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‘I don’t want to be, feel old’: older Canadian men’s perceptions and experiences of physical activity

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Abstract

Relatively few older adults are physically active despite extensive research exploring barriers and facilitators and concomitant interventions designed to enhance participation rates. Building on the growing literature that considers the subjective experience of being physically active, we explored the meanings that older Canadian men attributed to physical activity broadly defined. Thus, we examined their experiences and perceptions of exercise, sport and/or leisure-time physical activities. Data are presented from qualitative interviews with 22 community-dwelling Canadian men aged 67–90. Our analysis resulted in three overarching categories that subsumed the men’s understanding of physical activity. ‘I do it for my health’ described how the men stated that their primary reason for engaging in exercise was to maintain their health and body functionality so that they could age well and continue to participate in sport and leisure. ‘It feels good’ referred to the various ways that the men derived pleasure from being active, including the physical sensations, psychological benefits and social connections they derived from their participation. ‘It gets tougher’ detailed the ways that the men were finding physical activity to be increasingly difficult as a result of the onset of health problems, declining body functionality and the social realities of ageing. We discuss our findings in light of the extant literature concerning age relations, ageism, and the third and fourth ages.

Keywords: older men; sport; exercise; leisure-time physical activity; subjective experience; age relations; ageism; third and fourth ages

Introduction

Despite well-documented evidence that physical activity is linked to health and wellbeing, physical activity participation declines with age (Colley *et al.* 2011; Kern, Reynolds and Friedman 2010) and, similar to their peers around the world, the majority of Canadian older adults are inactive (Statistics Canada 2015). Considerable research has been devoted to an elucidation of the factors that prevent or facilitate engagement in physical activity (Kosteli, Williams and Cumming 2016; Schmidt *et al.* 2016), as well as the effectiveness of various

interventions aimed at increasing older adults' activity levels (Bauman *et al.* 2016; Devereux-Fitzgerald *et al.* 2016; Olanrewaju *et al.* 2016). However, physical activity rates in later life remain low and thus researchers have turned to an exploration of older adults' subjective experiences of being active, with the goal of better understanding what (in)activity means to them in the context of their daily lives. To date, the bulk of this research has drawn upon mixed-gender samples (Bundon, Hurd Clarke and Miller 2011; Orr and Phoenix 2015; Phoenix and Orr 2014) or focused exclusively on older women (Bidonde, Goodwin and Drinkwater 2009; Heuser 2005; Kluge 2002; Kluge *et al.* 2012; O'Brien Cousins 2000; Sims-Gould *et al.* 2010; Tulle 2017). The relatively few studies that have considered older men's physical activity experiences have either looked at sport (Lozano-Sufrategui *et al.* 2017; Minello and Nixon 2017), structured exercise programmes (Grant 2012) or leisure-time physical activity (Liechty *et al.* 2014) in isolation. Most of the participants in these studies have been between the ages of 50 and 75, although two studies have included men up to the age of 82 (Grant 2012; Minello and Nixon 2017). As such, research that examines physical activity broadly defined, that draws upon a wider age range of older men, and that focuses exclusively on older men's perceptions and experiences is needed in order to understand better the relationships between age, gender and physical activity participation. Addressing these gaps and framed by age relations theory, our study used interview data with 22 older Canadian men, aged 67–90, to explore how men perceive and experience physical activity in later life.

Literature review

We begin by situating our study in our theoretical framework and then consider the existing literature that has examined older adults' subjective experiences of physical activity.

Theorising physical activity in later life

Within Western culture, oldness is reviled, if not feared, as later life is socially constructed as a time of inevitable and progressive infirmity, dependence, immobility, senility, social exclusion, obsolescence, and loss of productivity and physical appeal (Nelson 2002). In contrast, youthfulness is valorised and associated with health, independence, mental acuity, attractiveness, social engagement and active sexuality (Calasanti and Slevin 2001; Hurd Clarke 2011). These polarised conceptualisations of agedness *versus* youthfulness are taken for granted and underscored by age relations, or the use of age as an organising principle of society (Laws 1995). Age relations are 'social structures that privilege younger adults at the expense of old people and intersect with other relations of inequality' (King and Calasanti 2013: 699). In this way, age relations are reflected in and buttressed by societal ageism whereby older adults progressively lose social status over time and are subject to 'systematic stereotyping and discrimination' (Butler 1975: 12).

Physical activity has become an increasingly important part of age relations and societal narratives regarding agedness and youthfulness. Physical activity is positioned as an essential practice for the demonstration of the 'will to health' (Higgs *et al.* 2009: 687), or the fulfilment of one's personal and moral

responsibility to optimise and preserve one's health through appropriate self-care and engagement in health promotion practices (Crawford 2006). As well as establishing their morality, physical activity participation enables individuals to claim a youthful identity evidenced by their physical abilities and accomplishments, as well as their resultant health status (Hurd 1999; Katz 2000). Thus, physical activity is central to the distinction between good and bad ageing, also referred to as third age and fourth age. An idealised way to grow older, the third age is 'an ageing youth culture' (Higgs and McGowan 2013: 22) that is characterised by agency, health, self-fulfilment, social engagement and active leisure (Gilleard and Higgs 2000; Laslett 1996). Individuals in the third age are 'older but not old' (Higgs and McGowan 2013: 22). In contrast, the fourth age is a lifestage associated with dependence, frailty, loss of autonomy and pleasure, and ultimately death (Gilleard and Higgs 2010; Laslett 1996). The fourth age stands as a feared 'social imaginary' (Higgs and Gilleard 2015b: 116) that individuals aim to avoid by disciplining their bodies through engagement in consumer culture and health promotion. Ignoring the impact of social inequality and the accumulated advantage or disadvantage over the lifecourse (Katz and Calasanti 2015), the third and fourth ages exist as cultural metaphors for desirable and undesirable pathways in later life that individuals are assumed to choose through their lifestyles and consumption patterns.

Subjective experiences of physical activity in later life

In light of the complex meanings ascribed to ageing, health and physical activity, increasing attention has been paid to older men's and women's subjective experiences of being physically active (Orr and Phoenix 2015; Phoenix and Orr 2014; Tulle 2017). Within this literature, four dominant themes have emerged. To begin, these studies have established that many older adults derive pleasure from their physical activity pursuits (Grant 2012; Liechty *et al.* 2014; Minello and Nixon 2017; Orr and Phoenix 2015; Phoenix and Orr 2014). For example, some individuals emphasise the physical satisfaction that comes from the feeling of water on their skin while swimming, the smell of freshly cut grass on the golf course or the movement of their bodies while cycling (Minello and Nixon 2017; Phoenix and Orr 2014). Studies with older men have also found that they feel exhilarated after exercise and that their experiences of pleasure from physical activity increase with advancing age as a result of their growing appreciation of their functional abilities (Grant 2012; Liechty *et al.* 2014). Participants have also been found to gain pleasure from the documentation of their physical activities, the structure and purpose their pursuits bring to their lives, and the escapism from personal troubles that activity often affords (Minello and Nixon 2017; Orr and Phoenix 2015; Phoenix and Orr 2014).

In addition to pleasure, the research reveals that physical activity participation enables older adults to foster and maintain interpersonal relationships (Evans and Sleep 2012). For example, older women have described a sense of belonging that results from their involvement in structured exercise groups and sporting pursuits (Bidonde, Goodwin and Drinkwater 2009; Heuser 2005; Kluge *et al.* 2012). Similar studies with older men have found that they emphasise the importance

of the friendships with other men that arise from their participation in exercise and sporting groups (Grant 2012; Lozano-Sufrategui *et al.* 2017; Minello and Nixon 2017).

Additionally, older adults perceive exercise to be essential for the maintenance of their independence, health and wellbeing (Bidonde, Goodwin and Drinkwater 2009; Kluge *et al.* 2012; Grant 2012; Lozano-Sufrategui *et al.* 2017; Liechty *et al.* 2014; Minello and Nixon 2017; Sims-Gould *et al.* 2010). Some studies point to specific health and functional benefits that participants perceive result from their activities, such as improved balance, strength and flexibility (Bidonde, Goodwin and Drinkwater 2009). Older adults have also reported psychological health benefits from physical activity engagement, including the ability to cope better with stress (Bidonde, Goodwin and Drinkwater 2009; Minello and Nixon 2017), an improved sense of self (Kluge *et al.* 2012) and enhanced quality of life (Grant 2012). Others have found that older adults consider physical activity to be an important tool for combating the general physical decline they associate with being old (Hudson, Day and Oliver 2015; Lozano-Sufrategui *et al.* 2017). For example, the older men in the study by Liechty *et al.* (2014) reported that their primary motivation for engaging in leisure-time physical activity was to prevent future, additional health losses. Similarly, the older men in Minello and Nixon's (2017) study perceived that cycling enabled them to stay healthier longer, participate in other sports and activities, maintain social connections with family, and cope with existing physical and mental health concerns. That said, older men also often express concerns about their changing health and continued ability to sustain their participation in physical pursuits (Grant 2012).

Finally, older adults often point to their engagement in physical activity as a means of distancing themselves from ageist stereotypes (Hurd 1999; Minello and Nixon 2017; Phoenix 2010; Phoenix and Sparkes 2009; Phoenix and Smith 2011; Pike 2012). Claiming a third-age identity, active, older adults often reject the label and cultural connotations of oldness (Hurd 1999; Pike 2012). Some scholars argue that in this way physical activity is a means by which older adults may construct positive identities in the face of cultural aspersions of ageing and oldness (Phoenix 2010; Phoenix and Sparkes 2009; Tulle 2008).

Methods

Study design

Aiming to illuminate the meanings that older men constructed and attributed to physical activity in a social context delimited by age relations, the study employed a social constructivist, qualitative approach (Marvasti 2004). Twenty-two interviews were conducted at various locations, including private homes (eight participants), a quiet room at the university (eight participants), public locations of participants' choosing (five participants) and by telephone (one participant). The interviews were conducted either by the first author, the third author or a trained research assistant. The length of the interviews varied extensively, ranging from 1.5 to 6.75 hours (average of approximately 2.5 hours) in duration. A total of 55 interview hours were conducted. In addition to reimbursing their travel expenses, we offered the participants a \$25 gift card from a merchant of their choice as compensation for

their time. Ethical approval was received from the local university and all participants provided informed consent prior to the interviews.

Participants

The participants came from a convenience sample, having been part of a previous study conducted in 2013 that was focused on older men's experiences of ageing, ageism and masculinity. The 29 men in the original study were recruited from a large urban centre in Canada through advertisements in local newspapers and posters in public facilities. We attempted to recruit all 29 original participants for the present study focused on physical activity and ageing, but were only successful in recruiting 22 men as two of the original study participants were deceased, two had moved and we were unable to locate them, and three declined due to disinterest (one) and other commitments (two).

The participants ranged in age from 67 to 90 years and, as noted in [Table 1](#), varied in terms of their age, place of birth, marital status, level of education, employment history and household income, although most were Canadian born, married, well educated, retired and from the middle or upper class. While 21 of the men identified as heterosexual, one man identified as homosexual. All of the participants resided independently in the community. The men's engagement in physical activity varied widely from those who were relatively inactive, to those who were moderately active, to those men who were very physically active. The men self-reported that their choices of activities varied with the seasons but the total amount and intensity of their engagement remained relatively constant over the course of a year. Three men engaged in less than two hours of physical activity per week as they participated in gardening, golfing, walking and using a stationary bike. Ten men were moderately active as they were involved in between 2.5 and 5 hours of physical activity per week, including attending exercise classes, bicycling, mowing the lawn, playing golf or baseball, using a stationary bike, soccer refereeing, swimming, walking and working out at a gym. Finally, nine men were highly active as they participated in between 5 and 8 hours of physical activity each week, including doing aerobics, bicycling, hunting, playing golf or soccer, rowing, snowshoeing, swimming, walking, weight lifting and working out at a gym. The degree to which the men were currently physically active was largely similar to their patterns of participation in childhood and middle age, many reported increasing their activity in middle age relative to their youth and then experiencing declines in participation in later life, often as a result of health issues. Additionally, the types of activities that they had participated in had often altered over time. In particular, the men had played more sports in their youth (such as baseball, soccer, football, basketball and hockey), done more leisure activities in their middle age (such as boating, bowling, bicycling, golfing, running, skiing and hunting) and were now more likely to be walking, working out at a fitness gym, doing physiotherapy and balance improvement exercises, or using stationary bikes.

Procedures

The interview schedule was developed through a close reading of the existing literature pertaining to ageing and physical activity. The men were asked to describe all

Table 1. Demographic information and descriptive characteristics

	N
Age (years):	
65–69	6
70–74	5
75–79	4
80–84	3
85–89	3
90–94	1
Place of birth (continent):	
Africa	0
Asia	1
Europe	4
North America	16
South America	1
Marital status:	
Married/common law	14
Divorced/separated	3
Widowed	2
Never married	2
Living apart together	1
Education:	
Some high school	2
High school diploma	2
Post-secondary education	14
Graduate school	4
Employment status:	
Employed full-time	1
Employed part-time/semi-retired	3
Retired	18
Total household income (Can \$):	
<15,000	0
15,000–39,999	4
40,000–64,999	6
65,000–89,999	4
90,000–114,999	1

(Continued)

Table 1. (Continued.)

	N
115,000–139,999	3
≥140,000	3
Not reported	1

Note: N = 22.

of the physical activities that they engaged in over the course of a typical week and year, as well as their reasons for doing so. The men were also queried about what they liked most and least about their various physical activities, how they defined their activities (*e.g.* as exercise, leisure, sport, *etc.*), the benefits and negative effects they experienced, the factors that encouraged and delimited their participation, and if, how and why their engagement in their various physical activities had changed over time. To ensure anonymity, each participant was assigned a pseudonym, which is used in the Findings section.

Analysis

All interviews were digitally recorded and transcribed verbatim. Transcripts were analysed by the first and second authors using an inductive thematic analytic process (Patton 2002). We began by going through the transcripts to identify all of the data that pertained to physical activity. From there, the first and second authors read and reread the physical activity data and independently identified all of the themes within each interview. Next, the first and second authors worked together to generate collaboratively a codebook based on our identification of the themes. The data were then coded using NVivo 10. Finally, the first and second authors reviewed the coded data and collapsed codes collaboratively into higher-order categories, which included ‘I do it for my health’, ‘It feels good’ and ‘It gets tougher’. To ensure that our analysis was trustworthy, we used an audit trail to document our analytic decisions, formally and informally sought feedback from our participants to confirm our interpretations, and employed rich descriptions in the presentation of our findings (Marshall and Rossman 2016).

Findings

In the sections that follow, we elucidate the three overarching categories that detail the ways that the men spoke about their perceptions and experiences of physical activity in later life.

‘I do it for my health’: exercise for maintaining health and the body

When asked why they engaged in their chosen forms of physical activity, all but one of the men emphasised the importance of exercise in particular for the health and maintenance of their bodies. The men made comments similar to 71-year-old

Donald who worked out at a gym once a week for an hour and occasionally went for walks: 'I do it for my health ... What encourages me to exercise ... mostly is the feeling good after and the ongoing, long-term benefits.' The long-term health benefits of exercise that the men identified were sometimes expressed in terms of their continued ability to engage in sport and leisure-time physical activities. For example, highly active, 68-year-old, Victor stated:

It's a necessity for my health ... If I didn't go to the gym, I could never play soccer ... I'd be sitting at home getting fat ... I have to be in good shape to go and play soccer. That compels me to exercise. I train ... because I don't want to be, feel like an old man.

In this way, the men stressed that one of the key health benefits of exercise was that it enabled them to engage in valued physical pursuits and thereby fight ageing and feeling 'old'. Viewing ageing as a choice, the men stressed that exercise enabled them to, as 70-year-old Otis who walked several times a week and played golf in the summer, put it, 'age the way I want to'.

The notion that exercise enabled the men to grow older in desirable ways was juxtaposed against fears about the alternative. Thus, many of the men made comments similar to those of 87-year-old Charlie who went for walks up to an hour in length three times per week:

I know that activity is good for you – that you should do some daily activity ... That's the medical principle and I think it's important ... so it's both a feeling that I should be doing this ... and the fact that if you don't keep active you might become ill quicker.

Using words like 'should', 'must' and 'ought' to describe exercise as a socially and personally required pursuit to avoid poor health, the men's descriptions were often imbued with moral overtones. Harvey, who worked out at the gym for an hour once or twice a week and went for 15-minute walks each day, put it this way, 'It's partly about maintaining my body, partly an obligation I feel ... to keep myself in reasonable working order.' In this way, the men reported feeling compelled to be physically active even though a few of them conceded that they did not enjoy all of their exercise practices. Jesse, aged 83, who worked out at the gym with a trainer three times a week for a total of close to five hours of exercise and enjoyed seasonal activities such as hunting and snowshoeing, put it this way:

Well going to the gym, I dislike immensely but I know if I don't commit myself, I will fail faster than I am now ... that's why I exercise ... if your body doesn't function well, both physical and mental parts of your body are affected adversely and I think it's really important to keep them all going ... I'm trying to maintain my physical being. I'm not trying to be an athlete by any stretch of the imagination ... I think the older you get, the more appreciation you have of, you know, how important it is that you function properly ... I don't care how long I live but I would hope to enjoy life while I lived.

In addition to fears about illness and general bodily ‘failing’, the men often articulated their concerns about becoming disabled, dependent and immobile. For example, Phillip, aged 67, who swam lengths, worked out at the gym or went for bike rides depending on the season for an average total of more than five hours per week, as well as enjoying regular leisurely walks, asserted the following:

I see my exercise programmes as a really important part of maintaining my physical vitality as I age ... I’m a senior citizen now and [exercise] is one of several things I’m doing to try and keep my body together so that I can age without turning into an invalid ... Our bodies are meant to move and the only way to keep those joints working is to just keep moving them ... I don’t want to be 80 years old and in a wheelchair.

In this way, exercise was discussed in relation to the avoidance of physical dependence, immobility and frailty. Luke, aged 77, a highly active individual who swam laps for an hour four times a week and went for regular walks, had this to say:

I think number one, you’re doing it for the physical benefit ... One of the things that is noticeable to people my age is the decrease in your strength ... and possibly more things that could happen to you ... And that gets to be a pain in the ass ... So the physical activity is to counteract that a little bit ... To slow it down ... I’ve always believed that if you don’t do any physical activity, you’re gonna wither away. I mean, basically, the whole concept of physical activity is to maintain a semblance of health.

While most of the men felt that exercise would help them to avoid physical decline, a few men also expressed the hope that exercise regimens would promote their longevity as well as their quality of life. For example, Tony, aged 77, who went for walks several times a week for an average total of exercise of 2.5 hours, asserted the following:

My health is important to me. I want to be there for the girls. I’ve got a 16-year-old granddaughter. I want to see great grandchildren! ... I don’t want my daughters to watch me crumble ... I want to be who I am right now at 90.

Exercise was constructed as a means of postponing their ultimate demise, or as 71-year-old Arnold, who got close to four hours of exercise each week through either workouts at the gym or golfing and cycling, stated: ‘At my age, exercise is holding off – what’s the word I’m trying to find? Nature? Old man? Death or something like that.’

Notably, six men had already experienced serious health issues, which had impacted their functional abilities and resulted in new or altered physical activity routines. These six men ranged in age from 71 to 87 and reported having experienced cancer treatments and surgeries, degenerative chronic diseases, high blood pressure, strokes and various heart surgeries. As a result of their health issues, the men were engaged in exercise programmes that had been prescribed by

physicians. For example, Steve, aged 87, who attended two hours of exercise classes each week, relayed the following:

When I had my valve replacement and then the small stroke ... they said you've got to go through this Healthy Heart [exercise] programme at the hospital. And then you graduate from that and they suggested I carry on at this [wellness clinic]. So I go to a Healthy Heart group that does exercises on Tuesday and Thursday mornings ... I don't think exercising is really gonna improve me, it's just gonna keep the status quo as close as it possibly can.

While the men did not believe that physical activity would reverse the health declines they had already experienced, they hoped that their efforts would preserve their remaining physical abilities and health status. Having been to the brink of their mortality and made aware of their impending frailty, the men stressed that they were exercising so as to 'keep as healthy as we can, for as long as we can' (Ben, aged 71, who attended cardio rehabilitation classes for a total of 4.5 hours per week following open heart surgery).

'It feels good': sport, exercise and leisure-time physical activity as pleasurable

All but one of the men noted that different aspects of sport, exercise and leisure-time pursuits 'felt good'. Many of the men emphasised the physical satisfaction they derived from exercise as they made comments similar to those of Arnold who stated: 'It feels good. You come back [from the gym] feeling really good. Kind of on top of it for the day.' Indeed, the men frequently used words and phrases such as 'enjoyable', 'wow', 'refreshed', 'relaxed', 'great, energised, revitalised' and 'kind of Zen' to describe the way that exercise 'felt good' in their bodies. The men further likened the physical sensations of post-exercise to what Phillip referred to as 'a natural kind of feeling of pleasure, a natural high'.

The men noted that sport, exercise and leisure-time physical activity also felt good in terms of a range of psychological benefits. Many of the men noted that physical activity led to improved self-esteem and wellbeing, as articulated by Tony:

The only thing I do normally is a 25-minute walk every morning ... That's all I need to do ... but I feel so good to do it. And it just keeps me in check ... I feel better about myself so I think it's good for my psyche ... It allows me to think more and get stuff away. So it's a little therapy too, it's therapeutic for me.

As well as suggesting that physical activity was psychologically therapeutic, the men also often remarked that being active enabled them to manage the stresses of daily living better. Melvin, aged 69, who had previously been highly active but was currently recovering from an injury and only able to engage in physiotherapy exercises and moderate walking, had this to say:

Swimming ... it's just pleasurable. It's nice to be in water. Water just has a lot of emotionally, mentally and physically healing properties, I find ... I don't feel complete unless I'm doing fitness ... When I'm working out regularly ... I feel good all around – physically, mentally, generally, emotionally. I can handle stress better –

handle life's ups and downs a little better ... Being physically fit makes me feel strong. You know, it gives me strength, physical and otherwise.

For these men, the ability to engage in sport, exercise and leisure-time physical activities collectively left them with a strong sense of accomplishment. The men noted that their resultant feelings of pride came from a combination of the sense that they had fulfilled their moral responsibility to care for their bodies as well as a perception that they were, as Max, aged 90, who rode a stationary bike for a total of approximately one hour per week, put it, 'special' by virtue of their continued ability to be active:

I feel pleased with myself ... You get a satisfaction ... You get a feeling, 'Hey, that's good for you!' ... I do it because I enjoy doing it and it works fine with me ... and I think it's something special at my age to be able to ... do it ... I feel that I'm doing something that is good for me or it's good for my body.

Indirectly or directly comparing themselves to ageist stereotypes of physical decline, the men thus suggested that they were exceptional by virtue of their physical abilities despite their advancing ages.

Finally, the men frequently noted that physical activity felt good in terms of the social benefits they reaped from their various sport, exercise and leisure-time physical activities. In particular, the men noted that physical activity enhanced or maintained their social connections with their peers, as expressed by Victor who described what he liked most about playing soccer in this way: 'Camaraderie ... after the game. We go for a beer ... that's mostly the only socialising that I do on a regular basis ... So yeah, that's the fun part of it.' Indeed, many of the men noted that the time they spent with others during and after their exercise and sporting regimens constituted their primary source of social interaction. While most of the men emphasised the pleasure they derived from interacting with same-aged peers, a few men additionally commented that they appreciated how their physical activities gave them an opportunity to engage with younger individuals, as expressed by Luke who stated:

The thing I enjoy about swimming is that they're a much younger crowd. It's kind of nice to be around young people ... I think most of the younger age groups are happy to see you there, which, you know, makes you feel good about yourself.

In this way, the men noted that physical activity afforded them a way to forge relationships across generational boundaries, thereby enabling them to resist the social exclusion associated with advanced age, and leading to heightened self-esteem and wellbeing.

'It gets tougher': physical activity as increasingly elusive

Even as they emphasised the importance of exercise for health and wellbeing, all of the men also noted that their bodies were changing with age and, as a result, physical activity was becoming increasingly difficult. The men described a variety of health issues, including arthritis, back pain/injuries, heart disease, high blood

pressure, kidney conditions, osteoarthritis and vision impairment, that had negatively impacted their ability to be physically active. These health issues had further resulted in losses in stamina, strength, flexibility, balance and mobility, which had collectively slowed them down. For example, Phillip, who had carpal tunnel syndrome, plantar fasciitis, high blood pressure and type II diabetes, reported: 'My energies aren't what they used to be. I walk more slowly than I used to ... I just can't keep up with a lot of my friends when we're walking.' A few men noted that in addition to having less energy and having 'slowed down' over time, they also now took longer to recover from exertion. Edgar, who had asthma and had had a quadruple bypass, put it this way:

Your body doesn't recuperate as fast as it did when you were younger. What used to take an hour now takes maybe all day. That is, I guess, the biggest change I find with getting old and playing sports. Because your body doesn't bounce back so you gotta pace yourself accordingly.

Consequently, the men suggested that they had to alter their expectations of their bodies and be more intentional in their pacing and planning so as to manage their changing physical abilities.

Many of the men reported that they had begun to avoid certain forms of physical activity as a result of their changing bodies. Some men eschewed activities that they perceived might aggravate existing health concerns, as articulated by Danny: 'Because of my back injury I avoid all exercise that could ... compromise my back because I don't know what I can do and what I can't do.' Others were concerned about incurring new injuries, such as Oliver, aged 67, a body builder who worked out an average of eight hours per week: 'I train lighter now ... and I try to control my motions so the exercises are done much more strictly ... I want to avoid injuries ... I'm very careful. I try to train, you know, smarter.' The combination of altered body functionality and concerns about becoming injured had culminated in many men reluctantly giving up previously valued forms of physical activity. For example, Melvin had undergone hip replacement surgery and developed arthritis in his neck, forcing him to give up both tennis and badminton. He, like the other men who had ceased various physical pursuits, expressed a strong sense of loss:

This hip is deteriorating so I've stopped playing tennis and ... because I have an arthritic neck, playing badminton was just too hard on my neck and I had to give that up. So there's a tremendous loss in my life ... It's tough when you find you can't do this or you can't do that ... realising how mortal you are and how physically vulnerable you can be as you age.

Thus, accommodating their physical abilities was often a difficult, emotional process as it forced the men to give up deeply valued pursuits and confront their mortality.

The impact of the men's altered body functionality was further compounded by a variety of environmental factors, including weather and topography. For example, Melvin relayed the following:

I tend to reduce my fitness walking if the weather's really, really hot unless I'm able to get out early in the morning ... or if I'm able to go much later in the evening when it's a little cooler. As I've gotten older, I find myself more sensitive to the heat ... For health reasons I don't want to push myself too hard.

A few men noted that their health issues meant they were no longer able to drive, which curtailed their opportunities for physical activity. For example, 75-year-old Jack, who walked an average of seven hours per week, noted that the trail he liked to walk on with his dog was at the top of a steep hill that he was finding increasingly inaccessible because of arthritis, vision impairment and declining mobility. He stated:

To get to the start point [of the trail] is uphill ... If my vision issue allowed me to drive, that would not be an issue at all ... But I have to count on somebody else to get me up there to do the job ... and that is an inconvenience sometimes. [My wife] has other things to do, or what have you, although she works quite hard to meet my schedule.

At the same time, the men often reported that a lack of same-aged peers precluded their willingness to engage in some physical activities. For example, Max who had previously been an avid golf player had given up the sport because most of his previous golfing companions had died and he lacked peers with similar sporting interests:

I used to play golf maybe a couple of times a week for a few holes or a lot of holes. Almost everybody I used to play with isn't here any longer ... Most of my friends ... that I played golf with ... have died.

Other participants explained how their lack of physically active, same-aged peers made them feel excluded in certain spaces, as expressed by Victor who described going to the fitness gym in this way:

You feel like a fly ... in a cup full of milk, the only one there ... Where [are] the other old people? A lot of young people there ... What am I doing here? I'm out of place here! ... So that's a deterrent.

In other words, the men felt that they stood out by virtue of their ages in ways that left them feeling uncomfortable, unwanted and disinclined to return.

In light of the positive meanings that they attributed to being active, their reports of having begun to alter their physical pursuits and their expressions of sorrow over changing abilities, we asked the men to reflect on how they anticipated feeling about future continued losses. A few men were pragmatic as they stated that they would simply adjust as their bodies changed. For example, Jesse stated: 'If I was deteriorating, not being able to do [physical activity], I would have to recognise that I guess ageing has set in. I don't think it would upset me terribly.' However, the majority of men asserted that no longer being able to be physically active would be distressing as they made comments similar to those of Phillip, who stated:

I'd be very cranky ... I would have a very hard time dealing with having to give up physical exercise. I would like to see myself as a sort of vital kind of person who is engaged in life. And, ah, you hear of people who live their entire lives sitting in front of a computer on social networking and that kind of thing ... I find that prospect appalling. Yeah, it would take me a long time to cope with not being able to be physically active.

The men asserted that becoming unable to engage in physical activity would impact their sense of identity and mean that their worst fears about growing older had been realised. In doing so, the men reaffirmed the importance of physical activity for their sense of self, wellbeing and ability to cope with the stresses of everyday living.

Discussion and conclusions

In this paper, we have explored the meanings that older Canadian men attributed to being physically active, broadly defined. Previous research with older men has focused on only one type of activity, considering sport, exercise or leisure-time physical pursuits in isolation (Grant 2012; Liechty *et al.* 2014; Lozano-Sufrategui *et al.* 2017; Minello and Nixon 2017). Our research adopted a wider view of physical activity, asking the men to reflect on all of their physical pursuits rather than just honing in on their experiences in one particular area. Confirming the results of previous studies (Bidonde, Goodwin and Drinkwater 2009; Kluge *et al.* 2012; Grant 2012; Liechty *et al.* 2014; Lozano-Sufrategui *et al.* 2017; Minello and Nixon 2017; Sims-Gould *et al.* 2010), we found that the men perceived exercise in particular to be a strategic and critical health promotion practice that enabled them to do the things they most enjoyed. However, rather than just simply promoting and maintaining their health, the men also considered exercise to be an important means of enacting and demonstrating their 'will to health' (Higgs *et al.* 2009: 687). Having deeply internalised cultural narratives about the personal responsibility for health (Crawford 2006), the men viewed exercise as an individual and moral obligation. Thus, the men were conscientious about regularly engaging in exercise, even as some of them also conceded that they found it unpleasant.

In contrast, the men described sport and leisure-time physical activities as enjoyable pursuits. Like previous studies, we found that the men emphasised the physical pleasure (Minello and Nixon 2017; Phoenix and Orr 2014), psychological benefits (Bidonde, Goodwin and Drinkwater 2009; Grant 2012; Kluge *et al.* 2012; Minello and Nixon 2017) and social connections (Evans and Sleaf 2012; Grant 2012; Lozano-Sufrategui *et al.* 2017) their sporting and leisure activities engendered. In line with previous research (Hurd 1999; Minello and Nixon 2017; Phoenix 2010; Pike 2012), the men spoke with great pride about how their physical pursuits and abilities set them apart from less-active, fourth-age others who were perceived to not be ageing as well. Although their sport and leisure-time physical activities helped them to, at least temporarily, construct and retain positive identities (Phoenix 2010; Tulle 2008), the men's membership in the third age was increasingly tenuous as health issues and changing abilities had already begun to make physical activity participation more difficult and less pleasurable.

Our research highlights the centrality of physical activity to age relations in contemporary Western culture (Hurd 1999; Katz 2000). Underlying the men's engagement in exercise, sport and leisure-time physical activity was a fear of ageing and the resultant, progressive loss of social currency (King and Calasanti 2013). In short, the men neither wanted to be nor feel old, which they equated with cultural understandings of the fourth age (Gilleard and Higgs 2010; Laslett 1996). This denigrated and feared way of ageing was considered to be synonymous with a loss of health and functional abilities, and thus with the inability to be physically active. At the same time, the men viewed physical activity as a vital practice for warding off entrance into the fourth age of physical decline and decay (Higgs and Gilleard 2015*b*). In this way, physical activity was both essential for and emblematic of the men's third-age identities as agentic, youthful, socially valued and self-fulfilled individuals who were ageing optimally (Higgs and Gilleard 2015*a*; Higgs and McGowan 2013).

Our study contributes to the literature by including the voices and experiences of those not often heard in the physical activity literature, namely men aged 80+. The inclusion of these men enabled us to better tease out the impact and ascribed meaning of declining health on physical activity participation. Health issues were not uncommon among the men, as six had suffered severe health problems which had resulted in them being prescribed physical activity by their physicians and many had had to give up previously valued activities, much to their dismay. The men were confronted with the difficult task of negotiating societal discourses regarding the moral imperative of physical activity for health and optimal ageing (Crawford 2006; Higgs and Gilleard 2015*a*) and the realities of their declining physical abilities. Our findings underscore the fact that while older men adhere to the belief that physical activity is important for their health and wellbeing, and exude health consciousness (Ayo 2012), participation is often not a simple matter of being sufficiently motivated (Franco *et al.* 2015; Katz and Calasanti 2015).

In addition to highlighting the importance of age, health and body functionality for physical activity, our findings echo previous research, which has found that socio-economic status is an important determinant of physical activity participation (Ashe *et al.* 2009; Ball *et al.* 2006). The men in our sample were primarily from the middle and upper classes, and many were engaged in physical pursuits such as exercise classes, golfing, working out at a gym or organised sports, which required considerable financial resources. As such, our findings reinforce previous assertions by scholars that although societal messages regarding physical activity place the moral onus on all individuals to engage in health promotion, the ability to be physically active and remain in the third age are not equally attainable by everyone (Higgs and Gilleard 2015*a*; Katz and Calasanti 2015; Pietila *et al.* 2013). Rather, age, health and social class combine in complex ways to privilege particular groups over others.

Our study findings are limited by the relatively homogeneous nature of our participants and the fact that they came from a convenience sample. Future research should investigate the physical activity participation of older men of lower socio-economic status to tease out further how social class informs physical activity practices and understandings in later life. Additionally, studies that consider how race and ethnicity shape older men's physical activity engagement would add to our

understanding of the impact of social position on men's ageing experiences. Finally, research that investigates the meanings that inactive, older adults attribute to exercise, sport and leisure-time physical activity would further illuminate how individuals make sense of and respond to age and health norms in later life.

In conclusion, the existing literature has established that individuals who perceive physical activity to be enjoyable and/or purposeful are more likely to remain active (Almond 2010; Devereux-Fitzgerald *et al.* 2016; Franco *et al.* 2015; Kosteli, Williams and Cumming 2016; Olanrewaju *et al.* 2016; Schmidt *et al.* 2016). Our findings highlight that pleasure and purpose in physical activity are shaped and delimited by the ways that individuals internalise and make sense of norms concerning personal responsibility for health, cultural constructions of ageing and oldness, and the physical realities of later life.

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