WOMEN'S PERCEPTIONS OF AGEING

by

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JUNE 2007
I declare that **WOMEN'S PERCEPTIONS OF AGEING** is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

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ABSTRACT

The aim of this study was to explore women’s perceptions of ageing in order to shed light on how individual women feel about getting older.

The qualitative interpretive research paradigm was chosen for the purposes of this study. In-depth interviews were held with three women who gave their accounts of their perceptions of ageing. The data was analysed using hermeneutic thematic analysis.

The accounts of the participants were reconstructed in terms of themes which emerged. Recurring themes in the accounts of all three participants were linked with the literature.

This study provided rich descriptions of women’s perceptions of ageing and helped to create new insights and meanings both for the participants and the readers.

The information gained could serve as guidelines for clinical practice and future research.

Key words: Women, ageing, perception, meanings, experience, qualitative research, interpretive paradigm, hermeneutics.
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This dissertation is dedicated to the memory of my late grandmother,
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CHAPTER 1

INTRODUCTION

A lifetime is the material that each of us has to work with. Until this span is over, we are still in process, in the midst of an unfinished story. What we do with our lives is our magnum opus, or great work of personal creativity ... Ageing well is a goal worth wanting (Bolen, 2003, p. 7).

Introduction

In the above quote, Bolen views the lifespan of an individual as a process. She emphasises that each person is the author of his or her life story implying that every individual plays a proactive role, throughout his or her lifetime determining the kind of life he or she will fashion for him or herself. The uniqueness of each person's life journey is also highlighted.

Ageing has often been thought of primarily in terms of chronology, rather than as a multi-dimensional process that includes biological, physiological, cognitive, sociological, economic, cultural and psychological factors (Hildebrand, 1995). In this study, participants are viewed as individuals with their own unique perceptions of ageing. The concept of ageing as a process, within the context of the meaning it has for each individual, is the focus of this dissertation.

The Aim and Rationale of the Study

This study aims to explore women's perceptions and experiences of ageing in order to shed light on how individual women feel about getting older. Its purpose is to give voice to three individual women about their personal experiences of growing older. It is hoped that this study will provide a rich description of these experiences and thereby help to create new insights and new understandings both for the participants and the readers. It may also
benefit those who work in the helping professions. Coleman, Bond and Peace (1993, p. 14) believe that “understanding the everyday experience of ageing can do much to change attitudes and increase awareness.” They add that if we listen to older people "we can begin to learn something of the heterogeneity of older people and the lives of those whose voices often go unheard, especially older women" (Coleman et al., 1993, p. 14).

Although the study aims to give voice to the participants in a non-judgemental way, I recognise that, as the researcher, my participation has impacted on the process, from the conversations, through the analyses of the stories, to the final outcome. I, therefore, acknowledge that the conversations with each participant as well as the final written product are a co-construction of meaning between myself, the participants and the various theoretical and literary voices included in this study.

The Design of the Study

Based on the literature surveyed, it seemed that much research about women and ageing was done from a positivistic and empirical point of view, although more recent research has been done from a qualitative angle. Quantitative studies view reality as stable and unchanging (Terre Blanche & Durrheim, 1999), and aspects of ageing are often objectively observed, measured and described. An example of this quantitative approach is the study done by Hillerås, Jorm, Herlitz & Winblad (2001) who measured life satisfaction in elderly people, aged 90 and above. Important statistical information is often provided by these studies. However, they fail to acknowledge the individual experiences of the participants.

Rather than provide 'objective measurement', this study hopes to provide rich and detailed descriptions of individual women's subjective perceptions and experiences of ageing and add to the body of research which has been done from this perspective. The results of this study are also not intended for generalisation to larger populations. A qualitative research approach, which encourages description and understanding of human behaviour rather than
measurement and prediction (Babbie & Mouton, 2001), was therefore, selected as being the most suitable for achieving the aims of the current study.

Postmodernism was chosen as the most fitting ontological approach for this study as it allows for multiple voices to be heard, rather than only relying on the expert voice (Hoffman, 1992).

**Sampling and Selection**

Since the goal of the current study is for an in-depth understanding of the perceptions of women towards ageing, the sampling strategy used was that of purposive and convenience selection, whereby a small sample of “information-rich cases” (Terre Blanche & Durrheim, 1999, p. 45) was selected.

**Data Collection**

The method used to obtain information was the unstructured interview which encouraged the participants to talk freely about their perceptions and experiences of ageing. A relationship was formed with each of the participants, and the interview was adapted to each individual.

**Data Analysis**

The data was analysed using hermeneutic thematic analysis, an approach which emphasises interpretation and the discovery of meaning.

The steps below were followed in the practical execution of the study:

- The purpose and procedures of the study were explained to each participant. Written consent was obtained from the participants prior to tape recording the interviews.
The tape recorded interviews were then transcribed. These transcribed interviews are included under Appendices B, C, D and E.

Based on her personal interpretation, the interviewer identified themes highlighted from each transcribed interview.

Finally, a comparative analysis was undertaken between the themes associated with the participants' perceptions of ageing and the literature. Similarities and differences between the themes and previous research were discussed.

**The Format of the Study**

This study contains both a theoretical component and a practical component.

The theoretical component comprises a literature review, as well as a discussion of the epistemological stance and the research methodology used in this study. The literature survey provides the reader with a background of research which has been conducted in the field of women and ageing. This will allow for a comparison between the emerging themes and alternative theories and voices. The purpose of the literature survey is not to validate the themes highlighted, but to incorporate many viewpoints about ageing. The methodological approach used will also be described fully.

The practical component has enabled the participants to give their own accounts about their personal perceptions and experiences of ageing. This perspective provides an alternative reality from that provided by the literature survey. In this way meanings around ageing are be co-created based on the many viewpoints considered.

This study comprises the following chapters:

**Chapter 2** comprises an overview of the literature surveyed regarding women's perceptions and experiences of the ageing process, in order to provide background for this study. After a general discussion about ageing,
theories of ageing are discussed, including a review of Erikson’s theory of development. This is followed by an exploration of some of the more contemporary theories of ageing. Thereafter certain recurring themes in the literature pertaining to ageing are highlighted. Finally recent studies regarding women’s perceptions of ageing are considered.

**Chapter 3** focuses on the research approach used in this study. Since this study hopes to provide rich and detailed descriptions of the participants' worlds, a qualitative approach was selected as being the most suitable for achieving the current aims. The underlying ontology of the study, namely postmodernism, is described and thereafter the interpretive research paradigm is explained. The role of the researcher is set out, and the sampling, data collection, and the data analysis processes used in this study are described.

**Chapters 4, 5 and 6** comprise the participants' accounts that I have reconstructed following careful analysis of the transcribed conversations (Appendices B, C, D and E), which took place between us. Each of these chapters is concluded with my personal reflections.

**Chapter 7** consists of a comparative analysis between the recurring themes found in the participants' accounts of their perceptions of ageing and the literature. Similarities and differences between the themes and previous research are discussed.

**Chapter 8** is the concluding chapter of this study. A brief overview and evaluation of the study is given along with recommendations for application in practice and future research.

**Conclusion**

Little attention has been paid to the individual women's perceptions and experiences of ageing. This study, therefore, aims to shed light on how individual women feel about getting older.
CHAPTER 2

LITERATURE REVIEW

Introduction

This chapter will comprise an overview of the literature surveyed regarding ageing as well as women’s perceptions and experiences of this process, in order to provide a backdrop for this study. After a general discussion about ageing, theories of ageing will be discussed, including a review of Erikson’s theory of development. This will be followed by an exploration of some of the more contemporary theories of ageing. Thereafter certain recurring themes in the literature pertaining to ageing will be highlighted. Finally recent studies regarding women’s perceptions of ageing will be considered. It should be noted that there is a great deal of overlap amongst the various themes so that at times certain aspects may appear to be repetitive.

The Meaning of Ageing

Hildebrand (1995) believes that the way in which we think about ageing has changed from a focus on mere chronology. “It has become clear that we must also think about ageing in biological, physiological, cognitive, socio-economic, cultural and psychological terms” (Hildebrand, 1995, p. 4). He adds,

ageing is an intricate, delicate and on-going process, in which we and others constantly interact with and confront our solutions from the past, our prejudices from the present and the pressures from inside and outside (Hildebrand, 1995, p. 7).

Gillearnd and Higgs (cited in Ballard, Elston & Gabe, 2005, p. 170) concur that the meaning of ageing is no longer ‘fixed’. Instead, they suggest that:

(w)e are beginning to see a variety of ‘cultures of ageing’ where the meaning of ageing relates to the identity that individuals construct to
express and interpret their own ageing ... providing a new cultural space for the expression of individualized versions of ageing identity.

However, as Turner (1994, p. 15) reminds us, “we inevitably grow up, grow older, and die; thus no one can argue that aging is wholly a social construction.”

**Why study ageing?**

Judging from the material which has been written about the subject, there seems to be a growing interest in developing a greater understanding of ageing (Coleman, Bond & Peace, 1993). According to these authors, the many books that have been written are a reflection of the need for reassurance regarding the confusion and uncertainty about growing old. They feel that a long life should be enjoyed, rather than feared. (Coleman et al., 1993). In addition, they believe that society has a “problem-oriented approach to ageing” and that understanding the basis of our attitudes towards ageing would enable us to gain “greater awareness” about the future, if not a greater sense of optimism (Coleman et al., 1993, p. 10).

In addition, many authors (e.g. Coleman, Bond & Peace, 1993; Fisher, 1992; Fodor & Franks, 1990, Hildebrand 1995) refer to the growth of the ageing population and to “increased longevity” (Norman, McCluskey-Fawcett & Ashcraft, 2002) as reasons to increase our knowledge and awareness about later life. Hildebrand (1995, p. 2) agrees that we need to learn more about the “psychological variables” involved in ageing as we are “enjoying and living through a period for which there are no precedents” (Hildebrand, 1995, p. 5).

**Theories of Ageing**

**The role of theory**

One of the ways in which we can learn more about ageing is by studying theories of ageing. According to Coleman (1993, p. 100) theories,
provide a way of thinking about the world and about human behaviour and society which satisfy the need for a model which fits our experience of reality.

In other words, theories help to provide a framework in which people can understand their experiences. Coleman (1993, p. 101) also believes that lack of theory and lack of norms can be detrimental when interpreting older people’s behaviour, as it leads to “stereotypes and prejudices about the deterioration, self-absorption and rigidity of old age”. On the other hand, however, unyielding adherence to a theory does not allow for individual differences and may lead to generalisations about how people ‘should’ behave.

Bond, Briggs & Coleman (1993) believe that regarding theories as right or wrong is a mistake. They say:

No one theory is a completely accurate representation of reality but some provide better insight into a phenomenon than do others. The usefulness of any theory depends on how it functions: first, to explain past events; second to predict future events, and, third, to generate new theory (Bond et al., 1993, p. 20).

The study of ageing is a “multidisciplinary enterprise” (Bond et al., 1993, p. 19) that includes biological, psychological and sociological theories. Each of these disciplines focuses on different aspects of the ageing process and each has its own theoretical perspective, makes its own assumptions and uses its own methods. Although the approaches are different, they often complement each other (Bond et al., 1993).

Even though certain of these approaches are included in the present study, the main focus is on psychological perspectives of ageing.
Erik Erikson’s Model

According to Bee (1996) Erikson’s (1959/1980) theory of psychosocial development has been the most influential view of adult development so far. Its influence was evident in the current literature survey, where the majority of the literary sources consulted referred to this theory (Coleman et al., 1993; Cross & Markus, 1991; Field, 1997; Gergen, 1990; Holahan, Holahan & Wonacott, 1999; Leonard & Burns, 1999; Ranzijn et al., 1999). Coleman (1993) believes that Erikson’s theory is so influential because he saw ageing as an integral part of the lifespan.

Erikson powerfully conveyed the idea that in order to understand a person in old age it is necessary to see him or her in the context of a whole life history with the problems both successfully and unsuccessfully resolved from earlier periods of life (Coleman, 1993, p. 102).

According to Erikson, psychosocial development occurs across the entire lifespan. The individual has to move through and successfully resolve eight “crises” or “dilemmas” over his or her lifetime, in order to develop a complete and stable identity (Bee, 1996, p. 55). Erikson’s theory is known as a “stage theory” of development (Weiten, 1995, p. 432). Stage theories assume that people go through the various stages in a specific order and that each stage builds on the previous stage. Each stage is also strongly related to age (Weiten, 1995). Erikson described the stages in terms of a positive or negative outcome based on the successful or unsuccessful resolution of the “crisis".
<table>
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<th>Approximate Age</th>
<th>Stage</th>
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<td>1. Basic trust versus mistrust</td>
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<td>2 – 3 years</td>
<td>2. Autonomy versus shame and doubt</td>
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<td>65 +</td>
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Source: Bee, 1996 p. 56

Erikson’s final two stages are the most relevant for the purposes of this study. These are “generativity versus self-absorption” (occurring between the ages of 25-65) and “integrity versus despair” (occurring from the age of 65 onwards) (Bee, 1995). Features such as, “acceptance of the past, the role of reminiscence, adaptation to social change, transcendence of self-preoccupation, and loss of fear of death” are incorporated into the final two stages (Coleman, 1992, p. 68). Dilemmas, or tasks, which have not been
According to Erikson (1959/1980, p. 103) “generativity is primarily the interest in establishing and guiding the next generation.” This includes one's own family as well as concern for the society in which one lives and it may take the form of mentoring younger people, teaching, or doing charitable work (Bee, 1995). Erikson believes that generativity “encompasses procreativity, productivity and creativity” (Erikson in Bee, 1996, p. 57). The challenge during this stage, therefore, is for the healthy adult to “acquire a genuine concern for the welfare of future generations, which results in providing unselfish guidance to younger people” (Weiten, 1995, p. 452).

The opposite of generativity is “stagnation” and “personal impoverishment”, and should a person not be able to resolve the “crisis” of this stage, he or she may become self absorbed.

According to Bee (1996) Erikson’s final stage of ego integrity versus despair has undergone some changes in his own lifetime. He first described integrity, when he was in his middle years, as “the fruit of the seven stages” (Erikson in Bee, 1996, p. 59). However, when he was in his 70s, he saw this stage more negatively. He described it as follows:

Burdened by physical limitations and confronting a personal future that may seem more inescapably finite than ever before, those nearing the end of the life cycle find themselves struggling to accept the inalterability of the past and the unknowability of the future, to acknowledge possible mistakes and omissions, and to balance consequent despair with the sense of overall integrity that is essential to carrying on (Erikson, in Bee, 1996, p. 59).

Weiten (1995, p. 452) describes the challenge of this final stage in a more positive way and believes that “people need to find meaning and satisfaction
in their lives, rather than wallow in bitterness and resentment.” In order to do this, they need to be able to forgive themselves for past mistakes.

According to Bond et al. (1993, p. 29), the focus on “the integrity of the lifespan is Erikson’s lasting contribution and one that is vital to an understanding of old age.” Like Erikson, they stress the importance of looking at the context of a person’s whole life, in order to understand him or her better in ‘old age’.

Studies, such as that of Ranzijn et al. (1999) also support the notion of integrity and agree that it is important that people accept the way they have lived their lives in order to achieve integrity. If they are unable to do this, they may give way to despair. Acceptance is, thus, seen as a “significant predictor of wellbeing in older adults” (Ranzijn et al., 1999, p. 95).

As influential as Erikson’s theory is, it seems to offer a very limited view of the ageing process, and this is clearly evident in his allocation of only 2 of the 8 stages to the years from 25 until death. It assumes that adult development is both linear and cumulative (Bee, 1996). A further criticism of Erikson’s theory is that it was based on studies of men. Norman, McCluskey-Fawcett and Ashcraft (2002, p. 32) believe “theoretical models of development based on studies of men, such as Erikson’s model, may need to be modified to fit the experience of older women.” Similarly, Fodor and Franks (1990, p. 446) say “most research on midlife and beyond has been focused on men by male researchers.”

It is Gergen’s (1990) view that most psychological theories of adult women’s development, including Erikson’s, focus mainly on biological development, especially on reproductive roles, and that a woman’s life is seen as going into decline after midlife. She believes that there “is little focus on the particular character of women’s life narratives ” (Gergen, 1990, p. 471). She feels that treating women in such a way benefits a patriarchal system.
In terms of Erikson's theory, Gergen (1990, p. 473) says,

Erikson views a woman’s capacity to reproduce and mother as the single most important determinant of her adult identity. Men, however, can achieve generativity through intellectual, occupational, and other public endeavours.

In addition, Gergen (in Coleman, 1993, p. 101), reminds us that there is,

a continual need for new theories to counter the myopia induced by established accounts of reality. A theory can outlive its usefulness and instead of drawing our attention to phenomena we had not noticed before, become a hindrance to developing new insight.

Coleman (1992) suggests that by abandoning the assumptions of lifespan theories such as Erikson’s, the researcher may choose to focus on the course of human lives instead. With this in mind, the focus will now turn away from the more established theories of ageing to newer alternatives which have been proposed.

Alternative theories

Fodor and Franks (1990) believe there is no integrated theory of ageing which is of benefit to women who are middle-aged and older. They suggest:

We need to ask whether midlife and beyond is to be feared as a loss of youth and opportunity, a time for closing down and drying up; or is it a new prime of life, a time for renewal, getting rid of youthful preoccupations with appearance and body, a time to seek out new challenges, valuing wisdom, maturity, and new possibilities for growth and change? (Fodor et al., 1990, p. 447).

Among the researchers who have suggested an alternative to the established theories of lifespan development are Mitchell and Helson (1990). They have
focused on the concept of women’s prime of life, which they believe occurs in the 50s. They define this prime of life as “a time of fruition, fulfilment, and high quality of life” (Mitchell et al., 1990, p. 451). According to these researchers, women have traditionally been regarded as being at their peak when they are their most fertile, and most attractive to men (Mitchell et al., 1990). However, they suggest that this period of “late adolescence” may be regarded as the “flower of youth, not the prime of life” (Mitchell et al., 1990, p. 452).

In their study, they expected to find that women would nominate their 50s as being the age at which they feel they have reached their prime of life. Mitchell et al. (1990) felt that by their 50s many women would experience increased freedom when their children became adults and left home. They also believed that their life at home would become simpler and that this would leave them with time to redirect their energies towards their partners, work and personal development (Mitchell et al., 1990). In terms of the results of their study, however, they found “no time of life is best in all respects” (Mitchell et al., 1990, p. 468). This finding seems to reflect individual differences as well as variations of timing in women’s life experiences. But while the timing of ‘prime of life’ seemed to differ for individual women, a “substantial proportion of women described their lives very positively” (Mitchell et al., 1990, p. 452). The authors concluded their study saying, “the concept of the prime of life offers a linguistic umbrella” (Mitchell et al., p. 468) under which researchers can look at the achievements of older women in all spheres of life. They hope that this research would help to counter negative stereotypes of ageing.

Another approach towards ageing is that of researchers Leonard and Burns (1999) who have explored the idea of turning points as shaping the lives of midlife and older women. According to Leonard et al. (1999, p. 87), the turning point approach “allows respondents to select and prioritise their own significant life events” which are often not those that are highlighted in the literature on ageing. These turning points involved role transitions, times of adversity, or times of personal growth.
In their study, they asked: “How does age affect the way that people perceive their lives?” (Leonard et al., 1999, p. 87). The idea of examining “self-perceived turning points” as part of a person’s life experiences, is attributed to Clausen, a proponent of narrative theory. (Leonard et al., 1999, p. 87)

Narrative theory proposes that,

people tend to formulate their lives into a coherent and meaningful story … A person’s life story then reflects his or her sense of who they are (Leonard et al., 1999, p. 87).

McAdams, cited in Leonard et al. (1999, p. 87) concurs that identity comprises, “an internalised narrative integration of past, present and anticipated future which provides life with a sense of unity and purpose.” People rewrite their life stories at times, and this story “directs future choices and goals and makes sense of past experiences” (Leonard et al., 1999, p. 87). In addition to the individual life story, there are also “dominant gender story-lines to which most people will approximate” (Leonard et al., 1999, p. 87). The authors add that, in the past two decades, there has been a shift from a “traditional story-line” (Leonard et al., 1999, p. 87) which defined women in biological terms to a “neo-traditional story-line” (Leonard et al., 1999, p. 87) which added the role of paid worker to a woman’s traditional roles of wife and mother. It is against this backdrop that Clausen (in Leonard et al., 1999, p. 87) “sees self-perceived turning points as the means by which individuals incorporate important changes – for better or worse – into their life story or “self-narrative”.”

The results of the Leonard et al. (1999) study indicated that while women may experience few role transitions after 40, “experiences of personal growth continue and increase through later life” (Leonard et al., 1999, p. 93).

Leonard et al. (1999) believe that by using the turning point approach, researchers can gain insight into how people’s lives are shaped. They add,
it is the subjective importance of experiences that counts with the individual, and those experiences that act as subjectively important turning points are not necessarily those that have been paid most attention by researchers (Leonard et al., 1999, p. 92).

Many of these ‘alternative’ theories of ageing (e.g. Ballard, Elston & Gabe, 2005; Gergen, 1990; Leonard et al., 1999; Mitchell et al, 1990) seem to have been influenced by social constructionist ideas as they highlight the importance of the individual’s subjective perception and experience of ageing. They also consider the social context within which these experiences take place.


“One approach to midlife studies is to assume that the dominant discourse regarding midlife women is socially constructed and that there are alternative stories to uncover. These alternative or preferred narratives provide new lenses through which to view a woman’s midlife experience … Through performing and circulating the alternative, preferred narrative, new images are constructed for the culture.”

Similarly, Öberg (2003, p. 127) reminds us that there is risk of that “dominant social values are possibly considered as synonymous with subjective experiences of aging.” He, therefore, urges us to differentiate between “images of the aging body in popular and consumer culture and individuals’ subjective experiences of their own bodies and their own aging” (Öberg, 2003, p. 127).

Gergen (1990, p. 471) believes that not enough attention is given to “the particular character of women’s life narratives”. She also feels that there are “gaps and silences … in these renditions of women’s lives” (Gergen, 1990, p. 472). In order to address these shortcomings, she believes that a “social construction metatheory” (Gergen, 1990, p. 487) is needed in order to describe women’s lives in greater detail.
There seems to be a shift amongst the more contemporary theories of ageing (e.g. Ballard, Elston & Gabe, 2005; Gergen, 1990; Leonard et al., 1999; McQuaide 1998; Mitchell et al, 1990) from accounts of ‘normative developmental stages’ towards a focus on the individual’s subjective perceptions and experiences of ageing.

**Stereotypes of Ageing**

Ageing is, unfortunately, often viewed in a negative way. McHugh (2000, p. 103) says that,

> ageing has been viewed largely as a problem, defined in terms of decline in both physical and social competencies. The old person is defined by what she or he is no longer: a mature productive adult.

A number of stereotypes also exist, which often portray older adults as “uncertain, infirm, cranky, childlike, senile, useless, ‘out to pasture’, ‘over the hill’ and ‘washed up” (Bee, 1996, p. 6). Bond, Briggs and Coleman (1993, p. 21) point out that even “the terms ‘ageing’ or ‘senescence’, which are used interchangeably, imply decline and deterioration”, whereas in children, age related changes are seen as ‘development’ because these changes are beneficial rather than deleterious. According to Öberg (2003, p. 122) “resisting not just old age, but ageing itself, is becoming an integral part of many adult lifestyles.”

Coleman (1993, p. 100) believes that our knowledge about ageing is based on “certain ‘pictures’ or ‘images’, positive and negative, about how people cope with problems in this period.” He asserts that these “stereotyped views” (Coleman, 1993, p. 100) have a greater impact on our attitudes towards ageing than we may realise and he recommends making them public in order to examine them more closely.
Featherstone and Hepworth (1993, p. 308) agree saying:

Many of the images we use to describe ageing and elderly people are in fact negative stereotypes … (which) are damaging to our relationships with older people. They represent a form of symbolic stigmatisation which finds its way through to practical everyday action, thereby giving meaning (in this example a negative meaning) to the experience of growing old.

Research by Coupland et al. (cited in Featherstone et al., 1993) based on conversations between younger and older women showed that the choice of topics as well as the vocabulary used in these interactions “actually reinforce ageist stereotypes” (Featherstone et al., 1993, p. 308). The young women apparently “access as well as construct … negative identities for the old” (Featherstone et al., 1993, p. 308). Talking to these older women was perceived as being a waste of time and a duty rather than as worthwhile or interesting. Ironically, the research found:

Older people themselves adopt an elderly vocabulary which focuses on the relative frailty of the body, the changing social scene and the passing of time because they feel that these are the topics of conversation which younger people expect them to choose (Featherstone et al., 1993, p. 308).

The Coupland study (cited in Featherstone et al., 1993) illustrates how ageing is not just a biological process which takes place in a vacuum isolated from social life. It seems that it is both influenced by and in turn influences the social context in which it occurs.

Lippman, cited in Featherstone et al. (1993, p. 309) believes:

We are highly dependent on stereotypes as a means of communication … We do not, said Lippman, see first and then define but *define first and then see*. Stereotypes precede and shape our perceptions and are
an inescapable consequence of living in a complex world in which a bewildering profusion of messages is generated. For Lippman, stereotypes are not inevitably negative …They are simply a basic means of communication which help us to order potentially confusing experiences and impose some descriptive unity on them.

Stereotypes are regarded as having “enormous convenience value since they help to simplify what is otherwise complex and often confusing” (Featherstone et al., 1993, p. 309). The problem is that stereotypes generalise the experience of ageing, in an often negative way, and they do not recognise the diversity of actual personal experiences (Featherstone et al., 1993). As a result, it seems as though these stereotypes interfere with the construction of a more positive image of old age (Featherstone et al, 1993).

McQuaide (1998, p. 52) believes that in order to “prevent negative images of midlife from becoming a self-fulfilling prophecy, deconstruction of the discourse on aging is essential.”

**Gendered Ageism**

While gendered ageism may be considered a further example of negative stereotyping, the phenomenon seems to be so central to the research on ageing (e.g. Ballard et al., 2005; Featherstone & Hepworth, 1993; Fodor & Franks, 1990; Gergen, 1990; Hurd, 2000; Öberg, 2003) that it is considered separately here.

According to “the double standard of ageing-dissertation” (Sontag in Öberg, 2003, p.116) physical signs of ageing are judged more harshly in women than in men. For Susan Sontag (cited in Öberg, 2003, p.116),

women’s power is embedded in perishable values of beauty and sexual allure, while men’s power is embedded in more enduring values of status and wealth.
Society, therefore, places a premium on women’s attractiveness. Öberg (2003, p.116) believes that “bodily aging confronts women with the failure to maintain the standard of idealised feminine images.” According to Hurd (2000, P. 85):

In the ‘natural order’, woman is valued in terms of her physical appearance relative to man’s appreciation of beauty … Existing cultural ideals of beauty and womanhood therefore lead many women to fear aging itself as a loss of attractiveness and femininity.

Öberg (2003, p.117) adds that “the cultural elevation of youth and youthful ideals of attractiveness serve as the norm against which all women are evaluated, both by themselves and by others.”

In addition, Rodin (in Hurd, 2000, p. 84) suggests that women are continuously exposed to the message which says that, “beauty and physical perfection are merely a matter of personal effort and that failure to attain those goals is the result of not doing enough.” As a result, a woman may begin to doubt her ‘value’.

Healey (cited in Hurd, 2000, p. 84) agrees that ageist assumptions equate youth with “goodness, beauty and desirability”, while old age is judged as being “bad, repulsive and ugly.” Featherstone and Hepworth (1993, p. 311) refer to these assumptions as “core concept(s) of western culture.” Women may, therefore, be unable to maintain a positive body image and self-esteem because they have internalised these social beliefs (Hurd, 2000).

Fodor and Franks (1990, p. 445) refer to the “long legacy of ageism” of Western culture in which negative stereotypes of ageing are reflected around us in art, literature and the media. They also refer to Sontag’s ‘double standard’ in the ageist culture and believe that, as a result, women are afraid of ageing and of “being devalued and lonely in old age” (Fodor et al., 1990, p. 445). Women are, thus, encouraged to find new ways to cope with getting older. In addition, Fodor et al. (1990, p. 447) ask whether midlife is not a time
for “getting rid of youthful preoccupations with appearance and body.” Ironically, this question itself seems to be a further example of ageism since it implies that midlife and older women are ‘too old’ to be “preoccupied” with their appearances.

In conclusion, Hurd Clarke (2002, p. 440) says,

an older woman’s experience of ageing and her aged body is shaped and constrained by social values concerning physical attractiveness and by ageist norms that denigrate older women and older women’s bodies.

She adds that older women’s perceptions of their physical appearance has largely been ignored but that “the centrality of physical attractiveness to women’s sense of identity cannot be ignored in later life” (Hurd Clarke, 2002, p. 440).

Physical appearance: public image versus personal perception

Physical appearance, youth and beauty are mentioned in most of the literature reviewed on ageing (e.g. Ballard et al., 2005; Featherstone et al., 1993; Hurd, 2000; Hurd Clarke, 2002; Öberg, 2003; Sherman, 1994). A pessimistic view exists in relation to ageing women’s supposed decline in physical attractiveness as discussed in the previous section. Yet, with so many positive aspects of ageing, such as greater life satisfaction (e.g. Field, 1997), enhanced resilience and fortitude (e.g. Hamarat, Thompson, Steele, Matheny & Simons, 2002), and an increase in personal growth experiences (e.g. Leonard & Burns, 1999), the preoccupation with outward physical appearance seems to be out of proportion. However, if we examine the phenomenon of ageing within the context of Western culture, we see that contemporary Western society is characterised by an obsession with youth and a fear of ageing. Within this “youth culture” (Hildebrand, 1995, p. 4) people who are not young are psychologically disadvantaged.
Ballard, Elston and Gabe (2005) distinguish between public ageing, or the physical changes in the body’s appearance, and private ageing, which is based on less visible physiological changes in the body. Signs of public ageing can often be concealed, for example, by using cosmetics or hair dyes. Physiological changes, which comprise private ageing, on the other hand, are seen by women as “irreversible indicators of ageing” (Ballard et al., 2005, p. 169).

According to Featherstone & Hepworth (1993), physical appearance is so important in terms of the ageing process, because physical signs of ageing, such as wrinkles, make it difficult for people to hide that they have lived for a long time. As a result, they suggest,

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\text{the wrinkling of the face may come to be seen as a gradual masking of the individual’s sense of ‘true’ personal identity which is increasingly concealed and more difficult to express as time passes (Featherstone et al., 1993 p. 310).}
\]

On the other hand, studies such as that conducted by Ballard et al. (2005) found that women perceived the private, physiological, changes to be an inevitable part of getting older. These private changes appeared to confirm their subjective sense that they were actually getting older. (Ballard et al., 2005). Rather than use “age-resisting practices” (Ballard et al., 2005, p. 173), which they felt created a “false image” (Ballard et al., 2005, p. 180), the women in the study wanted to “age gracefully” (Ballard et al., 2005, p. 180). They felt that this was,

\[
\text{not only to provide a socially acceptable image, but also a personal identity that was congruent with their inner sense of ageing. The positive route to ageing … was by means of avoiding looking like ‘mutton dressed as lamb (Ballard et al., 2005, p. 180).}
\]

Hurd Clark (2002) believes that appearance is of concern to most women and that they want to look attractive to others. She also agrees that,
aging and the perceived loss of beauty (in light of the existing beauty ideal) constitute a threat to an older woman’s sense of social currency, self-esteem, and identity (Hurd Clark, 2002, p. 430).

On the other hand, however, Hurd Clark (2002, p. 436) found that half of the women in her study believed “they had ‘earned’ their wrinkles through their life struggles and experiences and thus they were a badge of honour.”

Like Ballard et al. (2005), Featherstone et al. (1993) also distinguish between public images (of ageing) on the one hand, and personal perceptions on the other. They suggest that instead of merely accepting images of old age as “accurate descriptions” (Featherstone et al., 1993, p. 304), we should find out how these perceptions influence people’s lives. Rather than make generalisations about ageing, they stress the need to focus on individual personal experience.

Successful ageing and life satisfaction

A central concept that has been highlighted in the literature is whether the process of ageing is “successful”. In addition, successful ageing is often equated with life satisfaction (Fisher, 1992). According to Fisher (1992, p. 191) life satisfaction is often described in terms of “past expectations and present circumstances” while successful ageing often refers to “strategies for coping in later life and maintaining a positive outlook” (Fisher, 1992, p. 191). For the purposes of the present study, the two concepts are regarded as having a reciprocal influence on each other.

Ranzijn and Luszcz (1999, p. 94) define ageing as “a process of adaptation to age-related changes” and successful ageing, as “successful adaptation, the measure of success being the maintenance of wellbeing.” Based on their research, these authors found that acceptance of how one has lived one’s life, was an important predictor of wellbeing, or successful ageing, in older adults. In terms of Erikson’s theory of psychosocial development, if individuals are
unable to accept the way they have lived their lives, they may find themselves in a position of despair.

According to Havighurst (cited in Fisher, 1992, p. 191), “successful aging involved conditions under which a person gets a ‘maximum of satisfaction and happiness’”. It seems that consensus has not been reached about which “conditions” are required for successful ageing (Fisher, 1992). Fisher (1992, p. 194) is of the opinion that we need to understand successful ageing in terms of the “relational world” of the elderly person. Fisher (1992, p. 194) believes:

(o)lder people hold the key to a richer understanding of the subjective meanings of concepts such as successful aging and life satisfaction, the relevance of such concepts to their lives and their particular age cohort, and the standards they use to determine life satisfaction and successful aging in later life.

Fisher (1992) adds that:

In one sense, the “healthy” or “optimal” self in later life is related to what one has been (through positive interpretations), and is also flexible and responsive to the challenges and changing circumstances during which new aspects of self may emerge.

Successful ageing, therefore, seems to be a life-long process based on a person’s outlook. A flexible attitude and an ability to adapt to change are seen to be a valuable tools for further adaptation in the future (Fisher, 1992).

Hilleras et al. (2001) discovered that the majority of studies carried out with elderly people focused on negative aspects of ageing such as physical and cognitive decline. They wanted to find out more about life satisfaction in people aged 90 years and older for a number of reasons. They believed that since this age group had probably outlived many of their friends and family members, and were themselves close to dying, that these factors could
impact negatively on their life satisfaction (Hilleras et al., 2001). According to these researchers, results of earlier studies were inconsistent. Certain studies showed that life satisfaction was not strongly correlated with age, indicating that life satisfaction remains stable over time (Hilleras et al., 2001). Other studies showed that levels of life satisfaction actually increase with age, while there were still others which showed a decline in life satisfaction in the very old (Hilleras et al., 2001). Context is important in this regard, as decline in life satisfaction could perhaps be associated with poor health.

In their own study, Hilleras et al. (2001), examined the contributions of various factors such as personality, health status, life events, social contacts, activities and religious beliefs towards life satisfaction. Their results showed that “health and an emotionally stable personality were, independent of other factors, the most important factors for life satisfaction among the very old” (Hilleras et al., 2001, p. 72). They conclude their study by saying that even though certain researchers do not believe that older people actually enjoy their lives, their study confirms that “even a very old age group” (Hilleras et al., 2001, p. 87) can have high levels of life satisfaction. It is hoped that findings such as these may help to counter the negative stereotypes of ageing.

A different perspective of successful ageing is that of McHugh (2000), who brings the concept of the ageless self into the discussion. He contends that the ageless self fits well with consumer and popular culture images of successful ageing. According to him, advertising commonly shows older people,

in a blissful and perpetual state of mature adulthood ... the implicit message is that one keeps old age (and decline) at bay through the indefinite prolongation of midlife (McHugh, 2000, p. 106).

As a result, there should be no anxiety about getting older, since the middle years are now associated with ongoing health and vitality. McHugh (2000, p. 106) suggests that “the prolongation of midlife is rivalling the desire for perpetual youth as the leitmotif of contemporary society.” In future, perhaps
the definition of successful ageing will become the ability to halt the ageing process at midlife. It seems that the need to prolong midlife reflects the fear associated with growing older. This fear, in turn, may continue to entrench the negative stereotypes about ageing.

On the other hand, Field (1997, p. 190) believes that despite stereotyped views of ageing as a time of continuous decline, “each individual may have different ups and downs. And for a fortunate few, ‘the best is yet to be’” (Field, 1997, p. 190).

Similarly, Hamarat, Thompson, Steele, Matheny and Simons (2002, p. 360) found that in terms of coping resources, “the oldest old” healthy adults cope as well as younger people do and that “psychologically, old age may be viewed as a time of resilience and fortitude” (Hamarat et al., 2002, p. 360).

In the conclusion to his study, Thomas (2003) calls for a new paradigm of research into successful ageing, which will incorporate social changes, the nature of continuity and individual differences. He believes that it is the task of proponents of successful ageing to counter the predominantly negative stereotypes of older people and, “to place the principles which promote healthy, successful positive ageing in a culturally diverse society … in the foreground of community consciousness” (Thomas, 2003, p. 11).

Although Coleman’s (1992) article predates Thomas’s (2003) above, it seems that Coleman’s approach could be included in this new paradigm of research which Thomas (2003) calls for. Coleman (1992, p. 72) believes that studying “the meaning that a person finds in life” is critical in terms of understanding successful ageing. This so-called ‘life story’ approach, in which individuals construct their own life stories, has led to “a renewed respect for people not only as subjects of research but as informants of their own lives” (Coleman, 1992, p. 74). The goal of this type of research is not to discover universal truths, make predictions, nor to control, but rather to “explicate contexts and thereby to achieve new insights and new understandings” (Coleman, 1992, p. 74).
Perceptions of Ageing – a growing field of interest

According to O’Reilly, Thomlinson and Castrey (2004), to date, little research has been conducted about women’s perceptions of ageing. They believe that further research is needed in this area because of women’s increasing longevity, and also because “attitudes and perceptions are central to satisfaction, self-image, self-esteem, cognitive function, and emotional well-being” (O’Reilly et al., 2004, p. 3).

Fears and concerns

Fear of ageing or “aging anxiety” (O’Reilly et al., 2004, p. 10) is a perception which has received little attention. It seems to be an important area to focus on, since previous research has shown that emotions, such as fear, influence neurotransmitters which in turn affect the body, behaviour and immune system response (O’Reilly et al., 2004).

O’Reilly et al. (2004, p. 3) looked at women’s “dominant concerns about getting older”. These concerns included health problems, not having enough money, being alone, loss of psychological or emotional well-being, loss of appearance, and concern about their ability to take care of themselves in the future. In addition, they explored whether women’s perceptions and concerns about ageing differed according to factors such as age, marital status, employment status, education and fear of ageing (O’Reilly et al., 2004). According to their results, there was a significant difference regarding ageing concerns in terms of age and marital status, but not by occupation, education or fear of getting older. In other words, it seemed that factors such as whether a woman was employed or unemployed (or retired), for example, or how many years of education she had received, differed in terms of the effects these factors had on individual women’s perceptions of ageing.

In terms of the age differences, younger women were found to be more fearful of ageing than older women. This may reflect the life stage of the women concerned. It seems possible that older women are less fearful of ageing
because they may have more self-acceptance which younger women may not yet have acquired. A variety of other contextual factors may also be involved.

With regards to marital status, women who had never married, or who had been separated seemed to fear getting older far more than women who were married, widowed or divorced (O’Reilly et al., 2004). The authors suggest that possibly never being married or being separated could be associated with more uncertainty and anxiety than widowhood or divorce which had more “finality” (O’Reilly et al., 2004, p. 11) and possibly greater financial certainty.

According to O’Reilly et al. (2004, p. 10) the most striking finding of their study was “the frequency and effect of the fear of getting older”. Nearly half of the subjects reported that they were afraid of getting older. It was not surprising that health problems were mentioned by most of the women as a major concern in relation to ageing. The researchers believe that this finding could have serious implications in terms of physical health since they believe that this fear could actually lead to an increase in somatic complaints (O’Reilly et al., 2004). This corresponds with research which has shown that an attitude of optimism, on the other hand, can lead to positive health effects, including increased longevity (O’Reilly et al., 2004).

A further concern mentioned by certain of the participants, was appearance. However, many more women mentioned appearance, in general, as a major concern, than those who cited losing their youthful appearance (O’Reilly et al., 2004). According to this, O’Reilly et al. (2004, p. 12) suggest that women are more concerned with “wanting to look their best at any age” than with trying to look younger.

In the conclusion to their study, O’Reilly et al (2004) suggest that it may be a difficult task for caregivers to get women to voice their fears and concerns about ageing since they may fear social judgement. However according to the authors,
women’s success in aging will directly affect the society in which they live, and this research is relevant to any health care provider who works with women. Caregivers who help older adults process their fears and develop positive self-perceptions of aging might also help them live longer, healthier lives (O’Reilly et al., 2004, p. 12)

Age Identity

The concept of age identity seems to be a prominent feature in studies of perceptions of ageing (e.g. Kaufman & Elder, 2002; Russell et al., 2004; Sherman, 1994;). According to Kaufman et al. (2002, p. 169) “age identity refers to the subjective evaluation of a person’s age which is subject to individual and historical experiences.”

Sherman (1994, p. 397) reports that there has been a growing interest in the concept of age identity which has been examined from both a “role/social structural point of view and from a psychological/ life span development perspective.” The first perspective has been used to explore individual’s self-perceived identity as old or elderly whilst the second has been used to examine transitions in middle age. Sherman’s research focused on participants’ own interpretations of their ageing process based on the belief that “the individual takes an active role and interprets the messages on aging in his/her own way” (Sherman, 1994, p. 397).

According to Sherman (1994, p. 339), even though chronological age is an important factor in terms of age identity, their correspondence “is far from perfect.” She adds that previous research has shown that many people over the ages of 65, and even 80 do not consider themselves to be old. She says “frequently we hear ‘I know I’m older, but I don’t feel older” (Sherman, 1994, p. 398). Kaufman (cited in Sherman, 1994, p. 399) referred to the concept of the “ageless self” to illustrate the continuity of identity over time. She says:

I have heard many old people talk about themselves, their pasts and their concerns for the future. I have observed that when they talk about
who they are and how their lives have been, they do not speak of being
old as meaningful in itself; that is, they do not relate to aging or
chronological age as a category of experience or meaning. To the
contrary, when old people talk about themselves, they express a sense
of self that is ageless – an identity that maintains continuity despite the
physical and social changes that come with old age …Being old per se
is not a central feature of the self, nor is it a source of meaning
(Kaufman in McHugh, 2000, p. 104).

According to Furstenberg (In Sherman, 1994) people judge themselves as old
when they believe that they fit certain criteria associated with old age. A
change in health was found to be the most common reason for starting to feel
old. It is interesting that “comparative health was as strongly related to health
as was functional health” (Sherman, 1994, p. 400). Bultena and Powers (in
Sherman, 1994, p399), offer an explanation for this. They believe that
individuals who feel “better off” than others their age often consider
themselves middle-aged, rather than old. Not only does our identity
“depend(s) on how we compare ourselves with other persons … but also on
the views we believe others hold of us” (Sherman, 1994, p. 404). By
comparing herself to how she was at an earlier age, a woman may also
redefine herself in terms of her age identity. (Sherman, 1994).

A further factor that is often mentioned with regards to age identity, is physical
appearance. As mentioned previously, many women feel that there is a
contradiction between the age they feel and their physical appearance. Karp
(cited in Sherman, 1994, p. 406) refers to this as, “a paradox about aging.” A
further paradox, however, may also be based on other “outward signs, such
as chronological age or retirement” (Sherman, 1994, p. 406). Here, a woman
may feel, that at 65, for example, that she is “too young” to be retiring.

The concept of “being 'off-time’” (Sherman, 1994, p. 405) was also connected
with age identity. The idea of “being 'off time’” is related to the impact that
individual formative experiences have on a person’s life span (Bee, 1996).
According to Neugarten (cited in Bee, 1996, p. 11) “events that are ‘on time’,
that follow a ‘normal expectable life cycle,’ are less disruptive or difficult than those that are ‘off time.’” A woman who gives birth to her first child when she is over forty years old, for example, will probably find her 50's to be a very demanding time. Her experiences will be very different from those of other women of her cohort whose children have already left home, and who may be experiencing greater personal freedom as a result. According to Sherman (1994, p. 405) for women who were ‘off-time’, “the fact that they did not follow the timetable expected by society” affected their age-identity. This is a further example of the way in which a woman’s identity is affected by the society in which she lives.

The results of Sherman’s study (1994, p. 409), however, indicated that “different persons were aware of feeling older at different times in the life course, not only when reaching the age that is defined by society as “old”, and frequently, not even when reaching that age”. Hurd Clarke (2002, p. 440) concurs with this view. She believes,

there is room to resist and challenge socially constructed meanings and interpretations of growing older and to develop and propose alternative and liberating understandings of later life.

Conclusion

The literature review reveals a number of themes and questions regarding women’s perceptions and experiences of ageing. Certain of these themes have been highlighted in this chapter. Where once these themes may have been regarded as reflecting the ‘normal’ ageing process of ‘most’ women, it seems that the focus has shifted to an examination of individual women’s personal perceptions and interpretations of ageing within the context of their day-to-day lives. The present study aims to continue with the work of ‘giving a voice’ to individual women to tell their own stories.
CHAPTER 3

RESEARCH APPROACH

Introduction

A large body of research exists on factors associated with ageing (e.g. Ballard, Elston & Gabe, 2005; Cross & Markus, 1991; Field, 1997; Fisher, 1992; Hamarat, Thompson, Steele, Matheny & Simons, 2002; Hillerås, Jorm, Herlitz & Winblad, 2001; Hurd, 2000; Leonard & Burns, 1999; McHugh, 2000; Ranzijn & Luszcz, 1999). The majority of these studies are quantitative in nature, and are informed by positivist ideas which advocate “a stable and unchanging external reality” (Terre Blanche & Durrheim, 1999, p. 6) that can be objectively observed, measured and described. While these studies provide important statistical information, they fail to acknowledge the individual experiences of the participants. In the present study the aim is, therefore, to give voice to the women interviewed about their own personal perceptions and experiences of ageing. Rather than provide ‘objective measurement’, this study hopes to provide rich and detailed descriptions of their worlds. According to Schwandt (2000), qualitative inquiry is based on a desire to understand the speech and action of other human beings. A qualitative research approach was, therefore, selected as being the most suitable for achieving the aims of the current study.

This chapter will focus on the research approach used in this study. It will begin with a brief description of postmodernism, the underlying ontology of the study. The interpretive research paradigm will then be described, and this will be followed by a description of qualitative research. The role of the researcher will be set out, and the sampling, data collection, and the data analysis processes used in this study will then be described.
A brief word about postmodernism

The preceding modern era assumed that the world was “understandable, controllable and predictable” (Rapmund, 2000, p.104). In other words, it was believed that “the truth’ existed ‘outside’ in the world awaiting our discovery” (Turner, 1994, p. 9). ‘Reality’ could, therefore, be discovered if the researcher used empirical or “traditional experimental methods” (Rapmund, 2000, p.125), which focused on the measurement of “objective facts” (Neuman, 1997, p. 14), which were “free of observer bias … (and) devoid of the subjects’ larger context” (Rapmund, 1996, p. 102). In postmodernism, on the other hand,

there are no enduring, absolute, or universal truths; no stable autonomous knower; no logic, rationality, or reason independent of a social system endorsing these mental processes; and no objective language to describe reality (Turner, 1994, p. 9).

The world is seen as,

a multiperspectival, multiconstructed universe in which each viewer creates his or her own reality and for whom that reality is his or her own truth (Becvar & Becvar, 2000, p. 15).

Since the aim of the present study is to explore the way in which individual women subjectively perceive and experience ageing, postmodernism was selected as the most suitable ontological approach. This approach allows for “the expression of many voices, rather than a reliance on the voice of an expert” (Hoffman, 1992, p. 16). Postmodernism emphasises that meaning is created by people in their interaction with each other. At the same time, this does not mean that all accounts are equally valid, and we should “beware of any singular, totalizing account that claims to contain the whole truth and nothing but the truth” (Doan, 1997, p.129). Certain accounts may be disrespectful or prejudicial (Rapmund, 2000). Those who are in power are able to “define what counts as knowledge” (Hare-Mustin & Marecek cited in Turner, 1994, p. 9), and since language is the medium through which
knowledge is expressed, language and “legitimate ‘truth’” (Turner, 1994, p. 9) are also controlled by those in power. An example of one of these “prevailing social discourses” (Turner, 1994, p. 9) is the view that after the age of 40, a woman’s life goes into decline (Gergen, 1990, p. 471). Postmodernism, reminds us, therefore, of “the inherent danger of the one story that has no room for alternate accounts” (Doan, 1997, p. 129).

Having briefly described postmodernism as the ontology of the study, the interpretive research paradigm will now be discussed.

**The Interpretive Research Paradigm**

In the present study, the interpretive research paradigm has been chosen as being the most suitable for the topic being researched. The aim of interpretive research, according to Terre Blanche and Kelly (1999, p. 123) is “to describe and interpret people’s feelings and experiences in human terms rather than through quantification and measurement.”

The interpretive approach is, therefore, concerned with the subjective meanings people attach to their experiences and it recognises the importance of the social context in which that meaning is created.

The structure of the following section, which highlights certain important features of interpretive research, is based on Terre Blanche and Kelly (1999).

**Understanding in context**

From an interpretive viewpoint, In order to understand what a particular action means, the researcher needs to interpret what the participants or actors are doing. This is the process of achieving *verstehen*, or understanding. (Schwandt, 2000). According to Bleicher (in Terre Blanche & Kelly, 1999, p. 125),
the meaning of human creations, words, actions and experiences can only be ascertained in relation to the contexts in which they occur. This includes both personal and societal contexts.

Through this process of “recontextualisation” (Terre Blanche & Kelly, 1999, p. 125) the meaning of the text or action is then understood from a more ‘empathic’ viewpoint. Verstehen is often translated as “empathy” (Terre Blanche & Kelly, 1999, p. 125) and by focusing on the context, interpretive research aims to give the reader an idea of how another person’s reality ‘feels’.

However, according to Ricoeur (cited in Kelly, 1999, p. 399) “there is more to understanding of an experience than can be ascertained from within the context of experience.” Therefore, he suggests,

that understanding of a situation needs to be developed both from the perspective of being in the context (empathy) and from the perspective of distanciation, using interpretation (cited in Kelly, 1999, p. 400).

In other words, the researcher should follow a both/and approach rather than an either/or approach (Rapmund, 2000). This ‘distanciated’ approach allows the researcher to draw on the dominant narratives, or other theories or stories from the wider social context.

The present study will offer an interpretive description of how the three participants feel about ageing. This will include both the “‘insider or ‘first-person’ empathic perspective, and context, as well as more ‘distanced sceptical understanding’ or ‘outsider’ or ‘third-person’ perspective” (Kelly cited in Rapmund, 2000 p. 126). The “insider perspective” will make sense of their experiences “from within the context and perspective of human experience” (Kelly, 1999, p. 398). The “distanciated” perspective will draw on social constructionist ideas and will include ‘grand narratives’ as well as theory relating to how ‘ageing’ women are viewed in society.
Social constructionist ideas informing this study

In terms of the interpretive research paradigm’s focus on the social context, it shares certain ideas with social constructionism. The notion of distanciation, mentioned above, is also consistent with social constructionist ideas (Rapmund, 2000). Like the interpretive paradigm, social constructionism is concerned with interpretation and meaning. However, social constructionists “[locate] meaning in an understanding of how ideas and attitudes developed over time within a social community context” (Dickerson & Zimmerman, 1996, p. 80). They also concern themselves with grand narratives or “discourses” that are formed by, and in turn influence, people and that take on normative views against which people measure themselves” (Dickerson & Zimmerman, 1996, p. 80). This focus on “discourses” highlights the importance of language in social constructionism. According to Berger and Luckman (cited in Rapmund, (1996, p. 92), “we socially construct reality by our use of shared and agreed meanings communicated via language; that is our beliefs about the world are social inventions”. Thus, if language is social, it follows that the meanings of words fluctuate according to the context (Durrheim, 1997). In order to understand the meaning of a word, therefore, we need to compare it to other ways in which it is used. For example, the way in which we interpret the word ‘ageing’ is based on the way in which ‘ageing’ is constructed against a “background of socially shared understandings” (Durrheim, 1997, p. 181).

In terms of the present study, social constructionist ideas fit with the researcher’s postmodern, interpretive paradigm since social constructionism “privileges multiple selves, multiple meanings, multiple contexts” (Dickerson & Zimmerman, 1996, p. 81).

The self as instrument

Positivist researchers, who believe in an ‘objective reality’, are able to utilise standardised measuring instruments to collect and analyse data. An interpretive researcher, on the other hand, is the “primary instrument” (Terre Blanche & Kelly, 1999, p. 126) in the research process. He or she, therefore, has to hone his or her listening and interpretive skills in order to produce research which is of good quality.
Data collection

Terre Blanche and Kelly (1999) explain that the term ‘data’ is not entirely acceptable from an interpretive perspective. They describe ‘data’ as “bits of discrete information that can be extracted from their context” (Terre Blanche & Kelly, 1999, p. 127). However, interpretive researchers prefer to use material that is “not broken into discrete bits” (Terre Blanche & Kelly, 1999, p. 127) since they believe the meaning would be lost if the information was studied in isolation. In addition, interpretive researchers do not follow the same set of fixed procedures used in quantitative research. Different phases of the research may overlap and the researcher may reformulate the research question in light of new material that he or she may have found. The method of sampling may also be changed “in response to new findings” (Terre Blanche & Kelly, 1999, p. 127). With reference to the present study, the term ‘data’ will still be used to refer to the material collected and analysed, since it is a term that is generally understood.

Collecting data in context

Interpretive research is “concerned with making sense of human experience from within the context and perspective of human experience” (Kelly, 1999, p. 398). As a result, interpretive researchers study “feelings, experiences, social situations or phenomena as they occur in the real world, and therefore want to study them in their natural setting” (Terre Blanche & Kelly, 1999, p. 127). In other words, interpretive research is concerned with studying data in context. Ironically, however, just by focusing on a particular topic, one already ‘separates’ it from its context (Terre Blanche & Kelly, 1999). The task of the interpretive researcher is, nonetheless, to try not to “disturb the context unduly, but (to) attempt to become a natural part of the context in which the phenomenon occurs” (Terre Blanche & Kelly, 1999, p. 128). One of the ways this can be done is by conducting interviews and by interacting with participants in an open and empathic way.
Having described the interpretive research paradigm, a general discussion of qualitative research will follow.

**Qualitative Research**

A qualitative research approach has been used in this study because it is consistent with the interpretive paradigm (Terre Blanche & Kelly, 1999). Denzin and Lincoln (2000, p. 3) define qualitative research as,

> a situated activity that locates the observer in the world. … [Q]ualitative research involves an interpretive naturalistic approach to the world. This means that qualitative researchers study things in their natural settings, attempting to make sense of, or to interpret phenomena in terms of the meanings people bring to them.

“The goal of (qualitative) research is defined as describing and understanding (Verstehen) rather than the explanation and prediction of human behaviour” (Babbie & Mouton, 2001, p. 53) which is more consistent with quantitative, modernistic research. The former links with the interpretive approach previously described. The latter, on the other hand, is more consistent with a Cartesian-Newtonian philosophy which seeks “causal or mechanistic explanations of ‘observed behaviour’” (Coleman, 1993, p. 123).

According to Babbie et al. (2001), qualitative research has the following features which distinguish it from quantitative research:

- The research is carried out in the natural settings of the participants.
- The process of the research is emphasised, rather than the outcome.
- The focus is on the participant’s (or “insider's”) view rather than on ‘outsider's’ views.
- The aim is in-depth (“thick”) description.
- Social action is understood in terms of its specific context.
• An inductive approach is often used that results in new hypotheses and theories.
• The self of the qualitative researcher is regarded as the “main instrument” (Babbie et al, 2001, p. 270) in the research process.

Qualitative researchers use methods which allow for,

rich and detailed observations of a few cases and allow the researcher to build up an understanding of phenomena through observing particular instances of the phenomena as they emerge in specific contexts (Durrheim, 1999, p. 47).

Moon, Dillon & Sprenkle (cited in Rapmund, 1996) mention several characteristics of qualitative research designs which are applicable to the present study. These are:

1. **Theory.** A particular theory or approach is selected which guides the researcher in the study. In the present study, an interpretive approach has been selected.

2. **Purpose.** This is stated clearly at the outset. In terms of the present study, the purpose is to give voice to individual women about their perceptions of their ageing experience.

3. **The role of the researcher.** As the “main instrument” (Babbie et al., 2001, p. 270) in the research process, the researcher becomes a participant in the research. Unlike the quantitative researcher who aims for ‘objective observation’, in qualitative research, the researcher’s presence is always explicit. A qualitative researcher uses his or her personal insight, feelings, and perspective to understand what he or she is studying, and is also aware of his or her values, assumptions and biases (Neuman, 1997). In the present study, the researcher formed a relationship with the participants. The researcher’s personal reflections are also included after each interview in order to make her participation explicit. This aspect will be dealt with in more detail later on in the chapter.
4. **Sampling and selection.** According to Babbie et al. (2001, p. 288) sampling within the interpretive paradigm “is often purposeful and directed at certain inclusive criteria, rather than random”. According to Goetz and LeCompte (cited in Rapmund, 1996), many types of sampling are possible within the qualitative research paradigm. These include convenience selection, comprehensive selection, quota selection, extreme-case selection, typical-case selection, unique-case selection, and reputational-case selection. In this study, the sampling strategy used was purposive and convenience selection. Sampling and selection will be dealt with in more detail later on in the chapter.

5. **Data collection.** Data is collected via interviews, observation or through document analysis. Neuman (1997, p. 328) points out that the qualitative data collection process involves “documenting real events, recording what people say (with words, gestures, and tone), observing specific behaviours, studying written documents, or examining visual images”. In this study, interviews, in the form of conversations were held with the participants. These interviews were tape-recorded and were then transcribed. The researcher added her personal observations to the ‘data’ collected. Data collection will be dealt with in more detail later on in the chapter.

6. **Data analysis.** A cyclical rather than linear path is often used in the qualitative research analysis process. Unlike quantitative researchers who do not begin data analysis until they have collected all their data, qualitative researchers look for patterns and relationships, and they begin analysis while they are still collecting their data (Neuman, 1997). Qualitative data analysis usually involves coding and writing of analytic memos, which are both labour intensive for the researcher (Neuman, 1997). In this study, a hermeneutic thematic analysis was used to elicit themes from the data. Data analysis will be dealt with in more detail later on in the chapter.

7. **Results.** These usually take the form of “assertions, discovered theory, or taxonomies (categorical systems)” (Rapmund, 1996, p. 104). In this study, it is hoped that the information elicited from the individual
participants about their perceptions of their ageing experience will help to shed light on how individual women think about and experience ageing.

8. Reporting. The researcher attempts to reconstruct the context studied.

In this study, the researcher discussed the themes elicited from the material and she then conducted a comparative analysis between the themes that were common in all three stories and the literature.

Reliability and validity. These terms have different meanings in relation to quantitative and qualitative research. In terms of quantitative research, "reliability refers to the reliability of the measuring instrument and validity to measuring what it intends to measure" (Rapmund, 1996, p. 105). Qualitative researchers, on the other hand, reject such ‘objective’ measurement and argue that the meaning of phenomena or experience is context-dependent (Durrheim, 1999). Rather than use ‘reliable’ instruments for ‘reliable’ measurement, the qualitative researcher uses him- or herself as the instrument. Validity is still sought in qualitative research, but it is defined,

by the degree to which the researcher can produce observations that are believable for her- or himself, the subjects being studied and the eventual readers of the study (Durrheim, 1999, p. 46).

Validity is often referred to as trustworthiness in terms of qualitative research (Babbie et al, 2001).

The concepts of reliability (dependability) and validity (trustworthiness) will now be explained more fully.

Reliability / Dependability

Durrheim and Wassenaar (1999) point out that since modernist/positivist researchers believe in the existence of a stable and unchanging reality, they value reliability highly as it indicates that their findings are accurate. On the other hand, interpretive or constructionist researchers have different assumptions about reality and do not regard it as unchanging. As a result, they do not expect to find their results duplicated over time, but rather that the
behaviour and opinions of individuals and groups will vary depending on the context. They recommend, therefore, that results be *dependable*, rather than *reliable*. “Dependability refers to the degree to which the reader can be convinced that the findings did indeed occur as the researcher says they did” (Durrheim & Wassenaar 1999, p. 64). Dependability results from descriptions which are rich and detailed and which show how the actions and opinions of the participants result from their interaction in context. In addition, the qualitative researcher “does not eliminate subjective views to get quality data; rather quality data include his or her subjective responses and experiences” (Neuman, 1997, p. 368). *Dependable* data, therefore, result from “detailed descriptions from the researcher’s immersion and authentic experiences in the social world of members” (Neuman, 1997, p. 368).

In this study, reliability/dependability will be achieved by adhering to the “elements of ‘good practice’” proposed by Stiles (cited in Merrick, 1999, p. 30). The researcher will begin by disclosing her orientation. She will explain that she does not regard herself as an ‘expert’ in this field but that she is interested in learning about how individual women perceive their ageing experiences. Secondly, she will engage in an in-depth and prolonged investigation with the material. This will include the establishment of a close relationship with the participants, as well as an intensive study of the material derived from the interviews. Thirdly, via a process of persistent observation, she will remain aware of the “internal processes of investigation” (Stiles cited in Rapmund, 1996, p. 107), how these will affect her, and how they might impact on the investigation. She will note how her own preconceptions about ageing may be challenged and broadened and how she may gain new insights about ageing, which she will share in her report. Fourthly, as part of the “iterative cycling between observation and interpretation” (Stiles, cited in Merrick, 1999, p. 30) the researcher will engage and re-engage with the data (including the audiotapes and transcripts). Her interpretations will then be “grounded” by using direct quotes drawn from the interviews. Finally, the researcher will ask the participants the type of questions that will lead them to give rich descriptions of their own experiences.
Validity / Trustworthiness

Denzin et al. (2000, p. 158) suggest that “the traditional positivist criteria of internal and external validity are replaced by such terms as trustworthiness and authenticity”. According to Stiles (cited in Rapmund, 2000), validity/trustworthiness involves the following aspects:

“Triangulation” refers to “the use of multiple perspectives to check one’s own position against” (Kelly, 1999, p. 430). According to Rapmund (2000, p. 130), triangulation incorporates “information from multiple data sources … multiple data collection … and analysis methods … multiple perspectives to interpret a single set of data, and/or multiple investigators.” In this study the researcher will use multiple perspectives such as the perspectives of the participants as well as various psychosocial theories of ageing, against which to ‘check her own position’. She will also discuss her findings with peers and her supervisor in an attempt to ensure accuracy and credibility.

“Coherence” which refers to the ‘fit’ or the agreement of the interpretation (Stiles cited in Merrick, 1999, p. 29). In this study, for example, the researcher working from a postmodern interpretive position needs to guard against writing in an objective, positivist manner. Interpretations will be offered about the experiences of the three women participants. It is hoped that the study will help to shed light on women’s perceptions of ageing for the readers of the research and help them to achieve greater understanding of this subject.

“Uncovering and self evidence” refers to “making sense of our experiences” (Rapmund, 2000, p. 130). The researcher will reflect on and acknowledge how the research process contributed to her personal growth.

“Testimonial validity” refers to the accuracy or validity of the interpretation as determined by the participants (Stiles cited in Merrick, 1999). In this study, the participants were not asked for their feedback on how their stories were interpreted by the researcher. The researcher felt that the participants might find it confusing to reread their stories, which had been newly constructed in an unfamiliar way. In addition, the researcher made it explicit that she was offering her own interpretation of the participants’ accounts.
“Catalytic validity” refers to the way in which the research process “reorients, focuses, and energizes participants” (Stiles cited in Merrick, 1999, p. 29). In this study the participants were not asked whether they had gained new insights during the research process, however they indicated that they had enjoyed talking to the researcher about their experiences.

“Reflexive validity” evaluates the impact of the data on the researcher’s way of thinking. (Stiles cited in Merrick, 1999, p. 29). In this study, the researcher’s preconceived ideas about ageing were challenged and she was able to form new insights, which she will share with readers.

Merrick (1999, p. 30) says,

reliability and validity, then, are not properties of the research tool as they are in quantitative research. Rather (they) depend on the relationship between the researcher and the research process, as well as between the researcher and the interpretive community.

**Role of the Researcher**

As an instrument of the qualitative research paradigm, the researcher plays an active role in the research process. According to Sciarra (1999, p. 43),

the role behind interpretive understanding emerges from the researcher’s own prior knowledge, interests, values, emotions, and cultural affiliations, which are also subject for scrutiny and examination in the interaction with participants. Qualitative researchers allow themselves to be affected and challenged by the cultural meanings that participants give to their experience that may be different from the researchers’ own meanings.

From the previous extract, it is clear that there is a reciprocal relationship between the researcher and the participants where each party influences the other and where both impact on the research process and on the final product.
Interpretive research assumes that “all findings are constructions incorporating one’s personal view of reality and that these are open to change and reconstruction” (Merrick, 1999, p. 31). The qualitative researcher’s task, therefore, entails making explicit the processes through which her interpretations were formed. This implies that the research process contains reflexive elements. The researcher’s, commitment to reflexivity suggests that the research topic, design and process, together with the personal experience of doing the research, are reflected on and critically evaluated throughout (Merrick, 1999, p. 31).

In keeping with the process of reflexivity, the purpose of the research needs to be stated clearly at the outset. In this study, the researcher informed the participants that she was conducting research on the perceptions of women about their ageing experiences. She told them that she would be interviewing three women of different ages and that her interest was in finding out about their subjective perceptions and experiences of growing older. She explained that it was not her intention to generalise these findings but that she was interested in hearing their unique accounts. During the research process, the researcher learnt about the participants’ thoughts and feelings about ageing, and at the same time, her personal perceptions of growing older were often challenged.

Ethical responsibility towards the participants is a crucial aspect of the researcher’s role. The researcher needs to take extreme care to protect the rights and welfare of the participants. “Ethical research depends on the integrity of the individual researcher and his or her values” (Neuman, 1997, p. 443). Durrheim and Wassenaar (1999) state that the three principles which guide ethical research are: autonomy, nonmaleficence and beneficence. In terms of the principle of autonomy, the researcher needs to “respect the autonomy” (Durrheim & Wassenaar, 1999, p. 68) of all the participants involved in the research process, which includes aspects such as voluntary participation and informed consent. In terms of the principle of
nonmaleficience, the researcher undertakes not to harm the participants in any way, and to try to conduct research that will benefit both the participants and the greater community. This is the principle of beneficience. These principles are incorporated in the following steps taken to ensure that the present study was ethical:

- Informed consent. The participants were asked if they would participate voluntarily in a study which was to be the basis of a Master's dissertation in Clinical Psychology. They were informed that they would be interviewed by the researcher and that these interviews would be tape-recorded. It was then explained that the recorded interviews would be transcribed by the researcher and that this information would be used in the study. It was explained that signing the informed consent agreement (see Appendix A) signified that they understood what their role in the research process would involve, and that they would permit the researcher to use their stories in her research. Finally they were given the option of withdrawing from the study at any time, for any reason.

- Privacy and confidentiality. According to Neuman (1997, p. 452), the ethical researcher,

  violates privacy only to the minimum degree necessary and only for legitimate research purposes. In addition he or she protects the information on research subjects from public disclosure.

In the present study, the participants were assured that their rights to privacy and confidentiality would be respected. The researcher undertook to use pseudonyms in the study in order to protect their identities, and to change other personal details which could identify them.

- Nonmaleficence. In terms of the principle of not harming the research participants the researcher undertook not to use any form of deception. As a trainee therapist, she is also aware that caution needs to be
exercised when talking to individuals about intense personal experiences as this can leave people feeling particularly vulnerable. In order to avoid unnecessary discomfort for the participants, the researcher closely monitored the interview and she informed participants that they had a choice about whether or not to answer particular questions. During one of the interviews she switched off the tape recorder while one of the participants was sharing some particularly private personal information.

- Beneficience. The researcher hopes that the research will help to create new insights and new understandings about individual women’s perceptions of ageing which will benefit the participants as well as the readers, and possibly those who work in the helping professions.

As an important instrument in the research process, the qualitative researcher needs to behave in an ethical and responsible manner towards her participants in order to produce research which is ‘dependable and trustworthy’.

**Sampling and Selection**

Since the goal of the current study is for an in-depth understanding of the perceptions of women towards ageing, a small sample of “information-rich cases” (Terre Blanche & Durrheim, 1999, p. 45) was selected. Unlike quantitative research, generalisability was not a goal in this study.

The sampling strategy used, therefore, was that of purposive and convenience selection. As the researcher wanted to interview women of different ages, she approached three women ranging in age from 48 to 91 years and invited them to participate in this study. Each of the women selected agreed to take part in the study. All of the women were white, and all spoke English fluently.
Data Collection

The method used to obtain information was the interview. Interviews can be structured, semi-structured or unstructured. An unstructured interview was used in the present study as it “can provide a greater breadth of data than the other types” (Fontana & Frey, 2000, p. 652). Gubrium and Holstein (cited in Fontana & Frey, 2000, p. 647) note that “the interview has become a means of contemporary storytelling, where persons divulge life accounts in response to interview inquiries”. The interview in this sense is, therefore, regarded as a “more natural form of interacting with people” (Terre Blanche & Kelly, 1999, p. 126) than other data collection methods, and fits well with an interpretive approach. The researcher was interested in exploring what ageing meant to each participant, and using an unstructured interview allowed the participants to talk freely about their perceptions and experiences.

Fontana and Frey (2000, p. 663) believe “interviews are seen as negotiated accomplishments of both interviewers and respondents that are shaped by the contexts and situations in which they take place”. The interview is regarded as being a reciprocal interaction between the interviewer and the participant where,

whatever meanings are created in the interview are treated as co-constructed between the interviewer and the interviewee. These meanings are, moreover …products of a larger social system (Terre Blanche & Durrheim, 1999, p. 153).

These ideas are coherent with social constructionist ideas.

The interview provided information about how the individual participants perceived their ageing experience. A relationship was formed with each of the participants, and the interview was adapted to each individual. The interviewer asked questions based on the information provided by the participant. After the interview was held, the conversation was transcribed by
the researcher who then identified themes based on her subjective interpretation of the material.

**Data Analysis**

According to Neuman (1997, p. 426) data analysis involves a “search for patterns in data” which are then interpreted “in terms of a social theory or the setting in which it occurred”. This implies that the process of data analysis aims to order the data and to impose meaning onto it.

In keeping with the interpretive approach selected, data was analysed using hermeneutic thematic analysis.

Hermeneutics is the practice of interpreting the meaning of the text and it had its origins in the interpretation of ancient religious and judicial documents (Rennie, 1999). Woolfolk, Sass and Messer (1988, p. 8) describe human life as “inescapably enmeshed in a web of meaning”. They explain that the “hermeneutic circle describes the contextual nature of knowledge” (Woolfolk et al., 1988, p. 7). Interpretation is believed to occur,

within a circle in which parts are always interpreted within some understanding of the whole, which in turn is understood by coming to understand constituent parts (Woolfolk et al., 1988, p. 7).

This means that information can only be interpreted within a larger context of meaning. There is a constant circular movement between part and whole (Kelly, 1999).

Three processes associated with hermeneutic thematic analysis are the processes of immersing, unpacking and associating (Kelly, 1999). *Immersion* refers to the researcher familiarising herself with the material collected until she is aware of the “details and nuances” (Kelly, 1999, p. 409). *Unpacking* is described as a “stock-taking activity” (Kelly, 1999, p. 409) where the meanings of the text are unpacked in a way which is metaphorically
compared to unpacking a suitcase (Kelly, 1999). This process helps to generate meaning. _Associating_ involves “interpreting material in relation to a broader theoretical, historical, cultural or political framework” (Kelly, 1999, p. 410).

Terre Blanche & Kelly (1999) identify the following steps in the data analysis process.

1. Familiarisation and immersion
The researcher begins to develop ideas and theories about the topic being studied from the beginning of the research process (Terre Blanche & Kelly, 1999). By the time the data analysis process begins, the researcher already has a precursory idea as to the data’s meaning (Terre Blanche & Kelly, 1999). She then familiarises herself with the text by reading and re-reading the text until she knows,

   more or less what kind of things can be found where, as well as what sorts of interpretations are likely to be supported by the data and what not (Terre Blanche & Kelly, 1999, p141).

2. Inducing themes
Terre Blanche and Kelly (1999, p. 141) say “induction means to infer general rules or classes from specific instances”. This is a “bottom-up approach” (Terre Blanche & Kelly, 1999, p. 141) and it involves extracting or identifying underlying themes from the material. A “top-down approach” (Terre Blanche & Kelly, 1999, p. 141), on the other hand, tries to find examples in the material which fit under predefined categories. During the process of “inducing themes”, Terre Blanche and Kelly (1999, p. 141) suggest using the participants’ own language rather than more ‘scientific’ language, and they encourage the researcher to “think in terms of processes, functions, tensions and contradictions” rather than merely to paraphrase the content. The researcher is also advised to look for meta-themes in the material, under which sub-themes may be included, rather than to have too many themes.
This will help the researcher to achieve “an optimal level of complexity” (Terre Blanche & Kelly, 1999, p. 142).

3. Coding
The coding phase entails “breaking up the data in analytically relevant ways” (Terre Blanche & Kelly, 1999, p. 143). In other words, the researcher identifies ‘pieces’ of information, such as a phrase or a paragraph, which are relevant to one or more of the themes (Terre Blanche & Kelly, 1999). Terre Blanche & Kelly (1999) believe that the processes of inducing themes and coding overlap, and that both themes and codes facilitate a better understanding of the data.

4. Elaboration
The process of elaboration entails a closer examination of the themes in order “to capture the finer nuances of meaning not captured by (the) original” (Terre Blanche & Kelly, 1999, p. 144). During this phase, the researcher may amend her coding system, and the themes and material may be structured and restructured several times. Terre Blanche and Kelly (1999, p. 144) advise the researcher to “keep coding, elaborating and recoding until no further significant new insights appear to emerge.”

5. Interpretation and checking
During this final step, the researcher presents a written account of the topic she has studied, which she structures according to the themes which have been derived from the material (Terre Blanche & Kelly, 1999). During this time she also examines the work closely in order to deal with “contradictions” (Terre Blanche & Kelly, 1999, p. 144) and to minimize “over-interpretation” (Terre Blanche & Kelly, 1999, p. 144). In addition, the researcher should reflect on her role in the data collection and interpretation process, and explain how her personal perceptions “may have coloured the way (she) collected and analysed the data” (Terre Blanche & Kelly, 1999, p. 144).
In this study, the research process proceeded in the following way:

**Step 1:**
The participants were interviewed and the taped interviews were transcribed by the researcher.

**Step 2:**
In order to immerse herself in the data, and to familiarise herself with it, the researcher read the transcribed interviews whilst she carefully listened to the tape recordings.

**Step 3:**
The researcher engaged in a process of carefully reading and rereading the original transcripts in order to identify patterns and themes which were relevant to the research context, namely, the way in which the participants perceived ageing. During this stage the researcher engaged in a hermeneutical process of moving back and forth between the parts of the story and the whole story and also between being involved and being distanciated. This process allowed for the elaboration of themes (Terre Blanche & Kelly, 1999).

**Step 4:**
Having broken down the information into themes, the researcher was then required to “put it all together again” (Terre Blanche & Kelly, 1999, p. 415). The researcher achieved this by adding her interpretation to the themes which had emerged. An attempt was made to provide a “thick” description of each of the participant’s accounts in order to understand each person’s perceptions of ageing more fully. The researcher’s goal was to create an account which was both recognisable for the participants, but which may also have helped them to view ageing from a different perspective.

**Step 5:**
The researcher conducted a comparative analysis between the common themes which recurred in the accounts of the three participants, and these
were then linked to the literature on women’s perceptions and experiences of ageing. It should be noted that although there were certain common themes, these themes were idiosyncratic to each particular woman’s account. The aim of the comparative analysis was not to generalise the finding to a larger population, rather, it was hoped that the shared themes would allow for a greater understanding of women’s perceptions of ageing by including multiple voices, even the ‘expert’ voices from literature.

Step 6:
The study was evaluated in the concluding chapter, and recommendations were proposed for future research.

Conclusion

In this chapter the research approach used in the present study was discussed. It began with a description of the ontology of the study, namely postmodernism, which proposes that reality is multi-faceted and comprises multiple selves, multiple meanings and multiple contexts (Dickerson & Zimmerman, 1996). The interpretive approach was then described. The interpretive research approach is “concerned with making sense of human experience from within the context and perspective of human experience” (Kelly, 1999, p. 398). An interpretive research approach was, therefore, selected as being the most suitable for this study with the aim of shedding light on the perceptions of individual women towards ageing. The qualitative research process, which was also considered to be appropriate for the purpose of the current study, was then described in general. This purpose is to shed light on perceptions of individual women towards ageing. The study aims to provide rich descriptions of women’s experiences and is not concerned with generalising the results to a larger population. The role of the researcher was then clarified, and the sampling, data collection and the hermeneutical data analysis processes used in the study were then described.
CHAPTER 4

GINA’S STORY OF HER PERCEPTIONS OF AGEING

Personal Data

Participant : Gina Black (pseudonym)
Age : 91
Research setting : The interview was conducted at the participant’s home

Introduction

This chapter is based on two tape-recorded conversations that took place between the participant and I about the participant’s perceptions of ageing. Following careful analysis of the transcribed conversations, certain themes were highlighted. The transcribed conversations may be found in Appendices B and C. It should be noted that the themes identified are not exhaustive, are based on my subjective viewpoint, and are not meant to represent the ‘truth’. It is possible, therefore, that other readers might identify different themes. I might also identify different themes at another time.

A brief personal reflection follows the analysis.

Background

The participant, Gina Black, attended a series of lectures conducted by my mother. As my mother knew I was interested in interviewing a candidate of Gina’s age, she gave me Gina’s contact details and I contacted Gina to find out whether she would be interested in taking part in this research. Gina expressed her willingness to participate, and welcomed me into her home.
Gina’s warmth and vivacity had an immediate impact on me. She shared her life story willingly and I found it very easy to connect with her.

Gina seems to have had an interesting and eventful life filled with diverse experiences. When she was asked about her perceptions of ageing, Gina told me her life story rather than simply focusing on her views on ageing. In some ways it was, therefore, difficult to ascertain how she felt about getting older. There may be many reasons for her having answered the question in the manner in which she did. Perhaps one of the reasons was because ageing does not occur within a vacuum but within the context of a person’s life. For Gina the topic of ageing, therefore, appears to be integrally connected to her perceptions of how she has lived her life so far. It is possibly also a reflection of ageing, that at 91 she has gained a perspective that has helped her to focus on her life as an integrated whole, rather than to view the various aspects as disconnected.

**Gina’s story**

The following themes were identified from Gina’s story.

**Viewing her life as an adventure throughout her lifespan**

Throughout her life Gina has chosen to view her life as an adventure. In her youth, she lived an exciting and eventful life. Now in her 90s her world has narrowed but she continues to rise to the challenges that come her way.

*When she was younger,* Gina lived during very troubled times. She faced danger as a young Jewess living in Nazi Germany and she subsequently fled with her husband to Spain, before returning to Germany, at a later stage just prior to World War II to nurse her ailing mother. The couple managed to escape from Germany a second time and returned to Spain where they remained until the outbreak of the Spanish Civil War. From Spain they fled to South Africa, and they subsequently moved to Lourenço Marques (present
day Maputo), before they returned to South Africa where she subsequently divorced her husband and where she is still living at present.

In spite of the danger she faced during her youth, it seemed that Gina viewed her life as a series of adventures. As a young Jewish woman living in Germany at the beginning of the Second World War, where many harsh restrictions were placed on Jews, she still chose to recall the pleasant times she experienced there as a teenager. She said:

"... When we were teenagers we were also happy because although it was the beginning of the Hitler time, we had a little club and we went to theatres and we went to concerts and we had dances ... Ja, we had a nice time, we really did have a nice time. So of the bad times in Germany, I wasn't really there. I mean I was at the very beginning, but it didn't really affect you. It happened to other people ... when you're so young you don't take things so seriously."

(Interview 2, lines 204 – 211).

Gina’s positive attitude seems to be apparent in her descriptions of so many of the events of her life. Instead of describing her life as having been a series of upheavals, it seemed as though she really regarded her life as an adventure. Once some of her family decided to leave Germany, she married her boyfriend, and she and her husband moved to Spain. Gina felt that she and her boyfriend had almost been ‘forced’ into marriage before they were ready for it, due to the war, as it would not have been considered appropriate for them to have travelled or to have lived together had they not been married. However, despite this, she seemed to enjoy the time they spent together living in Spain. She recalled:

"And then before we knew it, we moved to Spain. Fascinating, very interesting, we didn’t go backpacking, but to move suddenly to a different country in Spain, it is interesting and the Spanish language is beautiful, the Spanish music is beautiful. We didn’t have a bean, but ja, it was all an adventure. Coming here, ja, the same way."

(Interview 1, lines 211-215).

Having left Germany for Spain at the end of 1934, Gina returned there in 1936, as her mother was ill. Despite the inherent danger of being there at
that time, she and her husband were not discovered, and they later managed
to get out of Germany, and return to Spain. It sounds as though during this
time she retained her trust in the German people she had known previously,
and was also able to take risks. She recalled:

If anybody had reported us that we were staying with my mother … but I was born in
that flat and people knew my mother and knew the family and they were not all
violent, virulent Nazis. So we stayed for a year until we managed to get out …
Getting out was also interesting because my passport, as I said, was ok, G’s (her
husband) wasn’t … If the guy there had spotted a possible red “J”… it was a very
dicey situation. Very dicey. We were very much on tenterhooks. Thank G-d we
were young. When you’re very young things are not as traumatic, you do everything
as an adventure. When I think back now, if that had happened to me nowadays, you
know, at my age … but in those days we just took a chance. You do take chances.
But it worked. (Interview 1, lines 512-527).

It seems that Gina felt that as a young person she was able to live in the
moment and face the dangers, almost without thinking about the
consequences. In retrospect, however, she realised how lucky they were to
have escaped undetected. Perhaps she believes that as one gets older, one
becomes more aware of the possible consequences of one’s actions, and
reacts more cautiously. Despite this, she seemed to be quite philosophical
about the ‘daredevil’ way in which she and her husband acted, because their
efforts were successful. In some ways it seemed as though she missed the
carefree abandonment of her youth, when life was exciting and when she was
never sure what would happen next. This in contrast to the life she lives at
present where her daily routine hardly changes although she is proactive in
staying connected to life.

When Civil War broke out in Spain, Gina and her husband moved to South
Africa. As a result of the War, many of their legal documents were lost, and
they did not have the necessary papers to remain in South Africa, where they
were living on a tourist visa. Once again they had to move, this time to
Lourenço Marques. Having arrived there, she seemed determined to make
the most of the opportunity she had to live in yet another foreign country.
Looking back she had fond memories of their life in Lourenço Marques. She recalled:

We loved Lourenço Marques, it was so out of the War. Of course we heard the news about the War, we were very worried about the War, but it didn't affect you personally. We had a ball. The foreign community was mainly English and South African. They had the British Club where we sort of fell in. My husband worked for a South African company, I worked for a South African company … yes, we were very, very happy. (Interview 2, lines 234-240).

It seemed possible that Gina's rich memories of the past helped her to transcend the narrowed world of the present. When she recalled the events of her life, it seemed that she was also aware of the active role she had played in shaping both herself and her life. She explained:

It forms you, it does form you. Every phase adds to … it is the experience, which is somewhere buried in your brain. And in the end that is what you are, what circumstances and life make you and then also what you helped to make yourself. (Interview 1, lines 115-118).

Her constant awareness of her role in shaping her life seems to be an integral part of how she has lived her life so far, and how she continues to live her life. She also acknowledged that she had a “capacity for enjoying things” which seems to have helped her to adapt to the 'narrowed' world in which she now lives.

*In terms of the present*, Gina lives in a residential hotel and she has outlived many of her friends, and family members. While she does have a son and grandchildren who live in the same city that she does, her other son lives overseas with his family. She no longer works having retired at the age of 64 after enjoying a career that spanned 22 years. Despite these changes in her life, it seems that she has continued to grow, largely as a result of the attempts she has made to make her life meaningful. She acknowledged her effort in this regard, saying:
I am interested and I keep interested in what goes on (Interview 1, lines 65-66).

Her continuous curiosity about life may have helped her to view ageing as a further adventure to be undertaken. Thus, while she has no ‘choice’ but to age, she has chosen to be positive about the manner in which she is ageing and this seems to have contributed to her appreciation of her life. She has also continued to take part in activities that she enjoys, such as yoga, as well as lectures given by the U3A (University of the Third Age). Her ability to focus on the positive aspects of her life, such as her continued independence and her relatively good health, seem to have allowed her to continue to “improve (her) life” as well as to experience it as meaningful and satisfying. Although her daily routine seems predictable, she takes pleasure in still being able to do things for herself. Her independence seems to be an important part of her wellbeing. She said:

On the days when I go to yoga then I usually combine it with a little bit of shops or repair places, or the bank or whatever. Then I come home and I take my white yoga stuff off, then I’m happy to sit here. (Interview 1, lines 649-652).

The answer she gave when she was asked about how it felt to be 91 seemed to reflect her satisfaction with her life. She said:

... I find in a way, I am happier now. I said to my son the other day, it took me 90 years to come out of my shell. (Interview 1, lines 7-8).

A further aspect that she felt had enhanced her enjoyment of her life was the freedom she now had from the worry she had experienced when her children were young. Instead of having to ‘worry’ about her children, she was now able to enjoy her relationships with them. She explained:

...I say I’m very happy now. I have no responsibility for my children. You know the daily worries. (Interview 1, lines 43-44).
Compared with the expansive adventurous world of her youth, the world she inhabited as an elderly person, seemed to have narrowed considerably. Despite this, however, Gina did not seem ready to ‘give up’. Rather, she seemed determined to continue to grow and to enjoy the rest of her life-adventure. In the past she successfully rose to the challenges she faced, and it seems that ageing is a further challenge which she is determined to face in a successful manner.

**Connection vs. Disconnection**

The sense of being either connected and/or disconnected, both emotionally and physically, seemed prominent in Gina’s account. The boundary between connection and disconnection seems to be quite blurred in her story, as there often seemed to be instances of connection in the midst of disconnection, and disconnection in the midst of connection.

*In the past*, in terms of her relationships with others, Gina seemed to feel she had to make a concerted effort to connect with others, as this did not come naturally for her. On a personal level she presented herself as a very reserved and shy person, which often caused her to feel quite alienated. Although she often sought connection with others, even when she achieved it, it seemed as though she still felt disconnected at a certain level because of her shyness. “Coming out of (her) shell”, therefore, seems to have taken enormous determination. Even as a teenager in Germany, she recalled that it had been difficult for her to make friends, although she wished to. She said:

I joined a little social club … my mother heard about it and said if you don’t go and talk to this girl and ask her to go with you she said, “then I will talk to her parents.” You see the shyness, the basic shyness I inherited from my mother and she knew how she had actually suffered from it. (Interview 1, lines 167-171).

While she was struggling to make friends, Gina seems to have felt a strong connection towards her mother, who shared this trait of shyness with her. Her mother seems to have been able to help her daughter to connect with others
because she understood how isolated Gina felt. However, Gina still often felt disconnected from others, and her sense of disconnection may have intensified during her frequent moves to different countries.

In terms of her marriage, it seemed as though she experienced a sense of both connection and disconnection with her husband. Although they were “boyfriend and girlfriend”, they married because it was regarded, by their parents and the community, as being the ‘right’ thing to do under the circumstances. At times it seemed that she even regretted marrying him when she was so young. She explained:

I was very young when I got married. Both of us were very young. It was the emigration time under Hitler in Germany. So what did we know, nothing. But we got married because the family didn’t think it was a good idea that we just went off as boyfriend and girlfriend to live in Spain. You know, the Hitler time in Germany threw people together in the most amazing way. Alright he was my boyfriend, but getting married … (Interview 1, lines 31-37).

Despite having married under these circumstances, she focused on the ‘fact’ that they did love each other and in this way, she seemed to have approached her marriage in the pragmatic way in which she approached other things in her life. In other words, once she found herself in a particular situation, she was determined to make it work.

When she and her new husband left Germany for Spain, the first of many foreign countries they were to live in, she may have felt a sense of disconnection from her German-Jewish roots, her homeland, her culture and her language, as well as from her family. At the same time the connection she felt to her husband may have helped her to cope with her feelings of disconnection, and enabled her to connect to her new country. It seems possible, however, that although she had pleasant experiences in the various countries they lived in, it also deepened her sense of disconnection from others, possibly because they were always on the move.
After leaving Spain, Gina and her husband came to South Africa where they lived for two years before moving to Lourenço Marques. She described the first ten years of their marriage as happy, however, she then began to experience a growing sense of disconnection from her husband whom she felt had withdrawn from her and from their two sons. She described the situation:

... he in himself withdrew ... On the personal basis, he was hardly there ...he had withdrawn completely. He was hardly ever there for meals and anyway the boys ... he didn't know how to talk to the boys, he had no relationship with them. (Interview 1, 687-706).

The emotional disconnection between herself and her husband had become too great, and, after 25 years of marriage, Gina decided to divorce him. At this stage they had been living in South Africa for many years. It is possible that she was able to disconnect from him at this time as she now felt more 'at home' and connected to her new country. She recalled:

It was all on a very friendly basis. When I told him I wanted a divorce, he said, “are you sure, are you sure you know what you’re doing?” “Yes, I think it is better.” ... I thought if the children grow up not liking their father, because as they grow older they will watch that there is nothing between us, nothing that was there before. There is no love, no understanding, no confiding. If they grow up hating their father, that I didn’t want, for the children’s sake, you know, not for him or for me. So I said, “I think we’d better get divorced.” He didn’t really want a divorce but anyway that’s what happened. (Interview 1, lines 710-719).

Although she did not emphasise this, it seems likely that this was a very difficult time for her. Gina often sounded quite bitter when she described her ex-husband, and it seems that this bitterness masked her disappointment in him. Having disconnected from each other through the divorce, however, their relationship improved and in the latter years of her ex-husband’s life, they reconnected with each other as good friends. This seems to be an example of the connection Gina experienced in the midst of the disconnection. She recalled a conversation she had with her ex-husband a few years later, when they were older, and able to view their relationship from a different angle. She said:
So we spoke on the phone. He talked about us. He said, “we were very stupid”. I said, “yes, we were very young and stupid”. He built up a very good business in Hamburg and he said, “I wish I were 20 years younger. I wish I would have known 20 years ago what I do now”…But the older he got, the better he became. We were very good friends … So ja, as we got old we got very friendly. (Interview 1, lines 775-785).

It seemed that in disconnecting from her husband, she was able to connect with her ‘self’ and as a result, she found a strength and independence she had not known before. At the same time, she also seemed to find a connection with her divorced friends and she commented on the way in which they discovered their identities after their divorces. She said:

... all three of us came into our own way, improved our personalities, developed, spread out our personalities after we got divorced … yes, that opportunity came when you got rid of your husbands! (Interview 1, lines 797-813).

*Now that she is older*, Gina seems to feel strongly connected to her friends and family members. She described the relationship she now has with her sons as “very good”, and she described her granddaughters as her “very, very good friends”.

Despite the close relationships she has with family members, the hearing loss from which she now suffers seems to have had a significant impact on her relationships with both her family and with others, causing her to feel disconnected from them. She described an incident at a family wedding in Melbourne, Australia, where she could not join in the wedding festivities as a result of being unable to hear. She recalled:

When I realised that the first time I went, I don’t know maybe 3 years ago to Melbourne, and there was the wedding, first the one wedding, the next year the other wedding, the circle of children grew … and then it really hit me. I never had the opportunity before to sit in a group where everybody knows each other and talks to each other, and I couldn’t participate. I could only talk to the person that sat next to me. And I remember that I hadn’t cried in … I cry very rarely, I don’t even remember when I last cried, but when I said goodbye to my son at the airport, I was very sad. And as I sat in the plane, the tears just streamed down and I thought what am I crying
for. And I thought well maybe there’s no point in going again and seeing them again. You know it really had hit me then because I didn’t have any opportunity before then to try this out, to experience that. (Interview 1, lines 134-146).

She continues to feel disconnected and alienated when she is in a group of people and unable to hear what they are saying. She explained:

It is very uncomfortable. It is embarrassing, it makes me uncomfortable and it makes me angry, you know. That is the worst. That is really the handicap to a certain extent. I avoid groups and they know it now. (Interview 1, lines 298-300).

She added that it made her feel like “a decoration” because she was unable to contribute to the conversation and that it made her “unhappy too.” Despite these difficulties, she has tried to come to terms with her diminished hearing. She said:

So … but now I know, I accept it. I know my judgement on hearing-aids, they don’t help. And everybody confirms that. Sitting in a group, you still can’t make out what they say …It does upset me. It does upset me. They know now. But on the other hand they can’t scream around, they’re talking to each other. And so, I do miss a lot there. But once you realise your condition, you have to accept it. There's no point in straining … “what did you?” And no point in keep on asking, “sorry, sorry …?” Some voices don’t carry and that makes it very difficult. Some people talk by nature with a soft voice. Either I pretend, and I say, “really”, and I smile, and they smile as well, but I haven’t really caught on. And as I said, it doesn’t really matter. (Interview 2, lines 146-165).

At times Gina seemed to express ambivalence about her need for relationships with others. On the one hand, she claimed that she was reserved and that she did not need company, yet on the other hand, she often seemed to go out of her way to connect with others. These contradictory ideas may be connected to her shyness and to the difficulty she felt she had in making friends. Her discomfort at not being able to hear in a group also seems to have resulted in her avoiding people at times. Despite this, her sense of detachment did not appear to upset her and, she seemed to value the time she spent alone. She explained:
I don’t have to have people around me all the time. There are people who can’t be alone … It is not me. I watch a bit of television or listen to the radio and when I switch off aah it is so nice and quiet … Yes, I can’t have voices around me all the time. (Interview 1, lines 264-281).

However, although she is able to enjoy her solitude, she acknowledged her need for connection with others and this led her to join the U3A and to pursue other group activities. She said:

... it was mostly ‘get out, go somewhere where there are people.’ (Interview 1, lines 194-195).

In terms of connecting with other people her age, it seemed as though being with people who were a similar age, yet who were not as independent nor as positive as she was, was uncomfortable for her and seemed to increase her sense of disconnection from them. She said:

Some of them are too old and frail to make friends with. (Interview 1, line 152).

She then described a conversation she had with a fellow resident, and said:

... I was talking to one of the ladies … she sat next to me and of course we talked about the weather and about how nice they do this … She’s got no front teeth and somehow I said, “you’re happy? How long have you been here?” “5 years.” And I said, “you’re happy here, it is nice here?” and she said, “it’s enough”. She’s had enough, she doesn’t want to live anymore. Well what’s the point? You know, very depressing and so do I need this? (Interview 1, lines 313-321).

Although she said that she did not think about deteriorating in this way, it seemed as though she needed to distance herself from such a negative way of thinking to prevent herself from becoming depressed.

While Gina often felt disconnected from people her own age as she felt they were not on “the same wavelength”, and that they did not speak “the same language” she did feel that she had an affinity with younger people. She explained:
I have much more in common with the young people. I am interested and I keep interested in what goes on. And my granddaughters, my grandchildren also talk to me. ..., we talk about what goes on. I have more in common and I learn from them too ... we never have a dull moment, they are very, very good friends. (Interview 1, lines 64-71).

The theme of connection vs disconnection seems to recur throughout Gina’s account of her life. In her youth, she found it difficult to connect with others because of her shyness. She was later able to connect with her husband and it seems that their connection helped her to cope with the sense of disconnection she is likely to have felt when she had to leave her family and her home during the war. When they divorced, Gina disconnected from her husband and, at the same time, she seemed to connect with herself and to develop her own identity. She was also able to connect with her ‘new’ country. Later, she reconnected with her ex-husband and they became good friends. Now that she is older, she often feels disconnected from others because of her hearing loss and because her relatively good health seems to make her feel guilty around others her own age who are often not as well as she is. However, this has helped her to connect with others who are younger than she is, and, this seems to have helped her to preserve her sense of youth and vitality.

**Feeling out of synchronisation with the norm**

It seems as though Gina has often felt out of synchronisation with the norm. One of the reasons for this seems to be related to the diverse and unconventional experiences she had in her youth, including her ‘refugee status’ in various foreign countries, which often seemed to make her feel disconnected from others. In this way, the theme of feeling out of synchronisation seems to link with the previous theme of connection and disconnection. A further way in which she felt out of synchronisation, was in the timing of certain key events in her life, which she felt occurred ‘off time’ rather than on time. These events included the timing of her marriage, having her children and her career. Finally, the positive manner in which Gina has
aged appears to have rocked the conventional notions of ageing as ‘decline’, and has caused her to feel notably different from others.

Since Gina’s early adventures were dealt with extensively in the previous theme, this discussion will focus on the timing of key events in her life, and on the positive manner in which she has aged, to illustrate her experience of feeling out of synchronisation with the norm.

In relation to the timing of events in the past, Gina felt that circumstances had dictated that she and her husband get married at a very young age before either of them was ready for marriage. As a result of having married so young, and because they moved so often during the early years of their marriage, Gina had her children later than other women she knew. This seemed to make her feel that she was ‘out of step’ with them. She said:

I had my children late. When I started thinking now is the time we can have a family, I was 10 years older than the others who were 21, 22. (Interview 1, lines 817-819).

However, despite having felt that she was out of synchronisation as an older mother, she managed to become part of a group of younger mothers, which she found was beneficial. It seemed as though ‘motherhood’ was, therefore, a more important membership criterion than age was. She explained:

... I suddenly became part of that group, of the young mothers, at the kindergarten and the early schooldays, so maybe that also kept me younger? (Interview 1, lines 819-820).

In terms of her work, Gina began her 22-year career in personnel when she was about 42. At this stage she had been married for almost 25 years, and her children were at primary school. She said:

At an age when people might already begin to think what they’re going to do when they retire, that’s when I started (to work). It was very unexpected as I say. (Interview 1, lines 19-21).
Going back to work and getting divorced seemed to have occurred within a few years of each other. It seems possible that returning to work helped Gina to gain the independence she needed to end her marriage. As a result of her involvement at work, however, she felt she had less time available to socialise and while she was connecting to her career she tended to disconnect from others. She explained:

I never had a very lively social life. You know. The time when other people began to take it easier, I was very, very involved in my job. (Interview 1, lines 95-96).

Gina’s sense of being out of synchronisation increased because she was the only woman in the company in a middle management position. This seems to have made it very difficult for her to fit in. She explained:

I know I had the reputation of being very hard. Not hard, they were scared of me! I said me! Well I was more scared of them! I was very reserved and it didn’t come easily to me. I forced myself of course. I thought I was very friendly. (Interview 1, lines 12-16).

Even her perception of herself as friendly was out of synchronisation with her subordinates’ perception of her as someone they were afraid of. However, she managed to overcome her difficulties at work and went on to enjoy a fulfilling career which lasted for 22 years. She described it as a “career not just a job” and she seemed to feel that her career had played an important part in shaping her personal development. Perhaps having a career enabled her to feel in control of her life in a way she had not experienced before.

In the present, Gina often seems to feel out of synchronisation with others her age because of her relatively good health. She often seems to feel she is ‘too well’ in comparison to others her age and even felt she might be too far out of synchronisation to be a part of this dissertation. She said:

I may not be a very good example for you because I am so well. (Interview 1, line 1).
She believed that she had little in common with other elderly people whom she felt were on a different “wavelength” mentally as well as physically. In addition, because she is so healthy for her age, she has outlived many of her friends and family members. She spoke, with a great deal of pain, about having lost people who were close to her. It seemed especially difficult for to accept the deaths of friends and family who were younger than she is. She said:

I lost two friends because they aged much more than I did, much before me. They were 10 years younger than I. Most of the people that I say are my age group they are actually 10 years younger … One of them became Alzheimer’s and is in a home somewhere in the Cape. The other one died. Another one died. And my sister, I had one sister who lived in the States, she died. My niece would be that age group of my present friends, 60 ish …she died. I said she’s got no business of dying, she is also much younger than I am, but anyway. I was very upset. (Interview 1, lines 48-58).

In terms of other elderly people with different backgrounds from her own, Gina also seemed to feel that she did not fit in. She explained:

I don’t really need friends, you know, personal friends I don’t need because it’s very difficult. You don’t know the person’s background, they don’t know your background. They are interested when they ask me where do you come from, what’s your accent? Aha, German, So they want to know. But you know, to rattle off your background and then their background is so different, you know. They probably came here as children. Lots of them came from Lithuania or Russia or Poland. That’s very different, never mind that it’s part of Europe … (Interview 1, lines 153-160).

It seemed that because she felt so out of synchronisation with others her age, she went out of her way to form friendships with younger people, with whom she felt she had more in common. At times, however, she was surprised when she discovered women of a similar age, at her hotel, who were ageing well, and who also seemed to be keeping ‘active’ and enjoying their lives. This seemed to make her feel more in synchronisation with them. She said:

Being my age makes me feel that everybody is younger than I am. There are some women here who I always thought …why are they here, they’re really too young.
They do entertainment and took it on to organise the movies and the music evenings. We had coffee at the shopping centre the other day and we were talking about age and she said, “well how old do you think I am?” And I said, “well 60 up to 72, sort of”. So she said, “I’m 80!” So I thought, what am I thinking about? So really, they’re active, they’re young, so I don’t think there’s anything very special about me. (Interview 2, lines 10-17).

Gina seems to have vacillated between feeling out of synchronisation with the norm because she felt she was so different from other people and yet wanting to connect with others. It seems ironic that the very qualities which have kept her ‘young’ and vibrant, such as her relatively good health, have also caused her to feel out of synchronisation with the norm.

Ageing body vs. ageless self

Although, Gina looks much younger than she is, she has still experienced the effects of ageing. She has undergone a decline in her physical functioning, as well as changes in her appearance. The way she feels on the inside, however, does not seem to have changed to the same extent. In other words, she seems to feel that her ‘self’, or innermost being, has not aged. It seems, therefore, as though there is a ‘mismatch’ between her external body, which has aged, and her inner ‘self’, which has not. This links to the previous theme of feeling out of synchronisation, since her mind and body seem to be ‘out of step’.

In this theme, certain visible signs of ageing, highlighted by Gina, will be discussed, and these will be contrasted with her ‘ageless’ attitude towards them. It is hoped that this will illustrate how, on the one hand, the ‘outer’ physical changes she has experienced appear to be ‘reality checks’ which remind her that she is ageing, but on the other hand, she does not identify with being 91, and she refuses to act old. She said:

It is just the last few years that I actually aged. When I was 80 I wasn’t any way different from 70. I didn’t look 80, I didn’t feel 80, you know nothing in my body had
really changed. But, after that, when I look at that picture (at) 80 and that picture (at) 90 and I look at myself, then I, ja, then I realise … (Interview 2, lines 20-24).

Although she noticed changes in her appearance, Gina knows that she looks much younger than 91. She said that she had never tried to conceal her age, but she admitted that she was proud of looking younger than her chronological age. Even though her health seemed more important to her than her appearance, Gina was still pleased that she appeared to be younger, and her ‘vanity’ seems to be part of her ageless femininity. She acknowledged, however, that looking young was not her doing, but that it was her good fortune. She said:

I never ever made a secret of my age. I couldn’t understand people who didn’t want you to know … but maybe, maybe it is a certain conceit that you are actually proud of not looking your age. But this is something that’s not your doing. (Interview 1, lines 417-420).

However, although she said she had accepted the changes in her appearance, she admitted that certain things did bother her. She said:

The only thing is I looked in the mirror at my face, and at my arms. I never had all these brown spots. I didn’t realise what I had not seen until that … I like beautiful hands. I’ve always looked at people’s hands. I don’t think my hands were beautiful but I had good hands … that bothers me, but you know you’ve got to know your priorities. Sometimes when I be out with the children I put a bit of makeup on (on her hands) but it’s not the same. So ja, that annoys me. But otherwise, it doesn’t hurt. (Interview 1, lines 389-397).

She was upset when she noticed these age spots, which were ‘inescapable’ signs of ageing. However, she dealt with her discomfort by reminding herself that while they were unattractive to her, they were not harmful. She explained:

I always say, it’s not fatal, it doesn’t hurt and it isn’t fatal … I’ve come to accept it now so I use a bit more makeup on my face. I knew I had a few spots here and there and
there and there, but when I looked into the mirror and saw lots of spots, little brown spots, that annoyed me. (Interview 1, lines 403-406).

In terms of her relatively good health, it seems as though her experiences of ageing have not been in line with her expectations and that this has surprised her. She said:

I remember when I spoke to my friend in England on my 80th birthday. I thought it was a joke. I said nothing hurts me, nothing worries me – well the few problems come up but they’re not really interfering with my nature and I find in a way I am happier now. (Interview 1, lines 4-8).

She explained that she often felt guilty about being so healthy, especially in relation to other people her age. She said:

Yes. Guilty towards the others. They say, “why do you walk so fast, why do you always walk so fast?” I say, “well, I don’t make myself walk fast, that is my stride.” If I walk slower, my balance is not so good. Ja, well, I’m so lucky … This one can’t walk because she really can’t walk, and this one trembles, you know. They’re in pain, they’re uncomfortable, they can’t wash themselves or bath themselves, they’ve got nurses who do that for them. (Interview 1, lines 594-602).

Although she feels younger than she is, she realised that other people often perceive her differently to the way that she perceives herself. She was often annoyed that people assumed that she needed assistance without asking her if that was the case. It seems important for her be able to do things for herself, and her comment seems to highlight the importance of taking the lead from the elderly in terms of how to treat them, rather than presuming that they need help. It also seems to be a matter of pride that Gina does not want to be treated as incapable. She explained:

People try and hold you. They try and support you. And the Blacks call you, “hullo Goggo”. With that you realise that the other people usually see you as older than you think you are, or you feel. I do need support, but I don’t need support that somebody holds me … I won’t say it upsets me but when I don’t need it, it bothers me. You don’t want it. … when I’m quite capable of doing it by myself then I think the others should accept that too. (Interview 2, lines 87-100).
One of the ways in which she tries to maintain her independence is by keeping herself physically active. She, therefore, attends yoga classes three times per week and uses the stairs rather than the lift. She said:

I walk the stairs all the time here. I never take the lift. So I think that it is very good exercise in any case … Because walking stairs, if you can, is the best exercise. But I mean, I do my yoga. I go to yoga classes three times a week. I've been there for now, it must be, 20 years … Also one of those things that I thought well, actually I should do something, you know physically. (Interview 1, lines 350-359).

Although Gina exercises regularly, she has experienced some decline in her physical functioning. She described how her body had become less flexible with age, however she seems to have adapted to these changes with her characteristic ‘flexible’ attitude. She said:

There are certain things which your body doesn’t want to do anymore. You know, at yoga certain exercises are a real problem. You realise no I can’t do them anymore. I could never actually sit in the lotus position … I can’t do it. I can’t bend my legs more than that, so that already spoils it a little bit. Also for my back, I can’t sit upright like this for everything but that has always been from the beginning so that doesn’t upset me anymore. But certain things … I find I’m a bit stiffer than I used to be. But I can certainly carry on. (Interview 2, lines 31-39).

Although she does not always feel like making the effort to keep active, she forces herself to do so. This determination to remain independent, together with her positive attitude seem to be qualities which have not changed in spite of the outward signs that she has aged. She may look different on the outside, and she may have aches and pains which she did not have as a young woman, but she still seems to feel that she is the same person on the inside, and she seems to be contented. She said:

I find I’m a bit stiffer than I used to be. But I can certainly carry on. You know I’ve never said, “I don’t really feel like it.” Because that is what most people do … “there is something today, do I have to go there?” There you’ve got to force yourself. I really sometimes don’t feel like going there, and it is raining … in the car. But once I’m off then it’s ok. (Interview 2, lines 38-42).
The most difficult functional change for her to accept seems to have been the decline in her hearing. As described previously, it is particularly difficult for Gina to hear in a group of people, although she manages well in a one-to-one conversation. As a naturally shy person, not being able to hear what other people are saying, seems to make her feel even more isolated. She explained:

I keep very much to myself … To go and sit in the lounge with the others and now what do we talk about? … But I did on one occasion. They were sitting in a group like this … And then the one from across asked me something and I couldn’t hear. I said sorry and she repeated it and I still couldn’t hear. (Interview 1, lines 282-295).

Despite her difficulty, however, she has not withdrawn from others and she continues to make the effort to be sociable.

The quality of her vision has also deteriorated with age, and she developed cataracts a few years ago. However, unlike her hearing loss which cannot be corrected, her vision was restored when her cataracts were removed. As a result she was able to continue to drive, and this helped her to retain her independence. She described being able to see clearly again as “a new lease of life”, which seems to be an indication of the ‘youthful’ enthusiasm she still has for life.

Despite being somewhat restricted by her ageing body, Gina seems to be determined to ‘keep going’. Her determination seems to be an ageless quality that she has always had. From Gina’s account, one can discern a pattern of her always doing whatever was required of her. This pattern has served her well and has probably contributed to her feeling good and not focussing on her aches and pains. Although she is getting older, she seems to have the same positive attitude she has always had, and this seems to support the idea that her soul has remained ageless. She said:

I don’t believe in sitting back and saying, “no I can’t do any of that, I can’t do this and I can’t do that. I should take a wheelchair, it would make travelling so much easier.”
say, “I don’t really want it easier … for as long as I can.” That is my basic attitude. As long as I can, I do just carry on. (Interview 2, lines 25-30).

**Acceptance of the way she has lived her life**

A theme of acceptance of the way in which she has lived her life thus far seems to underlie Gina’s perceptions of ageing. Satisfaction seems to be the fruit of her acceptance. Her decision to accept what comes her way, rather than passively ‘giving in’ to situational demands seems to have enabled Gina to see her life in this positive way.

In relation to age-related physical changes, Gina pointed out that she felt there was a difference between ‘accepting’ and ‘giving in’. For Gina acceptance seemed to imply the acceptance of certain physical changes which she could not alter, such as age spots, whereas ‘giving in’ seemed to imply giving up making any effort in areas where the effort would still count, for example exercising to retain movement. She said:

> I’ve come to accept it now so I use a bit more makeup on my face … But in other ways, I don’t accept, I try and … I’m not clinging to looking young. Physical things you’ve got to fight that, you know, don’t give in … So there is a difference between accepting and giving in. (Interview 1, lines 403-413).

On the other hand, it seemed as if Gina felt that there was a difference between becoming accustomed to changes which had occurred, and ‘accepting’ them, which was more difficult.

> I suppose you grow with it you know, after all, I wouldn’t say accept it. (Interview 2, lines 24-25).

Despite Gina’s general acceptance of the way she lived her life, she did express a few regrets. She said:

> I wasn’t really the kind of mom who spent a lot of time with her children … there sometimes I think … but you do as everyone else does. I don’t feel like I missed out
anything. What I do regret is that when I came here I was so involved with my work … I should have talked to my children more. I feel guilty sometimes, we didn’t really talk. It’s even more difficult with boys … but they didn’t know anything else. Now we talk. I think I have a very good relationship with my sons. (Interview 2, lines 246-252).

From the above excerpt, it seemed as though she regretted not having spent more time with her sons while they were growing up. Having so much time to herself now possibly reminds her of how busy she was when her sons were young, and she might wonder about her priorities then. However, rather than be weighed down with self-recrimination, it seems as though she has chosen to focus on the positive relationship that they currently share and to accept that she did her best.

Another area where she expressed regret, was in terms of her relationship with her ex-husband. With the wisdom and maturity she gained as she got older, Gina acknowledged she was able to see their relationship in greater perspective and she seemed to regret that they had not been able to make their marriage work. She said:

He talked about us. He said, “we were very stupid.” I said, “yes, we were very young and stupid.” (Interview 1, lines 776-777).

She added:

You know, it became … if you look at it from high up you can see down what all these little ants are doing down there, stupid running around, not knowing what they’re doing down there … Ja, so in the end he found fulfilment in his life in the same way as I did. (Interview 1, lines 787-794).

Later Gina and her ex-husband became very good friends, and it seems that their friendship, which was an important and meaningful part of her life, helped her to cope with the regret she had felt over their failed marriage, and to view it in a different light.
At 91, Gina seems to be at the stage where she can reflect on how she has lived her life thus far, and see the different aspects of her life in perspective. Looking back, she seems to be satisfied with the life she has lived. The following quote seems to sum up Gina’s perceptions of what ageing is all about. She said:

It forms you, it does form you. Every phase adds to ... it is the experience which is somewhere buried in your brain. And in the end that is what you are, what circumstances and life make you and then also what you helped to make yourself. (Interview 1, lines 115-118).

**Personal Reflections**

I really enjoyed this conversation with Gina and found it very meaningful and interesting. I have always felt that I have a compatibility with older people, and this seemed to link with Gina’s affinity with younger people. Gina seemed pleased she could share her life story, and I felt privileged to hear it. Gina’s positive outlook seemed to be so life affirming and it countered many of the negative stereotypes of ageing which I had encountered, and was afraid of. By showing that she still lives a meaningful and enjoyable life, Gina provided an example of ageing which I found to be both positive and inspiring. I was left with the impression that Gina was ageing in such a ‘successful’ way because she has such a positive attitude towards life. She seems to be truly satisfied with the way she has lived her life. She left me feeling that it is so important to just ‘get on with the business of living’, and to stop worrying about the actual ageing process.
Conclusion

During analysis of the conversations with Gina Black, the following themes were highlighted.

- Viewing her life as an adventure throughout her lifespan
  In her youth, Gina lived an exciting and eventful life where she faced many challenges. This is in contrast to the narrowed world she now inhabits as an elderly woman. Despite this, however, Gina seems determined to continue to grow and to enjoy the rest of her life-adventure, and it seems that she sees ageing as another challenge to face.

- Connection vs. disconnection
  The sense of being either connected and/or disconnected, both emotionally and physically, seemed prominent in Gina’s account. The boundary between connection and disconnection seems to be quite blurred in her story, as there often seemed to be instances of connection in the midst of disconnection, and disconnection in the midst of connection. Despite her world having narrowed as she has aged, she has continued to try to expand her connection with others. At the same time, her disconnection from others has also enabled her to connect with herself and to grow and develop her own identity.

- Feeling out of synchronisation with the norm
  Gina often seems to have felt out of synchronisation with the norm. One of the reasons for this seems to be because of the diverse and unconventional experiences she had in her youth, which often seemed to make her feel disconnected from others. She also felt out of synchronisation because of the timing of certain key events in her life, which she felt occurred ‘off time’ rather than on time. These events included the timing of her marriage, having her children and her career. Finally, the positive manner in which Gina has aged appears to have rocked the conventional notions of ageing as ‘decline’, and has caused her to feel notably different from others.
• Ageing body vs. ageless self
There seems to be a ‘mismatch’ between the visible, physical age related changes Gina has experienced, and the way she feels on the inside. On one level she seems to have accepted she has become old because of the changes she feels in her body, and those which she sees in the mirror, but on another level, she does not identify with being 91, and she refuses to act old.

• Acceptance of the way she has lived her life.
The theme of acceptance of the way in which she has lived her life thus far seems to be the culmination of Gina’s perceptions of ageing. Satisfaction seems to be the fruit of her acceptance. Her decision to accept what comes her way, rather than passively ‘giving in’ to situational demands seems to have enabled her to see her life in this positive way.
CHAPTER 5

MARIE’S STORY OF HER PERCEPTIONS OF AGEING

Personal Data

Participant : Marie Stein
Age : 65
Research setting : The interview was conducted at the gym Marie runs

Introduction

In this chapter a transcribed conversation that took place between the participant, Marie, and myself, about the participant’s perceptions of ageing, is carefully analysed. Emerging themes have been highlighted. The transcribed conversation may be found in Appendix D. The themes identified are based on my own subjective viewpoint, and are not meant to represent the truth. These themes are not necessarily mutually exclusive and they may, therefore, overlap. Other readers might identify different themes and I might also identify different themes at a different time.

The analysis is followed by my brief personal reflections.

Background

At 65 Marie Stein is dynamic, energetic and glamorous, and she exudes a positive attitude to life, which seems contagious. She runs the gym that I attend, at a local sports club, and she teaches exercise classes daily. Marie struck me as an example of someone who is ageing very well and I hoped
that she would allow me to interview her. I, therefore, asked her whether she would be interested in participating in this research, and was pleased when she enthusiastically agreed to do so. During the interview, Marie commented that she was “very comfortable in (her) own skin” and this comes across in the way she presents herself, as being content with her life and with the way in which she is ageing.

Marie’s story

The following themes emerged from Marie’s story.

The disappointment of the past vs. the satisfaction of the present

From Marie’s account, it appears that her life has become more satisfying as she has become older. Possibly, this is one of the reasons why she seems to be ageing in such a positive manner. In this section, events of Marie’s past will be contrasted with her experiences in the present in order to illustrate the ‘dramatic’ way in which her life has improved.

In terms of her family of origin, Marie described her mother as an “alcoholic” and a ”prescription addict” and her father as a “workaholic”. It seems that she learnt to rely on herself, from a young age, because she could not rely on her parents. She also tried to create a façade that things at home were more ‘functional’ than they actually were. She recalled:

My mother was an alcoholic and she was also a prescription addict as well and it was very tough growing up in an alcoholic and prescription drug home. You know especially when it is your mother because they should really be role models and my father managed to help himself by being absent. He became a total workaholic. So my sister and I were just stuck, for want of a better word, with my mother who spent 90% even 99% of her time in bed, you know. So it was difficult … I was very good at covering all this up (Lines 68-75).
She added:

I never want to be the person I used to be because that was just a mask anyway, you know. I was very reliable, very dependent (dependable?), very much a workaholic. All those things happen to one child, I would say, in the family. (Lines 109-111).

It seems as though she had to “mask” her feelings and sacrifice her identity in order to be “the hero” in her family, “the one that looks after the others.” She said:

I didn’t know who I was anyway. And all I knew was that I was terrorised most of the time and really fearful. And that if anything nice happened to me, and nice things did happen to me in that period as well, and I always used to think, well (a) I don’t deserve them and (b) it’s going to be snatched away from me very quickly so don’t get too used to this and don’t think this is for you. (Lines 128-133)

In always trying to be what others wanted her to be, she seems to have been left feeling confused about who she really was. At the same time, she also seemed to feel that she was not entitled to “anything nice” in her life.

In terms of the present, having ‘absentee’ parents seems to have taught Marie to be resilient and it also instilled in her the determination to create a very different life for herself and her own family.

Although Marie reconciled her relationship with her mother before she died, her mother’s death seemed to leave Marie with a deep sense of regret and a feeling of having been let down. Marie, therefore, seems to have been determined to ‘right the wrongs’ of the past, by giving to her children what she had not received from her mother. She recalled:

It was wonderful because I was able to make friends with her before she died. Through the drugs, through the alcohol, her insides, her kidneys particularly through the prescription drugs had gone to hell. So she died when she was 51 and my younger son was only 4. And I mean she could basically still be around today if she was healthy. So we missed out on a great deal with her but as I say we righted that, ja. (Lines 142-148).
It seems as though Marie was able to forgive her parents for her “incredibly hard” upbringing, and she never seems to have used her past as an excuse not to succeed in her own life. Rather, it seems as though it encouraged her to strive for more. By doing this, she seems to have been able to transcend the difficulties of her past.

In relation to her own family, her husband and children have always occupied an important position in her life and unlike her own mother, she has been very involved in their lives. She also became the “role model” for her children that her mother never was.

Although her sons are now adults with families of their own, she remains connected to them, and they, in turn, remain connected to her. One of her sons lives in a house on his parents’ property and she describes the set up, fondly, saying:

We have a scenario like “My Big Fat Greek Wedding” where we have a very large place and we built a house at the bottom of the driveway … eventually my son purchased that from his father and they live there. It’s marvellous because I’m able to see my grandchild everyday. And when we’re away, and we are away a lot these days, R (her son) looks after the house and our animals for us and the same when he’s away on business. So we can take care of each other that way. (Lines 56-62).

In terms of her identity, she no longer needs a “mask” to hide who she is, but she now feels “comfortable in (her) own skin”. She explained: “I hate confrontation but I have learnt to do confrontation.” She has gained self-confidence and does not appear to be afraid of rejection. She also feels deserving of her good fortune, although she does not take it for granted. She said:

I am so unbelievably blessed. (Line 115-116).
She added:

I am the most spoilt person I know! (Referring to her many overseas trips). Sometimes I think this is really too much I am far too spoilt. But we do, we are really so lucky to be so spoilt. (Lines 162-164).

Marie describes herself, currently, as being “hugely satisfied” with her life. Her satisfaction seems to be due to the effort she made to change the aspects of herself and of her life which disappointed her. One of the ways she did this, was by joining ALANON (the Alcoholics Anonymous programme for the families of Alcoholics), and the ALANON Adult Children of Alcoholics programmes, where it seems that she was able to confront the difficulty of her past and move on with her life. She said:

Doing those 12 steps of recovery, it’s hard. You have to be very honest with yourself and about yourself. (Lines 99-100).

Finding healing seems to have been her reward for adhering to the programme. She often stressed her belief in having freedom of choice and this seems to have been the path she followed in her own life, where she chose to take control of her life rather than be controlled by it. She said:

We do have a choice, don’t forget, especially if we’ve been shown or placed on the right path. (Lines 435-436).

She added:

A new life can start if you want it to. (Line 598).

She believed that her sister made ‘poor’ choices and that as a result she has landed “on the street”. She said:

I have a sister who doesn’t want to go to a programme of recovery and her life is totally unmanageable, totally. So there is the route of becoming manageable and the route of not. (Lines 106-108).
She also held her mother accountable for her (mother’s) alcoholism and drug addiction, although she was able to forgive her. She said:

She had a choice but the choice that she made was not a good one for all of us, especially herself. (Lines 140-141).

Unlike her mother and her sister, Marie chose to make ‘beneficial’ changes in her life. It seems that the tremendous effort she made to come to terms with the disappointment of her past, and to create the kind of life for herself, and for her family, which she finds satisfying, has ‘paid off’. She now describes herself as “hugely satisfied”, as “very, very content” and as “having a great time”.

**Meaning in life**

The theme of having meaning in her life seemed to be central to Marie’s perceptions and experiences of ageing. It seems to be linked to the previous theme as it seems that finding meaning in her life has contributed to the sense of satisfaction she feels. In this section, ideas will be discussed in terms of how important they are, for Marie, rather than chronologically.

At the beginning of the interview, Marie said that she felt she had reached her age, of 65, as a result of three things, which she felt were central to her wellbeing, and to her enjoyment of her life. It seems that these aspects can be regarded as being her sources of personal meaning. These are: her spiritual belief, doing physical exercise and her connection to her family. She rated them in order of importance and explained her choice saying:

My 12 step programme is number 1 in my life. Number 2 in my life has to be the exercising which also helps my mind and you know, makes me feel better about me and what I’m doing, and number 3 obviously is the family. But those first two things come before the family because I wouldn’t really be the kind of mother or wife that I would like to be if I wasn’t helped along by that. (Lines 88-93).
Marie’s *spiritual belief* seems to be a source of great personal meaning in her life. She differentiated between having a spiritual belief and a religious belief and explained that she believed in a “higher power”. She described the ALANON and ALANON Adult Child Programmes, with which she is involved, as “spiritual programmes” and it seems that her spiritual belief is linked to her participation in these programmes. She also explained how her adherence to their 12-step programme had influenced her life in both a practical and a spiritual way. She said:

> I’m very grateful for that because they have kept me so centred and really ok about myself … every week that I go I just see miracles happening. And it’s happened for me because I really and truly would not have been able to do the job that I do anyway, today if it wasn’t for being able to develop some self-esteem and some confidence and I’ve only done that as a result of the 12 step programme. That to me has been very important. (Lines 81-88).

Her faith in the programme seemed to stem from her own experience of being helped by it. She believed that the programme had helped her to come to terms with her mother’s addiction and with the way the addiction had deprived her of a ‘normal’ childhood. She also felt that it had given her the self-esteem and confidence that she did not have while she was growing up.

In terms of her marriage, she and her husband’s joint involvement in the ALANON programme seems to have provided meaning in both of their lives and has strengthened their relationship. Marie believed that meeting her husband and being introduced to ALANON were very influential in terms of her becoming the person she is today. She recalled:

> Then I met the man I was to marry who was already just very newly sober in AA (Alcoholics Anonymous). And that was the beginning of my growth period because he said, “come on go to that fellowship (a) you’ll learn more about what kind of person I am”. And you know, I didn’t realise that my mother had this problem until I actually went to the meeting. I just thought she was doing it specifically to get at me. And that she was just weak-willed, and you know, not up to much. And I learnt differently, that she also …she had a choice … So my change happened when I got married. (Lines 134-142).
During the interview, Marie stressed that while she had received help as a member of ALANON, she had also had the opportunity to help others. She felt that she had managed to heal herself by sharing her past experiences, and in turn, she seemed to derive a sense of purpose, and of satisfaction, from having helped others to heal themselves. She said:

You know, that’s why it’s very unique the 12 step programme. It is because you don’t just take, take, take. You also give to others … I mean I sponsor in the group quite a few people. So if they have anything that they particularly want to talk about that is very personal and private, they won’t mention it in a meeting but they will speak to their sponsor. And that’s given me great satisfaction, just to be a member, you know, of the group and to receive what we do. (Lines 410-416).

She added:

I do get a lot of phone calls from people in need and then I share what happened to me and then they tell me what happened to them. You know, they come to the meetings and a new life can start if you want it to, it is there. (Lines 595-598).

As a result of her involvement in the ALANON programme, she has also had the opportunity to travel to overseas conventions, to meet people, and to make friends, which are all activities that seem to have enriched her life. She explained:

And you know what, my bestest friends come from there as well, they really do. You know we’ve spoken about very personal and private things in those groups … our friendships are terrific because we understand each other without having to know that much about each other. And I’ve been lucky enough to go overseas several times to the world conventions of both ALANON and AA … And even though we speak different languages, the feelings are the same, the experiences the same … That common thread … So the friendships are also hugely important. (Lines 460-475).

Marie speaks in quite a ‘zealous’ way about AA and ALANON and it seems as though her involvement in these programmes, and especially the “fellowship”, provides a great deal of meaning in her life, which contributes to her overall satisfaction with her life at present.
The second aspect that Marie felt had significantly contributed to the quality of her life and to the way she has aged, is **physical exercise**. She said:

Because of the exercising, truly, I have come as far as I have (Line 17).

Marie felt that exercise had played a very meaningful role in her life and that she had derived both mental and physical benefits from it. She explained:

I always used to say I exercise for my mind because I feel better. Then I don’t feel down or anything because exercise is brilliant for your mind. (Lines 333-335).

From a physical point of view, being as fit and healthy as she is also saved her life. Last year she underwent surgery to replace a heart valve and there were complications during the surgery. She described the situation as “touch and go” and felt that she had survived as a result of having been so physically fit. She explained:

The fact is they said that they were dealing with a woman whose body was very, very much younger than her years, and that’s what pulled me through. So there you are. So it was, thank G-d for the exercise … It saved my life. It actually saved my life because the body was so much younger. So there you are. So it is all to do with ageing at the end of the day, it really is. (Lines 331-337).

Finally, **her marriage and her family** provide great meaning in Marie’s life. She believed that meeting her husband and marrying him were major turning-points in her life. She recalled:

And then I met the man I was to marry … And that was the beginning of my growth period … So my change happened when I got married. (Lines 133-142).

Marie and her husband had been married for 39 years and they seem to have a very good relationship. In addition, she feels very close to her children. She said:

Yes it is 39 years and it will be 40 years next year. It is 39 years and you know, we get on terribly well because he is a very good friend. And I love seeing him because there’s always something to tell him and to share with him. And that’s also very
important and that’s to have someone that you can share with. And the same with my children. In fact my children sometimes share more that I would like to hear! …

Ja, so we definitely are, I would say, a hands on family. and to me that's so important, having the right family. (Lines 36-43).

She added:

I have an incredible family … the family, the husband that I have and my two sons are just amazing. And they just make us feel special and you know we never sort of feel like old people. So ageing isn’t something to be afraid of. (Lines 22-25).

Marie’s family seems to be the ‘foundation’ on which her life is built. It seems to give her strength to undertake any experience, including her experience of ageing. An example of this can be seen from the answer she gave when she was asked whether she felt there was pressure on her to look younger. She said:

You see I don’t, I mean it would be nice … Maybe because I’m secure in my relationships with the family. (Line 552).

Marie’s close relationships with her husband and children seem to be even more precious and meaningful for her because they are so different from the relationships she had in her family of origin. The sense of security and support that her family provide for her, also seem to have enabled her to take ageing in her stride, as she knows that she is not alone.

Marie’s positive attitude towards life, and towards ageing as a part of her life, seems to be strongly related to her sense of living a meaningful and purposeful life. This is centred on her spiritual convictions, her belief in the importance of physical exercise, and her devotion to her family.
“Generativity vs self-absorption”

The title of this theme has been taken from the name of the seventh stage of Erikson’s stages of psychosocial development. (Erikson in Bee, 1996). According to Erikson, successful resolution of this stage of life, or “generativity”, involves a turning outward from the self towards others. This seems to capture where Marie is in her life and it seems evident from her concern for others, and her lack of self-centredness, or “self absorption”. This theme links to the previous theme, of meaning in life, since it seems that Marie’s concern for the welfare of others is a primary source of meaning in her life.

“Generativity” may be expressed in a variety of ways. In terms of her family, Marie’s “generativity” is embodied in her having given birth to, and raised her children. Her continued ‘nurturance’ of her family is an extension of this. This “generativity” can also be seen from the way in which she and her husband have encouraged their sons to follow their own ‘philosophy’ of helping others. She said:

You know, for us as a family it is very important to try and help the people that you personally know … I know my son has this brilliant attitude of … ‘Pay it Forward’ (a film whose ‘message’ was that a person who had received help from another, had to do something good for someone else in return). …He’s setting up a foundation which R (her husband) and I are involved with as well … (he) (her son) expects them to do something for somebody else, which is a good idea.  (Lines 608-617).

When Marie speaks about her sons, there is a sense that she and her husband have guided them to take their place as the future generation.

In terms of other people, Marie shows a genuine concern for others and believes strongly in the idea of ‘giving something back’ of her own good fortune. It seems as though she never takes her success for granted and she appears to derive great satisfaction from “trying to help others in similar circumstances”. She said:
I have received in such abundance, really … And that’s important too, not just to talk about it, but to do something and to help where you can, really … You can’t help everybody in the world. But, if you come across somebody who does need help, I think that is vital, I really do. (Lines 604-610).

She added:

I think that’s terrible when you turn your back where you could do something, however small, don’t you think so? (Lines 625-626).

Helping others is an important part of her membership of the ALANON group, which she described as a “sharing programme.” She said:

You know, that’s why it’s very unique the 12 step programme. It is because you don’t just take, take, take. You also give to others, you know … I mean I sponsor in the group quite a few people. So if they have anything that they particularly want to talk about that is very personal and private, they won’t mention it in a meeting but they will speak to their sponsor. And that’s given me great satisfaction, just to be a member, you know, of the group and to receive what we do. (Lines 410-417).

The concept of “generativity”, illustrated in this excerpt, is linked to other themes mentioned in this dissertation. They are the “great satisfaction” she feels in relation to her life, and the meaning Marie derives from what she does, both of which seem to be related to her concern for the welfare of others. The way in which these concepts fit together seems to illustrate how Marie has achieved integration in her life.

Marie does not appear to worry about getting older because that would be too ‘self-indulgent’ and she seems to be ‘too busy living her life.’ Nonetheless, she faces the finiteness of her life in line 359. She even speaks about staying healthy as her ‘responsibility’ towards her children, rather than as a ‘personal’ concern. She said:

I say to my husband what we have to do is we have to take the very best care of ourselves that we can. You know, we owe it to our children to be well and healthy. (Lines 26-29).
From Marie’s account, it seems as though she is at the stage of her life where she derives a sense of purpose from assisting others, and where she is able to be less ‘self-involved’ than she may have been in her youth. In this way, she seems to illustrate the successful resolution of Erikson’s stage of “generativity vs. self-absorption”.

The freedom of being older vs. the pressures of being younger

Marie gave the impression that she is content with being her age. She seemed to feel that there is less pressure on her at 65 than there was when she was younger, and which she felt that younger women continue to experience. As a result of this ‘freeing up’, she felt she was able to focus more on her interests and on other people, rather than on herself. This links to the previous theme of “generativity vs. self-absorption”. She said:

I think in a way it is nice getting older because that focus on yourself maybe is not so great anymore, you know what I mean? (Lines 639-640).

She also felt that there was a certain pressure on younger people to “compete” with each other, and she seemed grateful that she no longer needed to be part of that competition.

An important part of her process of getting older, seems to be that Marie has learned to live life on her own terms and according to her own rules, rather than according to the rules of others, and this seems to have taken a great deal of strength and courage. She frequently described herself as being “comfortable in my own skin” and this seems to be related to her acceptance of herself and the way in which she lives her life.

When she was younger, it seemed as though she had to live her life according to other people’s rules. She said:

You don’t like to rock the boat and you are certainly not into confrontation and that is how I used to be. If you wanted me to be one way I would be that. If so and so
wanted me to be another way, I would. But not anymore so I am able to confront.
(Lines 12-195)

In contrast to the way she described herself in the past, as quite insecure, as an older woman she comes across as strong, independent, and assertive. She said that people sometimes described her as being ‘too outspoken’, and she regarded this as a compliment, as she had to learn to express her feelings. She added:

You can actually make more of a fool of yourself now! So what? People might not even notice, you know. If you and I went out together they’d look at you because you’re young and gorgeous …I just think that there are more things that you can do and get away with it! And if you make a fool of yourself, so what? (Lines 685-690).

She seemed to feel that as an older woman, she was less ‘visible’ than she had been when she was younger, but that this did have a positive side to it. She seemed to feel that she now enjoys a sense of freedom from public scrutiny, and possibly even from ridicule, which younger people seemed to fear.

In terms of her physical appearance, while Marie is still very glamorous and beautiful, she did not seem to feel that there is the same intense pressure on her, that there is on younger women, to look perfect. She felt that the focus had shifted away from her and she seemed to accept it. She said:

It’s lovely to be this age. You can look at everything and you can say, ‘that’s beautiful, she’s beautiful, he’s beautiful.’ It doesn’t matter, you know, you’re not in the same arena any longer, wouldn’t you say? (Lines 667-669).

When asked whether she did not miss being “in the same arena any longer”, she said that she did not, because she remembered the feelings of insecurity which had been part of that stage of her life. She said:

All I have to think about were all those feelings, those feelings of fear and not being good enough. (Lines 672-673).
She admitted, however, that she still “like(s) to look nice” and that “nobody likes to be invisible”. In addition, she said that she would even have plastic surgery if she felt the need for it. It seemed that taking care of her health was more important to her than worrying about her looks. However, it does seem that she at least needs to have the choice to have plastic surgery or not. She said:

Every age is special but we just have to accept it and accept it gracefully if you can. And, no, I really am happy with it. It doesn’t mean I won’t go and have a face lift one day, when I’ve got time, I probably will but … frankly I’m terrified of it. I’d be so scared to have another op. (Lines 645-649).

She added:

You have to feel good about yourself … and you’ve got to do the things to make yourself feel ok and make you feel younger, like the exercise. (Lines 707-709).

Experiencing ageing as a ‘freeing up’ process does not mean that Marie no longer has any responsibilities or concerns. Despite the ‘freedom’ she now enjoys, she still has responsibilities towards herself and others. She believes, for example, that she has a responsibility to her family to take care of herself. This involves exercising, eating healthily and not smoking or drinking. She hoped that by looking after herself she would be able to remain independent for as long as possible. She explained:

As long as I am well that is the main thing. I don’t want to be a burden to myself, number 1 and especially not to the children … I want to keep my independence. I like being independent and that way, you know, it does make you aware of the fact that you’ve got to remain well and focused on things … I hope I’ll be able to look after myself. (Lines 221-228).

She also mentioned that “freedom from financial insecurity” was an important concern for her in relation to getting older. At present she enjoys ‘financial freedom’ but she admits that if she had to worry about finances “that would age (her) to death and back.”
Contrary to the prevailing stereotype that ‘life deteriorates after midlife’, Marie’s life seems to have improved as she has become older. One of the reasons for this seems to be her growing sense of freedom from the pressures she associates with youth.

**Personal Reflections**

Of the three women interviewed, Marie seems to be the one who is the most satisfied with her life, and the least concerned about her age. Although specific themes were highlighted, a common thread that seems to underlie all of the themes in her account, is that of connection. Despite having experienced such disconnection in her family of origin, Marie connects very well to others. She also seems to be very connected to her life. I also had the impression that she is in control of her life and of the image she presents to others. It seems clear, therefore, that she was also very much in control of the way she presented herself in the interview. However, she came across as being congruent. It seems as if right from childhood she chose to create a positive world for herself. Although she “covered up” aspects of her life which were unsatisfying, she did not deny their existence, nor did she dwell on them. Instead, she chose to remain positive and this attitude seems to have contributed greatly towards her enjoyment of her life. It seems that in overcoming the difficulties of her youth, Marie gained strength as well as a fierce determination to live the life she wanted, on her own terms. At this stage of her life, she seems to be very content with the way things have turned out.

**Conclusion**

During the analysis of the conversation with Marie Stein, the following themes were highlighted:

- The disappointment of the past vs. the satisfaction of the present

From Marie’s account, it appears that her life has become more satisfying as she has become older. She grew up as the child of an alcoholic mother, and
a father, who was a “workaholic.” Having these ‘absentee’ parents seem to have taught her to rely on herself. It also instilled in her the determination to create a very different life for herself, for her husband and for her children. One of the ways she did this was by joining the ALANON and the ALANON Adult Children of Alcoholics programmes, where she was able to confront the difficulty of her past, and move on with her life. At present, Marie says that she is “hugely satisfied” with her life. Her satisfaction seems to be due to the effort she made to change the aspects of herself and of her life which disappointed her.

- Meaning in life
The theme of having meaning in her life seemed to be central to Marie’s perceptions and experiences of ageing. It seems to be linked to the previous theme as it seems that finding meaning in her life has contributed to the sense of satisfaction she feels. Marie attributed having reached the age of 65 to three things. These are: her spiritual belief, doing physical exercise, and her connection to her family. She seems to regard these aspects as being her sources of personal meaning.

- “Generativity vs self-absorption”
The title of this theme has been taken from the name of the seventh stage of Erikson’s stages of psychosocial development. (Erikson in Bee, 1996). According to Erikson successful resolution of this stage of life, or “generativity”, involves a turning outward from the self towards others. This seems to capture where Marie is in her life and it seems evident from her concern for others, and her lack of self-centredness, or “self absorption”. This theme links to the previous theme, of meaning in life, since Marie’s concern for the welfare of others seems to be a primary source of meaning in her life.

- The freedom of being older vs. the pressures of being younger
Marie gave the impression that she was content with being her age. She seemed to feel that there was less pressure on her at 65 than there had been when she was younger, and which she felt that younger women continue to
experience. As a result of this ‘freeing up’, she felt she was able to focus more on her interests and on other people, rather than on herself. This links to the previous theme of “generativity vs. self-absorption”.
CHAPTER 6

CATHERINE’S STORY OF HER PERCEPTIONS OF AGEING

Personal Data

Participant : Catherine Smith (pseudonym)
Age : 47
Research setting : The interview was conducted at the researcher’s home

Introduction

In this chapter a transcribed conversation that took place between the participant and myself, on the participant’s perceptions of ageing, is carefully analysed and emerging themes are highlighted. The transcribed conversation may be found in Appendix E. It should be noted that the themes identified are based on my own subjective viewpoint, and are not meant to represent the ‘truth’. These themes are not necessarily mutually exclusive, neither are they exhaustive. Other readers might identify different themes. I might also identify different themes at a different time.

The analysis is followed by a brief personal reflection.

Background

The participant, Catherine Smith, volunteered to participate in this research as she was interested in discussing her perceptions of ageing. She reported that she was feeling negative about ageing and she hoped that talking about her feelings would help her to come to terms with the changes she was
experiencing. Her account was filled with contradictions and she seemed to vacillate between a position of acceptance of the physical ageing process and a rejection of it. She seemed to lack clarity about how she felt about ageing although she denied this when this was pointed out to her. There seemed to be several contradictions in her account and this made the task of trying to tease out the various themes quite complex.

At 47, it seems that Catherine is facing the challenges of ‘midlife’, generally regarded as a time of ‘transition’, according to culturally defined ‘norms’. She seems to be trying to reconcile the person she has become with the person she was in the past and at times this seems to be very difficult for her. She also seems to be quite uncertain about what the future will bring. At the same time, however, she also seems to be facing the challenges associated with an ‘earlier’ stage of adulthood, and that is as the mother of an 8-year old child. It seems possible that the ‘tasks’ demanded by each of these life stages clash to an extent, and that this may also have contributed to the difficulty which she seems to be experiencing in terms of how she perceives ageing.

Catherine’s story

The following themes were identified from Catherine’s story.

Body as a barometer

When asked about her perceptions of ageing, Catherine’s primary focus seemed to be on the way in which her body had changed over the past few years, particularly in terms of its appearance. She seems to regard her body as a barometer which has registered important life-changing events, including her marriage, motherhood, turning 40, a miscarriage, and returning to work. Her body seemed, therefore, to be a constant, visual reminder of her life experiences. She often expressed negative feelings about her body, and it seems as though it may have been easier for her to focus on the outward,
tangible signs of change, than on the impact which these events had on her. She said:

Maybe the body reflects where you are at as well, for me, reflects where I am at. (Lines 313-314).

Catherine got married (for the second time) at the age of 38. She mentioned that she had been married previously but she chose not to focus on her first marriage during the discussion. She felt that her “body changed with the (second) marriage”, although she was uncertain about whether this was merely because she was getting older, or whether it was because of the marriage itself. While she did not explain how her body changed, it seems as though she regarded her marriage as having ‘left its mark’ on her. She said:

Yes my body changed with the marriage maybe because of the ageing thing as well. Whether it would have affected the body change, I think the life experiences and age sort of naturally came at that time. (Lines 210-213).

Shortly after her marriage, she gave birth to her daughter and she experienced further physical changes. With motherhood came a major shift in her identity along with emotional and physical change, and it seems as though she felt she literally had to transform herself into a “different shape” in order to adapt to her new role. She compared her experiences of motherhood with those of her friends in England (where she and her husband were now living) who she felt had undergone similar changes. She said:

... we've all had babies late and given up careers late and the bodies went so it could be a whole big identity change? Or maybe our bodies just changed because as a mother you've got to be larger, I don't know. Well, it could be that. As a mother there's one way of mothering and when you're back into the career world you are looking another way ... you know you're a mother and you're doing your mothering but maybe your body needs to know that you've got to be a different shape to do it. (Lines 214-217).

She described motherhood as being a “highlight” and, on the one hand, she reasoned that she ‘needed’ to have a “larger” body in order to nurture her
child. However, on the other hand, she felt that her ‘new shape’ impacted negatively on how she felt about her femininity and her sexuality. She said:

One thing that did affect me, as a woman, with this whole ageing thing is your sex life does change. With your body changing and having to marry the mind and body with that acceptance of your body. Not only your sex life but sex drive, well mine changed. I didn’t even know if it was mothering that changed it. … Everything changes how you feel about yourself as a woman. I breastfed for 17 months. You know suddenly your breasts are not there for pleasure they are there for feeding … they are an instrument for bonding with your child … So I think it all happened for me at about the same time. The body change maybe, the mothering because of my age maybe. (Lines 502-515).

It seemed that her self-consciousness and preoccupation with her body prevented Catherine from enjoying sex. She recalled:

You don’t want that sexual bond … you’re worried about everything. Because I’m this, I’m this, I’m flopping, I’m not as supple … your body image shifts, it’s too cold, it’s too, you know all these excuses? … You actually don’t concentrate on yourself. … It’s not special. It’s not a time for making love … (Lines 525-535).

Catherine began to feel as though she had lost her femininity, and this left her feeling ‘incomplete’. It took a while before she was able to accept that she could still be a woman and enjoy her sexuality despite having a more ‘maternal’ body. She said:

You’ve got to come to this acceptance of I am still a woman. (Lines 597-598).

She added:

It’s only in marrying this total acceptance that your sex life and sex drive has come back. This enjoyment of sex as being wonderful, amazing, long … with joining the mind and the body and that whole acceptance suddenly the enjoyment comes back. (Lines 515-521).

Catherine felt that once she had integrated her mind and her body, she was able to reclaim her femininity and sexuality and to feel whole again. She said:
It’s the whole thing of marrying where I’m at as an older woman with the mind and the body and the desires and all that … the perception of the outside is different and because the perception of the outside is different, you have to come to terms, well I had to come to terms with it. And from that point of view, can I use the word ‘allowed’ myself what I would have allowed myself with a younger, more attractive body. (Lines 553-563).

A further aspect that seemed to influence Catherine’s perception that she was ‘still a woman’ was that she had not yet reached Menopause, despite the ‘fact’ that she was an ‘older’ mother. It seemed as though knowing that she was still fertile was quite reassuring for Catherine as it seemed to confirm her femininity. She explained:

… the body is what the outside world can see as opposed to the inside which is still young and ageless … the womb and the mind. (Lines 329-330).

In terms of her chronological age, Catherine seemed to feel that once she had turned 40, she lost control over what was happening to the body she had taken for granted up till then. She felt unprepared for the ‘sudden’ change which occurred and which she was required to adapt to. She said:

Your body goes and suddenly from being a size 10 you find you have grown and it’s nothing that you do, it just happens and maybe it’s just something that happens in your forties that suddenly your whole body changes and to me that was a very difficult matter. It’s the body change, the image of the body changes, the way you dress had to change, all that had to change to stay with the ageing body. (Lines 9-14).

Catherine regarded the miscarriage she suffered a few years ago as the catalyst for the changes in her body’s appearance, even though other changes had occurred previously. She said:

For me the very big thing when it actually started, I had a miscarriage when S (her daughter) was 2½ and my body never came back after that. (Lines 19-20).

When she spoke about her miscarriage, her feelings about the loss of her baby and her feelings about her body seemed to be closely intertwined. She
seemed to feel that she had unintentionally ‘rejected’ her unborn child as her body had “let (her) down”, and, she also felt that the child had rejected her. It seems as though the miscarriage also tied in with her feelings of not being in control. She said:

It wasn’t a planned pregnancy. I felt like I had let the child down, that my body couldn’t carry it. It was very much that kind of feeling. My body’s let me down I couldn’t carry the child to full term. So it was a totally different feeling … the child was around me, I saw him I knew him. It was a totally different relationship, I think, to if you’re just carrying and you don’t see the being you’re carrying, you’re not with the being. So I had to come to that kind of acceptance as well which was a totally different acceptance than to a body kind of acceptance, a spiritual acceptance. To me there was that rejection kind of feeling as opposed to my body’s old, my body can’t do it. Because I really believe your body can do it no matter what age … For me it was that whole spiritual rejection kind of issue. I don’t believe that your body can’t … for me it wasn’t that, it was just an acceptance that body you took for granted and didn’t have to work that much to keep suddenly just went. (Lines 47-63).

Catherine’s description of the miscarriage, her feelings about her body, and her explanation of “spiritual rejection” seemed confusing, so the researcher telephoned Catherine after the interview to ask her whether she could clarify some of what she had said. Catherine explained that although her pregnancy had been unplanned, she had been very pleased when she discovered she was pregnant. She also described herself as having ‘psychic’ abilities, which had enabled her to connect with her unborn child. When the baby died, she felt that he had ‘spiritually rejected’ her, as they already ‘knew’ each other. Although she said that she did not feel that she was ‘responsible’ for the miscarriage in any way, she still seemed to feel that her body had “let (her) down”. She may even have felt that her body had rejected ‘her’. Even though she did not admit it, perhaps she felt that she could have looked after her body, and her pregnancy differently. She also found the child’s rejection of her very difficult to accept, and she said that she had continued to hope, for several years, that he would ‘come back’ to her in another pregnancy.
After the miscarriage, Catherine explained that she continued to look pregnant until she would have been due to give birth. Perhaps in gaining weight she was symbolically holding onto her child. She recalled:

The baby was due September and a friend of mine said to me that the baby should have been born by now and that was when my weight went down and my body changed … my body hadn’t gone down until the 9 month period was up. (Lines 21-23).

As a result of the trauma of the miscarriage, she seems to have projected many of her unresolved negative feelings onto her body. Perhaps she rejected her ‘self’ as encapsulated in her body. Her body seemed to act as a barometer, which recorded and ‘stored’ her loss. She explained that she had only recently been able to come to terms with the idea that she would not have another child, and perhaps this acceptance has helped her to begin to adjust to her body.

In relation to her career, Catherine’s identity seemed to be tied to how she looked, and she seemed to feel that she ‘lost’ her body at the same time that she ‘lost’ her career when her daughter was born. She said:

Maybe the body was … I don’t know, maybe the body was linked to the career but that kind of thing where the body went after, if you understand what I mean, that the body went after the career … Maybe the body reflects where you are at as well, for me, reflects where I am at. (Lines 304-314)

It may have been easier for her to confront the visible changes in her body than to accept the unseen, but painful changes she perceived in her identity. Maybe she could also be more objective about her body than she could be about her identity.

When she later returned to work, she seemed to feel that, to an extent, both her identity and her body were restored. However, even though she was happier that her body had trimmed down, she still perceived it as being different from before. She said:
What was interesting was that in the job, my weight dropped. It was like regaining that old identity as a career woman ... Ja, the weight came down again, but the body was not the same body anyway. It was gone. (Lines 170-189).

In terms of Catherine’s perceptions of ageing, she seemed to regard her body as a barometer that had reflected and recorded various events which had occurred in her life. Her body seemed, therefore, to be a constant, visual reminder of her life experiences. It seemed she used the explanations she gave to her body changes, to make sense of them and the other changes (roles etc.) she was experiencing.

**Acceptance vs. ambivalence towards the ageing process**

The theme of acceptance of ageing seems to follow from the previous theme of body as a barometer since Catherine’s feelings about her body were a significant part of how she felt about ageing. Catherine seemed to equate ‘successful’ ageing with an acceptance of the physical ageing process. However, a strong sense of ambivalence was noted because although she would like to ‘accept’ ageing, it seems as though her feelings are incongruent with her actual experience of the process. She appears to have an ‘ideal’ view of how she would like to age, and she feels disappointed that her experiences have not been as she ‘imagined’ they would be.

A further reason for her ambivalence may be because she feels that at 47 she ‘should’ already have accepted the ageing process, and she has not. She may compare herself with other women her age who seem to have come to terms with ageing. However, it seems as though she does not take into account that while they may share the same chronological age, they may be at different life stages from her own. They may, for example, have children who have already left home, leaving them without the responsibility that she has of still trying to raise a young child. Her experience of being out of synchronisation as an older mother, therefore, may contribute to her feelings of ambivalence towards the ageing process.
When she was asked what she felt was the most important aspect about ageing, she replied:

It’s just an acceptance of ageing, an acceptance of your body changes more than anything else. It’s not a mind thing. (Lines 8-9).

This seems to be a contradiction since ‘acceptance’ implies a state of mind. Catherine did, however, seem to feel that being unable to accept her body was a major obstacle in terms of her experience of the ageing process. She appeared to be battling to reconcile the way her body had changed, with the image she had of herself when she was younger. Her struggle seemed to distress her and it seemed as though she would like to accept the changes so that ‘calm’ could return to her life once again. Although she claimed that she had come to terms with these physical changes, the manner in which she spoke about her body seemed to contradict her words. She said:

Now I’m actually feeling ok, now I’m feeling like this is the body you’ve got, but it took a long time to get there. This is the body you’ve got, you’re not going to have the body that you once had as a 20 year old. You don’t want to have the body you had as a 20 year old. So there’s a bit of fat on your arms, who cares … I think just time and certain acceptance. Not fighting, learning to love yourself in a different body or love the new body as opposed to taking the other one for granted. (Lines 88-116).

She did not say: “this is the body I’ve got … I’m not going to have the body I once had as a 20 year old,” rather, she used the second person in her description. In this way, she seemed to reject her ‘ageing’ body, which she seemed to feel had been thrust at her. Speaking in this fragmented manner seemed to highlight the lack of integration she felt.

In addition, she seemed to be in the process of mourning the loss of her youthful body, which she regarded as “the other one”, while at the same time she seemed to be trying to adapt to her “different” or “new” ‘middle-aged’ body. She also seemed to have taken her youthful body for granted, whereas her “new body” demanded attention and became something she had to focus on and deal with purposefully. She mentioned that she had decided to go to
gym, and this seemed to imply that she wanted to change her body and/or her (negative) feelings towards it. However, she then contradicted herself by saying, “it actually doesn’t matter”, when it seemed that it ‘really’ did matter. She said:

Then I went off to gym yesterday, and I suppose I’ll struggle with that again for a while, won’t I? But it’s that, that whole thing of it actually doesn’t matter. This is my age and this is my body and it’s ok let the age and the body be the same. (Lines 93-96).

Catherine claimed that part of the ageing process might involve ‘rethinking’ what certain concepts meant, for example being beautiful or ‘sexy’. However, although she felt that “being happy with yourself ... comes with age”, she is not yet at that stage, and she does not seem to have considered that she may never reach this ideal state. She still seems to ‘buy into’ socially sanctioned images of beauty and ‘sexiness’ even though she claims she does not. She said:

Sexiness doesn’t have to be, “I’m not sexy at this size ...” So I think it’s about being happy with yourself and projecting that out which I think comes with age. It doesn’t come with being young. Because then we haven’t really worked out who we are. As we accept that then maybe we rethink what sexy means, or rethink what beautiful means. (Lines 102-108).

Several contradictions also seem evident in the following extracts where she talks about how ‘comfortable’ she feels with her appearance and her body. She said:

The wrinkles come in and you can see that you’ve got more wrinkles and that’s a big thing in ageing, you look at your body and it changes. And suddenly from 40 I’ve got this grey hair. But who cares? It’s there, it’s me, it’s part of me. If I choose to dye it, I’ll dye it. If I choose to run around with grey hair for months, it’s also ok. It’s part of me. (Lines 278-282).
I’m still not comfortable enough to wear a swimsuit, the body’s changed that much ... there I haven’t come to terms with it. Even before when it was a younger body, I wasn’t that comfortable so I’ve always had a big tummy. From that point of view I don’t know if that has changed that much. But I’m comfortable enough to walk around without clothes on so maybe I’m going back to where I was. So I flop here and I flop there but it’s ok. It’s back to that me which is very much the old me. (Lines 285-293).

It seemed that in wanting to be “the old me”, she was still unable to accept the body she had. Her use of the word “flop” in relation to her body also seems to be quite negative and seems to reflect her feeling of ‘rejection’ towards this ‘new’ body. She seemed to feel that she became a ‘different’ person in a ‘new’ body, which she did not like, and she seemed to want to return to “the old me”. It seems as though she is unable to accept that she is still the ‘same’ person, but in ‘different packaging’ and so she splits the two. The way in which she talks about “that whole body issue” also seems to indicate that she locates her struggle ‘out there’, and has not yet been able to integrate it into her image of herself. Accepting the ageing process seems to imply an integrated view which she lacks and perhaps belongs to a much later stage in her life.

In terms of her perception of her mother’s and her grandmother’s ageing processes, she seems to be fairly critical about the way in which they have aged. It seems as though she rejects their experiences of ageing because they differed from the way in which she viewed her own.

Catherine seemed to feel that in order to age ‘successfully’, one should ‘age gracefully’. Her approach seemed to imply that one should accept age-related changes such as wrinkles and grey hair, without trying to disguise them. She believed that she and her mother differed significantly in this regard. She explained:

I’m saying I have more acceptance of myself as a woman than my mother did then. But then my mother and I are very different people. My mother is naturally thin, naturally beautifully turned out. She hasn’t got this acceptance that I have and she
actually has less grey hairs than I do … I’ve never known her natural colour hair because she’s been dyeing and it’s been a different approach to being a woman. Apparently she started dyeing her hair when she was 16 or something stupid. So it’s a different acceptance of ageing. (Lines 372-380).

Catherine seemed critical of her mother’s need to always look “beautifully turned out”, which she felt was in sharp contrast to her own approach. She said:

Maybe it’s never been an issue to me … If my hair is dyed that’s fine, if it’s not that’s also fine, it’s not a reflection of me. If I go out without makeup it’s ok. If I go out with makeup, it’s ok. If I don’t have time to put makeup on it’s also ok. If my nails aren’t polished it doesn’t make me less of a woman … I never blow dry my hair. I go out with wet hair and I always have … So we’ve had very different approaches to the hairdos, the makeup. She goes out looking very well-groomed. But that’s maybe her view of how she should look, she as a woman. (Lines 389-304).

From Catherine’s account it seems as though she and her mother had often disagreed about how a woman ‘should look’. At times it may have been difficult for her to have grown up with a mother who was always “very well-groomed”. Catherine believed that many people, including her mother, were so worried about getting older, that they stopped enjoying their lives. She seemed to be determined not to let this happen to her. She explained:

So maybe its about acceptance that you can age as opposed to when you age this is what happens, and this is what you have to do to prevent it? And somewhere along the line you stop enjoying life, you’re so busy preventing it. (Lines 408-411).

Perhaps this focus on external appearances provided a focus for the real issues which were not dealt with.

She seems to be saying that she has accepted ageing, but, once again, her words do not seem to match her ‘actual’ life. She seemed unaware that her own negative perceptions of the ageing process as such an issue and a struggle had already affected her.
A further example of her belief in the importance of ‘accepting’ ageing, seemed evident from the way in which she described her grandmother’s ageing process. Catherine believed that her grandmother had not aged well because she ‘rejected’ the ageing process by withdrawing from social contact, fearing that people would see her as old. She said:

I have a granny who had Alzheimer’s. Somewhere along the line she aged. When I say she aged, somewhere along the line she stopped going out. No one would see her in a wheelchair. Do you understand? She stopped living. She had gained so much from life and then somewhere, no one will see me looking like this, no one will see me looking like that. I think that's what stopped her. So I think it's very much your mind dictating … she wasn’t reading, she wasn’t going to the library, she wasn’t working and she wasn’t going outside because she was in a wheelchair. (Lines 490-498).

In some ways, Catherine’s view seems quite naïve as she seems to feel that Alzheimer’s, a form of dementia, can be averted by ‘ageing positively’. Possibly this view stems from her desire to have more control over her life and over the way in which she hopes she will age. She does seem to consider that certain aspects related to ageing and to life may be beyond her control.

Catherine seems not to have accepted ageing although she says she has, and her account is filled with examples of her ambivalence. She is still fairly judgmental of those who have dealt with ageing differently from her and has not yet reached a point where she has acknowledged and accepted her own struggles. This acceptance might give her the objectivity or ‘distance’ to feel compassion for her mother and her grandmother. Although it seems as though she would like to have a more integrated view of herself and of her life, it appears that at ‘midlife’ she has not yet reached that stage which she may, or may not, reach when she gets older.

**Feeling out of synchronisation with the norm**

Catherine seems to feel that she is out of synchronisation in a number of areas in her life, and this seems to cause her discomfort. It was noted that
her feeling of ‘being out of step’ may also have contributed to her ‘struggle’ with the ageing process, which was discussed above.

The first area where it seems that she feels out of synchronisation is in relation to her mind and her body. Catherine seemed to feel that there was a significant difference between her body, which she felt was changing with age, and her mind, or self, which she seemed to regard as constant even though previously she said that she had changed with her changing body. She seems to feel very confused about who she is, and her confusion is reflected in her account. At times it seems as though she feels that her ‘inner core’ has stayed the same while other aspects of her personality seem to be evolving constantly. Perhaps she sometimes confuses the two (‘self’ and personality) and she may feel unable to recognise ‘herself’ in the midst of these changes. She may, therefore, feel the need to hold onto some aspect of herself that is unchanging.

She said:

That’s how I view ageing. It affected the body for me but it didn’t affect the mind. (Lines 481-482).

She explained this ‘mismatch’ between her mind and her body, saying:

It’s the body change, the image of the body changes, the way you dress had to change, all that had to change to stay with the ageing body, but your mind was different. Your mind didn’t match your ageing body … (Lines 13 – 15).

She added:

I still walked into a shop and went to the size 10 rack and nothing fits and there’s no point in going to that rack … you know it seems your mental picture of your body hasn’t changed. You’re still picking up clothes that would have fitted that no longer do. (Lines 34-37).
Catherine seemed to believe that her mind was too young for her “ageing body”, and that her body, the visible representation of herself, did not reflect this younger woman whom she felt herself to be. She said:

So very much the body is what the outside world can see as opposed to the inside which is still young and ageless. (Lines 328-330).

And yet she felt that she had lost something of herself with her bodily changes. She did, however, seem to regain her sense of self when she realised there was ‘no going back’ and that she had perhaps moved into a different stage of her life.

She seemed to have certain perceptions of what a 47-year-old ‘should’ look like, and feel like, and she did not believe that she fitted this image. She said:

… I don’t look my age …I just feel like I’m me, do you understand what I’m saying? … My body may look 47 … but when you look at me you don’t see someone who looks 47. (Lines 236-243)

In terms of her perceptions of ageing, she felt that it was important for her to be able to reconcile her mind with her body in order to feel more “comfortable” with herself. Ironically, it seems that she will not achieve the integration she seeks between her mind and her body until she feels more accepting of herself, and, therefore, more “comfortable” with herself. She said:

… maybe it is marrying the outward with the inward and being comfortable with it all. (Lines 283-284)

Catherine also seemed to feel out of synchronisation in terms of the timing of certain events in her life, such as her marriage and giving birth. In addition, she seemed to feel that the relationship she had before she met her husband, with a man who was 16 years older than she was, was also somewhat unconventional. In terms of being an older mother, she even felt ‘out of step’ because she fell pregnant more easily than she was ‘supposed to’ at her age. She said:
I married late … I fell pregnant before we got married because I was already 38 and you know you’re told your body is going to take a few years to fall pregnant, it didn’t, it took 2 weeks. (Lines 197-205).

When her daughter was born, she seemed to struggle to come to terms with her “whole identity change”. She recalled:

When we first moved there (the UK) and S was 6 months old I met a friend of mine … she laughed at me at a shopping mall, I arrived there in a suit pushing a baby. That was the part of the identity I had left behind and I had to deal with the fact that it was no longer … I’ve given that suit away now … but then that was life, that was what it was. (Lines 150-157).

She was later able to form friendships with a group of mothers of a similar age to herself, and this enabled her to feel a connection with them and to feel in synchronisation with them. Seeking and having a support group helped her to accept the changes she was experiencing more easily. She explained:

I was lucky because I got friendly with older mothers and they were going through what I had gone through. So it helps, it does help. Because it’s a whole identity crisis and their bodies changed. I don’t think any of us have perfect bodies anymore so it was ok with it there was a familiarity with that. And the conversation never really revolved around bodies. It revolved around this whole identity change. (Lines 139-151).

She felt that her miscarriage, of her second child, caused her body to feel out of synchronisation, and that this could be seen in her continuing to look pregnant after she had lost the baby. She also felt that the whole “rhythm” of her body changed. She said:

My periods are still strange … I never had period pain, I never had the backache or the stomach-ache, I never had anything. But from the time that I had that miscarriage I can get terrible migraines … so maybe it was all part of that limitation whereas beforehand everything used to flow normally. (Lines 331-348).
In relation to her career, going back to work at the age of 44 made her feel out of synchronisation because she seemed to feel discriminated against because of her age, and because she had a young child at home. She explained:

   It took me a while to get a job because of my age and apparently because when you’re a mother you lose your brain … Once I was in the job, of course the perceptions were different. (Lines 162-169).

Catherine also seemed to feel that her ideas were out of synchronisation with society’s. She claimed that she rejected society’s messages about how women ‘should’ look, saying:

   I don’t give a damn what society expects. It’s the conforming versus the non-conforming. (Lines 406-407).

However, it appeared that she was still influenced by these messages, seen for example, in her belief that it was ‘unacceptable to be fat’

   I walked into a shop once with a friend of mine and they only stocked clothes up to a size 16 and suddenly you’re taking a size 14! … you have to go through this whole thing of ‘I’m fat’ and I think coming from a South African background which is very, very body conscious it took a while to get used to it. … I had to move in that whole South African context of you’ve got to look just like this and to come to terms with that. So your body image, until you get used to it, it does restrict you … then you don’t fit in. (Lines 69-86).

Catherine also seemed to feel that she was out of synchronisation with her mother and that this manifested in the difficulties in their relationship. She may have felt that she had never lived up to her mother’s ideals and this rejection has stayed with her and might even be connected to the rejection she felt when she miscarried. It seemed that she was unable to accept that her mother’s views were different from her own and so she rejected them completely.

Catherine rejected the idea of ‘forcing’ her daughter to be a certain way, possibly because she felt her mother had tried to force her to be what she
wanted her to be. She was determined to “honour” her daughter, in terms of her upbringing, by allowing her to be herself. In this way she hoped her daughter would feel more in synchronisation than she had. She felt that the messages she had received from her mother about herself and her body had negatively affected her self-esteem, and had contributed towards her feeling out of synchronisation. This in turn had impacted on her struggle to accept the changes in her body. She said:

Being a mother is about total, unconditional love, total allowing the child to do it. For me the whole thrust is in honouring her, honouring what she has to do, and honouring her path, as opposed to you must put your hair like this, you must do this, you must do that … Maybe that’s coming from age and from the wisdom to be what my child needs as opposed to this is what I need … My big thing and what I pray all the time is to be the best mother I can so that she grows up with the best self-esteem she can because my own mother knocked mine all the time. (Lines 432-447).

Catherine hoped that by building up her daughter’s self-esteem and by supporting her, she would be able to spare her from the struggles she herself had experienced, and which she partially held her mother responsible for. She said:

I believe her body will stay with her forever because she won’t have these limitations thrust on her of this is how you’ve got to look and this is how you’ll be and her self-esteem will keep the body. (Lines 460-462).

Catherine seemed to feel that her body image, and possibly even her attitude to ageing, would have been very different if she had received the unconditional love that she needed from her mother.

Catherine seemed to experience a feeling of being out of synchronisation in a number of areas in her life. It seems as though this feeling of being ‘out of step’ may have contributed towards her ‘struggle’ with the ageing process. She felt that her mind and her body were out of step, and this caused her a great deal of discomfort. She also felt that the timing of certain key events in her life was different from that of others in her cohort and this may have made
her feel quite isolated. She also experienced a sense of being out of synchronisation in terms of her relationship with her mother and she even felt that her ideas were out of synchronisation with society’s. There were times, however, when she did feel in synchronisation with others, for example when she became friendly with a group of older mothers who were at a similar life stage to her own. The sense of having something in common with these other mothers seemed to make her ‘struggle’ a little easier.

**A Re-evaluation of identity**

Catherine’s perceptions of ageing seem to be strongly linked to her sense of who she is, or her identity. For Catherine, turning 40 seemed to be a turning point in her life, and a time of questioning and, perhaps, of re-evaluating her identity. This theme, therefore, seemed to follow from the previous themes.

During the past number of years, Catherine experienced many changes in her life. She was married and divorced; she ran her own company; she became pregnant, married for the second time, and emigrated with her husband to England. She had a baby, and she gave up her career to stay at home and look after her child. She subsequently had a miscarriage and she later returned to work, before coming back to South Africa. These experiences, together with the developmental changes she has undergone, seem to have contributed to her feeling that her identity changed or evolved. At the same time, however, Catherine previously said she felt that her inner sense of self had remained the same. Therefore she does seem to differentiate between her identity and her ‘self’ although at times she seems to confuse them. This may be a further example of the ambivalence Catherine seems to feel about ageing.

One of the many changes Catherine experienced was a change in her environment when she and her husband moved to England. Catherine described the effect of the move, and how she coped with her new situation, saying:
I think that confidence thing is also related to image and achievement and for me when we moved to the UK and I stopped working and became a housewife and my whole mindset around that had to change. And my being a housewife as you know you do your housework, you do whatever chores have to be done or whatever as opposed to here. So it's not a meaningless existence, it's a different existence ... And you have to get out, and you have to do things, and you find things to do that you enjoy. Because your whole life changes and your whole focus has to change and maybe that contributed towards, well definitely contributed towards your whole state. (Lines 126-136).

Catherine also seemed to feel that she had lost some of her old identity as a successful career woman when she added the roles of mother and a homemaker to her repertoire, and that the process of coming to terms with these changes was difficult. Perhaps her new roles were not as satisfying as being a career woman had been, and she certainly did not hold the same status. This refers to a grand narrative that asserts that being a homemaker has no value, and in this way it oppresses women who fill this role. Catherine realised, however, that she needed to make an effort to make her life more meaningful, and she did so by trying to get out and expand her contact with others.

It felt, to Catherine, as though her life had changed completely. She described the shift from what she may have regarded as her ‘previous life’ as a career woman to being a fulltime mother. She recalled:

I was in recruitment. I’ve been in recruitment for years and years. I opened my own company and then we moved to the UK when I was pregnant. And then S was born and suddenly you’re in this whole routine. You can’t get another job because this is what it’s going to pay you to find someone to look after your child and your whole salary is going to go because you’re starting off again ... so you stay at home and you have to deal with that whole situation. (Lines 139-145).

From having had a successful career, it seemed as though Catherine felt quite trapped by the situation in which she found herself in England with a new baby. Although she described having a child as one of the “highlights” of her life, it was as though she had moved from a position of complete
independence to one where her freedom was largely curtailed. Later, becoming part of a group of other mothers, helped her to come to terms with her “identity crisis” and to cope with her circumstances. Currently, Catherine seems to be at a point in her life where she is trying to reevaluate her identity based on her own “reality” rather than on societal and familial expectations, which she claims she has rejected. She also seems to recognise the power she has to ‘reinvent’ her identity, rather than just passively accepting that she has no choice regarding the manner in which she will age. She said:

Not only do you not have to buy what’s out there, but it’s your own reality. Your body doesn’t have to buy into that reality … it’s your emotions, your mind, which is part of your concept and your identity so you can keep it. You’ve got to reinvent your identity so that it serves you best and you can still enjoy life as opposed to becoming this old lady with grey hair and pink lipstick … Even if you are this old lady with grey hair and pink lipstick you can still go out and enjoy your life, you don’t have to be limited in what you can do. (Lines 584-591)

In relation to this re-evaluation of her identity, Catherine seems to have experienced certain gains as she has become older. One of these gains was greater selflessness which she mentioned in terms of allowing her daughter to chose her own path. She said:

For me it is the honouring as opposed to the superficial. Maybe that’s coming from age and from the wisdom to be what my child needs as opposed to this is what I need. (Lines 436-438).

In contrast to some of the negative feelings she expressed about getting older, she seemed to feel that this “wisdom” was a more positive, and acceptable ‘side effect’ of ageing. She added:

From life, as such, you’ve got more wisdom and your view to life changes but you essentially do feel ageless. (Lines 251-252).

On a certain level it seems as though Catherine still measures herself according to society’s expectations which she ‘buys into’ to an extent. She
may be on the road to acceptance, but she needs to recognise that this is an ongoing process. In being more compassionate towards herself, she may also find the process easier.

**Personal Reflections**

Of the three interviews conducted, I found the interview with Catherine to be the most complex to analyse. Upon reflection, I think that the difficulty I experienced in writing this chapter mirrored Catherine’s confusion and lack of integration in terms of how she perceives ageing. This was further complicated by the intrusion of my own feelings of fear and uncertainty about getting older. Even after having redrafted this chapter several times, it seems to have retained an underlying feeling of uncertainty which, I think, reflects how Catherine and I feel about ageing.

Although Catherine is 8 years older than I am, she was the youngest of the participants and I found that certain of her feelings about ageing, especially in terms of re-evaluating her identity, resonated with my own. I also identified with Catherine because we are both at similar life stages in terms of being mothers of young children. Before the interview, I had certain assumptions about how middle-aged women felt about ageing. On the one hand Catherine’s story confirmed some of my fears about turning 40. On the other hand, I realise that we are both individuals with very different lives and attitudes, and that I have my own life journey. Although I often found Catherine’s views about ageing to be quite negative, it seemed as though she was beginning to come to terms with the age-related changes she was experiencing. I am grateful to Catherine for sharing her perceptions and experiences of ageing, which I believe shed light on how complicated the process of ageing is. If women can share their experiences in such an honest way, they may feel less isolated and better able to cope with the changes that occur as they age.
Conclusion

Based on the analysis of a transcribed interview between the participant and myself, the following themes were highlighted.

- **Body as a barometer**
  Catherine seemed to regard her body as a barometer that has reflected and recorded various events which have occurred in her life. These included her marriage, motherhood, turning 40, a miscarriage, and returning to a career. Her body seemed, therefore, to be a constant, visual reminder of her life experiences. She often expressed negative feelings about her body, and it seems as though it may have been easier for her to focus on the outward, tangible signs of change, than on the impact which these events had on her.

- **Acceptance vs. ambivalence towards the ageing process**
  The theme of acceptance of ageing seems to follow from the previous theme of body as a barometer since Catherine’s feelings about her body were a significant part of how she felt about ageing. Catherine seemed to equate ‘successful’ ageing with an acceptance of the physical ageing process. A strong sense of ambivalence, however, seemed to underlie her perceptions in this regard because although she would like to ‘accept’ ageing, it seems as though her feelings are incongruent with her actual experience of the process. She may compare herself with her other women her age who seem to have come to terms with ageing however, she does not seem to take into account that although they may share the same chronological age, they may be at different life stages from her own. Her experience of being out of synchronisation, therefore, may also contribute towards her feelings of ambivalence towards the ageing process.

- **Feeling out of synchronisation with the norm**
  This theme links with the previous theme since Catherine’s sense of ‘being out of step’ in several areas of her life seems to have contributed towards her struggle with the ageing process. She seems to feel that a number of
aspects in her life are out of synchronisation with the norm. These include her feelings about her mind and body being out of synchronisation; the timing of certain events in her life; her ideas in relation to those of society; and her relationship with her mother.

- A re-evaluation of identity
  This theme seemed to follow from the previous themes, as Catherine’s perceptions of ageing seem to be strongly linked to her sense of who she is, or her identity. For Catherine, turning 40 seemed to be a turning point in her life, and a time of questioning and, perhaps, of re-evaluating her identity.
CHAPTER 7

COMPARATIVE ANALYSIS

INTRODUCTION

In this chapter a comparative analysis will be undertaken between the themes associated with the participants’ perceptions of ageing and the literature. Similarities and differences between the themes and previous research will be discussed. This comparison is made not to substantiate the themes but to include the many voices on this topic.

The following themes seemed to recur in the three accounts and appear to have a bearing on participants’ perceptions of their ageing process:

- Connection and disconnection
- Feeling out of synchronisation with the norm
- Public image versus personal perception
- Acceptance
- The positive aspects of being older

These themes that I, the researcher, have identified are not mutually exclusive and may overlap.

The Theme of Connection and Disconnection

The theme of connection and disconnection refers to the way in which the participants were connected and disconnected in various contexts.

In terms of Gina’s account, her sense of being connected to her inner ‘self’, to others, and to her life seems to be a key component of the way in which she perceives and experiences her own ageing process as positive. At 91, she
seems to have gained a perspective that has enabled her to focus on her life as integrated, and on herself as an integral part of it.

When Gina was younger, she found it difficult to connect with others because of her shyness. She enjoyed a close connection with her mother, who was also shy and who understood how she felt. Despite her shyness, she made an effort to meet people and to make friends. According to Smith (1999, p. 295) "increased interpersonal contact can lead to a changing conception of self as related to others." Later, Gina was able to connect with her husband and their connection seems to have helped her to cope with the sense of disconnection she may have felt when she had to leave her family and her home during World War II. When Gina and her husband disconnected through their divorce, when they were living in South Africa, she seemed to connect with herself and developed her own identity. She was also able to connect with her 'new' country, South Africa. Several years later, she reconnected with her ex-husband and they became good friends until his death. Now that she is older, Gina has fewer connections than she had when she was younger. However, even at 91, she has continued to try to expand her connection with others, and she seems to feel strongly connected to her friends and family members. Social relationships and family involvement are regarded as important factors in terms of the emotional well-being of older people, and are important determinants of life satisfaction (Hillerås et al., 2001), which seems to be the case with Gina.

Unfortunately, however, despite wanting to maintain connection with others, at times, her hearing loss hampers her efforts and causes her to feel quite disconnected from them. According to Thompson (1993), hearing loss makes communication more difficult and it can limit activities which were previously enjoyed. Thompson (1993) adds that people who cannot hear well often withdraw socially rather than subject themselves to the embarrassment of misunderstanding what is said to them. This seemed to be the case with Gina in terms of how she related to the other elderly people at the residential hotel where she stays and on occasion with her family members.
Apart from her hearing difficulties, Gina still enjoys relatively good health. However, being ‘so healthy’ appears to make her feel guilty around the elderly who are often not as well as she is, and she feels increasingly disconnected from them. Two positive aspects, however, which seem to have resulted from her disconnection from people her age, are that she has been able to connect with herself and develop her own identity; and she has been encouraged to seek connections with younger people, for example, her granddaughters. In terms of her self-development, she has been able to undertake activities that are personally meaningful for her, such as attending lectures, while her friendships with younger people seem to have helped her to preserve her sense of youth and vitality. Finding meaning in life is highlighted by Frankl as being the key component of a purposeful existence (Frankl, 1946/2004).

The personal meaning that Gina seemed to derive from her daily activities throughout her life and even in her later years also seems to play an important role in terms of the sense of connection she feels to her life. This is borne out by research which indicates that the “ordinary and familiar things people do every day” (Bonder & Martin, 2000, p. 178), contribute towards a sense of living a meaningful and purposeful life.

In relation to Marie (65), there seems to be an overarching theme of connection in her story. Like Gina, Marie seems to be very connected to her life and to the people in it, and this seems to have impacted positively on the way in which she perceives ageing. However, there are also differences in the way in which Gina and Marie experience connection in their lives. One of the ways in which their experiences of connection differ may be linked to the difference in their ages. While Gina’s world has narrowed considerably, in her nineties, causing her to have fewer social connections with others, Marie, at 65, still experiences her world as ‘wide’, and as providing her with many opportunities for connection. This seems to have impacted positively on Marie who describes herself as being “hugely satisfied” with her life. She also seems to be content with her age.
A further way in which their experiences of connection differs, is, that unlike Gina, Marie did not have close relationships with her family of origin. As the eldest daughter of an alcoholic mother and a father who was a “workaholic”, Marie experienced a strong sense of disconnection from her ‘absentee’ parents. As a result, it seems that she connected with herself and learned to rely on herself early on in life. She also became determined to create a very different life for herself. Despite the disconnection she experienced in her past, she has since been able to connect well with others. According to Wiloxin, Walker, and Hovestadt (cited in Coombes & Anderson, 2000), the experiences which social workers from alcoholic families of origin had as children, often resulted in them developing good interpersonal relationships and coping skills as adults. Marie’s experiences seem to have been similar. She was able to forgive her parents and to let go of the disappointments of her early years. In this way Marie seems to have transcended the difficulties of her past and she has created a satisfying life for herself and for her family in the present. As Frankl (1946/2004, p. 147) stressed,

> even the helpless victim of a hopeless situation facing a fate he cannot change, may rise above himself, may grow beyond himself and by so doing change himself.

In other words, Marie seems to have found a sense of meaning in her life by “rising above” (Frankl, 1946/2004, p. 147) her own childhood experiences and by working towards the goal of having a happy family of her own. She now has a very strong connection to her husband, to whom she has been married for 39 years, and she is also very close to her children. Marie’s connection to her family seems to be the ‘foundation’ on which her life is built. It seems to give her the strength to undertake any task, including her experience of ageing.

Marie’s sense of connection to her ‘self’ also seems to be related to her sense of living a meaningful and positive life based on her spiritual beliefs, her belief in the importance of physical exercise, and her devotion to her family. She seems to have a holistic view of her life and her perceptions of ageing seem
to be an integral part of her outlook. Marie's sense of fulfilment in her life seems to connect with Frankl’s (1946/2004, p. 8) view that people are motivated by a “will-to-meaning”. Shantall (1997, p. 531) explains this as follows:

The human person needs to find a reason (purpose) to live; that true fulfillment is hardly possible without a sense of purpose (spiritual direction) in life ... the central issue for the human person is not the struggle to survive but the struggle to find and experience meaning in life.

Unlike Gina and Marie, Catherine (47) seems, at times, to feel very disconnected from her ‘self’ and, in particular, from her body. In addition she seems to feel she is undergoing a transition in relation to her identity. According to Levinson (cited in Holahan et al., 1999, p. 238) midlife is a “critical time for reassessment”, where there may be “significant transition – in roles as well as in inner perspectives” (Bee, 1996, p. 396). The idea of a ‘midlife crisis’, a component of several developmental theories, is also hinted at (Bee, 1996). The age of 40 appears to have an “important symbolic meaning, marking the ‘halfway’ point after which one goes ‘down the other side’” (Sherman, 1994, p. 405). Catherine seems to feel that she is in the midst of a transition and this seems to have resulted in her fairly negative perceptions of ageing. At 47, it seems that she is possibly not yet at the point where she is able to see her life as integrated, and this appears to be congruent with the life stage she is at. Her account was filled with ambivalence, which seems to be a further reflection of the sense of disconnection and fragmentation that she feels.

Many of Catherine’s perceptions regarding ageing focus on her body, which she seems to experience as being disconnected from her mind. She often spoke about her body as “the body” and she seemed unable to incorporate her feelings about her body into her image of herself. Öberg (2003, p. 106), believes that the body is “central to self-identity”, and a component of the “embodied self”. This viewpoint seems to shed light on a possible link
between Catherine's struggle to accept, or connect with her body and her lack of a clear sense of self. According to Öberg (2003) bodily changes like puberty, pregnancy and menopause challenge self-identity. In Catherine's case, motherhood, with its accompanying body changes, seems to have led her to feel disconnected from her femininity and sexuality for a while, and this also impacted on her identity. The miscarriage she then suffered two years later seems to have contributed to a major sense of disconnection in her life; both in terms of the rejection she felt from her unborn child, and in terms of her body, which she seemed to feel had 'let her down.' Catherine regarded her miscarriage as being the catalyst for the physical changes she experienced, even though other changes had occurred previously. She seems to have projected many of her unresolved feelings about the trauma of the miscarriage onto her body. She also seemed to reject her 'self' as encapsulated in her body. At this stage it seems as though she is struggling to accept her body, and, therefore, to connect with it. Secord and Jourard (cited in Potts, 1993) offer an explanation which seems to support Catherine's feelings about her body. These authors coined the term "body cathexis … defined as the feelings of satisfaction or dissatisfaction one has about one's body" (Secord et al., in Potts, 1993, p. 22). According to this view, feelings about the body are believed to correspond with feelings about the self. Therefore, "negative feelings about the body are associated with feelings of insecurity involving the self" (Secord et al., in Potts, 1993, p. 23). It seems as though body image, self-concept and self-esteem are closely linked and interact in various ways and impact on a woman's self-appraisal.

Although she seemed to long for connection between her 'self' and her body, which would signify an acceptance, for her, of the ageing process, she does not seem to have reached that 'stage'. Gina and Marie, on the other hand, do seem to be at stages of their lives where they are able to perceive a greater sense of connection in relation to themselves and to their lives. This does not mean that Catherine will necessarily reach this stage as her own ageing process may have a different outcome.
Catherine’s account is filled with examples of her experiences of connection and disconnection in her social interactions. In relation to her mother, Catherine seemed to experience a sense of disconnection, and she may have felt that she was unable to live up to her mother’s ideals. She also seemed to feel that her body image and possibly even her perceptions of ageing would have been very different if her relationship with her mother had been more positive. Here she seems to have an external locus of control believing that circumstances control her rather than believing that she can direct her own life (internal locus of control) (Rotter in Meyer, 1997). In this regard she is unlike Marie who, despite her poor relationship with her parents, managed to carve a different life for herself. According to Akiyama, Antonucci, Takahashi and Langfahl (2003, p. 2), research suggests that there is a “general tendency of increasing positivity and decreasing negativity in affect and social relations as people age.” However relationships vary and are affected by many different factors that play out in unique ways in the context of each individual life (Akiyama et al., 2003). Possibly Catherine’s relationship with her mother will improve as she gets older.

In terms of her other relationships, Catherine experienced both connection and then disconnection when she married, and subsequently divorced her first husband. She later remarried and connected with her second husband, and thereafter she connected with her baby daughter. Although she found motherhood to be a highlight, and seemed to connect with the ‘mothering part’ of herself, she also struggled with what she termed her “whole identity change”. It seemed that this was partially because when she became a mother, she gave up her career to become a fulltime mother, disconnecting from the ‘career woman’ part of her identity. According to Bonder and Martin (2000) a person’s occupation is a source of meaning and purpose in life. They believe that “much of one’s expression of self and life-satisfaction comes from doing, from undertaking personally meaningful occupations” (Bonder et al., 2000, p. 177). In her research on identity development during the transition to motherhood, Smith (1999, p. 292) suggests that women may turn "away from the public world of work and towards the more domestic family world" during this time. According to this view, it seems that Catherine’s
change in focus from working life to domestic life when she became a mother, was part of a 'normal' process of the transition to motherhood. On the other hand, however, it also seems that giving up work also affects a woman's identity, and that this is a further 'normal' transitional process. One of the participant's in Smith's (1999, p. 293) study expressed similar views to those of Catherine, even though she underwent her own unique experience of motherhood. She said,

I just feel less confident about who I am and what I have to offer than I did -say prior to giving up work … it stopped providing that identity, I mean it took an identity away from me.

In terms of her relationship with her daughter, Catherine seems to feel very connected to her and she seems determined to give her daughter the support she felt she did not receive from her own mother. However, Catherine also seems to see the importance of being able to disconnect from her daughter, at times, in order to help her daughter to develop her own independence and build her sense of self-esteem. Smith (1999, p. 295) supports this view and emphasises the importance of "recognizing connection as well as separateness as important factors in self-development and self-definition."

Whilst the theme of connection and disconnection was relevant to each of the participant's stories, each of the women expressed it in a unique way based on her own perceptions and stage of life.

**The Theme of Feeling out of Synchronisation with the norm**

According to Penguin Wordmaster Dictionary (Manser & Turton, 1987) "synchronisation" is defined as the occurrence of events or situations at the same time. A sense of harmony is often the outcome of synchronisation (Manser et al., 1987). This sense of harmony (and disharmony) often seemed to underlie the participant's experiences. The theme of feeling out of synchronisation with the norm also relates to the previous theme since feeling out of synchronisation seems to lead to a sense of disconnection. As a result,
there is a certain amount of overlap with the preceding theme. All three of the participants seemed to feel that they were out of synchronisation in terms of the ageing process.

For Gina, it seems that one of the main areas where she feels out of synchronisation, and therefore experiences 'disharmony', is in terms of the positive manner in which she is ageing. Her general attitude challenges the conventional notions of 'aging as decline' despite her experiencing the results of her ageing such as her hearing loss and other physical signs. As a result, she seems to feel very different from others her age. She still drives, attends yoga classes, and travels overseas annually, among other activities. She also has a positive outlook on life. She often seems, therefore, to feel alienated from other elderly people whom she perceives as being on a different “wavelength” from herself, both mentally as well as physically.

In terms of the timing of certain key events in her life, such as her marriage, having children and her career, Gina seemed to feel that many of these occurred ‘off time’, rather than on time. Neugarten and Datan (cited in Goodhart & Zautra, 1984, p. 253) suggest that “the same event in a different context has very different psychological meanings and effects.” In Gina’s case, her experiences of marrying when she was very young, as well as becoming a mother when she was older than the other women she knew, seemed to make her feel out of synchronisation with other women and with society's expectations of 'normal developmental trajectories.' Sherman (1994) believes that the concept of being ‘off-time’ has a significant impact on age identity. Gina's 'off-time' experiences seem to have impacted on her feeling younger than other women of her cohort at certain times, and older than them at other times. Gina's awareness of her age under these circumstances, appears to have exacerbated her sense of feeling 'out of step' with 'the norm'. Neugarten (cited in Bee, 1996, p. 11) is of the opinion that events which are “off time” and follow a timetable which deviates from the “normal expectable life cycle” are more disruptive than events that are “on time”. However, her feeling of being out of synchronisation as an older mother led Gina to join a group of younger mothers, which she found beneficial, and which she felt may
have ‘kept her younger’. The timing of the abovementioned events in Gina’s life, coupled with many of the ‘unconventional’ experiences of her youth caused Gina to feel notably out of synchronisation with the norm. However, although she felt out of synchronisation with the norm, she did not seem to experience these events as disruptive because for her they occurred at the right time and impacted on her age identity in a positive way.

In terms of her work, Gina began her career at an age (42) when many of her cohort were already thinking of their retirement. She seemed to feel out of synchronisation as a result of being older, and also because she was the only woman in a middle management position. As a result of her involvement at work, she also had less time available to socialise and this left her feeling somewhat isolated from her social circle.

Being out of synchronisation in so many areas of her life seems to have led Gina to feel that she was quite ‘different’ from other people, and this seems to have caused her to feel quite alienated from them at times. However, it also seems to have encouraged her to make a greater effort to try and form relationships with others, and also to engage in activities that are personally meaningful for her. Rather than having the negative impact on her life predicted by the literature (e.g. Neugarten in Bee, 1996), it seems that feeling out of synchronisation with ‘the norm’, has enabled Gina to remain feeling ‘young’ and vibrant.

The strong feeling of connection which characterises Marie’s account seems to be strongly correlated with a sense of her being in synchronisation (and in harmony) with the norm. However, there are still areas in Marie’s life which seem to be out of synchronisation with the norm. Marie’s early experiences in her family of origin seem to have left her feeling notably different from her peers. Marie's early life seems to have been coloured by a lack of congruence between her experiences and her expectations of family life (Goodhart et al, 1984). She seemed, therefore, to feel out of synchronisation with her own family and the families of her friends and this led her to create a façade that things at home were more ‘functional’ than they actually were.
This seems to have been her way of trying to feel more in synchronisation with the idea of what she felt a family ‘should’ be. Taylor and Brown (cited in Brown, 1998, p. 275), propose that there is a link between "positive illusions and psychological wellbeing." These authors believe that these "positive illusions" often help people to cope better in their environments. (Brown, 1998, p. 275) In Marie’s case the "positive illusion" she created about her family seems to have helped her to cope with the challenges she faced while she was growing up and has also helped her to transform her life in the present. As an adult, she has created a more functional and normal family than she experienced in her family of origin. Coombes et al. (2000, p. 5) discuss the resilience of certain children from alcoholic families which might provide a further explanation for this. Many of these children developed a strong sense of responsibility for the other members of their families, and the researchers suggest that "responsibility for others may be linked with themes of feeling loved and gaining strength from overcoming adversity." In addition, they found that as adults, those from alcoholic families who received counselling were able to recognise the impact of their dysfunctional childhoods and subsequently often made decisions to parent their own children better, in order to break the cycle of their pasts (Coombes et al., 2000). Marie’s own resilience and experience of counselling helped her to come to terms with her past and created in her a determination to create a different life for herself. Her experiences, therefore, seem to be similar to those of the resilient children from alcoholic families and helped her to be more in synchronisation with her own family, and with her ideal of what a family should be.

During the years of her adolescence and young adulthood, it seems that Marie’s experiences may have contributed to her sense of being out of synchronisation with her identity. She felt that she had to “mask” her feelings and sacrifice her identity in order to be “the hero” in her family. It seems that in always trying to be what others wanted her to be, Marie was left feeling confused about who she really was. Once again, this is in opposition to the present where Marie seems to know exactly who she is, a feeling she describes as being “comfortable in (her) own skin.” In addition, her
membership of AA and ALANON have allowed her to feel that she is in synchronisation with the other members of the organisation with whom she shares a “common thread”, of “fellowship”. Goodhart et al. (1984, p. 268) stress that “the degree of fit” between a person and the “reference group” which he or she selects, plays an important role in a person's quality of life. It is clear that Marie’s membership of AA and ALANON enhances her satisfaction with her life.

In terms of her health, Marie, like Gina, seems to enjoy relatively good health for her age, and she also does not fit the dominant narrative of how she ‘should’ be. She seems to be aware that, as a 65-year-old gym teacher, she is somewhat out of the ordinary. She acknowledges that she feels “very lucky being this age and being this far along the line”. She also perceives that other people may feel that she is ‘too old’ to be teaching exercise, and as a result she does not discuss her age at the gym. Despite looking after her health, however, Marie had to undergo heart surgery last year for a collapsing heart valve. It seemed that her heart was out of synchronisation with her perception of herself as fit and healthy, and it seemed to ‘let her down’. However, on the other hand, she believed that having a body that “was very, very much younger than her years” saved her life.

In terms of Catherine, it seems that her sense of being ‘out of step’ in several areas of her life has, unlike Gina and Marie, contributed towards her struggle with the ageing process. She experiences a strong sense of being out of synchronisation in terms of her mind and her body, which she feels are ‘mismatched’. Like Gina, she has also experienced the timing of certain events of her life as being ‘off time’, and she often feels that her ideas are out of synchronisation with those of society.

With regards to her feelings about her mind and her body, Catherine seemed to feel that her body, which was changing with age, was out of synchronisation with her mind, or self, which she seemed to regard as constant. She had, however, previously said that she had changed with her changing body. This is a further example of the contradiction often found in
Catherine’s account which seems to echo her feeling of confusion about her ageing process. Catherine's feelings about her body seem to be supported by the literature. According to Saucier (2004, p. 3):

> Even women who have not been overly concerned with body image in their younger years will report an astonishment at their aging bodies … Although a person might feel the same on the inside, the outer shell has changed, and identity confusion results. A feeling of losing control of their bodies is also reported by many women, particularly those in the midst of a midlife crisis.

Like Gina, the fact that Catherine did not follow the ‘normal’ timetable expected by society, seems to have affected her sense of feeling out of synchronisation with the norm. Goodhart et al. (1984, p. 258), suggest that in terms of the social context, "norms can be represented by high-probability events for the reference groups of which one is (or wishes to be) a member." A person, therefore, perceives and evaluates his or her situation on the basis of social comparisons (Goodhart et al., 1984). It seems that Catherine felt that she was 'out of step' on the basis of these social comparisons with those around her. However, like Gina, Catherine often tried to find a way of fitting in. Catherine, like Gina, gave birth to her child when she was older than the other women in her cohort. This led her to feel out of synchronisation with younger mothers and with other women her age. However, like Gina, she sought out and became part of a ‘support’ group of other mothers, and this helped her to accept the changes she was experiencing more easily.

In relation to her career, going back to work at the age of 44 made her feel out of synchronisation, at first, as she felt discriminated against because of her age. It seems that she may also have felt out of synchronisation at work as her roles as mother and homemaker had been more foreground than her role of worker, prior to her return to work. Roberts and Donahue (cited in Brown, 1998, p. 115) support this view and say, “how we think about ourselves depends largely on the social role we are playing.” Shortly after her return to
work, she seemed to feel more in synchronisation both with in terms of her role as a ‘worker’ and in terms of her relationships with her co-workers.

Catherine also often seemed to feel that her ideas were out of synchronisation with society’s, particularly with regards to society’s messages about how women ‘should’ look. According to Saucier (2004, p. 1), "women seem to be more vulnerable than men to the pressure from society to conform to its expectations." As a result, they seem to struggle more with issues of self-worth, particularly during middle age. Although Catherine claimed not to "give a damn (about) what society expects", it appeared that she was still influenced by these messages, for example, in relation to her belief that it was ‘unacceptable to be fat’. According to Potts (1993, p. 15), for women, thinness is not only equated with physical attractiveness, "pursuit of a thin body constitutes a pursuit of femininity." In her account, Marie spoke about the intense pressure there is for younger women to look perfect. Whereas Marie, at 65, now feels a freedom from the pressure of having to look a certain way, it seems that Catherine, at 47, still experiences it, along with the anxiety and insecurity which accompanies it. Ironically, it appears as though Catherine's 'internalised belief' about the 'social desirability' of being thin, has contributed to her feeling out of synchronisation with herself, yet in synchronisation with the norm.

Catherine also seemed to feel that she was out of synchronisation with her mother’s expectations of what a daughter should be and that this manifested in the difficulties they had experienced in their relationship. She felt that the messages she had received from her mother about her herself and her body had negatively affected her self-esteem, and had contributed to her feeling out of synchronisation. According to Usmiani and Daniluk (1997), family relationships, particularly the mother-daughter relationship, plays an important role in identity development of adolescent girls. Mothers are regarded as being role models for their daughters, providing them with "information and guidance … regarding who they are as women, how they should feel and behave, and how their bodies measure up" (Usmiani et al., 1997, p. 2). This means that a mother's negative attitude towards her daughter's appearance
can affect the daughter's body image and self-esteem. As a result, Catherine seemed determined not to repeat her mother's 'mistakes' with her own daughter, and she hoped that by allowing her daughter more freedom to be herself, her daughter would feel more positive about her body and feel more in synchronisation with herself.

Each of the participants felt out of synchronisation with the 'norm' in terms of their experience of the ageing process. Goodhart et al. (1984, p. 260), believe that the way in which "asynchronies are resolved has important consequences for the individual's continuing growth and development." Each of the participants seems to be trying to age as well as she can and to find congruence for herself within her own life. The participants' experiences of being out of synchronisation with the norm in terms of ageing also seems to highlight the rigidity of developmental theories which fail to take individual differences and experiences into account.

**The Theme of Public Image vs. Personal Perception**

The theme of public image versus personal perception highlights the difference between what is seen on the outside (appearance), and what is felt on the inside ('actual' experience). Once again, this theme ties in with the previous theme. According to Featherstone et al. (1993), physical appearance plays a central role in the social construction of ageing.

A woman's sense of her own attractiveness 'figures prominently into a woman's feelings of self worth'... Thus, emphasis on the body and its appearance are central aspects and behaviours of the female identity and social experience (Rodin, cited in Hurd, 2000, p. 80),

The discrepancy between what Öberg (2003, p. 106) refers to as "look age" versus “feel age” is a recurring theme in the literature on ageing and also featured in the participants’ stories. Featherstone and Hepworth (1993, p. 309) often describe the ageing process as a mask or disguise that “conceals … the timeless human personality beneath.” Their description of this process
seems to illustrate the participants’ experiences of the “paradox about aging” (Karp cited in Sherman, 1994, p. 406). Featherstone et al. (1993, p. 310) say:

As a consequence the wrinkling of the face may come to be seen as a gradual masking of the individual’s sense of ‘true’ personal identity which is increasingly concealed and more difficult to express as time passes. The physical transformation of the face may thus lead to an experience of dissociation between inner selfhood and outward physical appearance.

The discrepancy between the way she looks on the outside and the way she feels on the inside was noted in relation to Gina. Although she looks much younger than she is, Gina has still experienced the effects of ageing, both in terms of a decline in her physical functioning, as well as changes in her appearance. However, like Catherine, Gina perceives a ‘mismatch’ between her external body which has aged, and her inner ‘self’ which she seems to regard as ‘ageless’. On the one hand, the external changes Gina has experienced seem to be “body reminders” (Karp cited in Sherman, 1994, p. 405) which highlight the fact that she is ageing, but on the other hand, she does not identify with being 91 and she refuses to act old. According to Baum (cited in Kaufman, 2002, p. 170),

age identification may best be conceptualized as a clinical continuum of subjective wellness.’ … since a decline in health is assumed to accompany aging, those who feel poorly will feel older while those who feel good will feel younger. Subjective age may be a more important factor for physical and psychological well-being than chronological age.

There were times when Gina did express her distress at certain age-related physical changes in her appearance, for example, when she spoke about having developed age spots on her hands. She admitted that these bothered her, but she also emphasised that her good health was more important to her than physical attractiveness. According to Hurd (2000, p. 88), Gina’s attitude is in line with those of other women her age, who “reconcile their negative
feelings about their aging bodies by focusing on the importance of health.” They appear to feel very grateful for their health and independence. There seems to be a shift in their priorities as appearances are regarded as trivial and good health becomes more important (Hurd, 2000). However, with regards to Gina, while her good health is a priority, she still wishes to look physically attractive.

According to Sherman (1994, p. 404) “age self-definition” is influenced by the way in which people feel they are perceived by others. This seemed to be the case in relation to Gina, who felt that other people often perceived her differently from the way she perceived herself. She was often annoyed, for example, when people tried to hold her arm and support her, assuming that at her age she would require such assistance. Gina explained that this made her realise that other people perceive her as being older than she feels, however it does not seem to have changed her perception of herself.

Unlike Gina and Catherine, Marie was the only participant whose “feel age” seemed to correspond with her “look age” (Öberg, 2003, p. 106). In fact, rather than describe her body as ageing and her mind or soul as ‘ageless’, she referred to her body as being “very, very much younger” than her chronological age. Although she had undergone heart surgery, the previous year, she felt that she had survived the surgery as a result of having a fit and healthy body.

Marie did not seem to focus on her physical appearance, although she admitted that she still “like(s) to look nice” and that “nobody likes to be invisible”. She seems to have accepted the “naturalness’ of the ageing process” (Hurd, 2000, p. 88). For Marie, like Gina, taking care of her health seemed to have become more of a priority for her than worrying about her appearance. She also felt that there is not the same intense pressure on her, that there is on younger women, to look perfect. This is in contrast to Catherine who still seems to feel this pressure. Marie felt that the ‘focus’ had shifted away from her and she seemed to accept it. However, she seemed pleased that she had the option of considering plastic surgery in the future, if
she felt the need for it. Having this choice seems to be important to her in terms of her independence, and she may feel that being able to make such a choice would allow her to be in control of one aspect of the ageing process. Cutler (2002) adds that plastic surgery is about identity, not about beauty.

   For a woman who feels trapped in a body which does not fit her sense of who she is, cosmetic surgery becomes a way to renegotiate identity through her body (Cutler, 2002, p. 2).

At present, Marie seems to feel that her appearance corresponds with her identity and she is satisfied with it. An area, however, where she does seem to have internalised certain cultural beliefs, is in terms of her weight. When asked about her appearance, Marie stressed that she would not like to “put on huge amounts of weight and let myself go … I don’t want to be fat. Definitely not.” (Lines 271-282). It seems that at some level Marie, like Catherine, has been influenced by the grand narrative which equates youthfulness with thinness, and weight gain and fatness with “moral failure or laxity” (Hurd, 2000, p. 91).

In relation to Catherine, she seems to feel that her identity has been “masked” or “concealed” (Featherstone et al., 1993, p. 310) by her outward appearance. Catherine, like Gina, seemed to feel that her mind was too young for her “ageing body” and that her body was not an accurate representation of the ‘youthful’ person she felt herself to be. Catherine even spoke about her body in the second person, which seemed to be an indication of the “dissociation” (Featherstone et al., 1993, p. 310) she was experiencing. Pearlman (cited in Russell et al., 2004, p. 4) refers to this “discontinuity between the internal image of oneself and the physical exterior as ‘late mid-life astonishment’.” Oberg (2003, p. 106), believes that, “the outer body can be interpreted as a betrayal of the youthfulness of the inner self”. It seems possible that Catherine sees her body as a “betrayal” of her ‘self’.

Catherine also expressed quite contradictory views regarding her appearance. On the one hand she claimed to reject society’s messages about how a
woman ‘should look’, but on the other hand, she still seemed to ‘buy into’ socially sanctioned images of physical attractiveness. According to Hurd (2000. P. 85), “existing cultural ideals of beauty and womanhood … lead many women to ‘fear aging itself as a loss of attractiveness and femininity’.” This was particularly evident in relation to Catherine’s feelings about having gained weight in recent years. Weight appears to be a significant issue for women of all ages, and Rodin et al. (cited in Hurd, 2000, p 82), refer to women’s concern and dissatisfaction with their weight as “‘normative discontent’”. Catherine, like many other women, seems to have internalised social and cultural beliefs which idealise youth and slimness, and this seems to have impacted negatively on her body image and self-worth (Hurd, 2000).

In conclusion, it seems that all the participants want to look attractive no matter what their age. They do not appear to want to look younger, and they accept that their physical appearance has changed, but they still wish to look good. O’Reilly et al. (2004, p. 12) concur saying, “losing the look of youth may be less of an issue for women than simply wanting to look their best at any age.”

**The Theme of Acceptance**

Each participant mentioned the concept of acceptance in relation to her perceptions of ageing.

Acceptance of the way in which she has lived her life thus far seems to be an important feature in terms of Gina’s perceptions of ageing. Her proactive decision to accept whatever comes her way, rather than passively ‘giving in’ to situational demands seems to have enabled her to see her life in a positive way. She even pointed out the difference between ‘accepting’ and ‘giving in’ in relation to the age-related physical changes she has experienced. For Gina, acceptance implied an adaptation to the physical changes which she could not alter, whereas ‘giving in’ seemed to imply giving up making any effort in areas where effort would still count, for example, exercising to remain
healthy. Ranzijn and Luszcz, (1999, p. 97), concur with Gina’s explanation, saying,

(a)cceptance may be one of the ways in which older people adapt to some of the unavoidable and irreversible changes that accompany ageing – given that there are things that cannot be changed, it is better to accept them than to let them get one down – and therefore may be an important contributor to successful ageing.

Despite her general acceptance of the way she lived her life, Gina did express a few regrets. These included not having spent enough time with her sons when they were younger. However, rather than dwell on this, she seems to have chosen to focus on the positive relationship that they now share and to accept that she did her best. She also expressed regret in terms of her relationship with her ex-husband. She seemed to regret that they had not been able to make their marriage work. However, as they gained maturity, and a greater perspective with age, she and her husband became very good friends. According to Akiyama et al. (2003), relationships often improve as people get older and become mature. "They acquire social skills from experience, learn to control their emotions … and improve their emotional understanding" (Akiyama et al., 2003, p. 2). This seems to have occurred in terms of Gina's relationship with her ex-husband. Their friendship seemed to help her to cope with the regret she had felt over their failed marriage, and to view it in a different light. Similarly Gina's relationship with her sons seems to have improved over the years. She has been able to overcome the guilt she felt at not having spent more time with them when they were younger. Brown (1998, p. 102) believes that people are able to perceive their lives in a positive manner because they "do not passively register the circumstances of their lives, they actively transform them … they adjust their goals and adopt different targets …" In contrast, Field (1997, p. 189) believes that “a part of coming to terms with one’s life includes the acknowledgement and acceptance of past choices.” Gina seems to have incorporated both of these approaches into her life. She has been very proactive in the way she has led her life, and it seems that at 91, Gina is able to see her life in perspective.
Rather than having regrets about not having lived a ‘perfect’ life without mistakes, she seems to have accepted the good and the bad, and to be satisfied with the life she has led. Erikson regarded acceptance as a vital element in terms of achieving integrity. He felt that people who do not accept the way they have lived their lives may give way to despair, while those who are accepting of their lives find meaning and satisfaction (Ranzijn & Luszcz, 1999). Gina seems to have satisfied all of Erikson's criteria for achieving integrity.

In relation to Marie, it seems as though her self-acceptance and acceptance of her life are major components of the satisfaction she feels at this stage. Like Gina, Marie, seems to have played a very proactive part in creating a satisfying life for herself. She seems to have made an effort to come to terms with her past and she was able to forgive her parents for her difficult upbringing. Marie had regrets about her relationship with her mother, however, giving her own children what she had not received from her mother, seemed to help her to ‘right the wrongs of the past’. She was then able to enjoy, in adulthood, the happy family life she had not experienced as a child. Although she had no choice in terms of the way in which she was brought up, she chose to react to it in a positive way. In this way, Marie illustrates Frankl's view that a person has the freedom "to choose one's attitude in a given set of circumstances" (Frankl, 1946/2004, p. 9). According to Frankl (1946/2004, p. 116), "when we are no longer able to change a situation … we are challenged to change ourselves." It seems as though, like Gina, Marie has always been aware that she has the freedom of choice in terms of how she chooses to react to circumstances. She emphasised this in her account and said, “we do have a choice, don’t forget, especially if we’ve been shown or placed on the right path.” This seems to have played a major role in terms of the way in which she perceives ageing. Although Marie has no choice but to age, she can still choose to react towards it in a positive way. Her comment that she now feels “comfortable in (her) own skin” and that she is “hugely satisfied” seems to illustrate her acceptance of herself, and of her life.
In terms of Catherine, the theme of acceptance of the ageing process was contrasted with that of ambivalence towards it. Catherine seems to equate ‘successful’ ageing with acceptance of the physical ageing process. However, although she wanted to ‘accept’ ageing, it seemed as though her feelings were incongruent with her actual experience of the process. As a result, a strong sense of ambivalence towards the ageing process was noted in her account. Catherine seems to have an ‘ideal’ view of how she would like to age, however, up until now, she has been disappointed as her experiences have not been as she imagined they would be. A possible reason for Catherine’s sense of ambivalence may be that she is in the process of revising her self-concept (Holahan, Holahan & Wonacott, 1999), since midlife is often considered to be an important time for reassessment. Cross and Markus (1991), use the term “possible selves” as a way to describe adult development and ageing. They explain that the term is used to indicate those elements of the self-concept that represent what we could become, what we would like to become, and, very importantly what we are afraid to become (Cross & Markus, 1991, p. 231).

In other words, the self not only includes “current self-attitudes and perceptions, but expectations about the future self and representations of the past self as well” (Cross & Markus, 1991, p. 231). It seems as though Catherine may be in the process of trying to unify her perceptions of herself (Cross et al., 1991), and that this process may be contributing towards the ambivalence that she feels.

According to Ranzijn and Luszcz (1999) people who are able to accept age-related changes as part of the ageing process seem to maintain their wellbeing. Self-acceptance is also regarded as being "crucial for the establishment of integrity" (Ranzijn et al., 1999, p. 94). In addition, it seems as though acceptance does not have to be absolute, but that there are different ‘levels’ of acceptance. Gina, Catherine and Marie, therefore, all seem to be at different levels in terms of their self-acceptance and acceptance of their lives.
The Theme of the Positive Aspects of being older

Based on the literature surveyed, there seems to be a move away from the problem-focused view of ageing (McHugh, 2000) towards more integrated, and more positive approaches (e.g. Bond et al., 1993; Fisher, 1992; Fodor et al., 1990; Gergen, 1990; Öberg, 2003; Thomas, 2003). The theme of the positive aspects of being older, noted in each of the participants' accounts, seems to reflect this trend towards a more balanced view of ageing.

In terms of Gina’s story, she emphasised that she feels happier at her current age than she felt when she was younger. She explained that this was because she felt it had taken her 90 years to “come out of (her) shell” and to conquer her shyness. As a result she has managed to form connections with others at a time when she has lost many of her old friends and family members. She also has been able to pursue new activities, such as her membership of the U3A, an organisation for senior citizens who run courses for each other covering a wide range of subjects. Her involvement in these activities seems to have enhanced her enjoyment of being 91.

Gina seems to regard the present as a time of fruition based on the effort she has made throughout her life to connect with others and to develop herself. A further positive aspect which she mentioned in relation to being her current age, is the freedom she now has from the worry she experienced when her children were young. She regarded not having to worry about her children, but being able to enjoy her relationships with them, as a positive aspect of being older. Hamarat et al. (2002, p. 361) assert that despite prevailing stereotypes of age as a time of decline, many older adults experience it as a time of “elevated satisfaction”, where they are “happier, experience fewer stressful events, and have fewer negative emotions” than younger people. This seems to apply in relation to Gina. It also seems important to mention that Gina’s “capacity for enjoying things”, as well as the effort she makes to live her life in a positive way, are important characteristics which seem to have helped her to adapt to her life as an older person, living in a 'narrowed' world. As she has aged, Gina also seems to have gained a perspective which has
helped her to focus on the different aspects of her life as part of an integrated whole. Looking back she seems to be satisfied with the life she has lived, and she seems determined to continue to enjoy it.

For Marie, it seems that the positives of being older almost outweigh the negatives as she feels her life has improved as she has aged. She stressed that there is less pressure on her at 65 to look a certain way, or to behave a certain way, than there was when she was younger, and which she feels younger women (like Catherine) continue to experience. As a result of feeling less pressurised, she feels that she is able to focus on her interests, and on other people, rather than on herself. She feels that as an older woman, she is less ‘visible’ than when she was younger, but rather than see this in a negative way, she experiences it as freedom from the public scrutiny and from the ridicule which younger people seem to fear. She did not seem to miss being “in the same arena anymore” as younger women, because she remembered the feelings of insecurity that were part of that stage of her life. Marie stressed that “every age is special but we just have to accept it and accept it gracefully if you can.” Whereas certain individuals compare themselves to others or to their former selves, it seems that Marie is one of those people who does not “interpret themselves in the perceptions of others. Instead they look inside, and find an inner maturity” (Sherman, 1994, p. 408).

With regards to Catherine, it seemed that despite her ‘struggle’ with the ageing process, she has perceived that there are certain positive aspects that are associated with being older. She even felt she had experienced some of these gains as she has become older. One of these ‘gifts’ seems to be a greater sense of selflessness which she feels in relation to her daughter. Rather than ‘force’ her daughter into a certain mould, she wants to allow her daughter to be able to ‘choose her own path’. Catherine links this selflessness to the increased wisdom she has gained as she has become older. In addition, Catherine seemed to feel that she had more freedom of choice in certain areas of her life, than she had experienced when she was younger. An example of this is the way in which she chooses to deal with the visible signs of ageing. She feels she has the choice to accept age-related
changes, such as grey hair, without trying to disguise them. In this way, she feels she has more freedom of choice than her mother had at the same age. In her study of the narratives of midlife women, McQuaide (1998, p. 43), says that despite midlife being viewed as a challenging time, many women reported that “their favorite thing about midlife was the increased freedom.” Physical changes and the resulting social devaluation were identified as being the most negative aspects of midlife. It seems that Catherine’s experiences of ageing are similar. She highlighted fewer positive aspects of ageing than Gina or Marie did, and this seems to fit with the stage she is at in her life, which seems to be less ‘settled’ than it is for Gina or Marie.

According to research conducted by Russell et al. (2004) on perceptions of ageing, the women participants in their study did not want to be younger, despite being afraid of losing their health, or becoming dependent in their old age. This may have been because of the positive aspects of ageing, which they identified, which included, “greater maturity, feeling more comfortable with themselves, and increased insight and tolerance with age” (Russell et al., 2004, p. 4).

**Conclusion**

The focus of the present study was on the participant’s personal perceptions of ageing. Although I have extracted certain “common” themes from these accounts, another person might choose to highlight different themes. In addition, although the themes identified seemed to link, at times, with the literature regarding perceptions of ageing, this is not intended to imply that all women share the same experiences in the same way. Each of the highlighted aspects manifested themselves in a very unique way in each of the participant’s life stories. It seems important, therefore, that women’s perceptions of ageing be examined within the context of each individual’s life, and not in order to generalise their experiences to a wider group.
CHAPTER 8

CONCLUSION

Introduction

This concluding chapter will comprise an evaluation of the present study and implications for clinical practice. Recommendations for future research will also be given.

Evaluation of the Study

The aim of the research was to explore women's perceptions and experiences of ageing in order to shed light on how individual women feel about getting older. It is believed that this task was accomplished as participants gave detailed and rich accounts of their perceptions and experiences about ageing, highlighting those aspects that were personally meaningful for them. This research, therefore, attempted to provide valuable information which is often excluded in traditional research. This study provided a different approach to the study of women's perceptions of ageing, since it was concerned with the individual women's unique accounts. Readers were given the opportunity to see the world from each participant's point of view. In the analysis of the transcribed interviews an effort was made to focus on the themes elicited from the text rather than to 'force' the information into pre-existing categories. In this way, each woman's personal account was honoured.

In each story, I as researcher identified and discussed themes. This was then followed by a comparative analysis between the recurring themes in all three stories and the literature. The comparative analysis was done, not in order to substantiate the themes, but to include the many voices about the topic of women's perceptions of ageing. Common themes which emerged were the following:
• Connection and disconnection
• Feeling out of synchronisation with the norm
• Public image versus personal perception
• Acceptance
• The positive aspects of being older

Although these themes were common to all the stories, they played out in idiosyncratic ways in each of the participants' accounts. A very brief summary of each of the participant's accounts of her perceptions of ageing follows:

In terms of Gina, her perceptions of ageing seemed to be integrally connected to her perceptions of how she has lived her life so far. Her story illustrates how ageing does not occur within a vacuum but within the context of a person's life. It is possibly a reflection of ageing, that at 91 she has gained a perspective that has helped her to focus on her life as an integrated whole, rather than to view the various aspects as disconnected.

In terms of Marie's account, of the three women interviewed, she seemed to be the most satisfied with her life and the least concerned about her age. Connection seemed to be the common thread underlying all the themes in Marie's account. Marie connected very well to others, and she also seemed to be very connected to her life. This strong sense of connection seemed to make her life meaningful and enabled her to experience ageing in a way that did not disrupt her enjoyment of her life.

Catherine's account of her perceptions of ageing seemed to be focused on her body and in particular on the physical changes she experienced. She acknowledged, at the outset, that she felt negative about the ageing process and hoped, that by telling her story, she would be able to integrate her feelings about ageing. She seemed to regard ageing as a challenge and to feel that she was experiencing a "crisis" in terms of her identity. Her account was filled with contradictions and she seemed to vacillate between a position
of acceptance of the physical ageing process and a rejection of it, which seemed to mirror the lack of integration she felt.

Strengths of this study

This study gave three women the opportunity to describe their unique experiences and perceptions of ageing in their own way. In this way, the participants were respected, "not only as subjects of research but as informants of their own lives" (Coleman, 1992, p. 74). Having only a few information-rich cases allowed for an in-depth exploration of the subject of women's perceptions of ageing. In addition, it was empowering for the participants to voice their thoughts about ageing.

In this study reliability and validity, referred to as dependability and trustworthiness in the qualitative research context, were achieved. In terms of reliability/dependability, I disclosed the purpose of the study, as well as my orientation, to the participants. I established a relationship with the participants while interviewing them, and then engaged in an in-depth and prolonged investigation with the material derived from the interviews. I remained aware of my internal processes (including my biases and preconceptions about ageing) and noted how they could impact on the investigation. Finally, as part of the “iterative cycling between observation and interpretation” (Stiles, cited in Merrick, 1999, p. 30) I engaged and re-engaged with the material (including the audiotapes and transcripts) in the hermeneutic cycle. I then "grounded" my interpretations by using direct quotes drawn from the interviews. Validity/trustworthiness was achieved in the following way: Triangulation was achieved through the use of multiple data sources including the participants' own perspectives as well as various literary sources and psychological theories of ageing. I also discussed my findings with my supervisor in order to ensure accuracy and credibility. In order to achieve coherence or "fit" regarding the interpretation (Stiles cited in Merrick, 1999, p. 29), I tried to avoid writing in an objective, positivist manner since I was working from a postmodern, interpretive position. Interpretations, rather than 'facts', were offered about the experiences of the three women.
participants. Reflexive validity was achieved, as my preconceived ideas about ageing were challenged and I was able to form new insights about the subject. This study succeeded in shedding light on women’s perceptions of ageing for the readers of the research and will help them to achieve greater understanding of this subject.

Limitations of this study

According to Plummer (cited in Mouton, 2001), the main limitations of qualitative studies relate to a lack of generalisability, 'questionable' reliability and validity, and bias. However, while Plummer's limitations are considered crucial in terms of quantitative studies, qualitative studies such as the present one, have different aims and utilise different methodologies. These "limitations", therefore, are not regarded as central to the qualitative research process, since its aim is not objective measurement and subsequent generalisation of results to larger populations. In line with the postmodern ontology of this study, which proposes that reality is multi-faceted and comprises multiple selves, multiple meanings and multiple contexts (Dickerson & Zimmerman, 1996), this study offered an interpretation of how individual women perceive ageing, in order to shed light on the experience. 'Reliability' (dependability) and 'validity' (trustworthiness) were, nevertheless, achieved and were discussed in the previous section. Finally in terms of bias, as the researcher, my presence was made explicit from the beginning of the study. In the qualitative research process, the self of the researcher is regarded as the “main instrument” (Babbie et al, 1998, p. 270), and meaning is co-constructed in interaction with the research participants.

Implications for clinical practice

This study is believed to be relevant for any practitioner who works with women. From the participants' accounts of their perceptions of ageing, the following general points were noted which may help those who work with women to understand their perceptions of ageing more clearly.
Women perceived ageing in unique ways based on their own experiences and subjective evaluations of those experiences. Although developmental theories provide a useful way of understanding ageing, it is important for clinicians to take individual differences as well as their similarities in ageing into account when working with individual women. Development does not only proceed in a linear way but tends rather to be a process comprising certain common patterns as well as individual variations.

Based on the information given by the participants, it seems as though a woman's attitude towards ageing is central to the way in which she experiences her own ageing process. A positive attitude towards ageing does not seem to be linked to one's past experiences in a direct, causal way. Whilst Gina and Marie experienced and overcame many difficulties when they were younger, they both chose to be positive about their lives and about the future. Catherine, on the other hand, who seemed to have had a more 'stable' background, had a more negative attitude towards ageing. In addition, it appears that people often become more satisfied with their lives as they get older (Hillerås et al., 2001). Clinicians, therefore, can help women to become more aware of the choice they have in how they respond to the challenges of getting older. Women can be helped to understand that they are not "passive witnesses" (Brown, 1998, p. 102) to their lives but that they can play an active role in determining the quality of life they will experience.

Stereotypes of ageing were also found to impact negatively on the way in which women perceived ageing. It is recommended that the clinician be aware of the stereotypes or 'grand narratives' on ageing, as well his or her own preconceptions regarding ageing, and be aware of not "creating (his or her) own stereotypes" (Trang, 2003, p. 12). This will enable the clinician to challenge the 'grand narratives' or stereotypes, to bracket his or her own stereotypes and to facilitate the creation of alternative meanings about ageing. The 'validity' of stereotypes can be explored with the patient, in order to bring them out into the open and to demythologise them. An example of such a stereotype is the belief that a woman's life goes into decline after the age of 40 (Gergen, 1990). However, research has shown that individual women's
experiences deviate significantly from "culture's dominant discourse" (McQuaide, 1998, p. 47), and that women often experience high levels of life satisfaction at midlife and thereafter (e.g. Field, 1997; Hillerås et al., 2001; Mitchell et al., 1990; Ranzijn et al., 1999). A negative image of midlife need not, therefore, become "a self-fulfilling prophecy" (McQuaide, 1998, p. 52). During the current research process I was required to bracket my own stereotypes in order to be receptive to the alternative meanings which emerged from the participants' accounts. One of my preconceived ideas was a belief that an individual's life loses meaning in old age. This idea was challenged during the course of this study, and my perspective about ageing was expanded.

Social norms, particularly those regarding women’s appearance, often appeared to have been internalised and impacted on the individual's sense of self-esteem and identity. Clinicians should be aware that a woman's appearance is very important to her, no matter what her age. Women do not necessarily wish to look younger, but they do wish to look as good as they can (Hurd, 2000; O'Reilly et al., 2004). Since ageing does not occur within a vacuum, women's perceptions of ageing are related to the social and cultural context in which they find themselves. Although clinicians may not be able to change social patterns, "they can affirm women's experience in society" (O'Reilly et al., 2004, p. 12).

Women's perceptions also have an influence on areas such as " satisfaction, self-image, self-esteem, cognitive function, and emotional well-being" (O'Reilly et al., 2004, p. 3), which in turn have an impact on the way in which they experience ageing. Caregivers who are able to help women express their feelings about ageing and possibly create alternative meanings about ageing, may help women to "develop positive self-perceptions of ageing (which) might also help them live longer, healthier lives" (Levy, Slade, Kunkel & Kasl cited in O'Reilly et al., 2004, p. 12). It is important to remember that women who experience good health perceive ageing in a more positive way than women who are in poor health. "Poor health reduces options" (Bee, 1996, p. 447), as it reduces a woman's connection to life and impacts on her perceived sense of
control of her life. The clinician should be empathic towards women who are not well, and not expect them to feel positive about ageing.

**Recommendations for future research**

This section will make recommendations for future research. The previous suggestions for clinical practice are also areas which could be focused on in future research.

Interest in a greater understanding of ageing seems to be growing, and there is also a need for reassurance regarding the confusion and uncertainty about growing old (Coleman, Bond & Peace, 1993). It is, therefore, suggested that further qualitative studies be undertaken in order to achieve new understandings and insights regarding perceptions of ageing. The research will also help to counter negative stereotypes associated with ageing.

Further research is also recommended to explore factors believed to be associated with "successful ageing" (Ranzijn et al., 1999, p. 94).

The perceptions of women from different cultural groups as well as different social contexts should be studied to assess the impact of these contexts on perceptions of ageing.

The perceptions of ageing of a more diverse group of women of different ages, including women in their 20's, could be studied.

The impact of poor health on women's perceptions of ageing could be explored.

Men's perceptions of ageing could also be a focus of a study in the future.
Conclusion

This study has provided valuable information regarding women’s perceptions of ageing and it is hoped that it will encourage further studies in this area. Specific themes as well as recurring themes were highlighted. This information will be useful for all those working with women in a clinical context. The qualitative research method used proved to be a suitable method to gain the information-rich material which was sought. Areas for future research were addressed, including the need for a greater understanding of ageing from the point of view of the individual, in order to achieve new insights about how individuals perceive and experience ageing.


APPENDIX A: Consent Form

PROPOSED MASTER’S THESIS IN CLINICAL PSYCHOLOGY:
WOMEN’S PERCEPTIONS OF AGEING – DANIELLA BRENNER

INFORMED CONSENT

1. The purpose of this study as well as my role therein has been explained to me by the author, Daniella Brenner.

2. It is my own choice to participate in this study.

3. I understand that my identity will remain confidential.

4. I have the right to withdraw from this study at any time for any reason.

__________________    ________________
Participant      Daniella Brenner
GB: I may not be a very good example for you because I am so well.

DB: I think you're a wonderful example. Why should we only have examples of (I wanted to say of women who are not as well ...)

GB: Because I remember when I spoke to my friend in England on my 80th birthday. I thought it was a joke. I said nothing hurts me, nothing worries me - well the few problems come up but they're not really interfering with my nature and I find in a way, I am happier now. I said to my son the other day, it took me 90 years to come out of my shell.

DB: Aha

GB: Because I was very reserved. I think that is the word ... and I had a career not just a job. It started off as a job it turned into a career of 22 years and I thought I just fell in for 2 weeks (laughs). And I dealt with people. But I know I had the reputation of being very hard. Not hard, they were scared of me! I said me! Well I was more scared of them! (laughs). I was very reserved and it didn't come easily to me. I forced myself of course. I thought I was very friendly. I was personnel you know, what is nowadays called Human Resources. I reject that. I would refuse to be a resource! It sounds like something that's in the ground and you pick up. Anyway, that became the second half of my life. At an age when people might already begin to think what they're going to do when they retire. That's when I started. It was very unexpected as I say. I thought ja ok I take the job for a fortnight but the boys are still small and I've got to help them with schoolwork ... anyway that's got nothing to do with age.

DB: No! It does have to do with it. What I was hoping is that we could just have a conversation. I am not going to ask you many questions. I am going to try and talk less, even though I love talking and you sound so interesting! But what I'd like to know is your perspective, and I think that ageing can incorporate so much (GB: Yes), so anything that you're telling me, telling me about your having had a career that lasted 22 years, that it was such an important part of your life is a very interesting thing for me to hear.

GB: Oh yes actually, it really changed me. Because, well I was very young when I got married. Both of us were very young. It was the emigration time under Hitler in Germany. So what did we know, nothing. But we got married because the family didn't think it was a good idea that we just went off as boyfriend and girlfriend to live in Spain. You know, the Hitler time in Germany threw people together the most amazing way. Alright, he was my boyfriend but getting married. He was nobody, he had no career no nothing yet he was 20 and I was 19, something like that. So, the development then had less to do with actually family life. Marriage and children, children came 10 years later when everybody else had children on account of the immigration, and leaving Spain and coming here, and then we couldn't stay here and we lived 15 years in Mozambique and you know there were quite a few things in my life which formed me. But then I say I'm very happy now. I have no responsibility for my children. You know the daily worries. You always worry, there are always things also which go wrong in your children's family and that is, you feel that as though it was your own, even more probably. But on the other hand, as I say, I come out of my shell. I suddenly have young friends, the children of my contemporaries. I lost two friends because they aged much more than I did, much before me. They were 10 years younger than I. Most of the people that I say are my age group they are actually 10 years younger. They were 70 when I was 80 that sort of thing. But anyway one of them became Alzheimer's and is in a home somewhere in the Cape.
other one died. And my sister, I had one sister who lived in the States, she died. My niece would be that age group of my present friends, 60 ish, so she isn’t married but she is the daughter of my very best friend for 15 years in Mozambique. She died. I said she’s got no business of dying, she is also much younger than I am, (laughs) but anyway. I was very, very upset. Then her children came here after that business in Mozambique, you know, the war. And then actually, she, her daughter, her daughter’s children are practically almost like my family, but I’ve got my own family. But they are my very best friends. So is another one, a former colleague, there are a few. Even here I don’t really feel of the same wavelength as the people of my age. I also think a few remarks of theirs, you know you chat a little bit here, a little bit there that we just don’t talk the same language. But I have much more in common with the young people. I am interested and I keep interested in what goes on. And my granddaughters, my grandchildren also talk to me. I mean, not divulging heartbreaking problems, but we talk about what goes on. I have more in common and I learn from them too. They have problems, there is advice which I like to give, but every situation is different and circumstances are different, but I mean we never have a dull moment, they are very, very good friends. There are a few of those. I just acquired a few the other day (laughs), also things I would have never done, no I really told myself, no get out of the rut. You have got to do something, you’ve got to join people, that was even before I came here (to the current residential hotel where she has been living for the past year and a half. Prior to that she lived in her own home. When her maid of 40 years retired, she did not feel like training someone new, so she decided to make a change in her life. She described this move as traumatic). And I looked in the paper and there was an announcement for the Bel Canto Club. They have lecture evenings with CDV projections and I thought well let’s phone up and find out what are you and where are you and when is it. It was a little group of some very knowledgeable people as far as opera and classical music, not music as such, mostly opera. And they had little evenings, not really a soirée. It was in a flat and they had snacks afterwards. Of course I didn’t know a soul. I was very proud of myself to actually take myself off and come in and say good evening, I’m GB (laughs). And eventually, that is now a few years ago, and also it took me a long time to actually take a glass of wine or a cup of tea or whatever they serve afterwards (laughs). I didn’t know anyone. Whoever, who do I talk to? It didn’t occur to me to just go up to talk to people and make a remark. It just wanted me. That came much later. DB: What sparked that? At some stage you said you thought you should get out of that rut and do something. Can you tell me a little bit more about that? When was that? GB: At that stage, the one friend died, the other one moved away. I never had a very lively social life. You know. The time when other people begin to take it easier, I was very, very involved in my job. And then there were the two boys growing up and there were the two mothers, my mother and my mother-in-law at the Parents Home (Old Age Home). They were friends from the time when we got engaged, when we left Germany, the two families got very friendly. My father-in-law died here and we ended up here after Spain. Spain was 1934/1935 and then the war broke out, the Civil War in Spain that was the reason why we left Spain. Franco, fascists, it was a terrible war. DB: My goodness, you’ve experienced so much. GB: But we got out and spent another year in Berlin and we were not supposed to be there. My mother was still there at the time. And then we finally went to South Africa because in the meantime my in-laws were already here. They had a quite a number of family here. Their generation came here as
youngsters probably. So they were already well established here and it was
the normal thing that you went where you had connections. That is why my
sister ended up in New York because her husband had an uncle in America.
So they had no connection to South Africa. They left Germany and were
trying to get to the States and my mother went with them. So, ja, but that has
got nothing to do with ageing.

DB: It’s very interesting. I think I could sit and ask you questions all day.

GB: It forms you, it does form you. Every phase adds to … it is the experience
which is somewhere buried in your brain. And in the end that is what you are,
what circumstances and life make you and then also what you helped to
make yourself.

DB: Everything you say is very interesting because we are talking about things
within a context of your entire life. (GB: Yes). I’m not just looking at
something in isolation so what you are saying is giving an idea and obviously
later when I think about it some more, is, I think, going to be very influential in
why you have the outlook that you have.

GB: Yes. When I retired I was with Siemens for 22 years. I built up the personnel
department. I was the only .. that doesn’t seem to help you

DB: No, please tell me!

GB: I was the only woman of in those days they still had a ranking system – you
know you were promoted to a higher rank and a higher rank with certain perks
and things and I was the only woman of a sort of higher middle management.

DB: It sounds as though you have done very remarkable things.

GB: (laughs)

DB: How old were you when you retired?

GB: I retired in 1979. How old was I? I was born in 1915. 64, I was 64. And it
was already 4 years longer than the normal. At that time they asked me, they
didn’t have anyone to step in. I thought well, I’ve got nothing else to do.
Gradually they trained somebody else. So by the time I was 64 I said and
now? Also my young friends who are now in Brisbane in Australia they had
adopted me as a stand-in mother and mother-in-law. They both had family
problems at home (laughs) and that friendship has lasted until now. They
came here for my birthday. I always go to Brisbane at the end of my stay in
Melbourne. We are very good friends and there they consider me – the
children are now getting married – as a stand-in grandmother. So actually the
affinity to younger people started very very early.

DB: I wonder if … does that make you feel … You were telling me a bit about
feeling a bit different from the people here who are your age. It doesn’t seem
to make you feel isolated at all. It seems as though you find companionship
with younger people.

GB: No I’m not isolated. It just takes me a while to make the effort, but you can’t
help it. You sit next to someone – they have music evenings and film
evenings here – you sit next to someone and you make a remark. I’m on
quite a friendly, loosely-friendly basis with quite a few. You can’t know
everyone. And some of them are too old and too frail to make friends with.
And I don’t really need friends, you know, personal friends I don’t need.
Because it’s very difficult. You don’t know the person’s background, they
don’t know your background. They are interested when they ask me where
do you come from, what’s your accent? (GB speaks with a heavy German
accent) Aha, German. So they want to know. But, you know, to rattle off
your background and then their background is so different, you know. They
probably came here as children. Lots of them came from Lithuania or Russia
or Poland. That’s very different, never mind that it’s part of Europe, but their
background, their culture, their upbringing is so different from German Jews
because we are steeped in German culture. Ja, we were Jewish but that
sort of wasn't the real, major part of our life. Ja, we were conscious of being Jewish, we had Christian friends at school. I think we were 5 Jewish girls in a class, so we grew up with the Germans. But our family was Jewish and when it came to social life eventually we joined a little political group which my sister joined. I joined a little social club, which was run by a progressive rabbi maybe that's not very interesting … my mother heard about it and said if you don't go and talk to this girl and ask her to go with you she said, “then I will talk to her parents.” (Laughs). You see the shyness, the basic shyness I inherited from my mother and she knew how she had actually suffered from it. She didn't want me to be like that. I had a very lovely mother. Ja, so, when I retired, these young friends said to me. Oh yes, he helped me a little bit with the application for the membership of the Institute of Personnel Management. I said well what do I say. He said well didn't you do this and that. I had a whole string of things which I wasn't really conscious I had done because I had never studied for it, I had no formal knowledge of personnel management, not a clue. I started as a secretary of the commercial side financial manager and he said one day to me well you can actually do personnel. I said, me, I don't know anything and he said but that's what you've been doing already. Because I took work from him, you know interviewing and recruiting which I took in my stride, I didn't know I was doing anything special. Anyway, when I retired these friends said, “now what are you going to do.” So I said, “I don't know, I relax.” So he said, “but then why don't you take a course and do your BA?” You know I'd never been to university before. At the time when I said well school is finished, what am I going to do, we had a little family council. And I said there is no point in going to university because, first of all, Jewish people aren't even accepted anymore and then they were not allowed to exercise their professions which they'd trained for, so that was finished. But now what, there was either the domestic science side or the commercial side so I said well that's what I pick. And we had a very, very good sort of commercial high school with a two-year course. We learnt French and English with shorthand, French and English shorthand and correspondence part commercial correspondence, part literature and then there was added Spanish. So we had 3 foreign languages and Commercial law and typing and shorthand in any case in all 3 languages so it meant a very good training.

DB: Was this part of your high school training?

GB: Yes it was a separate high school. It was called Commercial High School. But when you graduated from there it entitled you to go university and take a B.Comm of course. So it was comparable to an academic matric.

DB: I understand. You were saying many things that even at that stage, which was many years ago, about thinking about university but of course that wasn't an option that was open to Jewish people.

GB: That was at the time what you called the Standard 8 is that the JC? That was the time when I had to decide do I go into some future training or carry on with matric. And then we decided what's the point of doing the matric when you could use those 2 years in a direction where you want to go because after matric you can't go to university anyway, that was the time.

DB: When did you leave Germany?

GB: I left Germany at the end of 1934.

DB: It is chilling to think about 1933 to 1945. Thank G-d you left early and it sounds as though all your family left then”?

GB: Yes, well my sister, my mother of course, cousins and aunts and things. But then everybody left. All the young people left.

DB: You haven't mentioned your father? Was your father alive at that stage?
Well my parents got divorced. I think I was 8 or 9, something like that. They were probably very ill matched from the beginning. In those days unless you had a social circle then marriages were arranged. Not against the will of children, but if the young daughter didn't have much opportunity to meet people … My mother was born in Hanover in Germany, little Germany, and for some reason I don't quite know, they moved to Berlin. And there she didn't have much of a chance. At that time I think she was already 20 or something and being a very shy person and having very little chance of meeting people, coming new to a new place, a new city. I wasn't there, I don't know, I can only imagine … and today I think why didn't I ask, why didn't I dig more and talk to my mother and ask her this, ask her that, but one didn't and now it is too late there's nobody to ask. Anyway, coming back to what my friend said, "do your BA." (Laughs) I said, I wouldn't even know how to start. Even schooling at that time didn't direct you into university studies you know. Here I think people get projects and they have to write essays, they've got to debate. Essays, yes, we had to write but there was no question of voicing your opinion on a certain subject, you know, debating or whatever. So, I wouldn't even have known how to listen and at the same time take notes, we didn't do that at school. But he said go to UNISA for correspondence, you've got all the time in the world. So the subjects that were open to me, and I wanted actually to do German as a subject because that would have been quite easy, but little did I know that that type of German started with medieval German. I said no thank you very much that is like taking on another language practically, and that is so boring, although I know people want to know about the culture and that, but it was not for me. We did a bit at school and who's interested? So the other subject that was open was Sociology. I said alright. I didn't know much about Sociology but I said let's try it. It's the most boring subject you could possibly do! Do you know anything about it? If you ask me, the first year of Sociology is just terrible. I suppose if I had persevered and second year might have been more alive. And I said, what am I doing? Because now that I should start making contact or something here I sit by myself, all alone at home with these bloody books, what am I doing? Nothing to talk about, I hate what I'm doing, it bores me. It really didn't catch my interest. I sent in my tut, the first tut, "excellent, carry on" was the result (laughs). But it really wasn't for me. That wasn't what I had bargained for. I missed my regular - obviously everybody does when you finish your job and you retire – you do miss your daily contact with people whether you like them or don't like them. But it's become part of your life, your duties, your responsibilities and your contacts, with the ups and with the downs, you know. What can I tell you about ageing?

I'm interested in what you were saying about UNISA. Did you go on? Did you do any other courses?

No, no.

You just decided it wasn't for you.

That's it. Thank you very much. First of all I was never trained to study. I didn't really know how to study. I read what I read and I thought about it, and I read it again. Still didn't make much sense and I thought well this isn't what I want to improve my life, now that I've got the time. And I didn't need, I don't have to have people around me all the time. There are people who can't be alone. That I know from my Machatenista (Yiddish - my son's mother-in-law). She is a lovely person also in Melbourne. The whole family of my daughter-in-law is also in Australia. I said to R, you don't know how lucky you are because some people have got children in Melbourne and children in Canada, you know. We all have children somewhere else. Anyway, she said
she knows how lucky she is. But she is the first person that I came across
she walks into her flat and switches on the radio.

DB: Because she doesn’t like to be alone?

GB: Can’t be alone. She also, she has quite a lively ... she plays a lot of cards
and goes for lunches and she has a lively social life for herself. Her son is
very involved with one of the newer smaller shuls there and so she is very
involved with her son, and with the community. Oh my G-d, this is all not for
me! It is not me. I watch a bit of television or listen to the radio and when I
switch off (loud sigh) aah it is so nice and quiet.

DB: Really?

GB: Yes, I can’t have voices around me all the time. Maybe some people ... I
think they’re now used to it, they think that I keep very much to myself. But
that has something to do already with here. First of all I don’t like it. Specially
if you’re not used to it. To go and sit in the lounge with the others and now
what do we talk about? I have no idea about what actually they talk about. I
can’t think of anything to say. But I did on one occasion. They were sitting in
a group like this (indicates sitting area in her room where we are sitting) you
know the way the lounges are organised because a person asked to show
knitwear. They do that, they go through the various areas, Homes, and they
sell quite nicely actually. They bring a range of their clothes or shoes so I
went to have a look not that I really wanted to buy anything, but I thought let’s
have a look. And they weren’t quite ready in their laying out, and I said “can I
join you?” “Yes of course you must have a seat” and then I talked to one
person next to me. And then the one from across asked me something and I
couldn’t hear. I said sorry and she repeated it and I still couldn’t hear.

DB: From what you’re saying it sounds like to be in a crowd of people is not very
comfortable for you?

GB: It is very uncomfortable. It is embarrassing, it makes me uncomfortable and it
makes me angry, you know. That is the worst. That is really the handicap to
a certain extent. (GB finds it difficult to hear when a group of people is talking
although she manages very well on a one-on-one basis and claims that she
has no problems hearing) I avoid groups and they know it now.

DB: It sounds like, from what you’re saying, on the one hand it has to do with
having difficulty in hearing in a group when a lot of people are talking at once
(GB: Yes) and on the other hand it sounds as though you are quite a shy
person anyway (GB: Yes) and feel better with a few people or one-on-one.

GB: Yes. Absolutely. I said to a person, it must have been on one of the holidays
and they gave the staff off and the carpet was supposed to be cleaned in the
lounge-dining-room downstairs and they served lunch in the garden. It is a
beautiful garden with huge big shady tree which covers a vast area and they
served a finger-lunch, cold meats and little sandwiches. It was very, very
nice. And they had garden chairs all over the place and you sat where you
found a seat. And I was talking to one of the ladies. I had seen her, you do
see people, but you know they do pass you in the dining room but it’s not as
though you actually talk to them. But she sat next to me and of course we
talked about the weather and about how nice they do this, and they’ve never
done this before and you know, chat, chat, chat. She’s got no front teeth and
somehow I said, “You’re happy here? How long have you been here?” “5
years.” and I said, “you’re happy here, it is nice here?” and she said, “it’s
enough,” she’s had enough, she doesn’t want to live anymore. Well what’s
the point? You know, very depressing and so do I need this?

DB: What you’re saying is very interesting. Do you find that a lot of people around
you have that kind of attitude (GB: yes) and how does that make you feel?
Does it make you feel depressed?
GB: Absolutely, very, very. Not that I relate it to myself and say, “ah this will happen to me.” It doesn’t occur to me. I still think thank G-d I don’t know how the end will be. But one is a little apprehensive of how long can this go on that I run around. Alright my lower back hurts me, not all the time when I’m standing or certain times when I’m walking. When I’m standing I push myself up to stretch the lower back release the pressure on the nerves or whatever it is. It is very common, the famous lower back! It is because the cartilage between the skeleton bones, that dissipates and then they rub on the nerves. But when I sit like this and I stretch myself, nothing hurts me.

DB: Good.

GB: Well occasionally. We went to a restaurant the other day. My granddaughters picked a restaurant, they know all the new places. It was somewhere in Bedfordview. They’ve got a huge, huge, centre there and they picked the restaurant. They booked upstairs because my daughter in law has got to smoke. I take 2 cigarettes when I’m with her because then it’s social smoking but I don’t need anymore. Last time I came home, I actually smoked the one. But for that we’ve got to have either an outside area but then you don’t trust the weather or some places have an upstairs area for smoking. And they said their speciality is a very, very unusual buffet. Now where’s the buffet, downstairs! (laughs). So we looked from the balustrade downstairs and I said “how do we get it?” “Well you go and pick what you like.” I said, “go down the stairs and up the stairs with a plate of food?” I said, “I can’t do that.” “Well never mind we’ll help you, but come down and have a look so we will know what you like.” So down the steps we went, and we came up the steps and we went down the steps again (laughs) and I picked my own. So what was it? 3 times. Why do I think that I can’t do it? I walk the stairs all the time here. (GB lives on the 2nd floor) I never take the lift. This is one of the things. If I’ve got to go down and up and even down and up again because I’ve forgotten something, I never ever take the lift. So I think that is very good exercise in any case. And I see one or two people are now copying it. They’ve got the idea. Because walking stairs, if you can, is the best exercise. But I mean, I do my yoga. I go to yoga classes three times a week. I’ve been there for now, it must be, 20 years. I started very late, because I only started after I had retired. Also one of those things that I thought well actually I should do something, you know physically. Someone recommended this woman and I’ve been with her forever.

DB: Oh so it’s not here, you go to her.

GB: Yes, it’s in Rosebank.

DB: I want to ask you a few things. So you are driving?

GB: Yes

DB: You drive and you go where you want to go? (GB: Yes). You know what I’m thinking now with us speaking, I’m hoping that we can meet again. I think that we’ll need to meet again another once or twice possibly because you’re giving me a lot of background and so we’re not necessarily saying just ageing, (GB: Yes) It is very interesting and I think that I’m going to be able to weave it together, I hope, into something.

GB: Talking about driving, my driver’s license expired last November and for the whole year I was on tenterhooks. What if I can’t pass that vision test? Because 5 years ago when I took that test when the new licenses came out, and you had to read in the computer, and he said “can you read the lower line?” and I said, “you must be joking!” and he laughed. And he said the next line, “that’s fine, that’s good.” But that was 5 years ago. And also, I’ve had no problem because my glasses were ages old and I read and I sewed and I had no problem but the oncoming light in the evening, then I got very nervous and I thought how do I know whether my vision is still the same as 5 years ago?
And then I decided maybe it is now time to have a cataract operation. So I took myself off to the doctor and he said “ja.” So I had both eyes done. Wednesday I had one eye done, the next Wednesday, the other eye.

DB: And how was it?

GB: It was like a new lease of life! I can’t tell you! I looked around and saw all little leaves on the trees, the thorns on the thorn trees, I couldn’t believe it. All the colours looked much brighter than I remembered them. It was just so … it still is.

DB: That is wonderful.

GB: The only thing is I looked in the mirror at my face, and at my arms. I never had all these brown spots. I didn’t realise what I had not seen until that.

DB: And when you looked and you saw the brown spots, did that affect you?

GB: Oh yes. I like hands. I always like beautiful hands. I’ve always looked at people’s hands. I don’t think my hands were beautiful but I had good hands. I’ve got long fingers and long nails. That is … that bothers me, but you know, you’ve got to know your priorities. Sometimes when I be out with the children I put a bit of makeup on (her hands) but it’s not the same. So ja, that annoys me. But otherwise, it doesn’t hurt.

DB: But it’s something you bring up that’s important because I think that there is a lot of pressure on women to look good.

GB: Yes absolutely. And for yourself, you know, it’s for yourself. But I always say, it’s not fatal, it doesn’t hurt and it isn’t fatal, so.

DB: And does that work for you? Do you believe it?

GB: Yes. Oh yes. I’ve come to accept it now so I use a bit more makeup on my face. I knew I had a few spots here and there and there and there, but when I looked into the mirror (laughs) and saw lots of spots, little brown spots, that annoyed me!

DB: It sounds like you would have almost liked to have had the cataracts back just to have not seen them.

GB: Yes (laughs). But as you just said, that I accept. But in other ways, I don’t accept, I try and … I’m not clinging to looking young. Physical things, you’ve got to fight that, you know, don’t give in.

DB: Right.

GB: So there is a difference between accepting and giving in.

DB: And it seems as though the way you don’t ‘give in’ has to do with your yoga, (GB:yes) and you wear makeup and as you were saying, you don’t look your age. Was that always very important for you?

GB: I never ever made a secret of my age. I couldn’t understand people who didn’t want you to know … but maybe, maybe it is a certain conceit that you are actually proud of not looking your age. But this is something that’s not your doing. I was just blessed with a slim figure. I always have had a slim figure. Alright I’m a little bit rounder now. But I always had a weak back, even as a child. But lots of people tell me that as a child they say “stand up straight, sit straight.” I always collapsed. I had a weakness in the lower back. But that was probably also combined with a muscle weakness because as a child they don’t have Osteoporosis or anything like that! (Laughs). But lots of children have a bad posture.

DB: Yes, they slouch.

GB: I know I’m much smaller than I used to be. When I go to the doctor for my Australian visa, I must bring x-rays and doctors reports, you know about that. And they say, “let’s measure you,” and of course then I stand as straight as I am, and then I ‘collapse’ again. It’s only that you haven’t got the strength to keep this position up, you know.

DB: There is another question that I’d like to ask you.

GB: Yes.
DB: You haven’t mentioned your husband apart from telling me about your having got married early on …
GB: Ach ja.
DB: Perhaps you could give me a little background?
GB: We were, as I said, actually boyfriend and girlfriend. But nobody ever thought of getting married! (laughs). I mean that would have been 10 or 15 years later. In those days people only got married when the young man could afford to, you know, they didn’t just cohabit or anything and so that was the last thing! We had our little tiffs and none of us had really any experience. I don’t think I had a boyfriend before. I had a few friends that took me to our dances or something but they were not my boyfriends. But because we were in the same group, that little club group at the Temple. So, alright, ja, but we loved each other. So we went to Barcelona, emigrated to Spain because my husband had a school friend, a very good school friend, a very nice boy. He was of the Sephardic Jewish … I think at home they still spoke Ladino, which is the Spanish-Portuguese Yiddish. Anyway, Spain had invited former Jews which were expelled, either killed or expelled or burnt at the stake at the Inquisition, and they expected them, whoever wanted to return. But they probably needed, the economy needed the boost, I think that must have been the reason. Full citizenship with all that it entails. Well of course, G’s friend took advantage of that because they lived in Germany. They went to school together, that’s where the friendship started. And they were in contact, and wrote letters and “what’s it like?” and “Spain is beautiful” and “Spain is lovely, why don’t you come here.” And it seemed, apart from South Africa, he didn’t want to go to South Africa, he would have had to do what the uncles demanded of him and he always thought he knew everything better than anybody else. He was very spoiled by his mother who thought he was just the sun shone out of him. And that also formed his character. Anyway that’s why we went to live in Spain. (Small interruption follows where she coughs and tells me she has a post-nasal drip etc). So then we came to South Africa and we were very happy with each other, for about 10 years. We couldn’t stay here because from Spain we couldn’t get the necessary papers required for immigration, police clearance, tax clearance. Everything was shot to bits. In a Civil War that’s the worst. A Civil War is worse, I think, than an ordinary war, than international war.

DB: So you couldn’t stay in Spain, because of that?
GB: Nobody could stay in Spain. So anyway we couldn’t get the papers which you require to attach to your application for permanent residence somewhere else. So we came because family was already here, my in-laws. In Germany we stayed with my mother and we said, “you’ve got to go, you’ve got to get out.” Because my husband he had a new … that goes so much into detail. In those days, after Hitler came to power, Jewish passports were stamped with a Jewish first name – all the women’s names were something “Sarah” and a red “J”. And with this passport, if you got permission to leave, you left, but you could never come back. We got married, so G went through all that. He had to get a passport, which was already then under this system. I had a passport because when I was 14 my mother took my sister and myself to the Baltic coast and we took a little trip to Denmark across and probably that was the reason why I had a passport which I otherwise never used. We didn’t travel … the passport was under the old system, was perfectly valid. From the wedding we took the train and went via Switzerland to Spain. When I … After the time in Spain, I got a telegram from Berlin my mother was very ill, I must please come. Help to look after her because my sister had her husband and … so I packed a little suitcase and got a passport, from the German Consulate in Barcelona, because that old one had by that time expired, under
my married name. Now something must have been not quite as competent
as the Germans were supposed to be, they might have never had the
occasion to issue a Jewish passport, or a passport to Jewish people. They
issued me with a passport, a normal passport, a normal German passport. I
even got a financial advantage of German’s living abroad got a better rate of
Deutschmark.

DB: What year was that?
GB: That was 1936. So I went back to Germany … that was very funny … I don’t
want to go into it …

DB: You know what I’d really like to know, not that I’m not interested, but what I’d
really like to know was about how long you were married for.

GB: Yes. Well we went back to Berlin. I could happily arrive as a German. G at
that time, when that war broke out, was at that time in Lisbon on business,
Portugal, and came back into the war, managed then, like lots of foreigners,
by hook or by crook, got onto an Italian troop ship because that was then also
the time of soldiers, war in Eritrea, Abyssinia. So troop ships which came
back empty took a few passengers. And then G came to Berlin via the back-
streets because he couldn’t use his normal passport. He found somebody
who delivered milk because by that time he was in the north of Italy near the
Austrian border and somebody who drove a truck backwards and forwards, a
small border-post, you know not an official border-post. Anyway he had a
chance and he took him and he came to Berlin. But of course he was not
allowed to be in Berlin actually. If anybody had reported us that we were
staying with my mother … but I was born in that flat and people knew my
mother and knew the family and they were not all violent, virulent Nazis. So
we stayed for a year until we managed to get out. Getting out was also
interesting because my passport, as I said, was ok, G’s wasn’t. Somebody
gave him the tip, go down to Munich by train, in Munich you take a tourist bus
to Boltsano, you know which is … Munich, Austria and then Italy. I mean you
can go through 3 countries in an afternoon. Take a tourist bus because what
they normally do, the conductor collects all the passports, takes them into the
little border post and they stamp them there and he brings them back and
gives them to you. And of course there was no guarantee. If the guy there
had spotted a possible red “J” … it was a very dicey situation. Very dicey.
We were very much on tenterhooks. Thank G-d we were young. When
you’re very young things are not as traumatic (laughs) you do everything as
an adventure. When I think back now, if that had happened to me nowadays,
you know, at my age … but in those days we just took a chance. You do
take chances. But it worked. It worked and then from Boltsano we took the
train to Genoa. We weren’t booked on any passage or anything. We got the
last little cabin. I think it was just where the ship ends over the screw!
(Laughs) It was a tiny little thing, noisy, but anyway that’s why we came to
South Africa, with £50 as a tourist, that was the only way we could come in,
as a tourist. And the family here said, “don’t worry we know everybody in
Pretoria.” Because they were very established. The one was X & X Timbers
and the other one was the architect X. The one was friendly with Ghandi you
might have heard of? Anyway, it worked 3 times. They always extended for
3 months. After that, that’s it, sorry, you’ve got to leave, we cannot extend a
visitor’s visa, a tourist visa indefinitely. It is against the law. In those days
you could not apply locally for a residential visa, which you can do now. But
in those days the application had to come from … you had to be outside. You
had a permit, come inside, be welcome. Anyway, that’s when they said, “well
where do you want to go?” And through African theatres my husband had a
chance, either Bulawayo, or Nairobi or Lourenço Marques. Well we didn’t
know anything from LM (laughs). The parents said to him, “of course you go
to Lourenço Marques, you speak Spanish, you pick up Portuguese.” Which is true, especially when you’re young. It comes so easily and so quickly. And we loved it! It was so continental and beautiful! Eventually G came under a little contract as a manager of a theatre, there was a theatre in Lourenço Marques. I found a job very soon as a secretary. My English wasn’t all that wonderful, what I had picked up here. I had taken here a course I thought I got to freshen up my English shorthand because I never used it. I had it at school but I never used it. I went to one of the night schools here to freshen up my English shorthand, little did I know that the shorthand which we had learned which was based on the German shorthand, just adapted, for French or English was not difficult, but here they learned Pittmans, which was completely different! And my English, my speaking, wasn’t so fluent yet. I could just squiggle a little bit, it was a disaster, and absolute disaster! (laughs). Anyway I applied for a job there because I met a girl there, a South African who was secretary for one of the English companies there. All the shipping and import companies were usually South African and she said she’d love to go back to Johannesburg, she was there for a year. And I said, “well I’d love to have your job”. She said, “ok” and she arranged an interview and I went for the interview and I used my own shorthand, everything was fine. What I didn’t know was I had to work with a dictaphone which I knew nothing about, and the English language! (laughs). But it worked very well, he spoke beautifully, he was educated at Cambridge University, a lovely, lovely man. Occasionally I couldn’t understand, I didn’t know the word, I had my German-English dictionary and I looked up what I thought it sounded like and dinkum it fitted into the sense, so that’s how I really learnt! But on one occasion I couldn’t make it out I had to go back to him. And he said, “what does it sound like?” And I said, “it sounds something like a devil (laughs). It doesn’t belong in a business letter!” He laughed. The sentence was “so we found ourselves between the devil and the deep blue sea!” It was one of those situations! Now how was I expected to know (laughs). So, ja, I had certain difficulties, but I learned a helluva lot.

DB: Did you have your children (2 sons) there, while you were in Lourenço Marques?

GB: Yes. I came here for the confinement every time. With my big tummy I climbed onto the train, nobody flew in those days. Because they were born here, they were South Africans. There was no point ... I loved the Portuguese, I loved everything about it, I still adore everything about it, but I didn’t want my children to grow up under a Portuguese nationality which they would never really exercise. I just wanted them to be English speaking when it came to school, so they were born in South Africa. They got South African passports.

(END OF TAPE 1)

TAPE 2 – GB INTERVIEW 1 CONTINUED

Just before the tape starts, GB tells me that she feels guilty about feeling so well for her age, and being so mobile.

DB: So you feel guilty that maybe you should be acting or age, or perhaps be less mobile, or?

GB: Yes. Guilty towards the others. They say, “why do you walk so fast, why do you always walk so fast?” I say, “well I don’t make myself walk fast, that is my stride.” If I walk slower, my balance is not so good. Ja, well, I’m so lucky.

DB: It is almost like, from what you’re saying, that there is an idea of how you should be at 91. There is almost an idea that a 91 year old lady should be this, this and this?
GB: Yes. This one can’t walk because she really can’t walk, and this one trembles, you know. They’re in pain, they’re uncomfortable, they can’t wash themselves or bath themselves, they’ve got nurses who do that for them.

DB: So you feel very relieved, I think, on the one hand, thank G-d (GB: JA) that you have your health (GB: Ja, exactly) and that you are as independent as you are …

GB: Ja. I think getting in and out of the bath that is the first thing that you have to give up because you haven’t got the strength in your arms. I saw one of the flats here … not that was the Flower Foundation. They are also an organisation like the Rand Aid they’ve got various Homes, they’re privately run. Anyway a friend of mine, ja, let’s say a friend, an acquaintance, she had just moved … there is one of their homes the other side of Louis Botha Avenue. It is a garden complex. This friend of mine moved into a little first floor flat, so gorgeous, I loved it, with a little balcony, with trees, absolutely lovely, but the only thing is it is only serviced once a week. You’ve got to have your own arrangements, but they have a proper kitchenette, like this, you open the door and … I haven’t got. I’ve got my own little kitchen there, not a sink, not a nothing. There she’s got a washing machine, she’s got shelves, she’s got a range. But you can close it up. That was very impressive. Not that I had any intention of cooking or keeping house but you can if you want to. But, the bathroom, there was a toilet and a shower and they usually put a chair in the shower room. And it’s all very nice but I say, “it’s not for me.” At this stage, my bath in the morning wakes my body up. It relaxes me, I couldn’t live without it. That’s the one thing when I go on holiday to my children they’ve only got showers. So anyway, that I accept. To move into a place that either has a common bathroom on that floor, but I looked at that but it really was for people who needed help to get into a bath and there was a little cubicle with nothing personal, with a bathtub. But you couldn’t put your own things there, there was no where to put your showergel or whatever.

DB: It sounds very institutionalised. You don’t want to be in a dormitory?

GB: Absolutely. But they want people to have showers. Here too there are quite a few which haven’t got a bath. They took the bath out and made it a shower cubicle and then the nurses can help them and sit them and whatever they do. But, my bath is, that’s my holiday everyday! (laughs).

DB: I’m just checking my time because we have been speaking for almost an hour and a half, I’m wondering whether we should stop and carry on next time, or whether you want to tell me a little more? How are you feeling?

GB: Look if you have to go…

DB: I do have some more time, if you don’t mind…

GB: Ja, so have I.

DB: Ok let’s carry on a little.

GB: Because I never take part in the midday meal. Because I’m used to making my own little sandwiches. I buy my own salami or whatever and I sit comfortably here and I don’t like to … In the evening it’s ok. One hot meal a day is enough for me.

DB: And there’s a communal dining room downstairs?

GB: Yes. There is a lounge, which opens into the dining room. It is actually one location. No. I rather prefer my own and I’m used to it, not that I’m so regimented, I also don’t like to eat so early. 1 o’clock is time enough. And it’s not a real meal. But say I’m out, like on the days when I go to yoga, then I usually combine it with a little bit of shops or repair places, or the bank or whatever. Then I come home and I take my white yoga stuff off, then I’m happy to sit here, I don’t want to be amongst people.

DB: We’ll stop shortly, (GB: Ja) because this is also quite tiring and you are telling me a lot
GB: Did I? Maybe I talk too much?

DB: No! It is very nice to talk to someone who is prepared to tell you all these things and I appreciate it because you don't know me very well and you are telling me a lot of things about your life and it sounds very interesting. And thank you.

GB: Yes. And you wanted to know about my husband.

DB: Also, nothing that you don't want to say. It's not about being nosy and wanting details, it was just in terms of background whether... did you divorce, did you stay married (GB: it is part of my background, you are quite right), are you widowed? Also the reason I ask you about marriage is that in terms of your being single now, I am interested in whether that affects your outlook? Whether you ever feel lonely, whether you'd like to have a partner, previously you said to me, after your phone rang, "I have a boyfriend here!" So that's really what I wanted to ask you about.

GB: Ja, no, funnily enough, well let me just close the subject of Lourenço Marques. We were really very happy. When he... he was a person, he never took anybody's advice or really opened up. He was a person that thought he was the best, unfortunately. He was good-looking, but that wasn't so important. He was never really trained for any business but he thought he knew everything and he thought he was cleverer than everybody else.

Anyway business wasn't all that good and the moment business wasn't good, he withdrew because he, whether it was a kind of guilt because he couldn't provide anymore in the way he, because of the lifestyle he was used to... At that time also, he had quite a good business... (seems as though she is battling to remember the details). That was the time of the Federation of Southern Rhodesia, Northern Rhodesia and Nyasaland. They formed a federation. And everyone said, "that's the future, that's fantastic. Business will be booming, economically now that they work together, economically it will be a fantastic improvement." Which in the end it wasn't. It didn't turn out that way. But then he went, he had some connection to Salisbury, a kind of an agency. In Africa that was the type of business, you acted as an agent, as a distributing agent. But it didn't work out so wonderful either. I think he got into debt. It wasn't anything personal, but he in himself withdrew. Then we finally, in a roundabout way came back to South Africa. We applied for permission and could live here in South Africa. He started a business, it didn't work. I think he got himself into debt. On the personal basis, he was hardly there. At that time we lived at the old Rosebank Hotel. That's before your time, you wouldn't know. They had a little cottage, a little witch's house, all by itself on the grounds there. Because the hotel itself was a smallish building, a family hotel sort of thing. And we were in that cottage, which was very nice. At least we had space. It had a living room and the kids had a small room, but they had two bunks not on top of each other, and we had a bedroom and our bathroom. So, it was very convenient, not luxurious, but very convenient. But he didn't want me... I said, "let me take on a job, the kids are at school, maybe a part-time job?" "No, no, no out of the question!" And I was very obedient, very obliging. You know all my independence came much later.

Anyway it ended in a divorce. It was very funny divorce because the lawyer, we took a lawyer, and he wanted to know "why, did he have affairs, did he do this, did he do that?" I said nothing like that, it was just not working. I didn't want any scandal (laughs), there wasn't any. But he had withdrawn completely. He was hardly ever there for meals and anyway the boys... he didn't know how to talk to the boys, he had no relationship with them. He wasn't made to be a father, really, that came much, much later.

DB: It sounds quite painful for you to talk about and I'm sorry if I have probed too much.
GB: No, no you don’t because there is no scandal in it, there is no animosity. It was all on a very friendly basis. When I told him I wanted a divorce, he said, “are you sure, are you sure you know what you’re doing?” “Yes, I think it’s better.” The children, one of them, L, probably, the older one said, “I don’t like daddy.” I thought if the children grow up not liking their father, because as they grow older they will watch that there is nothing between us, nothing that was there before. There is no love, no understanding, no confiding. If they grow up hating their father, that I didn’t want, for the children’s sake, you know, not for him or for me. So I said, “I think we’d better get divorced.” He didn’t really want a divorce (laughs) but anyway that’s what happened.

DB: When was that?
GB: That was in 1959.

DB: So you were still married for a long time?
GB: We were married for 25 years.

DB: How old were your sons at the time?
GB: They must have been 13 and 12. We were already in the flat anyway.

DB: What are their names? This is just for my own interest.
GB: L and R. As a matter of fact, they were both in bed, because I see them separate and I think I sat on one of the beds and I said, “I must tell you something, daddy and I are getting divorced.” “Oh, good,” said one of them, and I can’t remember which one it was, “can I tell my friends?” Because the children must have had problems because their father was never with them. Other people had fathers ... I mean they had a father and yet he was never there. So he wasn’t very happy in himself, but he also couldn’t pretend to be a happy family and he couldn’t provide. Anyway. Then I took that job for a fortnight whilst the secretary of the director of Siemens was in hospital. And at the end of the fortnight I said to him it was my last day and he said, “why?” and I said because Miss X or whatever is sick. He said, “so, she can go into the typing pool.” (laughs).

DB: And this landed up being your career?
GB: For 22 years.

DB: As I said, we are going to end, and I don’t want to rush you at all. Did you remain a single mom, and bring them up alone?
GB: Yes. It was very peaceful at home, very friendly. Because there were already little incidents when he forbade this, or didn’t allow that. It wasn’t really a family group, you know, putting his weight down. It is very difficult with early teenagers. I thought what’s going to happen when they are 15, 16, 17 and I have this relationship? No, no. So now like that I worked, the boys went to school. I moved from Rosebank to X Court because I couldn’t take them to school by car. I worked down in the south of the city near Troye street. If they missed the school-bus ... there was only one bus because at that time they were in High School and it was in Hyde Park. So that tension in the morning, must they catch the bus or are they late, must I take them to school? It was terrible. I thought no, I can’t carry on like this. I’ve got to live somewhere that is within walking distance of the school. Then it happened the flat was advertised, I knew the building. One of the people at Siemens lived there. So that is just opposite the high school. So how much closer can you be than just walking across the road! My job was very satisfying, personnel department. Then I became the personnel department. That came later, that came after 2 years or 3 years.

DB: Let’s stop. It has been most interesting and there are many questions I’d like to ask you having heard this, but I think we can leave it for another time if you have the time to see me again, which I’d so enjoy.

GB: Yes. But I can just close this section for you.

DB: Ok, I don’t want to rush you. (It is clear that she wants to go on talking!)
GB: Yes. The divorce came through. We were on polite, friendly terms. G moved
to London, got into the silver business. Went from London to Hamburg. The
two boys then were starting to grow up. They talked to him, they visited him.
I said to them, “if you go, please contact your father”, which they did. L got on
very well with him. R never forgave him. I think he didn’t congratulate him on
his matric, or something. Anyway children are different. But, in the end he
went to live in Hamburg because that had to do with the silver business which
he took over from the people he worked as agent for. He built up a beautiful
business, came to his senses. I visited him. Siemens sent me to Germany,
so I visited him there. And then later on I travelled overseas. The children
then went overseas. So we spoke on the phone. He talked about us. He
said, “we were very stupid.” I said, “yes, we were very young and stupid.” He
built up a very good business in Hamburg and he said, “I wish I were 20 years
younger. I wish I would have known 20 years ago what I do now.” Because
he also, he took chances, he took risks. But, the older he got, the better he
became. We were very good friends. But of course … he came here, he
came and stayed with me. On 2 occasions he came to South Africa, he
stayed with me. Then we met it was my sister-in-laws 75th birthday. We
went to Mauritius and he came to Mauritius, we had a few days there. Then
he came to Melbourne to visit the kids, on one occasion at the same time that
I was there. So, ja, as we got old we got very friendly. Talked quite openly
(laughs) we quite joked about it, said “we got (inaudible) well I couldn’t afford
you.” (laughs) You know, it became … if you look at it from high up you can
see down what all these little ants are doing down there, stupid running
around, not knowing what they’re doing down there. (quite a wistful tone)

DB: It sounds like almost a full circle (GB: Yes). That the relationship became
better later.

GB: Absolutely, absolutely! Then he became very ill. We went to Hamburg and ...
he died. (Quite a long pause) Ja, so, in the end he found fulfilment in his life
in the same way as I did. We often talk – my friend Elizabeth in England, my
friend Edith here, the one who unfortunately now has got Alzheimer’s, but I’m
friendly with her daughter – we often got together because they were also
getting friendly through me, and said all three of us came into our own way, improved our personalities, developed, spread out our personalities after we
got divorced.

DB: It is very interesting, in terms of what we learn.

GB: It was. It applied to the three of us. Elizabeth came an MBE (Member of the
British Empire) she worked for the … after her husband died, the best thing
he could do for her was when he died … she travelled all over the place …
was a director of the …and a few of the very top business people were the
people she dealt with … so she also, from nothing, from the wife of … she
became somebody.

DB: All this has a bearing on what you’re telling me because so often there seems
to be a perception that you have to do everything when you are young and
after that your life stops somehow, or maybe you play a few games of Bridge
and what you’re saying is throughout life there is opportunity for development
and that you took those opportunities. And that at a time when fewer women
worked, you had that opportunity, you had to bring up your sons …

GB: Yes, that opportunity came when you got rid of your husbands!

DB: And that it didn’t become a tragedy that you didn’t have a husband …

GB: These … both of them, Elizabeth and Edith they are about 9 or 10 years
younger than me, but that didn’t really matter on account of the
circumstances. I had my children late. When I started thinking now is the
time we can have a family, I was 10 years older than the others who were 21,
22. But I suddenly became part of that group, of the young mothers, at the kindergarten and the early schooldays, so maybe that also kept me younger?

DB: This is so interesting. I'd like to stay and talk to you all day but I'm going to stop now. Thank you so much, it is so fascinating, I want to ask you all sorts of questions that have nothing to do with ageing!

GB: It is strange that it should be interesting for anybody else. I mean it is my life...
APPENDIX C: Interview 2 with Gina

DB: Maybe what we can talk about today, since we did so much of the background last time, is about any of your thoughts on ageing. I want it to be as open-ended as possible because if I start to ask you specific questions, it becomes what I think about ageing. So, I wondered if there was anything you thought about since we last spoke that you’d like to add, or anything that you can tell me about being your age.

GB: Being my age makes me feel that everybody is younger than I am. There are some women here who I always thought, well they are actually, why are they here, they’re really too young. They do entertainment and took it on to organise the movies and the music evenings. We had coffee at the shopping centre the other day and we were talking about age and she said, “well how old do you think I am?” and I said, “well 60 up to 72, sort of.” So she said, “I’m 80!” So I thought, what am I thinking about? (laughs). So really, they’re active, they’re young, so I don’t think there’s anything very special about me (laughs).

DB: I think there is!

GB: It is just the last few years that I actually aged. When I was 80 I wasn’t any way different from 70. I didn’t look 80, I didn’t feel 80, you know nothing in my body had really changed. But, after that, when I look at that picture (indicates 2 photographs of herself) 80 and that picture 90 and I look at myself, then I, ja, then I realise… But I can’t say that I’m terribly upset about it. I suppose you grow with it (laughs) you know, after all, I wouldn’t say accept it. I don’t believe in sitting back and saying, “no I can’t do any of that, I can’t do this and I can’t do that. I should take a wheelchair, it would make travelling so much easier (GB is going to Melbourne for 5 weeks, a trip she makes annually). I say I don’t really want it easier … for as long as I can.” That is my basic attitude. As long as I can, I do just carry on. (Laughs) What else can I say? There are certain things which your body doesn’t want to do anymore. You know, at yoga certain exercises which are a real problem. You realise no I can’t do them anymore. I could never actually sit in the lotus position (laughs).

DB: That is so uncomfortable!

GB: I can’t do it. I can’t bend my legs more than that, so that already (laughs) spoils it a little bit. Also for my back, I can’t sit upright like this for everything but that has always been from the beginning so that doesn’t upset me anymore. But certain things … I find I’m a bit stiffer than I used to be. But I can certainly carry on. You know I’ve never said, “I don’t really feel like it.” Because that is what most people do … “there is something today, do I have to go there?” There you’ve got to force yourself. I really sometimes don’t feel like going there, and it is raining … in the car. But once I’m off then it’s ok. But I don’t think that is anything very special, it probably happens to other people. If I do get certain pains sometimes then I think “what’s that?, Maybe it’s starting now.” But then I said no. Some certain movements I’ve got a pain in this leg, quite new, since yesterday or the day before. It can’t be the bones, it’s the muscle. Well a muscle you can treat, rub some Voltaren. But there is a little fright which you get with anything that wasn’t there before. These things suddenly pop up, you know. And then of course there are certain things which are not painful, they are not dangerous, but they are socially unacceptable. What they call the post-nasal drip but it doesn’t drip, don’t ask me where it comes from (laughs) where does all this moisture come from? Out of the blue, suddenly before I can actually reach a tissue and it tastes salty like tears, ja, clear, clear liquid. My maid was so used to it, before I feel
it sometimes, she comes with a tissue, because she can see it. So, that is
something that I've got, also apart from that to do with the nasal condition, I've
got to blow my nose much more often. But it comes also suddenly and I find
that very embarrassing. If you sit with other people and every 5 minutes
you've got to take out a tissue.

DB: It sounds annoying as well.

GB: Ja

DB: I think in what you're saying, that interests me so much, is that the idea that
you suddenly noticed. You know, up to about 80 you felt the same and then
you suddenly noticed. Can you tell me at any other stage of your life did you
ever worry about getting older?

GB: No, no. I always thought I wonder this person gets this, and the other person
gets that and now she's getting old of course, I said I wonder where will it hit
me. But I wasn't concerned about it, it was a sort of curiosity. Basically, I
think, you think it can't happen to you. Even like accidents also, it always
happens to other people. So I think that is part of it. It didn't bother me. I
thought about it. Where will it hit me? Will I get a stroke or will I get ... But it
didn't worry me, you know, curiosity. It did not worry me, I never made a
secret of my age. You know, some people don't want to admit how old they
are. I thought this is ridiculous (laughs). I was always quite ready to say
when I was born and how old I was. And as I said, when I came to 90 then I
was surprised at myself. I thought 90! Maybe they made a mistake on my
birth certificate. But, you know, when I think, my mother was 93 when she
unfortunately had the accident and broke her hip and the operation never
helped. It was ... and from that for 3 years she was not herself, she couldn't
walk, she couldn't stand and she was very, very unhappy. But I didn't really
think that that would happen to me. Thank G-d I feel good. But some people
ponder on it and it occupies them. Not with me, never.

DB: I wonder if you feel there's more emphasis nowadays – you've got
daughters-in-law, granddaughters – I wonder if you feel there's more pressure
now, or more awareness maybe – as we said last time, people have been
ageing forever, but do you think there's more focus on ageing?

GB: Ja, there is something. People try and hold you. They try and support you.
And the Blacks call you, "hullo Goggo". With that you realise that the other
people usually see you as older than you think you are, or you feel. I do need
support, but I don't need support that somebody holds me. I just need to
touch something, I say my earth leakage! As long as I can touch somebody I
say, "no, no you don't have to hold me", except down steps or on uneven
ground. I need something to hold onto but I don't want to clutch ... to support
myself. It's a kind of ... it's got to do with the balance

DB: Does it upset you that people react towards you like that. Do you ever want
to say, "leave me alone, I'm perfectly capable"?

GB: Yes, you do say that. I won't say it upsets me but when I don't need it
(laughs), it bothers me. You don't want it. But, it's not a deep anger or
anything like this, not at all. But when I'm quite capable of doing it by myself
then I think the others should accept that too. But it is difficult because when I
am with somebody and they don't realise it that I need to touch somebody
(laughs). But the girls know, my granddaughters, know. So when we go
down a stair, which I don't know very well, in a restaurant, I say, "you go first,
if I fall, I fall onto you." I'm not conscious of falling, but it's just that going
down steps ... there was the escalator the other day. There is an escalator at
Balfour, which doesn't have first a straight step. It comes out and goes
straight down. And I stood there frozen. I just couldn't move. I had to walk
down the stairs, or take the lift, or something. It doesn't often happen but
depending on ... I have then a feeling with also steps, if I haven't got
something to hold on to I have a feeling of stepping into space ... I can't describe it any differently. It doesn't happen going up, but going down.

DB: It makes you feel a little insecure?

GB: Ja. But you don't just grab someone's arm and that person thinks that you really need support and before you reach for them, they want to help you.

DB: You know, in some way, that's a perception. That's someone looking at you and thinking because you are a certain age, you need help and so they'll hold your arm. Do you think that you are perceived in a certain way because you are older? Do people shout at you because they expect you not to be able to hear? Do people ever talk to you as though you are a child?

GB: No, no.

DB: I am trying to work out if you feel you are treated differently than you used to be treated?

GB: No. Because, how can I say. You see, as I say, I am very reserved. I don't go out and chat to other people. Unless it is gradually here. I say, I've seen these people for a year and a half now and they've seen me so if we stand together at the salad buffet, you know, you make a remark and say a few words. But I've never that situation where somebody didn't think I was worth talking to.

DB: I'm glad to hear that. It was just a question that I had.

GB: I feel lately that I find it easier actually to join people, but not for any length of time and not for sitting down as we talked the other day. If there is a group of people and they talk then I'm just a decoration (laughs) because I can't contribute and to avoid embarrassment, it makes you unhappy too, I really was. When I realised that the first time when I went, I don't know, maybe 3 years ago to Melbourne, and there was the wedding, first the one wedding, the next year the other wedding, the circle of children grew. Grandchildren, all of a sudden I had 4 instead of 2, and then it really hit me. I never had the opportunity before to sit in a group where everybody knows each other and talks to each other, and I couldn't participate. I could only talk to the person that sat next to me. And I remember that I hadn't cried in ... I cry very rarely, I don't even remember when I last cried, but when I said goodbye to my son at the airport, I was very sad. And as I sat in the plane, the tears just streamed down and I thought what am I crying for. And I thought well maybe there's no point in going again and seeing them again. You know it really had hit me then because I didn't have any opportunity before then to try this out, to experience that. So ... but now I know, I accept it. I know my judgement on hearing-aids, they don't help. And everybody confirms that. Sitting in a group, you still can't make out what they say. Ja, so, alright, so it's the hearing, but I can't say it really bothers me because it is not as though I have to give up something which I was used to. I never belonged to a club, I didn't play sports, I was very much by myself or with my sister-in-law, or her brother-in-law, we got together every week and my children here, well they're all busy. So it's not as though I was actually used to being in a group of people and then suddenly dawned on me that I couldn't …

DB: It seems as though that particular incident of being with your family, it suddenly hit you really hard what you were missing, because maybe there you would have liked to have contributed, and been part of it?

GB: Ja, absolutely. It does upset me, it does upset me. They know now. But on the other hand they can't scream around, they're talking to each other. And so, I do miss a lot there. But once you realise your condition, you have to accept it. There's no point in straining ...what did you? And no point in keep on asking, “sorry, sorry ...?” Some voices don't carry and that makes it very difficult. Some people talk by nature with a soft voice. Either I pretend, and I
say “really” and I smile, and they smile as well (laughs), but I haven’t really caught on. And as I said, it doesn’t really matter.

DB: I’d like to ask you about the U3A? (University of the Third Age) How long have you been going?

GB: Not terribly long, a few years, 3. Maybe by now 4, the years go so fast …I saw in the North Eastern Tribune under the diary, I saw ach U3A which I had come across in Melbourne through my son’s mother-in-law. We are very friendly, we have not have too much in common apart from the children. We are good friends. She took me to some lectures on Jewish studies there which took place in the little auditorium of the shul and it was done by a lovely woman who comes from Rondebosch, very knowledgeable …There were sometimes 9 or 10 women, depending. One or two were survivors. There was tea and coffee and biscuits after. I wasn’t ever interested in Jewish studies before, I knew very little about philosophy … I found it all very interesting. I found it very congenial probably more than even the interest in the subject but it was done in a very admirable way. She copied out her lectures for everybody to take home, a very good idea. So that I enjoyed. I never heard of it before. There they did it at a venue with little rooms. Here they haven’t got a venue for their meetings, they use the hall at Randjeslaagte, otherwise it takes place at whoever likes to contribute, in their home. But I thought it was something very special about Australia, I had no idea they’ve got one in America and they’ve got one in Cape Town. I didn’t know it existed here in South Africa because I had never heard of it. So I think it must have been 3 or 4 years ago I went to a meeting which was advertised and that meeting had a lecturer. She was talking about the Role of the Women in Ancient Egypt. I thought that sounds very interesting. That was your mum!

DB: I was wondering about your interest in going to the lectures. Was that a specific attempt to keep your mind active or certain things that you were really interested in?

GB: I think both, but it was mostly “get out, go somewhere where there are people.” There was another one, which I had enrolled for, it was on a Tuesday it was in Linksfield, that was a very small group in the end they he stopped it. And he talked about Ancient Civilisations.

DB: One of the questions I’m very interested in finding out about is whether when you look at your life thus far, when you look at certain periods, is there a certain period that sticks out for you as being a time where you would say you were your happiest, or a time where you would say that you were your least happy? Or are they more or less the same?

GB: I was never actually unhappy. I cannot remember having been unhappy. Upset, yes, certainly, but, well … and in Spain … when we were teenagers we were also happy because although it was the beginning of the Hitler time, we had a little club and we went to theatres and we went to concerts and we had dances, called balls. On one occasion I won the Tango dancing champion. (Laughs) Ja, we had a nice time, we really did have a nice time. So, of the bad times in Germany, I wasn’t really there. I mean I was at the very beginning, but it didn’t really affect you. It happened to other people … you know it’s … when you’re so young you don’t take things so seriously. And then before we knew it, we moved to Spain. Fascinating, very interesting, we didn’t go backpacking (laughs) but to move suddenly to a different country in Spain, it is interesting and the Spanish language is beautiful, the Spanish music is beautiful. We didn’t have a bean, but, ja, it was all an adventure. Coming here, ja, the same way. My sister-in-law had organised – she had a little circle of friends that came out together on the boat from Germany, the famous, Stuttgart, which was one of the last ships which
allowed people to leave Germany and to take some of their household goods
with them. Later on they weren’t allowed to take anything … The young
people got together and carried on meeting here and going out together. And
she had arranged for me, a job, in a cake shop. There was a girl who also
worked there and it belonged to a Swiss man in those days in Raleigh street
… it wasn’t anything what it became, Rocky street later on. Ja, so I got a job
in a cake shop. All I remember is that the first cake which I sold was an apple
tart that was the first price I can remember. The small one was “1 and 3”
and the big one was “2 and 6” shillings. Pounds and shillings. So here we
were very happy too. My husband also had a little job for 6 pounds a week or
something like that. Maybe I have a capacity for enjoying things. I do usually
find things that are amusing … although nobody had any money in those
days, nobody was anybody. But you were not the only ones, that’s how it
was. The young immigrants had to struggle and build up and before we knew
it - we were only here for one year – we went to Lourenço Marques. Ach it
was wonderful, I loved it! We loved Lourenço Marques, it was so out of the
War. Of course we heard the news about the War, we were very worried
about the War, but it didn’t affect you personally. We had a ball. The foreign
community was mostly English and South African. They had the British Club
where we sort of fell in. My husband worked for a South African company, I
worked for a South African company … I learnt English because my boss was
Cambridge educated, yes, we were very, very happy.

DB: You sound like a very positive person. You sound like whatever has come in
your life, you’ve accepted, (GB: yes) that there have been some difficulties
along the line, but you’ve managed to face it and move on (GB: absolutely),
that you’re quite stoic. I wonder where you feel you will go from here? Do
you have any regrets?

GB: No regrets, not really … I wasn’t really the kind of mom who spent a lot of
time with her children … there sometimes I think … but you do as everyone
else does. I don’t feel like I missed out anything. What I do regret is that
when I came here I was so involved with my work … I should have talked to
my children more. I feel guilty sometimes, we didn’t really talk. It’s even more
difficult with boys … but they didn’t know anything else. Now we talk. I think I
have a very good relationship with my sons. The younger one is 57 and the
older one, in Melbourne, is 58. END OF TAPE

DB: Just one last question. Do you think younger women are more vain?

GB: Neither of my granddaughters here are the type that make up. But when I
look at the magazines they say you have to use this and that cream … You
can’t cheat nature, look at the flowers, they also go. There is no cream that
can replace it … Maybe if you have nothing better to worry about. I never
used base when I was younger, just lipstick. I only started using it when I
noticed the spots. You can only make the best of what you’ve got, you can’t
suddenly make yourself beautiful. What I do notice is that people don’t smile
anymore …

DB: Thank you so much for sharing so much with me. It has been very valuable
and I have so enjoyed speaking to you.

GB: I also enjoyed myself. I think maybe I talk too much!

DB: Not at all, it is so nice that you were so forthcoming.

GB: It is very easy to speak to you. That is the thing about ageing, is that you
remember things from way back, but don’t ask me what the movie was
yesterday!
APPENDIX D: Interview with Marie

DB: (I tell MS about my research and about how I’m trying to find out how individual women feel about ageing and how I’d be grateful to have her thoughts on this) She tells me that she is 65 (which I didn’t know)

DB: Thank you for telling me that. I didn’t know how to say, ‘could I ask you how old you are? (MS: Sure) My mother hides her age.

MS: Oh, does she?

DB: She really does.

MS: I don’t talk much about it (age) at the gym because I don’t want some people to say, ‘Oh my G-d I’m not getting the best because she’s far older than me’ or whatever. Maybe it does make a difference, it’s just my perception at the moment.

DB: Well that is interesting to hear, that we have this idea …

MS: But I mean, you know, I think I’m very lucky being this age and being this far along the line, really. Because of the exercising, truly, I have come as far as I have and I would also say having a spiritual belief, not a religious one. I’m definitely not a religious person, but I definitely do have a spiritual belief in a power greater than myself.

DB: So are you saying that these are things that give you meaning?

MS: Oh yes, definitely, definitely. And the fact that I have an incredible family. You know you can’t always choose your genes as you well know, but the family, the husband that I have and my two sons are just amazing. And they just make us feel special and you know we never sort of feel like old people. So ageing isn’t something to be afraid of. The only thing for me is that I say to my husband what we have to do is we have to take the very best care of ourselves that we can. You know, we owe it to our children to be well and healthy. I believe we do. And they take such great care of themselves and I think it would just be awful if we sat around and did nothing. So we both exercise and we have a shared thing that is lovely, which is we walk the dogs every day. And to me that’s very important is having that family time and even that time with my husband on our own everyday. You know, just the two of us.

DB: Just by way of background, can you tell me how long you’ve been married?

MS: Yes, I think it is 39 years. Yes it is 39 years and it will be 40 years next year. It is 39 years and you know, we get on terribly well because he is a very good friend. And I love seeing him because there’s always something to tell him and to share with him. And that’s also very important and that’s to have someone that you can share with. And the same with my children. In fact my children sometimes share much more than I would like to hear! (laughs) To tell you the truth. Ja, so we definitely are, I would say, a hands on family. And to me that’s so important, having the right family. I don’t know how you feel about that?

DB: Well, it’s not about me! (MS laughs) But I think that what you’re saying makes a lot of sense. I think that our perceptions and the way we feel about our world are shaped by where live and by the context we find ourselves in. (MS: Ja) So I think that what you’re saying about family is very important. Your children, you said you’ve got two children? Both sons?

MS: Both sons.

DB: How old are they?

MS: The one is 36 and the other one is 35.
DB: Do they both live overseas? (MS has told me, prior to the interview, that her son in London has booked for herself and her husband to go to London on the weekend).

MS: One does. We have a scenario like “My Big Fat Greek Wedding” where we have a very large place and we built a house at the bottom of the driveway. It is beautiful. And eventually my son purchased that from his father and they live there. It's marvellous because I'm able to see my grandchild everyday. And when we're away, and we are away a lot these days, R looks after the house and our animals for us and the same when he's away on business. So we can take care of each other that way. But you know just going back to family. I think that family truly is the most important thing and obviously one's health which is why it is important also to take care of yourself, to be healthy in that respect. And to have a belief in something, in a G-d of your understanding. I call it my higher power. And I'm in a spiritual programme anyway because I attend something called ALANON and ALANON adult children of alcoholics because my mother was an alcoholic and she was also a prescription addict as well and it was very tough growing up in an alcoholic and prescription drug home. You know especially when it's your mother because they should really be role models and my father managed to help himself by being absent. He became a total workaholic. So my sister and I were just stuck, for want of a better word, with my mother who spent 90%, even 99% of her time in bed, you know. So it was difficult. And then, once I'd left home and started working and I was very good at covering all this up. But you know, you take it in to all your relationships and to every part of your life that you live with and that you deal with and that you don't deal with. And then I met my husband, who fortunately is a recovering alcoholic and I've never seen him drunk. He’s been sober for something like 42 years now, never had a drink. Ja, so that is great and he said to me, “listen there is a lovely programme for the family of alcoholics.” And I'm very grateful for that because they have kept me so centred and really ok about myself, has been the ALANON and ALANON adult child programme. And it's, I don't know, every week that I go I just see miracles happening. And its happened for me, because I really and truly would not have been able to do the job that I do anyway, today if it wasn't for being able to develop some self-esteem and some confidence and I've only done that as a result of the 12 step programme. That to me has been very important. My 12 step programme is number 1 in my life. Number 2 in my life has to be the exercising, which also helps my mind and you know, makes me feel better about me and what I'm doing, and number 3 obviously is the family. But those first two things would come before the family because I wouldn't really be the kind of mother or wife that I would like to be if I wasn’t helped along by that. And I think those things, you deal with people, or I do anyway who have great problems and they see that, you know, its worked for me and that it can work for them and that's what it is all about. It's a sharing programme. So I feel that has been great in my life, absolutely number 1. Number 1 has been the fellowship.

DB: It sounds fantastic.

MS: It really is. Doing those 12 steps of recovery, it’s hard. You have to be very honest with yourself and about yourself.

DB: They seem to have given you something that you didn’t have growing up, and maybe it put things into perspective and

MS: Absolutely it was incredibly hard

DB: And to have had an absentee father and

MS: and a mother who was not home, you know, literally not home. Ja, it is. And I see the difference because I have a sister who doesn’t want to go to a programme of recovery and her life is totally unmanageable, totally. So there
is the route of becoming manageable and the route of not. So there you are, and I never want to be the person I used to be because that was just a mask anyway, you know. I was very reliable, very dependent (dependable?), very much a workaholic. All those things happen to one child, I would say, in the family. They often refer to them as the hero, the one that looks after the others. And I’m still doing that with my sister and my programme says to me not to do that, but it, you know (sighs), its very difficult to see someone on the street, especially if you have so much yourself, and I do, I am so unbelievably blessed. Oh G-d, Daniella, I am so blessed, really.

DB: Thank you for sharing this. I just want to tell you thank you so much. You know it’s so special, it really is special.

MS: That’s good I’m glad but that’s what up makes up the person, hey, that you want to interview anyway, don’t you?

DB: That’s it. As I’ve said to a few of the people, because a people have said to me well that has got nothing to do with ageing, and that hasn’t. I think that it’s so much one’s outlook on life (MS: oh definitely), it is so related to your life experiences to everything, to how you experience the now, the future, the past … (MS: definitely). So R when you say you don’t want to be that person that you were. Round about when was that?

MS: When I was living at home with the problem and when I left home, you know, moved from Pretoria to Johannesburg because I wasn’t me. I didn’t know who I was anyway. And all I knew was that I was terrorised most of the time and really fearful. And that if anything nice happened to me, and nice things did happen to me in that period as well, and I always used to think, well (a) I don’t deserve them and (b) its going to be snatched away from me very quickly so don’t get too used to this and don’t think this is for you. And then I met the man I was to marry who was already just very newly sober in AA. And that was the beginning of my growth period because he said, come on go to that fellowship (a) you’ll learn more about what kind of person I am. And you know, I didn’t realise that my mother had this problem until I actually went to the meeting. I just thought she was doing it specifically to get at me. And that she was just weak-willed, and you know, not up to much. And I learnt differently, that she also … she had a choice but the choice that she made was not a good one for all of us, especially herself and she died very young. So my change happened when I got married and it was wonderful because I was able to make friends with her before she died. Through the drugs, through the alcohol, her insides, her kidneys particularly through the prescription drugs had gone to hell. So she died when she was 51 and my younger son was only 4. And, I mean she could basically still be around today if she was healthy. So we missed out on a great deal with her but as I say we righted that, ja.

DB: Within your own family (MS: ja) as well and that is also part of how important family is.

MS: Ja. Without a doubt. And truly, by the grace of G-d I really am married to an incredible man.

DB: Oh that is such a lovely thing to hear it really is a wonderful thing to hear. I think I chose you because you exude this confidence and happiness and togetherness and the way you care about people (MS: No I do, I do) it really comes out very strongly (MS: Ah thank you), and I just knew that I wanted you (laughs).

MS: Thank you.

DB: R, I’m thinking, you know, you talk about now about being healthy and about your family, about doing things, about travel (it seems as though R travels overseas constantly!) … tell me something about that.
Oh no I am the most spoilt person I know! Sometimes I think this is really too much (laughs) I am far too spoilt. But we do, we are really lucky to be so spoilt. My older boy is the source of all this spoiling for all the trips and so on, that I must tell you. And he’s wonderful that way. I mean if I got onto a plane every second week he’d be fine, you know, if his father and I got onto a plane. And so we do, we love travelling, we like seeing new things. R (husband) is one of those people who can look at something … I can look at something and ok I know that’s a cup, but R will look at something and say yes it is a cup but this and this and this. So he sees things … so it is wonderful to go travelling with him because he sees more than I do. So he’s a good teacher in that respect. And we do, ja, we enjoy it. We have a very good life together. We travel, as I say, a lot. We go to the beach a lot as well because we have a very nice spot at the beach as well and we love to go there. And I love to be at the gym as well. I really enjoy the teaching very, very much. And it’s nice to be able to run away when you can.

DB: How long have you been there at the gym?

MS: Oh, for about 25 years. And it was nice because when the children were small I also included a lot of fashion shows at shopping centres and so on. I did that which I liked a lot. I always did that in tandem, sort of with the exercising. And then the exercising I liked more than dealing, you know, with difficult people, shopping centre people are difficult. And so I went fulltime into the exercising and that has just been the best thing. I met a lot of wonderful people, and it is nice. It’s nice when one has nice people who come to you and I think most of my nice people are here. I sometimes have had people who I haven’t cared for that greatly but you know, some of them have gone, some of them have stayed.

DB: You sound very content.

MS: I am. You know, as long … I’ll tell you something, I like a shit-free life to tell you the truth! I hate drama and I hate confrontation but I have learnt to do confrontation and that is being the adult child of an alcoholic. It makes you, you know, you don’t like to rock the boat and you are certainly not into confrontation and that is how I used to be. If you wanted me to be one way I would be that. If so and so wanted me to be another way, I would. But not anymore so I am able to confront. I think that we can basically say most things if we say it kindly and not in an abusive fashion even if others are abusive towards you. You know, so, but that is only for me because I feel better doing it that way. Sometimes I feel miserable.

DB: It sounds very special. It sounds like from your past you’ve learnt so much (MS: definitely) and from the programme. You seem to have so much insight into the fact that being the kind of person that other people want you to be is very much related to not being unconditionally accepted as a child and not having had someone there to help you with that self-esteem. You really seem to have found that.

MS: Ja and that truly is through the programme and through the husband.

DB: That is fantastic. It sounds like you’ve grown together (MS:yes). It sounds like it has been a partnership.

MS: Oh definitely, definitely. It is a very good partnership.

DB: That is an inspiration.

MS: How long have you been married?

DB: For 12 years and I adore my husband.

MS: Oh really so it’s a good marriage?

DB: Yes it is a good marriage and I think he is the greatest human being and when I hear what you say I think “fantastic” that is what I want!

MS: And that’s what I think about R too, he’s the greatest human being, he’s just so special.
And R it's so funny because I've noticed that depending on who I am with, I
either ask or I don't ask and I said to you I'm not asking and yet I am asking
questions! (MS: ja). The questions are if you look at the future, if you think
about the future in terms of getting older, how do you feel about that?

You know, as long as I am well that is the main thing. I don't want to be a
burden to myself, number 1 and especially not to the children. So I, as much
as it would be nice to live with them later on and they keep saying, "well you'll
stay with us" I hope I won't. Really, I sincerely hope I won't. I want to keep
my independence. I like being independent and that way, you know, it does
make you aware of the fact that you've got to remain well and focused on
things and so I don't want to live with them, let's put it that way. So I hope
that never happens. I hope I'll be able to look after myself. You know I joke
sometimes and say, "oh my G-d what I burden I would be if I got Alzheimers
but never mind I won't know about it! So that's ok, so whatever they do, that's
all right." But as long as I can do for myself, oh yes. Because I enjoy being on
my own, really I do. There are times when R does a show and he has to be
away for a day or two, here or there, it doesn't bother me at all. Early on in
the marriage also, you know, he had to be away a lot and I'm quite ok with
that. I notice a lot of people aren't, but I like to have to time just for me. To
me, that's important. So I would like to remain independent. That's how I see
it as being independent, looking after myself, you know, not being a burden
on the kids. I know also that I will never be on my own without them. They
will always be there for me. They really are the most amazing children. They
are very courageous, very courageous kids.

To know that you would have them there, that's a very comforting thing from a
support point of view. (MS: Oh yes, I know). You're not afraid that you'd ever
be alone which is a terrifying thought. I think it is a terrifying thing.

Oh no. And what about these poor people who are on their own? You know,
and their children live overseas and they don't see them. That's awful, that's
really awful. At least my son who does live overseas is here all the time,
sometimes twice a month. So, you know, I never feel deprived of him either.
But I do know I will be ok, ja, I do. I would like R around as long as possible.
I really would. Because, you know, we really enjoy being with each other.

He is 67.

So there's just a slight age difference between you.

Just a slight difference, yes, and he also takes care. He's got a bit of a
tummy but it's still from the cortisone. And he does Pilates and he walks
everyday and he's very responsible and as I say, he hasn't had a drink for 42
years, and he doesn't smoke. So neither of us smoke or drink so I think that
also is a help to ageing. Because I think smokers really look ... smokers,
people who drink, people who drug, really look terrible after a while, don't
they?

Yes. And talking about that, because I was dying for you to get to that
subject, in terms of the way you look, and in terms of appearance. You are
someone who, firstly, always looks very glamorous (MS: oh thank you, you're
very sweet). No you do, you always look lovely. And I think about the career
that you're in, the gyming and the physical and the body and you said fashion
earlier, I wonder about how you feel about the appearance side of things.

Ja, I like to look nice but I have to tell you I hate, with a passion, shopping! I
absolutely hate it. Yes, I like what you have in the shops but it's to go and
fetch them that I don't like! So, you know, I would say that I would be more
fashionable if I hit Sandton City and Hyde Park. Trust me, if I go to a
shopping centre it's because I've got to go there for something. Ja, but it is
important. I don't, I would really not like to put on huge amounts of weight
and let myself go and like some people I know say, “oh well so what, I’m in my 60’s so bugger it, I’m just going to relax.” But I am careful about what I eat. I am a vegetarian. Today it would be a choice I would make. When I first became a vegetarian about 30 something years ago I had no choice in the matter. Everytime I had anything like meat, fish, chicken to eat, I got violently ill. So I became, I won’t say allergic but I got sick, so that’s why I left it. But now today I would make the conscious choice. I think that’s important, you know, how much to eat and when to eat. And I also believe that what you eat at night and go to bed on is what you wake up with the next morning. So I like to do light at night. But eat healthily. Oh yes, definitely eat healthily. Ja, so I don’t want to be fat. Definitely not. I didn’t want to be as thin as I was last year, but that was unavoidable and so just to be comfortable, to be at the weight that I feel ok at, is for me.

DB: When you talk about last year, because I know that you weren’t well. You had a heart problem (MS: Ja). Did you have a heart attack?

MS: No. I didn’t. 7 years ago (very long pause)...

DB: And again, if you feel uncomfortable answering anything, just tell me. I don’t want to pry.

MS: No, I don’t mind. If you’d asked me maybe 25, 30 years ago I might have not answered everything, but no, no I’m fine about everything now, really and truly. 7 years ago I went for a check up. R insisted. He said, “look what happened to me.” He had a heart attack and he said you’ve got to go for a check up. So eventually I did. And I said to him, “you know you’re making a fool of yourself sending me to a specialist for an appointment because I’m so healthy and I exercise 6 days a week” and I was! I was fantastic. Anyway he said “please go” so I did, and everything was fine and then they discovered I had a fibrulating heart. And he said, “no you’re going to have to see a cardiologist.” And he said to me that 10 years before that, if I had presented myself with the condition I have, they would have written about me in the medical journal because it is amazing that I was fit the way I was. And that if I wasn’t fit I would have stood in line to have a stroke. So I was put onto medication and I had to go to see the cardiologist every 6 months. And he said, “you have a collapsing valve besides the inflammation and eventually we are going to have to either repair it or replace it.” So it didn’t seem quite as soon as it happened and I think maybe because I was so hugely stressed when R was ill for those 3 months (R had another heart attack). Maybe it speeded it up, I don’t know, I haven’t asked, you know, immaterial. So I went to him and he said, “I’m sorry the time has come and we have to do it now.” And I said to him, “I don’t have a single symptom.” And he said to me, “that’s why we have to do it now when you’re asymptomatic so you can get through it easily and comfortably.” So we did it. The surgeon came to see me and he said, “I have to just tell you one thing. No surgery is without risk.” So I said, “fine.” I went in for the op and they said to me first prize would be a repair. A replacement would definitely be a second prize. So the op went superbly. It was a repair. They thought it wouldn’t be. They said I was too far gone. They though it would be a replacement, but it wasn’t. It was a repair and that was wonderful. As they were beginning to sew me up, the cardiologist said, “look on the screen, the heart is bleeding.” So the heart perforated and bled and truly it was touch and go. And what was meant to be a three and a half hour op turned into a nine hour op. And they had phoned the family from the theatre and said, “good news, it’s a repair. She’s fantastic. Be here in an hour’s time, (which was half past four in the afternoon) and you’ll be able to see her as she goes into ICU.” And the poor family came and they sat there until after 9pm when the surgeon came in and said, “it’s touch and go. If she bleeds again, I’ll only have time to phone you. Go home. Please don’t stay
here. Go home.” He stayed with me all night, which was wonderful. I know
this has nothing to do with anything.

DB: It’s fine.

MS: But the fact is, oh yes there is something because the fact is they said that
they were dealing with a woman whose body was very, very much younger
than her years, and that’s what pulled me through. So there you are. So it
was, thank G-d for the exercise. I always used to say I exercise for my mind
because I feel better. Then I don’t feel down or anything because exercise is
brilliant for your mind. But, here it was. It saved my life. It actually saved my
life because the body was so much younger. So there you are. So it is all to
do with ageing at the end of the day, it really is.

DB: It is. And just the way, you know, just from your speaking, I am getting a lot of
ideas about you as a person. So you really are filling in the gaps for me and I
really do appreciate your sharing this. And from what you’re talking about,
you were in a situation where, as you say, it was touch and go (MS: Ja) and
when you came out, how did that affect you, the idea that you might have
died? This is a very personal question to ask anyone about death (MS: no,
no, no). If you can, and if you’re willing to tell me how you feel about that, in
terms of fear, acceptance or …

MS: Well first of all I was unconscious for 5 days and on the ventilator. Anyway so
when I finally came around in ICU. I couldn’t believe what they had said, you
know, that I was out of it for all those days. And everything was fine. I was
really upbeat and happy in the hospital and didn’t think about it. And with the
recovery, I must tell you that there were times, but they were so … only from
time to time, at least it wasn’t that feeling everyday that I was going to die, but
from time to time I thought, my G-d, maybe I am going to die. And then a
girlfriend of mine brought me the most wonderful articles that Max Du Preez,
you know the journalist, had written. And he had a triple bypass and he was,
you know, in the same boat. He also nearly keeled over. And he described a
lot of the symptoms saying that fear of dying, but he really had it badly. I must
admit I didn’t. I just had, you know, from time to time, the flashes.
Sometimes now, if I have a dip in blood pressure or blood sugar and I’ll think,
“Oh my G-d, maybe I’m going to die.” But it is not my constant companion by
any means. I’ve had all the check-ups and I’m fine, I really and truly am fine.
And I take my medication so that’s ok. But I don’t have those feelings
anymore. The only feelings that I do have are I must be well for my family
and for me. I don’t want to put my boys through that again. I really don’t.
They’ve seen it twice now. Once with their father, 9 months before with their
father, and here with their mother. I mean really, a bit hard on them, don’t you
think?

DB: On all of you.

MS: Ja, on all of us, but R saw it only once and I saw it only once. They had the
both of us. So ja. What else did you ask me about that?

DB: I was asking you about, you know, I think it is hard to ask anyone about dying
because I think it is deeply personal and often very difficult to talk about. If
you do think about it, is it something that is something that is fearful, or is it
something that you try not to think about?

MS: No way. I don’t try not to think about it. If the thought comes then I’ll deal
with it. Ja, I just deal with it as is, but no I don’t think I am going to die. I
actually think I’m going to live too long!

DB: I think from what you’re saying, about your outlook is that the idea of being
healthy is the most important thing, and being healthy for yourself and for your
children, to continue to do the things you do.

MS: Yes, definitely.
DB: If you think about ageing, very much what I'm interested in is the idea of satisfaction, life satisfaction. It seems that from everything you've said that you are satisfied with how things are.

MS: Yes, I'm hugely satisfied.

DB: That's more than satisfied.

MS: Yes.

DB: Also you've answered some of my questions because some of my questions are about when did you feel more satisfied or less satisfied or was there a period in your life that you look at where you feel you were either happier or less happy?

MS: Well it's all to do with the family, you know when the husband was so ill for those three months, I definitely was not happy, that is for sure. And, you know, when the children, my younger son for example, had his eye problems – he had a stick poked into his eye on two occasions. And I want to tell you something, that was the worst. Anything that happens to your children ... no but he's fine, he is absolutely fine, thank G-d. So it's always been that sort of thing, but I can't remember feeling as sad ever as I did when R was so ill. Oh, that was awful. But he's recovered, you know. I am really, on the whole, very, very content. And if there's something that does make me unhappy, I do think about it, I really do, I've learnt to do that now. But that's only after a long time, you know you learn. So that's why you'll see a lot of people coming to you for that sort of thing and we see it a lot in the ALANON programme. We get quite a few psychologists who come to, particularly the adult child group, really and truly. Because we find that many people who have grown up in that kind of dysfunctional home go out and learn about it and want to help others in similar circumstances.

DB: It makes sense. And even in what you were saying earlier about being part of the group, it seemed to me that you also felt that you could help other people (MS: Oh I do) and that that was giving you a lot of meaning.

MS: You know, that's why it's very unique the 12 step programme. It is because you don't just take, take, take. You also give to others, you know. If we have new people coming, or people that have been around a long time, I mean I sponsor in the group quite a few people. So if they have anything that they particularly want to talk about that is very personal and private, they won't mention it in a meeting but they will speak to their sponsor. And that's given me great satisfaction, just to be a member, you know, of the group and to receive what we do. And I feel, always, much better about myself when I've been, you know. And, it's terrific. I've been to, for example, a friend of ours started in Brentwood in California the largest AA group in the world. And they have something like, they meet on Wednesday nights, and their membership is something like 1500 people who come every Wednesday night, every Wednesday. I mean they have people in the car park, you know, who tell you where to park and it is all run very smoothly. But can you imagine 1500? And I went to the AA meeting there which was unbelievable. And I had my youngest son with me because we know this man very well and when he comes to speak in South Africa he stays with us. And my youngest son said, "oh my G-d, if ever I wanted to meet people and meet the best looking birds, I must come here!" Because they do, they have a lot of the actors who go there and Academy Award winners that I've met there. And really it is very interesting, you know, alcoholism has no respect of age at all. And you know, we feel that it is 1 in 10 people who has a problem. So, there you are. So I've met some really exciting people there too.

DB: It tells you anyway about how difficult it is, in some ways, about all the pressure is on people, the lives we lead and ...
MS: Ja, but we do have a choice, don’t forget, especially if we’ve been shown or
placed on the right path.
DB: Hopefully you have been given the tools (MS: yes) by your family (MS: yes)
and it sounds like what you’ve given to your sons, and that you have had to
get for yourself later.
MS: Yes it’s true.
DB: Did you ever drink?
MS: No, no.
DB: Did it turn you off totally having seen it?
MS: Ja, ja, I think it turned me off totally. But having said that. I like, if I go out for
dinner, in Winter, I love a sherry. That’s about the … sometimes I’ll maybe
have 2 beer shandies in a year. But no, I just don’t like the taste of it and I
don’t push it anyway. I think that the children of alcoholics maybe should stay
away from it.
DB: I think you’re very sensible because perhaps there is a genetic predisposition
or …
MS: Definitely, 55% of the children of alcoholics become alcoholics.
DB: You would know the stats more than me.
MS: Ja, so there’s more than a half (sighs).
DB: Well done.
MS: Not at all, it is easy because of the programme, really it is easy.
DB: It sounds like there is a lot of meaning …
MS: There is
DB: That’s the main thing (MS: ja) that I think of when I listen to you, that there’s
so much in your life (MS: Ja) that seems to be meaningful.
MS: Right. And you know what, my bestest friends come from there as well, they
really do. You know we’ve spoken about very personal and private things in
those groups. Not all of us, I mean, you know, I won’t share a lot of things in
the group that I’ve kept personal, but I will speak to somebody else, you
know, my sponsors. But our friendships are terrific because we understand
each other without having to know that much about each other. And I’ve been
lucky enough to go overseas several times to the world conventions of both
ALANON and AA. And, you know, what’s so amazing is that so many people
that speak different languages … I mean at the convention we went to last
year which was in Toronto, they had Spanish speaking groups, Japanese,
Chinese, I can’t even remember, German, everything, even Icelandic. They
even had a meeting in their language. And even though we speak different
languages, the feelings are the same, the experience the same. I’m sure you
know that. That common thread. It is like pregnant women, isn’t it? You
know, you also have that common thread with another pregnant woman, she
knows really how you feel! Ja, so the friendships are also hugely important.
And I feel you’ve got to also keep your mind active if you want to stay young.
I don’t play Bridge yet, but I suppose I’ll have to learn one day! (laughs). But I
really think that you do have to keep your mind, you know, busy. A bit of
studying, which I don’t know how you do it, I struggle, but anyway I do try.
DB: What do you study?
MS: Well you know I went overseas last year also for the World Exercise
Convention and you come back with much to study, much.
DB: So it is constant.
MS: It is constant, ja, and it is good.
DB: Learning the newest techniques …
MS: Ja, and it is important you know.
DB: I don’t know when you’d have time to study. You seem like a very busy
person.
MS: I am but I like it, it is nice. But I also like to be non-busy, as I say, and do my own thing. Sunday is my big day for the newspapers and speaking to nobody. Ja, really.

DB: Any other thoughts?

MS: I'll think of everything when I go home! (laughs) Ja.

DB: Well that's not going to help me. (laughs)

DB: In terms of how people relate to you ... I mean, from what you're saying, it almost seems like an idiotic question! Because, from what you're saying it is about sharing something in common rather than people relating to you in a different way because of your being a certain age?

MS: Ok, now R would answer that one. I haven't experienced that one. R says the minute you become grey, people treat you differently. And I think that is true, I really and truly do because what he believes, I haven't, you know, I haven't ...

DB: You haven't experienced that? Because you don't look like an "old" (MS: yes) (I gesture inverted commas in the air), not that I think you're old, by the way.

MS: No. I know what you mean. And to answer your question more about the way people relate to me, I know that some people think I'm too outspoken which I find, for myself, that's wonderful. I'm very glad I am able to do that. I had to speak to somebody yesterday. It was a very touchy subject. This person, I'm fond of her, in fact I'm very fond of her, but she really overstepped the line badly. So I had it out with her and the feedback I got from her was, 'thank you very much for your honesty.' So I'm glad about that too. So maybe there are people that don't relate to me always that well because, you know, it's not that I go around saying, "well you know, really do this or do that." It's all to do really with either the business, with the fellowship and this was, it really affected me deep in my business, so this was, so if people think I'm not going to mind about that, they're wrong.

DB: Isn't this more about this is how I am, it has nothing to do with age?

MS: Ja

DB: But it also sounds like you've learnt some lessons along the way.

MS: Definitely, definitely. So I don't know. Maybe those are their perceptions. My perception is that I am having a great time! Oh am I having a good time, really.

DB: One thing that you said at the beginning was that you don't go around sortof talking about how old you are and I certainly won't say anything, this is private and confidential (MS: No, I know), but the idea that ... that you thought that it might make people feel ...

MS: No, not really in this (gym) group, but I have got very young ones sometimes who come at night, you know, and this is why I also like the younger instructors for them to go to. But anyway ...

DB: It does seem to be some kind an idea that we've got that maybe young people would come and think that maybe you're "too old" that you shouldn't be ... I mean I can't imagine anybody thinking that and boy, you nearly killed me this morning (with the gym class). (MS laughs). So in terms of fitness ...(MS: Thank you). Maybe it's about breaking stereotypes and challenging ideas ...

MS: Well I mean, you know, the boys and R are very proud of me. You know, being this age and doing what I do. You know, I'm not, since my operation, I am not water skiing anymore, because it would be too much ... so you know, you do, you just do things that push you a little bit, don't you think so? But that's scary stuff too, oof it's hard, but my darling R taught his mother to ski very well. But now I don't do it since the op, you know, I still can't do the push-ups. That will come, but at the moment it's not for me, not for today. Just for today I can't do it, but maybe tomorrow.
DB: Does it make you feel maybe somewhat limited?

MS: No. You know what, that’s just for today, but tomorrow is a brand new day, and I just have to be careful for today. I was going to tell you something about this … ah it’s gone out of my head.

DB: You’ve told me some very interesting things, is there anything else that you would like to add … do you feel very affected by the media for example, about looking young, about …

MS: You see I don’t, I mean it would be nice, but it really doesn’t … maybe because I’m secure in my relationships with the family, that’s probably it, so no, it doesn’t. What it does affect, I think, are young people, so negatively some of the time, you know. No, I’ve got to the stage, truly, where I’m very comfortable with who I am, I truly am and it’s taken a long time, but I’m comfortable in my own skin. There are times when I’m not comfortable in my own skin, if I, for example, don’t get to my meetings and I’m overseas where they perhaps don’t have an English language group. And most big cities do have … I mean I’ve got a lovely group I attend in Zurich for example and there are a lot of Americans that go and people from England. So that’s nice, but if I go somewhere where there aren’t and I have to miss a couple of meetings, I am not always that comfortable in my own skin. I really am better off going to my meetings and well, that’s my life really, you know, to do that, and to try and follow the 12 steps and to know, this is also a big one, to know that you’re not responsible for somebody else’s behaviour. We are all adults, we can all choose what we want and we do, don’t we? But, I’m just lucky enough now to know that my choices are ok for me. But I can, you know, things can rattle me like they do for everybody, but it doesn’t stay around, it doesn’t last long. And as I say, I am very comfortable in my own skin. And a thing I wouldn’t have liked, honestly, and I really still wouldn’t like is to ever be a poor old lady. I would hate to go into my old age with no money. That I don’t think I would enjoy very much. I really, don’t. So freedom from financial insecurity, is for me, a big one. Because I think that would age me to death and back! Ja, if I had to worry about money. I remember I have a very close girlfriend, who is the most wonderful girl and she was a lecturer at university and she was married to a hugely rich man, truly they had millions. And then he drank and he used to hit her around a bit and I used to say to her, “come on, you’ve got to go for counselling. I know that you can’t leave,” I know that people find that hard to do and they become, some of them may even become addicted to that situation, in my experience. And I said to her, ‘please get some counselling and professional help.” And she said, “oh well, it’s nice to talk to you.” And I said, “it is, but get some professional help because I’m not qualified to say do this and do that.” And she said, “you know what, I’m ok with it just as long as I don’t lose money because I never want to be poor.” And do you know, that’s exactly what happened to her. Ja, through no fault of his own, but his decisions were badly skewed because of the drinking and he placed money in the incorrect place and they lost absolutely everything. She lost him, she lost the money, she had to start from scratch. But I mustn’t say too much about it, I don’t want to be a poor old lady … I hope I’m not going to attract that to myself the way she did!

DB: It sounds like it has all been a process (MS: it is a process) an ongoing process of learning, from what you’re saying …

MS: And trying to help others in similar circumstances. You know I get a lot of phonecalls from people who have maybe gone to Lifeline and Family Life Centre and then they’ve referred to us. And so I do get a lot of phonecalls from people in need and then I share what happened to me and then they tell me what happened to them. You know, they come to the meetings and a new life can start if you want it to, it is there.
DB: It sounds very much about giving.

MS: Yes.

DB: From what you’re saying, it seems like a lot of the meaning in your life comes from helping other people (MS: yes). That it’s about doing and it’s about giving …

MS: Yes and about giving back what I have received. I have received in such abundance, really, Daniella, you can’t believe. And that’s important too, not just to talk about it, but to do something and to help where you can, really. Even if it’s, well often it’s financial also, the people that you know. You know, for us as a family it is very important to try and help the people that you personally know. You can’t help everybody in the world. But, if you come across somebody who does need help, I think that is vital, I really do. I know my son has this brilliant attitude of … I don’t know if you ever saw that film, I can’t remember if it was called “Pay it Forward”?

DB: Yes, if you do something good for someone else …

MS: Yes but he does. He’s setting up a foundation which R and I are involved with as well. If you know of any really deserving causes let me know, will you? But R (son) expects them to do something for somebody else, which is a good idea. I think it really is a good idea.

DB: And this wonderful son of yours, and the other wonderful son of yours, it must have come from home, come from what they learnt from you and your husband.

MS: I hope so. They’ve seen all the good things that their dad has done over the years.

DB: And their mom … their modest mom, I’m sure!

MS: But as I say, we can’t help everybody in the world but we certainly can help if we know about it. I think that’s terrible when you turn your back where you could do something, however small, don’t you think so?

DB: Absolutely, but I also think it’s very special because I think sometimes we get so caught up in our own lives and actually we live in a world where everybody is for themselves. And there are so many people asking for money, or whatever that it is quite easy to become hard about it and think it is enough. What you’re also talking about, it seems, is that it feels in your case what has kept you young and given you this really positive outlook is this connection to other people (MS: mm). Not just to your family, but it seems you have spread your net and it has included so many …

MS: Yes. It is true. So what else did you want to ask?

DB: Well, maybe we’ll stop because to just do it artificially to fill up one hour … If there is anything you can add, any words of wisdom, any last things that you think about ageing, getting older?

MS: But you know what? I think in a way it is nice getting older because that focus on yourself maybe is not so great anymore, you know what I mean? Because the person I spoke to, as an example, yesterday and she said, “oh you know, I have been so terribly jealous of so and so.” And I thought well they are of an age and they are competing maybe for the same thing. It is so nice when you’re not having to do that anymore. I don’t know, I think that. Every age is special but we just have to accept it and accept it gracefully if you can. And, no, I really am happy with it. It doesn’t mean I won’t go and have a face lift one day, when I’ve got time, I probably will. But I haven’t got the time at the moment (laughs) and frankly I’m terrified of it. I’d be so scared to have another op. But, you know, I’m not against that sort of thing, anything to make you look younger. But it is from within, isn’t it?

DB: That is what I’m hearing you say. Maybe what you said … you know, I’m 38 and I’ll be 39 in June and I think that when I talk to women my age where 40 is kind of coming up, there’s something about turning 40 that for a lot of
people is a little bit scary. (MS: A milestone). It is a milestone. And when I
speak to people who are older, I spoke to a lady who is 47, it seems like you
kind of get to there and then you get over it and then you accept it (MS:
definitely). But at the moment it's about fighting, at the moment it is about oh
my G-d I don't want to get old (MS: yes). I don't want to ... I'm prepared to
get older, but I don't want to look older! (MS: Yes, true) And I wonder about
that. I wonder whether that is what has drawn me to the subject that amongst
the younger women that I know, it is so scary, you have to fight it. (MS: Yes)
and you watch 'Extreme Makeover' and do Extreme Makeover! And what you
are talking about is so much bigger, that is what I've found with my research.
Where I thought people would be so focused on how they looked and the
physical side. You are talking about lifelong processes that are unfolding that
don't really matter what age you are.

MS: No. True. But it's lovely to be this age. You can look at everything and you
can say, "that's beautiful, she's beautiful, he's beautiful." It doesn't matter,
you know, you're not in the same arena any longer, wouldn't you say?

DB: Maybe, and that doesn't make you feel some kind of longing or "I wish I
was."?

MS: No. All I have to think about were all those feelings, those feelings of fear and
not being good enough. Oh no, uh uh. No.

DB: So there is an acceptance (MS: Oh ja). And I think that in some ways, that's
the media. Any article you pick up says "reverse the signs ... hide the visible
signs of ageing ... fight them to death." That is what our adverts say. That's
the message, "don't give in." (MS: I know). It's going to happen anyway.
And it is lovely to talk to you and see that you're the same person, a wiser
person who has learnt ... (MS: Ja, I hope). So, maybe it is not fair to say, "the
same person?" maybe you are a "changed person", you, who you are inside.

MS: True. You know, my dear, I have got the most marvellous book at home
which a friend gave me, a long time ago, when I was about 32 or something.
And it's called ... oh what is it called? It's about growing old ... but it is great
fun. I must try and find it for you (DB: I'd love to see it) because the things
that you can now do, you can actually make more of a fool of yourself now!
So what? People might not even notice, you know. If you and I went out
together they'd look at you because you're young and gorgeous. (I protest)
No you are, you are, you're lovely. And, so, I don't know, I just think that
there are more things that you can do and get away with it! And if you make a
fool of yourself, so what? Oh yes, I remember the name of it (the book), it is
called "Old is great". Ja, and it is. It is just little quotes all along, but it's great.

DB: It is about pressure in a way. That there seems to be more pressure on you
when you're younger, that you should look a certain way, that you should look
like a model and be perfect. (MS: definitely) And you're saying, in some
ways, that it seems like a bit of the pressure goes. I think I feel scared of
being invisible. I think I get the idea that what happens when you get to 40 is
that you are no longer visible. Which is not about feeling I am so beautiful but
there is something about feeling noticed. (MS: Very good point, ja). And I
think that the idea of not being noticed at all scares me and maybe that is
vanity. Maybe it's just what I'm used to?

MS: No, nobody likes to be invisible.

DB: I don't think you could ever be invisible because I think that you are striking
and I think that people look at you and think there's this slim lady with blond
hair and blue eyes and you shine, you do. (MS: thank you) So, I don't believe
you could be invisible, but I think that there are women who become invisible.
(MS: Oh definitely.) I don't want to be invisible in any way.
But then in a way you have to feel good about yourself, haven't you, and you've got to do things to make yourself feel ok and make you feel younger, like the exercise.

Well I'm going to gym forever! Thank you so much. (MS: pleasure). It has been so special (MS: pleasure, pleasure my darling). You know I thought about it afterwards, I think that the people that I chose to interview are people who I look at as ageing really well. So, that says something about me and my fears. But, I think that that's the thing about being healthy, being independent, so that really is what is important (MS: yes), not the few lines or the grey hairs or the whatever, it is about having independence and having an identity (MS: that's right), not being a burden and not feeling useless. (MS: Sure) Because there is an idea sometimes that some "old people", 90 year old, old people, are forgotten about in an old-age home, treated with disrespect, not having any value, and that terrifies me.

No, I would really not like that. I wouldn't like that at all. Do you ever go to the Old Age Home.

I do, my husband's granny used to be in an Old Age Home, which was so institutional and it was so desperately sad when we used to go and see her. I have a 94-year-old step-granny who I absolutely adore and she is at Randjeslaagte, which is rather a nice place.

It is a very nice place.

Originally I thought about talking to her, she really inspired me, but sadly this year, I have noticed a change in her (MS: really?) I've noticed that she ...

But you know, it comes from being there ...

I agree, maybe it is a different mindset, maybe people just give up and wait to die?

Oh you do, which is why they refer to it as "G-d's Waiting Room" don't they? I was just thinking as well, every line that we have, has come there through our experiences.
APPENDIX E: Interview with Catherine

CS arrives and can hardly walk because she had her first session with a personal trainer yesterday.

DB: Where to start? Maybe, what is the most important thing that comes to mind when you think about ageing?

CS: It’s just an acceptance of ageing, an acceptance of your body changes more than anything else. It’s not a mind thing. Your body goes and suddenly from being a size 10 you find you have grown (laughs) and it’s nothing that you do, it just happens and maybe it’s just something that happens in your forties that suddenly your whole body changes and to me that was very difficult matter. It’s the body change, the image of the body changes, the way you dress had to change, all that had to change to stay with the ageing body, but your mind was different. Your mind didn’t match your ageing body (laughs) and that took a while, it took me a few years …

DB: When do you think it happened?

CS: It definitely started in my forties. For me the very big thing when it actually started, I had a miscarriage when S was 2½ and my body never came back after that. What was interesting was that my body started looking pregnant. The baby was due September and a friend of mine said to me the baby should have been born by now and that was when my weight went down and my body changed. One of the teachers at S’s nursery, whose class S had been in before said to me a few months before, “when is your baby due?”.. (inaudible) I was out to there (indicates) my whole body had changed and I said to her I had a miscarriage and you actually couldn’t see because my body hadn’t gone down until the 9 month period was up. I think it was through that I don’t think my body had come back. So it was having to deal with that, having to deal with that age. That was hard, but being an older mother as such, I had to deal with. The body’s not coming back … not going back to work, so what you take for granted suddenly that was a big thing. I think I only really came to terms with it last year.

DB: With your body change?

CS: That’s how long it took. I still walked into a shop and went to the size 10 rack and nothing fits and (laughs) there’s no point in going to that rack. It was still, you know it seems your mental picture of your body hasn’t changed. You’re still picking up clothes that would have fitted that no longer do and no longer would look good on the body that you’re carrying. So that was a big thing and only last year did I really become comfortable with the weight. It’s not going to look that great but I’m hot, I’m not covering up these arms. You understand what I mean? I’m dressing for this me now as opposed to that me then and not apologising for it. That took a long while too.

DB: This also might be a little bit personal and you don’t have to answer it if you don’t want to. When you think about having had the miscarriage in the first place, that it was difficult and that our body was … did it feel like your body was letting you down in a way, that you wanted to be having another child …?

CS: It didn’t feel that I had let my body down. It wasn’t a planned pregnancy. I felt like I had let the child down, that my body couldn’t carry it. It was very much that kind of feeling. My body’s let me down I couldn’t carry the child to full term. So it was a totally different feeling. (inaudible) the child was around me, I saw him I knew him. It was a totally different relationship, I think, to if you’re just carrying and you don’t see the being you’re carrying, you’re not with the being. So I had to come to that kind of acceptance as well which was a totally different acceptance than to a body kind of acceptance, a spiritual
acceptance. To me there was that rejection kind of feeling as opposed to my body’s old, my body can’t do it. Because I really believe your body can do it no matter what age. If you can fall pregnant you can carry. My one grandmother had her youngest at 45. Do you understand what I mean? To me it’s not an issue whether the body can, it’s not a body issue. For me it was that whole spiritual rejection kind of issue. I don’t believe that your body can’t (inaudible), for me it wasn’t that, it was just an acceptance that body you took for granted and didn’t have to work that much to keep suddenly just went.

DB: From what you’re saying, it feels like where your mind is and your body is there is kind of a mismatch in a way, like how you feel about yourself?

CS: There was, there was in terms of which you can get up and just get dressed or walk into a shop and just buy the ten. You have to change, I had to change my whole style of dressing and concept of my body and change that to meet my mind. I walked into a shop once with a friend of mine and they only stocked clothes upto a size 16 and suddenly you’re taking a size 14! You understand what I mean? Your whole concept of ... you have to go through this whole thing of ‘I’m fat’ and I think coming from a South African background which is very, very body conscious it took a while to get used to it. In England it’s not that bad because everybody’s different. There’s no ... if you see someone who’s anorexic, you look, but here unfortunately there are too many people who are anorexic. If you see someone who is skinny then you look. Most people there are ... they don’t carry this concept of ‘I have to be or look perfect.’ To me it’s weird when I see someone who’s too thin, you understand what I mean, because of what I’ve seen and that kind of thing, you know. To me I look at someone and I can see that they’ve got problems and they’re trying to control something and they’re hiding behind it or they think that looking so unhealthy is attractive to them. But looking so unattractive to me shows the problem with that whole thing with image. So I mean I had to move in that whole South African context of you’ve got to look just like this and to come to terms with that. So your body image, until you get used to it, it does restrict you. (inaudible) then you don’t fit it.

DB: So now how do you feel?

CS: Now I’m actually feeling ok, now I’m feeling like this is the body you’ve got, but it took a long time to get there. This is the body you’ve got, you’re not going to have that body that you once had as a 20 year old. You don’t want to have the body you had as a 20 year-old. So there’s a bit of fat on your arms, who cares? Or there’s a bit of ... you understand what I’m saying? It doesn’t matter. Then I went off to gym yesterday, and I suppose I’ll struggle with that again for a while, won’t I? (laughs). But it’s that, that whole thing of it actually doesn’t matter. This is my age and this is my body and it’s ok let the age and the body be the same.

DB: This is something which I find really interesting because ‘being’ for women - and I’m not saying anything really “wow” - but for us it is so much tied up with how we look that is so important about ageing, and weight issues (CS: yes) and looking young (CS: yes), and looking sexy (CS: yes) are what in our society are regarded as what give you value as a woman.

CS: Yes. But the sexiness doesn’t have to be ‘I’m not sexy at this size.’ I don’t even see it as looking sexy when I look at someone too thin. When I look at someone too thin I see this as what don’t they have as opposed to what do they have. So I think it’s about being happy with yourself and projecting that out which I think comes with age. It doesn’t come with being young. Because then we haven’t really worked out who we are. As we accept that then maybe we rethink what sexy means, or rethink what beautiful means.

DB: But it’s very tied up with who we are.
CS: Ja so we’ve got to come to terms with who we are to understand and deal
with the physical.

DB: Do you think anything helped or in terms of the process is there anything that
comes up about this time?

CS: I think just time and certain acceptance. Not fighting, learning to love yourself
in a different body or love the new body as opposed to taking the other one
for granted. So it really is, it’s an acceptance or maybe a maturity that comes
in. I don’t have to have this amazing body to be happy with who I am.

DB: If you think about the future and getting older?

CS: I don’t mind getting older. You’re getting older but with a lot more wisdom and
hopefully you’re getting older with more enjoyment. You do change, and the
way you see life changes because I can go out there, and I can do, and I can
enjoy. As opposed to I have the perfect this or that, or this is the image I have
to portray in order to do that, which is nonsense. I don’t need that I can go
out and be who I want to be. The one thing that the whole body thing did was
attack the self-confidence. It took a while for the whole confidence thing to
come back but I think that confidence thing is also related to image and
achievement and for me we moved to the UK and I stopped working and
became a housewife and my whole mindset around that had to change. And
my being a housewife as you know do your housework, you do whatever
chores have to be done or whatever as opposed to here. So it’s not a
meaningless existence, it’s a different existence. I reached the stage where I
thought bugger this, I don’t care if my house is clean or dirty, it’s enough, I’ve
got to be me. And you have to get out, and you have to do things, and you
find things to do that you enjoy. Because your whole life changes and your
whole focus has to change and maybe that contributed towards, well definitely
contributed towards your whole state. And I didn’t mind if my house was clean
or dirty as opposed to then trying to keep everything spotless and clean.

DB: What did you do before then?

CS: I was in recruitment. I’ve been in recruitment for years and years. I opened
my own company and then we moved to the UK when I was pregnant. And
then S was born and suddenly you’re in this whole routine. You can’t get
another job because this is what it’s going to pay you to find someone to look
after your child and your whole salary is going to go because you’re starting
off again. So it’s not like you’re going in at a senior position so you stay home
and you have to deal with that whole situation. And I was very lucky because
I got friendly with older mothers and they were going through what I had gone
through. So it helps, it does help. Because it’s a whole identity crisis and
their bodies changed. I don’t think any of us have perfect bodies anymore
(laughs) so it was ok with it there was a familiarity with that. And the
conversation never really revolved around bodies. It revolved around this
whole identity change. When we first moved there and S was 6 months old, I
met a friend of mine who was South African. She laughed at me at a
shopping mall, I arrived there in a suit (laughs) pushing a baby. That was the
part of identity I had left behind and I had to deal with the fact that it was no
longer you know ... you understand what I’m saying. I’ve given that suit away
now because I don’t think it can go over my one thigh but then that was life,
that was what it was.

DB: And that’s how you felt you needed to appear?

CS: Ja, that was what I was missing and that was what I needed that day. So it’s
very much changing identities and the body having changed with this whole
process. That’s maybe why it took so long. I only went back to work there
just before we came back to South Africa. I went back into recruitment. It
took me a while to get a job because of my age and apparently because when
you’re a mother you lose your brain.
DB: That was the perception of the employers or your perception?
CS: Theirs, of the employers.
DB: Then how old were you, you say ‘because of your age’?
CS: I’ll try work it out. I was already, I must have been 44. That’s because of their perception. Once I was in the job, of course the perceptions were different. What was interesting was that in the job, my weight dropped. It was like regaining that old identity as a career woman.
DB: The whole idea of bodies and how we feel about ourselves, and as you say, confidence, that might change because if I think about comfort eating for example…
CS: It’s not even comfort eating. You don’t have time when you’re working and you’re busy and you’re productive and you are doing. And you actually don’t have the time. I mean it doesn’t enter my head. I mean there are women there who work there, or here, or wherever in the world who get fat because they work and they eat at the same time. I don’t.
DB: I’m just thinking of what I said and looking at my own perception like I talked about comfort eating. You’re talking about bodies changing naturally as you get older and it doesn’t even have to do necessarily with eating more. It just has to do with whatever – hormonal changes, body changes etc. I’m immediately saying eating more (CS: ja), that’s what I’m thinking (CS: ja) and I’ve just realised what I said.
CS: But there are women in the workplace who can eat all day. There are some women who do and some women who don’t. It’s just a different approach. But for me, ja, the weight came down again, but the body was not the same body anyway. It was gone.
DB: I want to ask you something, by way of background, and maybe it will fit in here
CS: Ja
DB: How long have you been married?
CS: This time?
DB: I didn’t know you’d been married before. Not so much marriage, but how long have you been together.
CS: This time 9 years. I married late. The first time I married I was 27 going on 28. I was 30 when I asked for the divorce and 31 when the divorce came through. We still are very friendly. It was ... we took the good and discarded the bad and we still are very good friends. He lives in LA still. We were living there in LA and then I came back here and for a few years I had a very deep and intense relationship with someone a lot older than I was and then that ended and then over a year later I met Mark. I fell pregnant before we got married because I was already 38 and you know you’re told your body is going to take a few years to fall pregnant, it didn’t, it took 2 weeks from the time of trying. And that was the situation from someone much older than I was to someone younger.
DB: How much younger?
CS: Three and a half years. From someone who was 16 years older than me, but do you understand what I mean? And yes my body changed with the marriage maybe because of the ageing thing as well. Whether it would have affected the body change, I think the life experiences and age sort of naturally came at that time. Just thinking in terms of my friends in the UK who are the same age as me, we’ve all had babies late, and given up careers late and the bodies went so it could be a whole big identity change? Or maybe our bodies just changed because as a mother you’ve got to be larger, I don’t know. (Long pause). Well, it could be that. As a mother there’s one way of mothering and when you’re back into the career world you are looking another way …but it takes you a while because you don’t know where you are. Yes
you know you’re a mother and you’re doing your mothering but maybe your
body needs to know that you’ve got to be a different shape to do it.

DB: You know it’s very difficult because I don’t want to ask you any leading
questions I want you to just carry on because things just come out when
you’re talking.

CS: No, you can, just ask

DB: I was thinking about whether you’ve ever felt that being married to a slightly
younger man you have any idea of how …

CS: Yes, I do mother him.

DB: Oh, I wasn’t even thinking about mothering, I was thinking about whether you
felt somehow that you should look a certain way because of his being slightly
younger?

CS: No. Your body goes that way without your even going that route.

DB: No, I mean whether psychologically it causes …

CS: No, no, not at all. But I do mother him, I try very hard not to. Whereas you
don’t mother someone who is older than you. And I certainly don’t feel the
need to look younger for him. Maybe also because I don’t look my age so
maybe that’s got something to do with it.

DB: In saying that you don’t look your age, do you feel as though you look
younger?

CS: I just feel like I’m me, do you understand what I’m saying?

DB: I do understand what you’re saying.

CS: My body may look 47, do you understand what I’m saying, but when you look
at me you don’t see someone who looks 47.

DB: OK. And that sounds as though there is an outward and an inward feeling that
you’re talking about.

CS: But that’s the whole thing. The inward feeling is important to you as a person.

DB: So what you’re saying is that the inward doesn’t correspond to 47, your kind
of “essence”. I don’t know, does it have an age? Does it feel ageless?

CS: It doesn’t have an age. That doesn’t.

DB: Does it feel the same as its always been?

CS: No, its got more wisdom. From life, as such, you’ve got more wisdom and
your view to life changes but you essentially do feel ageless. Well that’s me.
I feel ageless. So yes, there are more wrinkles. Maybe that’s part of your
ageing but I don’t think that affects you inside. So maybe it’s about marrying
the two to realise I am ageless anyway no matter what the body does.

DB: Obviously this is about you which is why I am trying not to talk too much, but it
never works! A lot of this comes out with women that there’s the outward
physical signs of ageing and there’s the inner feeling and I think that’s
something that everyone deals with or battles with or goes through. There
seem to be two very different components. It is not just the one or the other.

CS: For the first time in many years I am comfortable enough that I am running
around without a bra. But it took a long time to get here. You understand
what I mean? (laughs) You’ve got the droop, you can put the pencil under
the bust.

DB: So that sounds like confidence again as well.

CS: That’s it. Who cares as opposed to beforehand I could do it. Now, who
cares? I’m more comfortable and this is life. From that point of view, that’s
where I’ve gone back to where I felt when I was younger.

DB: So there was a time in between, like a process (CS: yes), a time of difficulty, a
of acceptance of this body, learning to live with it and now it doesn’t seem that
there’s just an acceptance but like an embracing. This is kind of welcome
now.

CS: Yes.
DB: I wonder whether ... If I speak to women who are turning 40, there's a lot of fear. I wonder whether ... I don't want to generalise but there seems to be more anxiety about it and it is almost like a milestone and a time in your life and then you get to a stage ...

CS: Ja, the wrinkles come in and you can see that you've got more wrinkles and that's a big thing in ageing, you look at your body and it changes. And suddenly from 40 I've got this grey hair. But who cares? It's there, it's me, it's part of me. If I choose to dye it, I'll dye it. If I choose to run around with grey hair for months, it's also ok. It's part of me. And that whole acceptance which maybe other women won't have ... maybe it is marrying the outward with the inward and being comfortable with it all. And you take a while perhaps to get ... I'm still not comfortable enough to wear a swimsuit, the body's changed that much.

DB: What would make you more comfortable?

CS: I don't know. But there I haven't come to terms with it. Even before when it was a younger body, I wasn't that comfortable so I've always had a big tummy. From that point of view I don't know if that has changed that much. But I'm comfortable enough to walk around without clothes on so maybe I'm going back to where I was. So I flop here and I flop there but it's ok. It's back to that me which is very much the old me.

DB: I'm fascinated by the fact that the first thing we think about with ageing is the way we look, for women, and weight, (CS: yes) weight which is always an issue, I think, for most women. Again, I'm generalising, but whether you're too thin or you're too fat or you'd like to lose a few kilos or put on a few kilos, it feels as though it is always there for women. And it somehow is so tied in for you with what you're saying. There's much more about the body and the size of the body, for example, than wrinkles. You're not saying to me, I hate the lines around my eyes.

CS: No, the lines come and when the lines come I think I accepted the lines and I accepted the grey hair easier than I accepted the body. It was a problem for me in a way. Maybe the body was ... I don't know, maybe the body was linked to the career but that kind of thing where the body went after, if you understand what I mean, that the body went after the career? I don't know ...

DB: In some ways what we're talking about is identity. A lot of this is about identity.

CS: It is. I think it is identity and I think that is what changes.

DB: So that sounds as though the identity goes along with ageing and the identity changes with things like having babies, becoming a mother, leaving the work place, (CS: it does), going back into the work place and that it is so linked.

CS: Maybe the body reflects where you are at as well, for me, reflects where I am at. (Long pause). That was a big turning point for me. I'm trying to think what else. I got tested for Menopause. It came out that I'm not.

DB: You tested because you were worried or?

CS: My periods had changed. But I also traced it back to my body coming out of the miscarriage, my periods had changed. So I don't know if it was the stress all related to that ... no go get tested, go get tested. So I got tested and my insides are young! (laughs)

DB: As are your outsides!

CS: You understand what I'm saying the insides are younger than I look. Because the first thing I got told was that you've got the insides of a whatever year old. And the blood tests and all the tests came back saying I had. So to me that wasn't an issue. But maybe with a lot of women maybe if they are going through pre-menopause ... so I don't know, maybe the body goes with the pre-menopause. They've got another word for it now, but maybe it's all part of that. And maybe for me because I had accepted it, it was ok. So very
much the body is what the outside world can see as opposed to the inside
which is still young and ageless...the womb and the mind (inaudible). My
periods are still strange. I used to be able to... I never had period pain, I
never had the backache and the stomach-ache, I never had anything. But
from the time that I had that miscarriage I can get terrible migraines the first
two days which I never had before. My body came back I used to get pains
... Growing up people used to get all these pains and I never knew them. I
used to just flow in and out and have a 2-3 day period and gone. And I knew
instinctively when my period was coming. I never ever had to worry and I
never had floods. And maybe with the miscarriage there was something in
me... some limitations. Now I still get... the headaches aren't as bad, some
months I won't get and the flow is getting better. Before I'd have for one or
two days, for years after the miscarriage, it would stop for two or three days
and the period would come back. (Pause) It's all interconnected with your
view of who you are with the limitations of being a woman. Maybe from this
whole rejection thing with the miscarriage I looked at it that I can't carry the
baby through... You know that whole rejection, the pain, the headaches.
The body grew and the pains came and the periods were disrupted. So
maybe it was all part of that limitation whereas beforehand everything used to
flow normally. I'd get a period every 28 days, very, very regular and very
instinctively... Then it was four and a half weeks and only now, as I'm
accepting everything, is the rhythm coming back... (inaudible) an important
thing with women. I'm just thinking even with these younger women who
have problems with periods and problems conceiving...

DB: It sounds like a whole sync thing almost (CS: ja) like you're so in sync that
what you're talking about now...

CS: ... we break our trust in what we are as a woman. So it's a trust in the fact
that we are even that goddess and when that comes back we get ourselves in
sync (inaudible). So if you speak to younger women, from the point of view of
fertility, they may not see their body as being an instrument of motherhood
...because it's a sexual thing as opposed to a nurturing thing. That's part of
the whole thing of going from a more sexual image to a mothering image and
narrowing that off.

DB: If you think about Menopause and if you think about that as another stage, I
don't want to say as the next stage, but another stage, how do you feel about
that?

CS: It's ok. I'm ok with that. But thinking back to something else because you'll
be interviewing someone my mother's age, from the time my mother and her
friends were about 44, Menopause was in full tilt and it was this patch and this
medicine and all that and hysterectomies. Remember that stage when the
doctors just went in... the knife, the knife, the knife? And somewhere along
the line it obviously limited their perceptions of themselves as women

DB: So in some ways you are saying you are able to make more sense of it now?

CS: I'm saying I have more acceptance of myself as a woman than my mother did
then. But then my mother and I are very different people. My mother is
naturally thin, naturally beautifully turned out. She hasn't got this acceptance
that I have and she actually has less grey hairs than I do.

DB: Bugger!

CS: Not bugger! I've never known her natural colour hair because she's been
dyeing and it's been a different approach to being a woman. Apparently she
started dyeing her hair when she was 16 or something stupid. So it's a
different acceptance of ageing.

DB: It is interesting that you bring up your mother because I'm wondering whether
how she was about her own ageing whether you feel any of that influenced
you?
CS: No, we're very different. I came back to this country with a pile of grey hairs and the first thing she did was make an appointment for me to go to the hairdresser. And I wrote to a friend of mine in England about it (laughs) and she wrote, “well you know you and your mother are different!” Maybe because of the country I lived in and the way the women are there, it wasn’t an issue or maybe it’s never been an issue to me so I maybe if I was in a busy place I’d have to deal with it. If my hair is dyed that’s fine, if it’s not that’s also fine, it’s not a reflection of me. If I go out without makeup it’s ok. If I go out with makeup, it’s ok. If I don’t have time to put makeup on it’s also ok. If my nails aren’t polished it doesn’t make me less of a woman.

DB: Do you think at any stage that it would have been more of an issue for you?

CS: When I was working, once a week I had a manicure. I had a different approach. I had a facial once a month. I loved it. The facials were for me. For me it was bliss, it wasn’t to go out ... You understand?

DB: Yes, it was for yourself and about how you feel about yourself, not for anybody else?

CS: It’s not for anybody else. I never blow dry my hair. I go out with wet hair and I always have. My hair gets blow-dried when I go to the hairdresser. So we’ve had very different approaches to the hairdos, the makeup. She goes out looking very well-groomed. But that’s maybe her view of how she should look, she as a woman.

DB: Maybe for her it’s also about what society expects?

CS: Maybe for her, what society expects of her whereas I don’t give a damn what society expects. It’s the conforming versus the non-conforming. That’s her identity. So maybe it’s about acceptance of willing your body to go one way, I don’t know, or an acceptance that you can age as opposed to when you age this what happens, and this is what you have to do to prevent it? And somewhere along the line you stop enjoying life, you’re so busy preventing it. No, so I’m not scared of ageing.

DB: When we talked about, you mentioned ageing, I am very interested in that. If you look at your life now, I’m not sure whether this has to do so much with wisdom or with satisfaction. Is there a time that you can say that you felt the most satisfied or happy, or is there a bad time?

CS: It’s different levels depending on your priorities at that point in time. Having S is a highlight for me now and that whole becoming a mother from the point of view of unconditional love because I think that’s one thing that motherhood teaches you. Being a mother should teach you total unconditional love and it’s something you carry through. If you experience it, some people obviously don’t. But for me that was a highlight. From a professional point of view, having my own business and knowing I was good at it. From the point of view that I never had to pick up the phone to look for business. People phoned me up and said, “please come and see me let’s start up, this and this.” That for me was a satisfaction. So job-wise, that giving of self that does it. From the point of view that when I went in England back to work as an older woman and when I left to come back here, I stood there and it was, “please don’t leave, if you change your mind you’ve got a job and if you come back this to country, you’ve got a job.” So maybe those are highlights. The ability to go out and open the doors and do it. But it is very different on a professional level than it is to being a mother. Because being a mother is about total, unconditional love, total allowing the child to do it. For me the whole thrust is in honouring her, honouring what she has to do, and honouring her path, as opposed to you must put your hair like this, you must do this, you must do that. For me it is the honouring, as opposed to the superficial. Maybe that’s coming from age and from the wisdom to be what my child needs as opposed to this is what I need.
As opposed to this is what I want her to be because that is my need?

Yes because that is my need. I don’t have any need for her to go out looking like a doll. I have a need for her to go out happy with how she is at that point in time. I don’t have a need for her to be a concert pianist at the age of 3 … you understand what I’m saying? Because she must be where she must be and deal with the experiences. Then again, that’s a whole different story because that’s not body, that’s back to my upbringing. My big thing and what I pray all the time is to be the best mother I can so that she grows up with the best self-esteem she can because my own mother knocked mine all time. That’s why body is a totally different life experience.

But it’s also part of it. I’m very interested in what you’re saying because this is not just about body (CS: yes), it is about … I think the whole thing about ageing is within a context (CS: yes) and the context that it is within, is within our lives and our life experiences. So when you talk about self-esteem I am really interested in what you’re saying.

CS: Your self esteem is something that comes in, it should be naturally there (inaudible) …that’s one of the things that uCSets me about that school. Sometimes from the point of view of the other kids and the mothers and the whole materialistic aspect of the school …

That’s how I view ageing. It affected the body for me but it didn’t affect the mind. Maybe if I am 80 years I’d go, “what, what did you say two minutes before?” (laughs). But it hasn’t affected me and I don’t believe you have to go that way. You don’t have to go the way of Alzheimer’s, retirement homes, You can stay with yourself and enjoy. (Long pause). Maybe if you can carry that view and that happens to you in the future, you will enjoy your life. You will go out and do things you want.

But that’s how I view ageing. It affected the body for me but it didn’t affect the mind. Maybe if I am 80 years I’d go, “what, what did you say two minutes before?” (laughs). But it hasn’t affected me and I don’t believe you have to go that way. You don’t have to go the way of Alzheimer’s, retirement homes, You can stay with yourself and enjoy. (Long pause). Maybe if you can carry that view and that happens to you in the future, you will enjoy your life. You will go out and do things you want.
somewhere, no one will see me looking like this, no one will see me looking like that. I think that’s what stopped her. So I think it’s very much your mind dictating ... she wasn’t reading, she wasn’t going to the library, she wasn’t working and she wasn’t going outside because she was in a wheelchair. I’ve stopped the whole academic thing at the moment … (At this stage, I stop recording for a while during which time CS tells me some very personal information about her marital situation at present, we resume taping when it becomes comfortable for her).

CS: One thing that did affect me, as a woman, with this whole ageing thing is your sex life does change. With your body changing and having to marry the mind and body with that acceptance of your body. Not only your sex life but sex drive, well mine changed. I didn’t even know if it was mothering that changed it.

DB: Because all of that changes how we feel about ourselves as women?

CS: Everything changes how you feel about yourself as a woman. I breastfed for 17 months. You know suddenly your breasts are not there for pleasure they are there for feeding. And not only are they there for feeding, they are an instrument for bonding with your child. You know that feeling, you understand that.

DB: Sure and it’s quite hard to be both.

CS: So I think it all happened for me at about the same time. The body change maybe, the mothering because of my age maybe. And it’s only in marrying this total acceptance that your sex life and sex drive has come back. This enjoyment of sex as being wonderful, amazing, long … you understand what I mean? But I also worked out that it’s also part of the whole marriage thing where we’re brought up to work at marriage, not enjoy marriage. But with joining the mind and the body and that whole acceptance suddenly that enjoyment comes back.

DB: Do you think it was a case of like in a way not accepting your body, maybe feeling less attractive (CS: yes) and then once a woman feels less attractive you don’t even want to have sex

CS: You don’t want that sexual bond

DB: You can’t be relaxed about anything ...

CS: You’re not because you’re worried about everything. Because I’m this, I’m this, I’m flopping, I’m not as supple, I’m not as ... That’s the one thing about gym that kept me going yesterday was for my sex life, which a few years ago was not an issue. It was wonderful, I enjoyed it and was loved, and it was great. Then as your body image shifts, it’s too cold, it’s too, you know all these excuses? Not a headache, that never happened (laughs) but it’s cold or the child’s crying. But you understand what I’m saying? You actually don’t concentrate on yourself you’re listening for something else. It’s not special. It’s not a time for making love and it’s not a time for orgasms and orgasms and orgasms, just the way it was before. And I think until you marry them both you don’t have any chance.

DB: So what you’re really saying is it’s the CSychological with the physical. Because it wasn’t that your body changed to an extent that your response was anything different.

CS: You didn’t allow the response

DB: Because of what was happening in your mind …?

CS: Yes

DB: Related to how you were feeling about yourself through the body changes and getting older. And it sounds like now, on the other side of that, you can enjoy yourself again?

CS: Yes. As soon as you accept that whole body issue. So who cares if I flop all over? Who cares, It doesn’t matter. Again but it’s that whole society image
thing that to be sexual, remember we discussed it beforehand, you've got to
be a certain image.
DB: Young and thin and fertile.
CS: I don't think fertile. Young, thin, attractive, and that does affect maybe your
response. And again, it's the whole thing of marrying where I'm at as an older
woman with the mind and the body and the desires and all that. And, maybe
that's what it was, that the mind or the emotions had to understand that it
didn't really matter if the body flopped, you could still go out there and enjoy.
DB: In some ways it sounds almost like what we were talking about before. The
inside stays the same ...
CS: It does, but the perception of the outside is different and because the
perception of the outside is different, you have to come to terms, well I had to
come to terms with it. And from that point of view, can I use the word
'allowed' myself what I would have allowed myself with a younger, more
attractive body. So, ja.
DB: What you're saying is unbelievable and...
CS: Linked to that whole perception of body and ageing isn't it? Because when
you get older you're not supposed to and you fall into this flipping trap where
you don't have to.
DB: I almost feel like, I feel like we are also affected. I don't want to lead you, but I
wonder do you ever think that we are affected also by what we read and what
we see, things in the media, almost telling you that you should be scared of
getting older?
CS: Not only that, it's things we feel growing up. A friend of mine had her
youngest when her daughter was 15 and this child went through a revolt that
'my parents are still having sex!' She is now 25. Ja, we were 21 when H was
born. But you understand that whole perception not only of society, but that
we give off that you don't do that. At this age you're getting ready to be a
grandparent and you don't do this. And it's this whole thing of who cares? It's
me and it's my body. I've still got the same emotions and desires. So if I do,
why am I not honouring them? Why am I buying into the fact that I have to
have this really great body in order to enjoy it?
DB: From what you're saying, it sounds like it's about questioning 'why am I
buying into it?' because you don't have to. You don't have to buy what's out
there.
CS: Not only do you not have to buy what's out there, but it's your own reality.
Your body doesn't have to buy into that reality ... it's your emotions, your
mind, which is part of your concept and your identity so you can keep it.
You've got to reinvent your identity so that it serves you best and you can still
enjoy life as opposed to becoming this old lady with grey hair and pink
liCStick. You know what I mean, you understand what I'm saying? Even if
you are this old lady with grey hair and pink liCStick you can still go out and
enjoy your life, you don't have to be limited in what you can do. And that was
also part of it. And I think last year was very much the year of that.
DB: Did anything happen last year? You keep mentioning last year?
CS: Last year for me was the point where everything changed.
DB: Did something specific happen, that you can think of, that led to that change?
CS: I don't know. Maybe you need a certain amount of time, or to go through
certain experiences for it to gel. And you've got to come to this acceptance of
I am still a woman.
DB: Do you think this might have had anything to do with what was happening last
year? With the idea of your husband leaving to go overseas for work?
CS: No. I think it is something that's got to come from within. I don't think it
happened from without. I think it was something from within, going within,
working certain things out on different levels. Going back into a career,
retraining for a career. Maybe just around introspection and going in and
working it all out on that level. For some people, it takes some of us longer to
do and some of us never have to go through it. I just think it was a whole big
new identity change and stuff I’d gone through with returning to this country
and checking things out and maybe relaxing a bit. Maybe it was a bit of a
breathing space that I could concentrate on and take that time to look in, be
with me as opposed to constantly doing. This is interesting. From a
numerological point of view 47 … 4 and 7 is 11, which is a 2, which is sort of a
together number. It is a totally different experience, or if you go to the 11 you
go very deeply. It is about accomplishing your own contribution. I am not
talking about going out there and earning a million rand, it is about reinventing
your identity.

DB: I am wondering whether we should stop. It feels as though we have come to
a natural stopping point. Unless there is something which you feel which you
would like to add?

CS: No. Then it gives you time to go over it.

DB: I’ll transcribe this. If you don’t mind, if I need a little more would it be ok to
meet again?

CS: Yes. If you don’t mind could I have a copy of the transcript, because what’s
coming out, I can use for my Coaching?

DB: With pleasure, I’m happy to let you have a copy. Thank you very much for
your time.