to Zimbabweans over the age of 65. Although this term is much more accepted, “older” is a nebulous term defined variously by researchers, services, and older people themselves. It is often used as an encompassing term even though the needs of a 55-year-old will be very different from those of an 85-year-old, and this is often not taken into consideration in urban policy discourse.

The document analysis suggests that older people, or at least sub-groups of them, are conceptualised as being “vulnerable” and living in vulnerable circumstances [47], for which without any support, their quality of life would be seriously compromised. Most documents acknowledged that the integral public services, such as affordable housing and accessible healthcare required to support older people in Zimbabwe, are often lacking or of poor quality and inadequately funded. Severe economic challenges have persistently exacerbated the already precarious situation for older people as shown in Excerpts 6 and 7 below from the Habitat III (2015) paper in the dedicated sections on older people (Figure 5) and in the Zimbabwe National Healthy Ageing Strategic Plan 2017–2020 (Figure 4).

In an ideal economy, the government should provide grants to senior citizens. But in Zimbabwe, it has been difficult to provide this social net to the senior citizens and they have been forced by the situation to fend for themselves. Given that their abilities are now compromised due to age, it is difficult for the old-aged people in Zimbabwe to make ends meet (Excerpt 6, The Ministry of Local Government, Public Works and National Housing, 2015, pg 15).

The hyper-inflationary environment experienced during the years 2000–2010 eroded the savings of older persons’ pensions and social security. Low access to health care and social security (pension, social grants and insurance) for older persons and unavailability of medicines for chronic non-communicable diseases at public health facilities in Zimbabwe increased health-related expenditure among older persons (Excerpt 7, Ministry of Health and Child Care and WHO, 2017, pg 13).

This challenging environment combined with the lack of support places a strain among various groups of the society including older people, consequently, pushing them into poverty and informality (Figure 7). The language used often paints a picture of older people as “vulnerable”, “poor” and “disadvantaged” or as those who are not able to compete on an equal basis for resources and opportunities. The 2016 Women and Men Profile Summary Report (Figure 4, no. 15) supports this image by discussing the evidence of poverty and vulnerability experienced by households headed by older persons based on the 2012 population census (Excerpt 8). This pattern of representation is found across most documents such as the Harare City Health Strategic plan 2010–2015 (no. 13), Zimbabwe Interim Poverty Reduction Strategy Paper (I-PRSP) 2016–2018 (no. 16), UN Country Analysis report for Zimbabwe (no. 24), and Zimbabwe United Nations Development Assistance Framework (no. 29). An added vulnerability is illustrated in the Excerpts below (9 and 10) which admittedly describe how older people without the family support structure and assistance from the state are being left behind.



**Figure 7.** Older female resident in Gunhill informal settlement in urban Harare (left) and informal residents of Gunhill settlement (right) (Source: First Author, 2015).

Elderly-headed and female-headed households are larger and hence more vulnerable to poverty than other households. (Excerpt 8, Women and Men Profile Summary Report, 2016, pg 22)

Zimbabwe does not, at present, have a comprehensive social insurance scheme. Also, the vast majority of Zimbabweans are working in the informal economy and are largely not covered by social insurance. (Excerpt 9, National social protection policy framework for Zimbabwe and care, pg 13)

Traditionally, the extended family system was responsible for providing social support and care to its members. However, the processes of urbanization, industrialization, and globalization have gradually weakened the cohesiveness of the extended family system, thereby undermining its capacity to provide social support and care to its members. This void is increasingly being filled by the state and non-state actors, but they are constrained by lack of adequate resources to provide meaningful social support. (Excerpt 10, National social protection policy framework for Zimbabwe and care, pg 16)

#### 4.3. Discourses of Rights

The New Constitution (2013) is the supreme law of Zimbabwe and the obligations imposed by it are binding on every person, natural or juristic, including the State and all executive, legislative and judicial institutions and agencies of government at every level, and must be fulfilled by them. The document contains a dedicated section for older persons. This serves as a positive recognition of older persons and the need to support and protect them. Positive and empowering words such as “enabling” and “participation” in the community are also used (see Excerpt 11).

1. The State and all institutions and agencies of government at every level must take reasonable measures, including legislative measures, to secure respect, support, and protection for elderly persons and to enable them to participate in the life of their communities.
2. The State and all institutions and agencies of government at every level must endeavour, within the limits of the resources available to them—a. to encourage elderly persons to participate fully in the affairs of society; b. to provide facilities, food and social care for elderly persons who are in need; c. to develop programmes to give elderly persons the opportunity to engage in productive activity suited to their abilities and consistent with their vocations and desires; and d. to foster social organisations aimed at improving the quality of life of elderly persons. (Excerpt 11, Republic of Zimbabwe, 2016, p. 22) (emphasis added).



A rights-based language is used to articulate the right to healthcare and financial assistance in a dedicated paragraph on the rights of older persons. The recognition of older people's human rights in the New Constitution was perhaps fuelled by the Protocol on the Rights of Older Persons to the African Charter on Human and People's Rights created in April 2012 [47]. This rights-based language is reflected in the Older Persons Act 2012 produced a year before the publication of the New Constitution. The Older Persons Act was created to provide for the well-being of older persons and the establishment of an Older Persons Board and Older Persons Fund. Positive affirmative language such as "equal opportunities", "independent lives", "improving well-being, and social and economic status" can be found in the Act. In tandem with the New Constitution, the National Gender Policy (Figure 4, no. 8) introduced in the same year (2013) recognises that men and women have a right to equal treatment, including the right to equal opportunities in political, economic, cultural and social spheres. It was the first policy to accord women the right to custody and guardianship and make void all laws, customs, cultural practices, and traditions that infringe on the rights of women and girls. There is no direct mention of older women. Despite the discourse of recognition of the rights of older people, the processes and structures suggested to support the actualisation of rights can be confusing, counterproductive, and ineffective. The quote below found in the state report for the 2006 African Commission (Figure 5, no. 24) suggests a process for ensuring the right to physical and mental health for older people but also admits that this process may not be fully functioning. Further confusion is regarding the misalignment of definitions between the Constitution and the Older Persons Act which may impact the rights of older Zimbabweans as discussed in Section 4.1.

Assessments are done by the District Social Welfare officers and these target children whose parents are not working, orphaned children, the elderly, and those affected by the HIV/AIDS pandemic. These are given free medical Treatment Orders to present to the Hospitals which receive the money from the Department of Social Welfare. The Department sometimes faces a challenge in updating payments due to financial constraints and the ever-increasing costs of medical treatment (Excerpt 12, The Government of Zimbabwe, 2006, Pg 56).

#### 4.4. Discourses of Gender, Care and Contribution

Families irrespective of the nature of the welfare regimes they are embedded in are central to the debate about how societies will face the challenges of population ageing. In Zimbabwe, most older people live in intergenerational households, and therefore the challenges of an older person are as much a household issue as an individual one. This context is clearly expressed in Excerpt 14 from a HelpAge study on older people in Zimbabwe. Ageing is, therefore, occurring in a context where support from the family or the government cannot be relied upon. As a further result of the socio-economic and political changes in Zimbabwe, older people are found to be both in need of care but also giving care. This is particularly relevant for older women who are found to be the majority of caregivers within Zimbabwean households. Women make up not only most of the old in Zimbabwe but also the majority of the poor old. Excerpt (15) below from the Zimbabwe National Healthy Ageing Strategic Plan 2017–2020 reinforces this reality.

Gender is a significant factor in the perception of health status, with older women perceiving their health status to be poorer than older men, despite reporting higher levels of access and engagement with self-care (Excerpt 14, HelpAge International, 2019, pg 27)

Older female persons are often worst affected by poverty, economic challenges, and disease burden, mainly because they are not eligible for social security pension and medical aid contributions since they were generally never formally employed. (The) majority of women work in the informal sector as cross-border traders, vendors, smallholder farmers, and unpaid carers (Excerpt 15, Ministry of Health and Child Care and WHO, 2017, pg 13).

Despite the frequent mentions of women in the analysed documents, there is a larger emphasis on younger women. Evidence of this trend is traced in the reports focused primarily on women's issues (Figures 4–6, document no. 8, 15, 37, 39, and 44) sharing only a total of ( $n = 16$ ) direct mentions of older women as opposite to ( $n = 163$ ) direct mentions of younger women. Older women are rarely mentioned directly, and indirect referencing is buried in the general commentary. Some direct references are illustrated in Excerpts 16 to 19.

In addition, the turn of the millennium saw a phenomenal increase in outward migration . . . The poverty and vulnerability of the households that migrants leave behind are also exacerbated by the fact that it is generally the most productive members who engage in migration . . . The country has also carried an increasing number of orphans and other vulnerable children . . . the majority of these children are under the care of the elderly or in female-headed households (PASS II). (Excerpt 16, Government of Zimbabwe and United Nations Country Team, 2010, pg 28,46).

Furthermore, existing mitigation strategies have been too narrow, focusing on the survival of certain categories of individuals and communities such as orphans and child-headed households, while neglecting the needs of other vulnerable population groups . . . Impact mitigation should be extended to elderly caregivers. (Excerpt 17, Zimbabwe National HIV and Aids Strategic Plan, 2006, pg 21).

Older female persons are often worst affected by poverty, economic challenges and disease burden . . . the associated stress of caring for such children increased the risk of some non-communicable diseases among the older persons. Older women were disproportionately affected by this stress as they are more likely to be the primary caregivers. (Excerpt 18, Government of Zimbabwe, 2019, pg 5).

The Government has set up an Inter-Ministerial Committee on Rape and Sexual Violence to carry out thorough investigations into the causes of rape of minors and elderly women (Excerpt 19, United Nations Zimbabwe, 2016, pg 14).

## 5. Discussion: Discourses of Ambivalence

The findings of the discourse analysis discussed in the previous sections suggest that there is a need for a shift from ambivalence and towards deliberate consideration of the interests of older people in the urban development discourse. Much of this is evidenced by the silence in the texts examined. The documents demonstrate the efforts being undertaken towards sustainable development for over 17 years with the most recent policy report produced in 2019. Aside from the documents focused solely on older people, the discourse analysis indicates an inconsistency in the recognition of the needs and desires of older people over the two decades. Specifically, the findings suggest that there is an oscillation between representations. On one hand, older people are perceived as “vulnerable”, “deficient”, “in-need” and on the other hand, they are “embedded in the family”, “contributors”, “care-givers”, worthy of “rights”, and “active participators”. The policy discourse evidences a continual fluctuation and uncertainty between the different representations. This can be understood as “ambivalence”. Ambivalence is a discursive perspective that demonstrates that older people and their role in Zimbabwe's urban society are not clearly defined. Consequently, this ambivalence reflects an absence of clear progression towards the recognition of older persons. Any visibility of older people in wider urban policies and documents in Zimbabwe remains under-represented along with other categories of “otherness” such as disabled people and homeless people. This finding aligns with global discourses of vulnerability which represent older people as an economic burden on society reinforcing their marginality [65] and endangering their levels of social and economic well-being. The lack of discussion of older people in the urban policy discourse could indicate that there is a consensus on the positioning of older people within the safety net of the family. Such assumptions reinforce the discourses of ambivalence by contrastingly

framing older people as vulnerable and invisible but also suggesting that the family unit provides a supportive, participatory, and visible environment for them. It is also a counter perspective to the global scholarly arguments that frame older people as active urban citizens [14,15,66]. The findings highlight the key function of family and the economic status of the family of the older person in determining their care and support. The pivotal nature of the family unit in influencing older people's economic and social well-being is reflected in the global discourse on ageing [67]. Additionally, there is a gendered form of ambivalence aligning with global trends [11,68–71]. The discourse on caregiving is largely targeted at the women within the family unit. They take on the caregiving responsibility for spouses, other family members, and peers while often needing care themselves [55]. Therefore, older women on a structural level are still expected to do the larger proportion of care work and in line with cultural norms are expected to find this work fulfilling and to not resist. The findings suggest that older women are still very much assumed to be spatially located in the home.

The narrative on older people is still largely limited to discourses from Government departments for social work and healthcare, lacking integration into wider areas of national policy. For example, documents that focus on urban planning and housing such as the national housing policy and local reports regarding sustainable development make no or little mention of older people. This is despite research evidencing the crucial need for including older people in policy discourse such as housing policies and plans [39,72]. Thus, indicating a lack of recognition and value of the person-environment relationship in the wider discourse. Although the local discourse in the strategic plans for Harare reflects a city that is aiming to cater for all its citizens, it crucially lacks articulation on how it endeavours to meet these diverse needs and abilities such as through transport and road infrastructure. Global initiatives such as the WHO Age-Friendly Cities framework [73,74] recognise that an older person's functional ability begins to depreciate, such as mobility, and they become aware of the level of care opportunities in the home, neighbourhood, and city [75]. Therefore, the absence of discourse on the relationship between older people and the urban environment in Zimbabwe excludes the nation from a global discussion that is becoming increasingly relevant.

Contrastingly, Zimbabwe has shown an emergence of a discourse based on citizenship and rights [76,77] arguing for innovative ways of thinking of older Zimbabweans living in urban spaces. Key legislation such as the Constitution, the Older Persons Act, and Healthy Ageing Strategy demonstrate an active commitment to action that is rights-based and enabling. However, the evidence of ambivalence is shown in the exclusion of older persons in participating and developing policy. By enabling older persons' right to the city and that of other urban citizens, the relatively high control of the narrative by the national government and state elites is challenged over decisions regarding the organisation and management of the city and its spaces. Therefore, the discourse on citizenship requires processes that foster transparency, accountability, and the democratisation of data for decision making as well as the allocation of opportunities and resources. More effort is needed to actively engage with older people and empower them to be agents of change. Indeed, this is a challenge that is reflected in many urban African centres where the benefits from the ability of cities to create an environment where all citizens can easily interact, be productive, be mobile and succeed, is still lacking [20,78–80].

Engaging with older people at a meaningful level requires a recognition of the heterogeneous nature of ageing. As mentioned in Sections 4.1 and 4.2, there is significant inconsistency in the policy definition of older people with different age ranges cited in different documents. The use of different chronological definitions of older people presents challenges related to asserting the rights of older persons guaranteed in the legislative framework. The ambivalence of definition and identity as shown in the findings exposes the limitations of notions that older people's social urban realities are singular and can only be included in the group of older people at a certain age. This perspective links to wider academic discourses that are challenging this homogenous representation through

approaches such as the life course approach that emphasises a temporal and social representation of ageing. This approach recognises the diverse contexts which may change and influence an older person's identity throughout their life [81]. Therefore, ageing does not become a matter of chronology but about restricted functionality and activity. Crucially, older people who endure a lifetime of poverty, malnutrition, and heavy labour may be chronologically young but "functionally" old at age 50 [82]. Instead, the discourse should address what interventions are needed to improve, restore, and maintain physical and mental functionality [83]. The health and healthcare needs of an older person are better related to proximity to death, rather than chronological age [84]. Chronological age, therefore, becomes a weak predictor of need. By considering the context of a person and their life course, strategies, and resources used for coping with ageing by individuals and communities can be established at a much earlier point in life. Furthermore, positioning the ageing discourse within a life course perspective illuminates critical linkages that can exist between the lives of older and younger generations. This highlights the potential for intergenerational strategies, an aspect that is inadequately recognised in the discourse. In recognising diversity in old age, opportunities open up for the reconsideration of the design of the urban space with special attention to issues such as physical accessibility, adequate and affordable healthcare services, transport infrastructure, and inclusive public spaces.

Who an older Zimbabwean is and what their daily lives look like as they age is not simply understood. Rather, what has emerged from the discourse analysis is that the notions of seniority are not fixed. To adequately cater for the needs of older people, their lived experiences must be viewed through the lens of inclusivity. However, the commitment to inclusivity by key actors in Zimbabwe's national and local government needs to go beyond policy rhetoric and translate into inclusive practices that will foster the needs of older people on the ground. For inclusivity to be meaningful, a significant shift is needed, that will create new levels of dialogue requiring persons with power to make space for those without.

## 6. Conclusions

This study aimed to contribute an understanding of urban ageing in Zimbabwe by analysing the socio-political discourse. The authors have approached urban ageing as an evolving concept in policy discourse. Ageing is experiencing a global shift in recognition and is becoming a vehicle to discuss, interpret, and relate to the role of inclusive and healthy sustainable urban development. The concept of urban ageing in Zimbabwe requires a combination of knowledge that evolves from different discourses as discussed in Section 4. Currently, there seems to be an ambivalence in the representation of older people living in Zimbabwe's urban spaces. The review of the policy discourse presented in the paper demonstrates an element of inconsistency in the representation of older people across the documents. Re-thinking the discourses/thoughts emerged from this review may therefore offer an initial basis for transforming the discursive order identified and create alternative representations of older people and policy options. A broader conceptualisation of ageing needs to be evident in the policies for older people such as the Older Persons Act and the national healthy ageing strategy. This will include a diversity of experiences and the enhancement of the level of care. Furthermore, the intersections of age and gender need to be better understood and addressed within the urban discourse. Revised versions of the national gender policy should sufficiently address older men and women and their differences in lived experiences. Furthermore, older people need to be visible as key stakeholders in urban policies such as housing and planning.

Zimbabwe has recently demonstrated a strong commitment to economic, environmental, and social sustainable development programmes through the obligations made towards international and regional legal instruments. As a nation, Zimbabwe continues to experience severe socio-cultural and economic challenges. Recent Government actions including restricting the internet access during the censorship shutdown in January 2019,

the demolition of informal houses and the mass protests and arrests during the current global health crisis could be seen as a step backwards. This undermines the progress made to support the diverse and inclusive voice of Zimbabweans. Major positive strides have been made over the last twenty years in bringing to the forefront issues of gender equality and combating HIV/AIDS. Despite these emerging efforts, the attention given towards ageing-related issues including the feminisation of ageing and the contributory role of older people is still limited. The findings strengthen the case on why Zimbabwe's policymakers, local authorities, civil society organisations, and urban practitioners should address older people and their needs as a priority. More data and knowledge about older people are needed to break away from stereotypes and cultural assumptions that disadvantage them. At a more local level, the ambivalence in the profiles of older people living in urban spaces encourages a closer look into older persons that may not be that visible in the discourse such as those living in informal settlements.

In terms of scope, the study is limited in its geographical focus on the urban context within Zimbabwe. Additionally, the selected timeframe of the documents reviewed may also have missed out more recent publications. However, the findings discussed in this paper are mainly based on the first stage of a wider study on "older people in urban Zimbabwe". The second stage of this research will present the findings from interviews with policymakers and senior residents and will be shared with the academic community as part of future publications.

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Article

# What Role Does Rural Place Play in the Lives of Mid-Life Women in Sweden and Ireland?

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**Abstract:** Rural place is a significant influencer of the ageing and states of well-being experienced by older women. This paper extends existing knowledge on gendered rural place by examining its influence on mid-life (45–65 years) women in rural Sweden and rural Ireland. This paper also examines rural place identity, self-identity and the enhancement of the self, and the multiple pathways to place attachment at mid-life. Qualitative data were gathered in 2019 from ten women living in Sweden’s rural Värmland region, and in 2012–2013 from 25 women living in Ireland’s rural Connemara region. Adopting a social constructionist approach within a lifecourse framework, methodology was informed by constructivist grounded theory, using one-to-one semi-structured interviews. These distinct studies show both similarity and difference in rural place identity and self-identity among mid-life women, and highlight nuances around place attachment, the home, social relationships, and the natural environment. The data show a compelling need for a greater consideration of the critical and diverse role rural place plays in shaping women’s experiences of ageing and well-being both at mid-life and in older age.

**Keywords:** ageing; home; identity; Ireland; place attachment; rural; Sweden; women

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## 1. Introduction

The aim of this paper is to explore and reflect upon how mid-life women in rural regions of two European States, Ireland and Sweden consider the role of rural place in their lives, of how they construct and experience rurality, and of how such constructions influence place and self-identity as well as levels of attachment to place and well-being. Whilst literature around rurality in social gerontology has moved on considerably from rural-urban discourse [1] and has come more to the fore [2,3] in its own right, there still exists a relative dearth of empirical qualitative data that ‘drills down’ into ‘lay-person’ discourse, and particularly so amongst mid-life women. The added value of this paper lies in the emergence of rich qualitative data that look to explore participant perceptions of what it means to age within rural place. The physical geography of rural communities in both Ireland and Sweden, combined with diverse ethnic immigration, and a general urban–rural distinction in levels of socio-economic investment may be expected to evoke diverse narrative from research participants on what rural place means at a micro level. It is thus an aim of this paper to express what rural means to those who live in it, rather than to narrowly define the concept of rural.

Participants within these two studies were ‘middle-aged’. As a growing population demographic across the western world mid-life women are still relatively under-researched. This matters on a number of fronts: for women, mid-life has been shown to be a pivotal phase [4] during which re-appraisals of earlier life and re-calibrations of future life may take place in an effort to maximise optimum potential and secure as good an old age as possible. Decisions taken around social relationships, health, work, and place for example at mid-life have the capacity to radically alter the ageing experience and quality of life outcomes both positively and negatively [5]. Wiggs [6] critiques the scarcity of literature on

the lived experiences of late mid-life, post-menopause, but pre-old age women, stating that little is known about how women view their 'inner being' as they leave behind their reproductive years, and underscores the importance of listening to the actual lived experiences of women, and to the meaning they attribute to their lives in order to learn how to enhance quality of life in older age.

## **2. Background to Research Areas**

Popular layperson perceptions of Sweden and Ireland include those of thriving cities alongside isolated, de-populated villages, townlands and islands. Ireland is often alluded to as an island off an island off the west of Europe, and Sweden as a 'spiritual and physical peninsula on the outskirts of Europe' [7]. Politically, both countries have mostly adopted a neutral stance regarding global conflicts, and both operate 'centrist' governments of coalitions. Sweden defines rural as areas with under 3000 inhabitants, has a population of around ten million persons and a population density of 24 persons per km<sup>2</sup>. Around 12% of Sweden's population lives in rural areas [8] compared to 42% of Ireland's population [9]. With a population of under five million, Ireland has a population density of 70 persons per km<sup>2</sup> and defines rural as areas with under 1500 inhabitants. On the basis of these definitions Sweden would appear to be more rural than Ireland, yet Ireland is still considered to be the one of the most rural in Europe. Thus, it may be helpful to look beyond statistics and into the personal meaning of rural within these two countries.

Research for these two studies took place in the rural regions of Connemara in Ireland (see Figure 1), and Värmland in Sweden (see Figure 2). Geographically, the regions of Connemara and Värmland both 'look rural': almost 90% of Värmland's landscape is covered in forest and 10,000 lakes. Värmland is land-locked and borders Norway to the west. Described as a 'deep place' in 'Connemara: The Last Pool of Darkness', by Tim Robinson, a world authority on the region [10], Connemara borders the Atlantic Ocean to the west, comprises coastal areas, islands, beaches, moor and bogs, presided over by the mountains of the Twelve Ben and Mamturk ranges. At around 1900 km<sup>2</sup>, Connemara, on the west coast of Ireland, is geographically much smaller in size than Värmland in west-central Sweden, at around 18,000 km<sup>2</sup>. At around 300,000 persons, Värmland's population is much higher than that of Connemara, at around 32,000, yet each region has roughly the same population density of around 17/km<sup>2</sup>. Connemara's main town of Clifden, around which research took place, has a population of around 1600 persons. The town's nearest and largest city, Galway is some 80 km away and has a population of 80,000. Värmland's biggest city, Karlstad, comprises 88,000 persons, and is some 30 km away from the small town of Grums, where research took place. Grums town has a population of around 5000 persons. Lest we view Connemara in too romantic a light, it should be noted that it is a marginal landscape, both geographically and economically, and similar to some other remote rural parts of Ireland still carries the legacy of the Great Famine of the 1840s, which decimated the local population. Its history, like that of Ireland itself must be examined, as opposed to Sweden, in the light of its British colonial past, which although officially terminating around 100 years ago, still casts a shadow [10]. However, present day Connemara is not a homogenous region of 'pastness' as alluded to in some literature [11], but considerably more complex. Its southern Gaeltacht area in which Irish is the spoken tongue is quite different in tempo and nature to that of West Connemara, around the 'capital' town of Clifden, which is non-Irish speaking and has a semi-urban feel about it. What the region shares with Värmland is its peripheral geography, its under-population of an older demographic, and its status as an area requiring socio-economic intervention.



Figure 1. Connemara Region and main town of Clifden [12].



Figure 2. Värmland Region and town of Grums [13].

A contrasting factor between these two research sites is their proportions of older people. Whilst Sweden has an ‘old’ population, Ireland by contrast has a ‘young’ one [9]. Women at mid-life who are still in employment form over 70% in Sweden, although working hours decrease with age. Part-time,

temporary employment has become more normalised and many are considered to be in involuntary unemployment. Some older women continue to extend their working lives by choice, but others from necessity. Despite its reputation as a country of great equality, women on average earn 86 per cent of men's wages [14]. Ireland was always a more traditional country than Sweden in its gendered approach to work, with gender-equality legislation not introduced until the country joined the EU in the mid-1970s. Prior to that period, the 'marriage bar' prevented women working in the public sector from taking employment.

### **3. Literature Review**

Rurality as a concept is complex. Population and density statistics aside, rural may be also defined as a social representation with attached meanings [15,16]. The term rural may be utilised in quite different ways by different audiences. What academia or government understands to be rural may or may not converge with the layperson interpretation in any coherent way [17]. The term rural may never be used at all by those who live in rural areas, and yet those same people are nonetheless likely to have a clear understanding of what rural place means to them and how it influences their lived experiences. That understanding may be arrived at by their perceptions of the rural idyll [18], that is, what rural should look like. However; rural inhabitants, particularly women, who may experience additional inequalities [3] may also construct rural meaning through their understanding of what is available in the urban; it is, after all, not unusual to define one concept by its contrast to what it is not.

Place, and in particular rural place, with its distinct socio-economic features, has been shown to be a key influencer of quality of life [19] in both genders. Personal meaning and lay discourses of rural place [17,20] may drive levels of attachment, and by extension the ageing experience. By seeking to understand what rural place means to women at mid-life and how they feel it may impact upon their older age, society may be better positioned to introduce measures and supports that augment a positive ageing experience.

The fluid concept that is rural [3] may be viewed as a social construct [16] or an imagined entity realised through particular discourses or ways of understanding. Rurality may become 'situated knowledge', produced by the experiences of individuals and reflective of, amongst other things, their age, gender, ethnicity, social class, and education. Lay discourses of rurality articulate how people in rural areas identify their locality as rural, who self-identifies as rural, and what comprises the fabric of rural place [21].

Self-identity [22] as a concept is shaped by a myriad of factors, including one's position in the social structure. This can be unpacked further by looking at individual identity as either self or social. Self-identity is composed in complex interaction with others; social identity refers to our recognition of and response to others' categorisation of us in terms of variables like gender, class, race, ethnicity, marital status and sexual orientation [23]. Notably, how the self is perceived has the capacity to determine whether an older rural woman identifies as 'rural' or not, which in turn may influence identity with place and levels of place attachment.

Rural dwellers are not homogenous in nature: they may enjoy aspects of the 'rural idyll' [18] but perhaps endorse its component parts differently. Close-knit community intimacy and personal recognition may be valued, but such properties may sit alongside a strong desire for personal privacy. Housing in rural Ireland and rural Sweden may be dispersed or otherwise, but the role played by rural neighbours in place attachment is likely to be culturally dependent by for example perceptions of societal individualism or collectivism [24]. Thus, levels of community intimacy will vary and will have the capacity to directly influence perceptions of belonging, or of feeling socially isolated, or even lonely in place. The stereotypical image of rural close-knit community may not have any direct relationship with a presence or absence of loneliness. Whilst some research supports the notion of rural intimacy and an absence of loneliness that is perhaps more prevalent in urban areas, other research suggests that the desire to be alone, perhaps even socially isolated, and yet not be lonely in rural areas is equally prevalent [25].

Rural place's natural aesthetic [26] is widely addressed in literature. However; rural place is defined by diverse factors, both positive and negative: fewer employment opportunities, lower incomes, reduced public transport, and fewer social and medical amenities are just some that tend to disadvantage older rural women in particular [27]. However, rural place may also be marked by positive features, including lower housing costs and cleaner environments [28]. The typical features of rural place, such as trees, hills, lakes, flora, fauna, and green and blue space are all positive features that contribute to the concept of the 'therapeutic landscape', which is linked to enhanced well-being and quality of life [29]. A feature of therapeutic landscapes is 'palettes of space' in the forms of blue (water) and green (land) [30]. Blue care and the benefits of water environments for example have been strongly linked to positive mental health and psycho-social well-being [31]. A sense of well-being gained from living near blue or green space may be sufficient to off-set any negative rural factors such as poorer social amenities and may increase attachment to place. The concept of landscape may also be considered as referring in a broader sense to an environment of connectedness, with no sharp division between the natural and the human or between self and place [32].

Place, and place attachment, are intricate concepts, which have been examined at length in the literature. Attachment to place is a cognitive-emotional bond to a meaningful setting and is related to a sense of cultural or symbolic 'belonging' and well-being. When disrupted, especially if forced, place attachment can negatively impact well-being [33]. It is a distinct type of connectivity that may manifest for example as physical/aesthetic, social/cultural, psychological and temporal [22]. The spectrum of attachment may range from complete alienation to complete solidarity but should perhaps be more accurately considered as various points along a continuum. However; it is likely that the sense of belonging or connectivity arising from attachment is connected to important forms of access, including community resources. It is this access that helps to produce a sense of place. Place attachment is particularly significant to older people as they may be more likely to remain in place and less likely to re-locate than other age groups, and connections formed between people and places are associated with quality of life and well-being in later life [1]. Women especially have been found to review their perspectives and behaviours at mid-life [4], and thus may take lifestyle-defining decisions regarding later life on how attached they feel to where they live. Attachment to place takes many forms; rural attachment may generally relate to nature bonding with the landscape, whilst physical attachment may relate to amenity-orientation such as local services. Psychological attachment relates to the meaning of place and influences well-being, whilst temporal attachment relates to an historical sense of place, perhaps induced by auto-biographical memory. Social or cultural attachment brought about by the building of local social capital [34] is perhaps the most widely recognised form due to its many manifestations such as community activities and social networks with neighbourhood, friends, family and significant others [22].

It is noteworthy that place attachment and identification are part of the same framework. Attachment is distinct from but related to the constructs of place identity and self-identity. Place attachment expresses the affective link between individuals and places, imbuing the meaning attributed to landscape and places; place identity relates to the cognitive component conceptualised in the Social Identity and Self-categorisation Theory, in which '*... the acceptance of a particular self-categorisation shifts in ways that are consistent with the protection of contextually relevant levels of identity*' [35] (p. 313). Place identity involves a psychological investment with place that appears to be time dependent, developing later than place attachment. These two concepts are co-related but are influenced by different elements. Literature argues that identification with place emerges more slowly than place attachment and may be closely related with self-identity [36].

Thus, we see that place is not an homogenised concept, but is experienced in multiple ways, and in interaction with other entities, such as people, objects, ideas, and other places [37,38]. Place is held to be space with meaning, as it incarnates the experiences and aspirations of individuals: it is people who give space meaning [16,39]. Place, as a socio-spatial phenomenon may also be perceived through the micro-system of individual; the meso-system of relationships with family and friends;

the exo-system of relations with the wider community; and the macro-system encompassing the national [40]. Thus, house/home/garden/neighbourhood as well as national elements may all play a part in shaping perceptions of place and related ageing lives. In effect, we may '*wear our environment like a glove*' as it '*literally becomes a part of our persona*' [41].

The dual concepts of place in ageing and ageing in place [3] concede that where we age affects how we age, and by inference, the quality of life and levels of well-being [42] experienced in ageing. The nature of attaching to community, and the nature of belonging highlight their multiple sources, be those attachments physical, social, psychological, or temporal [22]. Manifesting as an emotional sense of deep connection with place that fosters a sense of identity and belonging, place attachment offers a significant source of meaning throughout the lifecourse [38,43]. Furthermore, attachment may arise from an emotional affinity with locations that have socio-biographical memories for the individual, whether indigenous or in-migrant [19,33,44]. Thus, place used by non-indigenous 'outsiders' for vacationing across the lifecourse may provide just as strong an affinity as to those indigenous to the area.

As place attachment is fluid over the lifecourse, it may be experienced differently at mid-life than in older age [38,45], depending upon social context. How one ages and how one becomes attached to place appear to be inter-related but are nuanced. Do levels of attachment to place increase with 'good ageing', and if so, why? Or is the converse the case? Distinct pathways to connectivity between place and older people include: social attachment, aesthetic attachment, and amenity-environment-oriented physical attachment. Of particular importance to older women, who often find themselves living alone in later life, is amenity/environment-oriented physical attachment to place [20] in which the environment, be that positive or negative, becomes increasingly important to self-image. Will community environmental amenities available to us at mid-life, for example out-of-town supermarkets serve us in old age, and if not, how do we address this problem? Will a feeling of community belonging, strong whilst rearing children, wane in later life when family is absent? Will a tolerance of sub-standard housing or anti-social behaviour at mid-life become unbearable in older age when living alone? Understanding pathways to place attachment is crucial in addressing the social, physical, and psychological needs of older people, and can help to identify and address potential threats in the shape of migration, access to and quality of rural services, loss of social support networks, and rural development and change [20].

Place is closely linked to the concept of 'home', which is itself a matrix of social relations with wider symbolic and ideological meanings [37]. What makes place into 'home' relates to the concept of belonging [46], be that to the homestead or wider community, and strongly influences levels of place attachment across the lifecourse. One may be strongly attached to a house full of personal memories and artefacts [38,47] but unattached to a neighbourhood full of strangers that is perceived as no longer having any personal meaning. Such a paradox makes it increasingly difficult to comprehensively assess levels of well-being.

A positive feature of rural place is its generally more affordable housing in relation to urban, and this also influences levels of place attachment. Whilst Ireland, akin to many European countries has seen a rise in the number of second home ownerships in rural areas [48], in Swedish culture owning a second home is particularly prevalent. This is particularly common amongst urban dwellers, who seek a second home in the countryside, but also popular amongst the rural population itself. Indeed, a number of studies on place attachment relate to summer houses and non-permanent residences [34]. Aligned with the desire to own a second country home in Sweden, however modest and however close to the primary home, is the cultural attribute of valuing the outdoor life [49]. The Swedish housing market may be characterised by a high degree of government intervention alongside a low degree of direct government ownership [50]. Security of tenure is well protected in Sweden, making rental a popular choice at certain stages of the lifecourse [51], particularly in later life, if widowed or divorced. In addition, government emphasis in Sweden is on providing home supports that allow older people to continue living independently: only five per cent of those over 65 years live in need-based assisted living, despite an ageing population. Over the past 30 years senior housing has been built or developed

for all people over 55 years, and extra care housing for those over 70 years. Over 40% of Sweden's housing stock is owner-occupied, with the remainder attributed to public housing, co-operative housing (often partly owned), and private rental [52].

In rural Ireland owner-occupied housing is the preferred choice over rented. A recent report from the National Economic & Social Council [53] in Ireland shows around 75% outright ownership of homes in those aged over 55 years; in contrast, owner-occupied housing for younger cohorts is lower due to limited financial access. Housing may act as a defined pathway to place attachment. For example, at mid-life rural women may choose to remain in rural place even if such a decision may not be compatible with requirements for 'age-friendly housing' in old age. Such a choice is as likely to be based upon social networks as on housing quality, and may include family [54,55], friends [56,57], neighbours [58], or community [22,59,60]. Conversely, post-mid-life rural women may choose to eschew their portfolio of social relationships nurtured across the lifecourse, to enter a new form of housing, such as a co-housing community [61] that marries collective social relationships with individual freedoms: in Sweden known as the *Bund* [62]. Due to specific government housing policies in Ireland that favour market-led and property-developer led models [63] supplies of public and private rental accommodation are low, and do not go anywhere near meeting demand. If owner-occupation becomes a less common form of tenure, as is becoming the case among large numbers of younger adults—'generation rent' [64] it may leave future generations of older people in Ireland at high risk of being unable to secure sustainable and affordable housing in later life [53].

#### **4. Methodology**

Discourse around the roles that rural place plays in the lives of mid-life women in Ireland and Sweden are explored in this paper through qualitative data, but such articulation could also be approached quantitatively in literature by using for example a semantic differential scaling technique in which research participants express rural descriptors along a continuum [65] in order to help determine 'weighting' behind a descriptor, and resulting in an 'equivalence of meaning'.

Qualitative semi-structured interviewing was considered to be the most appropriate method from which to explore, through open-ended questions, the role played by rural place in influencing the lives of mid-life rural women. It was the intention to listen, observe and endeavour to get the 'story behind' [66] participant narrative on the role of rural place in their lives. Alternative methodologies considered were that of the quantitative-qualitative interview in the research of older people [67], and the biographic-narrative-interpretive method [68], but the chosen method was considered to be a 'good fit' with constructivist grounded theory methodology, and the most appropriate to explore an under-developed area of social gerontology.

Research was carried out using a lifecourse framework [69], which acknowledges 'linked lives' in which socio-historical events have lasting effects on individuals, their relationships and their well-being over the lifetime. The course of life is perceived as being influenced at individual, cultural, social, natural, economic and political levels. Analytical principles of the lifecourse perspective are based upon everyday human experiences, inter-related life patterns and social links, and the influence of external contexts [70]. It is the interdependencies between the different dimensions of the individual's life that are capable of producing cumulative advantage and disadvantage [71], which serve to influence lived experiences past and ageing experiences still to come. A lifecourse perspective is particularly useful in informing and reforming public policies to better reflect actual lifecourse patterns in society.

As a methodology, constructivist grounded theory was chosen for its qualities as an excellent research tool for exploratory research: its explanatory powers can illuminate common issues that match theory with pragmatism. Other methodologies exist that may be useful, particularly in the research of participants for whom English is a second language. The 'life-story oriented interview strategy' for example allows for the natural emergence of interviewee stories, and the 'milestone technique' aids inarticulate participants through the use of artefacts [66]. An interpretive phenomenological approach was also considered for its reflective qualities, but as its greatest strength is in describing a



complex phenomenon, this was rejected in favour of one in which multiple phenomena were likely to be aired. Grounded theory allows for an expansion of participation that other methods may lack. Constructivist grounded theory, employed in these two studies, attempts to explain social-psychological and social-structural processes within the context of social interaction [72]. Such social interaction is usually situated within one-to-one interviews, which become participant reconstructions of experiences and their meaning.

Grounded theory's systemic approach to analysis, including sampling, coding by gerunds, and memo-writing necessitate engaging in comparative, iterative analysis. Grounded theory interprets through raw data, rather than impression, and whilst it is not exclusively applied to qualitative research, as employed in these studies, it is considered a complete methodology, not just a starting point for further research [73,74]. As an analytical methodology, grounded theory seeks to construct inductive theory on issues of importance in people's lives and does so through theoretical sampling. Its inductive approach to research was initially developed by Glaser and Strauss [75], and its core dictates that the researcher begins with no preconceived ideas to prove or disprove. Grounded theory is an open, reflexive approach to research where data collection, analysis, the development of theoretical concepts, and the literature review occur in an iterative, cyclical process. While these features apply to some other qualitative research orientations, such as content or themed analysis, grounded theory has three distinguishing features. Researchers follow systematic, analytical procedures; researchers enter the research process carrying as few assumptions in advance as possible in order to discover emergent knowledge; and researchers do not just describe data, but conceptualise data in order to generate and develop theory [76–78].

In its examination of rural place, these two empirical studies adopt the social representation model of rurality [79], treating rurality as a social construct with its own subjective meanings. Whilst participants of these two studies recognised the geographical attributes of their rural place, such as hills, forests and lakes, and did not dismiss their influence, it was to the personal meaning of rural that participants turned to best explain their perspectives on place.

Participants of these two studies were at the mid-life stage of the lifecourse. Definitions of mid-life are fluid: the phrase first appeared in Funk and Wagnall's Standard Dictionary in 1895, in which the concept is defined as 'the part of life between youth and old age' [80]. Lay and scientific definitions of mid-life diverge, but mostly include the periods of mid '30s to mid '60s.

Data used in the Ireland study were taken from a doctoral thesis [5] that examined general perspectives on ageing amongst mid-life women in Connemara. Data for the Ireland study were collected between 2012 and 2013, using one-on-one interviews with a purposive, theoretically guided sample of 25 mid-life women (see Appendix A, Table A1 for details of Ireland participants cited in this paper). Data for this Sweden study were collected over ten days in 2019 using a diverse sample of ten women living in Värmland, Sweden, and employing the same interviewing technique (see Appendix A, Table A2 for details of Sweden participants cited in this paper). Recruitment of participants was achieved through stakeholders from the University of Karlstad, Sweden, and through The Swedish Rural Network [81]. Stakeholders in Sweden personally approached participants. Participants in Ireland were identified by diverse means: through personal contacts and snowballing, stakeholders and through print and broadcast media features, which raised awareness of the study. Participants of both studies were all white but were a mix of those born within their research areas, which is classified as 'indigenous' and those who migrated into the research areas, classified as 'in-migrant'. Regarding ethnicity, all participants of the Sweden study self-identified as Swedish. Participants of the Ireland study self-identified as Irish (18), French (1), German (1), English (2), Anglo-Irish (2) and American/Irish (1). Participants were not asked to state their income levels. Thus, it is not possible to identify levels of socio-economic class.

The difference between the two sample sizes is largely due to recruitment practices. Whilst the researcher controlled the selection of all participants to the Ireland study and had few time

limitations, participants of the Sweden study were largely selected by stakeholders who had to control for proficiency in spoken English and availability within the allocated research timeframe.

Ethical approval for the Ireland study was received by the Research Ethics Committee, NUI Galway in 2012 and for the Sweden study by the same Body in 2019.

## 5. Findings and Discussion

### 5.1. Defining Rural

As illustrated in the literature review no one definition of 'rural' is relevant to every culture. What is more relevant to social gerontology than debating the difficulties around defining such terms as rural and countryside, is that of being mindful that rural should not be used simply as a backdrop to research but be an implicit part of it [82]. Perceptions of rural in both the Ireland and Sweden studies draw on the social representation model of rurality [15]: rurality becomes the meaning attached to it, be that the degree of proximity to neighbours, or the social infrastructure of health and transport services. Participants in both studies defined rural through their senses, referring to a slower pace of life, a greater sense of space, an increased sense of personal recognition and intimacy, and a visually more appealing landscape. Particularly in Sweden, participants spoke of biotic (flora, fauna) and abiotic (topography, geography, geology, climate) properties [83] that bonded them to their rural place. These properties were extended by participants in both countries, but primarily in Sweden, to include animals and birds, forest and forest foods, rivers and lakes, flowers, trees and hills.

Diversity around the definition of rural is illustrated by one participant of Connemara's main town, Clifden, in terms of proximity to neighbours and levels of social amenities. Penny, an in-migrant to Connemara reflects the stereotypical image of rural of dispersed housing with few or no neighbours, served only by a few, small, localised shops, and thus questions whether her place is rural at all:

*'I don't really consider Clifden rural any more. If I was out in the middle of Carna (a small village) I wouldn't like that. I like to have neighbours. When the kids were young and I had to bring them to school in the mornings I couldn't believe there wasn't a shop open [in Clifden]. You had to go home and come back out to do your shopping, but I don't find it rural at all now, it's full of supermarkets.'*  
[Penny, Irish, 59 years, outside town]

Conversely, another participant, living outside of the same town, did consider the area to be rural, as experienced through a socio-political orientation. Petrina, native to Connemara underscored how climate and weather can become negative features of rurality, and when combined with diminished public transport, form a pathway to rural social isolation:

*'I would say we're very isolated politically. We feel it here, especially during the two bad winters, even the bus couldn't run. Then you feel isolated. If someone living in a very rural area 20 miles from Clifden or wherever cannot get to the chemist to pick up a prescription ...'* [Petrina, Irish, 48 years, outside town]

As in the Ireland study, participants in Sweden were divided on the degree of rurality of place. The town of Grums, with a population of 5000 was described by most as rural, but by some as semi-rural, although all participants agreed that the greater Värmland hinterland was rural. Only 30 km away from Värmland's largest city of Karlstad, Grums was defined largely by its biotic qualities. Olga, native to Grums defines rural in terms of biotic and abiotic features, as well as by living in a relatively small place in which she can easily access amenities:

*'We have the nature—and that is rural to me, the forest very near, the lakes, the sea of Vänern. I think all of that is rural. And here in Grums it is small, everything is very near, and in my world that is rural.'* [Olga, Swedish, 65 years, in town]

Yet another participant, described this rural place as a hybrid, but evaluated its qualities, not in terms of amenities, but as feelings generated. For Tanya, who was from the areas, but had worked abroad for many years in cities, rural was a concept through which she felt its aesthetics in a sensory fashion in which rural promoted well-being:

*'When you look at rural your eyes get rested—it is not square and hard, it is soft and moving. Grums is both. The centre is not so rural, but the surrounding area of the countryside is. [Tanya, 49 years, outside town]*

## 5.2. Place and Identity

As stated in the literature, the process of identifying place as rural and the self as rural relies on a complex set of perceptions. What is critical is to understand place and identity from an intersectional perspective. A total of 35 women were interviewed over the two studies, with each one having unique intersections of influencing factors. When participants speak of place, place identity or self-identity, they draw on lived experiences across their lifecourse as well as on the variables that shape them, including age, education, income, nature of work, marital status, location of residence, race and ethnicity, amongst other demographic factors. Each of these variables intersects to create a palette that is unique to its 'owner'. This may sometimes make it difficult or even impossible to establish theory from narrative or to shape substantive theory into policy actions; nonetheless, each participant perspective augments understanding around the heterogeneity of older rural women and their relationship with place. Place is a social construction: space with individual meaning. Thus, it may be expected that how place is perceived by participants is influenced by the intersection of the multiple variables that shape their lives. Literature informs us that place is produced through symbolic and material struggles and historical practices that weave contested meaning [84], and particular cautions us against viewing place solely as an inert physical backdrop with fully-formed constructions ready to be 'used' by us, but instead to consider place as an enabler of the relationship between locality and identity [85]. Issues around place identity and self-identity are similarly complex and do not respond directly to any particular criterion. Although residence length has been identified as a strong predictor of place attachment [34], it is not the only one. Thus, a participant may express a strong place identity despite only living in the location for a short while. Conversely, another participant may report low place identity despite spending a lifetime in the same location. In a similar vein, it is sometimes difficult to define a location as rural simply because it meets relevant statistical criteria if it is perceived by participants to be only semi-rural. The social representation approach to rurality informs us that rural is defined by its attached meaning [15]. Identifying as a rural woman is perhaps the most subjective and fluid of all forms of identity relevant to this paper. No objective criterion can be exerted to aid definition. One participant may self-identify as rural, despite living much of her life in a town, whilst another may refute a rural identity despite living in a remote location. Understanding the 'self' of self-identity is to acknowledge that a diverse range of variables, accumulated over the lifecourse comprise the human make-up that forms identity [86]. Of particular relevance to ageing, the social identity theory helps us understand the complexities older women have around identifying as older [87], which adds another dimension for rural women on the perspectives of place.

Almost all participants of the Sweden study self-identified as 'rural women', although this identification was nuanced. Some participants identified strongly as 'Grums women', whereas others felt rural in a wider way, identifying more strongly with the Värmland region. Sarah raises the issue, commonly found in rural areas, of being identified as native/indigenous or in-migrant. It is a common rural theme to never be considered 'local', irrespective of length of residence. The repercussions of this may manifest as low levels of attachment to a place that others do not consider to be your 'real' home. Length of residence has been found to be closely related to place attachment through the construction of social relationships, particularly friendships. An increased number of friends may attach us to a location for longer, and the longer we stay the more friends we are likely to form, strengthening identity to place [36]. Interestingly, Sarah, like a number of participants more readily identified as

belonging to the wider region rather than to the narrower concept of immediate place. Sarah worked in a nearby city, some 30 km away, and it may be the case that her absence for most of the week at work made her 'feel' somewhat less associated with Grums, her immediate place of residence, whereas she felt able to identify with the overall region that comprised both her home and her work locations. This underscores the complexities around the concept of place. Sarah does identify with her region and feels somewhat attached to this place, but not so much her small town:

*'I think that people from Värmland are proud to be from this area. But I do not identify as a Grums woman, I think you have to be born here or be in school here to gain an identity. But I do identify as a Värmlänning.'* [Sarah, 59 years, in town]

In contrast, whilst most participants of the Ireland study enjoyed living in Connemara and praised its scenic beauty, only one expressed strong place identity as a 'Connemara woman'. Rachael, although indigenous to Connemara, had travelled widely through work, and had lived in other European countries and other areas of Ireland. Thus, she could compare what her home place had to offer within a wider context. Rachael spoke passionately about her love of place, and of how upset she became when living elsewhere. Unable to confine the source of her attachment to a single entity, Rachael instead 'felt' that the region was her spiritual home and claimed to feel quite unwell when located elsewhere. Rachael's self-identity, as 'Connemara Irish', whilst unusual is not unique. Almost all participants of the Ireland study who were born or brought up in Connemara reported a strong affinity with the area. What singles out Rachael's self-identity may be her experiences of unhappiness when living outside of her special place. Rachael now enjoyed a happy relationship with the Connemara environment and her work, expressing high place attachment. Rachael worked in a riding stables, teaching and caring for the horses. Her love of Connemara was matched only by her adoration of animals, especially horses. Although not financially rewarding, her work with Connemara ponies underscores the interconnections of gender, environment and livelihoods in shaping identity [88]. Rachael's work, as well as her beloved rural place, synthesised to co-create her personal identity as an early mid-life feminist who acknowledged the gendered politics of ageing [89] valorised her 89 year-old 'hands-on' female employer, with whom she ran the stables and whom she considered to be a role model.

*'Every single day I get up and go "thank God" because I absolutely eat, sleep and breathe Connemara, it's just what I am. I'm obsessed with it. If I meet somebody I cannot relax until I get to say "I'm from Connemara and I work with horses". After that I don't want to say anything else, as long as they know that's all there is.'* [Rachael, Irish, 45 years, in town]

A strong self-identity within the community may be enough to forge place attachment, as illustrated by one Swedish participant. Janet was self-employed and well-known in the community through her various forms of work as a horse breeder and a local government Councillor. What she underscores is the very human desire to be recognised and to 'feel' a somebody, rather than an anonymous nobody. Such feelings would not be unique to rural place, but highlight a common perception that one is less likely to feel 'invisible' in rural place. Janet's self-identity as a successful businesswoman and public representative and place identity with Värmland are very much work-related. Janet recognised that she could carry out her horse business in a different region of Sweden, but not her government work. Furthermore, she had invested considerable time and resources into establishing her business and rearing her family in the Värmland region and was reluctant to relinquish the identity she had created for herself and her community recognition:

*'In this area I have a name and am quite famous in horse circles due to competing, and my business. Here I am somebody, somewhere else I would be nobody. Everyone knows me, so I stick around. I have an identity here.'* [Janet, 52 years, outside town]

Almost all participants of these two studies were engaged in paid employment: being at the mid-life stage of the lifecourse most had not reached retirement age. There are multiple reasons why women work, both financial and non-financial, but it should be noted that the concept of work is very much gendered across the lifecourse [90]. Divergence in employment history, career interruptions to raise children or care for dependent adults and gender pay gaps all contribute to a higher risk of poverty in older age. Global rising pension ages, low levels of private pension contributions and other forms of savings has led to the relatively new phenomenon of the extended working life. Whilst relevant to both genders, working beyond retirement years is particularly applicable to women as they attempt to build up financial resources in later life, missed out on at earlier lifecourse stages through cumulative forms of disadvantage [71]. Some women enjoy the nature of their work and welcome the prospect of continued work into later life. As a result, their well-being is likely to flourish in older age. For others, the extended working life is an unwanted necessity, particularly for those in low-paid precarious [91] forms of employment. The health and well-being for such women diminishes in later life [92]. Whether work is a pleasure or a chore, what is clear is that the concept of work is closely linked to women's self-identity [93], and in some cases to place identity. Work is considered to be central to the self-concept, and may boost self-esteem by offering women an alternative identity to that of wife or mother, as well as safeguarding health and promoting longevity [94]. Equally, work may diminish both health and longevity in others depending on context. Employment in rural areas tends to be less diverse than in urban, so women may have to take whatever work they can secure, move around on an on-going basis 'following' work opportunities, or create their own employment.

Of the two participants cited above, Janet was self-employed and Rachael in paid employment. Both loved their work with horses, which had become part of their own individual identity and also partly supported place attachment. In a similar vein, the concepts of place identity, place attachment, self-identity and precarious work come together in the narrative from a visual artist, Denise, from the Ireland study:

*'Only recently did I realise that there is a money aspect to my life, and I wouldn't have thought there was before. That's why I sometimes struggle to pay the mortgage. I have it for another 10 years and I wish I didn't, but I am managing to pay it on my own without any help. I always paid my own way. Hopefully I will get to pay my mortgage off, but I have no income really, and recently I was broke. I guess if I was completely bereft and I had paid my mortgage off I would get some kind of pension if it still exists. And maybe some kind of social security—and I had never worried about all of that before. That is a vulnerability for me.'* [Denise, 57 years, visual artist, single, dispersed area]

It is clear that this participant has chosen a path to follow at mid-life that unites her love of place and work. Whilst being cognisant of the fragile road ahead in later life as a single woman working in a precarious profession, she has still committed herself to full-time employment into old age as her work is her primary identity.

### 5.3. Place and the Natural Environment

Critical to definitions of rural and of the self are perceptions of the physical environment: literature argues that the establishment of the self is impossible without the context of place, and that landscape writing is autobiographical [32] (p. 3).

Aesthetic attachment is often linked to descriptors of the natural environment, such as scenic beauty, clean air, lakes and seas, wildlife, tranquility, and a sense of space. These rural qualities were expressed by a number of participants from both studies, although much more so by those of the Sweden study. However; one participant from the Ireland study, a visual artist, had travelled the world, but had chosen to work and live in a relatively remote part of Connemara for its aesthetic qualities:

*'Water for me is terribly important ... I treat the land like a sanctuary, it's beautiful. To look out at that mountain there—that's like a sacred mountain—the Mount Fuji of this territory. It reigns over*

*this landscape, very powerful. The vista changes the whole time . . . every morning I go down to the cliff and sit and look . . . and that is meditation for me, even if it's only for five minutes, and that is a priority that has entered into my life. Nature for me has always been a balm. Whether it's swimming in the sea or diving and meeting a Conger eel—actually that is heaven for me.' [Denise, 57 years, dispersed area]*

Place attachment to the natural environment may emanate from the stress-relief and relaxation produced [33] as well as from the tactile and visceral feelings generated within the self, such as the sounds, smells and touch of nature, as illustrated by two participants of the Sweden study. Frances, like many Swedes, had a second holiday home, which she and her husband used regularly. Frances defined rural as offering her a quality of life unavailable elsewhere, a quality shaped by the natural world of the earth and water. She particularly relished her summer house as a retreat from a busy working life, and an opportunity to spend more time with her husband who had already retired from work:

*'I am a happy person because of living here. I like my house, when I go home, I take off my shoes and step on the grass and enjoy. In both my houses (main house and holiday home). My houses matter. I swim every morning and use the boat. I have coffee in bed by my husband, and then a swim and then another coffee outside by the lake.' [Frances, 64 years, in town]*

For Sweden participant Wilma rural place enhanced her mental well-being by quieting her mind, offering seclusion [33] and providing the space unlikely to be found in an urban area. Such positive comments mirror those in the literature of blue and green space [95,96]. Like most participants of the Sweden study, Wilma used the natural food resources around her, assimilating these into her daily life. It is the activities employed by Wilma that help to imbue this place with meaning and to create a sense of belonging [84]:

*'I have the forest outside my house. I go often into the forest with my dog, picking berries and mushrooms. It is good for me—I can catch my breath, collect my thoughts. You don't have to talk to anyone, you can stay quiet. You can recharge your batteries. The forests are so vast you can get space.' [Wilma, 51 years, outside town]*

Nature featured strongly as a restorative influence on participants in both Ireland and Sweden studies, enhancing place attachment [33], well-being and quality of life, as underpinned by Kaplan's Attention Restoration Theory [97]. The positive influence of nature on bio-psycho-social outcomes—from reduced blood pressure and enhanced attention to improved social interactions is underpinned by a number of studies [26,98,99]. As a country, Sweden boasts enormous tracts of forest (almost 70% of land mass, mostly privately owned) and lakes (over 90,000); it is unsurprising then how deep is the respect for nature, and indeed direct interactions with nature have been found to positively contribute to social connectedness and providing meaning to life. Specifically, within the Sweden study, proximity to the natural environment and its high cultural values has been found to positively relate to neighbourhood satisfaction [100]. This is illustrated by Jenna, for whom nature directly influenced choice of place. In her earlier years, Jenna reported being happy to elsewhere, but as is often the case at mid-life, reviewed her future lifestyle trajectory in terms of benefits to her children and the cost of housing, and is now content living in Värmland:

*'My partner and I walk a lot, we have beautiful spots for walking in the woods, and by boat to fishing and for fun. Fresh, clean air and a good swim. The children like to swim in the lake a lot. We are close to woods and the sea, so we chose to live here.' [Jenna, 45 years, in town]*

Rural lived experiences are highly heterogeneous: one participant may perceive rural features as cultural capital to be enjoyed, whilst another perceives these as a business opportunity. Experiences may be polarised, but still enhance well-being and quality of life [26]. One participant of the Sweden

study was strongly embedded in her rural environment, respected it, but chose to engage in the hunting of animals rather than using the environment in a more passive way. Tanya set about acquiring a rural skills-set that provided for her a certain rural identity [101] that may have been frowned on by other rural dwellers. Tanya was something of a paradox in that she closely identified with traditional Swedish rural pursuits such as hunting, but was eager to introduce socio-economic change that she hoped would open up traditional society, for example through the integration of immigration:

*'I became a hunter of mainly deer. We eat the deer and use everything. When I started hunting I did not think I could do it, as I cry at everything, but it is a responsibility for me to do this. I love meat, and it is important that I understand where it comes from. I did not know if I could pull the trigger, but I read for a year and went out with my husband and his friends, and learned about respect and humility, and learned about the life cycle. Then I learned how to sew from the deer skin, small bags, some artwork. We use everything. I give some away as presents, but not for sale.'* [Tanya, 49 years, outside town]

#### 5.4. Place and Social Relationships

Social attachment to place underscores the human need for meaningful social relationships, and community intimacy proved to be an important concept within both studies. One participant of the Sweden study identified fully with her rural place and its people, considering herself highly attached and very much an 'insider'. For Olga, place identity conflated with self-identity and heightened her attachment to place:

*'As I grew older I think this place means more and more to me. I like the people living in Grums, I understand them, I know them. And that means a great deal. I feel one of them. I feel at home here with the people. They are working class people and I am a working-class person.'* [Olga, 65 years, in town]

Although social relationships enhanced Olga's attachment to place, this was not always the case. Some participants from both studies had difficulty identifying with their place, expressing either low or no levels of attachment, and felt like 'outsiders'. Their attachment, if present at all, was experienced through social relationships [33], but not necessarily those situated in their rural place, as illustrated by Mhari of the Ireland study:

*'I am absolutely not-attached to here. I'd leave for an excuse, an idea, a plane ticket. Anything. I'm more attached to people than places. Like more than 99% of my friends were not born and raised here, and we automatically seem to be on the same wavelength.'* [Mhari, 45 years, outside town]

Connections between the concepts of 'insider' and 'outsider' may be based upon a number of factors, including length of residence and native versus in-migrant. However; it is not the case in either study that participant in-migrants feel like outsiders and natives feel like insiders. How participants self-perceive and are perceived by others may diverge and may be negotiated through degrees of involvement in local people's habitus [102]. Insiders are attributed to better understanding the way things are done, and thus fit in more easily than those who prefer to introduce change. This may partly explain the perception sometimes held by those who live outside of rural areas with a high place identity, such as Connemara and Värmland of 'backwardness' or living in the past. Some participants for the Ireland study cited below, including Mhari and Síle exemplify this. Mhari feels out of step with the local culture, despite living there all her life; Síle feels the same way as an in-migrant of some 30 years. Olga from the Sweden study on the other hand expressed a strong sense of the 'insider', not only because she had lived in the Grums region all of her life, but also because of her affinity to its people: she thought the way they thought. Along this spectrum of insider/outsider lie its many nuances, as illustrated by Tanya of the Sweden study, who self-identified as something of an 'outsider', due to having spent a good deal of time outside of Sweden but felt that her local community treated

her a bit more as an 'insider' as they could identify her family history. Attachment to place by Mhari and Síle was low, and in both cases connected in part to their husbands. The relationship between husband and wife in each case had become increasingly fractured over the years as each husband had become more embedded and each wife less embedded in their rural places. For Olga place attachment was high, and for Tanya it was somewhat more nebulous. Interestingly, Tanya followed a traditional rural pursuit of hunting, which may demonstrate an 'insiderness', but rented her home, which may be perceived as being uncommitted to place. This helps to underscore the varied nuances around the meaning of and the attachment to place, and to highlight how the quality of social relationships can both enhance and destroy place attachment.

Social relationships take many forms; one may feel attachment to place through family or friends but not through community members. Thus, deeper insight is needed into the make-up of relationships and their influence on the meaning of place.

A number of participants from both studies expressed place attachment through family members, but particularly so within the Sweden study. One participant, Joanna determined to stay in her rural place due entirely to the proximity of her immediate family. Her family supersede her location in influencing her well-being:

*'I would not move too far from here, because I have my two sisters in Grums, and my daughter. That is important for me. I think Grums is good to live in. Why would I move? I know people here. Nature here I can find somewhere else, but my family, no. My grandchildren too—we can help them. If they are sick we can mind them, as their parents work.'* [Joanna, 66 years, in town]

There was a large degree of consensus amongst participants of both studies on how their partners displayed much stronger attachment to place than they themselves did. It is interesting that in both studies there was a strong tendency for women to follow their male partners in choice of location and even to relinquish their own subsequent desires on where to live. It would appear that the husbands and male partners were more embedded in location than their female partners:

*'He [husband] is even more involved in the community than I am. He is more Grums than I am. He would never consider moving from here. He knows everyone, and everyone knows him.'* [Olga, 65 years, in town]

In Connemara, a few participants, for diverse reasons strongly wanted to leave their rural place, but could not secure agreement from their partners. It was almost always the case that these participants had followed their indigenous Connemara partners at earlier lifecourse stages. In such cases social relationships had become fractured, and place attachment weakened further. Síle and her husband had moved from Dublin, the capital of Ireland, to a remote part of Connemara with their young children and ran a guest-house for anglers. Now that her children had left home, Síle felt very little attachment to place. She acknowledged its wild unspoiled seclusion, clean air and pristine environment, but now considered her home area to be devoid of social amenities. However; she was unsuccessful in persuading her husband to move away to be closer to their grand-children:

*'The stresses here are a lot less than living in an urban environment with the traffic. It's the clean air, we might have other problems, but we respect the environment. We have limited rubbish collection, so we compost, it influences how we live our lives and those of our children too—we grow our own veg. But, if my husband dies before me I would not stay here, I'd move. We have no public transport at all here and if I could no longer drive, I'd be trapped.'* [Síle, 61 years, dispersed area]

Populations are becoming more geographically transient for a number of reasons including that of precarious work in which people are expected to move at short notice to new locations. In Ireland this has been met by an increase in renting over owning accommodation. In addition to short-term job contracts that require mobility of movement, escalating property prices, reduced access to credit, and household formation changes [53,103], including increased divorce-separation rates have all added



to an increased demand for rental properties. Demand for rental properties is highest in urban areas where employment is largely located, but rural rentals have also increased in demand with some people living on the rural fringe [45] and commuting to 'work urban but live rural'. All these factors contribute to an increase in people 'on the move'. It is possible that neighbours, in the absence of immediate family or friends, could play a more central role in lives [104], and that we may increasingly rely upon them to perform tasks that otherwise might have been undertaken by significant others. If so, we may witness new pathways to place attachment forming. Of course, the converse is also true in that people may increasingly ignore their neighbours, seeing no point in nurturing what may be a short-term relationship. Some participants within the Sweden study referred to neighbours as a positive influence on well-being, and in some instances, an extension of family. Whilst participants in both studies paid attention to who their neighbours were, most in the Ireland study did not welcome any degree of intimacy. This was in contrast to participants in the Sweden study, who appeared to see a positive role for neighbours in enhancing well-being, and proved to be a strong influencer of place attachment:

*'I have good neighbours, we go into one another's houses for coffee, and become like friends, and we look after one another's houses when we are travelling.'* [Olga, 65 years, in town]

Whilst it is inaccurate to state that rural place produces higher degrees of community intimacy than urban place, anecdotally it often appears to be a 'given'. Participants in both studies spoke of the positive feelings of well-being associated with community recognition, and of how this increased their attachment to place.

*'In small societies like this [Grums] we become closer to one another. We need to do things together and take care of one another. Like, we see if someone is away or sick or missing. You have the contact and you know about people. It's not the same in the city. Everyone where I live has been to the same school, and we know one another's children and their friends.'* [Wilma, 51 years, outside town]

### 5.5. Place and Immigration

Early literature on rurality often concurred with the bucolic stereotype of community intimacy, traditionally associated with country living [105]. This social construction tended to embrace a nostalgic ideology of close-knit, caring communities in which neighbours co-existed in a spirit of 'meitheal' or collective help (see <http://www.maryrobinsoncentre.ie>). Such communities were perceived as safe but stationary, in contrast to those of the dangerous but dynamic urban. Such a perspective is now tempered with those arising from contemporary empirical research that demonstrates a more heterogenous approach to rurality [18], one in which the fear of the outside and outsider may still exist, but may have evolved in form from the simple fear of 'townies' to those from more 'alien' cultures. Both Ireland and Sweden have become more multi-cultural over the past 50 years, but Sweden in particular has attracted a large number of immigrant asylum seekers from outside of Europe, in contrast to mostly Eastern European migrants in Ireland [9]. Currently, around 20 per cent of Sweden's population was foreign-born [52] in comparison to under 12 per cent in Ireland.

Sweden's relatively large-scale immigration has led to some societal division, as highlighted by two opposing perspectives on rural well-being in the Grums region of Sweden. Whilst both acknowledge current socio-economic ills as being relatively new to this rural region, the first participant, Janet conflates these with increased immigration, whilst the second participant, Tanya adopts a wider perspective. Both perspectives influence the revised meaning they attribute to place. Indeed, it has been argued that the everyday and institutional struggles over meanings may be viewed as a political action between state and citizens [106]. If citizens continually reshape themselves and their locations through relationships with state authorities [84], we may interpret in Janet's case a direct link between her struggle to make meaning of what she sees as a new socio-political landscape and her work as a local government Councillor in which she attempts to influence political thought and action on immigration:

*'There is a lower social class in the community now. Most people, like those who had an education, moved out of this area and left behind the less educated. The people left behind—there are more of them. They do not get through school and get a job. Everyone could have a job if they had the right mindset, but we have high unemployment with young people, which tells me that they do not want to work or are not capable of work. And it is inherited from generations. I hope that my children do move to Karlstad city or elsewhere.'* [Janet, 52 years, outside town]

One may ask of course why mid-life women, like Janet do not move place if they feel so threatened by it, but humans are complex beings, and other factors had a role to play in her attachment to place, namely being widely recognised within the community for her various types of State and business work, and these took precedence.

Tanya on the other hand perceived the rural region's increased immigration as an asset, adding to cultural diversity, and thus enhanced her connection to place. Tanya constructed her meaning of a revised socio-political landscape from a different perspective to that of Janet, but in a similar fashion she used her employment as a facilitator in sharing community resources to influence outcomes. This underscores the literature that speaks to the diversity of meaning attributed to the same environment by different perceivers [36]:

*'I think folk feel more threatened in rural areas. Immigrants may not want to come here, but are placed here in different municipalities, who are obligated to take a certain amount. There is a lot of racism here too, which I find really painful, as I have been given so much kindness around the world by people who did not know me and had no reason to be kind to me and they were. And then I come here to Sweden, one of the richest and best countries in the world, and people sneer about those with the darker skin. And it's more salient in small areas like Grums as they stand out. It's the fear of 'the other'—humans are programmed for that.'* [Tanya, 49 years, outside town]

Neither Janet nor Tanya reported having any personal social relationships with immigrants, yet each had distinct standpoints based on what they observed; Janet's based on what she perceived as a threat to the traditional Swedish way of rural life and Tanya's as a possible enhancement that may help to open up rural culture.

### 5.6. Place and Housing

Housing plays an integral part in rural place attachment within the studies of Ireland and Sweden. Within the Ireland study in particular, there was a clear sense of the importance in later life of autonomy around housing and place should one's health diminish, and one becomes increasingly reliant upon others for care. In an ageing world, we may expect the concepts of the home and housing to become increasingly critical factors in the ageing process.

Attachment to place through the family house was common amongst participants of both studies. Some participants in Ireland had considered moving house at critical points over their lifecourse, for example to be closer to medical facilities for themselves or their partners, but had decided against doing so for reasons of high attachment to rural place. This is illustrated by one Ireland participant, Maebh who acted as an informal carer to her husband. Maebh's husband was becoming increasingly dependent upon her, and with no family in their rural area to turn to, she was tempted to move into the nearest city, Galway to avail of its hospitals and support systems and to be closer to her husband's family. As a symbol of continuity and order, security and refuge, attachment to home and place [34] directly influenced Maebh's decision on where to live, not just at mid-life, but also in older age:

*'We have an ordinary bungalow, but on a beautiful site . . . the whole place has such a vista. What would we be exchanging our home for? A beautiful place where's there's peace and calm to get a house on an estate, attached to someone else, or barely detached.'* [Maebh, 53 years, dispersed]

In contrast to Maebh, one participant of the Sweden study, Rebecca felt attached to her house only, but not rural place. This is not so uncommon. Place has been defined as 'space with meaning' [39],

and can there be a repository of meaning and memory greater than one's house, one's home? Rebecca expressed an attachment to her house more than to her place of residence, and in fact did much of her socialising in the nearest city, some 30 km away. Her 'settlement identity' as a rural woman may have been brought about by her high level of mobility [34].

*'I am very fond of my house, it is home for me. We have a nice area at the back of the house with a pool. We use that a lot, but the children are getting bigger now. It would be difficult for me to sell the house, as I love it, but later, if the children move out, it would be difficult to be here without them. There are more restaurants and movies in Karlstad, so when the children have moved out we can maybe move there and we can walk, cycle everywhere and dine out and have a glass of wine.'* [Rebecca, 46 years, in town]

One very strong influencing factor contributing to place attachment in the Sweden study was the affordability of rural housing and the ability to own rather than rent one's home [34]. All participants highlighted the low cost to buy or rent in comparison with urban areas; consequently, two rented and eight were owner-occupiers. A number of studies make clear the need for affordable, age-appropriate housing in rural areas to enable people to age in place [107]. Housing proved to be an area in which participants of the Sweden study anticipated government support. Sustainable, affordable housing [83] in older age was anticipated, supporting ageing in place. Great emphasis is attributed to ageing in place within social gerontology, although the literature does vary on this concept's degree of efficacy. The case may be made for example of the connection between ageing in place and well-being, as this may on occasion be better achieved by not ageing in place, but by re-location to accommodation that meets the desired outcome of enhanced well-being [108,109]. Within the Sweden study, most participants were optimistic about being supported by excellent social services that would allow them to age in their adapted homes. This was in contrast to participants in the Ireland study, who anticipated either no or low governmental help that would allow them to age well in their rural place, leaving them perhaps to seek support elsewhere from friends and family, or from non-governmental organisations [110].

## 6. Conclusions

The influence of rural place on the lived experience of older rural women highlights both similarities and differences across the two research studies. Nuances around a broader range of meanings and dimensions of rural and place are described rather than defined through the medium of participant discourses [111].

Some participants of both studies expressed concern over what they saw as the changing face of traditional rurality, largely in relation to a rise in increased ethnicities. In Sweden, new ethnicities display higher unemployment rates (<https://sweden.se>), a possible source of tension. Whilst some in the Ireland study only alluded to immigration in a general way, those in the Sweden study expressed more pointed views on what they perceived as its unacceptable consequences of deterioration in rural place. Whilst such participant concerns are real, and are supported anecdotally, empirical studies bearing out such negativities around immigration are more difficult to source [112]. Such concerns also underscore the critical acknowledgement of the rural countryside as a dynamic, not static force: rural women change with age, but so too does rural place.

Participants in each study expressed diverse degrees of place attachment. There are multiple pathways to rural place attachment, including those of place identity and self-identity. Whilst participants of both studies acknowledged lower population numbers and densities as indicators of rurality, it was the social representation model of rurality as a way of life that offered most meaning to them [79]. Thus, irrespective of size of village or town, or proximity to urban city, participants either 'felt' rural or did not, based on whether their perceptions of self and place met with their expectations to form a 'symmetry'. This underpins the subjectivity involved in defining rural: one woman's rural may be another's semi-urban, and such perceptions have implications across the lifecourse in terms of the role of place and well-being.

Participants of both studies endorsed the importance of social relationships within rural community [60] in forming attachment or non-attachment to place, but nuances appeared to show a wider appreciation of community relationships amongst those of the Sweden study. Study participants in Ireland commended the role of community and neighbours in times of great need, such as funerals, but in times of normality, most participants preferred personal privacy and some degree of distance. Sweden's study participants on the other hand expressed the importance of identity and a sense of belonging, and many were socially involved with their neighbours. This may suggest no more than a cultural difference between a society leaning towards collectivist attitudes that incorporate 'lagom' or community consciousness such as Sweden [7] (p. 60) or an individualistic one such as Ireland [25], but perhaps also a deeper divide, as exemplified by the dichotomy of *gemeinschaft* and *gesellschaft* [113], which explores the nuances around communities and societies. Further research in this area may elucidate.

Some divergence between the two studies was found in the types of social relationship that influenced place attachment. Whilst participants in the Ireland study mostly cited female friends [57] as providing high levels of influence and identity, those in the Sweden study predominately cited family members [55] as being of critical influence in choice of place. Such a finding may be peculiar to this study, or perhaps again, a cultural difference. Further research may throw light on this area.

Partners played an important role in location and re-location of place, with consequences for place identity and attachment. A number of participants in both research studies had followed their partners to their rural place, usually through historical and family connections, which sometimes resulted in a stronger sense of place attachment by partners than participants. This is not problematic unless divergence arises in later life as to where constitutes 'home'. When a division exists between partners on attachment to place, the resulting consequences may be far-reaching when power disputes may arise [114].

The concepts of house and home in describing the importance of place and place attachment were cited by a number of participants of both studies, most of whom considered their house as integral to their ageing well-being [42]. What differentiated the findings was the level of confidence held by participants of the Sweden study regarding the availability of age-appropriate housing in later life. One striking difference in attitude between the two research studies was that the Sweden participants expected to receive high levels of housing support in older age to enable 'ageing in place' [115]. Houses and apartments are generally retro-fitted by government agencies and supported by social services to allow residents to live independently within their own homes; largely speaking, only those with an intellectual disability are admitted to residential care. Thus, participants of the Sweden study were assured of being cared for in their own homes in later life, which may lead to more sustained levels of place attachment across the lifecourse. In contrast to this, almost all participants of the Ireland study expressed anxiety over their future ability to live alone at home, anticipated little or no governmental help, and feared feeling compelled to enter residential care as a last resort.

Divergence between the two research studies around rural concepts was sometimes subtle but could also be stark. An outstanding difference in perception appeared around the degree of passion aroused by the natural environment comprising green [116] and blue [31] space. Whilst participants of the Ireland study, all living in a world-renowned beauty spot, Connemara, appreciated, but tended to understate its characteristics; participants of the Sweden study enthused wholeheartedly on the aesthetics of landscape, space and wildlife [33]. Attempting to compare two geographical locations is neither advisable nor useful: as we know, the devil is in the detail. Connemara's hills, beaches, loughs, and islands, not to mention its many social attractions are legendary. Whilst this was certainly cited by some participants of the Ireland study, both native and in-migrant, all participants of the Sweden study actively used their rural environment to enhance their well-being through daily forest walks, foraging, berry picking, boating, fishing, and in one case, hunting deer. In contrast, participants from the Ireland study appeared to experience their rural environment in a more passive manner, alluding to its fine qualities of fresh air and clean waters, but choosing to engage with nature in a more

casual fashion—perhaps a daily stroll. There are any number of explanations that may account for such a divergence, but findings from this research suggest a much greater appreciation by Swedish participants of the role that nature can play in augmenting well-being and quality of life.

Having a clear understanding of the value placed on the natural environment and on other influencers of place can and should help to inform policy decisions [83] that support the well-being of older women in all environments, including rural. By appreciating the connections between rural place and attachment, we are better informed on how to plan and manifest environments that complement ageing. How rural women engage with nature, what they think of living in a rural environment, and how they feel rurality impacts upon their ageing and well-being can inform the discourse around therapeutic landscapes [29] in both rural and urban areas. If landscape and nature matter to the well-being of older rural women, it may be assumed that the natural environment also matters to those living and working in non-rural areas. What is good for rural ageing and well-being is likely to be good for all ageing [1] for example in the planning and restoration of natural environments near residential areas [96]. This may act as a strong supportive tool in achieving health and well-being [100].

In addition to the natural environment, understanding what rural actually means to older women, and the multiple pathways to place identity and attachment enables policy-makers and related interest groups to enact measures that can positively augment ageing at both mid-life and older age.

## 7. Limitations

These studies of mid-life women and rural place in Ireland and Sweden may have some limitations in terms of numbers of participants employed (25 in Ireland; 10 in Sweden), and in the comparison between two distinct, western European societies. Clearly, each country has its own cultural values, reflected in different socio-economic-political systems. Social norms in collectivist cultures, perhaps such as Sweden may produce different definitions and understandings of what rural place means in comparison to more ‘laissez-faire’ cultures, perhaps such as Ireland. In turn, reflections on the role of rural place in underpinning place attachment and well-being are likely to be viewed through different lenses. Some research shows differentials in political systems as influential in attitude formation [25]; other research demonstrates individual diversity within political systems that negates any generalisation of certain countries as either collectivist or individualist in nature [24,117].

All participants of these two studies are white; participants of the Sweden study all identified as Swedish. Participants of the Ireland study identified as either Irish, English, French, German, Anglo-Irish, and American-Irish. Each of these ethnic and race identities undoubtedly influences perspectives on rural place identity and rural self-identity. Whilst all participants in both studies identified as female gender, age identity was mixed, reflecting the nuances around social identity theory [87]. All participants were at the mid-life stage, identified by the researcher as 45–65 years of age. Most identified as ‘middle-aged’, some did not consider themselves to be at the ‘middle aged’ yet, and only a few identified as ‘old-aged’. However; the focus of this article is on the relationship between rural place and mid-life women. Thus, influencing factors such as race and ethnicity are acknowledged but not fully explored. This subject matter might be best dealt with through future research.

The aim of qualitative research is not to generalise, nor to necessarily identify patterns, but instead to simply understand the cross-cultural, intersectional lived experiences of participants. Thick, rich insights from these two studies offer data that may be examined alongside that of other European cultures and may prove of value to social gerontological literature and policy.

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## Appendix A

Table A1. Demographic table Ireland study.

Name	Age	Location of Residence	Employment	Marital Status	No. Children	Born in Connemara (I)/In-Migrant to Connemara (IM)	Race/Ethnicity
Denise	57	Dispersed	Self-employed artist	Single	0	IM	White/Irish
Mhari	46	Outside Town	Part-time administration	Married	2	I	White/American Irish
Maebh	53	Dispersed	Full-time teacher	Married	0	IM	White/Irish
Penny	53	Outside Town	Part-time administration	Married	3	IM	White/Irish
Sile	61	Dispersed	Self-employed hospitality	Married	3	IM	White/Irish
Rachael	45	Small Town	Full-time riding instructor	Partnered	2	I	White/Irish
Petrina	48	Dispersed	Part-time care home assistant	Married	2	I	White/Irish

Note: Small town: fewer than 1500 persons, but larger than village; Dispersed: 'one-off' housing; Remote: no neighbours.

Table A2. Demographic table Sweden study.

Name	Age	Location of Residence	Employment	Marital Status	No. Children	Born in Värmland (I)/In-Migrant to Värmland (IM)	Race/Ethnicity
Tanya	49	Outside Small Town	Full-time administration	Married	2	I	White/Swedish
Jenna	44	Small Town	Full-time administration	Partnered	2	I	White/Swedish
Wilma	51	Outside Small Town	Full-time administration	Partnered	3	IM	White/Swedish
Rebecca	46	Small Town	Full-time administration	Married	2	I	White/Swedish
Joanna	66	Small Town	Retired	Married	2	IM	White/Swedish
Olga	65	Small Town	Retired	Married	3	I	White/Swedish
Sarah	59	Small Town	Full-time lecturer	Married	2	IM	White/Swedish
Janet	52	Outside Small Town	Self-employed horse-breeder	Married	7	IM	White/Swedish
Frances	64	Small Town	Full-time social worker	Married	0	I	White/Swedish

Note: Small town denotes those living both within the town of Grums (5000 persons) and those living on its edge. Outside small town denotes those living more than 20 km from small town, but within the municipality of Värmland (281,000 persons).

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Article

# Retirement Rhythms: Retirees' Management of Time and Activities in Denmark

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**Abstract:** We scrutinize how the everyday lives of well-educated and healthy Danish retirees are structured and experienced and study how they organise their days and weeks. Our aim is to investigate how retirees manage and organise time and the ways these relate to societal rhythms in order to contribute to theories of retirement and social gerontology. We have combined qualitative (individual interviews, focus group interviews, design games, and drawings) and quantitative (activity monitoring, sleep quality, and health markers) data from 13 participants over the age of 65 years, who are research participants in a randomised controlled trial (RCT). Our interdisciplinary dataset allows us to analyse and compare subjective experiences of everyday activities with objective measures of daily activities. The older adults lead busy lives with many diverse activities and use these to structure their everyday lives in ways resembling the rhythms of the labour market with organised and busy mornings and loose afternoons and evenings. We discuss how our findings relate to continuity theory and suggest that Lefebvre's rhythmanalysis allows us to study the retirement rhythms of older adults as part of both biological, social, and societal rhythms. This has practical as well as conceptual implications.

**Keywords:** theories of retirement; rhythmanalysis; management of time; interdisciplinary gerontology; busy ethic; societal rhythms

## 1. Introduction

Since the proliferation of retirement in the mid 20th century, social gerontology has shared an interest in the role of time in the everyday life of older people, e.g., [1,2]. This led to an interest in the proper leisure activities older people should pursue in order to achieve a good old age, e.g., [3,4], and not become idle due to so-called 'time in abundance' [5] (p. 20). In recent decades, this rather pessimistic view on the 'time in abundance' has been reversed to an overall discourse formulating freedom in old age, i.e., the freedom to engage in the leisure activities that one wants [6]. However, as Ekerdt and Koss have described, retirees do not just approach time as 'free' but tend to 'organise activities into recurring sequences, into routines' [7] (p. 1297). This routinization of activities is a structuring strategy in retirement enabling retirees to stick to their exercise patterns, social engagements, medical regimens, and other frequent habits of daily living. Routinization of activities is a way to handle the open-endedness—both embedded in-time in abundance' and in 'freedom'—of retirement and to establish continuity from work-life.

In this paper, we elaborate on Ekerdt and Koss' argument by adding that the routinization of activities and time management is not only an individual pursuit and identity-making. It is

also embedded in collective and societal expectations and practices, and as such part and parcel of contemporary society. We scrutinize how the everyday lives of a group of Danish retirees are structured and experienced and pose the research question: how do the new generation of active, healthy, and well-educated Danish older people manage time and organise their days and weeks? Our hypothesis is, that while retirement may lead to changes in the management of time, we will also find a continuity of rhythms in everyday life post-retirement.

We suggest that this study of retirees' everyday lives is timely. Retirement is changing in Denmark, as well as in the Western world in general. In 1892, when Denmark saw its first state-sponsored old age benefits, few people would reach retirement age and meet the criteria for obtaining pensions [8]. In 1956, universal state pension became a right in Denmark from the age of 67, and through the latter half of the 20th century, retirement age was decreasing, and early retirement proliferated. In recent years, retirement age has increased again [9], and important transformations of the management and organisation of retirement are taking place in the Western world [10]. In Denmark, the age at which citizens can obtain pensions is rising continuously in the coming decades (in 2020 it is 66 years of age), but at the same time an increasing percentage of workers work beyond retirement age. In 2017, 18 per cent of the 67-year olds were employed [11]. Many engage in gradual retirement, and entrepreneurship around retirement age is widespread [12]. Moreover, the citizens that do retire engage in volunteer work, exercise, as well as cultural and political activities [13–15]. As such, our study is both culturally rooted in Denmark, as well as pointing to some overall tendencies regarding retirement in the Western world.

Furthermore, we suggest that in order to portray retirement elaborately, we need an interdisciplinary approach with a range of different ways of measuring and probing. We know from a range of social science studies that retirees portray themselves as active (e.g., [13–16]). While we do not find any reason to doubt that this is so, we need to examine what they mean with being active—what is it they do, and how often? When they say they are more active during the week than in the weekend, is this visible when measuring step counts, or is the increased activity level different than what can be measured? As such, our combination of methods enables us to dissect that a step is not just a step. There are qualitative differences between steps at different times and during different kinds of activities.

By combining qualitative and quantitative data from thirteen men and women over the age of 65 years, we probe into the routinized everyday lives of retirees, their activities, and their daily and weekly rhythms. Our aim is to investigate how people manage time, routines, and continuity when retired. Our diverse and rare dataset allows us to analyse and compare subjective experiences of everyday activities with objective measures of daily activities. Following the call from Henkens and colleagues [17], we probe into the nature of contemporary retirement and contribute to social theories of retirement. Many studies describe contemporary retirement through discourses of active and healthy ageing [18–21], but hitherto such studies have remained largely conceptual, while empirical studies of active ageing tend to critique the active or successful ageing agenda [22,23]. We propose that our close-up description and analysis of everyday life in contemporary retirement is much-needed, as we scrutinise the routinised retirement rhythms of active and healthy retirees.

As historian Thomas Cole shows, in the latter half of the 19th century, old age fell victim to an increasing focus on production [24] (pp. 161–190). When the human being was reduced to its productive capacities, old people became obstacles to industrial progress. This in part has led to a 'busy ethic', which extends the busy life into old age by endorsing an active life [25]. Through such a moral continuity from work-life, the 'good old age' has become synonymous to the 'busy old age' [26], forming a 'new gerontology' aspiring to form successful aging as an individual endeavour [27], with resigning 'villains of old age' [28] or on the contrary 'exemplars of retirement' [29] working after retirement age. Moreover, through a variety of scientific discoveries stressing the benefits of an active lifestyle in old age, policy programs of active ageing have become scientifically legitimised [30]. When the good old age is the active and busy old age, time is no longer in abundance, but a valuable resource.

This resource can be analytically explored in multiple ways. Although Birren stated that (chronological) time is a hollow independent variable [31], the main body of literature in gerontology

dedicated to time focuses on time as linear, by focusing on age as chronological, or as one of the many alternative age-qualifications such as biological, functional, or mental age. Ideas of generations [32], age norms [33], or age stratification [34] all pose linear time and the way it is woven into our social lives [35] as their premises. As Baars and colleagues have put it, chronological time is a ‘problematic foundation’ for gerontology [36] that creates chronological regimes [37] decisive for participation in the labour market or the access to social services. Others suggest that time is something people actively engage with and appropriate in their everyday lives, in a kind of ‘time work’ [38].

Based on our data, we suggest a rhythmic approach to time inspired by the French tradition of rhythmanalysis proposed by Henri Lefebvre [39], which centres on the ways different rhythms (biological, social, individual, societal) relate to one another, impose on one another, and become partly fused. From this perspective, retirement suggests both a different rhythm in the everyday life of people, but also continuity of rhythms from work-life. In one of their essays on rhythmanalysis, Lefebvre and Catherine Regulier show how the way we measure time, indeed the notion of everyday life, is modelled over an abstract, quantitative work-time that stems back to the introduction of the industrial labour force. Since the industrial revolution, the clock has formed everyday life, sleeping, meals, relations, and families [40]. But this clock-rhythm is at the same time traversed by biological rhythms (diurnal clock, heart, nerves, gut, etc.) and cosmic rhythms (day, night, seasons). The rhythms interact and interlock in such a way that we become hungry when the clock says it is mealtime. Such deep integration between different time measures and biological and social rhythms is not likely to suddenly cease due to retirement. The retirement rhythms may be so deeply affected by general societal rhythms (often centred on work and consumption) that changing them is slow and tedious.

With this rhythm-analytical approach, we are able to show how contemporary retirement is intrinsically part of the rhythms of society. Retirement is not solely an individualised life phase, but also part of contemporary society with rhythms grounded in the labour market and its busy ethics.

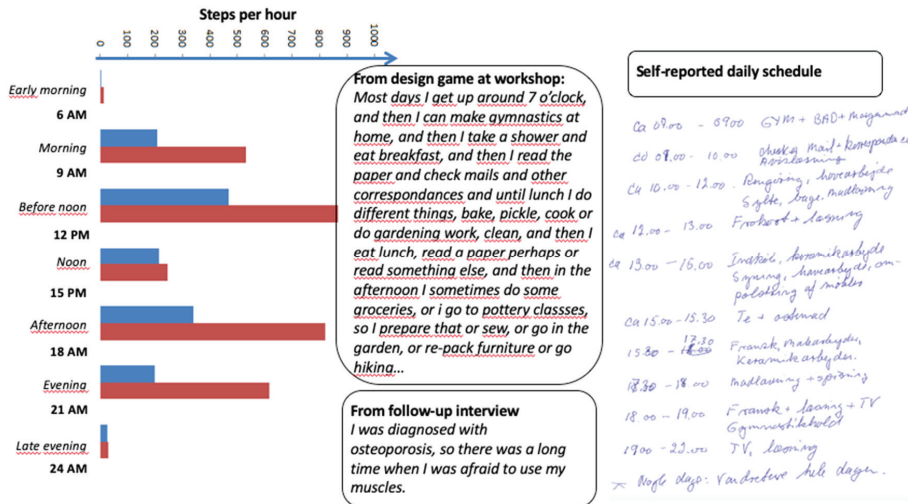
## **2. Materials and Methods**

The paper is based on data from the Danish research project Counteracting Age-Related Loss of Skeletal Muscle Mass (CALM), which investigates how to counteract age-related loss of skeletal muscle mass before the onset of age-related diseases. The first part of CALM was organised around a randomised controlled trial (RCT) wherein 208 research participants over the age of 65 years were randomised into 5 groups and were enrolled through a 12-month trial, where they were subjects to physiological and microbiological tests, as well as ethnological analyses [41]. Each group differed in terms of training regimen and protein supply in order to study the effects of these factors on their muscle mass. Participants were recruited through newspapers, social media, and networking at senior centres. There were 18 exclusion criteria, which ensured that we only included relatively healthy participants, who at the same time did not exercise vigorously (see [41] for a detailed description). As we show below, it is solely parts of the physiological (quantitative) and ethnological (qualitative) material we have used for this paper.

The second part of CALM was organised around an innovation project. At this point, the knowledge gained from the trial about muscle mass, eating, and exercise habits was challenged and tested in a range of experimental workshops with retirees, ethnological and historical analyses of physical activity, daily routines and habits as well as food protein and sensory tests of a range of protein-rich food products. As such, we tested the data in order to see whether, for example, the best options of counteracting muscle mass (i.e., specific eating or exercise regimens) also would be translatable to the everyday practices of the target groups (people 65+). Thus, the innovative aspect of the trial was to see if the ideal solution in the lab would also function in the everyday practices of the target group.

These many types of data provide new insights and different stories of contemporary retirement. As such, we use these data to explore how the target population manage time in their day-to-day life. In this paper, we analyse 13 of the participants who volunteered for both the RCT as well as the

experimental workshops. All participant names have been changed in order to ensure anonymity. However, we have obtained informed consent to use pictures and drawings from the participants, and, hence, have chosen to use participant #1's drawing of her daily schedule (see Figure 1).



**Figure 1.** Participant #1: Woman, 68 years of age. A retired teacher (among many other things), who retired just before entering the project. To keep active, she had 3 cleaning jobs, but during the trial she was diagnosed with osteoporosis and quit her jobs. She gets up early and does gymnastics to the radio in her home 3 times weekly. She has a very busy schedule throughout the day.

The data for this paper consists of:

**Qualitative data:**

Screening and follow-up interviews: The 208 participants in the RCT were interviewed at baseline and at follow-up 18 months later. The interviews lasted between 5–15 min, followed standardized interview guides—one for the baseline and one for the follow-up—and were conducted by the trial staff as part of the test days. In the screening interviews, participants were asked about exercise and eating habits, living arrangements, reasons for participating in the trial, etc. In the follow-up interviews, participants were asked whether they had changed habits during the trial, and how they had experienced their participation in the trial. We followed this procedure to get some qualitative data, since it was not possible to conduct in-depth interviews with all participants in a sample of this size.

Focus group interviews, design games, and drawing of daily schedules:

Six experimental workshops were conducted with 84 participants in total. Three focused on eating practices and three focused on physical activity practices. One workshop from each theme had participants from the RCT. We chose this setup, as most of the trial participants ( $n = 208$ ) were from the Greater Copenhagen area, and we wanted a broader sample for the experimental workshops. As such, it was only the two workshops conducted in Copenhagen that included trial participants. For this paper, we are using data from the workshop about physical activity with CALM participants conducted in November 2016 ( $n = 13$ ). At the workshop, we conducted a focus group in which we divided the participants in three groups and discussed everyday routines and the ways physical activity was part of their everyday lives. As the workshop on physical activity included most details on everyday life rhythms, we have chosen to only include data from this workshop in this article.

We also played a design game made by the researchers conducting the workshop. The participants were divided into three different groups, and they played out different physical activity situations.

At the same workshop, we asked participants to draw a timeline of a typical day in their lives. Most responded that each day was different from the next, and hence, that they would not be able to draw only one timeline. However, when drawing, they all had some daily routines they drew and/or wrote (see Figure 1). Thus, while the drawn timelines do not encompass all their activities, they show daily patterns and habits.

All qualitative data have been transcribed verbatim and coded and thematized using an inductive approach [42] in which major underlying patterns and themes have been identified. The initial coding sessions involved eight persons (authors, student assistants, interns, and colleagues). Later in the process, the coding was conducted and discussed by authors A.J.L. and A.P.J.

Quantitative data:

Activity monitoring: Daily activity levels were measured by mounting an accelerometer-based activity monitor (activPal 3™, activPal 3c™, or activPal micro; PAL technologies, Glasgow, UK) on the anterior surface of the thigh [43]. The monitor was worn for 96 continuous hours covering a full weekend. Data are represented as average steps per hour during 3 h intervals as well as total steps per day.

Sleep quality:

Sleep quality was assessed using the Pittsburgh Sleep Quality Index (PSQI) [44]. The sum of seven component scores provides a global score, with a higher score being reflective of poorer sleep quality. A global score greater than 5 is indicative of poor sleep quality [44]. As a part of the questionnaire, participants noted the time of day they went to bed, and time of day they got up in the morning. Besides bedtimes highlighting the daily rhythm of participants, the sleep quality assessment was mainly used to characterize the sample.

Health markers:

As a part of the clinical trial, the height and weight of the participants were measured and reported as body mass index (body weight [kg]  $\times$  height<sup>-2</sup> [m], BMI. Blood pressure was measured in the resting condition. Handgrip strength of the dominant hand was assessed using a grip dynamometer (DHD-1 [SH1001]; SAEHAN Corporation, Changwon City, South Korea). These markers were mainly used to characterise the sample.

With this combination of qualitative and quantitative data, we are able to provide a detailed and nuanced picture of the everyday lives of Danish retirees and to show how the biological, the physiological, and the social are entangled in everyday life. We collected 1000+ measures from 50+ measurement techniques on each participant ranging from gender, education, employment, and civil status to food registration, Short-Form 36, muscle biopsies, and gut microbiomes (for a more detailed description, see [41]). However, as we only focus on 13 participants, the results in this article is of a qualitative nature, and the quantitative data are mainly used to discuss the qualitative findings and characterise the sample.

### 3. Results and Analysis

In Table 1, we have gathered a range of data from the participants, in order to provide some context on the kind of subjects from whom we developed our results and analysis. As Table 1 indicates, the participants were well-functioning and healthy (based on the parameters measured here). For the women, BMI was between 20 and 25 kg/m<sup>2</sup> and for the men, BMI was slightly higher but below 28 kg/m<sup>2</sup>. Blood pressure was on average within recommended range with one woman above in systolic pressure and a few men slightly higher. According to the measured steps per day, most participants could be categorized as active or highly active (<10,000 steps per day), although two



women could be categorized as low active (<7500 steps per day) or sedentary (<5000 steps per day). For both women and men, grip strength was higher than cut points for sarcopenia, and sleep quality was good for all but one of each sex. Moreover, eight of the 13 participants engaged in either paid or voluntary work. All but one had at least three years of higher education (one did not respond). All participants lived within commuting distance of Copenhagen, with three participants living in the city, eight in the suburbs, and two in the countryside.

Our data portray the everyday life of a sub-group of the older population with a high level of education, income, and health. While this group is characteristic of a new generation of retirees in Westernized cultures, they are not representative of the retired Danish population. In Denmark, roughly one quarter of the 65+ group have three or more years of education after high school [45], while all participants in our study have at least three years. Roughly 17 percent of retirees in Denmark only have state pension and are relatively poor [46], while all participants in the study have stable economies. In addition, especially the female participants have lower BMIs than average for their age group, as 78 per cent of Danish women 65–74 y/o have BMI of 25 or more [45]. Six participants (46 per cent) engage in volunteer work, which is representative for the Danish population aged 65–69 of which 40 per cent engage in volunteer work [47].

While they form part of a privileged group—also in a Danish context of the welfare state—they also carry many traits typical for their generation embodying the message of active and healthy ageing (as well as containing a 46 per cent ( $n = 6$ ) degree of divorcees). A close-up and nuanced description of this group's everyday lives and their management of time has been rarely investigated in the current literature.

### *3.1. Participant #1*

In the following, we will use research participant #1 to exemplify the everyday lives we have seen portrayed and lived among participants (see Figure 1). #1 described her life as busy and had many activities. While #1 engaged in more activities than other participants, her way of describing her day resembled the other participants. While #1 stayed more in her house than average among participants, which she explained is due to her osteoporosis, she and the others used activities to structure their everyday lives in the absence of an institutionalised work-schedule. When asked about their everyday life, they responded with listing the activities (exercise, volunteering, classes, hobbies, grandchildren) that they engaged in and how other activities (meals, daily chores, mails, etc.) fit into these activities. All participants described a kind of physical activity (walking, biking, strength training, running, swimming, etc.), which usually took place between breakfast and lunch, but those that attended classes (yoga, gymnastics, etc.) often did so in the afternoon or at night.

#1 slept 7 h per night, got up between 6 and 7 AM, and scores 2 on the Pittsburgh sleep quality index, and all participants except two reported very high sleep quality. Of the 12 participants reporting sleep, three reported to rise later than 8 AM. They would usually get up at the same time during the week and prepare for the day, as they had done while working. However, we must note here, that we have merely collected data about their previous rhythms retrospectively through the interviews. For many, this continuity entailed taking a bath and then preparing and eating breakfast. As #1, participants would generally start the chores of the day after breakfast, although three participants (#6, 7 and 10) chose to postpone the chores and take a bike-ride or go hiking. They described their mornings as busy and packed with assignments, such as gardening, cleaning, doing laundry, doing groceries, and exercising. Like #1, after lunch, participants' days were less structured, with time for reading books, meeting friends, having coffee, etc. Similar to #1, the evenings were often spent in front of the television or reading, if they did not report going out or seeing friends. While all participants reported watching television at night-time, they all refrained from daytime TV-watching or napping (with the exception of #5 and #10 who reported napping as an integral part of their daily routines after lunch).

Table 1. Characteristics of participants.

ID no.	Sex	Age [Years]	Retirement Age [Years]	(Former) Occupation	Education	Work Security/Stability	(Volunteer) Work	Marital Status	Sleep Quality Index	BMI [kg/m <sup>2</sup> ]	Blood Pressure Syst/Diast [mm Hg]	Grip Strength [kg]	Daily Step Count		App. Bedtimes	
													Weekdays	Weekend	Wake up	Go to Bed
1	F	68	63	Telegraphist, teacher	Telegraphist, teacher	Stable	Cleaning 5 times weekly, paid	Divorced	2	22.3	106/69	26.5	5308	9404	7:00	Not specified
2	M	66	63	Public administration	Office education	Stable	cleaning at restaurant as volunteer, board member in social organizations	Divorced	1	23.4	117/82	51.4	10,684	8993	8:00	0:00
3	F	67	68	Head of public school	Teacher	Stable	Board member in the apartment complex	Divorced	9	22.3	143/75	31.7	5348	5380	7:00	Not specified
4	F	71	70	Consultant	Process technologist	Stable	At NGOs	Divorced	1	21.5	97/72	25.3	9720	14,654	7:00	0:00
5	M	70	-	Many small jobs	Historian	Unstable	None	Married	3	22.9	143/89	41.9	11,603	9594	6:00	23:00
6	M	66	65	Pedagogue	Pedagogue	Stable	None	Married	3	26.8	153/83	47.1	16,562	10,129	5:00	23:00
7	M	70	67	High school teacher	High school teacher	Stable	Fills in and plays the organ in a church sometimes	Divorced	7	23.5	120/66	36.8	13,509	10,225	8:00	Not specified
8	F	71	67	Teacher	Teacher	Stable	Sensory examiner, paid	Divorced	1	20.4	177/73	35.8	13,234	11,526	Varies	Varies

Table 1. *Cont.*

ID no.	Sex	Age [Years]	Retirement Age [Years]	(Former) Occupation	Education	Work Security/Stability	(Volunteer) Work	Marital Status	Sleep Quality Index	BMI [kg/m <sup>2</sup> ]	Blood Pressure Sys/Diast [mm Hg]	Grip Strength [kg]	Daily Step Count		Kinds of PA	App. Bedtimes	
													Weekdays	Weekend		Wake up	Go to Bed
9	M	70				Stable	None	Married	2	22.5	160/75	52.4	9862	11,697	Athletics five times a week—gym, running or other kinds of exercise	7:00	22:30
10	M	68	65	Pedagogue	Pedagogue	Stable	None	Married	2	27.5	183/89	35.9	7594	14,653	Running/power-walking-biking	7:00	23:00
11	M	73		Public administration	Accountant	Stable	Volunteer handyman in DineAge (association for older people)	Married	2	28.0	168/96	43.3	13,840	11,596	Home exercises	7:30	23:00
12	F	68	66			Stable	Volunteer in a knitting café	Married	2	22.0	139/84	36.8	10,438	11,141	Hiking, gymnastics, walking	8:00	0:00
13	F	67				Stable		Married	-	24.7	133/86	22.1	14,011	11,842	Walking, weightlifting for elders, yoga	7:00	Not specified

Mean = 68.846; SD = 2.1543; sleep quality index: good sleep quality: >5 points; poor sleep quality: ≤5 points; BMI: normal weight: 20–25 kg/m<sup>2</sup>; overweight: 25–30 kg/m<sup>2</sup>; blood pressure: <140/90 mm Hg; grip strength: men: 40 kg, women: 25 kg (Hansen, Beyer, Flensborg-Madsen, Grønbaek, & Helge, 2013); step count: 7500 steps/day, active; 10,000–12,499 steps/day, highly active; >12,500 steps/day (Tudor-Locke & Bassett, 2004).

In the qualitative data, weekends and vacations continued to have the same meaning for the participants in the study. For #1, the weekends were considered 'time off' and many participants would stay up late, see friends, or go out on Fridays and Saturdays, as well as sleep late on Sundays.

However, for #1 and for participants in general, this distinction could not be seen on the step count data obtained with ActivPal. Participants got out of bed at the same time at the weekends and weekdays and achieved more or less the same number of daily steps.

In the following, we will unfold these relations between the different kinds of data and discuss some possible explanations behind our findings.

### *3.2. Rhythms of Everyday Life*

We find numerous cyclical repetitions in the observations about the older adults' lives. We also find that the structure of the day during the week in many ways resembles a workday. The rhythms of work-life persist, both daily in terms of wake-up-time, mealtimes, and commencing activities, and weekly, in terms of a sharp differentiation between weekdays and weekends. Our data support the idea that the subjective meanings of work shift with retirement [48]. To this end, the retirees in this study commence their 'work-day' after breakfast by doing chores such as groceries, garden work, cleaning up, washing clothes, checking mail, and exercising. Lunch constitutes the end of the 'short' workday for many of the participants, although some engage in volunteer work in the afternoon. After lunch, the days tend to be much more varied and open-ended:

In the afternoon, I don't have the same kind of schedule. I do things, but more like puttering around, reading, knitting, meeting friends at cafés, having them over, walking or the like. On Tuesdays I pick up the grandchildren from school and kindergarten. (#12 during focus group).

In line with #12, other participants describe their activities in the afternoon as puttering around, when they are not picking up grandchildren from kindergarten or school or attending planned activities. For those participants where the grandchildren live far away, picking up grandchildren did not form part of the weekly rhythm. However, for many of the participants living close to their grandchildren, they are an integral part of the weekly rhythm.

This continued work-rhythm could be explained in various ways.

In gerontology, the continuity of activities and interests is a well-described adaptive strategy within the framework of continuity theory, e.g., [49,50]. In this line of thought, adaptation is seen as a strategic way to maintain continuity of identity by linking change to individual life history (internal continuity) and physical and social structures (external continuity). In both cases, adaptation is an assessment (sometimes unconscious) of how the present links to the past [49].

However, from a rhythm-analytical perspective, the continuity theory is too focused on individual assessments and linear time. Regarding the individual assessment, the societal rhythms proceed unnoticed by individuals' retirement, but the retiree continues to take part in and reproduce societal rhythms. As such, retirement is not just an individual but also a societal endeavour. The participants in the study do not continue their work-rhythms as an individual choice. Rather, they form part of a societal rhythm, and activities and mealtimes are structuring components in their daily lives.

### *3.3. Linear and Cyclical Time*

In rhythm analysis, linear time is merely one version of time with cyclical time being just as important for social life. While linear time is the years passing and never returning, cyclical time is the yearly repetition of spring, summer, fall, winter, spring, etc. Therefore, rhythms are cyclical—from traffic lights continuously repeating the same cycle, to rush hours, public transport schedules, shops' opening hours, etc.—and do not suggest linear progression or sudden change. These rhythms continue despite retirement and are related to the rhythms of the labour market and society. This relation between the cyclical and the linear is what Lefebvre pointed to as the interference between days,

seasons etc. (cyclical repetitive) and practice in the form of work or retirement tasks (linear repetitive). There is a cycle onto which a linear practice is performed. The clock is an example of such cyclical repetition accompanied by a linear tick-tock, and it is precisely through this relation between the cyclical and the linear that we can measure and organise time [39] (p. 18).

The importance of societal rhythms can be illustrated by the importance of the weekly cycle in our data. Unlike days, months or years—which stem from a universal rhythm—the week is a social convention with deep roots in social structures like religion and the institutionalisation of labour [51]. Despite the immediate insignificance of weekdays and weekends in retirement, the seven-day circle continues to play a huge role. While weeks tend to lose their meaning and are unmasked as social conventions for soldiers in war, new mothers, or students preparing for an exam [51] (p. 138), this was not the case for the retirees in our study. As described above, the qualitative data suggested clear differences between weekends and weekdays in time of getting up in the morning (later in weekends) social activities at night-time (more activity at Friday and Saturday nights) and levels of physical activity (more physical activity during weekdays):

I must admit I tend to see a lot of sports in the tele during the weekends. Exercise does not really fit into my scheme. It suits me better during the week. (#2 during focus group)

This difference between weekends and weekdays was evident in much of the participants' talks about their drawings of daily schedules. When prompting them to draw, we asked for a time-line of a typical day in their lives, and all the activities drawn and enlisted were weekday activities. The drawings urged participants to talk about time both as linear progression (from morning to night), linear repetitive (typical assignments during the day) and as cyclical repetitive (weekly rhythms). As such, the researchers also inclined participants to think of time and assignments in a rhythm-analytical manner. What became evident in the subsequent interviews was that the participants used activities, mealtimes, and other routines to structure everyday life, as also described by Ekerdt and Koss [7]. As such, time and assignments are interwoven and rhythm-analysis enables us to describe how time is woven into collective rhythms.

Likewise, many participants described seasonal rhythms, and the passing of the year structured activities like hiking and cycling. Denmark is far north with long days during summer (approximately 18 h) and short days during winter (approximately 7 h). Some participants lived in their allotment yards during the summer. In addition, many of the activities listed by participants were closed during the summer months, which caused participants to get in bad shape, as they were not able to maintain their exercise routines without the structure of classes and social commitments. Thus, the yearly rhythm influenced activities both in structural (closed classes during summer) and personal (not running or walking during winter) ways.

As described, the difference between weekdays and weekends was not visible in the activity registration data (see Table 1). This, we ascribe to the fact that the ActivPal device is an accelerometer, measuring activity based upon changes in position, and categorizing these recordings into sitting/lying, standing, or walking. Therefore, the objectively similar activity patterns between weekdays and weekends can be ascribed to the fact that the ActivPal does not distinguish between types of movements. Further, we have summed up the activity registrations in 3 h slots throughout the day. Whether frequent and fast steps are taken within, e.g., one hour, and sitting time makes up the remaining 2 h time or, less frequently, more calm steps are spread over the 3 h slot, which results in the same ActivPal activity registration. Therefore, in relation to the activities performed, the ActivPal cannot distinguish between a weekday morning with house cleaning and grocery shopping and a weekend day playing with grandchildren at a playground. Thus, the ActivPal is an objective measure of movement and cannot detect the purpose and intention of the movement, nor how the older adults perceive the movement, or the feelings related to it. Therefore, the difference between weekdays and weekends is caused by an experienced difference amongst participants, which is not reflected when measured.

### *3.4. Sleeping Patterns: Fused Societal and Biological Rhythms*

Wake up time is, again from a rhythmanalytical perspective, an illustrative example of the ways societal rhythms are fused with the biological rhythms of retirees. The rhythms are socio/bio/cultural. The high scores in sleeping quality can be partly explained by participants' high levels of physical activity. Previous research suggests that physical activity interventions improves the subjective quality of sleep [52] and, oppositely, older adults with poor sleep quality and short sleep duration are less likely to be sufficiently physically active [53]. While there is a biological need to sleep for a certain number of hours per day, the overall continuity of wake up time from work-life to retirement also suggests that the wake up time conditioned by the labour market during work-life has become such a deep rhythm that it continues post-retirement. While a few participants suggest that they have a harder time sleeping until late than previously, others wake up at the same time as always, while others continue to set the alarm clock on weekdays.

Just like the stomach says it is hungry at mealtimes, so do participants wake up (or enforce to be woken up by the alarm) at the same time as they have done during work-life. With this, we do not attempt to establish an exclusive social or biological explanation for participants' wake up times or tendency to have busy mornings. Rather, we suggest that the busy mornings are both explained by a societal rhythm continued from work, as well as other biosocial phenomena, such as participants stating that they 'are more fresh in the beginning of the day' (#12), or that they 'need to get the day started to get anything done' (#4), or that 'you need to work before you can enjoy' (#6).

### *3.5. Chrononormativity*

As described above, there are certain times allocated for different activities during participants' daily, weekly, and annual rhythms: Physical activity times, shopping times, gardening times, mealtimes, sleeping times, volunteering times, etc. Participants distinguish between mornings, where the activities resemble work in the form of chores and physical activities, and afternoons, where they 'putter around' and visit friends:

We get up around 7AM and pick up the newspaper, and sit and read it, and then around 8 o'clock we are doing our normal chores, house and garden and such, if I am not doing gymnastics at the club. I exercise 5–6 times a week, but sometimes at night. It can be weightlifting, running or technique. And then we do groceries after our morning training. My wife also does gymnastics, so we often do our exercise together. After lunch we read a lot and putter around or visit friends. Sometimes we pick up the grandchildren. (#9 during design game)

While work changes character from pre- to post-retirement, there is still work to be done [48]. This concept of work is in line with the 'busy ethics' [25]. In the participants' statements about work and busyness, they also reveal a normative stand towards the ideal retiree. The participants performed this ideal in our data and talked about themselves as being busy. The accelerometers also revealed high levels of physical activity, but besides this, our methods only allowed us to collect accounts about their behaviour. However, it is important to note that busyness is just as much a sensation as an objective fact. While our data cannot prove how busy these participants actually are, it reveals both that they feel that they are busy, as well as feel a need to display themselves as being busy retirees.

These ideal of busyness also partly explains why there is a range of taboo activities during daytime. Although napping has been suggested to be beneficial to improve mental and physical health [54], many participants describe it as socially unacceptable to take naps or watch television during daytime. Similar findings regarding napping have been reported in a study by Venn and Arber [55] suggesting that the inactive retirees are seen as the 'villains of old age'.

I get mad when I see older people just sitting around, and sometimes I scold them. When they sit there it's hard to get them up again. (#4)

Or

We never watch the tele during the day. We have other stuff to do and can't just sit there and stare. It's an evening-thing, for relaxation. (#10)

As such, the everyday rhythms are embedded with chrononormativity [56]. Participants are afraid to show idleness to neighbours through television lighting in the windows during daytime or even excessive time at home during the day, as this is seen to portray an inactive lifestyle. The chrononormativity entails specific time for specific activities and allows the participants to become 'exemplars of retirement' [29] by leading active lives and portraying these to the surroundings. While retirees from other countries or with different work-lives and lifestyles might have engaged with the chrononormativity in other ways—e.g., by staying up late, getting up late in the morning, or not having fixed schedules—these participants enact a rather strict norm for how to appropriately manage time. The chrononormativity also extends beyond the daily rhythm, as participants express ideal times for seeing family during the week, and ideal times for being on the boat or golfing during the year. As such, the chrononormativity also relates to social difference and distinction.

The busyness and necessity to be physically active is also a challenge. On the one hand, participants express annoyance about an ageist society expecting little of them, as they feel they are still able to contribute to the labour market. On the other hand, they also feel some of the maladies of old age come sneaking, as they experience their functional capacity decrease and an increase in diseases as well as injuries related to their physical activities. Participants who have 'just had surgery' (#7) or are 'currently unable to do my exercise routine' (#11) due to small or severe injuries are numerous in the follow-up interviews after the RCT. These injuries and diseases are seen as mainly impeding them from further activities and temporarily interrupting their exercise routines. Thus, they expect to be back exercising and continuing their busy lives once they have recovered from their injury or disease.

#### 4. Conclusions

While the rhythms we have discussed in this section in some ways are individual choices—after all, who but yourself tells you to set the alarm clock when you are retired—we would rather suggest that the rhythms we have shown are examples of the way retirees continue to engage and participate in society and to perform a busy ethics; this comes with duties. On the one hand, the rhythms are a straightforward necessity. If they want to continue picking up grandchildren, shopping, talking to authorities, GP appointments, etc., they need to follow certain rhythms. However, on the other hand, the activities they engage in, the grandchildren they pick up, the volunteering they provide, and so forth are both a choice to continue societal engagement and a social demand to not become one of the sitting, napping, and daytime tele-watching 'villains of old age' [28]. Therefore, the rhythms are both a societal necessity and a way to live up to the many expectations that come with being a healthy and active senior citizen. They are a way to manage time, and hence, they are a way to manage retirement life.

In this analysis, we have shown how the everyday lives of participants are interwoven by socio/bio/cultural rhythms by using a rhythm-analytical perspective. Rhythm-analysis is a way to study the everyday and the way this is traversed by different biological, social, and regulatory rhythms [57]. With such an approach, the rhythms in our data extend beyond the 13 participants and suggest that retirees are part of society, not just through presence and common human biology, but also through participating in its rhythm.

#### 5. Data Limitations

By focusing on the way Danish retirees organise everyday life a cyclical and recurrent notion of time appeared in our data. In our study approach, time appeared implicitly to be linear; we asked

respondents to draw 'straight' timelines of their days' tasks and the ActivPal pedometer recorded number of steps as a proxy measure of physical activity on a linear timeline. However, in the qualitative interviews and focus groups the same linearity of rhythm appeared. As we have shown, the activity monitoring differed from the qualitative data in terms of how participants accounted for differences between weekdays and weekends. However, as the activity monitoring merely measures activity through motion, and not the kind of activity, there can very well be differences in the kinds of activity the participants engage in between weekdays and weekends. Therefore, we would suggest that monitoring activity through accelerometers needs to be supplemented with qualitative methods, which we have done in this study. As a result of this, we have managed to differentiate between weekday and weekend activities.

In addition, it should be noted that when measuring steps—as well as in other studies measuring food intake or other kinds of behaviour embedded with high levels of normativity—participants might alter their behaviour when measured in order to live up to certain norms and standards about activity levels. While measuring behaviour implies a different access to 'actual' behaviour, which we cannot access through the qualitative methods used in this study, the 'actual' behaviour is always altered by participants' awareness of their participation. Participants always negotiate both behaviour, drawing of daily schedules as well as accounts in relation to norms and standards. While they do so in most spheres of life, the adherence to certain norms is likely to be reinforced when participating in a study.

In addition, our analysis of time and rhythms is an example of the ways the questions being asked by the sciences, including the social sciences—in this case through a linear time scale—implicitly enacts a particular version of reality [58]. Here, time is manageable and, as such, becomes an organizing principle in participants' everyday lives. However, the different methods applied in the study creates a framework where other notions of time appear in our data. As we see it, this is exactly why we need to be more creative and interdisciplinary in the ways we craft our research questions and design interdisciplinary research collaborations. By questioning the problematics of time management in retirement with various methods, the different facets of rhythm appear. Moreover, the continuity of rhythms in life pre- and post-retirement, which we find in our data, is the result of an analysis, where we have only been able to study the rhythms pre-retirement retrospectively. We have no 'objective' data that enable us to study the rhythms pre-retirement.

Another general limitation—in this instance about RCTs—should also be mentioned. When conducting research projects on this age group in general (and in particular with this type of RCTs), it is our impression, based on the typical inclusion criteria, that the research participants involved tend to belong to the group of active, engaged, and healthy older people living in or close to university cities. As such, much of the medical, biological, sociological, and psychological knowledge we have on older people is produced with this bias towards people actively volunteering. In our case, we have been transparent about this bias and used it to describe a particular part of the retirement population.

The participants were well-educated, active, and healthy. Hence, these data are not representative for the older population in general but gives insights into the ways this particular group routinize activities and time. However, our rhythm analytical approach and use of gerontological theory has enabled us to theorize about the daily rhythms of contemporary retirement, which extends beyond the 13 participants and beyond Denmark. Moreover, in Westernized societies in general and in the Scandinavian countries in particular, this well-off group of ageing adults constitute a large part of the older population. Thus, while our findings are locally rooted, the rhythms of contemporary retirement are not just formed locally, but also through societal rhythms.

## **6. Implications**

Firstly, it is evident that in order to engage retirees in physical activity, offering activities during the morning hours on weekdays would seem the most feasible and resulting in the best adherence. In general, understanding the rhythms of retirement enables people facilitating activities and initiatives for retirees to design their activity offerings at specific times during the day, week, and season. Likewise,



many participants were annoyed that the long summer breaks at many of their organised activities resulted in loss of physical condition and urged organisers to shorten summer and winter breaks.

Secondly, we would highlight a conceptual implication of our study: Through their daily rhythms, retirees are part of contemporary society and continue to engage and participate in the societal organization. Creating conceptual and spatial boundaries between life pre- and post-retirement neglects the many ways retirement is part of 21st century societies.

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Article

# A Creative Writing Workshop on Sexuality and Ageing: A Spanish Pilot Case Study

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**Abstract:** Negative stereotypes about old age abound in our present-day society, which often considers older people as sexually incapable or even asexual. On the other hand, active ageing ideologies foster the practice of sex in later life as a sign of healthy and active ageing. The aim of this pilot case study was to examine the impact that poetry on sexuality, ageing and creativity had on older individuals. In total eight participants, aged 49–76, participated in a workshop offered by the University of Lleida (Spain). The initial hypothesis was that the participants, following the example set by the poems, would produce pieces of creative writing in which they voiced their own concerns and experiences about sexuality in later life from the distance that metaphor grants. While some of the participants' writings engaged with the poems that deal with sexuality in older age, none of the participants' creative pieces contained explicit instances of sexual experiences. The analysis of the participants' creative pieces suggests that: first, they regard intimacy in older age as essential; and second, their unwillingness to write about sexuality in older age is partly rooted in their upbringing during Franco's dictatorial regime, in which sexuality for non-reproductive aims was constructed as immoral.

**Keywords:** ageing; older adults; intimacy; creativity; strict morality; sexuality

## 1. Introduction

Negative stereotypes about old age abound in our present-day society, which tends to value youth and beauty and consider older people as sexually incapable or even asexual. On the opposite side of the spectrum, active ageing ideologies, such as the model of successful ageing, foster the practice of sex as a sign of a healthy and successful older age [1–5]. An emerging interest in sex in later life is related to shifting understandings of the process of ageing itself in which older people are perceived as old and sexually incapable at a much later point in their lives in comparison to prior decades. As Waxman notes, “we seem more able to accept with enthusiasm the idea of sexual activity and pleasure among old people” [6] (p. 103). Research findings show that getting older does not imply the loss of interest in sex, romance, intimate touch or emotional contact, all of which continue to be significant and necessary aspects of human lives [3,7–9]. Actually, as people grow older, they have more time to spend together, get closer to each other and develop a greater sense of emotional stability, shared intimacy and mutual understanding [10]. As a matter of fact, sexually-active aged individuals report that they practise sex not because it benefits their health, as highlighted in the medicalised discourse on successful ageing, but because of mere pleasure, personal fulfilment and even a sense of spirituality [3,8,11]. Research literature also reveals that sex for ageing people may be seen as a new awakening that brings greater intensity to sexual experiences and less urgency to enjoy them [3,8].

The studies on female sexuality in later life highlight that there is a higher degree of sexual confidence in older women because they have better knowledge of their sexual needs and bodily stimulations based on previous sexual experiences—they already know how they want to be stimulated

to be aroused [11]. According to Sandberg, some post/menopausal women do not regard ageing as a stage of loss and debilitation of their functions and capacities, but as a continuous “process of becoming in which the body is set” [3] (p. 19). Today, an older woman often appears as an experienced and self-confident person who knows that growing old does not limit sexual expressions, but, on the contrary, may grant new possibilities to experiment with sex, thus undoing the narrative of decline [12]. Likewise, studies show that older men also focus less on the phallus and place more emphasis on lovemaking, foreplay and the whole sexual intercourse [3,9]. That is, their sense of the connection between sex and emotion increases with age and many older men give more importance to intimacy, closeness and touch with their partners than to genital stimulation [3,8,9].

Although the focus on sex in later life has rendered older individuals more visible and challenged the association of older age as a stage of asexuality, it has also created new pressures to conform to the normative ideals of successful ageing. Many older adults express no interest in sexual activities and romantic relationships and prefer to remain invisible, which is especially relevant to older women. Germaine Greer, Carolyn Heilbrun and other pioneering feminist scholars have extensively written about older age and the cessation of menses as a liberating stage in life from the risk of getting pregnant and the male gaze, imbued with sexual desire. According to them, reaching older age is a turning point in a woman’s life because it coincides with the onset of menopause and, thus, the end of the reproductive life course. As Greer states, a post/menopausal woman embodies invisibility and freedom from sexual objectification, which allows her to get closer to her inner being and her true self. Greer calls this stage the autumn of a woman’s life that is “long, golden, milder and warmer than summer, and is the most productive season of the year” [13] (p. 142). To Greer, the advent of menopause can be perceived as a relief to those women who were not sexually active in earlier stages in life and show no interest in sex as they grow older. Similarly, Heilbrun celebrates the midlife’s invisibility for women and calls it the “magic circle of invisibility” that leads “the land of new accomplishment and new passion” [14] (p. 27).

As a pilot study based on the results obtained from a creative writing workshop, this article provides a preliminary answer to the complexities of sexuality, intimacy, creativity and older age in the Spanish context. It looks into how two contradictory views on sexuality and ageing—that of the narrative of decline and successful ageing discourse—affect older individuals’ own opinions on sex and sexuality. It also shows how the strict moral codes enforced by Franco’s dictatorial regime impact on the participants’ experiences of sexuality throughout their life course from the lens of literary gerontology.

## **2. Literary Gerontology and Creative Writing**

Due to an increased interest in gerontological studies in the last few decades, alternative approaches to older age and life experiences have become more visible in the field of ageing through the emergence of literary gerontology [6,15,16]. Literary gerontology constitutes a multi-dimensional field of research for the analysis of more internal and personalized experiences of growing old, which also allows a deeper insight into the sexual lives of older people [6,15,16]. In this line of thought, creative writing workshops and poetry workshops in particular are often used by “pracademics” not only of social, but also of medical sciences in order to foster the well-being of the older people and to have a better understanding of their ageing experiences. From a medical point of view, the reading, writing and sharing of poetry is being used as a therapy with older adults who suffer from dementia or who have gone through strong traumas, such as cancer [16,17]. From a social sciences point of view, a number of poetry workshops have been conducted in nursing homes and senior clubs in the USA and in Europe [18–21]. They were aimed at recording the life stories of the older participants in order to pass on their accumulated knowledge and experience to younger generations, to prevent cognitive decline by means of following an active ageing activity, and to foster the creativity of physically infirm older people living in nursing homes. In this case, the participants’ highly positive emotional responses lead to a sense of fulfilment and an improvement in their sense of well-being. Finally, poetry

workshops have also served the purpose of creating a sense of community among older widows living in rural areas, which has helped them to overcome possible feelings of loneliness and identity crisis. In both medical and social science cases, the literature available concludes that poetry workshops are highly beneficial for both the health and the psychological and social dimensions of older adults. Moreover, creative poetry workshops are in line with social innovation, solidarity and empathy as they help stimulate intellectual fitness and cognitive capacities and create age-friendly and better-socially adapted environments. Such types of activities can be integrated into extracurricular agendas to promote intergenerational dialogues with university students and to make ageing people not objects of study, but active subjects of research whose voices, opinions and contributions are being taken into consideration. Regarding the latter, the present article is in line with Vicente Rodríguez-Rodríguez and colleagues' study [22], which examined the view of active ageing that older adults have in Spain. In this sense, Rodríguez-Rodríguez and colleagues' article empowered senior citizens' own opinions about ageing. The present study follows the same line of thought, but with sexuality in late adulthood as the main research aim.

### 3. Materials and Methods

#### 3.1. Participants and Recruitment

The poetry workshop on sexuality and creativity in older age was advertised to different groups of senior citizens and university students who participate in activities organized by the City Hall of Lleida and the University of Lleida (UdL). The workshop was offered by UdL Life-Long Learning centre's programme Aula Oberta (Open Classroom), which offers elective courses for both UdL students and members of the general public from age 18 onwards. A total of eight participants (aged 49–76), five women and three men, joined the course. All the participants were white, Spanish and belonged to the middle class. Most of the participants had university studies and were either studying the Senior Degree at the University of Lleida or had participated in creative writing workshops at the moment at which the course was conducted.

#### 3.2. Materials and Procedure

The course lasted for eight hours, distributed into three different sessions that took place between the months of November and December in 2018. On the first and second sessions, the participants were introduced into the topics of ageing and sexuality. Later, they read and discussed four poems by two well-known contemporary older women writers, namely Erica Jong and Lorna Crozier. These particular poets were chosen because they are representatives of the baby-boom generation and they explore the complexities of ageing, creativity and sexuality in their works, as has been examined by the leaders and organizers of the workshop in their respective doctoral dissertations. The aim of introducing the topic of sexuality in late middle age and young-older age through literature was to provide examples of openness towards such a topic so that the participants found it easier to write their own creative pieces about sexuality and ageing.

Erica Jong, one of the key figures of the Second Wave Women's Liberation Movement and an outstanding figure in contemporary American literature, is best known for her 1973 novel *Fear of Flying*, in which she openly explored female sexuality and erotic wit. Passed her midlife, she continues to write openly about female sexuality and reveals that the ageing process does not diminish women's sexual desire; on the contrary, it continues to be present in the lives of older women. In a similar vein, the accomplished and highly praised Canadian author Lorna Crozier gained popularity with the publication of the humorous and irreverent series of erotic poems entitled "The Sex Lives of Vegetables," contained in the 1985 collection *The Garden Going on Without Us* [23]. Currently in her early seventies, Crozier continues to write unabashedly about sex from a young-old woman's perspective.

Whereas the name Erica Jong sounded familiar to most of the participants because of her ground-breaking book, which the participants knew in its Spanish translation, namely *Miedo a volar*,

none of the participants had heard about either Lorna Crozier or her works before. This met the course instructors' prior expectations, both because poetry usually has a smaller readership than novels and because Jong's works have become best-sellers while this has not been the case with Crozier's poetry collections despite the many prestigious prizes Crozier has been awarded for her works.

The four poems were translated into Catalan; translation was done in order to facilitate the workshop, especially considering that the older generation did not study English but rather French at school or university. The poems discussed from Erica Jong were "Middle Aged Lovers, II" and "Beast, Book, Body" from her collection *Becoming Light* (1991) [24]. From Lorna Crozier, the poems were "Getting Used to It" and "My Last Erotic Poem" from *Small Mechanics* (2011) [25], all of which deal with intimacy, love and sexuality in late middle-age and young-older age. The reading of the poems was followed by an open class discussion. Finally, the focus group members were encouraged to free write their own experiences and/or opinions regarding sexuality in the form of a poem (although all genres were welcome), since the use of metaphor allows for a more subtle and less intimidating way of expressing oneself. After concluding the creative writing exercise, the participants were asked to produce a creative piece of writing at home that dealt with sexuality, relationships and the ageing process. The aim was to observe the impact that reading and discussing poetry about sexuality in late adulthood would have on the participants. Our hypothesis was that they would feel at ease to produce pieces of creative writing in which they voiced their own concerns and experiences, albeit metaphorically, about sexuality in later life. These pieces of writing were handed in on the last session to the course instructors and read aloud individually by each of the participants in class at the participants' own request. The reading of the creative writing pieces was followed by an open discussion and the exchange of viewpoints about intimacy, sexuality, social realities and later life. An educational psychologist with ample experience leading discussion groups about sexuality joined the group discussion as a group leader. The reason was to ensure that any emotionally challenging experiences the participants might have recounted were addressed, if necessary, from a psychological point of view. The following sections describe and analyse the findings of this study and show the recurrent patterns that have been identified via the process of data analysis. Specifically, the organizers and leaders of the workshop read each of the participants' texts and analysed them individually both in terms of the recurrent thematic patterns and the choice of words. Subsequently, they met on several occasions in order to share and discuss their respective findings. The consent of all participants was obtained before the study, which was conducted in accordance with the protocol approved by the Ethics Committee of the University of Lleida (El Comité de Ética de Investigación del Hospital Universitario Arnau de Vilanova de Lleida de la Gerencia Territorial ICS Lleida, Alt Pirineu i Aran—GSS) and Good Clinical Practice (GCP) standards (CHM9/ICH/135/95).

#### 4. Discussion

Of the eight pieces of writing we received, one was an intergenerational dialogue on sexuality and intimacy in a family context with older parents; three were short stories and four were essays, all of which dealt with love, intimacy and sexuality throughout the life course. The pieces were of different lengths, ranging from half a page to three pages long (see Table 1). One of the short stories, produced by the youngest female participant, was not centred on the topic of ageing, sexuality or love; therefore, it was discarded. Participant names have been changed in order to protect their anonymity.

Table 1. Participant Data.

Gender	Participant's Name	Age	Type of Narrative
Female	María	51	Intergenerational dialogue
Female	Tania	49	Short story
Female	Gracia	69	Short story
Male	Oscar	71	Short story
Female	Remedios	73	Essay
Female	Elena	59	Essay
Male	Julio	76	Essay
Male	Pedro	67	Essay

#### 4.1. Analysis of the Selected Poems

Jong and Crozier's poems deal with love, intimacy and sexuality in middle and later life. In particular, the chosen poems are concerned with depicting both the advantages and disadvantages of love relationships in later life. Therefore, they do not favour any specific discourses on sexuality. Accordingly, these poems are regarded as a suitable point of departure to engage in discussions about intimacy, ageing and sexuality. The first two poems presented and read aloud in Catalan were Erica Jong's "Middle Aged Lovers, II" and "Beast, Book, Body". Both of them not only empower the female persona, but also provide room for male sensitivity. The poem "Middle Aged Lovers, II" is written from a woman's perspective who is sexually active but who does not necessarily need a man to provide for her sexual needs, as suggested by the lines: "I think I am free/of fears, /enraptured, abandoned/to the call/of the Bacchae, /my own siren, /tied to my own/mast, /both Circe/and her swine." (ll. pp. 11–20) Erica Jong depicts a strong woman who instils hope and self-confidence in a man, even if "[she] too [is] afraid" (ll. pp. 21–22). The focus of "Middle Aged Lovers, II" on a middle-aged couple who overcome both their fears of ageing and their traumatic past marital experiences to start a new love relationship encourages individuals to make the most of second opportunities of love at any age. In a similar vein, "Beast, Book, Body" depicts a successful love relationship formed in late adulthood. In her poems, Jong shows that the process of growing old is not shrouded in the mist of losses and asexuality, as seen through the lens of the narrative of decline, but reveals that sexual urges continue to be as important as they were in previous stages of life.

The third poem read in the workshop was "Getting Used to It" by Lorna Crozier. It incorporates two new themes, namely both a feeling of being lonely and that of being alone in older widows as well as the experience of love making in a long-lasting relationship. "Getting Used to It" presents a common situation in our days, in which many daughters, because of better job opportunities, decide to live away from their older mothers and cannot always afford to visit, even for New Year's Eve. The older mother seems to reluctantly accept the situation despite her feelings of solitude. However, the middle-aged daughter feels terribly frustrated and is not willing to accept a future older age marked by isolation and loneliness. In fact, she does not perceive seniority as being very distant in time, as she asserts that "[their] bodies/old, now [are] one year older" (ll. 14–15). In the end, she is partially comforted by making love to her partner. The knowledge she has acquired of her partner's erogenous zones throughout the years makes her feel reassured to expect a continuation of such tender lovemaking in their older age. Finally, the fourth poem that was read and discussed was Crozier's "My Last Erotic Poem," which uses humour to demystify the decline narrative of asexuality in later life: "Who wants to hear about/two old farts getting it on/in the back seat of a Buick/ . . . /Who wants to hear about two old lovers/slapping together like water hitting mud" (ll. 1–3, 11–12). The language employed in these lines is purposefully coarse in order to make fun of the common social perception of sex in older age as something grotesque and disgusting. The poem certainly affirms sexuality in older age, as the following lines suggest: "Who wants to know when we get it going/we're revved up, like the first time—honest—/like the first time, if only we could remember it/our old bodies doing what you know/bodies do, worn and beautiful and shameless" (ll. 25–29). Nonetheless, the poem



does not constitute a prescription of sex-making in order to lead an active lifestyle in later life: “Face it, /some nights we’d rather eat a Häagen-Dazs ice cream bar/or watch a movie starring Nick Nolte who looks worse than us./Some nights we’d rather stroke the cats” (ll. 21–24). In its stead, “My Last Erotic Poem” presents sexuality in a long-standing relationship as an activity to share love and pleasure with one’s partner, alongside watching films or petting the cats; in other words, it normalizes sexuality in older age.

The participants showed both interest and positive reactions to Jong and Crozier’s poems, which led to open group discussions and interpretations of these writings. Such discussions also functioned as a trigger to lead the participants into the writing of their own creative pieces on sexuality and intimacy. The participants’ increased interest in the close analysis of the poems and their willingness to produce their own pieces also show how literature has an impact on our perceptions and interpretations of the relation between sexuality and age. Likewise, literature helps generate further discussion on ageing and sexuality as well as the exchange of opinions and life experiences on this topic. As Falcus states, “telling and reading stories of age does open up debate and embrace complexity, and may challenge our ways of thinking” [26] (p. 53). The power of a literary narrative of growing older also helps to better understand what ageing means in different cultural contexts and historical periods [26]. A close analysis of the participants’ personal writings reveals some shared beliefs regarding their views on sexuality, intimacy and ageing in the Spanish socio-historical context, as explained in detail below.

#### *4.2. Analysis of the Participants’ Creative Pieces*

One recurring pattern in the participants’ writings is vague references to sex and sexuality. The majority of the participants did not dare describe or write about sexual scenes, unlike the more sexually explicit poems we had previously discussed by Jong and Crozier. In their stead, they seemed to shelter their thoughts on sexuality and sex in the descriptive analysis of love, intimacy and relationships throughout one’s lifespan. That is to say that the participants tended to describe sexuality within marriage. This is not an uncommon finding, as suggested by both research on sexuality and ageing [27–30] and traditional understandings of sexuality in the Spanish context as enforced by the strict religious and moral codes dominant until the end of Franco’s regime in 1975. However, it is salient that none of the younger participants discussed sexuality outside marriage. On the other hand, both 69-year-old Gracia and 71-year-old Oscar described sexual encounters outside marriage, albeit Gracia’s piece described an imaginary infidelity and Oscar’s text insinuated the loss of virginity of a young-adult male, thus avoiding any reference to older age and sexuality. This apparent contradiction bespeaks the heterogeneity of the ageing process and the need to avoid assumptions about older age which might be ultimately ageist.

##### *4.2.1. Sexuality throughout the Life-Course*

One of the male participants, Julio, aged 76, not only described the stages of life, but he also provided different definitions of love such as self-love, parental love, platonic love and sexual love among others. Julio’s description of sexuality, as framed solely within a love relationship, came after two and a half pages in which all possible types of love had been described. His depiction of sexual love consisted of a nine-line text, which showed as minimal if compared to the one-page-long description of marital love. Despite the brevity of his description of sexual love, according to him, it is the supporting element that helps to maintain a relationship. In addition, Julio clearly stated that sexual imagination does not diminish with age; on the contrary, it can even increase in later years. In a similar vein, Pedro claimed that individuals gain experience with ageing into older age which enhances the way individuals perceive love and sexuality. Moreover, the reader of Julio’s text was also encouraged to work out his/her mental creativity in order to enhance the joys of sexuality, which, according to Julio, should be compared to an intelligent cocktail of sensations and nuances instead of regarding it as a mechanic relief of instinctive impulses. Findings in sexual research in the context of the United States are in line with both Julio’s and Pedro’s claims. As Miriam Forbes, Nicholas Eaton and Robert Krueger state,

“aging can be associated with the acquisition of skills and strategies that can buffer age-related declines in sexual quality of life, particularly in the context of a positive sexual relationship” [31] (p. 137).

Julio’s text is also salient because he was also the only participant to connect sexuality with reproduction, although he did not expand on it. The participants did not engage with feminist notions of the climacteric as liberation from the male gaze in its sexualisation of the female body and in its relationship with reproduction; nor did their texts “allow[ed] women new choices and identities [that the] entrance into a degendered phase of life” may incorporate [32] (p. 400).

Another female participant, Remedios, aged 73, explained different stages of love throughout one’s lifespan in her writing. To her, youthful love makes us stupid, yet we are happy fools. As time goes by, people start to become more critical about love and the person they are in love with. In later years, according to Remedios, love becomes an expression of companionship, confidence and the sharing of experiences and thoughts.

Other participants also affirmed that love and sex are important elements in a person’s life. However, they also observed that sexual urges decrease when people grow older. Nevertheless, according to research on sexuality, age is only one factor—alongside attitudes towards sex, education, illnesses and medication among others—that affects sexual desire in later life [27,33]. Many of the participants attributed sex to the overall physical and emotional health of an individual. According to some of them, love does not have age, whereas sex does. In fact, the majority of the participants structured their pieces of writing by describing different life stages: youth, adulthood and later life. We interpret this need to first refer to love and sexuality in youth and adulthood before reaching the topic of sexuality in older age as a sexual life review of sorts. In such sexual life reviews of sorts, sex and sexuality were mainly attributed to youth and young adults, whereas the later stages of life were characterized by an increased sense of friendship between partners, emotional stability, self-knowledge and self-transformation. Sexuality was not non-existent; in fact, the majority of the participants implicitly or explicitly referred to a sense of transition or transformation of sexual desire and sexuality.

Likewise, Stončikaitė’s [8] study on ageing and sexuality as reflected in Erica Jong’s middle and later works reveals the writer’s changed vision towards sex, which becomes less phallus-centred and more focused on emotional closeness and mutual understanding between the partners. This sort of connection becomes more intensified in later life as the partners discover alternative forms of intimacy, which leads them to both sexual and inner transformations [8]. In Jong’s later works, therefore, ageing is not seen as a sign of frailty or the narrative of decline, but rather a rediscovery of new bodily sensations that strengthen intimate relationships and grant more self-confidence [8]. Similar findings have also been found consistently in qualitative research on the topic of sex in the lives of older adults, which reveal that, as people grow older, intimacy becomes more meaningful and fulfilling. Older adults report more satisfactory relationships because of an increased sense of intimacy, emotional closeness and openness to each other [8,27,34,35].

#### 4.2.2. The Spanish Socio-Cultural and Historical Context

The participants’ cultural background hindered their openness to write about sexual activity and sexuality. Both directly and indirectly, they made references to a social and political environment based on the strict Catholic worldview regarding sexuality and sexual expressions. During the sessions, the participants confessed that their upbringing and sexual education had been greatly influenced by Franco’s dictatorship (1939–1975). The ruling elements of such a dictatorial regime were censorship and the power of the Catholic Church. As a result, sexual education was simply non-existent and the topic of sex, especially female sexuality, was completely censored. Namely, Franco’s Regime promoted a model of femininity based on passivity in which sexuality became a private matter reduced to the home sphere [36]. Actually, the female body was seen as a contaminated and sinful element: a woman was not the owner of her body but rather an object owned by her husband. Wives in Franco’s times were thus expected to please their husbands and be submissive [36]. However, the strict moral codes enforced by the Catholic Church also implied that certain sexual practices, such as “oral

and anal sex” were considered “illicit” for women [37] (p. 433). As a result, many married men resorted to prostitution in order to free themselves from the inhibition resulting from such strict moral codes [36]. The mass tourism of the late 1960s and 1970s and the arrival of foreign visitors from Sweden, Germany and France, who sunbathed in the Spanish coastline, also had a great impact on Spanish men and offered a new outlet for their repressed sexuality [38].

Only a few students decided to narrowly depict and carefully voice out some scenes that portray sexual acts. Besides the effects of the strict moral codes prevalent throughout Franco’s dictatorial regime (albeit they gradually became more blurred since the 1960s), the participants’ reluctance to produce creative pieces about sexual activity in older age may also be related to their willingness to conform to social expectations or even asexuality in later life. In other words, the participants may fear being labelled “dirty old men” or “dirty old women” [39].

In line with Ramírez-Macías’ findings [36], Remedios, aged 73, claimed that the view a person has of sexual relationships is very much influenced by the education that this person has received, social structures and the political and religious environment. The influence of Franco’s regime and the strict Catholic principles are also well reflected in Oscar’s, aged 71, short story. He writes about a young country boy called Llorens who experiences his sexual urges for the first time. Oscar subtly depicts the boy’s sexual experience with a young girl who seems to invite him to discover his sexuality through innocent games. The boy touches the girl’s long skirt and discovers her soft and tender skin hidden under her clothes. Already nervous, he continues his discovery by gently touching the rest of her naked body until the girl and the boy reunite in a pleasant swirl of sensations that culminates in sexual ecstasy. Even if the boy does experience his sexuality for the first time, he is unaware that that game was, actually, his first sexual experience. Due to his strict religious upbringing among monks in a convent where carnal pleasures are seen as sins and not even talked about, he lacks sexual knowledge and experience. The fear of God, the religious mysteries and respect towards the monks keep the boy away from asking “complicated questions”. Oscar’s fictional account of the sexual discovery also shows the absence of any formal sexual education during Franco’s strict regime. However, the freedom with which Oscar relates such sexual discovery as well as the sexual agency of the female character differs from the strong sense of morality imposed by both the regime and the Catholic Church. In this sense, Oscar’s break from the normative attitudes that were socially imposed in his youth suggests three important considerations. First, it is a reminder of the potential diversity of older adults, as people belonging to the same age group do not necessarily share the same internalized values [40]. Second, the reversal might also be true, as individuals of different cohorts may share the same values [41]. Third, individuals’ values change with age [42].

#### 4.2.3. Passion and Desire

Although references to sexual acts are vague, the participants do not deny sexual expressions in later years. This implies that even though the body is not always physically capable of sexual intercourse because of a number of health reasons, other forms of sexuality are considered.

Elena, aged 59, states that age does not diminish sexual urges or capacities. According to her, sexual acts can be even more intense in comparison to younger days because the knowledge of oneself becomes greater, which leads to tenderer and more satisfactory intimate expressions as well as an exchange of new sensations. Nevertheless, she admits the existence of physical barriers such as the lack of lubrication in women and erectile dysfunctions in men that make difficult sexual experiences in older age. Elena’s thoughts are in line with research on sexuality in later life which, as mentioned in the introduction, shows that the quality of sexual performance does not diminish with age. Moreover, Elena’s piece aligns with Jong’s middle and late works, which reveal alternative ways of exploring sexual practices in older age [8,9].

The imagination is, however, not always described as an added value to alternative forms of sexuality. In fact, in older age sexuality may be reduced to the imagination, as described in the short story that Gracia, aged 69, wrote. In Gracia’s story, the older female protagonist invents a lover with

whom she imagines to have both passionate and tender encounters in order to save her life-long marriage with a husband who, in older age, is not interested in any kind of sexual intimacy: “In bed, nobody like Paco to get in the bed, give his back to me and start to snore in less than three minutes, while I thought of you and my next trip to Paris.” The fictional husband’s lack of interest in any kind of intimacy with his life-long wife may be due to many different reasons, as the text does not provide any explanation behind the husband’s behaviour. One of such reasons could be the fact that this is a loveless marriage in which the couple does no longer feel romantic love for each other, but simply follows a routine [43], as described in the text:

Paco set me . . . in the dishwasher routine; the routine of the TV (he, football in the living room. I, films in the drawing room); of the trips to Benidorm with Imserso . . . of going out for a snack (vermouth) on Sundays—only Sundays—at midday.

The husband’s lack of empathy for his wife, who longs for physical contact, suggests that the husband is being (sexually) self-centred in the same way that most men were in their youth [44]. Virility was a particularly relevant trait of masculinity in Francoist Spain, as “the image of a sexually powerful male suited the regime’s self-promoting ideology” [45] (p. 193, authors’ translation). Lack of male adaptation to the new needs of his ageing wife is also connected to the gendered upbringing of the older generations in Spain, who were raised in a socio-historical context dominated by strict religious moral codes in which the pleasure and desire of women were both not considered and constructed as immoral [36,37]. As Rafael Torres claims, in Francoist Spain “the decent wife, the truly honest one, had to repress all feelings of arousal and pleasure while her husband possessed her, usually in the darkness and with the nightgown on” [46] (p. 96, authors’ translation). The reason behind such a strong repression of women’s sexual pleasure was, on the one hand, the Catholic belief that sexual intercourse was only acceptable between husband and wife and with the sole objective of reproduction [45] (p. 157). On the other hand, sexuality and the consequent reproduction it entailed—as contraceptives were only legalized in post-Francoist Spain in 1978 [47]—was portrayed by the Regime as a moral obligation of all married women towards the growth of the nation [38].

## 5. Conclusions

This article has provided a case analysis of a creative poetry workshop that was offered as an elective course for both students at the University of Lleida and for the general public. The aim was to get a better understanding of the perception of middle and later life sexuality and intimacy through creative writing inspired by two well-known contemporary women writers, namely Erica Jong and Lorna Crozier. While some of the participants’ writings engaged with both Jong and Crozier’s respective poems as regards sexuality in older age, none of the participants’ creative pieces contained instances of sexual experiences in older age. Such an omission was partly discouraging given the open discussions about older age and sexuality encouraged by the workshop leaders and the poems themselves. An explanation for such an omission can be found in the participants’ pieces of writing on love, intimacy and sexuality, which revealed that they felt uncomfortable writing about personal sexual experiences in older age. In its stead, participants wrote about either general encyclopaedic information regarding sexuality throughout the life-course or provided examples and anecdotes, which were not always related to sexuality as specifically experienced in older age. The unwillingness to openly express personal sexual accounts is partly related to the strict norms regarding sexuality and gender during Franco’s dictatorial regime in collaboration with the Spanish Catholic Church, which had a major impact on the participants’ sexual experiences in their young adulthoods. Other studies about sexuality in older age conducted in Spain [48,49] also relate the older participants’ beliefs about sexuality in older age to the socio-historical context of Francoist Spain in which they were born. However, such studies differ from the present piece of research in terms of both methodology and data collection. Specifically, the originality in our article lies in the introduction of both poetry and creative writing as a means for the participants to be introduced into the topic and express their views on sexuality from the safe

distance that the use of metaphor grants. On the other hand, the participants' shyness in depicting sexual scenes with older characters (with no difference according to age group) may also have to do with notions of respectability and fears of breaking with socially-established expectations of behaviour in later adulthood. Nonetheless, the use of literary analysis, discussion and creativity did not have the expected impact on the participants. Namely, the participants neither revealed their own personal experiences of sexuality in older age, nor did they imagine fictional stories with sexual or even sensual encounters between two aged characters. This notwithstanding, the fact that none of the participants denied the experience of sexuality in older age is salient, as it breaks with the myth of asexual senescence [50]. In addition, the analysis of the participants' writings suggests that the participants do not feel forced into sexuality by the active ageing discourse, either. On the contrary, they navigate in a middle ground in which sexual intimacy is believed to be important but not regarded as prominent or essential. We believe that the failure of literature to strongly impact the participants' written responses is due to the limited amount of time—eight hours in total—that Aula Oberta (Open Classroom) allows for. Research studies on the beneficial use of literature and creative writing in older individuals are usually conducted in old people's homes for much longer periods of time, as the workshops are scheduled within these institutions' daily programs of activities. Apart from the limited amount of time, another limitation of the present study is the small group of older adults that are all middle-class, white and educated. In the future, it would be interesting to verify if more extensive creative writing workshops, taught in senior universities and countries with a similar socio-historical background as that of Spain, have a stronger impact on participants' openness to discuss their experiences on sexuality. Moreover, similar workshops with more participants coming from more diverse backgrounds may provide us with different findings and expand our gerontological knowledge in relation to creative writing and sexuality.

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