

More of living

New Zealand women's perspectives on ageing and old age

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How do New Zealand women themselves define ageing? How do self definitions vary among women of different ethnicity? Ageing is a lifelong experience, beginning at birth and ending with death, although it is usual to refer to the earlier stages as development and to save the term 'ageing' for the later stages of life. The rapid growth of older populations, and the expansion of their contributions and needs, has moved researchers from many disciplines

to give more attention to studies of ageing.

Two main messages from the growing body of research are complexity and diversity. The complexity of ageing is acknowledged by organising its study as four distinct but related processes. *Chronological ageing* defines ageing as a person's years from birth. *Biological ageing* refers to normal changes in physical functioning, diminished efficiency of the lungs and heart for example. *Psychological ageing* includes changes that occur in the senses, mental functioning, adaptive capacity, and personality. *Social ageing* refers to changes in patterns of social participation; it has a lot to say about the personal meaning of old age, and whether the experience will be primarily negative or positive.

The complexity of ageing demands the attention of diverse fields. A landmark volume, *New Zealand's Ageing Society: The Implications* published in 1993, brought together contributions from ten researchers to offer a set of profiles and perspectives that sampled all four processes.¹ As a contribution toward understanding the diversity of experience, this study looks across a selection of ethnic communities.

Information on women's experiences of becoming

and being old was collected in the first phase of a project located in the greater Wellington area. Interviews with a core group of 30 women were completed during March-July, 1995. The women were recruited using a networking technique and included women from four



of the area's ethnic groups. The study used the group definitions of Statistics New Zealand which combine ethnic origin and birth-place.² Of the 30 women recruited, ten were New Zealand European (that is, women of European origin born in New Zealand), ten were New Zealand Māori,

five were New Zealand Chinese, and five were Central European (women of Central European origin born outside New Zealand). Each woman cooperated in the completion of a semi-structured conversational interview, during which attention was given to definitions of ageing and old age.

All of the women were in their 60s and 70s. All were living in the community in private dwellings, alone or as members of couple or nuclear family households. All judged themselves to be in 'fair' or better physical health relative to other women their age. There were women in each ethnic group who reported their health as 'excellent'.

The following discussion presents material on definitions that fall within the general areas of chronological ageing and social ageing, and draws on the Wellington data for a selection of themes under each.

Above: Bathing at Peg's Pool, Seatoun Beach, Wellington, 1991. Reatha McInnes, Peg Elborn, and Margaret Chalmers-Smith swim here from November to April. "We look up at all the houses and say: 'You silly people - you don't know what you're missing'." Photograph: Evening Post.

CHRONOLOGICAL AGEING

In some societies chronological age may be important and closely linked with social differences; in others it may be unknown or just not relevant. The women in this study applied it in a variety of ways.

In New Zealand most people tend to link old age with chronology, the number of years lived. Ages of 60 or 65 are commonly used in official definitions of old age, and are given broad social significance by making 60 or 65 the age of mandatory retirement from the full-time workforce, and of eligibility for a state old-age pension. Age 65 is also the marker for being counted as 'elderly' or 'old' in the census. Ethnicity is not an issue at this level of definition insofar as women in all four groups in the present study know and have been variously affected by definitions of 60 and 65 in the public domains of their lives. They are also aware that 65 especially is used widely by other, younger people. They read in the newspaper or hear on television, for example, that 'the elderly woman of 65' has done this or that. On the contrary, the women's own use of age in years tends to follow the widely reported pattern of defining 'old' as older than oneself. A Central European woman aged 74 put it simply, speaking for herself and her same-age friends: 'Nothing under 80 is old'.

The age-in-years theme received most discussion among the New Zealand European women and least among the Māori women. Several New Zealand European women who had experienced compulsory retirement at 60, recalled it as an unwelcome and very premature categorisation of themselves as 'old'. Others described similar reactions to the introduction in the late 1970s of universal superannuation for all New Zealanders age 60 or over. Māori women's reference to the 60/65 marker was also mostly in terms of their own or their husband's retirement or eligibility for superannuation, with 60 also used in reference to their own eligibility for *kuia* (elder) status. However, observed



Above: Maud Sitt, aged 100 in 1982, arrived as a child on the 'Halcione'. Photograph Evening Post.

one: 'In Māori thinking, you don't "retire" at 60 or 65'. Being retired is a Pākehā status: 'Māori people don't retire... There is always work for them to do and they just keep going'.

Clues to physical decline such as physical health, appearance, function, and level of activity constitute a recurring source of qualification of use of age-in-years definitions. There was general agreement across the four groups that 'old' applies to people older in years and less able and active than oneself.

According to a report prepared by the New Zealand Ministry of Health in 1994, 8 in 10 New Zealanders aged 65 and over report some type of disability or chronic illness.³ Women in the present study reported the presence of arthritis, diabetes, hypertension, and others of the potentially disabling conditions commonly associated with old age. Even so, their definitions did not equate old age with disability. Physical conditions such as frailty and inactivity, and particular characteristics such as grey hair, wrinkles, and walking with the aid of a walking stick were named across all groups as signs used to categorise others as 'old'. Women of all ethnicities talked about their own experience of physical decline, for example, in terms of slow downs, energy declines, not being able to walk as far as

before, not being able to carry as many shopping bags or to do three or four household tasks at once, as they could when they were younger. But the point should not be laboured. The general perspective on the characteristic physical declines of later life was that they were not a major issue. They were viewed as 'the ageing things' to quote a Chinese woman. Or, in the words of one of the New Zealand European women, essentially 'less of this and that'.

The Chinese women seem to stand out in seeing themselves as coming into old age in relatively better physical shape, and being relatively better at managing the physical declines that do occur. They were more likely to talk about their own physical condition in relation to other older people, especially Europeans. One of them compared herself and her older sisters with European women the same age: the European women were judged to 'look their age'; the Chinese

women to look younger than their age in years. Relatedly, the Chinese women were the most explicit on the point that old age can be selected for by succumbing to its physical aches and pains. Again they saw Europeans as much more likely to do this than themselves. They shared a strong opinion that it was the responsibility of Chinese to come into old age physically and psychologically fit.

Chronological ageing is also embedded in the theme of a shorter future. Old age brings more discretionary time in the short term and this is valued. In the longer term, time is scarce. In the words of a Māori woman, it is 'absolutely revved up'. Or, from a Chinese woman, it 'gallops along ... running away from me'. Or 'I never have enough time to do all the things I want to do', from one of the New Zealand European women. More generally as one woman summed up the situation, the 'future is shorter'.

There are indications of ethnic variation in the actual measures that apply. Both New Zealand European and Māori women in their 70s used the Christian allocation of three-score-and-ten to note that they had passed that mark and should perhaps not count on living much longer. One of the younger New Zealand European women referred to the deaths of friends and the births of grandchildren: 'They make you realise that the future is shrinking', she said, 'and that you need to decide how you want to spend it'. Māori women are conscious of their shorter life expectancy compared to European women. Said one: 'As I see it, when you're in your 70s, each day you wake up, it's a bonus'. The Chinese women described their special celebration of decade birthdays that starts with the 60s: At 60 it is known that 'you won't live for ever' observed one. Age 75 was noted as a turning point by a New Zealand European woman who had recently reached it: 'At 70,' she reflected, 'you are still carrying on as before. By 75 you are conscious that time is running out. It's time to sort the papers'.

A shorter future is, thus, a recurring theme of old age among the women in this study. The women appear to be asserting it as a significant element in self perceptions that is more than just an observation of the

obvious. Furthermore, it is evident that the theme is variously presented, interpreted and acted upon. Among both New Zealand European and Central European women, a shorter future means that it is time, for example, to sort the papers, to clean out the cupboards, to get rid of the excess sheets and blankets, to donate the unused pots and pans to the Salvation Army. For some, including three of the five Central European

women, it has been time to write family histories. For others, time to invest time in valued relationships, in friends in need, in grandchildren. In another presentation, the future is shorter because the past is longer. On the one hand it provides a full reservoir of people and things to think about in later life. 'There is no need ever to be bored' was how one woman put it. On the other, by the 70s at least, one is looking back across a life history of endings—buildings demolished, developments completed, programmes discontinued, committees disbanded.

SOCIAL AGEING

Old age has been widely presented as a time of social withdrawal. Disengagement

was one of the first and is probably one of the most widely known theories of social ageing.⁴ It is also one of the most controversial and widely criticised. Social losses and a reduction of roles are indeed a feature of later life, but so are gains and engagement in new roles.

Not surprisingly perhaps, grandparenthood received most discussion in relation to new family roles. Being a grandparent is widely present in people's ideas about being 'old', though contextual factors can greatly influence its meaning—increases in geographic mobility, divorce, reconstituted families, and grandparents who are still full-time in the workforce. The present study also confirms ethnicity as a factor.

Grandmotherhood is a generally important part of family life for the 30 women in the study. Among them they have 129 grandchildren. As one of the Māori women, grandmother to 16 grandchildren, remarked with pride: 'I think I've done my bit for Aotearoa!'



Above: Daisy Kwan, aged 100 in 1971, was still working in her market garden at Otaki. Photograph Evening Post.

There are some differences across the four groups in perceived relevance to definitions of old age. Significantly, the Māori women in the study were much more likely to introduce discussion of their grandmotherhood and grandchildren when they were speaking specifically to definitions of ageing and old age. The other women's talk about being a grandmother was more typically in reference to their family support network.

For the Māori women being older means 'the joy of being with your mokos and seeing them grow up' as one of them put it. In fact only four of the 10 Māori women are currently grandmothers but the other six offered various endorsements of being a grandmother as a central element of social ageing. Some incorporated mention of the children of nieces and nephews, godchildren and other quasi grandchildren. For those who are grandmothers, the grandchildren bring 'new life'. For the woman with the 16 grandchildren, seeing her own and other's grandchildren succeeding in their lives was 'the best thing to see'.

The New Zealand European subgroup contained the largest proportion of 'real' grandmothers (for lack of a better term): seven of the 10 women. Although less likely to raise grandmotherhood in the context of defining ageing and old age, when they did talk about the role they clearly shared the Māori women's perception and personal sense of the generativity it entails. As one of the older women in the group observed, it is important to her that she is 'seeing the next generations build meaningful lives'. Those without grandchildren also shared the practice of 'as if' relationships, with the grandchildren of siblings for example, suggesting that the expectation of grandmother roles is part of being old for this cohort of women.

For the Central European women, all of whom came to New Zealand as young adult refugees, becoming a grandmother and having grandchildren was less significant as a marker of their own ageing, it seemed, than as a replenishment of the family network, as a



Above: Rebecca Haerewa of Tai Tokerau at Civic Square during the Festival of Wellington, 1979. Photograph Evening Post.

replacement for the sisters, brothers, parents, and grandparents they had lost during World War II. Grandchildren are first and foremost a very important and valued sign of social renewal, of a return to 'normal' family forms.

All five Chinese women were grandmothers, the oldest among them a proud great grandmother. One echoed the generativity theme. She values her interactions with her grandchildren and their friends, and the opportunity to help the young people mature: 'They have to come to Grandma for help to find themselves and what they want for the world'. All five voiced the ideal of the contented Chinese elder at the centre of the family gathering, adding descriptions of the growing frequency and size of the three- and four-generational gatherings at which they are among the seniors.

Role development and expansion in the community sphere is another shared element of social ageing. The overall level of involvement in community life is impressive, providing sound New Zealand evidence of the feminisation of old age now known to occur widely. Studies in a variety of societies are reporting an often dramatic expansion of roles and status for women as they pass into the middle and later adult years.⁵

There were women in all four groups who were office holders in community organisations, among them ethnic, cultural, women's, professional, social service, and social advocacy organisations. Also in all four groups there were women filling a wide range of educational roles: as teachers of English to immigrants, as tutors at their neighbourhood schools, as organisers and supporters of local kohango reo, as tutors for community adult education classes, as members of the advisory council of the area polytech, as founder and voluntary staff of a private ethnic museum. Several of the New Zealand European and Māori women were heavily committed to the social service programmes of their churches. Five of the 10 Māori women were active in the *kuia* role; four of them were on call for any happening at their local marae. Another was a leader of one of the city's regular concert parties; another travels

as a chaperone for youth concert parties.

The *kuia* role is distinctively Māori. Otherwise, there were no strong ethnic patterns in the *kinds* of community roles undertaken. However, when Māori or Chinese women involved themselves in community organisations or voluntary work, it was likely to be within their own ethnic community. That said, there are notable exceptions. More than one of the Māori women described a full programme of both Māori and non-Māori involvements.

As there are family roles such as mother and sister that continue into old age, so, too, the women's current community roles are not infrequently continuations or extensions of roles from their earlier lives. The group includes founding and long-term members of leading Māori and Chinese ethnic associations, for example. Three former schoolteachers among the New Zealand European women now volunteer as tutors. Some of the community roles the women currently fill are reactivations of earlier but long dormant ones.

There is a broader sense of social ageing as involving role continuity rather than (or as well as) role change. In all four groups learning continues, and opportunities for formal learning are actively sought. Women of all four ethnicities are expanding roles as writer, musician, artist and craftsperson to new levels or in new directions. The Chinese women concurred on a strong sense of obligation not only to come into old age physically and psychologically prepared to stay active, but to work hard at keeping themselves that way. The Māori women shared a similar ideal of staying well in body, mind and spirit in order to stay involved, to not grow old, to just keep going. An expectation of role continuity obtains for women in the *marae* context: 'First we go into the kitchen, then we move to the *whare nui*, and I can stay there until I lose my voice'.

Questions arise about the universality of 'old age' as a separate stage of life, or at least of its applicability to all the dimensions of social participation in any given

society. According to the continuity theory of social ageing, with age we become more of the person we were when we were younger.⁶ Our core personality characteristics and values guide us to continuity rather than change in social roles and activities. The theory has limitations, in part because it doesn't attend adequately to contextual factors, but it has intuitive appeal. It emerged as a recurring perspective among the women in the present study.

In a succinct expression from one of the older New Zealand European women, 'ageing is more of living'.

The 30 women in this study are among the pioneers of being old in an ageing New Zealand society. Their voices should be heard in ageing-related research. Cross-ethnic research on personal perceptions of ageing and old age can help us understand in a detailed fashion the diversity of perceptions and responses, and give us the opportunity to consider alternative pathways to the shared goal of ageing well.

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NOTES

- 1 Peggy Koopman-Boyden (ed.), *New Zealand's Ageing Society: The Implications* (1993).
- 2 Statistics New Zealand, *New Zealand Now: 65 Plus* (1995).
- 3 New Zealand Ministry of Health, *Four in Ten: A Profile of New Zealanders with a Disability or Long-term Illness* (1994).
- 4 Elaine Cumming & William E. Henry, *Growing Old: The Process of Disengagement* (1961).
- 5 Steven M. Albert & Maria G. Cattell, *Old Age in Global Perspective: Cross-Cultural and Cross-National Views* (1994).
- 6 Robert C. Atchley, 'A continuity theory of normal ageing', *The Gerontologist* (1989) 29, 183-190.



Ramari Wineera greeted her *tupuna*, the *ariki Te Hiko*, in 1982. Photograph: Evening Post.