Aging as a Developmental Perspective

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Abstract

This qualitative research study compares a small sample of University students 50 and older with seniors at a community senior center. Their perspectives of aging are shown to be affected by societal views on aging and cultural values. Though aging was not feared by most participants, their concern about physical limitations, slowing down, and being less productive was noticeable. Body image was a reminder of these changes and the younger respondents, ages 50-59, were more concerned about these things than those 60 and older. The author relates these concerns to current societal values that are desired in individuals such as independence, productivity and remaining active.

Key Words: Aging identity, Cultural norms, Perceptions of aging, aging satisfaction, Core selves

Introduction

Is there such a thing as an identity based on age? We have other kinds of identities based on gender, ethnicity, class and religion but the only thing that comes to mind about age are the classifications that society gives us such as young/old, child/adolescent/adult/elderly. One can check off such a category but this may not reflect chronological age as Rozario and Derienzis (2009) found among a sample of senior citizens who were 65 and over. Some of these individuals said they would consider themselves old, others said they were young and the largest group of respondents were ambivalent about their age identity. Perhaps it might make more sense to think of aging as a way of defining one’s self based on roles or the loss of roles. Yet these roles can change as one goes from parent to grandparent, retired to part-time worker, married to widowed or widowed to partnered, and changes within family roles do not necessarily affect age identity according to Schafer and Shippee (2010).

Maybe it is less important to wonder who we become when we are old than to answer the question, “How do we know we are aging and when does this start?” Our chronological age may not matter as much as the experience of reaching milestones which could be “sweet sixteen,” twenty one or “the big 50.” Once a person passes the milestone, he or she adapts and continues with life until the next aging milestone. Because we are not consciously aware of aging every moment, every week or even every year, this study proposes that terminology such as “positive aging” or “aging satisfaction” does not really define the aging continuum related to one’s identity since “positive/negative,” satisfied/dissatisfied” concepts are temporary and subject to change. For example, when the author had seven health problems in one year, she experienced negative aging. However, the following year, they cleared up so she had aging satisfaction. By looking at age through the debate of identity, this provokes an understanding of aging as a process rather than a state, a structuring principle that operates throughout the life course (Twigg and Martin (2015).

What we don’t know much about is how aging individuals, themselves, feel about getting old. Phelan and Larson (2002) remarked in their study of “successful aging” that there is no single, uniform, operational definition of “success” that we can adopt, and what is missing from the research are more definitive studies of aging from the individuals’ perspectives.

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These individual perspectives vary from the objective criteria used by researchers to measure “successful aging” (Montross et al. 2006). It is important to acquire this point of view when doing aging studies because older individuals can reflect on deeper experiences that objective measures cannot get at, especially as it represents changing societal and historical conditions.

Aging, according to the author, is a developmental process, so identifying a specific condition of aging such as “successful aging” is limited in meaning and application. Instead, it might be more useful to see how aging perspectives change when people are reaching the milestone of age 60-65 as opposed to going beyond 65 and being in the 70’s and 80’s. Aging can be positive or negative at any age, but the author proposes that it becomes more fearful when individuals are getting early signs (physical and mental) of aging that they may notice and worry about. Family history plays into these fears and individual perspectives. This would mean that the younger aging individuals (60-65) would be more likely to reflect on aging in a serious and careful way than those who are older than 65. Aging would be a new experience for them with unknown possibilities, both positive and negative. Older individuals can have both positive and negative views of aging but one would assume that they have made more of an adaptation to aging so it is less likely to trigger alarm. Lastly, if aging is a developmental process, the author proposes that individuals, both in the younger and older aging groups, would still be grateful for the life that they have regardless of whether their aging experience has been mostly positive or negative.

So this study presents a new view on aging that is not based on objective criteria that can be measured such as the number of physical conditions and chronic diseases that a person has. Nor would it depend on the number of losses that a person has incurred or how active one is. All of these factors can make a person feel oppressed or elated but these are normal emotional states that go along with the conditions of life. Aging, according to the author, is based on societal beliefs about what is valued in normal adults. We don’t want to be like the stereotype of older people: lonely and abandoned, helpless and dependent, ready for the nursing home. Indeed, the language that we use in gerontological literature says it all. How much are we able to perform activities of daily living? How active are we in the community and in social roles so that we don’t feel useless? How able are we to have gero-transcendence over our deplorable aging lives so we don’t feel depressed and old?

Because we don’t want limitations, inactivity and dependence on others, individuals become fearful of the consequences of aging, and well before they reach the age when they are really old. However, this fear can pass when they get older because they adapt to life and they are still the same person though older and more experienced. Do we have to change according to societal values in order to have “successful aging or be a candidate for “healthy aging?” It seems like we really don’t grasp the idea of old age. It makes sense that people would dread losing the things that are highly valued in their society but somehow we attach these things to getting old, even though there are wide variations in these losses with older people. Thus we can get both positive and negative views of aging and they can both exemplify successful aging (Peterson and Martin, 2015). We can also feel we are older when our psychosocial resources decrease which makes chronic health problems and family turbulence seem like they are aging us (Schafer and Shippee, 2010). The way we age, according to Martin and Gillen (2014), is unique to each individual as it results from the intersection of aging processes with influences that relate to one’s particular health and quality of life experiences. Therefore people will evaluate their life in order to measure the quality of later life.

To understand more clearly how older adults are experiencing aging based on their unique perspectives, this paper will use Andrew Miles’ “Identity-Based Model of Culture in Action” as a theoretical framework (2004). According to this theoretical framework, individuals act to maintain their most salient identities or “core selves” using cultural knowledge and skills for self-confirmation. They will also prefer using abilities and skills they currently have rather than learning new competencies, though individuals can be very adaptable. As people move from middle age to old age, the core self should not dramatically change. However, circumstances change and older people realize they cannot do things the same way they used to. New situations can activate less salient identities, according to Miles, that are congruent with one’s core self, and cultural resources are used to verify these identities. Cultural resources would be the knowledge and skills that come with experience and learning, and these resources are put to use to activate and fulfill one’s changing roles and identities. They would be similar to using what Swidler calls a “tool kit” of living (1986). As people get older, they would rely on other skills and knowledge to maintain and adapt to the identity of “older person.” To address these perspectives on aging, the following hypotheses will be used in this paper:
1. Older individuals are more likely to view physical aging in negative ways compared to middle aged individuals.
2. Individuals will appreciate their lives regardless of how they are aging (positively or negatively) and regardless of what age they are.
3. Individuals evaluate their aging based on the current societal and cultural values by which they are influenced, but older individuals are less bound by these values than middle-aged individuals.

**Literature Review**

“Successful aging” has been a major focus of recent studies of aging. It can include physical, functional, cognitive and social health (Rowe and Kahn, 1997), or the subjective experience or process of dealing with both positive and negative aspects of aging as one tries to live a long life (Peterson and Martin, 2015). While it can incorporate a mental state such as life satisfaction together with a biomedical focus such as the avoidance of disease and disability, it should not exclude what older adult’s value in the quality of their life (Glass, 2003). Nor should it exclude how women of color might define successful aging (Baker, Buchanan & others, 2015) since health is only one of the challenges facing older black women whose success in aging may depend on resilience in the face of socioeconomic hardship and racism. While “successful aging” may be a goal, it is subject to change like one’s success in life can change when the conditions of that success (such as high income), get reversed. Other ways of studying aging must be examined especially when focusing on an individual’s aging awareness. For example, perceptions of aging are formed in a cultural context. In independent nations, like the United States, individuals learn to value personal autonomy and uniqueness at an early age from their parents (Markus and Kitayama, 1991). These values would impact aging experiences and probably make these older adults fearful of losing their independence. Whereas in collectivist societies, one will find individuals who value the group over the individual, and who are more likely to follow the customs and norms prescribed by their parents and society (Keller et. al., 2004). When these individuals get older, they may become more communal and traditional in values (Fung, 2013). Perhaps their greatest fear when aging is being abandoned by family members.

Lastly, a historical context for understanding societal beliefs and views about aging is important. We live in a society, the United States, where activity theory seems to be favored over disengagement theory. Cultural beliefs about keeping busy are prevalent in a society that favors individual upward mobility and independence. So when men retire or when older individuals have lower education and fewer assets, they may experience low activity, which may result in worse mental or physical health outcomes over time compared to higher activity groups (Howell, et. al., 2014).

**Methodology**

In spring of 2014, a sample of 36 Calif. State Univ. Dominguez Hills students who were 50 and over completed an online questionnaire that was campus IRB approved. The students represented a variety of majors though leaning more in the direction of nursing and human services and being in master’s programs. There were 26 females and 10 males and 28 students (78%) were between the ages of 50-59 while 8 students (22%) were between the ages of 60-69. Around 41% of the students were Caucasian, 33% were African American and the rest of the students were Latino, 14%, European, 3% and Other, 8%. Half of the students were married, 14% were single, and 22% were divorced. When asked about their health, 42% said it was excellent, and 53% said it was good. Only 2 individuals said their health was poor. Those who said their health was excellent were more likely to be married while those who had good health were about equally spread over the categories of married, single and divorced. Around 39% of the students were working full time, 22% were working part-time, 17% were retired and 22% were not working/not retired. About 42% had low income, 25% had adequate income, 17% had secure/stable income and 14% were comfortable financially. Only one individual was well off. The majority of students were at the university between 1-4 semesters and many of them said they were there for a career change or upward mobility.

A second sample of 21 older adults was included in the study. They filled out by hand a modified version of the online questionnaire. These individuals were older adults at a Long Beach Senior Center about 10 minutes away from the campus of Calif. State University Dominguez Hills which is located in Carson, California. About half of this sample was between 70-90 years of age with 38% in the 70-79 age groups, while 24% were 60-69 and 19% were 50-59. There were almost an equal number of males and females and 67% said they were in good health.
Only 3 individuals said they were in excellent health and 4 individuals said they were in poor health. The ethnic composition was more diverse in this group than in the student sample with 6 African Americans, 1 Asian American, 8 Latinos and 5 Caucasians. There was only 1 married person in this group while 7 were single, 8 were divorced and 5 were widowed. The majority of the sample were retired or not working/not retired with only one person working part-time. Most of these individuals were attending the senior center 2-7 times a week and their main reasons for coming was to have lunch, use the exercise equipment, meet people and use the computers. This sample was much smaller than the student sample because the setting was smaller and several individuals did not want to fill out the questionnaire.

In this qualitative study, the purpose of the questionnaire was to see how individuals perceived their aging and if they were satisfied with the age they were at. Both populations were active, with the students being busy with schoolwork and other obligations while the senior center group was attending the center fairly regularly. Since the questionnaire was designed to elicit subjective but deep perceptions on aging, narrative responses from the open-ended questions were used to evaluate the hypotheses. The samples were very small, but the author considered this limitation overruled by the importance of the topic and the ability to use the data in an exploratory way to find out how individuals identify with aging. Unfortunately, these populations could not be sampled longitudinally to show how their views on aging are truly developmental.

Data Presentation and Analysis

Narrative responses were given to the following questions in the questionnaire: What is your view of aging, what influenced this view, and how positive or negative do you feel about your current age. The responses were much more in-depth from the student sample than the senior center sample and a number of reasons may account for this. For example, online responses can be done more at leisure than when a questionnaire is handed to the person to fill out on the spot even though the student population was very busy with school work and several respondents asked for extensions of the deadline. The students are also a highly educated group who were more likely to study the questions carefully before answering them and they seemed to want to provide more thorough descriptions and explanations for their ideas than the senior center population. The senior center participants, though, were given plenty of time to answer the questions but they were sometimes in social gatherings like when lunch was served or when they were at the computer room. They were also an older population that may not have wanted to spend as much time answering the questions in depth.

In response to the first hypothesis: Older individuals (in their 60’s and older) are more likely to view physical aging in negative ways than middle aged individuals (in their 50’s and early 60’s), the data was supportive of this statement. There were only two respondents out of 36 in the campus sample whose views of aging were negative. One respondent was 53 and she was afraid of poor health conditions associated with aging and seeing other people around her die a painful death. The other student was 65 and her view of aging was that it was a time of loneliness, illness, medication and death because her parents, grandparents, uncles and aunts were all deceased on both sides of her family as well as many ill friends who died. Both of these respondents had family histories where there were illnesses leading to death and they may not have recuperated from these losses. The rest of the student sample viewed aging more positively with only a few individuals seeing it as a neutral experience. Instead of expressing fear about aging, the student group was more likely to express curiosity and wonderment about the aging process and their aging experience. For example, one student who was 63 and female provided the following view of aging: “Aging is inevitable and fascinating. It allows me freedoms of expression because I am aware of what I have been through and realize I have endless potential still. It allows me to change course and provide opportunities for others because I am aware of life’s consequences. It gives depth to experiences.”

Another student, who was 52 and male, put it in the following way: “Aging is a remarkable metaphor of the incongruence of life. The countervailing tendencies of broadening perspectives and deepening a sense of connectedness to all that is on one hand, with the increasing sense of urgency to engage in life in a full and vigorous fashion on the other. These qualities of being in time while running out of time, is a basic antagonism of the aging process which I have not yet bridged.” Even though several of the views could be qualified with other negative comments like a concern about health or a fear of not having enough financial resources while aging, the general optimism shows up frequently like in wanting to take care of one’s self in order to lead an active, healthy life.
The senior center sample, on the other hand, was more likely to view aging negatively with about half of the 21 respondents saying aging has drawbacks and the other half feeling positive or neutral about aging. One respondent’s negative view of aging was that it is no fun getting old because you begin getting health problems that hurt and that takes time to cope with, that cost money and you start having independence restrictions like eyesight, walking and endurance issues. This respondent was 65 and female. Another female respondent who was 76 said the following: “The increase in doctors’ appointments creates a sense of depression as there is little time for other fun stuff.” Although these comments are negative, they are not expressing fear of aging so much as disappointment and distress at having to deal with physical limitations and health problems. Senior center respondents with positive comments were more accepting of limitations and more focused on staying active. For example, the oldest respondent in the sample who was female said the following: “I am 96 and stay involved in many activities. I attend church weekly, do my own housework, walk, exercise, play cards, cook my evening and morning meals—make many friends.” Another respondent who was a 71 year old male put it this way: As someone becomes older, he or she must invest resources (money, time, energy) in maintaining fitness at all levels whenever and wherever possible. In my opinion what you put in determines what you get out of this effort. We do not stay steady. You will adversely decline if you do not work against aging.

Both the student population and the senior center respondents were active in various roles and with things they liked to do. The most important role for the student was being a student with 31 individuals out of 36 mentioning this in their top three roles. The grandmother or grandparent role was mentioned by 15 students and the spouse or mother role had the third highest number of respondents at 13. A fourth role that was selected by 9 individuals was that of caregiver. What students liked most about their student role was acquiring new learning and meeting new people and other students. They also liked the mental challenges and stimulation of being a student. Their favorite groups to spend time with were friends and family. For the senior center population, the most important roles were grandparent and being a manager of one’s health. There were 6 respondents out of 21 who mentioned each of these roles. Another role selected by 4 individuals was that of caregiver. The groups that this population spent the most time with included family and friends and the people they meet in the different activity groups at the senior center. Both groups, students and senior center participants, are involved in primary roles as they interact with other people. These roles, undoubtedly, affect their views on aging such as the caregiver role.

When asked the question, “What influenced your view of aging?” many student respondents mentioned family members, like parents and grandparents, and other older people around them. The following comments reflect these influences. “Mostly because my life so far has been great! Watching older sick people die, talking to older family members influences my view. As does the role model of my incredibly experienced dad who mowed the lawn at 87 and lived fully up to 5 days before he died at 89.” “Look around? Elderly are treated like crap. Unless your body is viable your brain is useless.” “My father loved life and he had a profound influence on me come to think of it, I enjoyed life and he taught me to enjoy the little things because the big things really don’t matter in the end.” “Because I have seen it happens with the people that I loved, my grandparents, neighbors and convalescent homes where they put the elderly people when they don’t have time to spend with them to keep them feeling needed and wanted.”

Other students mentioned things they experienced in their life that affected their view on aging. For example, one student used the quote, “You don’t miss your water till your well runs dry,” in terms of losing the ability to do many physically challenging activities that she can only appreciate in others now. A male student’s view of aging was affected by the following: “Twenty three years ago I was diagnosed with a disease that at the time was killing many people; I finally realized that I still had a lot to live for. With my diagnosis, I know I have some challenges ahead but I plan to do what I can to stay healthy.” A third influence on students’ view of aging was spirituality in one form or another. The following comments are examples of this: “As a child I have always loved being around older adults and spent lots of time with grandparents. As for death, I don’t fear it because I have a strong spiritual background and beliefs. I believe there is life after death in some form.” When I was a child I remember seeing myself in my mind’s eye at 70 or 80 and thinking I seemed very content. I have always been very spiritual minded and curious about “the other side.” I have experienced things in my life that I now look back on and know (at least for me) that there is much more to us than we know. My belief in Jesus Christ and the fact that I know life is eternal. I know that we are His children and he loves me (and you). I believe my spirit is eternal, but my body will one day die. I will live on in the eternities. I can take my intelligence and knowledge with me into the next life.”
The senior center respondents were more likely to say their view of aging was influenced by their life (8 out of 21 individuals) rather than by other things. For example, a 71 year old male said it was “intuitive insight mostly, reading and study and talking to older people about their own experiences.” Another person said “Its life—you go through stages. This is my stage I have to deal with.” Only 2 individuals mentioned a belief in God as influencing their view of aging. In summary, the student population, who was younger than the senior center group, was more positive about aging and optimistic about how aging will unfold than the senior center respondents. Fear and dread of aging was not as obvious in their comments as an awareness of physical changes and an acceptance of these changes. While some individuals may have mixed feeling about aging, they could see the way qualities like maturity and patience can enhance their life. The following comment by a 50 year old male student expresses this well: “I realize we are all going to get old, that is a fact! Looking at my father, uncle and his wife who are well into their 70’s but they do not complain. Many of us have health problems this is a concern for me as well. But, it is a part of life. The best anybody can do is take care of oneself and live your life and be happy. Any day above ground is a good day!”

The following comment from a 51 year old female is stating the same thing about aging but from a more practical standpoint: “It’s inevitable but how it proceeds depends on how I handle it. If I exercise, maintain a healthy weight, do my annual checkups and don’t let stress control my life, I think aging is great. I also like that I don’t have the insecurities of youth. On the flip side, if I don’t take care of my health, in particular my weight, then aging will be depressing and painful on the body which will impact all components of my life.” It is important to keep in mind that many of these students are in majors where they would be knowledgeable about aging and health, i.e. nursing, human services, so they are looking at the way aging has potential and enhanced attributes like wisdom and maturity. In contrast, the older senior center respondents were less into reflecting on the meaning of aging and more into taking care of themselves, i.e. being a manager of their health. They might be more practical than the younger students because they do have limitations that require more medical attention and they have to be realistic about their capabilities. Maybe they don’t have time to be afraid of aging because they are already there. As one 64 year old female stated, “You can complain and waste your age or be happy and live.”

The second hypothesis, Individuals will appreciate their lives regardless of how they are aging (positively or negatively) and regardless of what age they are, was supported by the majority of respondents in both groups. The senior center respondents were slightly more positive about their current age than the student respondents maybe because reaching the older ages was something to be grateful for. For example, the 96 year old female who was mentioned earlier had this to say: “I feel great (about her current age). I just came from my doctor’s office and he agrees I’m amazing!!! For my age.” The 76 year old female whose view of aging was negative because of the many doctors’ appointments that made her feel depressed said she feels positive about her current age because “I’ve lived a very good life filled with great experiences which I reflect on now.” Other senior center respondents just said they feel positive or very positive about their age and one respondent said “Very positive. A good age.” Comments like, “I love growing old wisely” and “I feel positive in my age 83 years young” show appreciation for what one has now after living a long time. A 71 year old male made the following comment about his current age: “I know that there are not that many more years left. What is very important is learning from past mistakes so as to take corrective action whenever and however possible.” This person appears to appreciate having time to change his life for the better.

The student population also appreciated their life at their current age though their comments were more mixed than the senior center respondents. An example of this mixed comment is the following statement from a 52 year old female: “In some ways life is better because of the maturity level and the ability to be self-supporting. The negative end of aging is that it physically shows.” A 56 year old male student made a similar comment: “The negative is my body showing wear and tear, the positive is the wisdom and knowledge that I have gained and the friendships I have made.” Another concern expressed was the following: “I feel mainly positive about being 50, but I am worried about employers—will they hire a career stay at home mom at this age? We will see!” A 56 year old female said “My feelings are neutral. I work very hard and have another 15 years or so until I retire. I mainly worry about maintaining my health and activity level to support my work, keep up with an active family, and keep up with activities.” Other students really appreciated their current life and age because of earlier experiences and what they have seen around them. One student, a 50 year old male said, “I have no regrets because many of my friends did not have the chance to get this old. Therefore I feel great and hope to live longer. In short I rejoice in the life I live.”
A female student said she is positively grateful for her 55 years of life. “There is no other way to look at my life but as being a positive experience. I love my life. I appreciate the negative times in my life because those times helped to define what these positive times are. Without them both there would be no balance.”

Another student who was 52 and female was only bothered by her age when she thinks about what she hasn’t done in her life. “I have (a) positive perspective and feel grateful that my past life choices didn’t kill me and I have a chance to be part of my grandchild’s life and maybe become a great grandma someday.” In some cases, the appreciation of being older is because earlier years were more difficult and trying. Several student respondents said they were happier now than before like the following 55 year old female: “I don’t feel 55. I am still somewhere in age between 5 and 55. I am happier now than I have been for most of my life. I work on observing what is in front of me and knowing I will figure it out if I need to.” Another female who was 50 made the following comment: “I love my current age, I would not go back and redo my twenties or thirties for all the tea in China, they were the hard learning years. Don’t get me wrong I loved raising my children every minute of it, I am talking on a very personal level here. Fifty really is fabulous, I feel great, look half way decent, and I am just enjoying the ride. Grandparenthood is the best experience ever!! Lastly, a 51 year old female is appreciative of what she has accomplished at her age. “I feel more positive than ever. I believe my personal experience is essential to my job, career, family, community, and society. I feel very valuable in terms of professional career, family role model, and responsible citizen.” This reflects the higher value placed on older people when they have more economic resources which is related to health, education, income and living in an urban and developed country (Vauclair, et. al., 2014).

The question on the survey used in evaluating Hypothesis 2 was the following: In terms of your current age, how positive or negative do you feel about this age? This was a very open-ended question designed to not lead respondents into thinking what they should be grateful for in their life. As expected, respondents gave a wide variety of answers, and the students made more in-depth comments to this question than the senior center respondents. The age they are at does make a difference in how they appreciate their life. For the younger student population who are still busy with career and family, their appreciation of life is still fraught with worries about succeeding at work and attending to all the daily routines of an active life. In some cases, they are concerned about being able to make it to retirement before the body breaks down. The senior center respondents, on the other hand, appreciate life despite their limitations because they have made it through to retirement and are past the life stage of needing to succeed at work and family. This is consistent with data showing that people are happiest at the beginning and end of life (Blanch flower and Oswald, 2008). Life is precious no matter what age you are though you see the world differently depending on your age. Both populations don’t worry about things that they used to worry about when younger, so in many ways aging is an improvement from their earlier years.

The third hypothesis, “Individuals will evaluate their aging based on the current societal and cultural values by which they are influenced, but older individuals are less bound by these values than middle aged individuals’” was evaluated by respondents’ view on aging and what influenced this view and, to a lesser degree, how they felt about their current age. As mentioned earlier, Americans believe in staying active and productive which means they need to take care of themselves and stay healthy so they won’t be dependent on others. Physical activity is important as well as maintaining a more youthful appearance. However, it is not just looking young that is important, but being able to function in a youthful/healthy way. If you can keep up with younger people productively, i.e. have a sharp mind, quick physical movements, then you are highly valued in American society. This requires maintaining a certain body image that is part of a cultural belief package that relates to what individuals would dread losing in terms of aging. These cultural beliefs perpetuate ageist stereotypes and make it difficult for older individuals to be neutral about their aging perspectives (Apple white, 2015). This would go along with how positive or negative they would feel about their aging experience.

There was support for this hypothesis and it was mainly coming from the younger student population rather than the senior center respondents who are older. When one is first becoming old, relative to an older population, the negative stereotypes of old age may be haunting the imaginations of individuals and these stereotypes are culturally specific. This was reflected in the following comment by a 62 year old female student: “When I’m not feeling well and look in the mirror, aging scares me. Aging is noticing how my husband’s physically changing before my eyes, nagging him to stand up straighter so he won’t look like an old man when he’s with me who feels young. It frustrates me when I can’t do some physical things as well as I used to.”
Another student who was 53 and female said the following: “I don’t like to age myself, but (its) something I cannot control obviously. I believe the elderly are not valued in this country nor are most taken care of by their children. Given these things, I don’t look forward to possibly losing control of my independence. The thought of ending up in a nursing home for years before I actually die is not something I dream about, so aging is something I don’t like to think about. The thought of taking a bunch of medications, losing autonomy and seeing myself as I now see some of my patients truly scares the hell out of me.”

Several students mentioned that being old in this country is not respected so older people are treated poorly. However, there was little desire to be young again so what the comments reflected were the need to be useful and not a burden to society. This might mean staying in good health as the following comment from a 54 year old female student indicates: “Aging is a number though the random pains that come along are not for weaklings. I make sure to move whenever possible (park away from stores) and remain positive and upbeat. Odd aches and pains come and go but it’s more important to be enjoyable than a curmudgeon.” A 55 year old male student was concerned about his body slowing down as he compared himself to younger people. “Mentally everything still works. I can still do very complex math. I can take on challenging tasks. The problem is this: the younger people seem to do everything so much faster, and it is hard to keep up. Most days this fact doesn’t bother me. Other times, it is demoralizing to realize that maybe you are starting to lose it. Then you become concerned. How am I going to eat, if I can’t compete?” An awareness of outward appearance was evident in some of the answers from students like the following comment: “It is inevitable (aging) ---menopause, wrinkles, and flabby arms. It helps if you are not the type of person who focuses on outward appearances. If you do, then you’ll be in for a troubling adjustment.” Knowing how one will look as one ages, individuals may try to prevent the negative perception of aging from coming true. “Let’s face it the wrinkles can go take a hike, but the body, I do all I can to stay my ideal weight and in the best shape possible.”

For a 53 year old female student, societal views of aging are difficult to ignore as they impact how one is treated. She makes the following statement: “It sucks, (aging) I don’t like it. I have more energy than my 20 year old daughter and more drive than many kids. I keep healthy and I feel I have so much more to do, but aging slows you down. I am about to finish my career and the chances of someone hiring me vs. someone in their 20’s is very low. They see me and they think I just can’t do it. The stereotype, I hate it. Things have changed now. We live longer and look better than our own parents did.” Since aging is a new experience for those who are just appearing to be old, individuals have to use some framework for understanding the aging process as they begin to learn about it in themselves and others. The following comment from a 53 year old female student is such a perspective: “Aging to me means dealing with new challenges. That can be physical like menopause, lower back and joint pain, or mental, like memory loss. Emotionally and spiritually speaking, aging to me means heightened or reduced reactions to perceived tragedies such as suicide or death, and questioning the meaning of suffering, as I have witnessed the deterioration of my elders. Aging is a natural process in this life, and I am learning more about it every day by witnessing the process in others as well as first hand in my own body, mind and spirit.”

The senior center respondents were not as likely as the students to use the American cultural context of aging when discussing their view and experience of aging. They were not concerned with looks and appearances but with health issues and the slowing down of the body. This is consistent with research showing that health issues and loss of functional abilities are more important for older women than physical looks or appearance (Hurd, 2000; Franzoi & Koehler, 1998; Marshall, Lengyel, and Menec, 2014). They mentioned the doctor’s visits, the need to pass things down to the next generation, keeping active and eating healthy, and being careful so you don’t hurt yourself. Maintaining fitness was mentioned earlier by one male but this was in the context of age slowing you down and making you unsteady. A 73 year old female said, “I don’t remember getting older. Some people respect you some people don’t.” These respondents were not worrying about how they will be in the future or how to keep themselves from aging negatively. Perhaps they were doing what Jenkins calls “disrupting aging” where they were embracing their age and feeling good about where they were in life without being defined by outdated expectations of what age groups should do or not do (Jenkins, 2015). The younger student group may be more concerned about aging successfully because they are not there yet. Old age is like a milestone of development where your perspective becomes constant, present oriented and either positive, negative or neutral depending on how you are feeling. Societal stereotypes of aging may affect some individuals still, but they become less relevant as one focuses more on current well being. Being active is valued by both the student group and the senior center respondents, but it is practiced within the limits of one’s physical capacity.
Conclusion

Applying Miles’ “Identity-Based Model of Culture in Action” theoretical framework to aging, core selves do not change as we get older, but shifting identities are coming into awareness as we move from middle age to old age. Older people may not need to focus on beauty standards as a cultural resource for their new identity because they are more concerned about survival skills and knowledge just to stay alive longer, be it exercise, doctor’s visits, eating healthy or staying socially active. Middle aged adults are more likely to use beauty standards and cultural imperatives of productivity because these are the cultural resources most useful to them at their stage in life. Their tools are more likely to be a youthful appearance, being physically fit, having education and using re-training for jobs. These ideas support the hypothesis that middle aged adults are more concerned with cultural views of aging than older adults and that older adults are less bound by societal values of aging than younger people because of changing circumstances. They also support the hypothesis that older individuals are more likely to view physical aging in negative ways than middle-aged individuals because older individuals are experiencing more health concerns that make them focus on survival skills. Since our core selves do not change as we get older and we can balance both negative and positive experiences related to aging, there is support for the hypothesis that individuals will appreciate their lives regardless of how they are aging (positively or negatively) and regardless of what age they are.

To answer the question posed at the beginning of this paper—How do we know we are aging and when does this start? we know it can happen at any age. However, it is more likely to be seriously considered in terms of body image, physical functioning and health concerns in the young old age group that is 50 + than when individuals are over 65. This does not mean that an individual will have an identity based on age nor will they have one when they are older. Perceptions of aging reflect cultural stereotypes and this may result in positive and negative views of aging at any age. If activity and productivity are highly valued in a society, then if there is a decline in these attributes at the individual level, then aging can become worrisome. However, if family role is more highly valued (as in collectivist societies) than activity and productivity, would this make body image less important in a society? Certainly losing family or one’s status in a family could become a higher aging concern. Are we shifting from being just a youth-oriented society in the United States to being one that is youthful-looking so that people will believe we are productive? These are ideas for future studies. Despite these perceptions, there does not seem to be a widespread dampening of one’s sense of self which is related to an appreciation of life no matter how old or disabled one is. This is a testament to the human spirit and the ability to adapt to circumstances no matter what our age is.

From this study, one can make the following points:

1. Aging identity is not a clear formulation nor is it a particularly useful concept in research.
2. Aging is continuous and it develops slowly with only birthdays to mark the number of years we are alive. Body image is more noticeable through physical changes.
3. Physical changes create a body image that makes you look older, but it doesn’t change who you are or how you want to be seen.
4. Cultural norms of what is useful or valuable in a society are stronger indicators of when you regard yourself as old more so than chronological age.

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References


