Age is a social construct that should be analysed as a flexible, contextual category, while old age is subject to coding and interpreting that create different formal and informal concepts of old age. As a micro-social universe, a home for old and infirm persons functions as socio-cultural framework within which, by analysing the experiences of its beneficiaries, we established the existence of four dominant interpretations of old age: fatalist, affirmative, stoical and relativistic. This work is focused on the authentic voices of old persons and personal experiences of old age and ageing. Contextuality and variability (of the feeling) of age, articulated by those experiences, show that perceptions of old age and feeling of getting old decisively depend on a personal vision and interpretation of the experience, that need not be compatible with the actual chronological age.

Keywords: ageing, qualitative research, subjective experience, chronological age, subjective age

Introduction

Ageing is a universal human experience, “something that happens to all of us” (Morgan, Kunkel and Atchley 2001: 3). However, as opposed to other life periods, old age is a phase of life that is often treated as undesirable, unpleasant and “unacceptable”. In that sense, reflexion of old age most often develops around the motive of “the decline and loss of all human qualities” and the lack of joy of life, which even Mimnermus of Smyrna mentioned in his writings (Baars 2010: 106). This still surviving ancient hummus makes good ground for the development of anti-age characteristics of the late modern consumer culture that considers ageing and old age (as a phase of life) and getting old (as a process) are in that way saturated with numerous taboos, fears, prejudices and stereotypes. The same mechanism of stereotyping and generalising can be observed in perceptions of older persons. Frida Kerner Furman points out that people very early internalise cultural stereotypes that youth is strenght and old age a kind of a “dirty little secret”, that has to be avoided and/or outsmarted in a way (Kerner Furman 1997: 116). Haim Hazan warns that the information we get about older persons are very often ambivalent, thus providing for strong tendency to generalizing and stereotyping (Hazan 2005a: 15). It is possible to say “that people have multiple, often contradictory views of older persons” (Nelson 2004: x), so that older persons are considered, on one hand, conservative, inflexible, uncreative, inert,
asexual, infirm, depending and senile, and, on the other hand, wise (Hazan 2005a: 15–17; Kerner Furman 1997: 94).

Although the majority of the European societies face an increase of older population, it seems that we do not provide answers to some crucial questions in relation to ageing and old age, especially to the perception and interpretation of ageing and old age by the older persons themselves. This problem, that also represents a unique inspirational scientific research challenge, was articulated perfectly by Sharon Kaufman when she wrote in the first chapter of the book *The Ageless Self: Sources of Meaning in Late Life* (1986) the following:

> The process of growing old has been scrutinized by social scientists for the past 40 years and described by novelists, poets, and playwrights for at least several hundred years before that. Yet not much has been written about aging by the elderly themselves, those who know the most about it. (Kaufman 1986: 3)

Inspired by the fact that experiences and everyday lives of older persons are insufficiently visible or even completely invisible in Croatian academic community and thanks to donation of the Adris Foundation (Zaklada Adris), the research project “Socio-cultural and gender aspects of ageing in Croatia” was carried out in four homes for older and infirm people in Croatian cities of Zagreb and Split. The main topic of this article can be summarized in the question: What is the old age from the old people’s point of view? This main question can be divided into following questions: How do old people interpret their (personal) ageing? What meanings do they ascribe to it? How do these people cope with their own ageing? Answers to these questions show that old age and aging are complex, “multidirectional and multidimensional” processes, and that it is the matter of a life phase which, exactly like in any other life phase, shows the extreme importance of “a balance between gains and losses in different life domains, such as family, health, and personal development” (Westerhof s. a.: 13).

### Importance of subjective experiences and interpretations – short methodological review

In accordance with the previously mentioned insight by Sharon Kaufman, majority of the authors who theoretically ground their work in a humanist and critical gerontology, often emphasize that in many researches of ageing and old persons exactly the subjective, everyday and moral experiences of older persons stayed invisible and unrecognized (Kerner Furman 1997: 2). Cole and Ray emphasized interpretations of the sociologist Jaber Gubrium who “has criticized the positivist methodology (…) for neglecting subjectivity”, with respect to getting around “the lived experience of aging as expressed in the words, speech, stories, and writings of older people” (Cole and Ray 2010: 9, 10). Gubrium insisted that qualitative approaches are not observed “as a second-class precursor to more ‘powerful’ statistical analysis” (according to Sokolovsky 2009: xxvi). Also, Gubrium and Holstein (2005: 9) suggest that the competition between quantitative and qualitative methods should not be supported because it is the matter of different methods whose adequacy and “primacy” depend on goals and purposes of the research itself. So, for example, “qualitative approach is better at
portraying a world of social processes and emergent meanings”, while “a quantitative approach is more suitable when the subject matter is fixed in meaning and straightforward in variation” (Gubrium and Holstein 2005: 9). Ethnographic and qualitative researches are crucial for the understanding of old age context, and the extent of the importance of this perspective can be seen through the influence on other disciplines such as social work, medicine, sociology, philosophy and psychology, which, in the end, resulted in “multidisciplinary movement sometimes referred to as ‘Qualitative Gerontology’” (Sokolovsky 2009: xxvi). The implications of the qualitative research results on the experiences of ageing and old age from the perspective of the older persons themselves are uniquely important because they question many generalizations, prejudices, stereotypes and taboos related to older persons, ageing and old age. Such researches showed that old age and ageing are complex phenomena, that age identities are fluid and variable, and that the idea of older persons as a homogeneous and unified category is completely wrong. This is due to the fact that old age is a life phase that not only “organically” continues earlier life and social experiences, but also always takes place in a specific social and cultural context. Therefore, the different experiences and meanings of ageing and old age are connected to “race, class, and gender” (Gullelle, according to Cole and Ray 2010: 17) as well as to social, cultural, historical and personal circumstances.

Due to the fact that this research, which was conducted under the framework of the project “Socio-cultural and gender aspects of ageing in Croatia”, was carried out in the homes for older and infirm persons, some researches should be mentioned which, by researching the institutions for nursing and care of the older persons, inspired many researchers by their methodology and results. In this context, the pioneer research by Jaber Gubrium is of special importance. As he mentions himself, in the middle of the 20th century such researches were scarce, and among the influential, the one that stands out is the anthropological research of Jules Henry, described in the book Culture Against Man (1963), in which the attention was drawn to neglect and poor sanitary conditions in the hospital and two nursing homes (according to Gubrium 1997: xiv). There are also the studies by the sociologist Elizabeth Gustafson (1972), who wrote about “the moral career of the nursing home patient”, as well as the article by Charles Stannard (1973) “on the social organization of abuse in the nursing home” (according to Gubrium 1997: xiv). When we talk about the researches of the nursing homes, the famous and influential study by Erving Goffman Asylums: Essays on the Social Situation of Mental Patients and Other Inmates (1961) should be mentioned. Goffman’s concept of the total institution was used in their interpretations by many later researchers of life in nursing homes. The already mentioned Gubrium’s research, described in the book Living and Dying at Murray Manor (originally published in 1975), is a description, analysis and interpretation of everyday life in a nursing home. As the author says himself in the “Preface” of the book, his research “is not a survey of statistics about nursing homes”, but it is the matter of a detailed ethnographic research of social organization of this nursing and care that is provided for the older persons within it (Gubrium 1997: ix). The focus is on personnel, users and those who occasionally take part in the life of the home (family and relatives, doctors and coroners). Gubrium describes social worlds of administrative personnel, care providers and users, their ideals, methods of work, ideas of good treatment, obligations etc. He also analyses the relationship between personnel and users, as well as the way of seeing death and dying from the perspective of both (Gubrium 1997).

An important research and considerable contribution to the understanding of subjective experiences of ageing was given by Rene Somera, who described and analysed life in the home for socially deprived and infirm older persons in the book Bordered Aging: Ethnography
of Daily Life in a Filipino Home for the Aged (1997). His research interest was focused on individual experiences within the institutions, so he gives a detailed description, analysis and interpretations of everyday life in an institutional surrounding, referring to social gerontology, symbolical interactionism and interpretative anthropology. In order to understand deeply everyday life in this Philippine home, it is necessary, says Somera, to hear the (complementary) narratives from the perspective of the employees and the users.

Speaking of deep insights in the issues of age identity and subjective experience of personal age, it is required to especially mention (the already mentioned) research by Sharon Kaufman The Ageless Self: Sources of Meaning in Late Life (1986). The subject of the inspired study is focused on “individual experience” and “the meaning of aging to elderly people themselves, as it emerges in their personal reflections on growing old” (Kaufman 1986: 5). We entirely agree with the conclusion by Kaufman that “the voices of individual old people can tell us much about the experience of being old” (Kaufman 1986: 6).

Methodology

As noted earlier, this article is based on analysis of data collected in research project “Socio-cultural and gender aspects of ageing in Croatia”. Fieldwork was carried out from February till May 2014 in four (public) homes for older and infirm persons – homes Medveščak and Sveta Ana in Zagreb and homes Zenta and Lovret in Split. It should be pointed out that not only the persons older that 65, users of homes, but also the employees and volunteers took part in the research. In this article, we will focus exclusively on the data gathered from the interviews with home users.

The research is primarily based on qualitative methodology (participant observation, interviews, focus groups, analysis of personal materials of older persons) and research procedure was developed in several phases. Using the method of observation with participation and establishing of initial contacts with users of homes, a questionnaire was used with 115 users. It is also important to mention that each home is a micro-universe, so during fieldwork it was necessary to adjust to the situation and ways a particular home functions. Concerning this fact, a very important factor was a relationship/attitude of employees (particularly between a manager and social workers, according to the research), and their advices and informations that were important for the successful realisation of the research were usually respected. Certainly, the most important was the perception of the importance of this theme from the aspect of the users themselves as well as their decision to participate in the research.

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1 Homes for older and infirm persons are institutions which give integral care – living, i.e. permanent accommodation and food, “maintaining personal hygiene, caring about health, attendance, working activities and using of free time” (Galić, Vrbić and Nimić 2013: 37). Two homes in which the research was carried out also offer services of all-day sojourn, and three homes offer services of care and attendance at home. In three homes (Medveščak, Sveta Ana, Zenta) in which the research was carried out, accommodation of the users is organized in the residential part (in single or double bedrooms) and in the special care ward (“geriatrics” or “in-patient clinic”) for (bed-ridden, ambulatory with difficulties) persons with specific needs in maintaining personal hygiene, i.e. persons who are in permanent medical attendance and care due to their state of health. For many users, this ward represents the last stop of their life that provokes fear and anxiety in them. The lower age limit for admittance of users to the residential part is 65 years old, while for the infir persons to special care ward there are no limitations. Due to this reason, the bottom age limit of this research is 65 years old. The users of the residential part participated in the research. According to the official data from home Lovret, all users are accommodated in the special care ward, so the participants were those persons who participated in some of the phases of the research based on their own estimation and/or medical verdict by the employees.

2 140 persons participated in fieldwork.

3 Survey instrument is conceptualized by Marija Geiger Zeman.
There were several ways in which we accomplished contact with the users that participated in the research: through a direct contact with a user (most often while observing and participating in some of home activities or through spontaneous contact and introduction by a user him/herself), through recommendation of participants by users, or recommendation of participants by employees. We are talking about persons of the age between 65 and 97, and the span of time spent in a home covers the time period from 20 days to 25 years. Since one questionnaire was cancelled after the realisation, 114 questionnaires were analysed. Semi-structured questionnaire proved to be a useful tool in many ways not only for collecting socio-demographic data as well as data about family, education and professional career, incomes, living in a home, state of health and attitudes towards cultural and gender aspect of ageing and old age, but also as a perfect way for a person to get better acquainted with the research topic. Every participant made a voluntary decision to continue taking part in the research. With 49 persons a semi-structured interview was carried out, and 27 of them took part in four focus groups.

A certain gender assimetry of the sample is also interesting and comes out of two reasons: 1) in three out of four homes in which the research was carried out there is a larger number of women than men; 2) women were much more ready and interested in taking part in the research. Generally, throughout the stay in the homes for older and infirm persons, it has been noticed that women are largely more active in homes’ activities and to much larger extent take part in events and manifestations organized in the home. Even the female participants of the research, throughout interviews and informal talks, concluded that the male users were less active and less visible in the home’s life. However, regardless of the prominent gender assimetry, the sample is heterogenous in some other socio-demographic characteristics: age (between 65 and 97), education (from unfinished primary school to Master’s degree), working status before retirement, health status, etc. Heterogeneity of the sample enabled the insight in the variety of experiences and interpretations of female and male users of homes.

The focus of our research was primarily on subjective experiences, images and thoughts, as well as everyday experiences of user of homes for older and infirm persons – their life narratives, interpretations of old age, and images of good old age, perceptions of their own bodies and health, gender aspects of ageing and old age, everyday life in the home, social networks, spirituality and thinking of the position of older persons in the society as well as personal experiences of intergenerational (un)solidarity. Owing to the fact that taking part in the research was voluntary, an examinee could stop the research procedure at any time, and, also, if he/she did not want to, did not have to answer to all the questions posed. All participants of the research were guarantied privacy protection and anonymity, in written and oral form, so, all of their names are changed. All of the interviews (as well as focus groups) are transcribed, and materials are coded and analysed. Transcripts of the interviews with the users of the homes for elderly and infirm people have been read many times (word by word, sentence by sentence or line by line). All typologies or classification presented in the paper are results of (open) coding – data from interviews were marked or labeled, in which process the codes were based exclusively on meanings that result from empirical material, and not on

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6 According to data from 2013 in the home Medveščak there are total of 353 users (298 women and 55 men), in the home Sveta Ana 300 users (221 women and 79 men), in the home Lovret 107 users (97 women and 10 men). Only in the home Zenta gender structure of the users is relatively balanced – out of the total of 335 persons accommodated in the home there are 190 women and 145 men.

7 Every participant involved in research has an opportunity to give herself/himself a pseudoname, so some names are result of the participants’ choice (for example Marija Majska, Ksenija, Vesna) but a larger part of the participants allowed the researchers to assign them a name.
some already existing theory or typology (Saldaña 2010). The recurring topics have been noticed and grouped in categories that were in the end named by authors on the basis of their specific qualities, characteristics and meanings.

What is old age?

Age is considered an important, moreover a crucial social, psychological and cultural category (Kaliterna 1998: 873). The fact is than not only “many aspects of personal, family, educational and professional life are organized to a great extent, and sometimes exclusively according to age”, but age is also an important criterion in scientific researches (Kaliterna 1998: 873). However, understanding of socio-cultural aspects of age demands not only sociological and anthropological, but also historical analysis. Susan Sherman points out that “there is a problem in defining ‘old’ historically”, so she suggests that the category “old” should be “seen as a relative term” (Sherman 2001: 16). This important suggestion will become more clear based on the following historical examples. In 15th and 16th century, in the times of Erasmus of Rotterdam [Desiderius Erasmus Roterdamus, 1465/1466–1536] or William Shakespeare [1564–1616], it was considered that old age began already at the age of 40 (Covey, according to Sherman 2001: 16). In the first half of the 20th century, a person was considered old if older than 50 (Bouillet 2003: 322) and for the majority of modern developed (Western) societies a person gets old after 65 years of age (see also Geiger Zeman 2014: 5). The arbitrariness of this (as well as of the earlier) definitions of the old age threshold, that obviously has to do with the fact that exactly the age of 65 years is the one when persons in the majority of Western countries begin receiving pension benefits (Gorman, according to WHO).

All mentioned show that old age is a “socially constructed category” (Kerner Furman 1997: 92). The factors that take part in this construction have been summarised by Margaret Cruikshank claiming that “aging is a creation of this time and place, more cultural than biological, determined by social institutions, or (…) a set of life experiences we can consciously shape” (Cruikshank 2009: 2). In other words, getting old is the process which is co-constituted by our conscious re-acting to “where we live”. Cruikshank suggests very fruitful concept of “learning to be old”, that enables an analytically productive integration of biological, social, and cultural dimensions of getting old (Cruikshank 2009: 2). From one point of view, ageing is a life phase, a “part of the human condition” (Cole, according to Cruikshank 2009: 13), and from the other, experiences of ageing and old age are always profoundly mediated by a specific life context that we co-create with our “local understanding” (Gubrium and Holstein 2005: 7) of the society, community and culture we live in.

In the society, there is a parallel existence of “many different formal and informal social definitions of age and aging” (Morgan, Kunkel and Atchley 2001: 4), and the social context plays an exceptional role in their forming. That is also confirmed by the experience of our examinee, Mrs. Ksenija. This 80-years-old lady came to the home at the age of 76. Already at

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9 From the position of non-western countries, 65 as bottom limit of old age is perceived as westernized concept. According to “more traditional African definitions” (depending on region or country) a person that is 50 to 65 years old is considered old. Also, “chronological or ‘official’ definitions of ageing can differ widely from traditional or community definitions of when a person is elder” (WHO, Definition of an older or elderly person, http://who.int/healthinfo/survey/ageingdef/older/en/).
that time, the family members as well as friends considered her to be older, and that is how she experienced herself. However, when she arrived at the home, the users considered her age as “youth” – in the home, which is a social universe on its own, different age standards are at work than in the wider society: old is considered a person that is more than 85.

For example, I got here when I was 76. I thought, and everybody outside thought, it was already seriously old age. But when I arrived here 4 years ago everybody was telling me: “well, you are still young, well, you are still young”. And I was amazed how come I was young at this age, you know?! Even nowadays, I’m young, that is, us at this age are young. Well, now when you reach 85, move over 85, well, then you are not young anymore. Then you are somehow older (...) then you have already become old. (Ksenija, 80)

Ksenija’s experience shows that the age category is not possible to reduce to a mere number of years. Social definitions and determinations of old age in chronological terms are very flexible, dynamic and versatile. By focusing on informal definitions of old age and ageing, it is provided for deeper insight of personal experiences and thinking of old age, and science opens an inspirational and fruitful possibility to grasp empirically and reconstruct theoretically the subjective perception and interpretation of age.

Interpretations of old age from old persons’ perspective

When we talk about ageing and old age, there is very little room left for the voices of older persons to tell their own reflections on old age and experiences of ageing. A lack of scientific, public and media transmitted communication about old age and ageing of the actual, real persons, support numerous stereotypes, prejudices, and fatalistic, but also unrealistically affirmative perspectives of old age and needs of the older persons. There are also “apocalyptic” standpoints that treat old age as a social problem as well as media transmitted images that support a distorted conception of old age (and process of ageing) as “deviance from normalcy” (Arber and Ginn, according to Hurd Clarke 2011: 29). Such, more or less explicit ageist approaches and contents suggest that “youth is good, desirable, and beautiful; old age is bad, repulsive, and ugly” (Healey, according to Hurd Clarke 2011: 29). We think that “such a Manichaean picture, strictly taken, does not recognize gradation and nuances – youth is ’in’, old is undeniably ’out’” (Geiger Zeman and Zeman 2014: 224).

In line with the discourse of humanist and social gerontology, that does not ignore the voices of older persons but, on the contrary, insists on the “interpretation and self-actualization” (Moody, according to Cruikshank 2009: 196), we would like to grasp thoroughly the real experience, feelings and reflections of older persons – users of homes for older and infirm persons. To achieve that, we posed a direct question: What is the old age for you? An analysis showed that there was no a unanimous or dominant understanding of old age. Relationship towards old age depends to the largest extent on an entire life experience, including primarily personal biographic material, but also observation and critical evaluation of other people’s lives and destinies. We can discuss four basic types of old age interpretations from the position of research participants: fatalistic, affirmative, stoical and relativistic.

Fatalistic standpoint supports the most widely spread narrative of old age as a loss and decline, dealing mainly with motives of illness and pain, weakness, loss of beauty and strength, accumulated fatigue, dependency/loss of independency and definite end of life. In the context of this narrative an (older) person functions as a frail protagonist drawn by cruel lines of
force and merciless physical and mental processes beyond her or his power. In that sense, for Mrs. Vesna, old age is primarily connected to infirmity and loss: “Weakness. I often say old age is cruel, one looses beauty, looses teeth, looses hair, external appearance…” (Vesna, 83).

Diametrically opposed to fatalistic is affirmative standpoint of ageing and old age. It is a standpoint that in old age see a new life opportunity, a new phase and a new quality of life can be seen. Advocates of this standpoint decide to look beyond limiting factors that are insisted on by fatalists, concentrating primarily on: freedom of existential worries they were occupied with while living active life, new qualities that are enriched their personalities and attitude towards external world – accumulated experience, wisdom, maturity, peace of mind/calmness and objectivity. Of course, here an emphasis has been made on the awareness of the need to find new interests (or renewing of some old ones), and, generally, old age is considered as a period of opening to new opportunities and finding new strength. This perspective is amazingly synthesized by Mrs. Ana refection according to which old age is “A collected wisdom of life, because this what I was telling you before, you draw some lessons from each of these years – if you want them” (Ana, 76).

As antique stoicism required a life in accordance with nature and sense and inner peace as a result of accepting life circumstances, so do the examinees that share a perspective that we named stoical, see old age experienced and understood as a normal and unavoidable, natural phase of life, outcome of which is a peaceful and relatively relaxed attitude towards getting old. It seems that “necessity awareness” reconciles expectations with real situation and in so far relieve of needless frustration and excessive fear. Such an attitude is perfectly illustrated by Mrs. Branimira’s answer to our basic question: “What is the old age for you?” . “Natural thing. What else can it be?” (Branimira, 73).

According to relativism that claims that nothing exists neither in absolute, nor in necessary terms, the examinees who take relativistic standpoint incline towards the statement that quality of somebody’s old age depends to the largest extent on how a person will relate to this life period. This statement also implies a freedom of choice of the way of looking at actual life conditions and life in general: “This is a period of life, that’s what old age is. It’s a period of life. And how somebody experiences it, that’s how it is for that person” (Manuela, 92).

It should be pointed out that, speaking about these four basic ways of understanding of old age, we deal with analytic constructions that arose through clarifying abundant empirical material collected from our examinees. Like ideal types of Max Weber, these forms of understanding old age (and life in general) appear sometimes in relatively pure state, but sometimes they come with more or less “admixture” of other standpoints... The only exception here being fatalistic view, that considerably complicates taking of more positive and more active attitude towards life by its passive-defensive character.

Young heart, old body – subjective age and chronological age

“The years are, my dear, just a number” is a line from the poem of Mr. Radovan Mikić (2014: 51).

And indeed, many researches on age identity showed that somebody’s chronological age...
age (or “number of birthdays”) often says very little about a person – “the fluidity and multiplicity of today’s life styles defy the use of boundaries so rigid as numerical age” (Moody, according to Morgan, Kunkel and Atchley 2001: 10–11). Therefore, we should not be surprised that personal perception of his or her old age is often not “in harmony” with chronological age. It was not infrequently the case that our research participants explicitly made the point that old age is not necessarily connected to number of birthdays but with interests, activities, life styles, self care, etc. Not even the very beginning of getting old is connected exclusively with a particular chronological age or number of years but is determined by an individual attitude of a person – by looks, behaviour, interests, etc. In that sense, old age is interpreted as a state of spirit – attitude of an individual towards himself/herself and the world, which is to large extent independent of chronological age:

Matilda: Many times even a young man is old.
Researcher: What do you mean?
Matilda: You are inert, he doesn’t like this, he doesn’t like that, nagging…

Having in mind this discrepancy between chronological and subjective age, Gubrium and Holstein (2005: 5) pose the question to which extent chronological age influences on an older person – on her/his understanding of herself/himself, environment, world and life. Already in early 1950s, the researches indicated existence of discrepancy between chronological age and “self-perceived age” (Berg 2007: 148), that is subjective age. A syntagma “self-perceived age” refers to “subjective age identity” (Berg 2007: 148). Some authors define “self-perceptions of aging” as “individuals’ perception of their own age and aging” (Kotter-Grühn and Hess 2012: 563). In this context, very useful is a concept of age identity. According to Westerhof, “age identity refers to the inner experience of a person’s age and aging process” (Westerhof s. a.: 10). This type of identity, presumes Westerhof, is the result of a process through which a person “identifies with or distances oneself from different aspects of the aging process”, and the research of age identity is extremely important because it “represent visions of aging that come from older persons” (Westerhof s. a.: 10).

Berg (2007) reminds on multidimensional approach to personal age or age identity which was developed by Kastenbaum, Derbin, Sabatini and Artt (1972). These authors developed a concept of “personal age”, consisting of four categories: (1) “look age”, (2) “feel age”, (3) “do age”, (4) “interests age” (Kastenbaum et al., according to Berg 2007: 148–149). When it is the matter of self-classifying into an age group, a person does not only look at his or her reflection in the mirror, but how he or she feels “on the inside” plays a major role as well as how active a person is and what are his or her interests. This model corresponds well with the thesis of multidimensional perception of somebody’s own age (Zupančič, Colnerić and Horvat 2011). Kastenbaum, Derbin, Sabatini and Artt have also established that by increasing of chronological age, there is also an increase of difference between actual/chronological age and subjective/personal age (Kastenbaum et al., according to Berg 2007: 148–149). In other words – and apparently paradoxically – it seems that, as we are getting old, we experience ourselves as more and more young. This phenomenon was confirmed by our research, whose findings, like the results of many former researches, in the end can be brought down to a famous colloquial saying: “You’re only as old as you feel”, which, as a rule, means that “older people tend to feel younger than their actual age” (Westerhof s. a.: 11).

 Mrs. Matilda is 83-years-old women.
The phenomenon of discrepancy between subjective and chronological age is explained by psychologists as a result of adaptation to huge changes that old age brings about – leaving work market, retirement, physical changes etc. – with aim to “maintain their existing identity” and securing the feeling of “self-continuity”; to feel younger than personal chronological age means to keep the “feeling of consistency with one’s past” (Westerhof s. a.: 12). These individual identity strategies should be, of course, considered in the wider context of culture that devaluate old age and ageing and connects them dominantly to the motives of (physical and social) loss and deterioration (Westerhof s. a.; Kerner Furman 1997; Zupančič, Colnerič and Horvat 2011).

By doing our research, we established three possible variants of relationship between subjective and chronological age: 1) discrepancy between chronological age and subjective age, 2) correlation between chronological age and subjective age, 3) mixed or fluid type.

Discrepancy between chronological age and subjective age is most dominant variant in which the persons feel considerably younger than their chronological age. This insight confirms the earlier researches’ findings showing that persons older than 60 do not necessarily perceive themselves within their age categories (Gubrium and Holstein 2005: 4). Here, a remarkable research by Sharon R. Kaufman (1986) should be mentioned again, that, among other things, resulted in the conclusion that older persons have “ageless self” (Westerhof s. a.: 10; Kaufman 1986). Analysing the interviews with the research participants, Kaufman realised that older persons, when talking about themselves “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 1986: 7). Interpreting the concept of “ageless self” by Sharon Kaufman, Westerhof makes the point that “older persons (…) do not feel that they belong to the elderly age group and tend to see themselves as doing better than their peers” or “they see themselves as an exception to the general belief that aging is related to decline” (Westerhof s. a.: 10).

Personal, “inner” feeling of own age, that points out to “ageless self”, is well illustrated by reflexions of 73-years-old Branimira and 81-years-old Nensi:

But I do not feel inside that I am that old. (Branimira, 73)

I do not feel that I am 80 years old, trust me. I think I’m 70. Not even that old. (Nensi, 81)

Correlation between chronological age and subjective age is a variant present in only a few personal interpretations and is mainly determined by a person’s health condition. This finding is in line with those researches that showed that physical health is crucial for personal age experience: “individuals who have poorer health have a less youthful age identity than do their age peers who are in better health” (Barrett, according to Westerhof s. a.: 12). According to Westerhof, that is the consequence of the fact that the processes of ageing are dominantly identified to physical and health decline, so many persons consider their personal health situation to be the most important “indicator of their personal aging process” (Westerhof s. a.: 12). Mrs. Zinka is 85-years-old women that is unable to move and that experience herself as old person not only because of her chronological age, but before all because of her health state:

Zinka: Alas, I’m so old, I should’ve been gone by now… I think I’ve been boring to myself and to the others…
Researcher: Why do you think so?
Zinka: Because of my age, ability to move and so.
Discrepancy and correspondence between subjective and chronological age are two poles of the continuum on which other variants of perception and interpretation of personal age have been placed. These variants we resumed in so-called mixed or fluid type. The subject is about persons who feel younger but in particular life situations they became aware of his/her chronological age:

a) A person feels really old only in certain situations – for example, when he or she cannot do what once was able to do with ease or without any larger problems:

In some matters I experience myself as old, and in some not. This spine of mine is old, but my soul is still very blue (childlike-A/N author’s note). (Marija Majska, 82)

b) A person does not feel old, but look in the mirror functions as reality check – physical appearance shows up as a relentless reminder of advanced chronological age:

According to my moves, according to all that I can do, I think I’m not old. Only when I look at myself in the mirror, I see that I am old in fact. (Dagmar, 76)

c) A person does not want to internalize social roles and stereotype conceptions in relation to older persons:

Once this friend of my, a psychiatrist told me … you know what, the most horrible in life is young heart, and old man… because people can go crazy definitely, they start to put make-up like in old days, wear mini-skirts, I don’t know, okay that, I’m not at that level yet, but I like to dress up, I like to put make-up on, all with decency… I wear sport clothes, that also is youthful impression…  (Ljubica, 75)

d) A person feels in some situations that he or she does not act “in line with his or her age”, i.e. with social expectations about behaviour in this life age, so he or she has to “correct” his or her behaviour:

You don’t even feel years if you are in an acceptable health … And only you force yourself many times: Get your self together, see how old you are. (Manuela, 92)

The last two examples draw attention to social roles, that is expectations that the society has towards old persons. Laz (1998) points out that age – the same way as gender – are of performative character. Wide-spread colloquial saying “act your age” implicates that there are norms of behaviour connected with certain age, from which also follows “that age is not natural or fixed, and … that age requires work”, that is an investment of certain “physical or mental effort” (Laz 1998: 86). Referring to Mead and Cooley “looking glass self”, Haim Hazan emphasizes that acting of older persons and “their attitudes towards themselves are shaped and reinforced by society’s prevailing images of them” (Hazan 2005b: 19). Accepting these (often stereotyped) images, older persons conform and at the same time strengthen these images, for example, by wearing uniforme clothes in dark or neutral colors, by engaging in “appropriate” social activities, by acquiring behaviour of an ill person as “needy, hopeless, sick” etc. (Hazan 2005b: 19). However, a new generation of older persons came of age whose aspirations, dressing style, interests and life styles are not in line with “traditional” images and unwritten rules of how an older person should look, how to behave etc. Personal interpretations and performance of own age vary from respecting the expected and traditional images of older persons to divergence from these images, showing that older persons do not form a homogenous population. Besides that, they, in most of the cases, posses “fluid and changing
identity” (Cruikshank 2009: 5), what guides to the already mentioned conclusion by Sharon Kaufman about “ageless self” of older persons. Subjective experience of age is variable and fluid, situational and relational – importantly dependant on relationship with the others and a personal “life world”.

Conclusion

Beyond understanding old age as a life period marked by losses, decrease of power and Manichean contrasting against youth, the research of the subjective experiences of older persons show that old age, as many other life phases, is, “a kaleidoscope, its shifting images neither good nor bad” (Cruikshank 2009: 196).

There is no doubt that age is an important category in organizing social life (Morgan and Kunkel 2001; Kaliterna 1998), but it is necessary to understand it and analyze it as a flexible, contextual, fluid and “relative term” (Sherman 2001: 16). From that, it is easy to discern that old age is a specific social construct (Kerner Furman 1997; Cruikshank 2009). Subjective experiences of our examinees show that old age can be interpreted and coded in different ways in different contexts, by which various formal and informal images of old age have been created. Home for older and infirm persons as micro-social universum with its own rules, norms, standards and expectations exists as socio-cultural framework within which we recognized four dominant interpretations of old age: fatalist, affirmative, stoical and relativistic.

The intention of this work is also to enable the voices of older persons to tell and present personal, individual experiences of old age and ageing, that can certainly contribute to changing of public perception of old age, and its de-tabooing. Understanding of old age should be freed from simplifying reduction to number of negative life experiences.

Flexibility, fluidity, variability and contextuality of age category can be best seen at the level of specific, subjective experiences, that eloquently testify that the perception of old age and feeling of ageing often do not correlate with the chronological age of a person. Moreover, some of our examinees directly pointed out that old age is independent of chronological age, understanding it primarily as a state of mind (defined by interests, life styles, self care, general attitude towards life etc.).

With the largest number of the research participants it is evident that there is a discrepancy between subjective and chronological age, and corresponding of real age and feelings appeared only in the interpretations by persons who suffer serious health problems. Between these two types of experiences – discrepancy and corresponding – other variants have been positioned, but they all point out to a great role of life context in experiencing personal age. Some of these mixed or fluid types of experiences especially colourfully point to the fact that age is a performative category (Laz 1998), and that there exist series of unwritten norms, rules and expectations by which they “norm” behaviour, acting and living “according to age”. Numerous deviations of these rules and images do not only demonstrate the potential of different ways of performing and experiencing old age, but also confirm the thesis that old persons form very heterogeneous population, differentiated by their present (and earlier) life style, tastes, points of view, habits, preferences and values. Each attempt to “unify” that diversity, not only neglects the obstinate facts, but also contributes to preservation and strengthening of ageist prejudices and stereotypes.
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“Mlado” srce u “starom” tijelu. Iskustva starenja iz perspektive starijih osoba

Sažetak

Dob je socijalni konstrukt koji treba analizirati kao fleksibilnu, kontekstualnu kategoriju, a starost podliježe kodiranju i interpretiranju koji stvaraju različite formalne i neformalne predodžbe starosti. Dom za starije i nemoćne osobe kao mikro-socijalni univerzum funkcionira kao socio-kulturni okvir unutar kojeg smo analizom iskustava korisnika utvrdili postojanje četiri dominantne interpretacije starosti: fatalističke, afirmativne, stoičke i relativističke. Ovaj je rad fokusiran na autentične glasove starijih osoba i osobna iskustva starenja i starenja. Kontekstualnost i promjenljivost (osjećaja) dobi o kojima rječito svjedoče ta iskustva pokazuju da percepcija starosti i osjećaj starenja presudno ovise o osobnoj vizuri i interpretaciji iskustva, koji ne moraju biti kompatibilni s kronološkom dobom.

Ključne riječi: starenje, kvalitativno istraživanje, subjektivno iskustvo, kronološka dob, subjektivna dob