Learning to Be Old: How Qualitative Research Contributes to Our Understanding of Ageism

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Abstract

Today, we have a life expectancy that earlier eras could not have dreamed of. An aging population is the hallmark of a successful society. How is it, then, that we consider one of the greatest achievements of society to be a disaster? This talk argues that the beliefs underlying ageism, based on the premise that all old people are the same, pervade contemporary thinking. Despite the fact that becoming old involves physical changes, aging has a significant social component. This presentation marks the culmination of 25 years of qualitative research in gerontology. Given the theme of the conference, the talk begins by discussing how the Trojan horse of positivist approaches is eroding the inductive nature of qualitative research. It then illustrates, based on inductive, interpretive research, how we learn to be old and accept myths associated with aging through the way people treat us.

Keywords

ageism, identity, gender, social process, positivism

Introduction

I would like to thank the organizers for inviting me to give a talk at this conference event, though I am not strictly speaking a qualitative health researcher. Qualitative research explores old people's everyday experiences (not just health issues and crises) and sees them as experts in their own lives. As Charmaz (2008, p. 53) has pointed out, such studies should allow researchers to "gain intimate familiarity" with the phenomenon of study and respect research participants. She notes that

> gaining intimate familiarity means looking, listening, and learning . . . it means sustained interactions with people and with written data. It means experiencing wonder at their world, being willing to plunge into it. (p. 53)

Without such familiarity and openness, the analysis will be "weak and mundane" (Charmaz, 2008, p. 54). Finally, Charmaz (2008) notes that this familiarity allows for a rich account rather than an "objective report" (p. 54).

Qualitative research's interpretive and constructionist approach has traditionally complemented the positivist attributes of adherence to a realist perspective, trust in causal knowledge, and reliance on deductive reasoning. These two approaches, together, provide rich literatures, and their coexistence is important. Nonetheless, positivist approaches have

been and continue to be privileged. An important aspect of being in a privileged position is that those with privilege are often unaware of it and see the situation as simply normal. It is those who are marginal, like qualitative researchers, who perceive their disadvantaged position (Johnson, 1991). My talk is from the perspective of a qualitative researcher who has struggled against that marginalization. For example, the first time I applied to Social Sciences and Humanities Research Council of Canada in the early 1990s for a postdoctoral fellowship to carry out a qualitative interview study with old widows, I was ranked 20th percentile. On hearing this dismal result, a colleague commented that she was not surprised that I received such a low ranking to do qualitative research on old women.

Welcoming the Trojan Horse of Positivism

In the intervening years, qualitative research had been accepted as legitimate and valued for its unique contributions. In recent

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years, with the emergence of mixed-methods research and overtures from quantitative researchers, it has appeared that positivist approaches are extending a hand of coexistence, but are inductive, interpretivist, and qualitative researchers welcoming a Trojan horse that is subtly causing us to adopt a positivist attitude to our research? As we consider the future of qualitative research, I am concerned that if interpretive, constructivist researchers adopt positivism, our research will produce weak, mundane, and objective reports that Charmaz is concerned about rather than insightful theoretical understanding.

The Trojan horse was a giant, wooden horse that the Greeks gave to Troy as a gift during the Trojan War, supposedly as a gesture of friendship and peace. The Trojans pulled the horse into their settlement. When night fell, Greek soldiers who had been hiding in the horse came out and opened the gates of the city to allow the army to enter and defeat Troy. I fear that qualitative research is having a Trojan horse experience.

In recent years, many have suggested that the dichotomy between qualitative, inductive, and constructionist research approaches and positivist, quantitative approaches is a false one. The more dominant quantitative researchers have held out a hand to qualitative researchers, partially through the introduction of mixed methods (see McMahon & Kleinman, 1995, for a critique of this seeming peace offering). The message is "our feud is over; we accept your qualitative approaches, we really aren't that different." In response, many of us have opened up the gates and allowed positivist approaches to colonize our thinking. Positivist-minded people have started doing qualitative work and are training new researchers. The Trojan horse has been welcomed in. I'd like to explain what I mean by looking at colonized vocabulary, research ethics review, large team research, and the emergence of mixed methods.

The language of qualitative research has been colonized. The concept of rigor has replaced systematic and careful analysis. We now want our research to be robust which, I assume, means "reliable," able to be repeated by others. The terminology is seductive and sounds scientific. Audit trails assume there is one right, objective interpretation of our data.

Intercoder reliability also assumes one right answer, as if coding (a colonized term that replaced the idea of reading for themes) independently and then calculating the percentage of agreement is somehow more legitimate than consulting together about the meaning of our data. Weber (1949, p. 78) in *The Methodology of Social Sciences* points out that "every single perception discloses on closer examination an infinite number of constituent perceptions which can never be exhaustively expressed in a [single] judgement." In other words, the world is too complex to lend itself to being reproduced; it can never be accomplished. There are as many interpretations of a situation as there are people interpreting it. The idea that we can find one right, objective interpretation of our data is a mirage.

Research ethics review has only exacerbated the influence of colonized language (see W. C. van den Hoonaard, 2014, for an extended discussion of this issue). As has been widely observed, the policies on which such review is based reflect a strongly biomedical epistemology and "privilege traditional, positivist, scientific outlooks and methods" (W. C. van den Hoonaard, 2014, p. 175). The language of biomedical, positivist research has become the language of qualitative research to the extent that, particularly among younger researchers, it has come to seem natural. Interview "protocols" which sound standardized have replaced interview guides that acknowledge the emergent nature of interviews that follow the lead of research participants. Perhaps the most entrenched term, "informed consent," implies that the researcher can predict how an interview will go, how long it will take, and whether there might be any risk (a holdover practice from clinical trials). These observations only scratch the surface of the ways in which research ethics review has forced qualitative researchers into a mold created by biomedical modes of doing and thinking about research.

As I write this, I have been invited to two workshops dealing with qualitative data repositories. The e-mail invitations assume qualitative researchers' data can somehow fit into the scientific model of quantitative, biomedical research. One e-mail from the qualitative repository lists the following techniques: "improved data citation infrastructure: better methods to provide and preserve code and ensure its continuing usability; and more sophisticated function to allow for the safe sharing of sensitive data." These goals are quite foreign to how qualitative researchers think about and deal with their data. If they are imposed, we will be forced into a straightjacket of analysis that will further impoverish our methods. Beyond the scope of this talk are the challenges associated with Indigenous research and ownership of data if we are required to deposit our data.

Large grants and the encouragement of team research replicating a more natural science model feed into this phenomenon. Large teams often work on an intercoder reliability model. This works against ethnography and in-depth interviewing projects that are usually one- or two-person shows. Fifteen people cannot do a good ethnography. You cannot have that many people drifting in and out of a research setting and expect that they will be able to achieve the intimate familiarity that Kathy Charmaz recommends. There are many benefits to large-team research but when it comes to ethnographic research, it is hard to imagine how they can achieve the depth of one researcher who spends long periods of time at a research site.

Often those who analyze data in large-team research were not there when the data were collected. This practice reflects the hegemony of the scientific and biomedical model where data are considered "objective."

Canadian granting councils have encouraged mixed-methods research as if piling the results of one method on top of another will lead to more meaningful results. Proponents of these approaches see them as a "third approach" (Creswell & Plano Clark, 2007, p. 16) that has the potential to provide a more complete understanding than either a qualitative or a quantitative approach alone. These studies often begin with an exploratory, qualitative phase followed by "confirmatory

survey research" with the goal of generalization (Christ, 2007, p. 226). Even proponents of mixed-methods research recognize that "the positivist scientific tradition continues to be privileged as a way to know; its dominance is strengthened, rather than challenged by mixed-method research" (Giddings, 2006, p. 202). When we buy into the promise of mixed-methods research, we welcome the Trojan horse in with open arms.

Learning to Be Old

The remainder of this talk is about how one learns to be old. I'm not talking about how one adapts to illness, disability, or other physical challenges that might come with age. After all, I'm a sociologist who is interested in social process, in other words, how the way people react to and treat us teaches us that we are old. These observations rely on over 25 years of conducting inductive, constructivist qualitative research which has had the goal of gaining the intimate familiarity with my research participants' experiences and understanding of their own lives.

I began thinking about the process of learning to be old about 15 years ago when I was at The Qualitatives. The papers are wide-ranging from studies on dragonfly aficionados to mixed-martial arts enthusiasts. Each year, there are a few papers that stand out. They are fascinating, and the topics might be far from those that I study—mostly to do with transitions that come with aging such as widowhood and retirement. I'm always on the lookout for these papers. They inspire me and often provide a new way of looking at the things even when their topics seem far, far away from the things I normally study.

One of these papers was called "Learning to Be Black" by Etoroma (2010). The title was intriguing. Etoroma was a graduate student at the time. When he arrived in Canada, he thought of himself as African, but he soon learned that, in the Canadian context, he was not "African," he was "Black." How did he find this out? Through the way people treated him. He learned that he had to dress formally to go to the bank, so that he would appear trustworthy and that he might be followed in a grocery store. The thing I liked best was his description of how his White roommate taught him about jazz because, as a Black person, he was supposed to like jazz. Etoroma's was not an angry paper. It simply explained the social process through which he learned how to be Black in Canada. I was enchanted.

This article still resonates for me. It made me think about how we learn to be old through the way people react to and treat us. Many people believe that we can "stay young" by exercising and not paying attention to what others think. This belief was the underlying message of essays my students wrote about what they predicted their lives would be like when they reached 70 (D. K. van den Hoonaard & Caissie, 2008). But, no matter what you do, people begin to treat you in ways that tell you that you're no longer young, that you are getting old (Gullette, 2004). And through this, you learn to be old. Here are some personal examples:

- It's your birthday and people say, "how old are you, 29?"
- You're in your 40s, and you and your teenaged daughter are introduced to someone who says, "Oh, are you sisters?"
- People are "amazed" at your age or that you're a grandmother or retired.
- And, for women, once you approach menopause, the doctor never sees you as healthy again because he or she believes that menopause is a "hormone deficiency" disease.

In other words, people let us know that they see us as old by the way they talk to us and treat us—often showing discomfort by couching their words in teasing or joking. We learn we are old (or at least not young) by the way others react to us. To use Cooley's (1902) concept of the looking-glass self, we define ourselves at least partly through the way others interact with us. They provide a mirror through which we understand that we are getting older.

The way that we organize society and the social meaning of aging have an undeniable impact on the way we experience aging. This meaning is perpetuated by myths of aging:

- People either feel lost in retirement or are so busy that they don't know how they ever had time to work (Katz, 2005).
- They face higher risk of criminal victimization.
- Most live in institutions.
- They cannot learn. As an example, many misunderstand and, therefore mispronounce, Alzheimer's disease as "Old Timers'" disease.
- Older workers are less productive in their occupations.
- Old people are asexual.
- The old are either extremely poor or "greedy geezers."

In an article in the *New Yorker*, novelist Ceridowen Dovey (2015) identifies "two dominant cultural constructions of old age: the doddering, depressed pensioner and the ageless-in-spirit, quirky oddball." This dichotomy omits the wide range of characteristics old people have—both conceptions are almost cartoons.

We live in a society in which ageism, prejudice, and discrimination against people based on being old are endemic (Butler, 1969). Although there have been books, both academic (Cruikshank, 2003) and popular, and groups such as the Gray Panthers that address ageism for decades, we take our negative ideas about aging so for granted that we often do not recognize them in our own behavior and discourse. Most recently, Applewhite (2017) has published *This Chair Rocks: A Manifesto Against Ageism*. In 2012, the Nova Scotia Centre on Aging in Canada brought in André Picard, the *Globe and Mail* health journalist, to give a keynote at its 20th anniversary conference. He gave an excellent talk that addressed misconceptions about an aging population that are based on negative stereotypes. Many conference attendees were very excited about his talk.

My problem was that I'd been giving this same talk for 20 years both for academic and nonacademic audiences. Our challenge is that the stereotypes are so deeply ingrained that our knowledge about aging does not seem to penetrate our cultural understandings.

Think, for a moment, about the jokes, you, yourself, may have made about some aspect of aging or about the reluctance people have to use the word old to describe someone or themselves. Research shows that people resist the label old well into their 70s, 80s, or even 90s (MacRae, 1990) to maintain the fiction that you are "only as old as you feel."

Language has an important place in learning to be old. Humorous discourse not only teaches us that we are becoming old but also allows us to uncover prejudice. One of the few groups that it is still socially acceptable to joke about is old people. For example, think about "senior moments." This phrase is often used lightheartedly to diffuse embarrassment when someone has a momentary lapse of memory of someone's name, where she or he put something down, or has a word on the tip of his or her tongue. To get the joke, we must connect being old with memory loss or functional incompetence. These connections reinforce prejudice against the old.

The many euphemisms associated with aging, "senior," golden ager," and so on confirm the problem. Euphemisms are terms we use to avoid negative connotations. We say someone passed instead of died. In referring to groups, euphemisms have to keep changing because as long as a prejudice remains, each new euphemism eventually attracts the negative connotation, and we have to search for a new word. Applewhite (2017) recognizes this problem when she suggests the term "olders" to replace senior or elderly. In the unlikely event that her term is adopted widely, we will soon need a new one unless ageism, itself, disappears.

Terms that refer to old people often make them, especially old women, seem like children. I've often heard older couples referred to as "cute." This term desexualizes them and takes passion out of their relationship. Other terms include "sweet," "over the hill," and "80 years young." The practice of being referred to as "dear" or "honey" is also infantilizing except in Newfoundland, Canada, where everyone is dear or honey.

Bill Thomas, an important thinker on aging, commented a few years ago on the Canadian Broadcasting Corporation that the term "the elderly" makes all old people seem alike even though the old are the most diverse segment of the population. I would argue that referring to the older population as "*our* elderly" makes them sound like children. We don't say "our adults." In addition, old people do not usually refer to themselves as elderly. Some of my students call old people "elderlies." These terms allow us to ignore that fact that people who are old have had full lives. They did not pop into existence at 80.

Ageism has led to apocalyptic ideas about what it means to have a large number of old people in the population. The media and politicians reinforce the negative picture we have of what it means to have a larger percentage of older people in the population through the way they talk about it. Their language is negative, alarmist, and completely inaccurate. They use terms like the "silver tsunami," "unsupportable health-care costs," and the "burden of an aging population." We see headlines like these every day. They make one of the great successes of our time, longer life expectancy, seem like a disaster. And, they misrepresent the situation.

Let's take a minute and think about what a tsunami is. It is a destructive wave that comes out of nowhere and destroys everything in its path. We have known about the aging population for a very long time. In addition, old people contribute much to our society in terms of experience, help to their families, volunteering, and even paying taxes.

The strong, though incorrect, belief that all older people are basically the same means that many people see an old person as old first and as a person second rather than as a person who happens to be old and who is an individual with a variety of experiences and attributes like anybody else. When one part of your identity takes on such exceptional importance, it becomes a master status (Hughes, 1945) and tends to wipe out any other status you may have had during your life. For example, if you murder someone, your status as a murderer becomes the only salient one you have regardless of what else you've done.

When "old person" is our master status, others attribute most of our behavior or personality to our being old rather than to who we are as individuals. We see this starkly when someone is diagnosed with Alzheimer's disease. Often, everything that had mattered about that person evaporates, leaving only the diagnosis to account for whatever the person does or thinks. Only highly prominent people seem to be able to avoid the master status of being old and then only for so long.

The master status of being old reflects ageism that is premised on the idea that old people are essentially all alike. In fact, older persons are very diverse, and those over 85 are notable for their heterogeneity and wide range of experience.

Psychologist Mary Pipher (1999) provides an example of old age as master status in *Another Country: Navigating the Emotional Terrain of Our Elders*. She comments that when an older person is involved in a car accident, his or her mistakes are not "viewed as accidents but rather as loss of functioning" (p. 51). Indeed, even when an accident is not the older person's fault, others may still attribute the accident to his or her age. Some time ago, I had a friend who was in an accident. He was clearly at fault, but he still referred to the other driver as "an old guy of 75" as if that person's age was responsible for the accident rather than my friend's error. This type of attribution can have implications for the freedom of individuals whose capacity to drive may be questioned just because they have lived a certain number of years. Even someone whose reaction time may have slowed somewhat is, perhaps, less dangerous on the road than someone who has his radio cranked up, is talking on a cell phone and drinking a cup of coffee all at the same time. Yet, when an older person is involved in an accident, there are discussions on the news day after day about the problems of older drivers.

Although much discussion among researchers as well as in the media has focused on the characteristics of the older

populations, gerontologists have seldom asked old people, themselves, about their own experiences. In his book on older drivers, Rothe (1990) notes that because many gerontologists use a pathology model of aging, old people are seen as not well equipped to carry on "normal functions" (p. 2). As a result, they may find their independence restricted, but "input from the elderly people on such matters is seldom asked." Rothe (1990, p. 63) also points out that "elderly [are] assumed to have problems resulting from biological, cognitive, and social degeneration. There is little emphasis upon their everyday reality." In other words, asking old people about their experience as drivers does not seem to occur to those who study and write about older drivers. Thus, another way we learn to be old is finding that our understanding of our own lives is not considered even when decisions are being made that affect us directly. Or when our neighbors and family members are being encouraged to surveil us and report on us if our driving isn't up to snuff, simply because we're old.

Our roads and road signs are usually designed to suit young (probably male) drivers. I've long joked that street signs are only useful if you already know what they say. It does not seem to occur to many planners to adapt our driving conditions to the age of many of our drivers rather than to target them as the problem. If there were more notice of a coming intersection, it would help everyone, not just the old. If we allowed more time to react to an amber traffic light, it would help everyone, not just the old. If we think about the automatic doors that were put in to be of use to persons with a disability, we may ask, "who uses those doors?" The answer is, everyone—people pushing strollers, people carrying packages or suitcases, and others. If we were to adapt our roads to suit older drivers, it is likely that all drivers would benefit as well as pedestrians and cyclists.

The tendency to discount what old people say about their lives reflects what Becker (1967) famously referred to as the "hierarchy of credibility," the practice of taking for granted that those with the highest status have a better understanding of situations and are less biased than those of lower status. We usually assume that those at the bottom of the hierarchy of credibility function with incomplete information or without the skill or background to interpret things correctly (D. K. van den Hoonaard, 2019).

The fact that we automatically assume that any older person we meet may not be mentally competent also has ramifications for how health professionals may treat her or him. Imagine how you would feel if you were at the hospital or visiting your doctor, and everyone in started conversations with you by asking you if you knew what month it is. This testing of mental alertness is foisted on nursing home residents as a matter of course.

Even if we do not suspect that an individual has dementia, we often think that once someone becomes old, she or he is no longer capable of judging the risk of certain activities, for example, living alone. When I interviewed older women about their experiences of becoming widows, many of them told me that their adult children—particularly sons—immediately questioned their capacity to make decisions (D. K. van den Hoonaard, 2001).

Paradoxically, along with prejudice around aging comes the idea that we can and should fight aging. If we do it right, we can always be young. When we believe that line, we blame people who do not age "successfully" (Rowe & Kahn, 1998) even though successful aging, by Rowe and Kahn's definition, is not normal at all. Women feel this pressure more intensely than men.

As women enter middle and old age, they become invisible. Heilbrun (1998) observed that our invisibility is particularly noticeable among those who worship youth and men. Some women find the experience freeing. In a study, I did with Janet Stoppard about older women's challenges and strategies of everyday life, some of our research participants said that one of the best things about being older is that they no longer care what anyone thinks, partially because no one is paying attention to them (D. K. van den Hoonaard & Stoppard, 2004). Clarke (2010) concludes, after 10 years of talking to older women about their appearance, that they are influenced by an ageist discourse that narrowly defines beauty in terms of the possession of youthfulness. They are also normatively dissatisfied with their bodies the same way that young women are.

Women are influenced by the universal idea that youthfulness is naturally better. There is a moral imperative to "fighting the signs of aging" and to using all available means not to look their age. In terms of appearance, learning to be old is being complimented for looking young. My reply is, "I don't look younger than 65. This is what 65 looks like." Although the pressure on women is still greater, in recent years, men have come under the same type of scrutiny. Years ago, I warned my male students that the women's market was becoming saturated. "They're coming for you next," I told the men in my class. They didn't believe me. Unfortunately, I was right (e.g., see Calasanti & King, 2007).

In recent years, we have come to believe that if only we can control everything, we will be able to eliminate risk. If we believe the old are, by definition, vulnerable and fragile, then our inclination may be to protect those individuals—all of them—whether they need or want it or not. However, in our attempt to minimize risk, we are likely to constrain the activities of older people as well as to minimize their freedom of choice. This reluctance to "allow" older people to make their own judgments about personal risk is in sharp contrast to our evaluation of a younger person's taking risks. I was starkly reminded of this difference when I read an account of an expedition to climb Mount Everest (Krakauer, 1997). I cannot think of any activity riskier than such a climb—nonetheless, we do not stop young people from making such attempts, and we even admire them! If they were old, we would surely confine them "for their own good" rather than let them do something so foolhardy although we have started valorizing risky behavior on the part of some very exceptional elders because it reinforces our belief that we can always stay young. So, part of learning to be old is having your decision-making questioned

and no longer being allowed to take risks perhaps because we often think about old people as if they were children.

None of us are immune to cultural influences that devalue old people, in general, and old women even more particularly. Often people believe that they can stay young by exercising and not paying attention to what others think. But no matter what you do, people begin to treat you in ways that tell you that you're no longer young, that you're getting old. And through this, you learn to be old. This protectiveness has a gender dimension that should not be over looked:

- women live longer,
- are more likely to be poor,
- face higher risk of illness and disability,
- are more likely to live alone—and often to enjoy it, and
- are more likely to both give and receive care, a contribution that's often overlooked.

We also believe and encourage older women to believe that they face a higher risk of criminal victimization than other people. Even though young men are more likely to be victims of violent crime than any other demographic, it is old women who cower behind their doors because they have learned to feel vulnerable. One woman whom I interviewed said that she had heard that she should look under her car before entering it at night in case there's a man waiting underneath to grab her ankle. What is the likelihood of that? In New Brunswick? In the winter? So, for many women, learning to be old is learning to believe that there are so many dangers lurking everywhere in wait for them, that they should probably stay at home, lock the door, and throw away the key.

As we can see, ageism leads to our treating old people as if they were fundamentally different from the rest of society. As well, through the growth and institutionalization of retirement, old people have become "welfarized"—seen primarily in terms of needing various forms of welfare (Estes, 1979). In a society, such as ours, where independence and being productive are accorded such importance, the aged may be seen as parasitic on the state and ultimately on wage-earning tax payers. These attitudes mask inequality within the older population and the fact that many old people are active in the labor force and make noneconomic contributions to their families and the communities in which they live.

In addition, recent decades have seen a tremendous rise in the presence of age-segregated housing, ranging from luxurious seniors' complexes and retirement communities to subsidized "seniors' apartments" and nursing homes. This development reflects what Hagestad and Uhlenberg (2006, p. 642) refer to as an "extreme version of spatial segregation." As they point out, researchers have shown little concern for or interest in this trend and other aspects of age segregation. For some reason, we seem to see it as natural. And, as I have long argued, it enhances ageism both against and by the old. Age segregation is both a cause and an effect of ageism (Coleman, 1982). We have known that social integration reduces prejudice for many decades (Cited in Hagestad & Uhlenberg, 2006,

p. 644) but seem unconcerned when it applies to age segregation.

Ageism, with its assumption of biological decline is often "compassionate," characterizing old people as "poor dears." This brand of ageism has improved the economic status of many retired people, but it also contributes to their continuing marginalization. We see this phenomenon in policies of mandatory retirement (which seems to be on its way out) and in times of high unemployment, the "golden handshake." And so, another way, we learn to be old is to be given the message that it's time to retire and give up working, so that the young can have a chance.

But here's my question, why is it the role of older people to give up working in times of high unemployment? Why don't all the men stay home so the women can work? Surely, they've had their chance. Or perhaps all the White people should give up work, so that people of color can have a chance. I use these patently absurd suggestions to demonstrate that asking old people to solve our employment problems may also be unreasonable.

Related to this issue is our belief in the independence-dependence dichotomy. We talk about being independent "as long as possible" and believe that becoming dependent is a failure to age successfully. In my recent interview studies with older widows and retired women baby boomers, the participants went to great lengths to explain that they are independent. They used this claim of independence as a form of impression management (Goffman, 1959) to distance themselves from negative stereotypes associated with being old women. This conception is fundamentally flawed. As humans, we are all interdependent (Bowlby, 2012). Once we recognize this aspect of being human, we can escape the stigma of needing help from time to time as all of us do, regardless of our age.

Because biological decline has been a central assumption of so much aging research, there has been a focus on describing the characteristics of individuals rather than how the social context within which they live might affect their experience of being old. This approach is called "blaming the victim" because it ignores "the social forces that make old age difficult" (Levin & Levin, 1980, p. 35) while attributing that difficulty to the characteristics of the very people who are the victims of those social forces. Therefore, blaming the victim results in treating the symptoms of discrimination, rather than treating discrimination, itself.

One example of how we might blame the victim comes from a class discussion. One of my students, who worked as a telephone interviewer, commented that whenever she got an old woman on the phone, she knew she would have trouble getting her off. This student wanted to know why old women talked so much—the student was identifying overtalkativeness as a characteristic of old women, that is, she was blaming the victim. After some discussion, we finally concluded that it might be useful to find out what aspect of our culture leads to older women's sometimes becoming so isolated that they will talk to anyone who will listen. We might also wonder if the stereotype leads to people's exaggerating the tendency of some older

women to want to stay on the phone so long, even with a stranger.

So, another aspect of learning to be old for women may be a belief that they have nothing important to say. Many of the widows I have spoken to in my research expressed a concern that they might be talking too much or wasting my time by having nothing of interest to say (see D. K. van den Hoonaard, 2005). Believe me, they had much to say that inspired me with their creativity and resilience.

Many gerontologists have concentrated their studies on how old people adjust to various changes in their lives, for example, retirement. Katz (1996, p. 119) argues that the focus on adjustment that we find in so much research presents an uncritical and apolitical understanding of aging while ignoring the social and political context in which people age. This practice fuels an "aging enterprise" of experts and professionals who address the problems of old people without questioning the social context in which they live and how it might be the source of their problems (Estes, 1979).

"I Thought I Was the Kid"

Many ways that people begin to treat us differently as we age happen so gradually that we're almost unaware of them, but I had an experience that put these changes in the spotlight for me. This happened the year I spent the winter in Florida with my mother. I was in for a great surprise. Suddenly, I was no longer old or even middle aged. I was 30 years younger than my mother and all her friends and visibly younger than the vast majority of people in this Sunbelt, retirement haven. I had been visiting this area for years and had always thought of myself as "the kid." I sat in the back seat of cars and went where and did what the "adults" wanted to do.

I still sat in the back seat, but the way others reacted to me when I was out with this older group surprised me. They went out to dinner together every Thursday, and I joined them. On one particular occasion, the waiter treated us as if I were the only adult at the table comprised of one man and five women over 75 and me, then in my mid-50s. He asked if I was "the leader." When the meal had been served, the waiter came over to me and asked how everything was. He did not address this question to anyone else at the table; he was clearly talking just to me. I responded by saying that my meal was fine, but that he should ask everyone because I only knew how my own food was. The waiter made a dismissive remark about how "they" were only having sole and that's always fine. Not only were the others not all having sole, but this comment completely dismissed them as adults. Was I now the adult?

Another illustration: My mother, my aunt, and I were at a box store where my aunt was buying a new DVD player. She had bought DVD players before and did not need my help. In fact, I was chatting with my mother as my aunt discussed the purchase with the salesman. I did not ask any questions or address any remarks to him. He, on the other hand, directed all his answers to me. I countered by saying, "Don't tell me, tell her. I'm not buying the player, she is." Finally, when my aunt had made her choice, the salesman tried to hand the slip for the cashier to me whereupon I told him, again, to give it to my aunt because she was buying the DVD player. What happened?

A final case: My mother and I were at a deli making one last purchase of my beloved Jewish food before I headed back to the Maritimes. The man behind the counter was probably in his late 20s. He looked at the two of us and asked if I was the daughter. We said yes. Then, he commented that I was very pretty and asked how old I am, a pretty odd question. I told him my age, and he appeared incredulous. Supposedly, I looked much younger. In addition, even though he was supposed to sell one quarter pound of the very expensive, hand-sliced lox as a minimum, he wrapped up less. My mother's comment was that I should always go along with her because she got much better service when I was there. For her, learning to be old included being treated dismissively at best and rudely at worst by sales people and wait staff in stores and restaurants.

These three experiences were not isolated. A woman at the flea market remarked to me that I was the youngest person there, and a toll collector joked that I was smiling too much for Florida and that a policeman was waiting to arrest me for smiling so much. I began to realize that in the society of retirement community dominated south Florida, I was not middle aged or old, I was young. Being old is quite relative. I also realized more fundamentally that when I really was young, I had probably been treated in a superior fashion to what I was then used to but that I had not realized it. When you haven't experienced anything different, the preferential treatment you receive as a young person, particularly as a young woman, is invisible to you. It simply seems natural; you can't recognize that you are in a privileged position.

Back in New Brunswick: I am just another older woman. How can I tell? People don't pay as much attention to me, and when I smile at store clerks and wait staff, they often do not smile back. I am once again invisible. I am once again learning to be old.

Learning to be old is learning to live in a society that devalues old people and believes them to be inferior. Our propensity for age segregation exacerbates this situation. I was interested to find out from my students that they saw the old Fredericton Mall as the "old person's mall" and that old people are encouraged to limit their days for shopping to the days that there are special discounts for them. Add to this the increase in age-segregated housing, and we have a situation in which the only old people that many young people know are their grandparents. The age segregation that has become more and more pronounced in Western society allows the stereotypes associated with aging to continue. It is both a result and a cause of ageism.

One of the most powerful ways to combat any type of prejudice, whether of race, religion, or age is for people to get to know one another. It is imperative that we seek a way for old people and young people to interact on a regular basis, so that learning to be old does not mean learning to be only with the old. I'd like to close with a quotation from Kofi Annan's International Year of Older Persons address:

A society for all ages is one that does not caricature older persons as patients and pensioners. Instead, it sees them as both agents and beneficiaries of development. It honors traditional elders in their leadership and consultative roles in communities throughout the world. And it seeks a balance between supporting dependency and investing in lifelong development.

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