

Old Age and Women's Identity

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Abstract

Female identity is a dynamic concept, and it has been a very discussed issue by contemporary cultural critic. How does old age affect identity construction and perception in elderly woman? Has feminine gender an impact in subjective well-being? Psychological changes of midlife women have been as conflicting as the idea that society has about them. Personality changes after young adulthood in women is a controversial matter. Erikson proposed that women might not develop identities in early adulthood as men do. In fact, he argued that women develop them later, in the context of an intimate relationship. Moreover, identity development appears to have important consequences for midlife well-being. For example, Vandewater et al. found that women's midlife well-being was facilitated by earlier attainment of a well-articulated identity. In these situations accomplishment of developmentally earlier tasks (identity formation) sets the stage for later psychological health. Our work sheds additional light on how women live this period of life in terms of happiness and purpose of life.

Keywords: old age, identity, woman, well-being

1. Introduction

Aging is a complex and natural process both for women and men, but there are some differences about the way they become confident with it. In fact, in women, the representation of emotional and cognitive feeling concerning identity is very different than in men [1].

It has been widely assumed that women of middle age usher in a long period of decline toward death and that therefore it will be associated with an increase in thoughts about death and mortality, as well as with declines in perceived physical, relational, and psychological capacities [2].

As Gergen highlighted women have always been associated to their reproductive capacities. Therefore, aging may have a great impact on women's self-identity as it can be interpreted as a loss of power [3].

However, there is an evidence that some aspects of women's well-being (positive relations with others and personal growth) are somewhat better than men's at all ages and none are worse [4].

Moreover, Montepare in 1996 found that middle-aged women had more favorable body images, in some respects, than younger women.

Finally, it is generally assumed that concern about aging, especially the physical processes associated with it, is more common and age-appropriate among the elderly than the middle-aged [5].

Since the turn of the century, there has been enormous progress in aging research in many fields.

In this book chapter, we focused on women and their identity.

The aim of this chapter is to shed additional light on women's identity and how they live their "silver years" in terms of happiness and purpose of life.

Finally, our work shows how aging depends on women's mental attitude, not only on physical changes related to biological age.

2. Emotional aging and women's well-being

In contrast to decline associated with physical and cognitive aging, emotional aging appears to improve with age.

Furthermore, dispositional tendencies, life events, and individuals' management of such events can all influence whether well-being improves or deteriorates with age.

Nevertheless, researches carry out that reasonably high levels of affective well-being and emotional stability are normal at least until after adults reach 70 or 80 years of age [6].

Experts proposed many theories about emotional aging.

Some theories on life-span emotional-motivational development highlight that normative shifts in emotional goals and strategies in adulthood are common in women's and men's adulthood. On the other hand, socio-emotional selectivity theory focuses on the importance of the acceptance of life-end in order to experience pleasant moment at present. This would help people to focus on present challenges rather than eluding them aiming to future rewards. Getting old is physiologically linked to the concept of endings; therefore, the theory predicts motivational changes during aging. This concept may be valid also for those people with a short life expectancy [7].

Dynamic integration theory underlines that as aging is linked to cognitive ability decrease, elderly often have problems with social integration and make great efforts when experiencing negative feelings [8].

The life-span theory of control holds that individuals' capacity to control their environment and achieve their developmental goals declines in older adulthood [9].

Consequently, when experiencing a new condition, elderly tend to change the self rather to the situation itself. On the other hand, authors suggest that experiencing and practicing emotional situations may play a positive role on elderly ability of managing them [10, 11].

In conclusion, according to the model of selection, optimization, and compensation, the ability of shifting between emotional preferences helps elderly to contrast progressive cognitive decline. As explained by Howden and Meyer structural and anatomical changes occurring during aging have a great impact of the concept of well-being. They noticed that structural degradation and functional slowing of the autonomic system may diminish physiological arousal after exposure to emotional stimuli, thereby reducing the impact of negative events.

However, once an autonomic reaction starts, the same mechanism can lengthen physiological reactions, thereby increasing the duration of negative emotional states [12, 13].

3. Women's experiences of body image and their identity in aging

Highlighting the complexities of women's psychological and physical aspects of aging, clinical psychology suggests that women over 50 currently cover over 17.2% of the total population and this percentage is expected to increase [14].

Of concern, over the last decade, we have observed an increase in the number of middle-aged and older women presenting for inpatient eating disorder treatment and a rise in the prevalence of obesity in women aged over 60 years [15, 16].

However, our understanding of women's experiences of body image in relation to the aging process is limited.

To date, most of the body image research has been on younger samples and has focused on satisfaction with weight and size [17].

A focused research on middle-aged and old women's concept of their body is necessary in order to target researchers' attention. With this aim the Gender and Body Image study was developed [18].

This study was conducted to capture the thoughts, feelings, and attitudes that women at middle age have about their bodies and the experience of aging.

This research gathered survey-based information related to body image, health, identity, and aging from 1,849 women over age 50 across the United States.

Quantitative data revealed body dissatisfaction, eating disorder symptoms, and extreme weight control methods in a significant number of these women.

According to other studies, it was also demonstrated that body dissatisfaction in women appears to be fairly stable across age despite the fact that body appreciation increases [19].

It is commonly known that aging is associated with unwelcome changes in physical appearance, increased dependency on others, and negative societal stereotypes [20].

Thus, middle and old age are generally seen as a period of decline in Western society, a problem with particular relevance for women due to Western society's long history of placing value on physical appearance, youth, and thinness [21–23].

To date, several interview-based qualitative studies illustrate the contradictory nature of women's experiences of aging and body image [24]. While aging women experience unwelcome changes in physical appearance. At the same time, they become more focused on physical health and more rejecting about social pressures related to appearance [25].

Unfortunately, all these qualitative studies refer to interviews conducted on narrow age groups or focused on one particular aspect of aging (e.g., weight and body size).

The GABI analysis, however, inquired on perceptions and experiences of women over 50 focusing on body image, aging, and identity in order to generate ideas for future study and to inform clinical practice.

Women enrolled in this study were interested both in physical and psychological aspects of aging.

This topic was identified in another qualitative study of aging and body image among older women in a narrower age group [24] and supports quantitative research indicating that body image becomes more complex with age.

According to similar researches [26, 27], women were disappointed to weight and metabolism change, which were considered as signs of aging.

Many of the enrolled female subjects referred that as experiencing body changes, cognitive adaptations to the physical experience of aging and the psychological experience of body image simultaneously changed. Women referred that unforeseen body change acceptance was a frightening task; on this matter menopause was described as a crucial period as women referred contrasting feelings. They have to face the occurrence of physical changes due to their old age, regretting their younger bodies. Older women strongly voiced a sense of injustice in their aging experience, recounting external pressures from the society about appearance that were different for aging men.

Women interviewed in this study described an awareness of these internal shifts, acknowledging that they were less interested in adhering to the societal expectations, yet still felt challenged to adhere to them regardless of age [28].

Women commented on feelings of invisibility and irrelevance, a phenomenon that has also been highlighted [29].

The lack of representation of aging women in the media documented in quantitative reports did not go unnoticed by our participants [30].

Women commented on the increasing importance of self-care, noting that caring for their physical health assumed priority over physical appearance as they grew older, concurring with previous descriptions [23, 31].

Young women's confidence is usually based on beauty and appearance. On the other hand, old women consider health and physical autonomy as the most relevant values. However, society does not seem to accord to these changes.

In fact women reported to be undervalued while getting old. As Twigg and Majima remark, women aim to be still considered for their capacities, and although their priorities may shift toward functionality, they are still interested on their appearance. In fact they still enjoy clothing and cosmetic shopping [32].

Women asserted that although their priorities may shift toward functionality, this does not mean that appearance no longer matters.

4. When the old age become a challenge

Being old can be a challenge. Senses become less sophisticated, friends are fewer, and stress easily increases. Additionally, loneliness, sense of dependence from others, anxiety, sadness, and apathy are some of the most common feelings and emotions perceived by the older.

How to escape from that? Many therapeutic interventions were proposed, especially for women:

4.1 Dance therapy

Dance therapy for the elderly is a cognitive and social activity which improves levels of resilience and adaptation to the stresses of aging [33]. Working both on physical and intellectual aspects, dance sessions showed great results concerning self-esteem, communication, and general well-being.

4.2 Pet-assisted therapy to the health of the elderly

Recently, there has been a growing interest toward elderly's affective and emotional needs.

The aim of relational therapies is to increase the understanding of those needs and patients' well-being.

As well as being wonderful companions, studies revealed that pets provide significant health benefits to their owner [34]. Many studies were also conducted on ill subjects. As Sollami et al. underlined, pet therapy could have a great emotional and social impact, bringing relief to patients and their family members but also to health professionals [35].

5. The incredible art of gossip: An healthy women habit

Gossip is an healthy women habit. Getting older people have to face up new and unpleasant situations, and social contact plays a key role on the ability to overcome them.

Once again, men and women react differently, using various cognitive and social strategies. During aging many cognitive functions (i.e., memory) may decrease

and deafness occurs; however, women keep on being curious about neighbors' and friends' news. Gossip is more than an ordinary behavior. In fact, the Konstanz Department of Psychology in Germany has recently pointed out the importance of communication as the heart of social and cultural life [36]. Being capable of building relationships represents a powerful ability that guides human and social intelligence over the entire life span.

Hartung and Renner underline the central role of relationships. They suggest that social curiosity and the tendency to gossip are inherently related to each other. In fact they represent two different social functioning drives. On the one hand, curiosity is described as the main component for development and learning behaviors. The main curiosity functions are creating interpersonal strings and facilitating the feeling of belonging to others. People with interpersonal curiosity are more sociable and resilient to stressful events. Therefore, they need to control social world in order to feel safe and relaxed. To sum up, curiosity is defined as the "drive to know."

On the other hand, gossip is generally described as "an entertainment of pleasure."

Information, friendship, influence, and entertainment are considered to be the main social functions. Sharing gossip and news stands as a dynamic strategy in order to socialize, create relationship, and prevent from outsiders' exclusion.

Gossip represents a type of exploratory and learning behavior in a word that is going to be more complex, especially for elderly people.

6. It is time to get online: the importance of being in touch and the role of social media

To date, social media and technology play a central role in our social life, and they are considered to be the best and easiest ways to communicate as they allow people to keep in touch with friends reducing distance. It is interesting to consider how is elderly approach to 2.0 reality and how it could have a crucial role in their daily life. Discussion boards, social networks, blogs, videos, and virtual reality are all ways to share information, bringing people together and improving social contact, and they can prevent elderly from social isolation.

Denecke et al. suggest that the "social media phenomenon" is increasing through the elderly, especially through those who suffer from chronic illness [37].

Moreover, peer-to-peer healthcare is emerging as a source of information and social support for chronically ill patients.

Nowadays, technology and social media represent a great opportunity to support and prevent social isolation. The last one is the major seniors' noxious factors. Social media also stand as a place to share information and personal stories. This virtual place could be a chance to create a fertile and stimulating open space in order to share interpersonal feelings and fears.

Virtual reality is another way elderly could use to express themselves. Arlati et al. conducted an interesting research on this matter. The aim of the study was to improve the patient's adherence to treatments, promoting collaboration and competition using virtual reality.

Researchers proposed a dual-task training program. They asked users to cycle on an uncommon bike while recognizing target animals as they appear along the way. The chance of training with other users in order to reduce the risk of social isolation was also given. Using "social bike," users can choose the multiplayer mode, in order to stimulate competition or cooperation with the others [38].

7. Conclusions

Before a woman becomes old, a long journey has just begun from the adolescents to juvenile period and from adult to old age.

Usually, the old age is commonly viewed as a sort of the final destination instead of the start of something new.

As long-term memory appears to be reinforced by the time, also identity seems to be more stable and temperament, and character is already intrinsically connected to each other.

Old age is considered as a fully formed stone where the heart and mind are strictly connected.

Despite off, many authors suggest that before women become old, she could start to have some typical deficit as amnesic and neurocognitive problem, going through the mild cognitive impairment.

This is a critical stage in which the couple begins to decline, when they deal with losses, support the middle generation, and conduct a life review.

In this stage, usually considered between 65 years old, men and especially women are more sensitive to adverse events and health problem and begin to be more frailty.

Frailty is an important factor in functional and cognitive emotional decline, morbidity, and mortality for some older people.

Actually, anxiety, and depressive symptoms are much common in elderly people especially in women.

In older age, loneliness, social isolation, feeling of contribution/uselessness, lack of leisure activities, anxiety for the health, social deprivation, and depression are increasing [39].

In 2015, a writer and illustrator Matthew Johnstone tells the story of overcoming the “black dog of depression” [40].

He presents depression as a black dog, and it is clear to explain how depression is largely preventable and treatable.

The black dog could reduce the ability of concentrating, doing everything you were used to appreciate before, fear of being with other people, and constantly having fear to be discovered by other people’s exhausting energy.

It could make you sad until damaging your identity.

Getting old with good attitudes like managing stressful events with resilience and being compassionate with other people could be a strategy to live better.

When a woman gets old, the frailty of identity and personality increase, and this is the reason why prevention is important to do not present these symptoms.

Being resilient, having a good relation with other people, and conducting a sport exercise are demonstrated to be essential on mental health overcoming the black dog [40].

In conclusion, our work shows how aging depends on women’s mental attitude, not only on physical changes related to biological age [41].

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References

- [1] Vandewater EA, Ostrove JM, Stewart AJ. Predicting women's well-being in midlife: The importance of personality development and social role involvements. *Journal of Personality and Social Psychology*. 1997;72(5):1147-1160
- [2] Stewart AJ, Ostrove JM, Helson R. Middle aging in women: Patterns of personality change from the 30s to the 50s. *Journal of Adult Development*. 2001;8(1):23-37
- [3] Gergen MM. Finished at 40: Women's development within the patriarchy. *Psychology of Women Quarterly*. 1990;14:471-494
- [4] Ryff CD, Singer B. Psychological well-being: Meaning, measurement, and implications for psychotherapy research. *Psychotherapy and Psychosomatics*. 1996;65:14-23
- [5] Montepare JM. Actual and subjective age-related differences in women's attitudes toward their bodies across the lifespan. *Journal of Adult Development*. 1996;3:171-182
- [6] Teachman BA. Aging and negative affect: The rise and fall and rise of anxiety and depression symptoms. *Psychology and Aging*. 2006;21(1):201-207
- [7] Fung HH, Carstensen LL, Lutz AM. Influence of time on social preferences: Implications for life-span development. *Psychology and Aging*. 1999;14:595-604
- [8] Vief G et al. Dynamic integration: Affect, cognition, and the self in adulthood. *Current Directions in Psychological Science*. 2003;12:201-206
- [9] Heckhausen J, Schulz R. A life-span theory of control. *Psychological Review*. 1995;102:284-304
- [10] Fields F. Everyday problem solving and emotion: An adult developmental perspective. *Current Directions in Psychological Science*. 2007;16:26-31
- [11] Scheibe S, Blanchard-Fields F. Effects of regulating emotions on cognitive performance: What is costly for young adults is not so costly for older adults. *Psychology and Aging*. 2009;24:217-223
- [12] Cacioppo JT, Berntson GG, Klein DJ, Poehlmann KM. Psychophysiology of emotion across the life span. In: Schaie KW, Lawton MP, editors. *Annual Review of Gerontology and Geriatrics*. Vol. 17: Focus on emotion and adult development. New York: Springer; 1998. pp. 27-74
- [13] Charles ST, Piazza JR, Luong G, Almeida DA. Now you see it, now you don't: Age differences in affective reactivity to social tensions. *Psychology and Aging*. 2009;24:645-653
- [14] Howden LM, Meyer JA. Age and Sex Composition. 2010 Census Briefs. 2010. Retrieved May 2011, 2011
- [15] Ackard DM, Richter S, Frisch MJ, Mangham D, Cronmeyer CL. Eating disorder treatment among women forty and older: Increases in prevalence over time and comparisons to young adult patients. *Journal of Psychosomatic Research*. 2013;74(2):175-178. DOI: 10.1016/j.jpsychores.2012.10.014. PubMed: 23332534
- [16] Pike KM, Dunne PE, Addai E. Expanding the boundaries: Reconfiguring the demographics of the "typical" eating disordered patient. *Current Psychiatry Reports*. 2013;15(11):411. DOI: 10.1007/s11920-013-0411-2. PubMed: 24122512
- [17] Grogan S. Body image and health contemporary perspectives. *Journal of*

- Health Psychology. 2006;**11**(4):523-530. PubMed: 16769732
- [18] Hofmeier SM, Runfola CD, Sala M, Gagne DA, Brownley KA, Bulik CM. Body image, aging, and identity in women over 50: The gender and body image (GABI) study. *Journal of Women and Aging*. 2017; **29**(1):3-14. DOI: 10.1080/08952841.2015.1065140
- [19] Öberg P, Tornstam L. Body images among men and women of different ages. *Ageing and Society*. 1999;**19**(05):629-644
- [20] Nettleton S, Watson J. *The Body in Everyday Life*. Routledge. Psychology Press; 1998
- [21] Furman F. *Facing the Mirror: Older Women and Beauty Shop Culture*. Routledge; 2013
- [22] Laws G. Understanding Ageism: Lessons from Feminism and Postmodernism. *The Gerontologist*. 1995;**35**(1):112-118
- [23] Twigg J. The body, gender, and age: Feminist insights in social gerontology. *Journal of Aging Studies*. 2004;**18**(1): 59-73. PubMed: 7890196
- [24] Liechty T. 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 and Aging*. 2012;**24**(1):70-88. DOI: 10.1080/08952841.2012.638873. PubMed: 22256879
- [25] Johnston O, Reilly J, Kremer J. Women's experiences of appearance concern and body control across the lifespan: Challenging accepted wisdom. *Journal of Health Psychology*. 2004;**9**(3):397-410. DOI: 10.1177/1359105304042349. PubMed: 15117539
- [26] Mark Clarke LH. Older women's perceptions of ideal body weights: The tensions between health and appearance motivations for weight loss. *Ageing and Society*. 2002;**22**(06):751-773. DOI: 10.1017/S0144686X02008905
- [27] Tunaley JR, Walsh S, Nicolson P. I'm not bad for my age: The meaning of body size and eating in the lives of older women. *Ageing and Society*. 1999;**19**(06):741-759
- [28] Liechty T, Yarnal CM. The role of body image in older women's leisure. *Journal of Leisure Research*. 2010;**42**(3):443-467
- [29] Bytheway B, Johnson J. The sight of age. *The body in everyday life*. 1998:243-257. Book Chapter
- [30] Wasylkiw L, Emms AA, Meuse R, Poirier KF. Are all models created equal? A content analysis of women in advertisements of fitness versus fashion magazines. *Body Image*. 2009;**6**(2):137-140. DOI: 10.1016/j.bodyim.2009.01.005. PubMed: 19237328
- [31] Banister EM. Women's midlife experience of their changing bodies. *Qualitative Health Research*. 1999;**9**(4):520-537. DOI: 10.1177/104973299129122045
- [32] Twigg J, Majima S. Consumption and the constitution of age: Expenditure patterns on clothing, hair and cosmetics among post-war baby boomers. *Journal of Aging Studies*. 2014;**30**:23-32. DOI: 10.1016/j.jaging.2014.03.003. PubMed: 24984905
- [33] Linder EC. Dance as a therapeutic intervention for the elderly. *Educational Gerontology*. 1982;**8**(2):167-174
- [34] Cherniack P, Cherniack AR. The benefit of pets and animal-assisted therapy to the health of older individuals. *Current Gerontology and Geriatrics Research*. 2014;**2014**:623203. DOI: 10.1155/2014/623203. Epub 2014 Nov 16

[35] Sollami A, Gianferrari E, Alfieri M, Artioli G, Taffurelli C. Pet therapy: An effective strategy to care for the elderly? An experimental study in a nursing home. *Acta Bio Medica*. 2017;**88**(1-S): 25-31. DOI: 10.23750/abm.v88i1 -S.6281

[36] Hartung F-M, Renner B. Social curiosity and Gossip: Related but different drives of social Functioning. *PLoS One*;8(7):e69996. DOI: 10.1371/journal.pone.0069996

[37] Denecke K, Bamidis P, Bond C, Gabarron E, Househ M, Lau AY, Mayer MA, Merolli M, Hansen M. Ethical issues of social media usage in healthcare. *Yearb Med Inform*. Aug 13, 2015;**10**(1):137-147. DOI: 10.15265/IY-2015-001

[38] Arlati S, Colombo V, Spoladore D, Greci L, Pedroli E, et al. A social virtual reality-based application for the physical and cognitive training of the elderly at home sensors. 2019;**19**(2):261

[39] Savaskan E, Summermatter D, Schroeder C, Schächinger H. Memory deficits for facial identity in patients with amnesic mild cognitive impairment (MCI). *PLoS One*. 2018;**13**(4):e0195693. DOI: 10.1371/journal.pone.0195693. eCollection 2018

[40] The Black Dog. Department of Mental Health and substance abuse. World Health Organization 2015. Illustrator and author Matthew Johnstone; 2015

[41] Li CJ, Wang CH, Lin CF. An experience applying life review and resilience to a geriatric patient with functional limitations and depression. *Hu li za zhi The journal of nursing*. 2019;**66**(1):115-122. DOI: 10.6224/JN.201902_66(1).14