

THE EMBODIMENT OF AGE AND GENDER:  
BODY IMAGE AMONG OLDER ADULTS

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Abstract:

By reducing older Americans to grandparents or senior citizens, their impact on society is viewed as less substantial than that of younger or working-age adults. Older adult body image is highly understudied, even in a society in which cultural and moral worth are based upon the display of youthfulness and adherence to definitions of masculine and feminine body type ideals. While it is oftentimes assumed that conformity to society's beauty standards relax with age, previous research suggests that many older Americans struggle to reconcile narrowly defined body ideals with the reality of their aging bodies. To advance qualitative research on body image, I conducted 31 in-depth semi-structured interviews asking older men and women, age 65 and older, to discuss their experiences with their aging bodies in everyday social interaction including topics such as beauty routine, family, the media, and health. In order to understand the intersection of age and gender on older adult body image, I address two main research questions: 1) How do older men and women currently feel about their bodies, and why? 2) How do these views differ by gender? I find that older men and women engage in beauty work to "do" gender, but they simultaneously no longer feel like they *have* to do those things as compared to earlier life course phases. Additionally, I identify three differing, yet overlapping ways in which these men and women felt about their bodies: satisfied, dissatisfied, and content with imperfections. The unique social perspective of older Americans provides a landscape to demonstrate the distinctive impact of age and gender on body image.

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## CHAPTER I

### INTRODUCTION

Longer lifespans have given rise to an exceedingly large older adult population. According to a recent report by the Federal Interagency Forum on Aging-Related Statistics (2012), the population of men and women over 65 grew from 3 million in 1990 to 40 million in 2010. The U.S. Census Bureau has estimated populations over 85 years old will grow from 5.5 million in 2010 to 19 million in 2050 while the mortality rate has dropped at a rapid rate of 25 percent between 1981 and 2009 (Federal Interagency Forum on Aging-Related Statistics 2012). In a 2013 national survey, the CDC estimated the average life expectancy has risen from 76.8 years in 2000 to 78.8 years in 2013 in comparison to the average life expectancy of 68.2 years in 1950 (U.S. Department of Health and Human Services 2015). Focused research on this particular age group is vital, yet the experiences of older Americans are often ignored.



One reason that this population is understudied is because of ageist stereotypes that mark older Americans as invisible (Hurd Clarke and Griffin 2008). By reducing older Americans to grandparents or senior citizens, their impact on society is viewed as less substantial than that of younger or working-age adults. As previous research has shown, these stereotypes also permeate understandings of men's and women's bodies. In a culture which equates beauty with youthfulness, older bodies are often perceived as undesirable and ugly. Yet, interdisciplinary literature on the body often focuses narrowly on younger age groups, limiting our understanding of how older men and women are impacted by these social stigmas. While it is oftentimes assumed that conformity to society's beauty standards relax with age, previous research suggests that many older Americans struggle to reconcile narrowly defined body ideals with the reality of their aging bodies (Lewis and Cachelin 2001), which sometimes results in the development or continuation of disordered eating and mental health issues (Peat, Peyerl, and Muehlenkamp 2008).

In addition to age, bodies are also gendered in that men's and women's bodies are expected to display the socially constructed definitions of idealized masculine and feminine bodies. Characteristics associated with masculine bodies include muscularity emphasizing physical strength and ability while extreme thinness exemplifies the ideal for feminine bodies. Expectations to adhere to these ideal types for men and women are so pervasive they become internalized as natural. As a result, women, on average, hold less favorable perceptions of their bodies than men (Muth and Cash 1997). While extant research has attempted to document women's body satisfaction or dissatisfaction, the vast majority of these studies focuses narrowly on young, white, middle- and upper class

women. Moreover, researchers have yet to adequately address men's experiences. When men are included, these data are typically used to demonstrate higher levels of body image issues among women (Muth and Cash 1997; Pliner, Chaiken and Flett 1990).

Thus, this research project fills these gaps and contributes to understanding the intersection of age and gender in shaping older Americans perceptions of their bodies. The unique social perspective of older Americans provides a landscape to demonstrate the distinctive impact of age and gender on body image. I address two main research questions: 1) How do older men and women feel about their bodies, and why? 2) How do these views differ by gender? To advance qualitative research on body image, I conduct in-depth semi-structured interviews asking participants to discuss their experiences with their aging bodies in everyday social interaction, including their beauty routine, family, the media, and health.

In the following chapter, I use gender and life course theories as a framework for understanding the intersections between gender, age, and the body. In doing so, I integrate ideas surrounding ageism and the social construction of bodies with empirical findings on body image issues among older men and women. In Chapter 2, I describe the data and methods, including the data collection technique, sample characteristics, and method of analysis. In Chapter 3, I detail the findings and analyses from the data. In Chapter 4, I provide final conclusions drawn from the findings, a discussion of the potential limitations, and future implications of the findings.

## CHAPTER II

### REVIEW OF THE LITERATURE

This chapter critically reviews the interdisciplinary literature on older men's and women's body image. I begin this chapter with a definition and discussion of the concept of body image. Next, I outline the first theoretical perspective, gender theory, and describe the role that gender plays in shaping body image. The next section will use life course theory to explain how body image is also influenced by age. This section provides an understanding of ageism and embodied ageism and how these concepts relate to and affect body image perceptions among older populations. Next, I unite the two theoretical perspectives of embodied gender and life course theories to describe how embodied gender and age intersect to influence older Americans perceptions of their bodies. The concluding section will situate my research project.

## **What is Body Image?**

Body image is a multidimensional construct that measures how individuals perceive and feel about their “shape, weight, and the degree to which individuals are satisfied with their appearance” (Peat et al 2008). Bedford and Johnson quote Thompson, Heinberg, Altabe, and Tandleff-Dunn’s (2006) definition of body image as the “internal representation of your own outer appearance-your own unique perception of yourself” (2008:42). In modern societies, our bodies and our perceptions of our bodies are an important source of identity and self-worth and are the first sight for scrutiny and judgment of an individual’s cultural and moral worth (Butler 2004; Slevin 2010).

Positive body image is defined as the “respect and appreciation held for one’s body” (Andrew, Tiggemann and Clark 2016: 28). Negative perceptions of one’s body are related to a discrepancy between an individual’s ideal and actual body type. This discrepancy results in the multitude of sociocultural pressures of idealized body types; issues associated with body image misalignment include lack of self-esteem, negative self-perceptions, and lack of self-worth. Negative and harmful behaviors, such as depression and eating disorders, often coincide with these issues (Mangweth-Matzek et al. 2006). Numerous scholars from both psychology and sociology often refer to or describe negative body image as body dissatisfaction or body image dissatisfaction (Bedford and Johnson 2006; Homan and Boyatzis 2009; Leichty 2012; Lewis and Cachelin 2001; Peat et al. 2008). These terms are used interchangeably throughout this thesis.

One’s body image cannot be simplified to the static dichotomy of positive or negative but rather is characterized as a shifting slope of ascent and descent. Body image

does not remain constant, whether positive or negative throughout life. Body image fluctuates and changes with changes in perceptions, feelings, beauty work investment, change in body shape, individual body ideal, social positioning, society and culture (Hurd Clarke 2011; Myers and Biocca 1992; Paquette and Raine 2004).

Although bodies are shaped by many dimensions, including race and ethnicity, religion, and social class, this study focuses primarily on the intersection of gender and age. In the next section, I explain the social construction of gender and expectations of displaying masculine and feminine bodies.

### **Embodying Gender**

In most Western societies, there is a dichotomous and often perceived as rigid system of gender that includes categories of men and women (Lucal 1999). These two genders are defined as polar opposites; to be manly or masculine is defined as not acting feminine or womanly and vice versa. “Doing gender” is associated with portraying or “displaying gender” as feminine and masculine (Goffman 1966; West and Zimmerman 1982). In regards to Western societies, Judith Lorber (1994) recognizes the legitimization of “gendering” because society tends to associate gender with sex and the biological differences between females and males. However, social scientists view gender as a socially constructed and scripted dramatization of the two sex differences that organize social life (Lorber 1994; West and Zimmerman 1982).

Definitions of masculinity and femininity are socially constructed to coincide with biological sex differences. Both femininity and masculinity are associated with particular actions, tone of voice, body language, posture, clothing, physical and character traits. Masculinity is associated with dominance, strength, leadership, and hardness, whereas

femininity is associated with passivity, submissiveness, helplessness, weakness, and softness. Gender-role orientation or ideology is the extent or degree to which an individual identifies with these stereotypes of masculinity or femininity (Hall-Pallus 1994). Through socialization, men and women learn to embody the ideas and expectations of not only how to present oneself as a particular gender, but also the expectations of others to perform or act as a particular gender. In relation to others, Lucal summarizes West and Zimmerman; “Successful social relations require all participants to present, monitor, and interpret gender displays” (Lucal 1999:782). In order for men and women to interact successfully, portraying one’s gender is not only expected, but it is also vital and crucial. Beginning at birth and reinforced throughout the life course, men and women are given specific scripts according to their assigned gender.

The embodiment of gender is the internalization of gendered norms for masculinity and femininity through the expression of the body. Bodies are gendered both by appearance, performance and interactions with others with the expectations of others acting in accordance with their gender (Lucal 1999). Lorber (1999) and Bordo (2003) discuss the pervasiveness of the social institution of gender as the primary way in which social life is organized as well as a system of stratification and hierarchy (1994). The embodiment of gender is a continual process through which men and women are provided with advice from the media and other institutions that emphasizes the stereotypes of masculinity and femininity. In post-modern societies, our consumer driven culture projects this advice constantly which is then internalized as correct or incorrect ways to perform gender. The individual is then judged based upon how well his or her body conforms to these expectations.

While gender ideology, gender norms and ideal types of bodies are socially constructed, “their consequences are tangible and meaningful, and are experienced mentally, emotionally, and physically by individuals” (Shapiro 2013: 208). As Crawley et al. (2007:1) explain,

the cultural messages that form our expectations and ‘rules’ about gender determine the gendered experiences of our bodies – our embodied knowledge, and these messages and our resulting gendered practices help to shape our physical bodies as well.

The socially constructed expectations for displaying and doing gender include the maintenance of body types for both men and women, also defined in opposition to each other.

Body image demonstrates the real consequences of society’s expectations for the continuity of gender norms. Consequently, the imposition of body type ideals upon men and women often result in negative perceptions of the body. Men and women, whether masculine or feminine, often use unhealthy and risky behaviors in pursuit of the ideal body type. As demonstrated, the definitions of masculine and feminine ideal body types are socially constructed and fluid (Clausen 2003; Vespa 2009), but striving towards those ideals can cause considerable physical and emotional harm, most notably among women. The ideal body types are internalized as normal and natural. Therefore, the expectation to adhere to these ideals affects men’s and women’s perceptions of their bodies. Consequently, body image issues are pervasive in postmodern, Western societies across socioeconomic background, race, ethnicity, sexuality, and age. According to The National Association of Anorexia Nervosa and Associated Disorders, approximately 8 million or 3% of the total population in the United States have some type of eating disorder (ANRED 2016).

Feminist scholars suggest that mimicking and striving towards these body type ideals represents gender conformity (Bordo 2003; Chernin 1981). Women and girls, who are expected to achieve a petite, thin body (Grogan 2008), are socialized to view their bodies as objects and their cultural and moral worth are dependent on adhering to feminine expectations. Women often internalize this view of the body as an object to be displayed according to social definitions of beauty. This is referred to as self-objectification, which often negatively affects body image (Tiggemann and Lynch 2001). Not surprisingly, research consistently finds that negative body image perceptions are prevalent among women of all age groups and are sustained throughout women's lives (Pruis and Janowsky 2010). Specifically in reference to women, scholars termed this dissatisfaction and enduring negative body image as "normative discontent," endlessly pursuing the thin ideal (Bordo 2003; Cash and Henry 1995; Leichty 2012; Peat et al. 2008; Rodin, Silberstein, and Striegel-Moore 1985).

Nonconformity to these gender specific body types subsequently results in sociocultural pressure and sanctions, such as pressure to diet and exercise excessively or seek out medical procedures and diet pills. Johnson (1993) states, "the increased orientation and tendency to negatively evaluate physical appearance and body image, leaves women's eating, self-concept, self-esteem, level of depression, happiness, and psychological health more vulnerable to a negative body image than men" (1993:21). For decades, scholars have documented the extreme and pervasive phenomenon of women's body image issues. Until recently, however, researchers have paid little attention to men's perceptions of their bodies. When men are included in body image research, scholars fail to adequately discuss the similarities between men's and women's



negative body image (Choma, Visser, Pozzebon, Bogaert, Busseri and Sadava 2007; Lamb et al. 2009).

### *Incorporating Men's Experiences*

While women experience a lifelong normative discontent, men typically describe their body image positively throughout the life course. Nevertheless, men also exhibit many extreme measures to achieve the masculine expectations of the ideal body (Monaghan 2008; Grogan 2008; Saxton and Cole 2012; Spector-Mersel 2006). The portrayal of the masculine body in the media has become larger, more muscular and lean since the 1950s, which explains the recent pressure men feel to adhere to these expectations (Spitzer, Henderson and Zivian 1997). Characteristics of masculinity include power, dominance, and superiority displayed through the body as large, muscular, strong, and lean. Pope, Phillips and Olivardia (2000) refer to this drive for the impossibly muscular and lean body as the “Adonis Complex.” Among men, conformity to this masculine body ideal represents “power and strength,” while failure to conform results in feelings of powerlessness and physical insecurity (Grogan 2008; Pope et al. 2000).

Men take extreme measures to achieve this status symbol associated with powerful bodies with use of anabolic steroids, excessive exercise and surgical procedures. A *Times* article, “Never Too Buff,” suggests men’s concern for their body image is developing into a normative issue comparable to women, indicative of changing gender roles (Cloud 2000). Body image issues may also develop as a result of changing gender roles (Lorber 1999; Grogan 2009; Monaghan 2007; Tantleff-Dunn, Barnes and Larose 2011). A recent rise in sociocultural pressure on young men to conform to an

ideal body type characterized as muscular and lean, has resulted in an increase in body image issues of younger men (Algars et al 2011).

It is difficult to measure and examine men's feelings about their bodies, however, because of their reluctance to express or admit feelings of insecurity. Monaghan (2008), for example, finds that attempts to lose weight or even admit concern for one's body image is often perceived as de-masculinizing due to the synonymous nature of fatness or softness with femininity. The men in this study discussed the notion of "man boobs" in that with the presence of fat deposits in the chest area, men felt feminine. Consequently, body image issues may arise in response to a threat to masculinity when enduring weight-loss behaviors.

Cultural pressures to conform to an ideal body are not gender specific, and "the gap between women and men on the issue of body dissatisfaction appears to be narrowing," (Baker and Gringart 2009:1017). Even though these ideal body types are different for men and women, pressure to adhere to them affect body image for both genders. Society no longer places all the pressure on women to conform and achieve the ideal body type as men are now experiencing these similar pressures. It remains to be seen, however, whether this pressure remains uniform across the life course.

### **Aged Bodies and Life Course Theory**

As demonstrated, the embodiment of gender affects body image in youth and adulthood. In a society that equates beauty with youthfulness, what happens to men's and women's perception of their bodies in later life? Perception of body image fluctuates throughout the life course around major life transitions such as adulthood, marriage, parenthood, retirement and post-retirement years (Vespa 2009). In older adulthood, men

and women engage in beauty work to appear younger, representing embodied ageism (Baker and Gringart 2009).

Life course theory understands the unique perspective of the individual by considering the context of the individual's history and current social forces that impacts the individual's understanding of the world and his/herself (Elder, Jr. 1994; Moen 2001). A life course perspective will help to identify and understand the "personal and/ or environmental factors that shape body image and the trajectories of body image across the life course" (Leichty and Yarnal (2010:1197). Body image is a construct shaped by the experiences, social forces, people and historical context of the individual. To understand the current body image of older adults, researchers must take into consideration the accumulative effect of life events and experiences. As a result, an individual's body image is in constant flux and the researcher must inquire into the past and the present. This life course perspective will provide a more holistic and rich interpretation of the way older adults perceive and feel about their bodies.

Ageism and embodied ageism in correspondence with life course theory, highlights the influence of age on body image. The term ageism was first used by Robert Butler in 1969 and was defined as "systematic stereotyping of, and discrimination against people because they are old, just as racism and sexism accomplish this with skin color and gender" (Hurd Clarke and Griffin 2008:654). Such stereotypes include the loss of the capacity to care for oneself and devaluing older adults as less important members of society (Hurd Clarke and Griffin 2008; Oberg and Tornstram 1999). Other negative and ageist stereotypes include asexual grandmother or grandfather and senior citizen, with character traits of old-fashioned, wrinkly, shrewd, nosy, impaired, senile and overall

unattractive with wrinkly skin, sagging eyes and shaky hands (Thompson Jr. 2006). Additionally, Slevin (2010) found in her interviews with 57 older adults, both men and women engage in beauty work to fight signs of aging and the sense of feeling invisible, affecting their perceptions of their bodies. Despite these stigmas and stereotypes, the maintenance of masculinity and femininity, in addition to sexual desire, remain important in older adulthood (Montemurro and Gillen 2013).

Researchers refer to the term, embodied ageism, as the process of internalizing ageist stereotypes and placing greater emphasis on maintaining a youthful appearance. This is the absorption and belief in cultural norms and definitions of beauty as natural and obligatory (Slevin 2010). In a society that equates beauty with youthfulness and the display of one's body predetermines an individual's cultural and moral worth, age-resistant practices and beauty work are common and perceived to be necessary to remain a relevant member of society (Slevin 2010). Beauty work to 'stop the clock' often includes dramatic, dangerous, and expensive measures such as cosmetic surgery or chemical peels (Hurd Clarke and Griffin 2008). Oberg and Tornstram (1999) discuss the sources of embodied ageism as the constant influx and overwhelming amount of anti-aging messages in contemporary society, which results in the inability to think in opposition to these messages. Negative body image occurs when older adults fail to obtain youthful bodies despite engaging in age-resistant practices.

### **Embodying Gender and Age**

Major life events throughout the life course reinforce expectations associated with displaying a gendered body (Vespa 2009). The gendered expectations associated with norms of masculinity and femininity persist through old age but little is known about its

effects on older men's and women's body image. Taken together, gender and life course theories highlight the intersectionality of gender and age as it affects body image perception among older men and women. Compared to other age groups, little research has been conducted linking age and gender in the construction of body image among older adult Americans. Older adult women's body image is understood in two contradictory ways while little is known about older men's experiences. However, the sense of invisibility correlates with old age for both men and women.

The first way in which age and gender intersect affecting body image for older adult women is that visible signs of aging often reinforce negative body image perceptions. Older women are considered unworthy of acknowledgement as a relevant member of the social world but are still expected to resist signs of aging and display stereotypes of femininity. Many older women, who reported positive body image in their youth, experience a decline in body satisfaction with inevitable physical changes associated with aging (Pruis and Janowsky 2010). In Hurd Clarke and Griffin's (2008) study of ageism and beauty work among middle-aged and older adult women, a 59 year old woman notes: "...all of a sudden society changes how you look at yourself because you're not noticed any more... Once you're 50...you don't exist" (Hurd Clarke and Griffin 2008). However, invisibility is not always considered to be a negative consequence of aging; women no longer feel pressure to adhere to expectations related to feminine self-presentation. As evidence suggests, older women interpret the sense of feeling invisible, or no longer remaining the object of men's gaze either positively (Macdonald and Rich 2001) or negatively (Hurd Clarke 2011).

Although these processes lead to body image dissatisfaction among some women, previous research also suggests that some older women experience a sense of resolve with their life-long discontent and find a greater sense of satisfaction with their aged bodies (Muth and Cash 1997). Despite research suggesting enduring normative discontent, Leichty's (2012) article title summarizes the paradox for many older women: "Yes, I worry about my weight ... but for the most part I'm content with my body." Clarke Hurd (2000) similarly found that older women reported relaxed preoccupation with physical appearance; however, they still engaged in beauty work and body weight management associated with maintaining a feminine body. Normative discontent is not ubiquitous among women throughout the life course. While some older women feel pressure to pursue society's ideal definitions of beauty, many older women develop positive perceptions of their body or their concerns with their bodies remain, yet they no longer pursue means to conform to societal pressures. Older women become invisible with signs of aging, but there is still much disagreement about how gender and age intersect to shape older adults' body image (Bessenoff and Del Priore 2007; Hurd Clarke 2001; Hurd Clarke and Griffin 2008).

The divergent expectations for older men's and women's bodies is understood as the "double standard of aging." The double standard of aging implies that, "women are judged more harshly than men" as they age (Tiggemann and Lynch 2001:243). Slevin (2010) also discusses this double standard and states, "if older women fail to do the bodywork needed to 'age successfully' they will be viewed as moral failures and will lose cultural relevance" (2010:1006). As women age, society still expects women to maintain

a physically attractive appearance while men's physical attractiveness is judged more positively (Markson and Taylor 1993; Thompson, Jr. 2006).

While research focused on older men's perceptions of their bodies is limited, factors that influence body image in older age for men are similar to older women. While many scholars suggest a sustained positive body image for men in comparison to women, many others indicate the dramatic change in older age for men (Baker and Gringart 2009; Drummond 2003; Lamb et al 2009; Thompson Jr. 2006; Spitzer, Henderson and Zivian 1997). Synonymous with definitions of masculinity, society places a heavy importance of physical ability and functionality of men's bodies. For men, the lack of definitions of masculinity in older adulthood results in the loss of "moral certainty that [had] insured [their] identity" (Saxton and Cole 2012:97). In Reddy's (2013) qualitative study examining only older men's body image perceptions, participants reported high levels of body image satisfaction only with persistent body maintenance through an active and healthy lifestyle. This implies that with a loss of functional ability, men question their perceived masculinity. Men view their body as incapable and report a development of body image dissatisfaction that is starkly different from the body satisfaction they experience in youth (Algars et al 2009; Drummond 2003; Lamb et al 1993; Rozin and Fallon 1988). Because men judge their bodies as a whole, the decline in physical ability affects men's body image and satisfaction (Oberg and Tornstram 1999). This evidence suggests that for men, the increase in age is correlated with less positive body image.

Both older men and women emphasize health and physical ability when discussing their perceptions of their bodies (Halliwell and Dittmar 2003). With the loss of function and deterioration of health, alongside the visible signs of aging, the aged body

vanishes from society's attention. As Hurd Clarke and Griffin (2008), Baker and Gringart (2009), and Slevin (2010) reveal in their qualitative studies, the more visible signs of aging become, the more invisible these older men and women feel. This results in negative body image and other corresponding issues such as intense beauty work and attempts to combat and mask physical signs of aging. This suggests that the notion of invisibility may not be gender specific. The embodiment of gender for older adult men and women influences the experience with their aged bodies.

### **Concluding Remarks**

Research on the intersection of age and gender for older men and women is limited. Previous research on body image is outdated, overemphasizes women's body dissatisfaction, and arbitrarily defines age groups with unrepresentative samples (Cash and Henry 1995; Cummings 1989; Lamb et al 1993). This study advances qualitative research and the application of gender and life course theories on body image. This qualitative study explores body image among older adult men and women. Research is limited that focuses on older adult body image. This study addresses gaps in the literature related to age and gender and how this unique intersection influences older adults' feelings about their bodies.

This project answers two main research questions to understand the intersection of age and gender: 1) How do older men and women feel about their bodies, and why? 2) How do these views differ by gender? Life course and gender theories will serve as theoretical foundations to guide this project. Life course theory emphasizes the importance of the sociocultural context in which a person exists, understanding the historical and social factors that play a role in shaping an individual's perspective at a



particular time (Elder Jr. 1994; Kok 2007; Robison and Moen 2000). Therefore, the body image of an older adult is a phenomenon or perspective built upon all the historical and social forces throughout the life course. Gender theory highlights the social construction of gender and gender identity's impact on how to "do gender" properly (West and Zimmerman 1987). Perceptions of doing gender correctly or incorrectly reflects upon feelings towards one's own body.

## CHAPTER III

### METHODOLOGY, DESIGN, & ANALYSIS

#### **Theoretical Perspective**

The purpose of the study is to advance the basic understanding of the intersection of age and gender on body image rather than generalizability of the entire aging population of the United States or the state in which the sampling took place. Life course and the social construction of gender will serve as theoretical foundations to guide this project. Life course theory emphasizes the importance of the sociocultural context in which a person exists, understanding the historical and social factors that play a role in shaping an individual's perspective at a particular time (Elder Jr. 1994; Kok 2007; Robison and Moen 2000). Therefore, the body image of an older adult is a phenomenon or perspective built upon all the historical and social forces throughout the life course. Gender theory highlights the social construction of gender and gender identity's impact on how to "do gender" properly (West and Zimmerman 1987). Perceptions of doing gender correctly or incorrectly reflects upon feelings towards one's own body.

## **Design**

The data for this project are from in-depth semi structured interviews with 31 older adults aged 65 to 92 years consisting of 16 women and 15 men. I define older adults as those 65 years and older, beyond child-bearing years, past the United States average retirement age of 64 years for men and age 62 for women (Munnell 2015). This open targeted age group yield findings more closely generalizable to a cohort rather than an arbitrary older adult age range (Elder, Jr. 2003). This exploratory study addresses two main research questions: 1) How do older men and women currently feel about their bodies, and why? 2) How do these views differ by gender? To answer my research questions about the role of gender and age in shaping older adults' body image throughout the life course, participants were asked to discuss experiences in everyday social interaction, including their beauty routine, family, the media, physical activity, and health through each chapter of their lives; probing questions were asked when appropriate. The interview guide was organized according to major themes found in the literature with open-ended questions that instructed participants to think of their lives as a chapter book. Each chapter represents the stages of life: Chapter 1 is Childhood; Chapter 2 is Teen Years; Chapter 3 is Young Adulthood (Twenties and Thirties); Chapter 4 is Adulthood (Forties and Fifties); Chapter 5 Older Adulthood. This provided the opportunity for respondents to reflect upon major life events throughout the life course that impacted their perceptions of their bodies. Life course perspective suggests milestones and major life events shape the perception of body image; this will aid and encourage the memory of sources of any changes in body image perception and potentially reveal underlying explanations for these issues (Elder 1998; Vespa 2009).

This methodology provides rich insight about the topic (Berg 1995) and controls for missing or misconstrued data, which often occurs with self-administered questionnaires. All participants signed a document of informed consent and completed a demographic questionnaire to control for any ambiguity or potentially sensitive questions such as gender, education, sexuality and race. The interviews were audio recorded and transcribed clean verbatim by the interviewer with the consent of each participant. Interviews were conducted during the Summer and Fall of 2016. Interview length ranged from thirty to one hundred forty minutes, lasting an average of 50 minutes. Participants did not receive any monetary compensation for their participation. Each interview was conducted in a safe and comfortable setting chosen by the respondent and investigator including coffee shops, the local senior center, and participants' homes. Access to the audio recordings, transcriptions, documents of informed consent, demographic questionnaires and field notes were all restricted to researchers associated with the project; all data are password-protected, organized and interpreted chronologically.

### **Sample**

Following the design by Hurd Clarke and Griffin (2008), the men and women in this non-probability sample were recruited using advertisement flyers at fitness centers (3), the local senior center (8), retirement facilities (5), and snowball sampling (15). Sampling took place in a Midwestern city which is representative of a unique mix of rural and urban culture, home to a state university and growing retirement community; this city was chosen because, according to US Census Data (2015), 11.4 percent of the population are 65 and older. The participants were diverse according to their level of educational attainment, work histories, health statuses and age; the average age is 78.25 and average

retirement age is 64 (Table 1). All the participants identified as heterosexual, 30 were white and one man identified as American Indian. All participants were parents and 19 were currently married, 11 widowed, and 1 divorced man. Nine participants were currently living in a retirement home at the time of the interview, while the others lived independently. I used an online random name generator to assign gendered pseudonyms for each participant.

**Table 1.** Characteristics of All Respondents (N=31)

	Respondents	
	Number	Percentage
Gender		
Female	16	52.0
Male	15	48.0
Race		
White	30	97.0
American Indian	1	3.0
Age (decades)		
Sixties	2	0.1
Seventies	14	45.0
Eighties	14	45.0
Nineties	1	0.1
Former Occupation		
Professional	9	29.0
Management/Administration	2	0.1
Technical	5	0.2
Teacher	3	0.1
Self-Employed	4	0.2
Clerical	3	0.1
Labor	2	0.1
Homemaker	3	0.1
Education		
Less than high school	1	0.1
High School (12 <sup>th</sup> grade)	7	22.6
Associates or Vocational	3	0.1
Bachelors	6	19.4
Masters	9	29.0
PhD or DVM	5	0.2
Marital Status		
Single	1	0.1
Married	19	61.3
Widowed	11	35.5
Resident Status		
Independent	22	71.0
Retirement Facility	9	29.0
Average Retirement Age (years)		
Female	65.63	
Male	65.23	
Total	64.0	

## **Data Analysis**

To understand the intersection of age and gender on body image, my coding strategy was guided by the themes found in the literature and the questions in the interview guide (Corbin and Strauss 2015). I used word processing software to organize and analyze the data. Such initial themes included health, beauty, appearance maintenance, independence, vanity, body and appearance satisfaction, historical and social life events, and role models in the media. I analyzed and interpreted the data using Charmaz (2003) and Corbin and Strauss's (2015), grounded theory approach, generally guided by life course and gender theories. The transcriptions and field notes were analyzed to identify major themes and subthemes, then inductively coded line-by-line and organized accordingly. The coding process was a continual process of analyzing the data and developing theory until the point of saturation by using a combination of both concept- and data-driven coding (Charmaz 2004; Corbin and Strauss 2015; Hesse-Biber and Leavy 2011). Initial codes and themes were investigated further to identify exceptions and until an exhaustive list of sub-codes emerged. Categories and sub-categories, while coded exhaustively, were not mutually exclusive; broad categories were divided into sub-categories in which a systematic coding strategy delineated interpreted concepts consisting of various specified dimensions with particular characteristics and properties (Corbin and Strauss 2015). Data was multiple coded; thematic categories were not mutually exclusive and often statements and were often coded into more than one thematic category.

While this project is guided by life course and gender theory, the grounded theory approach allowed the important themes to emerge organically. A colleague and I

established inter-coder reliability with a small portion of the transcripts at an 80% rate, which increases the validity of my findings and reliability of my coding strategy. This process provides a nuanced and rich comparison within and between gender of how older adults feel about their bodies and how these feelings have changed throughout the life course.

### **Limitations**

Limitations are inherent in all research. This project is limited to the small sample size, which lacks diversity in regards to race, ethnicity, and sexuality. In addition, the findings are specific to communities similar to the sampled city and not generalizable to the entire older adult population. However, the purpose of this study is to advance the basic understanding of the intersectionality of age and gender on body image with the use of qualitative methodology. While this study is limited by monetary and time constraints, the deeper understanding of the intersection of age and gender will encourage the promotion of positive body image for older adults and the advancement of the knowledge of embodied gender and aged bodies and body image research more broadly.



## CHAPTER IV

### FINDINGS

The findings provide an in-depth look at post-retirement age adults' perceptions and experiences with their aging bodies. The participants discussed the nuanced and multi-dimensional nature of body image, self-presentation, and the aging process. They expressed the complex process of self-evaluations regarding visibly and physically 'aging well,' identifying as old, and how these evaluations affect their body image. Medical interventions, beauty work associated with "doing" gender, and health all affect how participants feel about their bodies. These participants discuss their sentiments towards aging and their control of the aging process. The findings discussed in this chapter support previous research regarding women's development of content with any feelings of discontent with their bodies (Leichty 2012). Additionally, the findings support literature that suggests men's and women's health and physical capability influence body image in older adulthood (Drummond 2003; Reddy 2013; Saxton and Cole 2012).

For all the participants, appearance and self-presentation is an important concept and play a crucial role in how they feel about their bodies and how they perceive others. Maintaining a particular appearance, whether through habit or learned through life, is described as showing respect for other people as well as self-respect, self-care, and self-love. Appearance represents and reflects upon more than just a presentation that is visually appealing, but also a person's character and other intrinsic qualities. In support of previous research, the narratives reveal that they are extremely conscious of how they dress and present themselves to other people (Montemurro and Gillen 2013). Most assign greater cultural and moral worth to others who show active and obvious efforts in their self-presentation, specifically adherence to gender roles, overall cleanliness, and body size. Such qualities discussed in the narratives include intelligence, worthiness of attention, professionalism, and senility. This is not gender specific. Both men and women objectify others while unintentionally self-objectifying their own bodies. The embodiment of gender for older adult men and women influences the experience with their aged bodies.

The narratives reveal three different, yet overlapping ways in which these older men and women feel about their bodies: satisfaction, dissatisfaction, and content with imperfection. Body image is impacted by comparisons made with bodies of others in their peer group, visible signs of aging, weight and body size, the routinization of beauty work, facing and accepting the realities associated with aging, and the difference in body image throughout the life course. In this chapter, I provide insight about how the older men and women I interviewed “do” gender in older adulthood. Next, I discuss the three ways in which body image is perceived in older adulthood. Finally, I discuss the larger

implications associated with these findings regarding how the intersectionality of age and gender affect older adult's body image.

### **Doing Gender in Older Adulthood**

As discussed in Chapter 2, previous research finds that older men and women face stereotypes that reduce older adults to genderless, asexual grandparents or senior citizens and that gender-role orientation becomes meaningless. Despite these stereotypes, the majority of the narratives suggest that beauty work and “doing” gender remains an important aspect of their perception of their bodies and overall appearance. At age 92, Paula describes her beauty routine as “primarily habitual,” describing it as something her “mother taught me that’s part of taking care of yourself.” Shaving, wearing makeup, or fixing hair a particular way are often routine beauty work practices established in early chapters of their lives that become “just something I’ve done my whole life. It’s just habit” (Thomas, age 73). While there were gender differences, such as use of makeup, both men and women discuss continuing a beauty routine, or lack thereof, throughout life. This routinization of beauty work suggests that despite ageist stereotypes, maintaining appearance and continuing to “do” gender is important in older adulthood. Further, these routines are carried on through life unless negative appearance evaluations are made to modify their routines. Habitual beauty routines allow older adults to maintain their sense of cultural and self-worth. While adhering to traditional portrayals of femininity and masculinity for women and men, respectively, they feel relieved to no longer feel the obligatory nature of “doing” gender. Older men feel they must display and prove their masculinity by overemphasizing their engagement in physical activities.

However, “doing” gender for older women means portraying a more relaxed form of femininity.

Older men and women also discuss activities in which they feel obligated to participate. Such activities involve the level of engagement in beauty work to resist signs of aging or efforts to adhere to body type ideals. For instance, diet and exercise are regarded as critical to actively demonstrate their cultural and moral worth. Irene, age 82, expresses life-long discontent with her body and has been living in a retirement facility for three years at the time of the interview. She shares that, “I think I have to still watch my weight carefully. I shouldn’t eat as much as I do. And I do sit more than I need to sit. I need to do some exercising more than I do.” Engaging in these activities such as diet, exercise and presentation of self are crucial in order to be perceived positively, as discussed below.

The degree to which women engage in beauty work is influenced by resources, geographical location, habitual beauty work established in youth, and the level of concern about their own appearance. All 16 women currently engage in some beauty work to accomplish femininity while 11 currently engage in beauty work specifically to resist signs of aging; such beauty work includes creams, makeup, hair dye, weekly visits to the beauty parlor, acne treatments, laser hair removal, and facials. Women participants feel they must not portray themselves as overtly feminine, but rather define femininity in a different, subtler way in older adulthood. They now feel a sense of liberation in the choice to overtly express or portray their femininity. Overwhelmingly, these older women practice restraint in portraying femininity, regarding the types of beauty work and especially clothing choices they feel “appropriate for [their] age.” For example, women

discuss the unacceptable nature of wearing pants during early chapters in their lives; dresses and skirts were the only acceptable feminine dress highlighting an evolution of femininity associated with age and period. Further, these women explain that dresses or skirts are no longer acceptable or “appropriate” for older women, but rather pants are now the appropriate dress. For example, Lillie (age 76), who still considers her mother a role model for her beauty routine, explains, “When I was younger, I would never think about wearing pants to church or something like that. It would always be you wore hose, you wore heels, you wore a dress or a skirt. As I got older, I don’t.” These women embody ageism by practicing self-constraint in regards to their wardrobe and use of makeup.

While many of these women exhibit embodied ageism as reflected by their self-constraining beauty work behavior, these women were able to continue “doing” femininity more easily than men in their older age. As discussed in Chapter 2, weakness and feebleness are congruent with expectations associated with femininity. Furthermore, older age is also associated with fragility as bodies physically deteriorate. Therefore, women are more able to display femininity as their bodies age. Additionally, older women are able to continue other aspects of femininity such as mothering and grandmothering. These women uphold traditional gender roles by sustaining this role as the nurturer, allowing them to continue “doing” femininity without much difficulty.

Many women continue beauty routines established in youth. Most women continue to shave their legs, wear makeup, maintain skin care regiments, and regularly visit the hair salon. Maintaining beauty routines helps these women maintain a relatively positive body image. At the same time, they also modify the routines according to the

perceived appropriateness for older women. For example, Erin, while critical of current standards of beauty, regularly wears makeup, dyes her hair, and waxes her eyebrows. She maintains her beauty routine through older adulthood because, “When I retired, I decided that every morning, that I was going to get up and do exactly what I did when I went to work. Because I looked in the mirror and thought...as you get older, unless you kind of take care of yourself, you’re washed out and grey, it does affect how you feel. So every morning, I get up and do my hair. Do my face.”

However, another group of women found a sense of liberation with not feeling the pressure to present themselves in overtly feminine ways. For example, many women describe the obligation to dress in a professional manner and to “look nice” in their youth and through their working careers. Retirement and older adulthood releases the pressure to maintain beauty work and these women only continue to wear makeup, dress in particular clothes, or “fix their hair” on their own terms. Lucy, a breast cancer survivor, opted not to wear prostheses after undergoing a double mastectomy. She expresses feeling proud and in control of her femininity. She no longer feels she needs breasts to display an idealized feminine body type: “If I’m going out, like if we’re going out someplace formal, I wear scarves and things that kind of obscure the fact that I’m not booby. But I figure if somebody else has a problem with it, that’s their problem. Not me, because I just feel good about it.” Lucy feels liberated from the constraint she once felt to adhere to traditional definitions of womanly body. While adherence to strict feminine gender norms were maintained through most chapters of their lives, many women interviewees find a sense of relief and freedom from adhering to feminine expectations of self-presentation in older adulthood. These women recognize their imperfections, yet

develop the sense of feeling content with those imperfections in later life (as discussed more fully below), highlighting how societal and cultural change impacts the ways in which women embody feminine gender norms in older age.

The narratives of the older men in the sample support the limited research regarding men's body image in older adulthood. Prior research suggests that older men find masculinity difficult to portray in older adulthood due to a decline in physical capability and health associated with aging, which affects body image (Baker and Gringart 2009; Drummond 2003; Lamb et al 2009; Thompson Jr. 2006; Spitzer, Henderson and Zivian 1997). Navigating masculinity to "do" gender properly is difficult for men in older age. Men feel the need to continually prove and provide evidence of their masculinity through physical exertion and functionality. Additionally, older men's positive perceptions of their bodies are largely dependent on their physical capability, also in support of previous research (Drummond 2003; Reddy 2013; Saxton and Cole 2012).

Contrary to women and femininity, gender-role orientation and maintaining traditional definitions of masculinity did not change for these men in older adulthood. Men discuss physical capability, musculature, athletic ability, and competition as what it means to be a man continuing through older adulthood. Gerald, age 82, is living in a retirement facility emphasized throughout the interview that his living situation is temporary. He exemplifies the critical importance of continuing traditional norms associated with masculinity when asked what he liked about his body: "My still being able to swing a sledge hammer hard enough to split logs which I've done recently. And just do the kinds of things I want to do. My body has become a mechanism and mobility

kind of a thing. Like my car. Like my golf cart.” The satisfaction he feels with his body is based on traditional characteristics of masculinity. When asked if he identifies with his current age, or with others in his age group, Gerald responds, “Actually, I don’t. I identify with maybe 65...I’m not on a cane. I’m not on, they’re called rolling walkers. I’m not on one of those. I’m not even on an aluminum walker. I can walk unassisted. I can do the things that people normally associate with being 65.” Gerald’s response represents a prevalent narrative among the men I interviewed. While he expresses extreme dislike for visible signs of aging during the interview, he perceives his body positively overall because he remains physically capable and independent, traits associated with traditional masculinity. In contrast to my findings for women and femininity, men find “doing” masculinity more difficult in older age.

More so than women, men equate appearance with morality and cultural worth and feel they must continue to adhere to masculine gender norms such as particular hairstyles and type or amount of facial hair. Men “follow the same routines” regarding beauty work practices into older adulthood such as shaving, wardrobe, and hairstyles. Presentation of self is more critical in older adulthood for men than discussed in previous chapters of their lives. Men often describe mimicking current fashionable hairstyles such as the “ducktail” or “crew cut.”

Unexpectedly, men, more often than women, reveal television and film stars as role models throughout life that are perceived to exhibit masculinity correctly, primarily consisting of western film stars. Such examples include John Wayne, Gene Audrey, and Pat Boone. These men learned acceptable traits of masculinity through these role models in earlier chapters in their lives and continue to express admiration for their physical



abilities and sexuality. Additionally, for men, sexuality is also an influential factor of maintaining masculinity and perceptions of their bodies in older adulthood. When asked specifically what he likes about his body, Forrest exclaims, “My penis still works! [Laughs] And when you have a younger wife, that’s an important factor.” Older men’s sexuality remained vital in older adulthood. In my sample, maintaining a masculine body is more important for older men than it is for older women to continue adhering to feminine body ideals. Many of the men I interviewed felt they need to prove their masculinity to me or in general in their daily lives through physical exertion and functionality. They share examples of imperfections with their bodies, distaste for their visible signs of aging, yet they perceive their bodies positively overall due to sustained physical abilities. In support of prior research, portraying traditional definitions of masculinity remains crucial to these older adult men’s body image (Drummond 2003; Reddy 2013; Saxton and Cole 2012).

Men, more often than women, are overtly critical of others and associate appearance and body size with cultural and moral worth. George, age 72, projects his preoccupation with his own personal appearance and the appearance of others:

So where’s your minimal standard of looking at yourself in the mirror and say, [gestures pointing at reflection in the mirror] ‘hey, this is what I am because that’s what you are and that’s what you’re going to tell the people even if they never talk to you on the street or you walk into a store or you walk into church. You are what you are.’ And it’s pretty obvious to me that some people are more concerned about at least they’re appearance, whether it be clothing-wise or health-wise, than other people are. Which makes [them] a little more serious and little bit more potentially respected.

While some men feel content with perceived imperfections such as unwanted body fat or age spots, a majority group expresses distaste and equates personal morality with obesity. The body is a critical tool with which older men judge themselves and

others. Ben and Gerald exemplify older men's critique of obesity. Ben is living in a retirement home and is often concerned about how others perceive his appearance. He exercises daily and feels "okay" about his body, but explains why he, at age 84, currently diets: "So I don't put on weight. Well, I see that it's pretty easy for men my age to get a [gestures an extended mid-section] something that's kind of a belly that sticks out. That kind of thing. I don't want to do that. I think it's ugly. And I don't want to be like that." Similarly, Gerald comments, "One thing that I began to be sensitive toward was obesity in others. And I was glad that I didn't look like some of those fat people...To me it showed a lack of discipline." While Ben's comment is subtler, Gerald openly criticizes obesity before discussing his own weight issues, a common theme amongst the older men in the sample. Gerald's comment openly depicts the cultural and moral worth associated with bodies and adhering to an ideal. Men project relatively positive sentiments towards their own bodies, but were overtly critical of others success with aging, appearance, and adherence to body type ideals.

This section discusses the first distinct finding in this research: "doing gender" in older adulthood. The next section details the second major finding: the differing ways in which these older men and women perceive their bodies. There is no uniformity in regards to body image throughout the sample. The findings present three different ways in which these older adults feel about their bodies: satisfied, dissatisfied, and content with imperfections. Most men in this sample feel satisfied with their bodies because they still feel physically capable, while the few individuals that feel dissatisfied are women due to perceived cosmetic flaws. Largely, the interviewees feel content with perceived bodily imperfections; they accept the realities associated with aging and feel a sense of

liberation from the pressure to conform to masculine and feminine body type ideals. Additionally, body image perceptions are in constant flux; feelings about the body are often dependent on particular context in that participants feel satisfied with their bodies, but often there many are circumstances in which they feel less than satisfied.

**Satisfaction: “I’m happy with my body”**

Ten of the 31 participants, primarily men, express positive feelings about their bodies. This satisfaction is largely based upon health-based criteria such as physical capability, overall body function, and successful aging. Both older men and women compare their own bodies and how well they are aging based on preconceived definitions of old from their peers, family, and figures in the media. Their same-age peers, with whom participants spend much of their time, are the largest source of comparison and self-evaluation of attractiveness, body size or shape, and aging throughout the life course. Older men and women seek affirmations of their own self-worth by comparing themselves to those around them.

Generally, participants tend to view their peers, both those with which they intensely interact and older adults more broadly, as less physically capable, less healthy, and less motivated to maintain physical and mental well-being. Barry, age 80 who volunteers building houses and has maintained a regimented exercise program since young adulthood, exudes a positive perception of his body when he discusses his health. Both men and women perceive their bodies by evaluating their health, physical in comparison to others in his age group:

I think I’m frankly in remarkable condition. My physicians say, ‘Barry, you’re more like a 65 year old when it comes to your body rather than an 80 year old.’ My heart rate, I take an aspirin and a pill for cholesterol. That’s it. I’m amazed to see some of my friends that come with a box [laughs] and they’ll take anywhere

from 7, 10, 15, pills a day. I can't believe it! And I don't know whether that's from maintaining good exercise and good eating habits over time or just that's the way it is. But I feel good. I do things that not very many 80 year olds do.

These men compare their physical capability level of independence in comparison to others in their peer groups. While evaluating others, participants regard themselves with more positive sentiments and determine they are aging well or successfully. In order to cope with ageism and the negative sentiments revolved around the aging process, participants seek to legitimate their success with aging or justify their failures to age successfully. Largely, older men bolster their body image by comparing their level of physical ability with younger age groups and often self-identify with younger men. Sylvester, age 80, attributes his success with aging and positive body image to his sustained exercise program: "Well I'm starting to feel it [age] a little more, I guess since I'm getting older. But I feel like I can do most things that any 40 year old can do. [I] feel good about it [body]. I'm glad I can do that. I know people my age and younger that can barely walk and they sure can't do a lot of the things that I'm fortunate enough to be able to do."

George, who also engages in an intense self-regimented exercise program, comments on the pride he feels for his body after recently losing 20 pounds: "I'm coordinated still. I can run circles around most young men. I really believe that. I'm not superman, but I'm in better shape than a lot of fifty year olds." Older men and women tend to evaluate themselves more positively than what they perceive to be the stereotypical image of older adults. At the time of the interview, Barry, age 80, is currently dieting and exercising to sustain a positive perception of his body. Still, he experiences anxiety about gaining weight. He explains, "I certainly don't feel like I'm 80

[laughs] as I would perceive most 80 year old people to be.” This stereotypical image includes ageist depictions of ‘old’ or those who are incapable, feeble, weak, mentally deteriorating, and largely dependent on others. This quote represents the paradox between older adults’ methods used to boost their body image; while they sustain a positive body image, they do so with ageist stereotypes of their peers.

Few women express explicitly positive appraisals of their current bodies, but those who do, emphasize the importance of physical mobility and health. In order to maintain their health and body function, respondents participate in physical activities such as routine walking, attending exercise classes, regimented weight training, calisthenics, and other cardiovascular activities. Further, exercise helps them “feel younger” and to live a more “meaningful life.” Paula, age 92, declares she does not “feel her age” because she continues her daily routine of the mile-long walk around her retirement facility: “...one of the girls take[s] my socks off, I have to have help with that, and she asked how old I was and I said ‘how old do you think’ and she said, ‘80.’ So that makes me think that maybe, because I’m more active, keeps me active, makes me not show my age quite as much.” Thus, she attributes her ability to “not show [her] age” to remaining active and continuing her exercise program. Thirteen men and women in this sample exercise routinely at the time of the interview for the sole purpose of maintaining mobility and promoting health, while four more participants exercise to modify their weight or body size. These narratives provide evidence to support prior research that both men and women associate health and mobility with successful aging and positive body image (Baker and Gringart 2009; Halliwell and Dittmar 2003).

Finally, the increase in technology and healthcare encourage body satisfaction. Medical interventions and procedures contribute to a sense of control over the aging process. These participants who underwent medical interventions such as eyelifts, hip or knee replacements, and cataract surgery did so for the initial purpose or intent to correct a medical problem; these are acceptable means to combat signs of aging. The procedures they do support, however, increased mobility, reduced or eliminated pain, and improved their overall quality of life. For these participants, surgeries and other medical interventions turned back the clock and ultimately affected how and to what degree participants “feel old.”

Erin, age 73, who exercises daily and has been a life-long member of a national weight loss organization for years, shares her experience with both knee and hip replacement surgeries she endured within the last couple of years. Prior to these surgeries, she identified as more than two decades older than her actual age: “I really felt old. When my hip hurt, I couldn’t move or I couldn’t see and so it’s like you’re given a second lease on life. I feel like I did when I was 40.” Erin’s perception of her body and perception of herself as old dramatically shifted after medical intervention. She, like many others, maintains a positive body image at the time of the interview and concludes that she is aging successfully after her procedures. Her health, physical capability, and visible signs of aging, are used to assess her aging success and perception of her body both prior to and after her surgeries. Given the advances in medicine and technology that allow people to live longer and healthier lives, society must change the way in which we define old and how we perceive these older adults.

Health-based criteria and self-health evaluations largely determine body satisfaction. Evaluating health includes the amount of daily medications taken, history of operations, aches and pains, disease, eyesight, and overall stamina. The most common source of anxiety stems from loss of mobility and physical ability. The narratives reveal the complexity of navigating older age and evaluations of successful aging. As body function and health become issues of concern, concern for one's appearance decreases in priority (Hurd Clarke 2011). If physical capability and overall functionality of the body are both maintained and therefore evaluated positively, participants consider themselves to even appear youthful and therefore, "doing well." If health and overall physical capability are evaluated positively, especially when compared to others, visible signs of aging and body image are regarded as unimportant. Finally, these interviewees prioritize health and physical ability over beauty and physical attractiveness.

**Dissatisfaction: "I'm not real happy with what I see because I'm overweight."**

Contrary to prior research, only a small portion of the interviewees feel wholly dissatisfied with their bodies. Women are more likely to express negative comments about their bodies or physical appearance than men, even among those who felt somewhat satisfied overall. Dissatisfaction with the body includes primarily dislike for visible signs of aging, weight or body size, physical deterioration, and evaluations stemming from perceiving the body as "not like it used to be." Negative body image and the failure to age successfully disrupt life-long beauty work routines. They do not consider cosmetic surgeries, such as Botox injections, as a realistic means to resist aging, despite what prior research suggests (Hurd Clarke and Griffin 2008); however, multiple

participants have considered extreme weight loss measures such as diet pills and weight loss surgery at this point in their lives to modify their appearance.

Many participants describe a positive body image throughout the life course until older adulthood. Post-retirement years are associated with physical changes in the body related to aging such as body size, shape, and weight. Negative perceptions of the body and appearance are new to these individuals, and as a consequence, they do not know how to cope with such negative perceptions because they have never experienced these issues “until now.” As Vespa (2009) and Myers and Biocca (1992) suggest, body image does not remain the same but rather fluctuates throughout the life course depending on social events and particular contexts. Karen states, “I don’t remember my body ever being a big deal until I started putting on weight after I retired.” Like many others who share negative feelings about their bodies, Karen explains that she never experienced dissatisfaction with her body until it underwent changes after retirement; this newfound dislike for her body is an issue with which she is unsure how to cope. Lucy, age 72, maintained a positive body image until she experienced sudden weight gain after a recent hysterectomy and began dieting to lose the weight. In addition, she shares her dissatisfaction with facing her aging body:

Now, I would like to do something to get rid of my wrinkles. That bothers me. It doesn’t look like me again. I just recently lost 24 pounds and I wasn’t doing anything special except watching my diet. And all these wrinkles showed up as my face got less fleshy. So I don’t know. I’d really like to do something to make myself look younger. I’m uncomfortable with how old I look and I feel young yet. I’m not but.

In support of previous research, appearance maintenance affects the way in which older adults perceive their aging bodies; much dissatisfaction is rooted in dislike for their aging bodies (Hurd Clarke 2011; Slevin 2010). Both men and women express distaste



for visible signs of aging. The following remark by Gerald, age 82, whose current role models of “aging well” included Peter Lawford and Edward Albert, exemplifies how both the men and women in this sample perceive old bodies and view visible signs of aging as ugly and undesirable: “I can look at the back of my hands. That would frighten little kids half to death. You can see what you have, you’ve got all this collagen and yours is gorgeous whereas mine, you can see all these tendons and all these blood vessels and the skin...” He expresses extreme discontent with visible signs of aging, which demonstrated his internalized or embodied ageism.

Further, many participants, especially women, describe efforts to combat or change areas of their bodies or appearance they do not like, especially in relation to their aging bodies. Alicia, age 72, after she showed me her extensive wig collection, explains that the hundreds of dollars she has invested in her wigs are worth the expense because “I just feel like it [wig] makes me look a little younger.” These narratives provide evidence of ageism in society in that growing older is stigmatized and the desire to be younger is normalized. Kathy has previously sought hypnosis for weight loss and has recently considered weight loss surgery. She recently retired and at age 65, she shares her envy of youthfulness: “I realize that everything’s glittery in those magazines. Every once in a while I’ll see a cute little girl and I’ll say I hate her because she looks so good.” Here, Kathy simultaneously expresses her underlying desire to appear younger and her discrepancy between her ideal self and her actual self, while critiquing figures in the media. At age 88, Shari is residing in a retirement community at the time of the interview. She describes her attempts to appear younger with hair dye: I wanted to cover up the grey! Because I thought it made me, I guess, I thought I was getting old and I

wanted to be young.” In addition to weight, preoccupation with youthfulness permeates these older adults, largely amongst women, in support of gendered stereotypes and the double standard of aging.

Approximately two-thirds of the interviewees express a preoccupation with their current weight and/or body size. Most of the participants that express these types of sentiments engage in weight control practices to alleviate their dissatisfaction. Current weight control practices include regimented exercise programs and fitness classes, membership to weight loss organizations or self-restricted diet, and the consideration of diet pills and weight loss surgery. When asked about the frequency of which they think about their weight or their body size, Forrest and Karen respond similarly and are representative of the narratives of the sample: “When I reach in the closet and find a pair of pants that I wore 2 or 3 years ago that are either too big or too small [laughs]. Okay, time to get rid of these!” (Forrest, 70). Similarly, Karen became cognizant of her body size “Every time I try putting on a pair of tight pants. [laughs] Yea, some of them. And I’ve gone to, my daughter calls [them] buffet pants. They have elastic waistbands, which will expand. So I rarely buy anything that’s just zip up with a steady waistband. It makes a difference in your clothing” (Karen, 85). Forrest and Karen describe their bodies as overweight and are not currently dieting or exercising.

With loss of physical ability associated with aging, especially with recognition of loss of musculature and weight gain, men feel dissatisfied with their bodies and therefore, unsure of how to do masculinity in older age. As discussed previously, men in excellent health are able to alleviate their dissatisfaction or discontent by comparing their own functionality with others. When these comparisons are unfavorable, however, men

express negative evaluations of their bodies. Grant, age 78, explains that while his preoccupation with appearance has declined in older adulthood, he feels disappointed with his body's decline in physical capability: "I've outlived my body. Well, you know you're getting older and wearing out. You know, when I used to be able to pull out work for 3 or 4 hours, even when I lived west of town out here, I could do that.... Now, you know, an hour [of work], I'm tired. I'm tired." With loss of physical ability associated with aging, especially with recognition of loss of musculature and weight gain, men, more often than women, feel disappointment with their aging bodies and therefore, unsure of how to do masculinity in older age. The narratives depict disappointment and anxiety revolving around the functionality of their aging bodies.

Furthermore, the local senior center and retirement facilities are spaces in which these older men find both sanctuary and face self-scrutiny. Participants' evaluations of others represent internalization or embodied ageism. Nick, a 72 year old man who has recently considered weight loss surgery, made this comment that exemplifies both the positive and negative effects of the evaluations of peers on his body image and his own internalized ageism:

I come out here [Senior Citizens Center] and maybe it's a little bit of bolstering my own personal image of myself. Because I do come out here and I do say, 'golly' you know, I'm rather fortunate that I'm not like so and so or such and such that's using a walker or using a cane or using a wheelchair and yet I come out here and the opposite is true. I see people that are older than I am that are much more active than I am and I feel a little bit disappointed in myself.

Peer groups affect body image and their evaluations of aging, both positively and negatively. While certain comparisons might result in positive sentiments, comparing the body with another may result in negative feelings about the body. These older adults can always find others in worse or better shape than they are, regardless of age. This seems

to coincide with the narrative that participants engage in beauty work to “fit in” or as means of acceptance, from early formative years through older adulthood. Participants evaluate others’ appearance, bodies, and how successfully they perceive others aging. Dependent on the assessments of others, both men and women evaluate their own appearance, bodies, and conclude how well they feel they are aging and how they perceive their own bodies.

Misalignment with how some participants feel on the inside and the physical reflection of their aged bodies on the outside may also result in very different body evaluations. This divergence leads to positive body image among those who feel much younger on the inside than their appearance or numerical age suggests. This response was especially common among men. Barry, for example, exudes a sense of confidence with his body and appearance when he explains how family and friends often remark, “Barry, you never change. You look like you did when I knew you 20 years ago.” For those who envy the appearance of youthfulness, however, the reality of visible signs of aging leads to negative body image. Although men hold similar notions regarding the desire to maintain a more youthful appearance and body, women more frequently allowed their outward appearance to affect their own self-worth. Lillie, a 76 year old woman who was currently dieting at the time of the interview, shares the shock she often feels when she looks in the mirror: “I look in the mirror sometimes and I say, ‘oh gosh, that’s me!’ because you don’t think about it. You continue to think of yourself as you’ve always been. And then it comes as a shock. You say, ‘oh!’” Lillie also highlights what previous research has described as the “mask of aging,” in which visible signs of aging do not reflect the age with which older adults identify (Biggs 1997; Hurd Clarke 2000).

Weight, body composition, and body size are associated with aging and elements of body image among the participants. If participants discussed obesity and dissatisfaction with their bodies for more than one period of their lives through older age, they were more likely to feel content with perceptions of perceived imperfections with their overall body image. For example, Kathy, who has experienced a life-long discontent with her weight and body size proclaims, “Oh yeah. I was a lot better shape than I am now. But it just goes with age. You can’t help it.” Conversely, if participants describe a positive body image throughout the life course but currently self-classify their bodies as overweight or negatively regard particular body parts, both men and women feel dissatisfied with their bodies. Kathy helps bridge the connection between feeling dissatisfied with her body versus recognizing her perceived flaws but no longer allows these flaws to affect her body image, as discussed in the next section.

### **Content with Imperfection: Accepting the Realities of Aging**

In this section, I present the largest contribution from my research to existing body image literature. Overwhelmingly, the older men and women I interviewed express feeling content with their imperfections. While these men and women may hold negative views of particular body parts, weight, body shape, visible signs of aging, or deterioration of physical ability or health, they have grown to let go of the anxiety and discomfort associated with negative body image. Both men and women loosen the reigns of control to face and accept these realities associated with aging. As they navigate their changing bodies, common attitudes suggest that while many engage in beauty work to “do” gender and resist the aging process, they simultaneously feel a sense of liberation and freedom from the obligatory nature of such activities. Grant, while he assesses his body

negatively due to physical decline, discusses his history of dieting with his wife to maintain their weight:

So yea, we've done all these diets like that. And they work for a while and then you get off of them. But the best thing to do is just; I think [it's] just watch what you eat. Kind of went up and down. When I was aware, it would go down some or something like that. Should I? Yea, I should. But at the same time you think, should I eat this rib eye steak or not? It's fatty. It's got a lot of calories. And I'm 78 years old. Why not? If you enjoy it, eat it [laughs].

While he expresses dissatisfaction and even anxiety about his body, Grant, among others, also helps bridge the connection between body dissatisfaction and the most prevalent theme amongst older adults: the feeling of content with imperfection and accepting the realities of aging. This section details the complexity of older adults' perceptions of their bodies.

*Areas of Dissatisfaction: Weight, body size, visible signs of aging*

After experiencing dissatisfaction in previous chapters of their lives, older adulthood and retirement allows the majority of my interviewees to let go of the pressures to adhere to particular body type ideals and youthfulness. While 22 participants express dislike or anxiety associated with weight and/or body size, not all participants currently exercise or diet to improve health or modify weight and body size. Further, these participants convey discontent or dissatisfaction with their bodies but simply do not express desire, nor feel obligated, to engage in efforts to relieve their discontent. These older adults have grown comfortable with their dissatisfaction and accept their perceived flaws. Although dissatisfied with her body, Kathy, age 65, expresses ambivalence regarding the changes she sees in her body as she ages: "I don't feel like I'm in terrible shape. I feel I'm a little too fat, but that's been a problem all my life so that's not a big deal."

While many participants share dislikes with their weight or particular body parts, they

exude an overall feeling of content or neutral body image, especially if these sentiments have persisted through more than one chapter of their lives.

Women find comfort when comparing body size to their peers even though they recognize their bodies may not represent an ideal. Karen accepts her self-described “less than ideal” body. She comments on the changes she has noticed in her body, in comparison to herself in early chapters and to her peers: “Belly fat [laughs]. I always had a flat stomach and I don’t now. But I look in the [retirement facility] dining room at the other women, and they all seem to be like I am. We’re all kind of rotund around the hips. Let’s put it that way. Look at Hilary Clinton. Lord, she’s got huge hips.” This overall narrative amongst the women exemplifies the newfound acceptance of ignoring traditional feminine body type ideal because other women’s bodies are perceived similarly to their own. Moreover, if they perceive female role models’ bodies positively, especially those such as Hillary Clinton who is aspiring to become President of the United States, they determine their bodies are acceptable as well. This highlights the importance of peer groups in older age for women. When other women’s imperfect bodies are perceived similarly to their own, they feel content with their imperfections as well.

These narratives suggest a sense of enlightenment with their older adulthood and aged bodies. They recognize societal pressures to conform to ideal body types or adherence to gendered self-presentation, but simply find acceptance with their appearance and value the freedom they now feel in their later years. Nick, for example, explains, “I’m not real satisfied. Again, it seems like everything I’ve tried has not been

successful so you almost reach a point throwing up your hands and say, ‘why bother?’”

Similarly, Karen, at age 85, has accepted her imperfections:

Yea, as I’ve gotten older and put weight on. I quit smoking about ten years ago. And it’s been a problem ever since and I didn’t catch on to for a while until I gained ten pounds. So trying to take it off has been a problem but I’ve finally decided, well, you can diet until you’re dead, you’re not going to take this weight off, so you might as well get used to it. Accept it. [laughs] Which is kind of what I’ve done.

Gayle, age 82, exudes her sense of freedom and happiness she felt in association with the current chapter of her life after liberating herself from the pressure of life-long pursuit of her “thin ideal” body type and discontent with her body:

Now, I do, I want to be as attractive as I can be. But not to attract attention at all. Just simply for my own self-esteem. I have no problem with weight. I’ve lost the appetite that I used to have. So it’s been one of the most pleasant times I’ve ever had in my life because I just simply do not, I can just enjoy everything I want. And that’s a wonderful feeling. Really is.

These individuals find relief in simply accepting the realities of an aging body. Doing so allows them to experience a sense of enlightenment and freedom in older age, ameliorating any negative perceptions of their bodies.

*“I guess I’m pretty lucky to be alive.”*

Gratefulness was a common theme in the narratives. While participants express positive sentiments about their bodies, they are also very cognizant of the challenges associated with aging and the deterioration of the body; they feel fortunate their bodies have not yet failed them. Both the men and women I interviewed are conscious of the fact that their bodies are slowing down and felt fortunate they were “still here.” After enduring several heart attacks in adulthood, Brandon, age 80, is currently engaging in weight control practices. He explains that “there’s nothing in particular I like about growing old except for the fact that you are alive.” The men and women that fall under



this category do not necessarily feel positively or negatively about their bodies but simply discuss their experiences with their aging bodies as, “that’s life.” Ellis, age 79, who regularly attends fitness classes at the local senior center, states:

Well, I weigh the same [as] I did when I got married...but it’s shifted. So I have a little poochy tummy and my breasts are sagging and gravity has taken over. So I don’t, it’s just not important to me. I know, I hear women say, ‘oh, I hate getting old.’ And I usually say, ‘well it beats the alternative of dying young.’ So I guess I’ll get old. But I think a lot of it has to do with your attitude. A lot of it.

Ellis, among many others in the sample feels grateful to still be “looking at the grass from the correct side of the pasture, so that’s a good thing.” The functionality and relative level of health became critical in evaluating body image and life overall. While they recognize the reduced capability for physical activity, many still discuss feeling grateful to “still play basketball” or “run a mile without dying.”

Participants describe their sentiments about the aging process from passive to agentic. Many participants feel they possess no control over the aging process and that deterioration of health and physical ability, alongside visible signs of aging, are inevitable. However, others, like Thomas, contend that age is simply a state of mind or a social construct: “And I think we spend too much time putting numbers on things. You’re only as old as you feel.” In demonstration of Myers and Biocca’s (1992) concept of body image as situational or elastic, the narratives reveal that body image and successful aging are not static or fixed but rather dependent on particular circumstances and context and, therefore, in constant flux. After commenting that she feels satisfied with her body despite her “rolls,” Lillie, age 76, explains that she does not identify as “old” “unless I’m really feeling it. Tired and I say, [exclaims while gesturing back pain] ‘oh!’” These narratives reveal the social construction of the stereotypical notions of

ageism. Participants' numerical age situates them in the life course and society but the ability to control the age one feels through intermediaries such as medical interventions, activity, and efforts to reverse signs of aging, suggests older adults should not be constrained by the identification and label as old.

Forrest, age 70, does not feel like he possesses any control over the aging process and recognizes his own bodily limitations. When asked about the changes he has seen in his body as he has aged, he shares: “[It] makes me feel old, but I have no control over it. But I like it that I’m smart enough to realize my limitations and try not to exceed those. Especially now.” Additionally, Karen, age 85, who is living in a retirement facility, expresses discontent with her visible signs of aging; however, she does not engage in much beauty work to resist signs of aging because she feels her efforts are ineffectual and has adapted to her aging appearance: “Well, I accept it [body] but I don’t like it. I don’t like wrinkles. I don’t like the fact that I’m becoming bald headed...I don’t like it but I just accept it because I think, you’re 85.” Many participants regarded aging as natural and a normal part of life. They feel that the changes they are experiencing with their aging bodies are that “this is the way it’s going to be so suck it up and get used to it.” Shari, age 88, is also living in a retirement facility and has her hair styled at the hair salon once a week. She comments on the aging process and her control over her body as it has aged and accepts the changes she notices in her appearance and her body as natural: “Well you have to accept them. There’s nothing else to do. And do the best you can, I think. Don’t you think so? That’s all you can do.” These men and women no longer feel societal pressures to combat signs of aging or work to alter parts of their bodies with which they are not happy.

## **Final Thoughts**

While body image fluctuates throughout the life course, the narratives suggest that retirement and post-retirement years bring a sense of enlightenment and freedom from the obligatory nature of portraying gendered bodies in previous chapters of their lives.

Although older adults recognize the contemporary pressure to conform to particular body type ideals, they do not feel overly compelled to adhere to these body types themselves.

However, these men and women evaluate others' adherence to body type ideals and portraying traditional gender norms correctly, particularly others in the same age group.

In consideration, they recognize that their bodies do not adhere to traditional masculine or feminine body type ideals, but positively evaluate their bodies as they feel a sense of relief with the acceptance of age. Contemporary pressures to adhere to societal standards of beauty and youthfulness are internalized but only projected onto others; the social pressures to portray gender and particular body types associated with gender relax amongst older adults in the sample.

Both men and women prioritize the health and physicality of their bodies over appearance and adherence to body type ideals. Rather than remaining concerned about their bodies from a more cosmetic or vanity-centered perspective, these men and women contend that their health is the more important aspect on which to focus pertaining to their bodies. In consideration of the three differing ways in which these older adults perceive their bodies, ultimately the foundation of body image of older adults is functionality. As health and overall body function become more of a concern,

preoccupation with appearance declines. The participants understand that they have experienced more years than they have left to live and simply feel fortunate their bodies have not yet “failed” them.

## CHAPTER V

### CONCLUSION

This exploratory study addressed two main research questions to understand the intersection of age and gender on older adult body image: 1) How do older men and women feel about their bodies, and why? 2) How do these views differ by gender? Life course and gender theories served as theoretical foundations to guide this project and the qualitative methodology allowed for a more in-depth understanding of how these older adults navigate the aging process and how age and gender impact their perceptions of their bodies. Overwhelmingly, retirement coincided with a shift in these older adults' perspectives. The sociocultural context of retirement, in which these men and women were experiencing, shaped these individuals' perspectives at this particular time in the life course. I presented two main findings: "doing gender" in older adulthood and the various ways in which these men and women felt about their bodies.

Amongst the 31 participants, there was no uniformity in regards to how these older men and women felt about their bodies. Previous research suggested that older adults maintain negative perceptions of their bodies, yet little research discussed the complexity of older adult body image. I provided an understanding of the nuanced ways in which older adults perceived their bodies. The narratives highlighted the three differing, yet overlapping ways in which the older men and women I interviewed felt about their aging bodies: satisfaction, dissatisfaction, and content with imperfections. While most felt content with their imperfections and accepted their aging bodies, body image was never fixed, but rather largely dependent on how interviewees felt in a particular context.

A majority of the men in the sample, in addition to a few women, maintained a positive body image. This was largely the result of perceived differences between their older adult peers and younger age groups based on body function and overall health. This research advanced body image research by incorporating men's perspectives. Previously, men's body image and their issues have been largely ignored. Often, issues related to body image have been understood as women's issues; however, as this research revealed, body image affects men as well. The men I interviewed based their perceptions upon their bodies' physical capabilities and overall function, parallel to traditional definitions of masculinity; this supports previous research (Algars et al 2009; Drummond 2003; Lamb et al 1993; Rozin and Fallon 1988). These findings extended prior research in that men compared their own bodies' musculature and body function with others and determined their (dis)satisfaction based on those comparisons. Most felt positively about their bodies but also expressed strong concern for presentation of self and emphasized

that cultural and moral worth were based on the display of the gendered body. This research contributed to the body of knowledge regarding men's preoccupation with their own appearance and gender-role orientation. As current and future generations of boys and men are pressured to conform to an overly masculine body ideal (Pope et al. 2000), issues related to body image will likely sustain and increase. This research has offered a baseline to compare generational differences between these older men's body image perceptions.

Interdisciplinary research has narrowly focused on younger age groups' perceptions of their bodies, perpetuating ageist stereotypes that as people age their perceptions of their bodies are of little relevance for societal consideration. Surprisingly, only a small minority of my interviewees expressed entirely negative body evaluations when discussing their weight, body size or shape, and visible signs of aging. Consistent with existing research on women's body image, however, this group consisted of primarily women (Cash and Henry 1995; Cummings 1989; Lamb et al 1993). Although they discussed gender-role orientation as critical to their sense of self, they felt less pressure to maintain youthfulness and adhere to a feminine body type ideal than previous research has implied (Hurd Clarke 2011).

Most of the interviewees, both men and women, expressed feeling content with their perceived imperfections. This finding suggested that much of the previous research that has characterized body image as simply positive or negative misrepresented the realities associated with aging. For the most part, previous research has concluded that a dislike for visible signs of aging, such as wrinkles, equated to overall poor body image (Hurd Clarke 2011). While many of these men and women shared dislike for aspects of

their bodies, most shared that these preoccupations with their weight, body size, or visible signs of aging were no longer issues they found important enough to worry or stress about. Rather they accepted these imperfections as natural or grew accustomed to them. Most commonly, these were no longer issues of major concern for older adults. They did not feel positively or negatively about their bodies, but rather ambivalently pointed out the changes they noticed in their aging bodies. Those who felt less than positive feelings about these changes did not allow it to affect the way they perceived their bodies overall. Furthermore, these feelings of content with imperfections supported limited prior research that has acknowledged this nuanced concept regarding women's body image in older adulthood (Leitchy 2012; Muth and Cash 1997) and contributed to the understanding of older men's perceptions of their bodies.

The narratives of the men and women I interviewed highlighted the complexity of "doing" gender in older adulthood. Gender remained a critical aspect of these individuals' body image and their sense of cultural worth. While many maintained beauty work routines established in early chapters of their lives, few men and women felt obligated to do so. As these women progressed through the life course, definitions of femininity and "doing" gender underwent an evolutionary process: while they felt less pressure to display femininity, they did so by self-constraint through wardrobe and makeup choices (West and Zimmerman 1987). On the other hand, men emphasized the importance of maintaining traditional definitions of masculinity by means of physical exertion and ability, which was more difficult to maintain as their bodies aged. As frailty is commonly associated with definitions of femininity, women were more able to continue "doing" gender appropriately as they aged.



In a society in which the adherence to body type ideals and youthfulness are held in high regard, obesity, “doing” gender incorrectly, or passively aging are all viewed as socially destructive or irresponsible. By not participating in one or any of these activities, society perceives older men and women as irrelevant members of society unworthy of recognition as pertinent individuals. Despite ageist assumptions, older adults did not become ungendered or genderless. Portraying gender remained a significant aspect of their body image and sense of self but they no longer felt obliged to “do gender” in comparison to previous chapters of their lives. Portraying gender was something both older men and women chose to do on their own terms and in specific contexts.

Body image is an even more complex concept in older adulthood than previously conceived. Most participants described the flexible nature of body image as they experienced different life course events and how those events affected their perceptions of their bodies. Retirement, for example, was a pivotal life course event that provided the majority of participants with a sense of liberation from the constraint of adhering to gendered body type ideals. Not only did they retire from a professional career, they also retired from the stress associated with adhering to masculine or feminine body type ideals (Myers and Biocca 1992; Paquette and Raine 2004; Vespa 2009). My interviewees felt relief from expectations accompanied by gender norms. They felt the ability to choose to embody gender in older adulthood, as they desired, rather than feeling like they *had* to. Body image of these older adults largely reflected the acceptance of the realities associated with aging bodies, particularly in comparison to perceived differences with their peers, rather than perceived adherence to gendered body types.

This sample of older adults was limited in terms of representativeness of race, ethnicity, and sexuality. Given the often incredible differences and variances between cultures, it is likely that age and gender also intersect with race, ethnicity, and sexuality in important ways. Research has provided evidence that both African American and White women perceive larger and more curvaceous bodies as more attractive than thin bodies, which might indicate a cultural shift in ideal body types (Buchanan, Fischer, Tokar, and Yoder 2007; Overstreet, Quinn, and Agocha 2010; Stevens, Kumanyika and Keil 1994). Future research should incorporate racial and ethnic diversity when examining older adult body image.

This study provides some insight into the perspectives of older adults living in retirement facilities. Due to the limited number of these men and women (9 out of 31), however, I did not directly analyze the differences between those living in retirement facilities and those living independently. Given that older adults' perceptions of their bodies are often the result of comparisons made with their peers, future research should feature the perspectives of those living in retirement and assisted living facilities. It is also important to better understand comparisons of current bodies to bodies in previous chapters of men's and women's lives. The structure of the interviews, guided by life course theory, allows for a cross-chapter investigation. Thus, I plan to conduct a more in-depth examination across chapters of the life course. This focused inquiry will also help clarify if negative body perceptions are the result of life-long body image issues or if these struggles are new in older age. Moreover, this analysis will also allow me to identify specific life events, such as retirement, that have been especially impactful. Finally, I will more closely examine whether these findings vary by marital status as

significant others' perceptions or expectations may affect beauty work investment and body image overall.

Given the high levels of education among participants in this study, I plan to further examine, with the existing data, the systematic differences between individuals' educational attainment and how that might impact perceptions of the body. Given the extent of the body image research that has focused on middle- and upper-class women, socioeconomic status may have a negative effect on body image as members of higher social classes may experience more pressure to conform to ideal body types than lower socioeconomic groups. Slevin (2010) highlighted the importance of including social class, as well as many other aspects of intersectionality in the discussion and measurement of body image. Scholars such as Bourdieu and Goffman have suggested that the body is an indicator of social class. While "the dominant classes treat the body as an aesthetic...the lower classes are more likely to treat the body as a functioning instrument" (Slevin 2010:10006). As the findings in the current study suggest, body function and overall health become critical factors when evaluating one's body in older adulthood. This sample may provide evidence that treating one's body as a "functioning instrument" may also be related to older age.

This research addressed gaps in the literature related to age and gender and how this unique intersection influenced older adults' feelings about their bodies. While the age range of the sample was wide (65-92 years), most were in their seventies and eighties. This current study should serve as a foundation from which future research should build upon. Given that this was an exploratory study, this research contributed to

the limited body of knowledge of older adult men and women's feelings about their bodies and served as a baseline understanding for future research.

Society's perception of old permeated older adults' perceptions of themselves. Society must disassociate definitions of old and ageist stereotypes with particular numerical ages and age groups. With the common caveat of "Well, for my age," older adults tended to base their perceptions of their bodies off internalized notions of society's obsession with stereotypical definitions of what it means to be old. Given the increase in technology, medical interventions, and emphasis of healthy lifestyles, people are living longer lives. With longer lifespans, society needs to recognize that once people reach a particular age and life course event like retirement, they are still relevant and contributing members of society. Society should resist reducing older adults to ageist stereotypes such as genderless grandparents or incapable individuals once they reach a certain age. A numerical age does not equate insignificance.

Society often conflates all older adults as similarly "old," but in reality, they are a largely diverse group of people. While physical decline is typically associated with aging, many older men and women did not allow their bodies to passively deteriorate simply because they have reached a particular age. In fact, many of the men and women I interviewed began their physical fitness journeys in older age. There are many examples of older adults' physical accomplishments highlighted in the news. For example, an older woman began her CrossFit training, which is known for its rigor and intensity, at age 77, which tremendously improved her health. She commented on her fitness journey: "Get up and do it. Stop with the whining. Stop with the 'Oh, you have to take care of me.' Take care of yourself" (CBS News 2015). We as a society tend to

consider these types of stories in the news as “remarkable” or “impressive,” but this points to the assumption that society assumes immobility, or that once people reach a particular age, they are incapable of strenuous physical activity. This reaction demonstrates society’s internalized ageism. Older adults should not be lumped into a box of ageist stereotypes. Society needs to dismiss its preconceived notions of older adults. The older men and women in this research provided evidence of the newfound positivity and relinquishment of many internal inhibitors and social constraints experienced in prior chapters of their lives. Older adulthood often coincides with a period of relief, comfort, and reconciliation from social pressures of conformity.

## REFERENCES

- Algars, Monica M., Pekka Santtila, Marjus Varjonen, Katarina Witting, Ada Johansson, Patrick Jern, and N. Kenneth Sandnabba. 2011. "The Adult Body: How Age, Gender, and Body Mass Index Are Related to Body Image." *Journal of Aging and Health* 21(8):1112-1132.
- Andrew, Rachel, Marika Tiggemann and Levina Clark. 2016. "Positive body image and young women's health: Implications for sun protection, cancer screening, weight loss and alcohol behaviors." *Journal of Health Psychology* 221(1):28-39.
- Anorexia Nervosa & Related Eating Disorders (ANRED). 2016. "Statistics: How Many People Have Eating Disorders?" *Anorexia Nervosa & Related Eating Disorders (ANRED)*.
- Baker, Lucie and Eyal Gringart. 2009. "Body image and self-esteem in older adulthood." *Aging & Society* 29:977-995.
- Berg, Bruce L. 1995. *Qualitative Research Methods for the Social Sciences: Second Edition*. Boston, MA: Allyn and Bacon.
- Bedford, Jennifer L. and C. Shanti Johnson. 2006. "Societal Influences on Body Image Dissatisfaction in Younger and Older Women." *Journal of Women & Aging*. 18(1):41-55.
- Bessenoff, Gayle R. and Regan E. Del Priore. 2007. "Women, Weight, and Age: Social Comparison to Magazine Images Across the Lifespan." *Sex Roles* 56:215-222.
- Bordo, Susan. 2003. *Unbearable Weight: Feminism, Western Culture, and the body* 10<sup>th</sup> anniversary ed.), Berkely, CA: University of California Press.
- Butler, Judith. 2004. *Undoing Gender*. New York, NY: Routledge.

- Cash, Thomas F. and Patricia E. Henry. 1995. "Women's Body Images: The Results of a National Survey in the U.S.A." *Sex Roles* 33(½):19-28.
- CBS News, 2015. "CrossFit athlete, 77, makes full-Body transformation." *CBS News*. Retrieved April 8, 2017 (<http://www.cbsnews.com/news/77-year-old-crossfit-athlete-constance-tillet-full-body-transformation/>).
- Charmaz, Kathy. 2004. "Grounded Theory" in *Approaches to Qualitative Research: A Reader on Theory and Practice* Pp. 496-521 edited by S. N. Hesse-Biber and P. Leavy. New York, NY: Oxford University Press.
- Chernin, Kim. 1981. *The Obsession: Reflections of the Tyranny of Slenderness*, New York, NY: Harper & Row Publishers.
- Choma, Becky L., Beth A. Visser, Julie A. Pozzebon, Anthony F. Bogaert, Michael A. Busseri, and Stanley W. Sadava. 2010. "Self-Objectification, Self-Esteem, and Gender: Testing a Moderated Mediation Model." *Sex Roles* 63:645-656.
- Clarke Hurd, Laura. 2000. "Older Women's Body Image and Embodied Experience: An Exploration" *Journal of Women & Aging* 12(3-4):77-97.
- Clausen, John A. 2003. "Gender, Contexts, and Turning Points in Adults' Lives" in *Invitation to the Life Course: Toward New Understandings of Later Life* Pp. 365-389 edited by R. A. Settersten, Jr. Amityville: Baywood Publishing Company, Inc.
- Cloud, John. 2000. "Never Too Buff." *Time*, pp. 64-68.
- Corbin, Juliet and Anselm Strauss. 2015. *Basics of Qualitative Research: Techniques and Procedures for Developing Grounded Theory*. London: United Kingdom. Sage Publications, Inc.
- Crawley, Sara, and Lara J. Foley and Constance L. Shehan. 2007. *Gendering Bodies*. Lanham, MD: Rowman & Littlefield Publishers, Inc.
- Cummings, Sherry M. 2002. "Predictors of Psychological Well-Being Among Assisted Living Residents" *Health & Social Work* 27(4):293-302.

- Drummond, Murray J.N. 2003. "Retired Men, Retired, Bodies." *International Journal of Men's Health* 2(3):183-199.
- Elder, Glen H., Jr. 1994. "Time, Human Agency, and Social Change: Perspectives on the Life Course." *Social Psychology Quarterly* 57(1):4-15.
- Elder, Glen H., Jr. 1998. "The life course as development theory." *Child Development* 69:1-12.
- Elder, Glen H., Jr. 2003. "The Life Course Paradigm: Social Change and Individual Development" in *Invitation to the Life Course: Toward New Understandings of Later Life* Pp. 101-133. Amityville, NY: Baywood Publishing Company, Inc.
- Federal Interagency Forum on Aging-Related Statistics. Older Americans 2012: Key Indicators of Well-Being. Federal Interagency Forum on Aging-Related Statistics. Washington, DC: U.S. Government Printing Office.
- Goffman, Erving. 1966. "Gender Display." *Philosophical Transactions of the Royal Society of London Series B* 772):250-68.
- Grogan, Sarah. 2008. *Body Image: Understanding Body Dissatisfaction in Men, Women, and Children*. New York: NY. Routledge.
- Hall-Polus, Bonnie. 1994. "Body Image Satisfaction and Self-Esteem in an Elderly Population." PhD dissertation, University Of Kentucky, Lexington, KY.
- Halliwell, Emma and Helga Dittmar. 2003. "A Qualitative Investigation of Women's and Men's Body Image Concerns and Their Attitudes Toward Aging." *Sex Roles* 49(11/12):675-684.
- Hesse-Biber, Sharlene N. and Patricia Leavy. 2011. *The Practice of Qualitative Research*. 2<sup>nd</sup> ed. Thousand Oaks: SAGE Publications.
- Homan, Kristin J. and Chris J. Boyatzis. 2009. "Body Image in Older Adults: Links with Religion and Gender." *Journal of Adult Development* 16:230-238.
- Hurd Clarke, Laura. 2011. *Facing Age: Women Growing Older in Anti-Aging Culture*. United Kingdom: Rowman & Littlefield Publishers, Inc.



- Hurd Clarke, Laura. 2001. "Older Women's Bodies and the Self: The Construction of Identity in Later Life." *Canadian Review of Sociology* 38(4):441-464.
- Hurd Clarke, Laura and Meridith Griffin. 2008. "Visible and invisible ageing: beauty work as a response to ageism." *Ageism & Society* 28:653-674.
- Johnson, Redonna Chandler. 1993. "The Influence of Age and Gender on the Elderly's Actual and Perceived Body Image." PhD dissertation, University Of Kentucky, Lexington, KY.
- Kok, Jan. 2007. "Principles and Prospects of the Life Course Paradigm." *Annales de démographie historique* 1(113):203-230.
- Lamb, C. Sue, Lee A. Jackson, Patricia B. Cassidy, and Doris J. Priest. 1993. "Body Figure Preferences of Men and Women: A Comparison of Two Generations." *Sex Roles* 28(5/6):345-358.
- Leichty, Toni. 2012. "Yes, I worry about my weight ... but for the most part I'm content with my body:" Older Women's Body Dissatisfaction Alongside Contentment." *Journal of Women & Aging* 24(1):70-88.
- Leichty, Toni. and Careen M. Yarnal. 2010. "Older women's body image: a life course perspective." *Aging & Society* 30:1197-1218.
- Lewis, Diane M. and Fary M. Cachelin. 2001. "Body Image, Body Dissatisfaction, and Eating Attitudes in Midlife and Elderly Women." *Eating Disorders: The Journal of Treatment & Prevention* 9(1):29-39.
- Lorber, Judith. 1994). "'Night to His Day': The Social Construction of Gender." in *Paradoxes of Gender*. Pp. 13-36. London, UK: Yale University Press.
- Lucal, Betsy. 1999. "What it Means to be Gendered Me: Life on the Boundaries of a Dichotomous Gender System." *Gender & Society* 13:781-797.
- Lund, Anne and Gunn Engelsrud. 2008. "'I am not *that* old:' inter-personal experiences of thriving and threats at a senior centre." *Ageing & Society* 28:675-692.
- Macdonald, Barbara and Cynthia Rich. 2001. *Look me in the Eye: Old Women Aging and Ageism*. Denver: Spinsters Ink Books.

- Mangweth-Matzek, Barbara, Claudia Ines Rupp, Armand Hausmann, Karin Assmayr, Edith Mariacher, Georg Kemmler, Alexandra B. Whitworth, Wilfred Biebl. 2006. "Never too Old for Eating Disorders or Body Dissatisfaction: A Community Study of Elderly Women." *International Journal of Eating Disorders* 39(7):583-586.
- Markson, Elizabeth W. and Carol A. Taylor. 1993. "Real versus Reel World: Older Women and the Academy Awards" in *Faces of Women and Aging*. Pp. 157-171 edited by N.D. Davis, E. Cole, and E.D. Rothblum. New York, NY: Hawthorne Press, Inc.
- Moen, Phyllis. 2001. "Constructing a Life Course." *Marriage and Family Review* 30:97-109.
- Monaghan, L. 2008. *Men and the War on Obesity: A Sociological Study*. New York, NY: Routledge.
- Montemurro, Beth. and Meghan. Gillen. 2013. "Wrinkles and Sagging Flesh: Exploring Transformations in Women's Sexual Body Image." *Journal of Women & Aging* 25:3-23.
- Munnell, Alicia H. 2015. "The Average Retirement Age – An Update." *Center for Retirement Research at Boston College* 15(4):1-6.
- Muth, Jennifer L. and Thomas F. Cash. 1997. "Body-Image Attitudes: What Difference Does Gender Make?" *Journal of Applied Social Psychology* 27(16):1438-1452.
- Myers, Jr. Phillip N. and Frank A. Biocca. 1992. "The Elastic Body Image: The Effect of television advertising and programming on body image distortions in young women." *Journal of Communications* 42(3):108-133.
- Oberg, Peter and Lars Tornstram. 1999. "Body images among men and women of different ages." *Ageing and Society* 19:629-644.
- Paquette, Marie-Claude and Kim Raine. 2004. "Sociocultural Context of Women's Body Image." *Social Science & Medicine* 59(5):1047-1058.

- Peat, Christine M., Naomi L. Peyerl, and Jennifer J. Muehlenkamp. 2008. "Body Image and Eating Disorders in Older Adults: A Review." *The Journal of General Psychology*. 135(4):343-358.
- Pliner, Patricia, Shelly Chaiken and Gordon L. Flett. 1990. "Gender Differences in Concern With Body Weight and Physical Appearance Over the Life Span." *Personality and Social Psychology Bulletin* 16(2):263-273.
- Pruis, Trisha A. and Jeri S. Janowsky. 2010. "Assessment of Body Image in Younger and Older Women." *The Journal of General Psychology* 137(3):225-238.
- Pope, Harrison G., Katharine A. Phillips and Roberto Olivardia. 2000. *The Adonis Complex: The Secret Crisis of Male Body Obsession*. New York: The Free Press.
- Reddy, Shweta Linga. 2013. "Understanding the Body Image Experiences of Older Men." *International Journal of Humanities and Social Science* 3(9):34-42.
- Robison, Julie T. and Phyllis Moen. 2000). "A Life-Course Perspective on Housing Expectations and Shifts in Late Midlife." *Research on Aging* 22(5):499-532.
- Rodin, Judith, Lisa Silberstein, and Ruth Striegel-Moore. 1985. "Women and Weight: A normative content" in T. B. Sonderegger Ed.), *Psychology and gender* Pp. 267-328. Lincoln: University of Nebraska Press.
- Rozin, Paul and April Fallon. 1998. "Body Image, Attitudes to Weight, and Misperceptions of Figure Preferences of the Opposite Sex: A Comparison of Men and Women in Two Generations." *Journal of Abnormal Psychology*. 97(3):342-345.
- Saxton, Benjamin and Thomas R. Cole. 2012. "No Country for Old Men: a search for masculinity in later life." *International Journal of Aging and Later Life* 7(2):97-116.
- Shapiro, Eve. 2013. "Chapter 7: Social Psychology and the Body" in *Handbook of Social Psychology* Pp. 191-224 edited by J. DeLamater and A. Ward. New York: NY: Springer.

- Slevin, Kathleen F. 2010. "If I had lots of money...I'd have a body makeover:' Managing the Aging Body." *Social Forces* 88(3):1003-1020.
- Spector-Mersel, G. 2006. "Never-aging Stories: Western Hegemonic Masculinity Scripts." *Journal of Gender Studies* 15(1):67-82.
- Spitzer, Brenda L., Katherine A. Henderson and Marilyn T. Zivian. 1997. "Gender Differences in Population Versus Media Body Sizes: A Comparison over Four Decades." *Sex Roles* 40(7/8):545-565.
- Tantleff-Dunn, Stacey, Rachel D. Barnes, and Jessica Gokee Larose. 2011. "It's Not Just a "Woman Thing:" The Current State of Normative Discontent." *Eating Disorders: The Journal of Treatment & Prevention* 19(5):392-402.
- Thompson, Jr., Edward H. 2006. "Images of Old Men's Masculinity: Still a Man?" *Sex Roles* 55:633-648.
- Tiggemann, Marika and Jessica E. Lynch. 2001. "Body Image Across the Life Span in Adult Women: The Role of Self-Objectification." *Sex Roles* 37(2):243-253.
- U.S. Census Bureau. 2015. "Payne County, Oklahoma QuickFacts." Retrieved April 8, 2016. (<http://www.census.gov/quickfacts/table/PST045215/4070300,00>).
- U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, and National Center for Health Statistics. 2015. "Health, United States, 2014 With Special Feature Of Adults Aged 50-64." Library of Congress. Retrieved February 22, 2016 <http://www.cdc.gov/nchs/data/hus/hus14.pdf#016>).
- Vespa, Jonathan. 2009. "Gender Ideology Construction: A Life Course and Intersectional Approach." *Gender & Society* 23(3):363-387.
- West, Candace and Don H. Zimmerman. 1987. "Doing Gender." *Gender & Society* 1(2):125-151.

## APPENDICES

APPENDIX A: Basic Narrative used for all recruitment mechanisms:  
Telephone, Face-to-Face, E-mail

### **THE EMBODIMENT OF AGE AND GENDER: BODY IMAGE AMONG OLDER ADULTS**

Hello from a M.S. student in the Sociology Department at Oklahoma State University (Kathleen Reddick)! I am working on my Master's Thesis titled, The Embodiment of Age and Gender: Body Image Among Older Adults. This project is intended to provide a voice to older adults about how they perceive and feel about their bodies. Additionally, this project seeks to compare older adult men and women's body image and how this has changed throughout the life course.

If you are of 65 years and older, I would like to invite you to participate in an in-depth interview where you will have the opportunity to explain in your own words how you currently perceive your body and how your perceptions and feelings have changed throughout your life. I will ask you to discuss various influential factors that might have affected your body image such as your beauty routine, your reactions to various forms of media, role models of attractiveness, physical activity, and health.

With your permission, the conversation will be recorded to ensure I capture all of your thoughts correctly. I expect the interviews to last one to two hours. We will arrange the interviews for a time and place that is convenient for you.

The interviews will be kept completely confidential and your participation is voluntary. We will keep recordings and written notes in a locked file cabinet in a secure location. I will have sole access to the audio recordings and written notes. The interviews will then be transcribed and analyzed for common themes.

If you have any questions or comments about this project, please do not hesitate to contact me by phone at 309-229-8959 or via e-mail at [Kathleen.reddick@okstate.edu](mailto:Kathleen.reddick@okstate.edu).

Would you be interested in participating in this project?

I appreciate your willingness to consider participation in this project and appreciate your time.

I understand any hesitation, as there might be reluctance to share and discuss such personal and potentially emotional thoughts. I offer two reasons why there is no reason to have fear.

- I have worked hard to establish a reputation for being fair, open-minded, and empathetic to all feelings. This is a reputation I wish to maintain.
- Our protocol for conducting the interviewees has been approved by OSU's Institutional Review Board to ensure that scientific and ethical standards are followed.

Given these considerations, I believe there is nothing to lose from volunteering to be a part of this project. I hope the interview is ultimately a pleasant experience!

APPENDIX B: Informed Consent Form

**PARTICIPANT INFORMATION**

**Oklahoma State University**

**Title:** The Embodiment of Age and Gender: Body Image Among Older Adults

**Investigator(s):** Kathleen J. Reddick, Graduate Teaching Assistant Oklahoma State University  
Department of Sociology, B.A. International Studies and Sociology.

**Purpose:** The purpose of the research study is to describe and explain the ways in which older Americans perceive and feel about their bodies. You must be 65 years or older to participate.

**What to Expect:** This research study is conducted by means of a face-to-face interview. You may skip any questions that you do not wish to answer. The interview will take about one hour to complete. There will not be any additional contact after the interview.

**Risks:** There are minimal risks associated with this project, which are expected to be greater than those ordinarily encountered in daily life. Due to the sensitive and personal nature of the subject matter, emotional risk is possible.

**Benefits:** You may find the discussion interesting and thought provoking. You may also gain an appreciation and understanding of how research is conducted.

**Compensation:** You will not be compensated for their participation.

**Your Rights and Confidentiality:** Your participation in this research is voluntary. There is no penalty for refusal to participate, and you are free to withdraw your consent and participation in this project at any time without reprisal or penalty. You have the right to ask questions any time throughout the research process and their participation in the study. Additionally, you have the right to refuse to answer any question asked. If you do not meet qualifications of the study, the investigator has the right to terminate the your participation.

**Confidentiality:** The records of this study will be kept private. Any written results will discuss group findings and will not include information that will identify you. Research records will be stored on a password-protected computer in a locked office and only researchers and individuals responsible for research oversight will have access to the records. Any written results will discuss group findings and will not include information that will identify you. Identifiable data will be removed immediately after the study has been completed.

Audiotapes will be transcribed and destroyed within three years of the interview.

**Contacts:** You may contact any of the researchers at the following addresses and phone numbers, should you desire to discuss your participation in the study and/or request information about the results of the study: Kathleen Reddick, 401 Murray Hall, Stillwater, OK 74078, 309-229-8959 or [Kathleen.reddick@okstate.edu](mailto:Kathleen.reddick@okstate.edu) or Dr. Heather McLaughlin, 468 Murray Hall, Stillwater, OK 74078, 405-744-6124 or [heather.mclaughlin@okstate.edu](mailto:heather.mclaughlin@okstate.edu).

If you have questions about your rights as a research volunteer, you may contact the IRB Office at 223 Scott Hall, Stillwater, OK 74078, 405-744-3377 or [irb@okstate.edu](mailto:irb@okstate.edu)

**If you choose to participate:**

Signatures:

I have read and fully understand the consent form. I sign it freely and voluntarily.

A copy of this form has been given to me.

\_\_\_\_\_

\_\_\_\_\_

Signature of Participant

Date

I certify that I have personally explained this document before requesting that the prospective participant sign it.

\_\_\_\_\_

\_\_\_\_\_

Signature of Researcher

Date



APPENDIX C: Demographic Questionnaire

**Demographic Survey Questionnaire**

Name: \_\_\_\_\_

What is your **age**? \_\_\_\_\_

What is your **gender**? \_\_\_\_\_

What is your **sexuality**? \_\_\_\_\_

What is the highest level of **education** you have completed? \_\_\_\_\_

What is your **occupation**? \_\_\_\_\_

If retired, what is your former occupation? \_\_\_\_\_

What age did you retire? \_\_\_\_\_

What is your race/ethnicity? \_\_\_\_\_

What is your current marital status? \_\_\_\_\_

Do you have any kids? If so, how many? \_\_\_\_\_

## APPENDIX D: Interview Questionnaire

### INTERVIEW QUESTIONNAIRE

Today we will be talking about how you feel about your body. I'll ask you a range of questions including questions about your family, your beauty routine, the media, and every day interactions. Before we dive into these topics, I wanted to ask you what's the first thing that comes to mind when you hear the words body image?

So as we talk more about this topic and answer the next set of questions, I'd like you to think of your life as a chapter book...Chapter one is your childhood, Chapter two is your teen years, Chapter 3 is your young adulthood (i.e., your twenties and thirties), Chapter 4 is adulthood (i.e., your forties and fifties), and Chapter 5 is now.

#### **Chapter 1: Childhood**

- Tell me about your family growing up. Who did you live with?
- What was your [**mother/father/sibling/etc.**]'s beauty routine like?
- What were you like as a kid?
- Who did you look up to as a role model? Why?
- Do you remember how you felt about your body when you were a child?
- Overall, were you satisfied with your appearance? [Why/why not?]

For each "Chapter," use the following questions...

#### **Chapter 2: Teen Years**

#### **Chapter 3: Young Adulthood (Twenties and Thirties)**

- Are you married? If yes,
  - What makes your spouse special/unique?
  - Tell me about how you think your spouse thinks of you.

#### **Chapter 4: Adulthood (Forties and Fifties)**

#### **Chapter 5: Now – Older Adulthood**

- How did you feel about your body?
  - How important was maintaining your appearance to you?
- Overall, were you satisfied with your body? [Why/why not?]
- Was there anything in particular that you liked about your body?

- Did you do things to (de)emphasize or change that part of your body?
- Was there anything in particular that you disliked about your body?
  - Did you do things to (de)emphasize or change that part of your body?
- Tell me about your beauty routine at this point in your life. What sorts of things did you do to manage your appearance [for example, diet, exercise, make-up or other beauty products]
  - Why did you do [**that activity**]?
  - How did you learn to [**do that activity**]?
  - How did you dress?
  - How was your beauty routine influenced by the resources that you had? [time, money, social networks, etc.]
  - Did you ever do anything drastic in this chapter of your life to change your appearance or body?
    - If yes, what? If no, did you ever consider doing anything drastic?
- Did you exercise? Dieted?
  - Tell me about that experience.
  - How often did you find yourself thinking about your weight?
  - How often did you think about body size?
  - What motivated you to do or think about these sorts of things?
- What sorts of messages do you hear aimed at people that age?
- Was there a specific actor, model, musician, athlete or someone who is famous that you thought is beautiful?
  - Why him/her? What was it about them?
  - Do you still find yourself comparing your own appearance and body to that person?
  - Have you always looked up to that person? Has that role model of beauty shifted over time?

### **Larger Reflections on Body Image**

- How important is maintaining your physical appearance?
  - Reflecting back, how has this changed over time? Has your body image changed over time?

- [Do you think these kinds of things in your routine are different for other men/women?
  - Do you think the reasons why you do all these things is different for men/women?
  - Do you think appearance is more important for men or for women?
    - How has the level/emphasis of importance of appearance changed as you've gotten older?]
- What did you expect when you were younger to happen to your body with age?
  - Do you feel those expectations came true?
- What changes have you seen in your body as you've gotten older?
  - Have you seen those same changes in others (friends, family, and acquaintances)?
- Have you noticed people (family, strangers) treat you differently as you've gotten older?
  - Tell me about those experiences.
  - How did they make you feel?
- When you're watching TV or a movie or flipping through magazines, do you feel like people of your age are represented?
  - How/ where do you see them depicted?
  - How do those depictions make you feel?
  - Do you think this varies with age?
- Do you identify with your age?
  - To what degree do you feel your age?
  - How does your body reflect your age?

### **Closing**

- Is there anything you'd like to talk about that I didn't ask you about?
- How do you feel talking about this? [Provide resource sheet]

VITA

Kathleen J. Reddick

Candidate for the Degree of

Master of Science

Thesis: THE EMBODIMENT OF AGE AND GENDER: BODY IMAGE OF OLDER ADULTS

Major Field: Sociology

Biographical:

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Completed the requirements for the Master of Science in Sociology at Oklahoma State University, Stillwater, Oklahoma in May, 2017.

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