

Older women and their representations of old age: a qualitative analysis

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ABSTRACT

In this article we shall be analysing the representations of old age and ageing made by three generations of older women with different life stories (single, married, children and childless). Our principal findings, based on a qualitative analysis of 25 in-depth interviews conducted with three generations of older women (65–74, 75–84 and 85 and older), mainly reveal their reluctance and even refusal to define themselves as ‘older or elderly women’, largely due to persistent stereotypes linking old age to dependency, social isolation and fragility. Aware of the social prejudice regarding women and old age, they reject it unanimously. Older women represent a challenge to these homogenising preconceptions of old age, which they, on the contrary, experience in a multitude of ways, often enjoyable. Their conceptions of ‘ageing well’ are diverse and do not correspond to a clinical definition of ageing. Their representations of ‘ageing well’ and of ageing express positive values of autonomy, independence, consistency and integrity, maintenance of physical and intellectual health, and being socially active so they can ‘stay in the swing of things’, in the continuum of their lives and future projects, rather breaking with contemporary life or existing on the margins of society.

KEY WORDS – elderly women, older women, representations, old age, ageing.

Introduction

Old age, ageing and seniors have been the subject of a growing number of studies in the social sciences for some years now, both here and elsewhere in the world (Attias-Donfut and Segalen 2002; Caradec 2001; Charpentier 1995; Charpentier and Quéniart 2008, 2009; Charpentier and Bilette 2010; Grenier 2007; Hurd Clarke and Griffin 2008; Hurd Clarke, Griffin and Maliha 2009; Featherstone and Hepworth 1998; Featherstone and Wernick 1995; Hummel 1998; Hummel and Perrenoud 2009; Höpflinger

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1995; Katz and Marshall 2003; Lalive d'Épinay 1995; Lalive d'Épinay and Spini 2008). This interest, of course, partly stems from the statistical evidence of ageing populations in all industrialised countries. In Québec, Canada, for example, people aged 65 and over represented only 5 per cent of the population in the first half of the 20th century; but this percentage has risen sharply and now stands at 14.3 per cent. Further, it is estimated to reach 16 per cent in 2011, 20 per cent by 2021, and roughly 30 per cent by 2151 (Statistics Canada 2006). Fifty years ago, retirement age, ranging from 60 to 65, was the benchmark designating people as old or elderly. Today, old age has expanded tenfold, comprising many stages of old age and inspiring research into the new forms of ageing as part of an ageing continuum (Lalive d'Épinay 1995). In other words, the traditional reference points associated with old age have faded and been supplanted by a multiplicity of trajectories linked to ages and generations. In this context, new categories of old age based on chronological age have emerged: the 'young old' (65–74); the 'old old' (75–84) designating older persons advancing in age; and, finally, the 'oldest old' (85 and over), or very old, commonly known as the elderly or aged (Lalive d'Épinay and Spini 2008).

Charpentier and Billette (2010) note that the overall figures on demographic ageing fail to reveal the preponderance of women in this group in Québec. Women constitute 58 per cent of people aged 65 and older. The ratio of women to men increases with age, with two women for every man among those aged 80 and older, and five women for every man among centenarians. Although we are beginning to know more about the objective living conditions of older women through general surveys of their health and wellbeing, in the biopsychosocial sense, we still know little about their self-representations as older and ageing women, and how they see their contribution to the family and society in general. The few studies of older women that rely on the women's own descriptions of their situation as the basis for understanding their experience are indeed extremely rare (Bernard *et al.* 2000; Charpentier 1995; Hurd 2000; Hurd Clarke 2001, 2010; Morell 2003; Quéniart 2005; Quéniart and Charpentier 2008). They are mainly from Europe and essentially concern the role of grandmother (Attias-Donfut 2009; Gestin 2002). This is why we decided to conduct a qualitative study aimed at exploring the position and role of older women in the family and public domain, and, more specifically, analysing their representations of themselves, old age and ageing.¹ In this article, we will present the initial findings of these analyses. But before we do, since our analysis is based on social representations theory, we will briefly discuss this notion and the principal scientific writings on older adults.

The notion of social representation

The sociologist Émile Durkheim was the first to evoke the notion of collective representations to designate a stock of commonly held beliefs and feelings that translate ‘the way the group thinks in terms of its relationship to the objects affecting it’ (Durkheim 1922: XVII, trans.), in opposition to the individual representations made by individual members of society, which, he believed, were the domain of psychological study. But this notion really took hold in the second half of the 20th century, beginning with Moscovici’s conceptualisation in his thesis on psychoanalysis (1961). He originated the idea that representation is always at the interface between society and the individual, which is why he chose the term social, rather than collective, representation. In the 1980s, Moscovici’s theory of social representations led to extensive research on all kinds of topics (justice, culture, health and illness, professional life, the body, madness, childhood, maternity), from a variety of perspectives (sociology, social psychology, anthropology, history, political science, social gerontology).

Researchers agree that social representations are always representations ‘of something (the object) by someone (the subject)’ whether the object is abstract in nature, like madness, the media or old age, or has to do with a particular category of social actor, like physicians and teachers. They designate ‘a socially determined and shared form of knowledge, having a practical purpose and contributing to the construction of a given social unit’s shared reality’ (Jodelet 1989: 36, trans.). As a way of thinking and interpreting the world and our relationship to others, social representations guide, justify and may explain actions and behaviours. In short, then, they correspond to the need to comprehend better how individuals – in our case, older women – construct their social reality and how individual thinking becomes rooted in social thinking, even as it is changing it:

[they offer] a functional view of the world, that enables the individual or group to imbue their behaviour with meaning, and understand reality, by means of their own reference system, and thus adapt to it and define a place. (Abric 1997: 12, trans.)

The social dimension of representations is manifested in many ways: through the context and conditions in which individuals live, through the ideologies, values and cultural codes associated with specific social positions and affiliations, and by the original framework, in other words, individuals’ sociocultural baggage (Jodelet 1989). Social representations also have functions of identity: they ‘enable the formulation of a gratifying social and personal identity, one that is compatible with socially and historically determined systems of standards and values’ (Mugny and Carugati 1985: 183). Social representations analysis is clearly appropriate in a context where

families and generations are experiencing striking changes in their structures and values, and where old age is an ever-growing presence in our individual and collective worlds.

Social representations of old age: some research findings

Researchers studying the social and cultural aspects of old age and ageing have observed that in Western societies, the negative social representations of old age, evoking loss, impairment and dependency, have predominated for many decades. They refer to what Hummel (1998) termed *vieillesse ingrate* (unpleasant old age), a perspective in which older adults are seen as isolated, suffering diminishing autonomy, dependent, indeed in a state of physical or mental impairment or degeneration. The data gathered in a number of surveys reveal the powerful hold these representations have on the general population and on seniors themselves (Featherstone and Hepworth 1998; Featherstone and Wernick 1995; Perrig-Chiello 2001; Hurd 2000; Hurd Clarke 2001): 'It is significant that the definition of ageing is characterised by a generally negative vision that is endorsed by young and old alike' (Perrig-Chiello 2001: 77, trans.). A broad Swiss study conducted in the late 1990s with over 2,000 older persons produced similar findings. It is interesting to note, as Lalive D'Épinay (1995) found, that the older adults who were interviewed appeared to distinguish between a false old age that was actually a stage of life in which they experienced some signs of ageing but did not feel old, and real old age, which everyone detests or fears:

It is around this distinction between expressions like, on the one hand, 'growing old,' 'ageing,' 'being older but not yet old' or 'not really old' and on the other, 'being truly old,' 'very elderly' and 'extremely aged' that a general representation has emerged that distinguishes what I would call relative old age from extreme or absolute old age. (Lalive d'Épinay 1995: 335, trans.)

An in-depth analysis of 130 autobiographical accounts of men and women aged 65–80 revealed that the passage to 'absolute' old age is experienced as a break between the before period of 'normal' life and the after period characterised by exclusion from normal life. Further still, the representations associated with 'absolute' old age are all negative, and expressed in the form of various losses experienced by seniors, whether related to health (disability or illness), the sense of social usefulness and the pleasures of life, or, in the specific case of women, beauty and attractiveness. As Lalive d'Épinay (1995: 341) notes, 'seduction is not the exclusive concern of women, but the desire to please is associated more with women's role in bourgeois society. When women can no longer please [men] what place is left to them?' Women

experience losses connected not only with their physical and mental health, but also, with a fundamental aspect of their sexual/gender identity: their femininity. Ageing confronts women with the prescriptions of femininity that demand both beauty and youth (Perrig-Chiello 2001). As Hurd Clarke and Griffin explain:

The women's narratives highlighted a tension between being physically and socially visible by virtue of looking youthful, and the realities of growing older. Paradoxically, social invisibility arises from the acquisition of visible signs of ageing and compels women to make their chronological ages imperceptible through the use of beauty work. (2008: 670–1)

It is only recently that more positive representations of ageing have emerged, which focus on independence, freedom and the development of long-neglected skills (Höpflinger 1995; Hummel 1998), what Hummel terms *vieillesse épanouie* (fulfilled old age). These representations are associated with new images of seniors, who are defined rather as active and independent retirees who are socially engaged and involved with their families and friends (Caradec 2001; Charpentier and Billette 2010; Charpentier and Quéniart 2008). This new way of conceiving of old age is, according to Hummel, an 'institutional representation' in the sense that it is primarily the expression of an ideological position, and 'anchored in a specific age group: young adults (who will become the "young old"!)' (Hummel 1998: 32). Most striking, the characteristics of the seniors associated with these new representations are indeed 'the exact opposite of the elements composing the image of unpleasant old age. The comparison of these two images is telling; it is as though one was the negative replica of the other' (Hummel 1998: 20).

Further, the image of active, fulfilled old age has not replaced the image of unpleasant or impaired old age: the two images co-exist. We believe they both express, in their own way, in the first case, negatively and in the other, coincidentally, the predominant values of our postmodern societies, with their cult of youth and beauty, autonomy, individual fulfilment and productivity-performance as the measure of a successful life – and old age (Lalive d'Épinay 1995). As such, 'the Golden Age has taken the place of the Dark Age' (Hummel 1998), associated with dependency and burdens, and it is up to each individual to profit as much as they can from the new freedoms offered by retirement and old age.

While some rejoice at the emergence of these positive images of freer, socially involved seniors, others point out the adverse effects. For instance, these images tend to hold each older person exclusively 'responsible for their old age, or rather, how they experience old age' (Hummel 1998: 28, trans.), implying that everyone can have a happy and healthy old age if they

want it. Furthermore, they urge older adults to be active, and above all, ‘to fight the visible physical effects of old age’, thereby reinforcing

the pressure exerted on every individual to keep the appearance of youth as long as possible . . . Indeed, instead of witnessing greater tolerance of old age, we are instead seeing a change of behaviour on the part of seniors who are tending to adopt a ‘youthful manner’. (Höpflinger 2009: 4, trans.)

This is of course much truer of older women, as shown by Gestin in her analysis of articles about retirees, particularly retired women, in the journal, *Notre Temps*:

Women are the primary targets of the edict to ‘age youthfully’ . . . the ‘super-granny’ is part of a generalised youth- and action-oriented discourse advocating ‘youthful ageing’ and activity. . . . While there is a will to counter the negative images of ageing women – articles like ‘*La soixantaine, cap de bonne espérance*’ [‘The sixties, cape of good hope’] present portraits of happy and fulfilled sixty-year-olds, comfortable with the physical evolution of their ‘femininity’ – this concern only serves to bolster the injunction against growing old: the age of entry into old age and stigmatisation must be blurred. (Gestin 2002: 26, trans.)

In Québec, even a magazine for seniors, *Le Bel âge*, features images of women in their forties rather than in their seventies. Similarly, other researchers have reported the exhortation to pursue an active sex life or sexuality used as a ‘gauge’ of youth:

Sexual health has become reassigned to a broad range of factors considered vital to identity in midlife and successful aging thereafter. By realigning sexuality, gender, age, the body, lifecourse, and identity and in seeking ‘new sex for old,’ our culture exposes its impossible ideal that people live outside of time. (Katz and Marshall 2003: 13)

In a context characterised by the co-existence of two dichotomous social representations of old age, it is interesting to examine how seniors themselves perceive it, especially women, since they have been neglected in most studies and subsumed into the all-encompassing term of seniors. We believe it is crucial to consider gender in any consideration of older adults, not only because women represent the majority of this age group, but also, indeed especially, because sexual power relations define the experience of ageing. In fact, the structuring factors of our patriarchal society still influence discourse, institutions and social practices, with real consequences on women, especially elderly women – not only socio-economic, but also health and lifestyle consequences.

In addition, in the wake of Caradec (2001) and others, we believe that it is important to avoid the homogenisation of the elderly, in this case, women, and the decontextualisation of their experiences of ageing. Recent studies conducted with older women show that they have not one, but multiple experiences of ageing (Charpentier and Billette 2010). Can we say the same

about their representations of ageing? If so, are the differences we observed connected more with women's lifecourses and living conditions or with their current position in the order of generations (young retirees *versus* elderly or aged women)? This is what we will try to discover as we analyse the ways they define themselves and conceive of the ageing process.

Methodology

Approach

Considering our objectives and the nature of our subject, we opted for inductive qualitative methodology based on anchored theorisation (Glaser and Strauss 1967), which is well suited to the gathering and analysis of representations, to the extent that with this approach, we can record social discourse about life experiences as they are lived and evolve over time, in this case, those of older women over 65.

Sampling criteria

As we mentioned earlier, social representation as a cognitive process always consists of the representation of an object by a subject. Most importantly, it depends on the social position of the actors and their relation to reality (Jodelet 1989). For this reason, it was essential that the sample take into account the older women's socioeconomic background and social position. Furthermore, since social representations are evolving systems influenced by ideologies and cultural models, it was important to recruit older women according to the demographic distinctions mentioned earlier that also comprise different social generations. In short, the sample was diverse, taking into account the literature and our three research variables: (1) we selected the three generations of older women to which many researchers (Caradec 2001; Lalive d'Épinay and Spini 2008) refer: women aged 65–74, 75–84 and 85 and over; (2) socio-economic background (women of differing levels of schooling, with or without labour market experience, having held various kinds of jobs, *etc.*; and (3) family/marital experience (mother/childless, married or single). As is true of any category, these categories are debatable, but they are nonetheless appropriate given their association with three very different historical periods, especially in terms of women's place and role and the family.

Respondents

The sample of older women on which we base this exploratory analysis of older women's representations of old age and ageing comprised 25 Québec

women (Francophones) from three generations: nine respondents between 65 and 74, ten between 75 and 84 and six women aged 85 and over. With regard to socio-economic background, eight women had a modest to low or low family income, 14 were from the middle class and three were from more privileged backgrounds. Most of the women were married (nine) or widows (nine); the others were single (three) or separated/divorced (four). All of the women in this last group except one were from the first generation of seniors. Other than the three single women, the 22 others had adult children and 18 of them had grandchildren of varying ages (13 respondents had between one and three children and seven others had four or more children each). Differences with regard to trajectories and formal schooling were seen to be associated with the generation to which the participant belonged.

For instance, six of the nine women in the first generation (65–74) had a university degree (three had a bachelors, one had a master's and two had a PhD). All the women (except one) in this generation held paying jobs, both traditionally female (teacher and nurse) and non-traditional (journalist, medical counsellor, financial advisor, psychiatric professional). Last, in addition to work and family, they were, and still are, socially involved, either in their community or in the work context, in the form of volunteerism. And this is to say nothing of their role within the family.

The 16 other women in the 75–84 and 85 and older category followed the trajectory typical of women who were born in the first decades of the 20th century, before women had access to higher education and the labour market: seven women had at least completed ninth grade, four had finished grade 12 and the other five had pursued post-secondary studies (bachelors, nursing programme leading to a degree). They are all married or widows. Ten of them worked in the home all their lives (including five of the six women aged 85 and older), and those who had been in the labour market had held a traditionally female job (secretary, technician, family support work, factory worker) and this, only during the period before marriage.

Methods of gathering and analysing data

Because our approach emphasises the subjects' point of view, we wanted to let the older women speak as freely as possible about their experience. We decided to employ semi-structured interviews as our data-gathering method. We conducted the interviews,² which lasted from 50 to 90 minutes, in the respondents' homes, beginning the interview by letting the women answer an initial open question: 'We'll start with some general remarks. Can you talk

a bit about yourself?’ This open question allowed them to describe their experience and perceptions in their own words, in the terms of their own reference system. Next, for the purpose of systematic comparison, we addressed the two overall themes of our interview guide, themes we judged to be fundamental to the comprehension of the position and role of older women in the family: their representations of older women and grandmothers (perceptions and images of themselves and older women in general, the position and roles of older women in society), and the dynamics of intergenerational relationships and transmission (nature, type, values and knowledge transmitted, transmission methods, *etc.*). At the end of the interview, the women were invited to fill out a short questionnaire to collect socio-demographic information.

All the interviews were transcribed and coded, first, for the purpose of identifying all the themes addressed (planned and emerging). Next, in accordance with the principles of anchored theorisation analysis, the goal of which is to formulate a theory that is rooted in the empirical situation of little-researched social phenomena, we grouped the themes into conceptual categories. We then compared them to analyse their meaning, employing appropriate analyses, for example, concerning ageism and the body as a social construct. To ensure the validity of our results, throughout the analysis process we used a data triangulation method, what Denzin (1978) calls investigator’s triangulation: every interview was analysed by a research officer and by the two lead researchers, and the findings were discussed and finally validated by the group. In this study we reached data saturation for most of the analytical dimensions, both empirically (repetitive data after 15 stories) and theoretically (relevance and solidity of the conceptual categories). However, due to the limited number of women interviewed in each age category, our conclusions cannot be generalised to all older women, especially when considering a diverse range of ethnic groups.

Findings

Because our intention was to analyse older women’s social representations of old age and ageing, many of the interview questions were directly related to this: ‘What does ageing mean for you?’ and ‘When I say older women, what image or model comes to mind?’ The analysis of our respondents’ answers to these two questions serves as the basis for this article. We will first consider their representations of themselves as older women, and then move to their conception and definition of ageing – the fact of growing old in a society where youth is the synonym for vitality and performance.

Self-representations: rejection of the notion of 'older woman'

The majority of our respondents in all categories combined, whether or not they had held a paying job, or were married, widowed or single, did not consider themselves to be older women, and indeed refused this label. For them, the expression old woman referred to something they had not yet become:

I see [old people] as someone like my grandmother . . . who wore a funny cap on her head. For me, that was a real old person! . . . It's strange! I don't see myself as an older person. (Bernadette, 76)

In other words, older women are their grandmothers, their mothers' friends, neighbours and others with whom they have no resemblance:

Q.: When I say older woman, what image or model comes to mind?

A.: Well . . . I think it best describes someone else, not me (laughs).
(Josette, 91)

It's funny, but we don't feel that old. We live our lives. I told you my age, but I don't feel that age. (Denise, 85)

Older women are mostly passive and not very smart because they don't stand up for themselves. (Céline, 80)

The people around me who describe themselves as 'old ladies' are people who don't have any projects. (Adèle, 73)

She's not even 80 and she's started complaining about all sorts of things. When I was 80 I went skiing (laughter) and I've always had a circle of friends. (Gabrielle, 94)

[An older woman] is someone with osteoporosis. That's the image I have of it. (Barbara, 67)

Older people, now they say seniors. . . . what I mean is that mostly they're in wheelchairs . . . it's solitude . . . and an older woman – to me, it means sadness . . . An elderly woman, really aged, it's sad. It means being cut off from life in the sense that they don't want to go out or do anything . . . Nothing interests them either. But they take a lot of pills too. I'm talking about the rest homes, not people who are independent and live at home, old but independent. No, they're heavily medicated and it really upsets me to see that. (Laure, 65)

We can see that, for these respondents, the expression 'being an older woman' is synonymous with slowing down, inactivity, boredom and isolation. It also evokes illness, or rather, drugs and institutionalisation. They cannot identify with these negative representations of old age, associated with the loss of physical and cognitive capacity, fragility and dependency, because they do not reflect their own experience. Indeed, the older women we met with all appear to be very concerned with remaining vital, autonomous,

active, maintaining their social networks and preserving their intellectual curiosity, and this, regardless of the generation to which they belong:

For me, it's important to remain open to others and what's going on in the world... When you start turning in on yourself, that's when you start to wither... (Claire, 72)

It's important to keep up with current events. Not always remove yourself from what's going on... Yes, I'm turning 99 in November (laughter) and I'm fit as a fiddle. I walk with a cane and recently I was given a walker, but I only use that when I go out alone, because with the cane, I have to hang on to something, but with the walker I can walk by myself... Here you see us in a particular environment [a long-term care residence where she has just moved]. We're all women, some are ten years younger than me and they've already lost interest in things and reading. It's physical, and I'm a little unusual in that respect. I'm still steady on my feet. (Arlette, 98)

As I was saying, I don't think of myself as truly old. I'm still curious and I still have projects. I think I'll continue having all kinds of projects. (Barbara, 67)

For some, it's as if they were dead inside... I'm not like that. I still love to dance. I dance and I'm the life and soul of the party. I love it. People look at me and say, 'it can't be, it just can't be... that woman can't be 81!' (Rita, 81)

Keeping the mind active, continuing to do crosswords, reading... if you don't know the word you're looking for, you check the dictionary. But at the same time, I'm a bit unsocial. I talk to people but I don't often make friends. Actually, I don't make any new friends. (Chantal, 80)

Their ideal older women are women who like them, remain active:

There are some actresses who still act in plays and are very active. I say to myself, 'that's how I want to be'. Because the day I close my door and just wait for the end to come... well, that must be a living hell. But it's all related to your health too. Both your physical and mental health. (Laure, 65)

I like to see women who exercise and do all kinds of things to stay fit. (Lise, 93)

What I like about some women is that they're still active, that is, if they're healthy. I like that they stay physically and intellectually active and aren't just focused on themselves. (Claire, 72)

Of course, I admire Lise Payette [a former government minister and currently a well-known journalist]. But there's another woman I'm thinking of. She must be 90 by now, and for me, she's always been a model—an intellectually vital woman. There's another woman who paints. She's 87 and is still living in her apartment. She's still very mentally alert. So that's it. My ideal older women are women who take care of themselves and who don't neglect the intellectual side. I don't want to see these fat women munching their chips in front of the TV. I try not to look at them. Or, if I do, it's to motivate myself and tell myself 'I don't want to be like that'. (Adèle, 73)

Moreover, if for all these older women, maintaining a social life is an important part of their self-representation, taking care of their physical

appearance and staying fit is equally important for many, not just the young baby-boomers:

Women of my age . . . who still like to dress up, get their hair done, get a manicure, go shopping, go out, have some wine with a nice dinner – that’s what it means to me. (Jeanine, 70)

I moved into an apartment building with a pool and I go swimming every other day. I believe you are responsible for your body. (Chantal, 80)

In terms of my body, I try to stay in shape . . . there are some health problems that can’t be avoided, but I want to stay fit enough to be able to have fun in life . . . I do about 20 minutes of exercise per day, just what the herbology practitioner suggested so that I can stay active and continue to get pleasure out of life. (Barbara, 67)

First, the most important thing is, as much as possible, to take care of your appearance. I mean, how you look and your personality. You should always have your hair done and be well dressed. (Arlette, 98)

It would seem that the concern for one’s feminine attractiveness is not merely related to gender-based social standards, but also to the capacity for mobility, vitality and pleasure that of course typically characterises youth, and also, for many, ‘ageing well’. Our data consequently resemble the data of other recent studies (Featherstone and Wernick 1995; Hurd 2000; Hurd Clarke 2001; Katz and Marshall 2003) that reveal that many older women resist images of ageing which evoke mind and body degeneration, often by proposing alternative definitions. This was the case of the women who Hurd interviewed:

The findings from this study indicate that while older women do in fact espouse negative evaluations of aging bodies, there may be some resistance to a correspondingly negative evaluation of self and identity. The aging process seems to be accompanied by a shift in priorities such that an emphasis on physical beauty in the eyes of others as well as in the eyes of the self is replaced by a valuation of health which is described in relation to others and in terms of freedom from disease, chronic illness and declining energy. (2000: 92)

Last, while most respondents refused to identify with the term older women and did not perceive themselves as such, this is mainly because it evokes the stereotypical view of the old as a social burden: ‘We’re not just society’s dead wood. I really dislike how people talk about ageing’ (Claire, 72). Some of them observe the effects of social prejudice against seniors that leads to social exclusion, stigmatisation and lack of consideration of their experience on the part of younger generations:

I said to my grandchildren: in Africa there’s an old saying that when an old person dies, a library burns down. So I said: ‘value your grandmother’s experience’ . . . I remember that when my grandparents spoke, people listened to them. They represented all the knowledge accumulated over the years. Nowadays,

people tend to shove the old into the corner – there, entertain yourselves with a little line dancing now and then. . . . But we need for people to listen to us too. (Mona, 80)

We must concur with Attias-Donfut and Segalen (2002) that ‘seniors are not the flavour of the month’. It seems that everything – changes in education, the central importance of autonomy and independence, rejection of authority figures and traditional obligations – is conspiring to render the experience of older adults less valid, if not obsolete. Our respondents’ reticence regarding the term older woman could also be taken as resistance to considering old age as a process that structures every dimension of their lives: their identity as a woman and their position and role in society, a position that is all too often on the margins or peripheral to social action and engagement. On the contrary, most of them affirm that older women must ‘stand up for ourselves’, ‘say what’s on our mind’ and refuse to stay ‘in the corner because the only thing we’re good for is to knit socks’.

Representations of ageing

Accepting the passage of time. While they reject the ‘older woman’ label because of the social prejudice attached to it, the respondents speak of ageing in terms of a phase, an inevitable stage to which they must adjust, and above all, which they must ‘accept’. For them, this means, first of all, accepting physical changes and the advent of further tangible markers. Body transformations have a direct impact on self-representations and, as such, ‘accepting old age’ is about finding that ‘congruence between self-image and body image’ because it is not the body that must adapt to one’s self image but rather the self image that one must accept to see transformed’ (Vanneinwenhove 2009: 77).

. . . we have to accept our old age. Accept that our body changes, accept the aches and pains and drawbacks, just accept that this is how things are now. (Lorraine, 77)

You know we talk a lot about being old, having sore knees, a bad arm . . . we all have our problems but we laugh about it. (Denise, 85)

We’re getting old and it’s normal. We have to accept the fact that we’re not young any more . . . you have to accept that you’re older and that sometimes you just have to lie down. (Rita, 81)

Getting old means adjusting mentally to it and making sure that, physically speaking, you can handle this age change. (Arlette, 98)

It is important to establish harmony between self-image and identity in order to integrate the notion of passing time, accompanied, inevitably, by the ‘limits of existence’ (Charton 2005: 54), in other words, get used to the fact

of one's ageing, and integrate it psychologically, especially for women in the first generation – aged 65–74:

Getting used to and accepting that I am an ageing woman with a lot fewer years ahead of me than behind me, and that the last stage will be death. And then understand that it's not all bad, you can handle it and still have a lot of pleasure in life. (Josée, 71)

The oldest respondents, aged 85 and older, have already accepted their old age, and the sense of completeness they feel as they get older not only instils in them the awareness of being fortunate, but also stimulates their desire to be and to remain 'lively and engaged'.

We all get old. We visit each other and talk about what's going on in the world and look at how things have changed. Sometimes we're not happy and other times we think that this is a good time too, and we want to go on living. (Denise, 85)

I tell myself that the past is past and we don't know what the future will bring. You just have to live day by day. I never thought about it; I just accepted it. Sometimes I say to myself, 'Oh, if I was younger, I'd do this and then I'd do that'. But that's normal. I don't spend time feeling sorry for myself, can't do that. (Gabrielle, 94)

When you've accepted it [old age] you can live a good life. You try to take advantage of every moment because you know life won't last forever. We're lucky. (Denise, 85)

The way older women relate to the future also seems to be linked to their perception of old age as a significant stage of life. In other words, for them, the road ahead is not futile; on the contrary, it is part of their continuing life trajectory:

We age the way we lived our lives, so not much is different. As I said, I'm curious and I still have projects. I think I'll continue having all kinds of projects. (Barbara, 67)

Continued involvement in groups or work also appears to reinforce this continuum, which imbues the present with meaning:

[because I work part time] I still feel very much alive and active and for me, that's what is important, not the cheque. (Odette, 73)

Feeling alive, being active and in good health appear to be essential to a serene anticipation of old age:

I still see myself with a great future ahead of me because I'm in pretty good health. . . . I moved out of my house and I'm living with my son now, where I'm very happy. I'm well cared for and I feel loved. I think that's how I'm going to live until I die. (Bernadette, 76)

These women, some of whom are still married, others widows, all of whom are involved with their family and community and in good health, feel the weight of their years but are generally 'ageing well'. This is defined as self-acceptance, maintaining positive relationships with others, and a sense of autonomy and control over one's environment (Laberge *et al.* 2003).

Their conception of this final stage of ageing that Erickson³ called ‘integrity’, a period of reflection in which people either consider they have ‘lived a full life’ or are consumed by a feeling of desperation (Houde 2003: 99), seems to be a product of the older person’s physical, cognitive, relational and socio-emotional state. In this case, the age of the respondents and their living conditions also influence their attitude to old age. In contrast to those who are surrounded by their family and suffer no mobility problems, one of our respondents, a widow living in a nursing home, said that she does not want to live until 100 because of her physical condition, which has been altered by her advanced age; however, she seems happy about what she has accomplished in her life:

I’m happy despite everything. I’ve lived my life. I’ve reached 93 but I have lived a good life with my children and all the rest. What more could you ask for? My time is up, life is over for me, that’s all there is to it. (Lise, 93, a widow)

At this stage of life she is engaging in retrospection on her past and everything she has experienced. While old age would seem to be a good time to take stock and reflect back on her existence, her resigned outlook on the future expresses a sense of ending – life continues but for her, it is over.

Having time for oneself and for others. The older women in our study also consider old age as a time when their relationship to daily life and time itself changes. This is manifested differently, depending on age and generational affiliation.

Old age offers freedom. For the women in the first cohort of the baby-boomer generation, indeed, retirement represents a major biographical transition period, marked by a reconsideration of personal priorities and new life projects: ‘Freedom and the sense of shedding scheduling constraints are two important aspects of what some women call their “new life”’ (Quéniart 2005: 13, trans.). Those of our respondents who had recently retired or were recalling that period, mentioned it as a time of respite following trajectories in which household work, the education and care of children and loved ones, consumed a great deal, if not all, of their time (for those who took on the traditional roles of wife, mother and housewife). Frequently, the moment that children leave home marks the beginning of a period when they can focus on themselves and their own pleasures:

Once you’ve reached a certain age, [you can] have fun and do the things you like to do, because you never had time to do them when you were young. (Bernadette, 76)

Here, the notion of having fun reflects a new self-regard and focus on one’s interests in a relationship to time that is now partially freed of the imperatives

of familial duty. Similarly, marriages are often revitalised during this period when the daily urgencies characterising the mid-life years evaporate; one lives more in the here and now, making the most of the time one has left (Houde 2003). This cycle of life, in which time is increasingly porous and less structured by obligations, especially work, corresponds, in all the personal stories, to the period of retirement, either that of the women themselves, if they had paying jobs, or that of their husband. This was the case of one of the respondents. Her husband's retirement inaugurated a period of freedom, travel and time for themselves, individually and together:

We had a cottage in Maskinongé that we converted into our main residence. We lived there for 12 years. My husband died when he was 69... So those were the 12 best years of my life, when I could do what I liked, when I liked and go out with my husband, not be alone. (Lise, 92)

Like many women of their generation, the other retired respondents, aged between 65 and 74, who had paying jobs while taking care of their family, viewed this stage of life as a period in which they were able to take time for themselves, enjoy the small pleasures of life, pursue their own interests, achieve their dreams and feel free. For those who could afford it, travel represented all of these things:

My health is pretty good right now, so I can live out my dreams and accomplish what I want to do... I travel, I don't turn down any chance to take a trip at the moment. I didn't do much of that during the time I was raising my family... I went to Norway... And now, I want to go to the North Pole to see the reindeer. (Pierrette, 73)

Retirement not only allowed these women to 'distance themselves from the structured time of their earlier years' but also to 'rediscover possibilities they had put aside' (Pennec 2004: 100, trans.).

I often talk about my science training, but I also have an artistic side that I never had much time for. Now, I'm taking a watercolour class. I registered last year and now I'm taking it again. There's this side of me that wants to express itself; a sensitivity and expression of beauty that I want to develop. (Odette, 73)

I gave my name and I'm going to have a class in August. In September I'm starting a regional tour, we're going to the lower St. Lawrence River region. I was asked to lead the classes and they've already given me the materials. (Adèle, 73)

In all of the accounts, then, retirement appears to be the 'reference period' or 'inaugural action' leading to the exploration of a new stage of life (Charton 2005: 71). Lavigne d'Épinay (1995) conceptualises this golden age in the same terms, although more broadly, as a specific time just after the mid-life period and before old age, when individuals, free of the constraints of work and family, can creatively invest in life, on their own terms, according to their resources. If 'young old' age and, in corollary fashion, retirement appear to open the door to an age of freedom, this redefinition of the

relationship to time is largely conditioned by the respondents' social positions. Coming from modest to privileged socio-economic backgrounds, and benefiting from schooling and an income during most of their family lives, these 'young old women' are in a position to anticipate retirement with serenity, regarding a whole world of possibilities. They are among the women for whom 'Time for oneself and the redefinition of priorities is more easily achieved... because recognition of their previous status and commitments and their economic resources keep them at a remove from family injunctions' (Pennec 2004: 101, trans.).

Although these young old women who are privileged in terms of resources and social position can organise their retirement from the perspective of redefining personal and marital space, they continue to devote time to their grandchildren and family, except now they have multiple social engagements to orchestrate: time for themselves, for their partners, family and intergenerational relationships. More specifically, in this configuration of filial relationships, mutual aid and intergenerational support exist, but are manifested in an irregular and sporadic fashion, depending on the situation, events, resources and each person's interests.

I wouldn't give up my holidays because of the grandchildren. I love them very much and I think we're all close and everything. But for me, grandchildren are not the be all and end all. (Claire, 72)

Like my sister-in-law, she goes to her kids' house and cleans. I don't agree with that. My daughters could use help with the cleaning but at a certain point I said no, I'm not going to go and clean my daughters' houses. They can clean their own houses. I don't think you should babysit a child instead of sending him to daycare. I think that if we do that, we're limiting ourselves too much. I think we should encourage everyone to get together, and that's it. (Pierrette, 73)

In this respect, these respondents' family culture seems to be characterised by family independence and the discontinuation of support. Many of our respondents emphasised this spirit of 'reciprocal autonomy' that characterises their filial relationships, especially with their children:

I don't see them very often, but I don't nag them about it. I don't say come and see me! When are you coming to see me? I don't call them for no reason. Usually I'll call when I have something particular to talk about. (Pierrette, 73)

In terms of families, for sure, what I would like to see is that old people stay with their families longer, so that there's a family unit but there's independence too. For myself, I absolutely wouldn't want to end my days with my daughter and her kids. I'm talking about me, but I think it's true in general. I absolutely don't want to live and be dependent on my daughter or my grandchildren. My space of freedom is my choice. (Adèle, 73)

The accounts of the younger older women show us, then, that the relationship to old age changes according to the new social generations

and transformations in ‘generational styles’ (Mauger 2009: 8). For instance, the young 70-year-olds lived their youth during the Quiet Revolution⁴ and the feminist movement, a time of freedom movements that disrupted gender relations and indeed Québec society in general. They also had the chance to pursue post-secondary studies and carry on work or public lives. Many of them refused to confine themselves exclusively to maternity, and their lifecourses are therefore characterised by greater individualisation and social mobility (Attias-Donfut 2009). This explains why the intergenerational relationships of most of these women, and by extension, the time they devote to their families, is marked more by discontinuity than inter- or intragenerational reciprocity. These women are in the forefront of what Attias-Donfut (2009: 53) terms the ‘pivot generation, which, in a certain way, has broken with preceding family models by introducing much more radical changes than those brought by earlier generations and by the next generation’.

Old age as an opportunity to care for loved ones. The existence of the respondents aged 75 and older was characterised by the sexual division of space and work, the role of helper and care-giver, household tasks and intimate labour; in fact, these things are part of how they self-identify as older women. In old age and old old age, they evolve along a ‘path of continuity and tradition’ rooted in firmly circumscribed standard and family roles (Charton 2005: 72). Support for loved ones continues to be a focal value channelling most of their time. From this analytical perspective, we do not observe a significant difference between the two generations (75–84 and 85 and older); their trajectory is the product of traditional social organisations.

Most of these respondents’ activities and leisure time appear to be monopolised by time devoted to their families. Unlike the other grandmothers who want time for themselves, their free time remains more focused on the family; they seem to be concerned more about offering love and less, as they get older, with responsibilities and obligations:

I have two grandchildren and I treat them like my children. Maybe I even give them some special treatment because I know they are young and sometimes they need help and I can give them that help. While you’re still alive, if they need a little money for their projects, grandma will help them. (Monique, 79)

Being a grandmother is wonderful if you’re in good health and can appreciate the grandchildren and the great-grandchildren. It seems like they’re really encouraged to see us in good health, and of course, we’re interested in how they’re doing in school. That’s the important thing. And as a grandmother who has led a very busy life, who impresses them with all the things she’s done, that feels pretty good! (laughter). . . . A grandmother should always be around or accessible to the young if they’re looking to be comforted. That’s really what grandmothers are all about and the young can try to

comfort them too. . . . We're all pretty close. We get together for every birthday and we're really tightly connected, especially my two daughters, we're really close to them. (Arlette, 98)

I looked after my grandchildren at least once a week in their home. I had a lot of fun and we laughed a lot. (Chantal, 80)

Some of the stories appear to reflect a 'culture of mutual aid' in which reciprocity in terms of the exchange of resources, care and services among the generations is ongoing or, according to Attias-Donfut (2009), is manifested directly:

I'm lucky. My children all support me. They come and see me all the time . . . Yes, it's nice to be on the receiving end . . . I'm very happy to have them. (Lise, 93)

If something happens, you don't have to call 56 neighbours, all you have to do is call your sister. (Jeanine, 70)

For another respondent, the most important thing in life is to be there to meet the needs of one's children and grandchildren: 'We're a continuous line, they are our offspring, it's important' (Aline, 77). Clément and Lavoie (2001: 111), in their study of care-giving to older loved ones with diminishing autonomy, qualify this type of family relationship the 'familial model', a model that is closed to the outside, in which mutual aid practices are influenced by the 'seal of obligation. The instrumental dimension of relations is striking. The identity seems to be primarily rooted in the familial "us" (fusional families)'.

We hope that they [our children] stay close like we were close to our brothers and sisters. My husband was close to his sisters and brothers and so am I. We hope that the fact that there are just two of them [children] now, that they won't lose each other when we're gone. . . . And that the little ones will continue to see each other. Because as you get older it's easy to grow away from people. When there are problems, it's really important to have someone close, your brothers or sisters, it helps you to get through it. (Paulette, 79)

This traditional obligation of reciprocity exists more often in families from working-class and underprivileged backgrounds, rural areas, among older people and those from certain ethnic groups.⁵ According to our respondents who share these mutual aid practices, the family institution 'structures time', present and future (Roussel 1989, quoted in Charton 2005: 66, trans.).

Conclusion

As we mentioned at the beginning of this article, two representations of old age now co-exist, one positive – the image of the active senior – and the other

negative – the dependent aged (Caradec 2001). It is the second image that appears to dominate the imaginations of the older women we interviewed, leading them to refuse to define themselves as ‘old’. These preconceptions about old age create a reductive vision of seniors because ‘not only do they diminish singularities, but they also serve to de-dialecticise, reify and depersonalise’ their actual existence by creating an ‘essentialist perception’ of the ageing process’ (Gabel, quoted in Conseil du Statut de la femme, Québec 2010: 13, trans.). More generally, in our societies signs of ageing are social markers that tend to exclude the old from public spaces – associated with productivity, economic viability, mobility and youth – and relegate them to the fringes – at home, in retirement homes and hospices. This is even more true of women, subjected not only to preconceived notions linked to ageism, but also to sexism, which imposes different standards, based on gender, particularly the prescriptions of femininity characterised by youth and beauty: ‘Women face a double standard of ageing and gendered ageism, as they are at once old and female’ (Hurd Clarke, Griffin and Mahila 2009: 710–1). The negative representations of women naturally have an impact on women, especially on their self-esteem. They also have influence, to the point of shaping social policy. Indeed, they play a determining role in the continuing existence of discriminatory mechanisms and multiple forms of institutional and political exclusion of which older women are the victims: unequal pension plans, limited access to health care and services, the feminisation of poverty, *etc.* (Charpentier and Quéniart 2009).⁶

Our research shows that older women represent a challenge to these homogenising preconceptions of old age, which they, on the contrary, experience in a multitude of ways, often enjoyable. Aware of the social prejudice regarding women and old age, they reject it unanimously. Their conceptions of ‘ageing well’ are diverse and do not correspond to the clinical definition of ageing (Duggleby, Bateman and Singer 2002; Laberge *et al.* 2003). Keep in mind that the notion of ‘ageing well’ was developed by Rowe and Kahn (1997) to offer a more positive vision of ageing, but it still stems from the conception of ageing as a pathology. To fight ‘normal’ ageing, essentially viewed as degeneration, this notion is about controlling one’s lifestyle, through diet and physical exercise. The older women we interviewed transcend this limited definition. Their representations of ‘ageing well’ and of ageing express positive values of autonomy, independence, consistency and integrity, maintenance of physical and intellectual health, and being socially active so they can ‘stay in the swing of things’, in the continuum of their lives and future projects, rather breaking with contemporary life or existing on the margins of society. In this respect, several of the stories, particularly those of women in

the oldest age category, indicated that opportunities to travel and mobility were important factors in determining older women's sense of independence (Duggleby, Bateman and Singer 2002; Finlayson and Kaufert 2002). Older women's perceptions of ageing and 'ageing well' should inspire researchers to broaden – indeed radically transform – the meaning of concepts like autonomy and independence to include much more than their medical and clinical significance (Grenier 2007; Morell 2003).

In conclusion, we would add that, regardless of age, the relationship to physical and mental health determines the experience of old age and the attitude toward present and future existence. For those who have yet to reach old old age, accepting the passage of time means understanding ageing as part of a world vision that imbues life with continued meaning. In this regard, the six women aged 85 and older who were interviewed for this research appear to have come to terms with their old age and be more accepting in their representation of this stage – from now on, more visible – and the accompanying inescapable losses. As one of the respondents said: 'When you've accepted it [old age] you can live a good life. You make the most of every moment because you know life won't last forever' (Denise, 85). Is this coming to terms with very old age and finitude and the strategy to make the best of it every day, a cohort effect or a life-stage effect? Since very old women and centenarians constitute the group destined for the largest demographic expansion, this is a good question for future studies. As such, ageing well or merely ageing is not a 'condition' but a dynamic experience that brings into play a range of socio-historical, cultural, symbolic and identity-based factors. Social representations of old age are thus in constant transformation, influenced both by social realities (standards, values, *etc.*) and the perceptions of people who are advancing in age – in this case, women – leading to the formation of composite identities of the ageing individual. The women we met with do not correspond to the two stereotypical binary models described at the beginning of this article – that of the eternally youthful 'super-granny' or the opposite, negative model of the fragile old lady, dependent and abandoned. Together, they present a plural vision of the ageing woman. They create and invent diverse manners of ageing and dealing with this period of life that is constantly growing longer. But however these women remake their self-identities, one thing is clear: becoming old is not a 'social death' (Guillemard 2002) for our respondents; it is not experienced in terms of social exclusion. On the contrary, many of these women have created a new space–time continuum, a salutary interface between mid-life and old old age; between time that has been set aside for oneself and time 'chosen' to spend with others.

NOTES

- 1 Study conducted in Montréal, Québec, funded by the Social Sciences and Humanities Research Council of Canada (2007–2011).
- 2 The interviews were conducted by three master's student research officers who had received training in qualitative methodology and had extensive experience with semi-structured interviews.
- 3 Erickson proposed eight stages of human development, drawn from Aumond (1987).
- 4 The Quiet Revolution in Québec was a time during the 1960s that was characterised by profound social, economic and political change and that signalled Québec's entry into modernity.
- 5 In our view, although this familial model does indeed apply to the women from disadvantaged or modest socio-economic backgrounds in our sample, it would also seem to correspond to some middle-class familial standards. However, further interviews and more in-depth study of intergenerational practices would provide us with more support for this analysis, and would allow us to determine whether the other, 'autonomous' model we observed is more frequent in those from more privileged backgrounds.
- 6 As women, researchers and feminists, we are well aware of these societal issues and are taking action on them. For example, based on these research findings, we have developed several activities with a view to appreciating and mobilising knowledge: (1) with women's groups (training workshop for and by older women throughout Québec and creation of a website (www.rideesmaispasfanees.ca) and (2) with practitioners (distance learning 'Femmes et vieillissement' (Women and Ageing) available online). We have also just obtained a major research grant in partnership with the Social Sciences and Humanities Research Council of Canada for a study on older immigrant women and their relationship to ageing that we expect will extend the social impact of our work.

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