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Beyond the mask: women’s experiences of public and private ageing during midlife and their use of age-resisting activities

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ABSTRACT Accounts of ageing often employ the metaphor of a mask and suggest that individuals are motivated to present a youthful image. Drawing on interview data, we reveal that women aged 51–57 years distinguish between what we call ‘public’ and ‘private’ body ageing, both of which have an impact on age-resistance. Public ageing is visible, arising from physical changes in body appearance. These changes have the potential for concealment through age-resisting activities. Private ageing is less visible and arises largely from physiological changes within the body, which were perceived by women as irreversible indicators of ageing. This obduracy of the body led women to perceive themselves as ageing and also deterred them from participating in age-resistance. In contrast to masking theories, our study shows that most women in their 50s wanted to project a socially acceptable image that reflected their subjective sense of growing old.

KEYWORDS mask of ageing; midlife; private ageing; public ageing; women

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Introduction

In the past, social gerontologists tended to rely on the existence of distinct age-related life stages when explaining the ageing process. For example, ‘disengagement’ theorists (e.g. Cumming and Henry, 1961), who emphasize the importance of changing work and social roles, present ageing as a movement away from a productive middle age towards a disengaged old age. Similarly, those advocating structured dependency theory (e.g. Townsend, 1981) identify retirement as key to the experience of old age. Here, policies surrounding retirement are reported to engender an inferior status to old age.

In addition to these approaches to ageing, there have been many sociological and anthropological studies of the experience of ageing, with a particular focus on women’s experiences during midlife (e.g. Gullette, 1997; Lock, 1998; Mercer, 1999). These studies highlight a tendency within western cultures, where youth is valued, to identify the ageing body as being in a state of biological decline. Thus Gullette (1997) argues that culturally shaped indicators of growing old provide a negative narrative of female ageing, whereby middle age has become a time when chronological ageing is connected with a decline in physical and emotional strength. Middle age has therefore come to be seen as the point of ‘no return’ to the former youthful self or, as Gullette (1997) suggests, the ‘entrance’ into old age.

These notions of a dominant, ageist culture and a fixed path through clearly defined stages of standard life cycle are subject to questioning by supporters of postmodern social theory. For Gilleard and Higgs (2000), ageing no longer has any stable meaning. Instead they suggest that we 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. They suggest that ageing has become a much more reflexive project, providing a new cultural space for the expression of individualized versions of ageing identity. This resonates with Laslett’s (1989) notion of ‘the third age’. With an increasing amount of time spent in retirement and a growing range of leisure activities in which to participate, Laslett suggests that the third age has become a time for engaging in enriching activities and achieving self-fulfilment. In a similar vein, Featherstone and Hepworth (1991) suggest that the boundaries between middle and old age have become blurred as people increasingly have the opportunity to create new identities outside of those recognized by the traditional life stages. For the latter authors, the development of a postmodern consumer culture has not only created a heightened awareness of the ageing body but has also provided the means to resist the appearance of growing old. Not only is the social category of ‘old age’ now being resisted; so are the internal state of feeling old and the physical features of old age (Gilleard and Higgs, 2000).

The idea of resistance to ageing is taken further in recent work that considers the relationship between physical indicators of bodily ageing and
the impact that this ageing process has on individuals' sense of identity. It is to this body of work, and to the metaphor of the mask that recurs within it, that we now turn.

Masking theories
The ways in which individuals experience the physical changes associated with middle and later age have been the subject of much debate among sociologists. The metaphor of a mask or disguise recurs in these debates, used in two analytically distinct ways: the idea that ageing itself is (or perhaps was) a process in which bodily changes come to mask (hide) inner identity and the idea that ageing is a process that people seek to mask (disguise). The first mode was described by Featherstone and Hepworth (1989, 1991; Hepworth, 1991). Drawing on writing about the elderly in the 1970s and 1980s (e.g. Gubrium, 1986), Featherstone and Hepworth (1991) drew attention to the prevalence of an image of the ‘ageing process as a mask or disguise concealing the essentially youthful self beneath’ (1991: 379). In these accounts, physical signs of ageing, such as greying hair and wrinkled skin, were seen not as synonymous with the subjective experience of ageing, but as becoming, over time, a mask that cannot be removed. Although the inner sense of youthfulness remains, expressing this becomes more problematic for those with an ageing appearance, so they engage in dissembling practices, acting ‘old’. As personal identity is shaped through social interaction, by the ways in which other people react to individuals' physical appearance and visible actions, when these physical signs and acts signify old age, and all that is associated with this, an aged identity emerges. The mask of age becomes an ‘iron cage’.

Others have taken up the idea of the mask of age in empirical studies. For example, Cunningham-Burley and Backett-Milburn (1998) draw on interviews with middle-aged men and women to show how body and mind become alienated from each other. They suggest that, although age-related biological changes bring the body to the mind’s attention and, therefore, potentially secure a connection between the two, the body provides an unreliable image of the inner sense of youthfulness, resulting in what they term a mind–body dualism. This separation of the self and the body is also described by Fairhurst (1998), who identifies ways in which boundaries between the mind and body are constructed in, and through, the use of language about ageing.

However, an alternative use of the mask metaphor is also found in recent social gerontological literature. For example, Woodward’s (1991) idea of a ‘masquerade’ and Biggs’ (1993, 1997) notion of the ‘persona’ or ‘social mask’, suggest that disguises are used to protect the individual from an ageist culture. In contrast to the mask of age theory, where body appearance is seen as being at odds with an inner sense of youthfulness, both the masquerade and social mask theories suggest that, for individuals, the subjective and physical experience of ageing are in unison. Biggs suggests
that, while midlife is characterized by a number of changes in physical appearance, these serve as prompts for the individual to identify with the ageing body. Increasing wrinkles in the skin and greying hair stimulate individuals to reconsider their personal identity. However, with the social pressures to conform, it becomes necessary to adopt a culturally shaped identity. Thus, Biggs suggests that, while midlife physical changes in the body provide the stimulus to try out a number of different social masks, the need to maintain a socially acceptable image and lifestyle prevents the true identity from ever being realized. According to Biggs, the social mask is used to ‘protect the self and deceive others’ (1999: 76). As Woodward states, ‘both men and women “put on” youth so as not to be classified as old’ (1991: 159). In this respect, the social world is potentially a threat to individual identity. This is in contrast to Featherstone and Hepworth’s concept of mask of ageing, where the body, when it loses its malleability, creates a threat to true identity.

While these masking theories differ as to whether they see the ageing body or the ageism of the social world as a potential threat to identity, they share the view that, in contemporary society, as individuals, particularly women, enter middle age they are likely to resist the physical changes in appearance associated with ageing, albeit for different reasons. For Biggs, colouring greying hair is a defence against the pressures of ageism. For Featherstone and Hepworth, it is a means by which members of the still youthful-feeling ‘baby-boomer’ generation can maintain their self-image and values, as shaped by the counter-culture of the 1960s, thus postponing the onset of the confining mask of age. That is, they seek to distance themselves from ‘deep old age’ (1991: 385). It is this ‘baby-boomer’ generation (i.e. those who were born in the mid- to late 1940s) who are particularly associated with spearheading the alleged transition to a postmodern society, where individuals are fascinated with the body and its potential malleability. It is to this idea of the reshaping of the body through the use of age-resisting activities that we now turn.

The use of age-resisting activities
At the heart of postmodernism lies the argument that the world of work has become less central and that consumer culture has become more important in everyday life (Featherstone, 1998). Within this consumer culture, it is suggested, individuals develop a fascination with maintaining a youthful and sexually attractive body (Lupton, 1994, 1996). Reports of increasing uptake of cosmetic surgery in North America are held up as examples of a yearning to resist an ageing appearance (Gilleard and Higgs, 2000). Indeed, Gilleard and Higgs go as far as to suggest that developments of new techniques such as Botox injections and laser hair transplantation are driven by the commodification of cultural preferences originating in the ‘baby-boomer’ generation. They suggest that this increasing uptake is likely to be particularly marked among women of this generation who grew up,
unlike previous generations of women, ‘accustomed to cosmetics as an intrinsic part of their public persona’ and to ‘having their hair done’ regularly (Gilleard and Higgs, 2000: 68). In line with the postmodernist focus on consumption, they state that, if this cohort effect persists, ‘cosmetic surgery and related procedures will become part of everyday life, providing more and more people with the opportunity to mould their appearance to how they would like to be’ (Gilleard and Higgs, 2000: 132). That is, they suggest that the opportunities to ‘mask’ ageing or to defer onset of the ‘mask of ageing’ will be increasingly taken up, and more by women than by men.

That ageing and, by implication, age-resisting practices have particular salience for women has been much discussed in the postmodern and feminist literature (see Lupton, 1996 for a review). Within the feminist literature it is possible, at the risk of oversimplification, to identify two positions analogous to the two applications of the mask metaphor described earlier. Thus, on the one hand, much feminist analysis has argued that a combination of ageism, sexism and commercial interests pressurizes women to consume age-resisting products and services in order to combat the particularly negative value placed on female ageing. As this may be to the detriment of their own well-being, women are urged to reject age-resistance and ‘grow old gracefully’ (Greer, 1991). On the other hand, as Gilleard and Higgs (2000) have noted, there are also feminist calls for women to seize the opportunities now available to them to maintain their autonomy and sexuality in later life, to resist the imposition of an ageing identity (e.g. Friedan, 1994).

While there are, undoubtedly, many options available in relation to the modification of body appearance, the extent to which women ‘baby-boomers’ now in midlife actually make use of such options, and how these relate to feelings about ageing and identity, requires further investigation. In the following sections we report findings regarding women’s experiences of ageing and their use of age-resisting activities, taken from a wider study of women’s experience of the menopause and their use of hormone replacement therapy.

Method

The data reported here were obtained through in-depth interviews with 32 women who were selected from a larger sample of 413 women who returned a postal survey about women’s health during the middle years. The interviewees were all born between 1942 and 1948. Reflecting the social composition of the area in which the study was conducted, most \((n = 27)\) of these women either currently or previously held non-manual occupations, with around a third in teaching and management occupations, and just under half working as secretaries or receptionists. Moreover, most of those who were married had husbands with ‘middle-class’ occupations. (It is the
‘middle-classes’ who are regarded as leading the uptake of age-resistance. Twenty women out of 32 were current or past users of HRT and 18 women had used alternative therapies for menopausal symptoms.

In the interviews, women’s accounts of ageing were explored within the broader context of experiences of the menopause, with each interview covering the same general topics but also allowing respondents to elaborate their individual experiences. All of the interviews were carried out by one researcher (KB) and lasted from 40 minutes to 2 hours, although most were around 75 minutes in length. Each interview was audio-taped and transcribed verbatim by the researcher (KB). Analysis followed an interpretive approach, with the accounts that women provided being taken to represent their beliefs and perceptions. Using ATLAS/Ti 4.1 for Windows, codes were assigned to all sections of the interview data according to a theme or category. The data relating to each of the codes were then retrieved and read, looking for variations and nuances in meanings. Finally, key concepts were identified by repeatedly reading the coded data and then searching for links between each concept. The initial analysis was carried out by one researcher (KB) and a sub-sample of the taped interviews and transcripts was listened to and read by MAE and JG, followed by discussions about the analysis. In collecting, interpreting and analysing the data, we have tried to consider the difficulties in gathering women’s accounts about ageing. Of particular concern has been what Goffman (1971) describes as the ‘front’ or Silverman (1997) terms the ‘halo effect’, where people try to convey what they consider to be an acceptable image of themselves. With regard to researching the mask of ageing, Biggs (1997) acknowledges the difficulties in examining relationships between hidden parts of the self, the disguises used and the desired impressions. Yet, the postmodernist claim that age-resistance activities are becoming ‘part of everyday life’ (Gilleard and Higgs, 2000: 132) presumably implies that it is becoming acceptable to disclose participating in such activities.

Results

All of the women interviewed distinguished between what we have called ‘public’ and ‘private’ ageing, each of which was found to have an impact on the subjective experience of ageing and, in turn, on motivation to participate in age-resisting activities. Public ageing refers to visible, physical age-related changes in the body (for example, greying and thinning of the hair, wrinkled and sagging skin). Being ‘public’, women experience this aspect of ageing through interaction with a number of different age-related social groups. For example, women make comparisons between their own physical appearance and that of other women of a similar age in order to assess how ‘well’ they are ageing. Younger age groups are often used as a means of remembering past appearances and comparing these with the present. Older age groups tend to provide a vision of what is likely to be
in store for the future. However, the spectrum of images observed within each age group highlights the potential malleability of the publicly ageing body, and suggests that it is receptive to rejuvenation.

Private ageing relates to the generally less visible, physiological age-related changes in the body (for example, increased memory loss, high blood pressure, reduction in libido, the menopause, joint stiffness and increasing tiredness). While there is an implicit, culturally shaped acceptance that these less visible changes are associated with ageing, they are only communicated to a select number of people within the same age group and are largely concealed from the wider public view. Opportunities to make comparative assessments of private ageing, therefore, are limited. Moreover, according to these women, the privately ageing body, far from being experienced as malleable, offers relatively little hope for changing the biological trajectory. The apparently inevitable nature of age-related physiological changes, therefore, brings the whole possibility of rejuvenation into question. Thus the obdurate nature of the body in private ageing informs women’s consideration of the potential for any age-resistance that might seem possible within public ageing.

Using data collected at interview, both public and private ageing will now be described in more detail. Following this we shall discuss these experiences of ageing in relation to women’s use of age-resisting activities.

**Public ageing**

Bytheway and Johnson (1998) argue that the image of ageing has been constructed in such a way that there are easily recognizable symbols of old age. Indeed, Turner (1995) goes so far as to suggest that mass photography has allowed images of ageing to become standardized. At interview, these apparently standardized images were examined by asking women to describe the impact that age-related changes had on the way in which they saw themselves. Almost all women spoke initially about the visible changes in their appearance, which they associated with an ageing identity. In particular, they pointed to their greying hair, wrinkling skin and increased weight (especially around the waist and hips), as being easily recognizable and visible signs of growing old. These physical changes in appearance, however, did not simply happen overnight. Rather, women recalled subtle changes, which seemed to have occurred over the previous 10 years or so:

> I remember being 40 and not having a wrinkle in sight and thinking, great! No grey hairs or nothing. I mean between 40 and 50 is the time when you do age. (R32; age 55)

Despite the apparent gradual movement towards an older body appearance, women frequently spoke about being taken by surprise when they caught an unexpected glimpse of themselves in the mirror:

> I must admit that the worse thing that I find is sometimes catching a glimpse of yourself unaware and you think, oh dear [laughs]. I was walking past a mirror
the other day and I thought, oh it’s my mum! And then I realized that it was me! [laughs]. (R31; age 51)

In addition to reflections in the mirror, photographs provided the women with a detailed personal memory of when they were younger (Turner, 1995) and served as a pertinent reminder of their changing physical appearance:

I don’t think it helps having pictures of my family by the side of my bed . . . Wedding photos, and then pictures of how I was then . . . And you look up see that and then look in the mirror and you think, crikey! Is that really me in the mirror? [laughs] Who’s that person in the mirror? And then I think, oh gosh I’m getting more and more like my mother every day. (R2; age 55)

Mothers were frequently used as a reference point when women judged their ageing appearance. Becoming increasingly similar in appearance to their older mothers provided a clear marker of ageing.

Age-related physical changes were also visible to others, generating a ‘public’ experience of ageing. Indeed, when asked at interview about how they experienced their changing appearance, many women spoke about the comments they received from others:

My father kept going on about my hair going white. He used to say I would look like my grandmother. So he made me more aware of my hair changing colour . . . My eldest daughter is the only one who comments about it now because her mother-in-law is nearly 70 . . . and she’s still a brunette [laughs]. (R16; age 55)

Thus, the visible nature of public ageing results in an ageing process that can be monitored, with photographs and memories serving as reminders of a past appearance, and parents providing foretastes of a potential future image. In addition to this linear record of their own changing appearance, women experienced public ageing through interaction with others of a similar age, particularly friends, more distant relatives and work colleagues. This social interaction not only appears to act as a means of raising age consciousness (Hepworth, 2001), but also potentially contributes towards what has been described as a process of ‘age-categorization’ (Coupland et al., 1991: 59), whereby self-disclosure of chronological age is used as a means of identity. Women seemed to see themselves as part of a collective, generational cohort who were ageing together (Turner, 1995) and frequently concluded that they were ageing in much the same way as their peers:

I think all your friends are getting older at the same time. I think this is it. We’re all getting old together. Some look quite good and others don’t look so good. You know, some have got really rounded and some have let their hair go all grey. And you think, oh well . . . I’m probably in the middle of that lot [laughs]. (R32; age 55)

Some women found peer group comparisons provided a positive experience of ageing, especially when they felt that they had aged better than other women of a similar age:
Well, I look in the mirror sometimes and I think, oh girl, you are getting old. But then I saw my sister-in-law the other day. I hadn’t seen her for years . . . she’s the same age as me. And when I came home, I looked in the mirror and thought, you’re not doing so bad after all [laughs]. (R16; age 55)

In addition, women also experienced public ageing outside of their age-related social group. Being an older person within a younger social group, or a younger person within an older social group appeared to have a significant impact on women’s experiences of public ageing. For example, some women said that they found working with predominantly younger women helped them to feel young:

And when I worked in London – as well as where I’m working now – they’re all young people and it’s a weird thing . . . I mean I don’t want to be young, but you feel of an age where there’s laughter and jokes going on and it makes you feel young. I feel part of them. It’s weird. I might feel older if I was one of these ladies who lunched [with women of similar age]. I think there is a real benefit in being with young people for company. (R27; age 55)

While being among younger women seemed to make some women feel younger, others felt that it engendered a sense of ageing. One woman said that she felt old when she was in the company of both younger and older social groups:

When I was at work, I was with people who were all roughly the same age – that helped. Because if you mix with people who are about 10 or 15 years younger, I think you feel your age more. (R26; age 56)

Later in the interview she continued:

I know it sounds funny but we’re living in an area where there are a lot of elderly people around here . . . So I feel a little bit as if I’m surrounded by elderly people . . . and I don’t want to be old. (R26; age 56)

From the data we have collected, it is difficult to explain why some women’s interactions with a younger age group contribute to a sense of youthfulness, whereas for other women it appears to provoke a sense of ageing. What is clear, however, is that the experience of ageing is an interactive process (Hepworth, 2001), with encounters between and within generations playing an important role in the experience of public ageing. We shall return to the impact of such social interaction later in the article, when we consider the use of age-resisting activities. First, however, we need to consider how age is also experienced as a private matter.

**Private ageing**

Unlike public ageing, the experience of private ageing is largely invisible, arising from age-related physiological changes within the body. At interview, in addition to describing what was considered to be age-related changes in appearance, women also spoke about various alterations in body functioning, which they said provoked a sense of ageing. In particular,
aching joints, memory loss, tiredness and the menopause were viewed as key indicators of growing old. For example, as one woman put it: 'I’ve been feeling tired recently, I don’t know what it is, but I’m beginning to feel my age’ (R27; age 55).

Physiological age-related changes were generally experienced in a fairly subtle way, giving the impression that private ageing, like public ageing, was a slow process:

I think this is age creeping up on me . . . I’m slowing down. I’m definitely slowing down and things that I used to be able to do and I found no problem with . . . I now find, emmm, I take longer . . . I can’t always be bothered to do different things. I get tired very quickly now. (R17; age 55)

Unlike public ageing, however, on the whole, physiological changes tended to be hidden from the outside world, being largely ‘private’ experiences. Comparative evidence of this aspect of ageing, therefore, could not easily be procured from peers. Nevertheless, women recognized physiological changes as being age-related and something that they assumed happened to everyone:

I think of Cher, and she’s 50 . . . I know she’s been under the knife and she’s had bits and pieces done to her, but biologically, her clock is ticking away. Do you know what I mean? Her inners are just as old as everybody else’s. I mean everything is wearing out . . . Not on the exterior, but she is inside. (R2; age 55)

Thus the physiological changes associated with private ageing, while not necessarily visible, were considered to be an inevitable part of growing old. Although women spoke about noticing physical signs of public ageing from the age of 40 onwards, the physiological changes of private ageing appeared to occur slightly later in life, usually from the age of 50: ‘I’ve got certain things wrong with me, but then I’m over 50, you’ve got to expect that as you get older – like a car, you wear down’ (R21; age 53). Private ageing, therefore, seemed to provide confirmatory evidence of growing old. Such was the apparent strength of this evidence that many women perceived private ageing as a one-way journey towards bodily decline. Terms such as, ‘deterioration’, ‘wearing out’, ‘failing’, ‘no longer up to it’ and ‘getting slower’, were all used to describe age-related physiological changes within the body:

You can’t go running up that hill . . . the body fails you. I don’t get wound up about it but it’s there, it’s an irritation more than anything. You have to find something to take its place because life is a series of stages. At all stages of your life things change all the time. (R1; age 54)

This experience of private ageing as a movement through ‘stages’ of life was also very evident in women’s accounts of the menopause. When asked at interview to describe their experiences of the menopause and the impact that it had on the way they viewed themselves, almost all women spoke about how the menopause represented a ‘midlife marker’ (Gilleard and Higgs, 2000). It was taken as signifying ‘a new era’ or ‘moving into another stage of life’ and was interpreted as accentuating their sense of ageing:
The menopause is really about the body changing from one stage to another. Having gone through the child bearing period of the last 20 odd years, errrm, getting ready for winding down and the next stage and that . . . everything is just getting into position and into place and sorting itself out, ready for the next stage in life. (R17; age 53)

As with the more general age-related physiological changes, women tended to associate the menopause with body deceleration. The ovaries were thought to ‘wind down’ in preparation for the next stage, in much the same way as the rest of the body slowed down in preparation for old age. Indeed, women often attributed general age-related physiological and physical changes to the menopause. Lower levels of female hormones were seen as contributing to an increase in tiredness, a slower metabolism, dryness of skin, brittle nails, increased forgetfulness and increased weight. For many women, each of these physical and physiological changes also signalled that she was getting older:

Because your menopause has to slow you down . . . my metabolism has slowed down and I do think at the back of my mind, without any knowledge, that it is all to do with hormones. You are slowing down because of the menopause and because of age. The two go together, you can’t separate them and therefore, you put on weight and look older. I mean men all of a sudden look round one day and find themselves old. They don’t have the warning like we do with the menopause. We have certain signs that our body gives us that tells us that we are getting old. The menopause is just one sign that you are getting old. (R30; age 56)

The inseparability of public and private ageing that this woman describes is an important component of women’s subjective experiences of ageing. While public ageing may commence at a slightly earlier age than private ageing, the two are inextricably linked, each validating an inner sense of growing old. For women, it would seem that the menopause provides an additional physiological change that further endorses the sense of growing old. Although both private and public ageing appear to be gradual processes, the perception of private ageing as a linear trajectory of stages, suggests that women see these physiological changes as irreversible. This has important implications for the perceived value, and consequently, use of, age-resisting activities. It is to this area that we now turn.

Age-resisting activities
Drawing on our interview data, we suggest that the use of age-resisting activities is influenced by the value that society places on a youthful appearance, a desire to conform to the ‘rules’ of a particular age-related social group and the extent to which the body is perceived to be resistant to ageing.

The most popular form of age-resistance that women spoke about was the use of hair dye to conceal greying hair. Other activities included the use of face creams and make-up to hide loss of skin tone, clothes to present
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a more youthful image and, very occasionally, the use of hormone replacement therapy to maintain youthful skin. None of the women in our study said that they had participated in more radical age-resisting surgical interventions mentioned by Gilleard and Higgs (2000) such as cosmetic surgery, hair implantation or Botox injections. When asked at interview if they were bothered by their ageing appearance, the majority of women said that when they started to notice signs of ageing, in particular, greying hair, they had wanted to try to disguise this changing appearance. The desire to conceal the physical signs of ageing appeared to be influenced by a need not to appear different to others in their social group. As one woman explained:

I'm the oldest in my husband’s family and I think it makes a lot of difference at this time of age. I mean you start to notice the lines on the face and the grey hair and start to think of doing something about it. I bought a pot of vitamin B moisturising cream and cream for under my eyes and I use that religiously every day. I also tried dying my hair once, but it didn't look right. (R14; age 56)

The use of moisturising creams and hair dye represent what Gilleard and Higgs (2000) call ‘passive acts of consumption’. Although the use of hair dye was a popular form of age-resistance among women, it generated considerable ambivalence. On the one hand they did not particularly like the way that grey hair appeared to make them look older, but on the other hand, they did not want to create what they described as a ‘false image’ (see also Fairhurst, 1998):

Well I don’t try too much with my appearance [laughs]. Well the children persuaded me to dye my hair . . . Whether I should just accept that I’m going grey and just live with it or whether I just keep covering it up, I don’t know. I don’t want to have this sort of false image. I want to just be myself . . . I don’t like myself particularly with grey hair, but I don’t want the false image either. (R10; age 51)

Many women spoke about having coloured their hair once or twice in previous years. However, the public nature of this aspect of ageing appeared to result in concerns about portraying what they perceived to be an ‘inappropriate’ appearance. Once again, it is important to consider the link between public and private ageing. As mentioned earlier in the article, women’s experiences of both private and public ageing provided confirmatory evidence of growing old. Thus, women described themselves as physically looking older and physiologically feeling older. Their subjective sense of ageing, therefore, was that they were indeed growing old. Growing old gracefully was considered 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, therefore, was by means of avoiding looking like ‘mutton dressed as lamb’:

I think I will sit here and grow old gracefully. I started going grey fairly early and so I’m used to it. I had it dyed once but I don’t think older faces look right with dark hair. (R14; age 56)
Well, you don’t like looking in the mirror do you? You seem to somehow develop a surplus of skin . . . and I’m looking for the grey hairs . . . I don’t wear much make-up anyway, but I think that the older you get, the less you should wear. Because it looks as if you are trying to fill in the gaps. I think it’s [looking older] not something that any woman is best pleased about . . . ermm but it’s something that you have to accept, isn’t it? You know, you don’t wear sleeveless dresses any more. You wear things with short sleeves instead. You just have to recognize it and try not to look like mutton [laughs]. (R12; age 53)

Within public ageing, it would seem that hair, dress style and make-up are all adapted to create what is considered to be a socially acceptable body appearance (Featherstone and Hepworth, 1989). The notion of an acceptable appearance is derived from interaction with different social groups and a sense of ageing arising from a number of age-related physiological changes. Thus, the majority of women described their experiences of ageing in terms of looking older and feeling older. While they did not necessarily welcome ageing, they accepted it as an inevitable process and one that was unlikely to respond to resistance. Putting on a ‘youthful mask’ was therefore usually seen as neither desirable nor likely to be convincing. Most women, therefore, employed minimal age-resisting activities, and used these for a limited period of time.

A few women, however, did not appear to experience ageing in this way. In addition to reports of feeling youthful, these women appeared to be resisting the ageing process and turned to age-resisting activities in an attempt to remain young. They seemed to take a more active approach to consumption and adopted exercise and workouts to keep fit and lose weight (Gilleard and Higgs, 2000) in addition to more passive acts such as taking HRT:

I think that by maintaining a fairly healthy lifestyle you can aim to offset the ravages of old age as much as possible. And I think that nowadays, there’s so much on the market to help you – exercises and gadgets, and home gymnasiums. I think that HRT does help as well. Well, it certainly helped me to come to terms with getting old. It [HRT] continues to make you feel . . . your skin feels better and you have a bit more energy and feel more alive, and that helps you retain a bit of a youthful appearance. (R26; age 56)

Drawing on our analysis of public and private ageing, we offer some possible explanations as to why these women appeared to resist ageing.

We have suggested that public ageing is experienced through interaction with age-specific social groups, some of which are similar to women’s own age and others that are either younger or older. Membership of an older social group at times appeared to enhance a sense of ageing whereas membership (often through work) of a younger social group on occasion enhanced a sense of youthfulness. In turn, these interactions also seemed to play some part in women’s resistance to ageing.

Applying this argument to those women who actively sought to resist the ageing process, it may be that participating in an older age group may have
encouraged a desire to resist age and take part in activities which they believed would help them to look younger than their years. Two of the women who appeared to resist ageing were married to significantly older men and presumably had regular encounters with an older social group. One of these women suggested that her elderly neighbours invoked a sense of ageing in her, and it is possible that being married to an older man also brought about similar feelings. It is also possible that when people spend considerable time among different age groups, their age in relation to the other members becomes more significant and forms a more important part of their identity. Women who are used to being the youngest in their social group, therefore, might find that age-related changes in appearance have a particularly marked effect on their identity. This certainly seems to be supported by the findings of Coupland and colleagues’ (1991) analysis of video-taped conversations between people of different ages, where older people frequently make reference to their age and their being older.

Comparison with others of one’s own age is also facilitated by the media, which tends to portray middle-aged women as glamorous and youthful in appearance. Thus, it is possible for women to compare their ageing appearance with a much wider, albeit generally distorted, age-related group. One of the women we interviewed spoke about going to considerable lengths to maintain what she considered to be a youthfully attractive appearance. She exercised to lose weight, dyed her hair, wore clothes and jewellery more typical of younger women’s fashions (for example, short skirt, sleeveless low-cut top, ankle bracelet) and declared that she took hormone replacement therapy primarily for the maintenance of youth. Like many of the women interviewed, she saw the menopause as reinforcing her sense of ageing, but she also suggested that the media play an important role in encouraging middle-aged women to aspire to a youthful appearance through the images they reproduce:

I think the menopause brings this getting older bit home to you. You know this is happening and your body is changing, and you start thinking, oh gosh, I've got to do something about this. But attitudes are changing. I think it's got a lot to do with this baby-boomer thing. The media help with this because they're showing all these beautiful older women and they're saying, well look at her, she's 50 and she has the figure she had when she was 20. I think this makes people more aware that they're not quite as old as they used to be at that age. (R28; age 56)

A further possible explanation for age-resistance relates to private ageing, where the physiologically ageing body reminds people of human mortality. Whereas everyone, from time to time, becomes aware of their own mortality, there are occasions when exposure to the death of others can heighten this awareness. One of the women we interviewed made explicit links between her experience of physiological ageing and her own mortality. This woman had recently experienced the death of a close friend, her
brother was seriously ill and in a coma and she was being investigated for cancer of the mouth. The impact of these three events appeared to heighten her sense of ageing:

My brother had a heart attack, an asthma attack and pneumonia. And he still hasn’t regained consciousness . . . It makes you think of your own mortality . . . Because it [death] seems so much nearer. It’s like being on a conveyer belt and jogging along. (R2; age 55)

Later in the interview she said:

I’m looking more and more like my mother every day. But I don’t want to have that image. I’m not ready to have that image yet. I’m not ready to get old. I don’t think anyone wants to get old and no-one wants to die. (R2; age 55)

This woman spoke about using age-resisting activities such as hair dye, wearing make-up and fashionable, youthful clothes. However, she also expressed concerns about presenting an appropriate image for her age, in line with notions of public ageing. She also said that she had taken hormone replacement therapy in order to try to maintain a youthful appearance, but had stopped this once she became aware of the possible harmful effects.

Discussion

For most of the women in this study the prospect of growing old was something that was unwelcome but something that they were resigned to as it was considered to be natural and uncontrollable. Consequently, if they tried any age-resisting activities, they rarely did so for long. Exceptionally, a few of the women interviewed accepted the inevitability of growing old but were not prepared to surrender to the physical signs of ageing; they therefore participated in age-resisting activities.

On the basis of the data collected we have identified two aspects of ageing; first, public ageing, where visible age-related changes in appearance are experienced with reference to age-specific social groups; and second, private ageing, where less visible age-related changes in the body are experienced independent of wider social relations. We suggest that the body as attended to in public ageing is felt to be flexible and manipulable to some extent with the aim of creating an image that reflects the individual’s subjective sense of ageing or youthfulness. Within private ageing, however, the body is perceived as largely obdurate, providing little scope for control over age-related physiological changes. Whereas the flexible body experienced in public ageing offers the opportunity for body rejuvenation, the inevitable limitations of the body in private ageing invokes acceptance, even a sense of impotence, as growing ‘old’ becomes inevitable.

Theories that focus on the flexible body experienced in public ageing suggest that individuals are motivated to maintain a youthful appearance. This desire, it is argued, stems either from a need to conform to the
dominant culture of youth and sexuality (Biggs, 1997), or from a post-modern wish to present an appearance that is congruent with an inner sense of youthfulness (Featherstone and Hepworth, 1991). Although our data confirm that, to some extent, women participate in age-resistance, this was largely restricted to more passive acts of consumption such as occasional hair colouring and use of anti-wrinkle creams (Gilleard and Higgs, 2000). The key factor that appeared to limit women’s desire to resist their changing appearance was the obduracy of the body experienced in private ageing. As the women considered that there was little that could be done to stop the ageing process, they accepted that they were growing old. In turn, women were committed to presenting an image that they felt reflected their subjective experience of growing old and that was socially acceptable. Of importance here was the need to avoid looking like ‘mutton dressed as lamb’.

This perceived need to present a socially acceptable appearance is what Biggs (1997) describes as a ‘social mask’, which he associates with efforts to disguise a mature identity that is not afforded high value within a dominant youth culture. While our data certainly point towards a desire to present a socially acceptable image, such an image did not appear to be one of youthfulness, but rather, one that reflected their subjective sense of growing old. Hence, an unduly youthful appearance was considered to be a ‘false image’: an obvious mask that would signal inauthenticity.

Our respondents were members of the ‘baby-boomer’ generation, members of the cohort whom Featherstone and Hepworth predicted would be carrying new values and images of ageing as they entered middle age (1991: 383). Our data do not indicate that these women felt trapped by the ‘mask of ageing’, where the appearance of an ageing body prevents individuals from portraying their true sense of youthfulness. For these women did not report the persistence of an inner sense of youthfulness but, rather, the onset of a sense of private bodily ageing. Rather than resisting ageing for long, adjustments in external appearance were coming to be accepted as appropriate expressions of inner identity. This finding would seem to be supported by the findings of a large survey-based study carried out in Sweden by Öberg and Tornstam (1999), where the proportion of women reporting feeling that their body reflected whom they were increased with age. What seems to be clear, therefore, is that there may be a time limit to the adoption of vigorous efforts to mask external ageing, and, we suggest, this limit may be related to a growing sense of private ageing.

It might be argued that opportunities to embark on age-resisting activities are shaped in part by class membership and disposable income. Featherstone and Hepworth (1989), for example, claim that the middle classes in particular have been attracted by the prospect of fitness techniques to control biological age and ‘turn the clock back’. Certainly activities such as working out in a gym can be expensive if membership fees need to be paid to obtain access. While we found that age-resisting activities, including working out,
were rare, this had little to do with income and much more to do with notions of private ageing. Whatever the social class of our respondents, their age-resisting activities generally cost only a limited amount and were embarked upon for only for a short time.

It is also important to note that this article has been based on data from female respondents. Men are also likely to evaluate the ageing of their bodies according to culturally validated ideas and may embark on age-resisting activities. Indeed, following analysis of feature films nominated for an Academy Award, Markson and Taylor (2000) suggest that the ‘mask of ageing’ differs by gender. Future research therefore needs to be undertaken which compares women with men in midlife to see if they evaluate ageing in a similar way and embark on similar kinds of activities to help them to resist the ageing process or alternatively resign themselves to the perceived biological reality of the ageing process.

Conclusion

Although much of the recent sociological literature suggests that we live within an age-resisting culture, where individuals aspire to create a highly valued, youthful body image, our data indicate a more acquiescent approach to ageing, with women not going much out of their way to resist their ageing appearance. We investigated women’s experiences of ageing and identified a malleable body associated with public ageing, which is juxtaposed with the obdurate body of private ageing. Although there are undoubtedly increasing opportunities for creating a youthful body image, the motivation to participate in age-resistance is influenced by the experience of both public and private ageing, but in particular, is limited by the perceived rigidity of the body in private ageing.

Note

1. The original sample was randomly selected from women aged 51 to 57 years in 1999, registered with general practitioners in West Surrey Health Authority. At survey, women were asked to indicate if they were prepared to take part in the interview stage of the project. A total of 215 (52 per cent of those returning the postal survey) women agreed to be interviewed. Purposive sampling methods were used to select the sub-sample, with women being recruited according to: social class, hysterectomy, use of HRT and alternative therapies and their experiences of menopausal symptoms. Recruitment continued until ‘saturation point’ had been reached, where little new information was being heard (Bryman, 1996).

References


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