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Senior Citizens?

Old Age and Citizenship in Provincial New Zealand Communities

A thesis
submitted in partial fulfilment of
the requirements for
the degree of
Doctor of Philosophy
at
School of Sociology, Social Policy and Social Work
Massey University

by
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Massey University
2002

Abstract

This research considers the extent and quality of the citizenship of older New Zealanders in the “Third Age”, a stage in the adult life cycle between the second age of careers, partnership and parenting and the fourth and final phase of (usually) increasing dependency. The study questions: whether ‘senior citizens’ have access to the material and cultural resources to enable them to choose between different courses of action in their daily lives; whether existing intergenerational relations enable them to appropriate substantive rights and responsibilities; and what are the relational practices and processes, the networks and affiliations, through which citizenship may be ‘performed’ by older people? This research was carried out with six groups of elderly people in a range of communities in the province of Hawke’s Bay on the East Coast of the North Island of New Zealand. The purpose of running six different focus groups, each over a six week period, was to generate discussion of the issues for older people as well as individual stories about the lives of elderly people in particular local communities. The aim was to investigate the meaning of old age for elderly New Zealanders by critically analysing the term ‘senior citizen’.

The study built on contemporary theories of ageing and citizenship, using a narrative collective life history approach in order to focus on older people’s personal experience of policy, and the capacity for citizenship that they bring with them into old age. The study also identifies national and local government policies, national and local organisations, media representations of old age, local communities, families and the attitudes of elderly people themselves as important influences on the extent to which they are able to exercise and enjoy their rights and responsibilities as senior citizens.

My central thesis is that senior citizenship depends on a civil society which supports autonomy and connectedness for all its citizens. The balance between these two aspects of citizenship is culturally determined and sensitive to outcomes in a range of social domains over the life span. Recommendations focus on self-determination and social inclusion for older people through anti-ageist policies and practices at the national and the local level, and further research into the plans and aspirations of senior citizens.

Preface

Initially my inspiration for this research project came from my experience of counselling work with older people with visual impairment, trying to make space for the telling of their stories and the “performance of (their) knowledges” as part of the “therapeutic endeavour” described by White and Epston (1989, p. 34). I wanted to enable the older people in my study to speak for themselves, literally to “re-member” (ibid) the stories of their lives. I have struggled interminably with the problem of how to choose the parts of their stories that will best convey their spirit, their creativity and their capacity for senior citizenship. I am grateful to them all for giving so graciously and so generously of their time and energy, and their precious stories, to help me in my task.

As a Pakeha woman and a member of the ‘sandwich’ generation I have also been influenced in my thinking about ageing and citizenship by my own ageing and by the life events that have occurred in my family during the life of the research project. The increasing physical and mental frailty and eventual institutionalisation of my mother has enabled me to understand how disempowering and disheartening these experiences can be for an older person and for family members who are involved. During the time of writing the thesis, I became a mother-in-law and a grandmother. Other experiences too, such as hearing a very fit and independent acquaintance, on turning sixty-five, describe himself dejectedly as “on the scrap-heap”, even though he is still working, have contributed to my questions, and my thinking about citizenship in the “Third Age”.

An experience which helped personalise my thinking about citizenship and participation was the 2002 Wellington six kilometer Round-The-Bays walk, in which I participated with several members of my family. This event provided an opportunity for people of all ages and abilities to share public spaces in a way which was transitory but potentially community-building. The experience provided me with an impression of what a society for all ages might look and feel like, and also helped clarify for me the interactive nature of the various spheres which make up ‘civil society’. Most importantly, it was accessible to citizens of all ages. These and many other experiences have contributed to my evolving understanding of the concept of citizenship as a useful way of thinking about the relationship between older people and the society in which they live.

Central to the process and critical to my understanding and the development of my argument has been dialogue throughout with my supervisors, Professor Robyn Munford and Dr Celia Briar. Celia has been a constant source of thoughtful and challenging insights, always stimulating me to greater depth of analysis. Robyn has been unfailingly available and supportive, while still managing to encourage me just beyond where I thought I could go. My conversations with both of them have always been interesting, relevant, stimulating and fun. Frequently they have helped revive my flagging spirits and I am grateful to them both for their unfailing support and for the sense they have given me that I was engaged in something worthwhile. I am grateful to my friend Kim, with whom I walked and talked. She offered many thoughtful insights, questions, suggestions and encouragement. Thanks also to Monica Skinner for her careful and thoughtful reading and her helpful suggestions for improvements, and especially for providing the motivation I needed to produce a conceptual model of senior citizenship.

My family have been amazing. John has kept me going through it all, believing in me and encouraging me to believe in myself. I am so grateful to him for his constant practical and emotional support and love. I am also very grateful to Susannah, Chloe, Daniel and Rosalind for their suggestions, to Christopher for his loving encouragement, and to Shaun, Helena and Simon for their tolerance and willingness to engage with the issues I insisted on raising. I acknowledge with love the role of my parents and parents-in-law in teaching me how to be a grandmother to Isabella. The whole process has made me acutely aware of the importance of family in performances of citizenship throughout the life cycle.

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Part One:

Age

and

Citizenship

Chapter One:

Introduction

New Zealand will be a positive place in which to age when older people can say that they live in a society that values them, acknowledges their contributions and encourages their participation (Dalziel, April 2001, p. 13).

The Issue

This study sets out to establish what constitutes citizenship for older people, and whether older people in New Zealand are treated as senior citizens. Do older people feel valued and acknowledged as contributing and participating members of society, and does examination of the literature and policy support a view of them as senior citizens? The study conceives of old age as socially and culturally as well as biologically constructed. Citizenship is seen as a relational practice which is enacted within networks of citizens and mediated by the individual biographies of those citizens as well as by the nature of civil society and the history of public policy. The aim of the study is to assess whether older people in New Zealand conceive of themselves and are regarded by others within the society as senior citizens. In order to do this it explores the spheres of enactment, the multiple avenues through which a heterogeneous population of older people may access the locally performed, socially mediated, nationally determined process of modern citizenship, and asks to what extent older people in New Zealand have the capacity to do so.

The research was conducted as a response to my curiosity about the disparity between the biographical narratives of the older people with whom I was working and talking, and the prevailing discourses and media representations of ageing and old age. In my work as a counsellor I heard stories from older people and from volunteer supporters or spouses or family members of older people. These stories spoke of a lifelong engagement and agency which did not fit either the still frequently encountered view of ageing as a pathological downhill slide towards disengagement, probable institutionalisation and death, or the more recent view of successful ageing as a well-preserved, fit, globe-trotting Third Age (Laslett, 1989) of carefree consumption. In other words, they did not fit prevailing views of older people as either needy or greedy (Keeling, 1998a).

My aim was to explore old age from the perspective of older people. The research aim was to make space for the stories that old people have to tell about old age,

to help fill in the gaps between current popular images of old age as successful and positive or unsuccessful and negative. I chose to use the notion of citizenship as a theoretical framework for thinking about ageing and old age because of its potential to allow for the inclusion and engagement of older people in the relational networks of civil society.

Background to the study

Ageing and Old Age

Study of this topic is particularly apposite at this point in time, firstly because New Zealand, like most developed countries, has a rapidly ageing population, and secondly because this is generally construed as a problem, not for the older people themselves, but for the funders and providers of the services that will be needed as a result of their growing numbers. The post-World War Two baby boom, a subsequent decline in fertility, and increases in life expectancy have produced a “demographic bulge” (Statistics New Zealand, 1997, p.16) in older age groups. The proportion of people who are over the age of 65 has been increasing since the late 1960s and this trend is predicted to accelerate in the future, particularly after 2010. The groups of people between 75 and 85, and those over 85 are growing at a faster rate than the 65 plus age group. A changing social environment, including changes in family structure, as well as attitudes to ageing and retirement have major implications for the lives people lead in later life, and for the whole population.

Life Expectancy and Health Status

As a Pakeha (New Zealander of European descent) woman born in 1950, my life expectancy at birth was about seventy-three years (National Health Committee, 1998, p. 40). My Pakeha husband, born the same year, could expect sixty-eight years. A Maori woman born the same year could look forward to about fifty-six years, and a Maori man the same age only fifty-four years. While life expectancy in New Zealand has increased markedly over the last fifty years, particularly for Maori, the disparity between Maori and Pakeha remains, and is widening again (ibid), so that a Pakeha female born in 2002 can expect to live to about eighty years, and a Maori female about seventy-three years. A Maori male born at the same time can expect an average of sixty-seven years, and a Pakeha male an average of seventy-four years. In terms of morbidity, mortality, and life expectancy at birth, most analyses indicate clear disparities between Maori and non-Maori in almost every indicator of health status (Cunningham, 2000), with non-Maori having about half the death rates of Maori (Blakely, Robson and Woodward, 2002).

The 'Burden' of Dependency

As well as ethnicity and gender differences in life expectancy, there are other variables, such as educational attainment and socioeconomic status, occupation and economic history, locality and housing, which contribute to the health, well-being and standard of living of older New Zealanders. Elderly people were the first to receive welfare benefits in most advanced industrial societies and continue to be major recipients of health and welfare resources. While significant human effort and resources are devoted to the medical advances and lifestyle changes that produce the extra years of life, there has historically been very little celebration of the achievement, in New Zealand or in other developed countries (Else and St John, 1998). Instead, the growing proportion of older people is frequently presented as a danger which poses a threat to the economy. The population of older people is often depicted quite explicitly as a burden, especially in discussions about the dependency ratio:

The larger the elderly population, the larger the cost of New Zealand Superannuation and the more significant the impact on health services. One way to quantify this burden is to look at the population in the 0 to 14 years and 65 years plus age groups as a ratio to those in the 15 to 64 years age group (usually referred to as the working age population). These measures are referred to as the dependency ratios. They provide a crude indication of how many people in the core working age groups may be supporting those in age groups that require financial assistance (Te Puni Kokiri, 2000, pp 13 - 14).

The assumption that older people are dependent on working age people lies behind media headlines which typically pit the innocence of youth against the guile of age, and depict the current generation of baby boomers as “a grey wall across the horizon ... rank upon rank, waving their walking-sticks and crying, “Look after us in our old age”” or as “a forest of hands held out for help” (Welch, 2000, p. 17). The apocalyptic vision of the sins of the fathers being visited on the children is underlined by the dire prediction that without the commitment of the younger generation to this country over the next few years, “the older generation will be dog-tucker” (ibid, p. 17).

Perspectives on Ageing

A view of older people as dependent and as a burden takes no account of research (Kendig, 1986; McPherson, 2000) which shows that financial support, like other kinds of support, flows primarily down the generations. Kendig (1986) found that where financial support was provided to family members, it was overwhelmingly between older people and their adult children, and the older people were twice as likely to be the providers as the recipients of help. A view of older people as

dependent also ignores their lifetime productivity, considering only what Hazan (1994, p. 19) aptly calls “the pecuniary present”, in which present and future lack of economic productivity equates to dependency. If older people want or need to remain in paid work, they face major barriers to work force participation. Two factors influencing continued participation by older people are the age of entitlement for New Zealand Superannuation, now 65, and the abolition of compulsory retirement. However a major barrier to employment of older workers is constituted by the ageist attitudes of employers (Ministry of Social Development, 2001). The emergence of critical gerontology and social construction or political economy theory in the 1980s focused attention on the structural inequalities and constraints associated with class, gender and ethnicity, and on the effects of these divisions on the lives of older people.

This thesis is an attempt to chart the experiences and the views of older people themselves, the importance of ageing as an issue for all generations, and the need for a conceptual framework which values older people, taking account of their rights, obligations and opportunities for citizenship.

Citizenship

The idea of citizenship, with its accompanying rights and obligations, usually connotes “a sense of engagement with the public realm” (Joseph, 1999, p. 4). Kymlicka and Norman (1994) argue that the concept of citizenship, closely linked to ideas of individual entitlement and of attachment to a particular community, integrates the demands of justice and community membership. In the post-World War Two conception of citizenship rights developed by T. H. Marshall (1950) the fullest expression of citizenship requires a liberal-democratic welfare state which guarantees universal civil, political, and social rights to ensure that every member of the political community feels as if he or she is able to participate in and enjoy the common life of society. The extent to which these rights are withheld or violated is the extent to which people are denied full citizenship through marginalisation and social exclusion.

In New Zealand, as elsewhere, a powerful critique of Marshall's view came from the New Right, a theoretical tradition, also known as neo-liberalism or economic rationalism, which emphasises the dangers of state intervention and promotes the market as the central institution (Cheyne, O'Brien and Belgrave, 2000). The neo-liberal argument is that the welfare state has reduced citizens to passive dependants on the state. Feminist analyses have critiqued the way that welfare

perpetuates women's dependency on men, and the very different way in which men and women were incorporated as citizens (Pateman, 1989; Lister, 1997). Though women can now claim citizenship as a formal status, Pateman (1989) argues that the welfare state has positioned women as dependants in a patriarchal structure in which employment is the key to full citizenship.

It is clear, as Kymlicka and Norman (1994) argue, that many groups still feel excluded from full participation by their socio-economic status and by their difference, even though they may possess formal rights as citizens. Socio-economic status as it is used in this thesis indicates a complex mix of social and economic circumstances which includes measures such as social class, income, occupation, employment status, area of residence, housing quality, household composition and social integration of an individual or a group of individuals (National Health Committee, 1998). A radical development in citizenship theory, based on these differences, is the conception of 'differentiated citizenship' (Young, 1989). A "politics of difference" (Gunew and Yeatman (Eds), 1993; Yeatman, 1994) argues for the incorporation of members of certain groups into the political community not only as individuals but also through the group, their rights depending, in part, on their group membership. Participation is an important notion in the theory of citizenship. It has been shown that political participation is divided on the basis of education, socio-economic status and gender, and Pateman (1989) has argued that working class citizens and women do not participate in the political process to any great extent because they do not find it worthwhile. In addition, she says, working-class people have not been educated to participate in political processes. Her argument is that the notion of participation should be broadened to include other spheres of social life. Following this lead, Lister (1997) has envisaged a public sphere which is enlarged to include the many voluntary associations of civil society. Political participation as an obligation of citizenship has been recast, in this view, as "a right and an opportunity" (ibid, p. 33).

In everyday life, participation is closely connected with ideas about belonging and contributing. Social connectedness, an important concept in this thesis, is an aspect of society which reflects the degree to which people "are integrated with, and participate in, a secure social environment" (National Health Committee, 1998). For those wishing to measure social wellbeing and the state of the nation, social connectedness is "a way of describing the relationships people have with others and the benefits those relationships bring to the individual as well as to society" (Ministry of Social Policy, 2001b, p. 88). *The Social Report 2001* notes

that people “who feel socially connected also contribute towards building communities and society” (ibid). Making a contribution, however, requires certain resources, and the *Social Report* notes the barriers to maintaining social contact experienced by adults over 65 with little or no income above New Zealand Superannuation.

Citizenship is conceived of in this project as an active relational process (Somers, 1994) which is enacted within the various networks that constitute the arenas of the social and the political in our society. Integral to this understanding of citizenship as an experience are ideas about participation and community, family and whanau as the arenas within which a relational kind of citizenship is performed or enacted in everyday activities. The political arena, and the nature and disposition of national and local government in turn influence the physical and social environment and the resources available to individuals, families and communities to negotiate their citizenship. Social policy influences the experiences of people at all stages of life, and older people are affected by the cumulative effects of economic and social policies over their lifetimes, as evidenced for example by the inability of many older Maori people to speak their language as a direct result of government policies of assimilation at the time they were being formally educated. Another example is the high level of home ownership among older New Zealanders as a result of government housing policy in the 1930s and 1940s and economic prosperity in the 1950s and 1960s. The so-called “crisis of the welfare state”, which became evident during the 1980s in almost all OECD countries, was created by an international swing to the political right combined with increasingly difficult economic circumstances (Bryson, 1992). Residualist attitudes to welfare and ideologically driven health and housing reforms led to funding constraints and service reductions which continue to affect many older New Zealanders.

The New Zealand Context

The population of New Zealand is made up of a number of different groups, each with their own traditions and histories. The main population groups are Maori, the indigenous people of New Zealand, and Pakeha, non-Maori people of British and European descent. With people who have migrated from the Pacific Island nations, these groups make up ninety-five per cent of the population of New Zealand (Fleming, 1997). Smaller populations groups, predominantly from Asian countries, which include the descendants of very early immigrants as well as more recent skilled migrants and refugees, make up the remainder of the population.

For the purposes of this study however, I will concentrate on the Pakeha majority (79.6 per cent of the population at the 2001 Census) and the Maori population, currently 14.5 per cent of the total population (www.stats.govt.nz). The Maori population is projected to increase to 17.8 per cent of the total population in 2021 (Statistics New Zealand, 2000). While these population groups define themselves differently according to their different histories and traditions, they share the same social, economic and legal context and compete for jobs in the same labour market (Fleming, 1997). Yet the impact of colonisation on Maori, a people who have been living in New Zealand for at least eight hundred years and who, evidence suggests, migrated from the islands of East Polynesia, has been profound. New Zealand was annexed at a time when theological ideas combined with scientific theories to produce powerful ideologies about the divinely ordained superiority of white races over black, ideologies in which Maori were identified as inferior (Johnson and Pihama, 1994).

The Treaty of Waitangi, signed in 1840 between Maori chiefs and representatives of the British Crown, marked the establishment of New Zealand as a British colony and set out the basis for the relationship between Maori and the settlers. However, the processes of colonisation, including the alienation of land from its Maori owners and education policy which discouraged the use of the Maori language, as well as policies of assimilation resulted, for many Maori, in the loss of the linguistic and cultural bases of a collective identity or identities as Maori (Hoskins, 1997). Within the broad struggle for Maori self-determination contemporary debates continue about social and cultural structures and practices which marginalise Maori women (Hoskins, 1997; Johnson and Pihama, 1994; Durie, 1998), and about tribal structures which tend to imply legitimacy and superiority (Hoskins, 1997) but are not necessarily accessible to all Maori, especially urban Maori (Durie, 1998). The Waitangi Tribunal has provided a forum, since 1975, for Maori claims against the Crown to be investigated, including one in relation to the marginalisation of Maori women (Johnson and Pihama, 1994), though the settlement process has been slow and costly for the claimants (Durie, 1998). It has also been powerless to reverse the negative long-term effects of colonisation, in particular alienation from the land and its resources, on the socio-economic status, health and wellbeing of contemporary Maori.

Many Maori have some Pakeha ancestry and Pakeha relatives, and many are married to Pakeha. The result of this intermarriage is that some Maori are equally at home in Maori or Pakeha settings, some are more comfortable with Maori ways,

and some, having been brought up in Pakeha cultural settings, have had to learn about their “Maori side” (Fleming, 1997). A major source of such knowledge are kuia (old women), “the repositories of the history of our whanau and hapu” (Selby, 1994, p. 147). The concept of kaumatua, elders with precious knowledge of the culture and language, is a distinctive Maori concept deeply rooted in the social structures and networks of Maori society.

Many Maori experience a sense of alienation within eurocentric social and political institutions. There have been ongoing moves by Maori since the 1970s to reclaim their language, values and practices, to challenge the government to redress grievances and to demand recognition and respect for Maori aspirations. For many it is the whanau, a kinship group often described as an extended family connected by descent from a common ancestor (ibid) and the marae, the traditional meeting-place of the whanau and hapu (sub-tribe) (Durie, 1998), where Maori culture, values and history are shared, and Maori practices are taught by observation (Rangihau, 1975). The marae has also been an important site of ongoing struggle for Maori women seeking to be heard and to create or recreate spaces where they can exercise “autonomous agency” (Hoskins, 1997, p. 41; see also Awatere Huata, 2002). The whanau and the marae are integral to any discussion of citizenship in a Maori cultural context. While kinship and family connections are also important influences in the lives of Pakeha New Zealanders, including older people (McPherson, 2000), a major finding of my thesis is that despite the effects of colonisation older Maori women appear to enjoy higher levels of participation than their Pakeha counterparts.

The Local Context

The People

The 2001 Census usually resident population count for the Hawke’s Bay Region was 142,947, or 3.8 per cent of the New Zealand population (Statistics New Zealand, personal communication, November 12, 2002). Hawke’s Bay is described as “very bicultural”, with most people identifying as European (82.4 per cent, close to the national average) or Maori (23.2 per cent compared to 15.1 per cent nationally) (Statistics New Zealand, 1999, p. 17). In this context ‘European’ denotes people of European origin, the largest single population group in New Zealand (National Health Committee, 1998). It was only after 1840 and the signing of the Treaty of Waitangi that a national Maori identity emerged: before European contact the word ‘maori’ simply meant ‘normal’. Recently Maori have experienced a resurgence of tribal culture and identity, encouraged during the last two decades

by government policies of iwi (tribal) management and by systematic attempts since the 1991 census to record tribal affiliations (Durie, 1998). Though increasingly urbanised, Maori in Hawke's Bay are mainly affiliated with two iwi, 30.8 per cent with Ngati Kahungunu and 8.9 per cent with Ngati Porou. At the 2001 Census Ngati Kahungunu was ranked eighth largest with around twenty-five thousand and Ngati Porou second largest with 61,701 out of seventeen iwi with over 10,000 members (Statistics New Zealand, 2002).

Only 21.6 per cent of people in Hawke's Bay said they had no religion in the 1996 Census, compared with 26.1 per cent nationally, with 23 per cent saying they were Anglican (compared with 18.4 per cent nationally). People in Hawke's Bay were less qualified than the national average at the time of the 1996 Census, with 44.7 per cent of people aged fifteen and over having no academic qualification, compared to 38.1 per cent nationally. Only 5.5 per cent of adults had a university degree, compared to 9.5 per cent nationally (Statistics New Zealand, 1999). The labour market for Hawke's Bay reflects the national pattern, though almost twice the national proportion of people work in the agriculture, forestry and fishing industries, and a slightly larger proportion of people work in manufacturing (Statistics New Zealand, 1999).

The proportion of private dwellings owned is similar to the national average (70.3 per cent), with a slightly larger proportion mortgage-free in Hawke's Bay (49.2 per cent compared with 46.9 per cent nationally). People in Hawke's Bay have on average a lower life expectancy than the national life expectancy, reflecting the high proportion of Maori in the region. The Hawke's Bay region presents a more socio-economically deprived picture than New Zealand in general, with 27 per cent of people living in the most deprived areas, compared with the New Zealand average of 20 per cent. While the New Zealand profile is characterised by 10 per cent of the population falling into each decile, Hawke's Bay has a range of 6 per cent in the least deprived decile to 15 per cent in the most deprived decile. Both personal and household incomes are lower than the national median, the latter by more than \$5,000 (Statistics New Zealand, 1999). While 29 per cent of New Zealanders hold a Community Services Card (proving eligibility for subsidised health services) the Hawke's Bay proportion is 33 per cent (Hawke's Bay District Health Board, 2001).

The authors of a study of relative deprivation (Crampton, Salmond, Kirkpatrick, Scarborough and Skelly, 2000) found the least deprived people living on the

northern facing slopes of Havelock North, while Hastings and Flaxmere on the fertile plain have much higher deprivation scores. They also found a very strong racial division in the distribution of resources, with Maori and Pacific Islanders disproportionately represented in the more deprived areas. Hastings District has the third largest ratio of reported offences of New Zealand's seventy-four Territorial Local Authorities (fifteen cities and fifty-nine districts defined (Te Puni Kokiri, 2001) according to "communities of interest"); more than the national average of offences per one thousand people for all types of offences; and twice the ratio of dishonesty offences of both Hawke's Bay and New Zealand (Statistics New Zealand, 1999).

Hawke's Bay has a slowly increasing population, with proportionately more elderly people than New Zealand as a whole, particularly in the non-Maori group (Hawke's Bay District Health Board, 2001). People aged 65 and older accounted for 50 percent of Hawke's Bay hospital discharges between July 2000 and July 2001. Thirty-two percent of discharges were people aged 75 or older. The Hawke's Bay District Health Board's service to older people is particularly poorly resourced in terms of beds in the Assessment Treatment and Rehabilitation Unit (1.8 per 1000), and personnel (no gerontology nurse specialists and fewer specialist doctors than recommended). Similarly, a poorly resourced mental health service for elderly people means a shortage of assessment beds and a three to four week waiting list (ibid). A sample of local newspaper articles and letters to the editor over the twelve months to March 2002 indicates that older people are increasingly worried about underfunding of the health system which is narrowing down their options, or removing them altogether, especially in the areas of elective surgery and home support services.

The History

A more detailed history of the region is provided in Appendix 1, but a summary is included here to provide background information for the reader. The local Ngati Kahungunu people arrived in the area and settled the land many centuries before Captain Cook arrived in 1769 and named it Hawke's Bay after the First Lord of the Admiralty. European settlement began around the middle of the eighteenth century with the towns established to serve the pastoralists who quickly established themselves as a land owning elite. Early in the twentieth century the large estates were broken up and the area followed national and international trends of depression and plenty. However, when the economy was deregulated from 1984, the effect on Hawke's Bay was particularly severe because of its longstanding reliance on the agricultural sector. The removal of agricultural subsidies and the

subsequent closure of local meat processing plants cost the region thousands of jobs and devastated the local economy, with short and long term effects on the whole community.

Research Methodology

The research methodology was designed to link structural analysis with the narratives of some older people in my area about their own ageing and old age. By offering groups of older people in local communities an opportunity to tell some of their stories about their own lives and particularly their own experiences of old age, I hoped to do two things. One was to generate first-hand information about contemporary experiences of ageing in provincial New Zealand communities. The other was to make space for these particular older people to express their own ideas about ageing and citizenship. By linking the concept of narrative, the story-telling of the research respondents, with identity, their self-identification as older people, I hoped to be able to generate “a historically constituted approach to theories of social action, agency and identity” (Somers, 1994, p. 613). By using the framework of citizenship to involve both human agency and structural constraints, and the relationship between them (Lister, 1997), and a narrative identity approach which “embeds the actor within relationships and stories that shift over time and space” (Somers, 1994, p. 621), my goal was to attend to the stories of older people as social actors and as citizens.

The people who were selected and who selected themselves for inclusion in this study were widely spread in terms of chronological age, but most belonged to what Laslett (1989, p. 4) has described as a “Third Age” characterised by “personal achievement and fulfilment”. Laslett’s aim in defining and describing this active, healthy and useful third stage of life after retirement and before a separate and final fourth era of “dependence, decrepitude and death” (ibid) was to shake it free of the inappropriate and damaging images that cling so tenaciously to the whole idea of ageing and old age. Laslett’s argument was that the effect of failing to distinguish between the third and fourth stages of life was to allow these damaging images to attach to the senior members of all societies in the past and the present, resulting in exclusion and loss of status for them, generalised fear and anxiety about ageing, and a waste of potential in individual lives and to society.

There are some problems with this distinction between a third life stage of independence and fulfilment and a fourth of decline and death, not the least of which is the danger to which Laslett himself alludes, that the fourth age may

become the scapegoat upon which are heaped all the ageist assumptions formerly attached to all older people. A particular problem is the vexed question of dependence and independence, an issue which was highlighted by the varying situations of the research respondents, who ranged along a continuum from living in a rest home with continuous care, to living in their own home, most often alone or with a spouse, or more rarely, with family.

Populations not represented amongst the respondents were those where mental and/or physical frailty precluded participation in the group discussions, people isolated in their own homes for whatever reason, and older people who were either very wealthy or very poor. This reflects in part the limitations of the social networks I was able to access, and in particular the social isolation of older people who lack the requisite resources in terms of health and transport for example, to take part in a research project such as this. It also reflects the choices available to wealthy older people to exit mainstream communities in favour of retirement communities on the Gold Coast of Australia or resort-style accommodation in New Zealand. In the group composed of Maori kuia (older women), the participants identified strongly as Maori, enjoyed high levels of involvement with whanau (family), hapu (sub-tribe) and iwi (tribal) activities, and appeared to enjoy relatively good health and a reasonable standard of living. They did not represent Maori at risk of poverty or social exclusion. Nor did they represent people of Maori descent but not ethnicity. Descent is a concept related to genealogy, while ethnicity relates to cultural identification (Statistics New Zealand, 2002). In the 2001 census, one in seven people were of Maori ethnicity, an increase of 21 per cent since 1991, and one in six were of Maori descent. However, concerns have been expressed (Cunningham, 2000; Blakely, Robson and Woodward, 2002) that changes to the Census ethnicity question and inaccurate ethnicity data in health records make it generally difficult to interpret trends for Maori.

In the groups composed almost entirely of Pakeha (New Zealanders of British or European descent), income was generally not discussed in a personal way. Data released by Statistics New Zealand (Hawke's Bay Today, March 21, 2002) has shown that many people in New Zealand prefer not to discuss their income, and Fleming (1997) has highlighted this as a sensitive topic for Pakeha people in particular. Accordingly I relied upon a combination of Census data about the places where the research participants lived, linked with biographical details about their educational and occupational status to give some indication of socio-economic status.

My focus in the research was on creating opportunities for older people to speak for themselves and to act with autonomy, as citizens. The stories they told about their earlier lives provided insight into their present circumstances and views on ageing, as individuals and as groups. It is the latter, current experiences of ageing and old age, informed by the former, memories and historically situated stories, that form the basis for data analysis in this study.

Structure of the Thesis

Chapter Two sets out to provide an overview of the main threads in the literature on ageing and old age, including psychological theories of disengagement and functionalist ideas about role loss; structural analyses which tend to portray old people as homogeneous, and as powerless victims of the political and economic forces which determine their fate; feminist analyses which reveal the extent to which ageing, like citizenship, has been considered in universalist, as opposed to gendered, terms; postmodern writing which has thrown light on the discourses which have medicalised, or de-medicalised, old age. Ideas about memory, reminiscence and oral history, as well as feminist and disability theories of the body all add to an understanding of the variety of ways in which old age is experienced. Increasing attention has been paid to the economic, political and social effects of an ageing population in many western societies, so that there is a plethora of research debating the costs of health care for older people, the costs of maintaining the economic support for older people that has been mandated by our society for over a hundred years, and the benefits of “positive” or “successful” ageing.

Chapter Three traces the development of the notion of citizenship from its beginnings in the ancient world through its erratic and sometimes cyclical progression to contemporary theories which take it forward into the twenty-first century. This chapter investigates the potential for developing a theory of senior citizenship using theories which emphasise the relational networks in which citizens enact their citizenship, individually and as members of a group.

Chapter Four goes on to examine the public and private spaces of civil society where opportunities exist for older people to exercise their citizenship as autonomous agents. These spaces include the political arena, mediated by the structure and function of national and local government and for Maori, by iwi (tribal) affiliation and marae protocol, and by the opportunities that exist to interpolate the views and interests of older people. Such spaces also include

arenas of society where formal and informal networks, groups, agencies, families and whanau all operate in public and private spaces to offer older citizens greater or lesser opportunities to participate, depending on where they are placed, literally and metaphorically, in relation to the rest of society, and the extent to which they are included or excluded from these spaces.

Chapter Five discusses social policy as it relates to older people. It sets out to contextualise policy directions over the last one hundred years in New Zealand, focusing particularly on income support, health and housing, including their cultural impact. This chapter examines how various policies have contributed to the current environment where a growing population of older people are portrayed as a burden on working age people and families struggling to make ends meet in a mixed economy of welfare and an environment where socio-economic inequalities between different groups in the community are widening. A major policy debate concerns the consequences for higher proportions of older people of restricted access to public health care and of policies which promote independence or dependence on families, now and into the future. This debate has long-term implications for the social contract between generations as well as for the health, education, housing and general wellbeing of old people in the future.

Chapter Six outlines the research design and the methodology used to answer the research question, which asks: to what extent are older people in New Zealand treated as senior citizens? In order to answer this question it is necessary to define senior citizenship and find a way of measuring it. This means determining the relational practices and the networks and affiliations of civil society through which older people may perform their citizenship, and the extent to which older people have access to these networks. It means finding out what old age means to older people, and how old people talk about old age when they get together. This chapter includes the theoretical bases of the research design and a description of the research process and the extent to which it achieved the goal of answering the research questions. It also outlines the key organising themes for each group's data.

Chapters Seven, Eight, Nine, Ten, Eleven and Twelve present the research findings of the study, the qualitative data produced by reflections of members of the respective groups on their own life-long experiences of ageing and current experiences of old age. These chapters are organised so that in each case a

section which attempts to identify what makes each group unique is followed by a section in which data are grouped under headings of key social outcome domains identified by a government report which aims to assess “the social state of the nation” (Ministry of Social Policy, 2001b, p. 3).

Chapter Thirteen links the findings with the literature on citizenship and on ageing in order to understand how current theories of citizenship relate to the everyday experiences of older people in New Zealand, and to what extent they are able to appropriate the rights and obligations of a substantive rather than a merely formal citizenship. Chapter Fourteen concludes the thesis, illustrating the central finding with a conceptual model of senior citizenship. This model is a conceptual representation of the central research finding that the extent to which older people in New Zealand are able to exercise their citizenship rights is dependent on the extent to which they are able to achieve a balance between personal autonomy and social connectedness. This balance depends in turn upon their experiences over the life span in various social domains, including income, health and housing, as well as on the extent of their social connectedness and their individual capacity for carrying out the later life tasks of ‘generativity’ and ‘keeper of the meaning’ or passing on the culture. This thesis concludes that there are many possible models of senior citizenship, depending on the way these various factors, including culture, interconnect with each other, and that some of these models allow for higher levels of participation and wellbeing than others. Finally, some policy implications and recommendations for further research are offered.

An appendix which introduces the six research groups in their local setting has been included in order to contextualise the data for the reader. This chapter discusses the concept of location and the implications of choosing six groups, all located in Hawke’s Bay but not all defined by their particular location, at least not to the same extent. This chapter gives a brief outline of the historical context of each group, some located in specific places with a history and meanings of their own, some representing aggregations of people drawn together by a complex intersection of economic, social, historical, political and medical imperatives as well as by attraction or allegiance to a particular place.

Chapter Two:

Age and Ageing

Old age exposes the failure of our entire civilization (de Beauvoir, 1977, p. 603).

Introduction

This chapter will provide an overview of historical and contemporary approaches to age and ageing. The book which is the source of the extract which begins this chapter was written in an effort “to break the conspiracy of silence” (de Beauvoir, 1977, p. 8) about old age and force people to notice the deeply ambivalent attitudes towards old age and old people that prevail in society. “Nothing should be more expected than old age: nothing is more unforeseen” (ibid, p. 10), wrote de Beauvoir. Powerful stereotypes surround the image of old age and engender fear in the most intrepid amongst us, especially women. A prominent feminist writer admitted “a growing personal dread, because in my fifties I didn’t even want to think about age” (Friedan, 1994). Ageing women, who make up the majority of the elderly population, face the combined effects of ageism and sexism, a disempowering and potentially devastating intersection. Feminists themselves have been charged with failing to confront the ageism in society or within feminist perspectives (Rosenthal, 1990, Macdonald and Rich, 1991). Greer (1992, p. 5) has argued that ageing is unpredictable, “the most idiosyncratic of all human processes”, yet there is a large and growing body of literature which seeks to understand the process of ageing from various perspectives, and to make sense of old age and what it means to be old.

Over twenty-five years ago Koopman-Boyden (1975, p. 6) argued that little was known about the lives of the growing number of retired people in New Zealand:

Their very existence threatens the basic work ethic of our society, in so far as their life often revolves around involvement in the family and what the rest of society calls ‘leisure-time pursuits’. Traditionally our society has been concerned as to whether or not we should support people who indulge in such activities, and if so, by how little.

Since then a substantial body of research on ageing has been carried out in New Zealand communities, as Gee and Davey (2002) show in the latest of four bibliographies. Some of the specific gaps Koopman-Boyden identified have been addressed by recent research such as McPherson’s (2000) study of what forms of support families can and do provide for their elderly relatives. Much recent

research emphasises the health and wellbeing of older people, and their diversity. The government's "positive ageing strategy" (Dalziel, 2001) sets out an official commitment to valuing older people, and improving attitudes towards them. While as a society we still seem preoccupied by the costs of supporting superannuitants, negative views of ageing as inevitable decline are being challenged by a positive emphasis on the developmental capacity of older adults (Koopman-Boyden, 1993). This thesis represents an attempt to understand the meaning of old age and "the possibly unique ways of understanding that may emerge in later adulthood" (ibid, p. 26). This chapter will provide an overview of twentieth century theories of ageing and of recent gerontological writing which ranges over a variety of academic disciplines in ongoing attempts to understand the phenomenon of ageing. It will focus in particular on that period of later life known as the Third Age (Laslett, 1989), to be distinguished from a Fourth Age in which "institutionalisation is typically associated with physical and mental decline and occupies a relatively brief time span prior to death" (McCallum, 1986, p. 130).

A Historical Perspective

The first historians of old age, stimulated by the demographic changes in the contemporary world, only began to write in the latter part of the twentieth century (Troyansky, 1997). Like respect for old age, which is culturally constructed rather than natural (ibid), old age is itself a culturally constructed concept which varies over time and between different cultures (Hareven, 1995; Koopman-Boyden, 1993). Bytheway (1997) argues that the concept of old age owes its very existence to the urge to divide the human life course into stages. Indeed medieval representations of the life course as a series of steps representing forty or fifty years of ascent and forty or fifty years of decline provided powerful stereotypes which, although they may have borne little relation to real life, reinforced social and sexual norms across different societies (Troyansky, 1997). Troyansky's review of the literature suggests that the ambiguity in the expression of attitudes of both respect and disdain towards old age and older people (see also de Beauvoir, 1970; Hazan, 1994; Bytheway, 1997) already existed in the ancient world.

In the social, as opposed to the cultural, history of ageing in England, three major themes of participation, well-being and status, all related to issues of labour, property and household authority, have been shown to be pivotal, with functional capacity and control of property almost always essential to the maintenance of seniority (Troyansky, 1997). Ng (1994) suggests that since the mid nineteenth century the institutions of society in the form of schools, the labour force and

retirement have ordered people's lives according to their age and life stage, with the result that they associate with and value contemporaries in their own age cohort above those in other age groups. Increased longevity is seen as contributing to a loss of status in an ageing society in which older people are less of a "precious rarity" (ibid, p. 12) than in the past, and indeed are viewed by some as competing unfairly with younger people for fewer jobs, or staying in jobs at the expense of younger generations. Interest in the meaning of ageing in the early twentieth century was related to industrialisation and questions about work efficiency and the limitations placed on an individual's capacity for work by old age (Hareven, 1995). In the late 19th century, Hareven argues, attitudes in American society changed from acceptance of ageing as a natural process and old age as a matter of survival of the fittest to an identification of old age with mental and physical decline.

Recent social history has focused on relations with the labour market and the emergence of modern retirement, most often described as a way of managing old age in a world dominated by work, with debate over whether older workers are marginalised as victims of ageism and societal change or whether they are agents of change themselves, active in learning to anticipate and enjoy a period of leisure after retirement (Troyansky, 1997). Current trends towards raising the retirement age look set to continue, with a recent American study cited as finding that 80 per cent of baby boomers expect to stay in the work force "well into their retirement years" either out of economic necessity or "because they need the connection and the identity a job brings", or both (Sunday Star Times Employment, April 7, 2002).

Laslett (1989) used a demographic framework to introduce the idea of a completely new stage in the life-course, a third age of health and leisure before a fourth age of frailty and inevitable decline. While small numbers of older people have enjoyed such a period of productiveness and creativity in the past, Laslett's emphasis on the ageing of populations, combined with a period after 1950 of economic growth, greater opportunities for education and leisure, and the intervention of the welfare state help to explain the democratisation of the experience and Laslett's optimistic view of the opportunities available to older people in the third age, the people on whom this study will mostly focus.

Definitions of Old Age

Definitions of old age are not constant, but culturally determined, and even within

the same culture there are different and competing ways of defining when old age begins. If chronological age is considered, for example, organisations such as Grey Power and Age Concern focus on people over fifty, or the age at which a person is defined as old according to the Census and for eligibility for New Zealand Superannuation is sixty-five, whereas the Land Transport Safety Authority in New Zealand defines a driver as “older” at the age of eighty (LTSA, 2002, p. 13). Other kinds of markers used to define social ageing vary widely between cultures and communities. Research carried out amongst urban women in the Wellington region (Armstrong, 2002) found that Maori women linked old age with relationships: they were more likely to invoke being a grandmother as part of the definition of old age than Pakeha women were, and more likely to associate social status and seniority with being a grandmother. The Pakeha women, by contrast, were more likely to link their grandmother role with social networks, and with a flow of support and information from grandchild to grandparent, than with definitions of old age.

An example of the difficulties associated with the use of official definitions of old age, in the New Zealand context, is the difference between Maori and Pakeha life expectancy. Archeological evidence has shown that early Maori could expect to reach chronological old age and the social status of kaumatua by about thirty years (Koopman-Boyden, 1993). Writing in 1993, when the life expectancy at birth was 67 for Maori males and 71 for Maori females, Koopman-Boyden argued that Maori were defined by society as old by the age of 60, the age of eligibility for government superannuation. The age of eligibility for New Zealand Superannuation is now 65 years and the difficulty of defining old age is further complicated by the fact that life expectancy at birth is eight years older for non-Maori males and nine years older for non-Maori females than for their Maori counterparts. While the age of eligibility for government superannuation is the same for all New Zealanders, their expectation of living long enough to receive it, and the length of time they can expect to spend enjoying it, are very different. In modern societies old age is increasingly determined by the state as the age of retirement, or if, as in New Zealand, compulsory retirement is illegal, the age of eligibility for government superannuation. In any case the two are closely linked by social norms and economic necessity, if not by legislation.

In traditional societies old age was based on social factors like wisdom and maturity and linked to socially valued roles such as eldership or grandparenthood. In modern societies, however, it is increasingly defined in terms of chronological

age (Koopman, Boyden, 1993, p. 3). Tinker (1992, p. 6) notes the trend towards distinguishing between “the young and the old elderly”, placing the division between them at 75 or 80. More recent data (Ministry of Social Development, 2001) makes a further, even more rigidly chronological distinction, dividing the category “older people” into those between 65 and 74, the youngest old; those between 75 and 84, the old; and those over 85, the very old. Laslett (1989) has influenced definitions of old age by dividing the life course into four stages characterised respectively by activities of education, work, personal fulfilment and a final short stage of dependence before death. Laslett concentrated his attention on the third age of personal fulfilment, strongly allied in his analysis with life-enhancing opportunities for further education, and especially with the Universities of the Third Age, which began in France during the 1970s. A point made with increasing insistence by writers on old age is that old people are a heterogeneous group (Myerhoff, 1992; Latimer, 1997), more different in many ways from each other than they are from people of other generations. The importance of this observation is particularly relevant, Tinker argues (1992, p. 6), to professionals, especially health care professionals, whose training and experience is concerned primarily with “the abnormal”, and hence with the group of older people often labelled dependent.

Dependence and Independence in Old Age

Independence is conceptualised as a three-dimensional model in Keeling’s (1998a) anthropological study of ageing in a New Zealand community. Identifying personal, social and material dimensions of independence in old age, Keeling shows how being independent is constructed as “good news” (ibid, p. 1) but often equates to being invisible and marginalised. On the other hand, diminishing or compromised independence equates to the “bad news” of becoming visible and deserving of research or service from health professionals, service providers and policy makers.

Similarly Wilkin (1990) has deconstructed the notion of dependency, constructing a framework which may be used to measure different dimensions of dependency according to various categories of need. Dependency should be seen, Wilkin argues, as something which everybody experiences throughout their lives. Where it occurs as part of a “reciprocal role relationship” (ibid, p. 24) it is perceived as interdependence. Using exchange theory, Wilkin defines dependency not as an individual attribute, but as a social relationship in a situation where an individual has nothing of value to exchange. Wilkin points out, however, that according to

the complex rules of reciprocity, what counts as acceptable in this context may vary from one individual and one culture to another, as well as over time. For example, caring for children does not guarantee complete care for parents in old age. Building on Wilkins' analysis, Johnson (1993) views interdependency as an integral component of citizenship. Thus people constructed as dependent in modern societies are considered incapable of carrying out the actions expected of full citizens and therefore deemed "incompetent to live an independent and unsupervised life" (ibid, p. 259). Johnson rejects the notion of old age as deviance, but uses labelling theory to draw attention to the negative stereotyping which the visible signs of ageing attract. If dependency is to mean anything useful, Johnson argues, it must be considered within the context of individualised assessments and responses, and separated from the notion of individual pathology.

In a New Zealand context the dominant Pakeha model of diminishing independence with age (Keeling, 1998a) is strongly contrasted with a Maori model, at least for older people with a secure cultural identity, of greater independence in old age, close contact with whanau, and responsibilities and obligations characterised by reciprocity (Te Puni Kokiri, 1997). If, as Johnson (1993) has argued, interdependency is a critical component of citizenship, these findings have important implications for the citizenship status attaching to Pakeha and Maori models of ageing respectively. Notions of dependence and independence are integral to this thesis because the way people are able to manage their independence in later life effectively determines the measure of their social worth in contemporary New Zealand society (Keeling, 1998a), and hence their place in society and their sense of themselves as citizens. It is also likely to determine the point at which some older people, no longer able to secure the support they depend on to remain independent, may slip from a third age of perceived independence to a fourth age of perceived dependence. Contemporary approaches to the study of old age from a variety of perspectives are increasingly drawn together under the generic title of gerontology, the subject of discussion in the following section.

Gerontology

Gerontology, with its origins in scientific study and its early, and continuing preference for "positivist logic and quantifiable measurements" (Achenbaum, 1997, p. 16) has in the past been seen as "a narrow discipline obsessed with enumerating the consequences for society of population ageing and with a research perspective which is dominated by the empiricist biomedical approach" (Jamieson, Harper

and Victor, 1997, p. 1). Not only is gerontology a relatively young field of study, but, Achenbaum asserts, “it lacks a firm theoretical foundation and unique methodologies” (1997, p. 16). Recently however, the narrow scientific understanding of gerontology has broadened across traditional disciplinary boundaries to include a more self-reflexive “critical gerontology” (ibid), to which feminist theory has made a major contribution.

Feminist theories of the body, for example, have contributed to Harper’s (1997) critique of the medicalisation and control of the ageing body. As medical knowledge isolates specific diseases in the body, she argues, “so they construct new norms of healthy and successful ageing” (ibid, p. 167). Only recognition of mental and physical decline as a normal and acceptable part of being human, Harper argues, will resolve the tension between “the body as constructed and the body as experienced, the body as an inscribed exterior and the body as a lived interior” (ibid, p. 161). Feminist theories of control and the body, she suggests, may help to form a new concept of later life, in which the frailty of extreme old age is able to be fully integrated into mainstream social experience. It is difficult to see, however, considering the powerful economic and political interests working against the dissolution of old age as a category, how Harper’s concept of a fully integrated later life could be realised in practice. Laws (1997, p. 96), for example, sees the construction of a group of active, affluent, senior people as a product of business interests which, recognising a market niche, have worked hard to create environments that represent a particular retirement culture, a “landscape to be consumed”. Designer retirement communities send out powerful messages, she argues, about investing wisely while working in order to retire ‘successfully’. A focus on consumerism, a powerful force in western societies throughout the life span, highlights the diversity of old age and the continuity of cultural differences. Amongst Maori, for whom consumerism may be a less important issue (Taiapa, 1994), social participation levels tend to be higher (Ministry of Social Policy, 2001b). Any notion of citizenship based on consumerism serves also to highlight the potential exclusion of those who lack the means to consume, “those whose ‘consumption’ is guided more by necessity than desire” (Jamieson and Victor, 1997, p. 182). A consumer-based concept of citizenship limits the opportunities for a politics of old age, Higgs (1997) argues, because active seniors in the third age are increasingly separating themselves from the fourth age, in the process denying “old age”. Positive ageing offers a message for third, but not fourth, agers, a message, Featherstone and Wernick (1995, p. 10) argue, “of denial, keep smiling and carry on consuming”. Laslett (1989), in arguing for the

emergence of a healthy, independent and productive third age, was conscious of the danger that “the Fourth Age of true dependency and decrepitude ... may become the scapegoat of the argument” (ibid, p. vii):

Because, for example, the symptoms of the arrival of the Fourth Age are those which have been attached to all older people to their singular detriment, the impression may be given that all those in the Fourth Age are properly and justifiably described in these contemptuous terms.

The manner in which Laslett proposes those in the third age prepare for the transition to the fourth age, by recognising when they have begun to be “an encumbrance” and ought to withdraw (ibid, p. 153) does indeed suggest a scapegoating of those in the fourth age.

Interdisciplinary studies of ageing in the tradition of critical theory and postmodern perspectives which highlight the importance of language and discourse in the construction of old people as a category, as well as political, social and feminist perspectives have all contributed to a greater understanding of various aspects of ageing and the experience of being old. In the process, as Jamieson and Victor (1997) point out, a great deal of the literature has become engaged in the deconstruction and critical analysis of existing discourses or images of ageing and older people. In this way social gerontology as a discipline has developed within but also beyond the bounds of sociology, and can be seen as a field of enquiry which is committed to exposing ageism within scientific discourse and professional practice, as well as offering a critique of theoretical rationalisations of ageism within current social practice (Gibb, 1990, p. 28). An understanding of the frequently unremarked yet pervasive presence of ageism and its effects is critical to an understanding of what it means to be old in modern societies, and these effects will be discussed in the following section.

Ageism

Bytheway (1995) argues that the conceptual frameworks and language of some gerontological writing are compatible with, and have had the effect of reinforcing rather than challenging, ageism. Hazan (1994) too, in the tradition of work by Illich (1977) and McKnight (1977), argues that knowledge about ageing has been used to develop networks of services which depend on, and in turn justify this differentiation between ‘us’ and ‘them’ and the dependency of ‘them’ on ‘us’ as the professionals. As Hazan, (1994, p. 2) argues:

The world of the aged is supposedly rendered intelligible by means of widely available information, and through the professional interpretive expertise of welfare workers, doctors, nurses, psychologists, and social policy makers this information is transformed into know-how - the measures designed to handle the problems ascribed to the aged and used to plan old-age homes, day centres, welfare facilities and financial benefits on their behalf.

Hazan argues that the tendency to reduce old people to a collection of needs can lead, especially among service providers, to the assumption that a catalogue of their needs will provide access to and understanding of the experience of being old, which in turn may lead to the suggestion of strategies for 'successful ageing'. This concept, like 'positive ageing' is popular in the literature on the aged, especially in government policy documents (e.g. Dalziel, 2001) and implies "not only the establishment of particular social services and the allocation of resources, but also the patronising instruction of aged persons for better and fuller lives" (Hazan, 1994, p. 15). Indeed much of the research on ageing, Hazan argues, can be traced to particular economic and political interests. The way research on ageing has been used to legitimise or delegitimise the need for care (Latimer, 1997; Jamieson and Victor, 1997) can be observed in current efforts in New Zealand, as elsewhere, to limit government spending on health through assessment procedures which give professional healthcare workers the power to define an old person's needs according to the services that are available. Such procedures represent, sadly, a realisation of Illich's (1977, p. 35) prediction that:

Entire populations socialized to need what they are told they need will now be told what they do *not* need.

The term 'ageism' was introduced in the late 1960s by a middle-aged American psychiatrist named Butler to describe prejudice against older people in a community housing setting (Bytheway, 1995). Butler later defined ageism as "a process of systematic stereotyping of and discrimination against people because they are old" (cited in Ng, 1994, p. 2). He argued that ageism was a subtle process which allowed younger people to come to see older people as different from themselves and therefore not quite human (Bytheway, 1995). French writer Simone de Beauvoir (1977), on the other hand, wrote from the perspective of an influential intellectual approaching her own old age. It is arguable that artists and intellectuals, like politicians, belong to a class of people whose power and authority is often enhanced rather than diminished with age (Laslett 1989; Hazan, 1994). Nevertheless de Beauvoir identified the forces of capitalism as the means by which old people were excluded from the means of production and perceived as a burden on the working population. Society, she said (ibid, p. 8), was "not only

guilty but downright criminal” in treating old people as outcasts: in France, where the proportion of old people was at that time the highest in the world, they were condemned to “poverty, decrepitude, wretchedness and despair” (ibid). Old people, she said, had available to them only two possible identities, the venerable sage or the old fool, and either way “by their virtue or their degradation they stand outside humanity” (ibid, p. 10). Her observation (ibid, p. 13) that the “human working stock is of interest only in so far as it is profitable” is echoed by remarks attributed to a middle-aged Australian male almost thirty years later:

Our culture is geared so completely to productivity that anyone who cannot contribute in this way is not regarded well. We don't see the value in the old - be it people or recycling of resources. More and more, old people are seen as a drain on society (cited in Barnett, 1999, pp 18 - 19).

The deep ambivalence with which old age and old people are often regarded (Laslett, 1989; Bytheway, 1997; Latimer, 1997; Ng, 1994) can be traced in part to a deep personal fear of growing old. Hazan (1994, p. 18) argues that:

our attitude to the aged is laden with guilt. Reinforced by the existential fear of ageing and its association with death, an apologetic, didactic and value-oriented ideology penetrates our consciousness and influences our behaviour.

This attitude, termed “new ageism” as a response to definitions of ageism, is reinforced by images of impairment and decline (Bytheway, 1995) and by a society which “medicalises the elderly by constructing an ageing role that emphasises disengagement and pathology” (Ng, 1994, p. 13). At the same time, Hazan argues, economic interests such as competition in the labour market, and considerations of power, such as pressure to control family assets, effectively construct older people as a threat, against which assets seen as rightfully belonging to younger generations must be defended. Consistent with de Beauvoir's argument that older people as a group have no economic strength and therefore no way of enforcing their rights, Hazan's argument is that on the level of social policy, service planning and resource allocation, old people are viewed as dependent on the will of others. This framework of dependency within which older people are often confined is legitimated by their exclusion from the labour market and the fact that the ‘capital’ of human resources accumulated over a lifetime of human experience has no direct equivalent in the economic marketplace. In turn their ‘dependency’ is used to justify the notion that old people are a problem, an idea which rests on the representation of old people as “an amorphous body distinct from and alien to society” (Hazan, 1994, p. 18). Hazan argues (ibid) that this social separation operates not only horizontally, but

temporally, so that:

paradoxically, whereas the aged are seen as having long, rich, personal and social histories, we relate to them as discrete beings detached from their previous lives and from the social frameworks of the non-aged.

Key domains in which Hazan sees this social segregation operating are the economic, in which elderly people are assumed to be non-productive and economically dependent, and health services, where older people receive intensive attention and care from special segregated geriatric services, in which ageing itself is seen as a disease. Indeed the whole ageing enterprise, and the discipline of gerontology in particular, are seen to have contributed, by their focus on inevitable decline, to the construction of ageing as a social problem (Bytheway, 1995). The dominance of this view of ageing as an expensive disease is evident for example in the selection of keynote speakers at the 2002 New Zealand Association of Gerontology conference: a professor of gerontic nursing and two geriatricians who are experts on falls. Emphasis has also been placed, during the 1990s, on the economic and cultural marginalisation and social exclusion to which many older people are relegated by late modern society. Such arguments as those which stress the physical dependence of older people, and others which focus on generational equity and the projected battle for resources between the old and the young (Thomson 1991), have the potential to foster “an environment of cultural and economic ambivalence towards older people” (Biggs, Phillipson and Kingston, 1995, p. 118).

Such an environment, in which older people are seen as marginal, their resources are insecure and the language encourages generational division, has the potential to allow and to sustain the abuse and neglect of older people. Biggs et al (ibid) suggest three directions which might contribute to the development of an alternative sustaining vision for old age. The first is a greater recognition of the experiences and understandings of older people, in a way which honours their life stories and has the effect of restoring them to the centre rather than leaving them at the margins of community life. The recognition of older people as citizens whose civil rights are honoured by the society not only in policy, but in practice as well, is fundamental to this approach. Closely related, the second direction concerns the relationships between generations and requires the acknowledgement of ageing as a community issue in which responsibility for both problems and solutions is to be shared amongst the generations. Metaphors and language which emphasise the burden of old age need to be replaced by an alternative language of interdependency, and a recognition of a shared

accountability for the prevention of abuse and neglect. The third theme involves the development of perspectives which acknowledge the physiological changes of old age, and at the same time challenge ageist assumptions about the inevitability of dependence arising from disability and frailty. The following section will discuss contemporary perspectives which have been developed across a range of disciplines.

Contemporary Theories of Ageing

Writers from different disciplines have attempted to understand the experience of ageing from a range of different perspectives. For the purpose of this discussion theories of ageing are categorised under the headings of biological, psychological and sociological perspectives of ageing.

Biological Perspectives

The functional changes that occur with age are partly due to intrinsic processes and partly to external factors. Biological approaches to ageing are concerned with the causes and the nature of ageing, and with trying to understand how the resulting changes are caused, and how the effects of ageing can be influenced. In biological terms ageing has been widely understood since the 1960s to be universal, progressive, intrinsic and degenerative (Bond, Coleman and Peace, 1993). However according to Campbell (1993) more sophisticated research design and greater emphasis on longitudinal studies have since shown that deterioration of function associated with age is not necessarily intrinsic or universal. In other words, the changes are due to other contributing factors such as external environmental factors, underlying disease, variations between cohorts, or lifestyle changes. These findings have important implications, as Campbell argues, for disease prevention and health promotion strategies for older people. Changes in physiological function also affect the ways in which older people react to illness; for example, they may not have the physiological reserves to cope with delays or inaccuracies in diagnosis and treatment.

While ageing is universal, disease is not. However, some diseases are linked with old age because they become more prevalent as people age. Stroke, the complications of osteoporosis, hearing and vision loss, and dementia are all associated with old age and with special services for old people. Senile dementia of the type known as Alzheimer's disease has been described in New Zealand as the single most important disease facing older people's health services (Campbell, 1993), and in Britain, as the principal cause of admission for long-term residential

care (Bond et al (Eds), 1993). The prevalence in New Zealand is reported to be between 7 and 8 per cent of people aged 65 years and over, increasing exponentially with age to over 20 per cent of people aged 80 years and over (Campbell, 1993). Projections suggest that the prevalence of dementia in New Zealand will have increased by almost 100 per cent between 1992 and 2016. The cause of Alzheimer's disease is not known and there is no cure, though intensive research efforts continue to focus on the search for one. Depression is also a common mental illness in old age, affecting between 10 and 15 per cent of people over the age of 65 at any one time. There are also difficulties in differentiating between depression and dementia, and between reactive (in response to life events) and endogenous (biologically based) types of depression (Briggs, 1993). The biological changes caused by environmental and lifestyle factors or disease effects, and associated with health and residential care services for older people are frequently the critical precipitating factors which cause people to move from a relatively robust Third Age to a Fourth Age of increasing frailty. In this thesis I will be mainly concerned with the Third Age, so that the health and welfare services which provide support to people in the fourth age will not be a primary focus. However, just as it is not always easy to distinguish between the biological and psychological bases of depression, the line between the Third Age and the Fourth is not always completely clear.

Psychological Perspectives

Psychological theories of ageing have been instrumental in introducing the notion of ageing as development rather than necessarily as decline. While biological perspectives have focused on the question of why we age, psychological theories have sought to understand not only why we age but how we adjust to the ageing process. Cognitive theories have focused on both these questions. Until recently it was believed that cognitive function necessarily declined in old age, but it is now known that cognitive skills to do with "perception, memory, intelligence, reasoning, judgement and decision-making" can improve in old age, a finding which has given rise to a view of adulthood as a time of continuing psychological potential (Koopman-Boyden, 1993, p 16).

Early ideas about the development of personality were put forward by Jung, who used the term 'individuation' to refer to the achievement of the 'second half of life' and Adler, who saw successful adult development as a way of compensating for feelings of inferiority through involvement with others (Bond, Briggs and Coleman, 1993). The most influential developmental model for the study of ageing was the

framework proposed by Erikson (1980), who defined the task of middle age as “generativity” (ibid, p. 103), manifested in interest in and concern for the next generation, while the task of old age was to attain “ego integrity” (ibid, p. 105), a feeling of acceptance, integration and coming to terms with oneself and one’s own past life. Erikson’s lasting contribution was his emphasis on the life history and environmental contexts of ageing. Building on Erikson’s model of human development (Vaillant, 1993; 2002) has added a task to the latter part of adult life, arguing that the work of conserving and preserving the meaning of the past belongs between generativity and integrity. This work has given rise to further important theorising on the relationships between generativity, integrity and psychological well-being in later life (McAdams and de St Aubin, 1992; Boyd and Luszcz, 2000). McAdams and de St Aubin (1992) conceive of generativity as an aspect of the development of adult identity through the telling and successive re-telling of a personal life story. This “provides life with unity, purpose and meaning” by “integrating one’s perceived past, present and anticipated future” (ibid, p. 1006) at the same time defining and explaining how the individual finds a place in the social world:

the construct of generativity links the person and the social world. It exists in a psychosocial space that subsumes person and environment (ibid, p. 1004).

Boyd and Luszcz (2000) found that generativity and integrity were both important to well-being in middle *and* old age, and that a sense of having been generative over the whole lifespan contributed to wellbeing in old age by fostering integrity. Vaillant (1993) equates the fourth stage, generativity, to community-building. Depending on the opportunities a particular society makes available, generativity means assuming responsibility for the growth and well-being of younger members of the society in the form of guiding, mentoring or coaching. The fifth stage, in which older people are expected to pass on their knowledge of the culture and their understanding of the meaning of the collective past, is an important refinement of Erikson’s life span approach to ageing, and is of particular importance in the present context of citizenship for older people. The concepts of generativity and conservation of the meaning of the past as tasks to be performed in a community context add a psychosocial perspective to a consideration of the rights and obligations that attach to the status and the performance of citizenship in later life. Kendig (1986) has also used a life span approach to investigate how experiences of older Australians are influenced by family ties and transitions between life stages such as children leaving home, retirement and becoming widowed. He found that older people were actively engaged in strong reciprocal family networks which had been established in mid-life or earlier, with no evidence

to suggest an increase in abandonment or isolation of older people.

Sociological Perspectives

Sociological perspectives which view society as an integrated whole, can be divided into structuralist, interactionist, ethnomethodological and critical theory approaches (Bond, Briggs and Coleman, 1993).

Structuralist Perspectives

As a broad approach, structuralism is predicated on the assumption that human attitudes and behaviour can be explained. During the 1960s structural functionalist theories grew out of medical discourses which viewed old age as a progressive and irreversible disease. Functionalist perspectives such as disengagement theory and role and activity theory, which encouraged a view of old age as a social problem, were challenged during the later 1960s and 1970s (Peace, 1990) as presenting an inadequate way of conceptualising the needs and desires of old people, tending to reduce them to a narrow conception of functional role, and insufficiently acknowledging the capacity of people of every age to continue to redefine themselves in relation to their social and physical space “contingent upon physiological, psychological and social determinants of their current life experience” (Gibb, 1990, p. 30). A recent report to the New Zealand Government on the living standards of older New Zealanders (Fergusson, Hong, Horwood, Jensen and Travers, 2001, p. 43) offers disengagement as a possible explanation for the unexpected tendency for the material well-being of older people to increase with age “so that as people grow older their wants and needs tend to reduce, making them less vulnerable to material hardship”. However, it seems more likely, as suggested by Kooopman-Boyden (1993) that disengagement theory may be applied only to a small number of usually very old people.

Another theory which, as Gibb (1990) has argued, is more likely to justify ageist practices than to provide helpful explanations is the idea that physical abandonment of older people in some primitive tribal societies can be used to explain the marginalisation of some older people in western societies. Even though these functionalist theories have been discredited as inadequate and potentially dangerous explanations of later life experiences (Coleman, 1993a), variations on the same themes continue to be powerfully perpetuated in current discourses, for example in media representations of old age as a burden, in the lack of policy direction, planning and funding of services for older people (National Health Committee, 2000) and in medical discourse and practice in which old people are not considered capable of making autonomous decisions, especially about where

they should live and what resources they need. Latimer's (1997) research shows, for example, how the need for access to psychosocial resources is subordinated to medical problems pertaining to physical issues of safety and illness prevention.

The theories of disengagement and activity were both defined as consensus perspectives (Bond et al, 1993) because of the way they emphasised the status quo, the former by maintaining the uninterrupted functioning of society, the latter by maintaining the activities or roles of middle age into old age. Conflict perspectives, by contrast, emphasise social change, as in the political economy theory, in which the focus is on structural dependency resulting from restricted access to social resources, especially income (ibid). Phillipson (1982) argued that the dependent social position of older people was directly attributable to the excluding or marginalising effects of policies concerning primarily pensions, the labour market and health. Walker (1996, p. 8) appeals to the political economy of ageing thesis to argue that "social policy and state ideology in particular plays a key role in the social construction of both intergenerational conflict at the macro level and the caring relationship within families". This conception of old age as both a burden on the public purse and a private burden on families derives, Walker says, from both the subordination of social policy to economic policy, and the contribution of individualistic functional theories which relate economic ability and status to specific stages in the life cycle. It is the conjunction of ideology and demography with a political environment in which budgetary constraint takes precedence over all other considerations that has artificially amplified concern about population ageing. The conflation of fit and frail elderly people into a single category has in turn been used to legitimate a new social contract between age cohorts and a more general restructuring of the welfare state (ibid, p. 20):

The dual social functions performed by this amplification process are, on the one hand, to encourage gratitude and political acquiescence on the part of older people, and on the other, to prompt younger adults to provide for their old age in the private market.

Another political economy perspective on ageing (Arber and Ginn, 1991, p. 1) focuses on "the way the status and resources of elderly people are conditioned by their class position in the social structure, and by the overall socioeconomic, political and cultural environment". Arber and Ginn note that while most analyses in this tradition focus on class as the main structural division in capitalist society, gender also has a major effect on the ageing experience, with elderly citizens, who are mostly women, coming under ideological attack through negative, hostile

and demeaning stereotyping.

Analysis of the welfare state and its policies is integral to the application of age stratification theory which explores the effects of historical events on experiences of ageing, examining the movement of successive age cohorts through time (Koopman-Boyden, 1993). In New Zealand Thomson (1991; 1992) has labelled the generation born between 1920 and 1940 the 'welfare generation' because, he argues, they have benefited continuously from the welfare state throughout their adult lives, at the expense of successive generations who by contrast will contribute more than they will receive. However, Walker (1996) argues that predictions of intergenerational warfare between workers and pensioners derive predominantly from economic concerns, and it is a "hostile" policy environment that has led to the portrayal of older people as "a powerful and greedy generation" (ibid, p. 25). Phillipson (1996) also argues that there is little evidence of actual hostility between the generations. On the contrary, he sees signs of solidarity between people, arguing that the conflict is between different ideas and different views of elderly people. There are conflicting claims, for example, over the respective responsibilities of the state and the family, and over views of elderly people as an economic burden and a social and economic asset.

In the face of strong evidence that people are living "better as well as longer", Else and St John (1998, p. 12) argue that it is alarmist predictions about the costs of health care and pensions for an ageing population, and an imbalance between "the hard-up young and the wealthiest old" (ibid, p. 226) which pose a real threat to the future security of all older New Zealanders. They argue that in order to cope well with an ageing population, our society needs a radical change in attitudes towards old age, and a more progressive tax structure. Levine and Roberts (1993) suggest that New Zealand's elderly people, like those elsewhere, will have to broaden their political support if they are to be successful in achieving their social policy preferences. Shannon (1991) notes that women and Maori have had a particularly major impact on national political life in New Zealand, and Levine and Roberts (1993, p. 251) argue that older people too have been able at various times to persuade those in government to focus on their needs and entitlements, though this has become increasingly difficult:

as economic pressures have intensified and as policy-makers have become somewhat removed in age from the elderly and, occasionally, have sought to distance themselves from the elderly (as well as from other pressure groups) and their concerns.

Older citizens have had to respond by becoming politically more assertive in an environment where “peculiarities of history have acted to diminish interest in the contributions older citizens may make to the country’s well-being and development” and instead “as the state has come to acquire an important, even pre-eminent role as a provider of financial and social support for older people, the politics of that age-group has become dominated by concerns over stability of supply” (ibid, p. 250). This is why Else and St John (1998, p. 109) argue that we need to build up “ethical capital” by creating an environment in which the role older people have played in creating and developing capital assets in the past legitimates their moral claim on support in the present.

These perspectives have focused analysis and explanation on the social, political and economic contexts of old age, drawing attention to the heterogeneity of older people and also to the inequalities they experience based on class, gender, race and disability (Peace, 1990). The political economy approach has drawn criticism for its narrow focus on social structures and its tendency to exaggerate the extent to which elderly people are disadvantaged (Koopman-Boyden, 1993; Bond et al, 1993).

Interactionist or Social Networks Perspectives

A group of interpretive and interactionist approaches have arisen to complement the structural approaches with their emphasis on the social by recognising that individual old people are not merely the victims of social forces, but create their own realities through interpretation of their contexts (Koopman-Boyden, 1993). The broad aim of this group of theories is to understand the meaning of old age from the perspective of old people. Symbolic interactionism, for example, considers the meanings of self-conscious interactions between the individual and other members of society (Bond et al, 1993). Similarly, labelling theory has helped to show how older people in society are expected to behave, once they have been labelled as old, in accordance with societal expectations of the roles assigned to old people. If they receive a state-funded pension, for example, they are expected to retire from work, and if they are bald or white-haired they are not expected to be present in the education system even as teachers, let alone as students or researchers (Laslett, 1989).

Goffman’s (1963) work on stigma, though not specific to ageing, helps to explain why hair colour should determine whether a person is taken seriously or not and why people’s attitudes to and experiences of old age seem to be so polarised.

Defining a stigma as “a special kind of relationship between attribute and stereotype” (ibid, p. 4), Goffman has argued that the person whose differentness is immediately evident, the “discredited” individual is believed by those who do not possess such an undesired differentness, to be “not quite human” (ibid, p. 5). On this assumption, Goffman’s argument (ibid) is that:

we exercise varieties of discrimination, through which we effectively, if often unthinkingly, reduce his life chances. We construct a stigma-theory, an ideology to explain his inferiority and account for the danger he represents, sometimes rationalising an animosity based on other differences, such as those of social class. ... We tend to impute a wide range of imperfections on the basis of the original one, and at the same time to impute some desirable but undesired attributes, often of a supernatural cast, such as “sixth sense” or “understanding” .

This helps to explain why people might experience discriminatory treatment on the basis of the visible signs of ageing they display in their bodies. It also explains why people might want to try to correct what they see as “the objective basis of (their) failing” (Goffman, 1963, p. 9) by undergoing plastic surgery, or dyeing their hair or using any one of a myriad of products or procedures which promises to restore a youthful appearance. Thus older people may be stared at by children, subjected to disrespectful verbal and physical intrusions into their personal space, and addressed using inappropriate terms of endearment on account of their “failing” (ibid, p. 16). Goffman’s argument (ibid, p. 107) is that the stigmatised individual in our society will inevitably feel some identity ambivalence and self-alienation: in effect, “he can neither embrace his group nor let it go”. Hazan (1994, p. 17) explains how this ambivalence, observable when older people specifically dissociate themselves, either verbally or physically, from other old people, extends to the general population:

Any theoretical perspective concerning ageing is replete with contradictions, conflicts and paradoxes originating in our cultural system. ... this state of confusion and inconsistency is reflected in the social world of the aged themselves and the paradoxes inherent in the socio-cultural structure are paralleled in their self-realization. Though the ‘aged’ is a distinct symbolic category in our culture, the elderly, through their lived experience, are part and parcel of this culture.

Such ambivalence, Hazan explains, arises from the incompatibility of two conflicting modes of reference to ageing. On the one hand, a variety of socio-psychological forces operate to assign older people to a symbolic and physical enclave apart from the rest of society. On the other hand is the omnipresent awareness that most of us will eventually occupy that enclave. Contributing a relational networks perspective to theories of ageing, Hazan (1994, pp 22 - 23) proposes an analytical framework which may be applied to the social dimensions

of old age, envisaging the social arrangements that are used to deal with the “problems” of ageing as two axes each representing a continuum ranging from integration to segregation and from humanisation to dehumanisation respectively. His argument is that in the case of old people the multiple dimensions of what it is to be human are reduced to one predominant dimension, that of age itself.

An important contribution of interactionist theory to specific theories of ageing is the subculture theory of ageing, which argued, from examples in American society, that a subculture develops when groups of elderly people interact with each other to a greater extent than they do with others in society (Bond et al, 1993). Koopman-Boyden (1993) has argued that subcultures can be observed in New Zealand in the establishment of age-related clubs of various kinds. In terms of the present research, subculture theory, combined with labelling theory, has some potential explanatory value for the development of a subculture amongst certain groups of elderly people, for example in older people's organisations and in institutional settings such as rest homes or retirement villages where old people may congregate and interact with each other more than they do with family members or friends. However, the effect of stigmatisation and a resistance to being labelled as old, as well as the strong family networks of which most old people are an important part, combined with the heterogeneity of older people themselves, may mitigate against the formation of subcultures.

Consideration of the lives of older people within their family support networks has given rise to a group of studies which have focused on caring relationships involving older people. In her consideration of the gendered nature of informal care for elderly people, for example, Ungerson (1987, p. 152) warns that if the public sector of care fails to keep up with demand, the differences between older people with substantial assets and those with few or none will ensure the inevitable emergence of “an extremely stratified system of care”. Given the high cost of private-sector residential care and support services, there is no doubt, Ungerson argues, that family networks will exert great pressure on any woman within their ranks who is perceived as being available to care, in order to preserve the family's eventual inheritance. Declining fertility, combined with increasing longevity, has produced both the oldest society in recorded history (Parker, 1998) and a new family structure, multigenerational but with fewer siblings and cousins. McPherson's (2000) New Zealand study of the extended family, for example, found that one person in five aged sixty-five years and over had only one or two intimate kin, and that a significant proportion of Pakeha New Zealanders have very small

potential support networks available to them. Her study showed, moreover, that in New Zealand, as in other similar countries, and in keeping with Scandinavian research cited by Waerness (1990), there is far from universal support for care of elderly people being carried out by the family. McPherson found that women were both the main providers, and the main recipients, of family help. She also found little evidence of a high demand for family support among old people. On the contrary, the 'young elderly' (aged from sixty or sixty-five to seventy-five or seventy-nine) were more likely to be providers of help, especially with care of children and older people, and also financial and emotional support to young adults and young families. Very elderly people, aged over seventy-five years, were more likely to prefer professional support.

There is no evidence that the idyllic 'good old days' when older people had socially defined and valued 'productive' roles and lived in peace and security in the homes of their adult children, existed at all. Kendig (1986), for example, asserts that multigenerational households have never been common, and were more likely to be the result of low incomes and housing shortages than of older people needing care. Like McPherson (2000) Kendig (1986, p. 176) found that:

Families continue to shoulder the major responsibility in the care of disabled older people. Institutions disproportionately serve older people who are bereft of family support, and who would otherwise be neglected, while community services generally supplement and complement family support rather than replace it.

Ethnomethodology and Phenomenology

These perspectives have been widely used to provide the theoretical bases for recent studies of ageing, although they tend to produce observations and findings rather than grand theories of ageing (Bond et al, 1993). Studies of old age influenced by traditions of ethnography in anthropology and sociology are typically conducted in age-segregated settings, and are concerned to observe and understand the ordinary activities of everyday lives (Fairhurst, 1990). While Fairhurst warns that not all such studies are underpinned by the same theoretical framework, phenomenologists and ethnomethodologists generally:

are concerned with how members of a social group perceive, define and classify the ways in which they actually perform their activities, and what meanings they assign to acts occurring in the context of their everyday lives (Bond et al, 1993, p. 39).

They are also particularly concerned with the language and assumptions used in and about everyday life (ibid). Being, meaning and narrative are key themes in Myerhoff's (1978) study of Jewish elders in a small, isolated, homogeneous beach

community in southern California. Becoming involved with the members of the day centre gave Myerhoff, as a younger Jewish woman, access to “models of successful old age” (ibid, p. 19), and an opportunity to “anticipate, rehearse and contemplate” her own future. In addition, she noted (ibid):

I see old people now in a new way, as part of me, not “they”. Most normal, relatively sensitive people identify naturally with children. They remember what it was like to have been a child themselves and as a result see children - are aware of them as a part of life, appreciative of their specific needs, rights and characteristics. But in our culture today, we do not have this same natural attentiveness to and empathy with the elderly, in part because they are not among us, and no doubt they are not among us because we don't want to recognise the inevitability of our own future decline and dependence. An insidious circularity has developed - ignorance, based in part on denial of our future, leading to fear and rejection of the elderly, engendering guilt that is often expressed as neglect or mistreatment, then more guilt, avoidance and ignorance.

Abbott, Fisk and Forward (2000) interviewed older people in residential settings in order to explore their experiences with reference to theories of participation, consumerism and citizenship. Finding that residents' participation was mostly limited to helping with simple domestic tasks, they have consequently argued that both organisations and individual staff members must learn to attend to dissenting voices as well as majority voices in order to foster a more participative culture. In their study of the roles of friends and neighbours in caring for older people Nocon and Pearson (2000) found that non-kin carers can play a significant role in supporting older people in their own homes. They warn policy-makers and practitioners not to take such support for granted. An Australian study of perceptions and effects of ageism amongst older people (Minichiello, Browne and Kendig, 2000) found that participants did not use the term ageism to describe their experiences, but that it was experienced in varying intensity and with uneven, but consistently damaging effects. Health professionals were found to be a major source of ageist treatment, with sometimes devastating results:

The affronts of face-to-face discrimination can prompt an assessment of the self as old, with a subsequent move from a positive to a negative ageing experience. This also suggests that ageism is a complex phenomenon that is socially reproduced as a result of people internalising a denial of their own ageing because of the ageist assumptions and associations in our language and culture which are played out in everyday interactions (ibid, p. 275).

While some older people internalise concepts of old age and learn to accommodate ageism, it was found, others adopt a more active stance in challenging stereotypical images and ideas, and discriminatory practices. A group of theoretical perspectives which identifies and challenges stereotypical images and practices is grouped together in the following section under the heading of

critical perspectives.

Critical Perspectives

Critical social science encompasses a range of sociological perspectives which have in common their critical position in relation to late modern capitalist societies. Those who adopt this position challenge the Enlightenment philosophy which is expressed in modern capitalism as the belief that economic growth and technological advances are capable of providing universal wealth and happiness. Critical perspectives suggest, by contrast, that the structures of societies have an often undetected but undeniably oppressive effect on their individual members. Language is a key concept in critical perspectives because of its importance as “a carrier of ideology and thereby a creator of aspirations” and its association with knowledge and power in everyday situations (Rees, 1991, p. 45). Critical gerontology, the study of old age from a critical perspective (Achenbaum, 1997), is underpinned by critical theory, which seeks “to explain a social order in such a way that it becomes itself the catalyst which leads to the transformation of this social order” (Fay, 1987, p. 27). Critical theory, Fay explains (ibid, p. 205), conceives of this transformation occurring through knowledge and a process of liberation involving “reflective clarity” and “collective autonomy”. However, Fay argues, our knowledge of ourselves, discovered through the narratives we tell to make sense of our lives, is historical and partial. Taking account of the limits to human knowledge and the facets of human nature which place temporal, spatial and relational limits on human capacity, Fay proposes (ibid, p. 212) a series of “self-consciously local, particular, situated, experimental and physical” critical theories, such as a theory of the body which accounts for the physical limitations placed on freedom by “inherited dispositions and somatic knowledge” (ibid, p. 213).

A proper critical social theory, Fay concludes (ibid, p. 215) is one which possesses a dual vision “which recognizes every situation as one both of gain and loss, of change and stasis, of possibility and limit”. Such a theory offers scope for the study of old age in which, Bond and Coleman (1993, p. 338) argue, to have a proper perspective “we need to be able to envisage an overall model that allows some processes to decline, while others stay the same, and indeed some may improve”. Using a critical approach which views old age, and ageism, as social constructs, Hughes (1990) has developed a multi-dimensional conceptual model of quality of life. She argues that a good quality of life for older people is defined by just the same factors and criteria which define a good quality of life for anybody, and that economic and social factors

are just as important in determining the experience of old age as are biological and individual characteristics. Hughes (ibid, pp 53-54) summarises the fundamental hypotheses of the theory of critical social gerontology:

The social construct of ageing - ageism - reflects social and political values which present old age in a negative stereotypical image. Ageism has not only contributed to the *experience* of old age of individual people but has also shaped and determined, to varying degrees, all aspects of social policy towards old people at national and local levels. Ageism has therefore been a major influence on quality of life via two routes. Firstly, ageism has influenced the nature of services and conditions of life of old people at the level of policy, and, secondly it has determined in part, the expectations and experiences of individual old people. The existence of ageism has to be seen as a product of the economic and social system from which it emerges.

As fewer people enter the “designated status passages and life transitions” (Featherstone and Wernick, 1997, p. 10) of work, marriage, parenthood, grandparenthood and retirement on cue and cultural practices and rituals become increasingly particular and specific, postmodern views of the life course and the process of ageing have begun to challenge certain assumptions about ageing by emphasising the cultural complexity of ageing discourses. The section which follows will discuss some of the perspectives on ageing which take a postmodern view of the life course.

Postmodern Perspectives

Bytheway (1997) addresses the question of a theoretical basis for social gerontology which promotes a better understanding of the diverse ways in which people manage the experience of age over time, and shows how age is often used in ways which restrict and regulate people's lives. He does this by deconstructing the concept of age and proposing a more complex conceptualisation which encompasses six different ways in which age is measured and experienced. In the spirit of Fay's (1987) refinement of critical theory, Bytheway's (1997) approach is explicitly ethnocentric, and bound to his own experience of discourses of age in a certain place, the United Kingdom, at a certain time, the last decade of the twentieth century. Chronological age, he argues, places people in their historical context and is also the basis of powerful societal expectations and regulations. For example, the age of eligibility for the state pension is usually the age at which people are expected to retire from the work force. Similarly superannuitants are offered various concessions presumably on the assumption that they are poor because they have retired from work. Bytheway's second category of age is descriptive, and includes the words and expressions that are used, officially and colloquially, to describe directly or indirectly

how old people are, and thereby to categorise them. For example, a retirement village is clearly understood in terms of these conventions as a place for people over a certain age, the age of retirement from work, which is implicitly linked to chronological age. The third category refers to the familial and cultural relational networks in which people are embedded and which indicate their age according to memories and events such as marriage, parenthood and retirement.

Another way in which age is recognised is through the physical signs inscribed on the body. Because of the similarity between “bodily indicators” (ibid, p. 12) of age and ill health, some of the bodily changes that occur with age are judged, according to the prevailing cultural values, “systematically and negatively”. The resulting medicalisation of age changes has led to surveillance, monitoring and resourcing of diverse aspects of older people’s lives such as housing, recreation, shopping and housework by the health system. It has also led to the widespread promotion and expectation of positive or successful ageing. We are led to believe, Bytheway argues (ibid, p. 13) that “we can sustain an age-free image of health and wellbeing for much of our lives”. The result is that old age is inevitably linked with illness and viewed negatively. Societal expectations and institutional regulations are important indicators of age to the extent that they exert pressures, the fifth of Bytheway’s aspects of age, for people to behave in certain ways that are considered “normal” for their age. Powerful age stereotyping which is disseminated through the media and through cultural and family conventions and expectations of continuity play an important part in determining the age at which people are expected to marry, have children and retire. Life history, or biography, the sixth aspect, brings a temporal perspective to theorising about age, and an understanding of the way in which our individual experience of history, oriented between our birth at some time in the past and death at some time in the future, contributes to our sense of age.

In the same way as Bytheway (1997) has deconstructed the concept of age, Fairhurst (1997) has sought to deconstruct the category of memories. As “the very stuff of recalling the past” (ibid, p. 63), memories are central to life history approaches to ageing and old age but are often taken for granted as a technical means to a narrative end. In answer to the question of how previous events come to be seen as memories, Fairhurst shows how memories are objectified and transformed from the “material” to the “memorable” (ibid, p. 70). Memories are situated and displayed through talk about objects when a life story is being told. Thus the process of remembering becomes a way of bringing the past into

the present, making memories a matter of interest in the present as well as the past. Fairhurst argues for further analysis of the category of memories as a way of understanding more about “how individuals tell a life” (ibid, p. 72). Studies which focus on understanding various aspects of the lives of older people from a postmodern perspective often employ the notion of discourse to explain how it happens that certain types of knowledge are widely accepted as defining of older people’s “realities” (Opie, 1995, p. 2) while less powerful types of knowledge are subordinated or marginalised. Opie (1995) claims that in western societies ageing has generally been theorised as a time of either decline, dependency and isolation, or of activity designed to stave off decline. Both views, Opie argues, position older people as “deviant” because both emphasise the loss of productivity that accompanies withdrawal from the labour market and potential loss of capacities and relationships. Such discourses, as Opie says, are productive of certain fatalistic attitudes towards older people which, within medical discourses and practices, can work to deprive them of services on the grounds that sickness, impairment and discomfort are an inevitable part of ageing, and there is nothing to be done but accept them.

Latimer (1997) uses a critical analytic approach within an ethnomethodological tradition to go beyond simply naming and blaming a medical discourse or identifying competing discourses of care, to ask how it happens that older people are absurdly, yet inevitably “lumped together” (ibid, p. 145) as a group. This categorisation and the assumption that illness in old age is a natural consequence of “biological decline” (ibid, p. 143) has distinct personal and political consequences, Latimer argues, and we are all implicated, “even if it is only through fear of our own ageing” (ibid). Her research, carried out in an acute medical setting in Britain, shows how problems older people experienced were constantly associated with their age or social situation, and downgraded as less important than medical problems in order to move patients on and out of the system in an economically constrained health care environment. Latimer’s account of geriatric medical discourse, and in particular the practices of geriatric assessment, reveals how extending the medical gaze into non-medical areas of the patient’s “environment and biography” (ibid, p. 153) makes available opportunities to identify possible difficulties in discharge planning and to shift the identity of the patient accordingly “to enable his or her disposal” (ibid). The critical point in the distinctions the professionals make together between what is natural, what is social and what is medical is the political nature of the effects in terms of the way patients’ identities are managed, and the “networks of interest” (ibid) through which these effects appear to be maintained.

A discourse, as Opie (1995, p. 3) has noted, results in “a particular representation of social ‘facts’, which are not the truth but are a construct of practices arising from beliefs, knowledge and power”. Postmodern approaches such as those described in this section have drawn attention to the power of discourse to define experience. An example is the medical discourse which ascribes illness effects to age per se and is particularly relevant to middle aged women and to third age people who are fit and active but suffering from reversible or treatable conditions.

This thesis is underpinned by a combination of theoretical approaches to ageing, with particular emphasis on the psychosocial model of human life span development proposed by Erikson (1980) and developed by others such as McAdams and de St Aubin (1992), Boyd and Luszcz (2000) and Vaillant (1993, 2002). Sociological perspectives, especially structural, critical and social networks perspectives, have been used to focus analysis on the social, political and economic contexts of the ageing process, and ethnomethodological and phenomenological perspectives have contributed the theoretical basis for an exploration of the memories, narratives and experiences of the research participants.

Summary

This chapter has reviewed the various perspectives of ageing and old age in the large, diverse and growing body of literature in the field of study now widely referred to as gerontology. Early psychological theories have contributed in turn to newer theories about ageing in society (Koopman-Boyden, 1993). The critical perspectives of theorists such as Phillipson (1982) and Walker (1982, 1996), contributed to the field by exploring the social construction of old age and the political economy of ageing, and biographical approaches (Bornat, 1994; Coleman, 1990; Gearing and Dant, 1990) have attempted to contextualise the ageing process by focusing on life histories (Peace, 1990). Feminist perspectives from theorists such as Arber and Ginn (1991) and Gannon (1999) as well as powerful autobiographical testimony (Macdonald and Rich, 1991) have revealed the gender implications of old age, often hidden from view by universalist perspectives on ageing. Such perspectives have explored, for example, the way women are positioned differentially from men in relation to the labour market, and the consequences of this positioning for their old age. They also examine the bodily experiences of old women in a world awash with images of youthful beauty and determined to keep ageing at bay.

Gerontologists have been taken to task (Achenbaum, 1997; Bytheway, 1997) for contributing to ageist perspectives by collecting and documenting evidence that supports a view of ageing as depletion and decline. Achenbaum (1997, p. 24) charges that those who study ageing “repress their own ageism”, reflecting the views of the dominant culture that ageing is something that happens to others: gerontologists, fearing their own obsolescence, equate staying productive with successful ageing. Accordingly Achenbaum (ibid, p. 24) argues for “an infusion of feminism” as a way of invigorating the study of the gender-specific dimensions of later life and sharpening reflexive attention to ageing issues.

Reviewing the position of research within social gerontology, Peace (1990) has identified trends towards expansion of the subject area in a number of directions, recognising diversity, focusing on ‘normal’ rather than pathological ageing, and including a life-course perspective. She has also identified a growing concern to develop ways of allowing and encouraging older people to speak for themselves through the research process. A life history approach has contributed positively not only to the study of ageing, but to the older people actively engaged in it. However, warning of the selectiveness, the variability and the necessary incompleteness of retrospective accounts of ageing, Peace argues for more research which critically examines the ways in which conceptions such as old age and elderly people are constructed, maintained and deployed. More recently Jamieson and Victor (1997) argue that gerontology, which arose in response to both the ageing of populations and the peripheral status of the study of age in academic activity, has been committed to exposing the ageist assumptions behind a myriad of debates and policies. In this emphasis, they suggest, it has tended to concentrate on age as a social construction rather than a physical lived reality. Recent perspectives, on the other hand, mark a move towards a view of old age, frailty and death as a normal part of the life course rather than solely as problems, burdens and needs.

It is evident by now that old age is indeed a “contested category” (Laws, 1997). As Hazan (1994, p. 93) argues, knowledge about ageing is peculiar, and the production of knowledge about ageing is “self-subversive”. This is because, as Jamieson and Victor (1997, p. 180) argue, as “social gerontologists wishing to develop theory we are constantly faced with the problem of defining - and perhaps therefore of justifying - what we are actually studying”. Thus the ultimate goal of

gerontology is to make itself redundant, either on the grounds that old age cannot be understood apart from other ages, or on the grounds that its purpose is to expose the difficulties inherent in the construction of old age as a category.

From this survey of attitudes towards ageing at different times and in different places, it can be seen that old age, like citizenship, is a highly contested notion. There is no general agreement about when it starts, what it is, or how it should be dealt with. It is frequently treated as a repugnant or unhealthy concern, as commentators like de Beauvoir (1970) and Myerhoff (1992) have pointed out. Laslett (1989, p. 96), nearing his seventy-fifth birthday at the time of writing, identified attitudes of outright hostility to the condition of being or becoming old:

The nervous humour which attaches to the old wounds them and degrades the elderly condition. Indeed it harms all of us, since we shall all become old one day.

What does become abundantly clear from a study of the literature on old age is that the only generalisation that may safely be made about old people points to their diversity and the great variety of styles of ageing in different cultural settings (Myerhoff, 1992). The challenge for the future is the development of a vision for society in which the citizenship of all older people is supported by both policy and practice. This would mean, as Biggs, Phillipson and Kingston (1995) advocate, “that elders’ interests are seen as an essential component of what it means to be participating adults” and that policy initiatives should “without exception, consider the implications for the civil and human rights of older people at the point of formulation” (ibid, p. 118).

The next chapter will discuss the concept of citizenship with particular reference to investigating ways in which various theories of citizenship can contribute to the development of a theoretical framework of citizenship for older people.

Chapter Three:

Citizenship

The idea of citizenship as a performing sphere that transforms the abstraction “the people” into individual political subjects and participating citizens lurks within both classical and contemporary perceptions of citizenship. But many theorists, while incorporating notions of performed citizenship, fail to translate the spheres of enactment through which a participatory polity can be realised (Joseph, 1999, p. 15).

Introduction

This chapter seeks to ascertain what it means to be a citizen, to belong as one among many “individual political subjects and participating citizens” (ibid) in contemporary society. The term ‘senior citizen’ is in such common usage in our society that in a sense it is unproblematic because everybody knows what it means. It is most often just a polite way of saying ‘old person’. A rudimentary analysis of the term ‘senior citizen’, however, soon makes explicit the meaning that ‘senior’ takes on when linked to ‘citizen’, a meaning which is very different from that which it carries in other contexts such as ‘senior management’, ‘senior policy analyst’, or ‘senior partner’. The image conveyed by the word ‘senior’ in those labour market contexts is one of generally male authority, status, power and standing worthy of respect. Instead, a ‘senior citizen’ in an advanced western society such as New Zealand is one who is entitled by virtue of age to a state pension and to certain limited discounts on public transport and at entertainment venues. The term describes a person who is assumed to be excluded from the labour market and therefore economically dependent. In theory the term carries connotations of authority and respect. In practice it is loaded with images of dependence, decrepitude and decline. As Hazan (2000, p. 13) observes, it is one of a number of such terms:

The term ‘aged’ not only describes individuals but also is used as a collective noun, and once individuals are identified as ‘old’ they are perceived exclusively as such. Even the alternative terms, sometimes used to soften the negative connotations of the word ‘old’ - ‘the elderly’, ‘older persons’, ‘senior citizens’, ‘elders’, or ‘old age pensioners’ - all serve to stigmatize the aged.

As discussed in Chapter Two the reductionist effect of ageism is to transfer the stigma of old age to old people and thence to the words, even positive ones like ‘senior’, used to describe them, so that when linked with ‘citizen’ it indicates membership of a special, lesser class of citizenship, and symbolic exclusion from the ‘mainstream’ community of citizens.

As the population ages and older people constitute a larger proportion of the adult community, an increasing amount of attention is being paid to the notion of inclusion, and the importance of policy makers seeing older people as a part of, rather than separate or different from, the community. The United Kingdom's *Coming of Age Report* (quoted in Willis, 1993, p. 13), argues, for example:

Getting the most out of life is partly up to individuals, but a major part of our plans must be to remove the barriers that prevent older people making the most of life. It is only when we have adjusted to making the most of all our citizens, irrespective of how old they are, that we will truly have come of age as a society.

This chapter will discuss the concept of citizenship, where it originated, how it has evolved and how it is applied in current debates. In the absence of a general over-arching theory of citizenship, this chapter will cite some of the various writers in the latter half of the twentieth century and the beginning of the twenty-first who have developed theories of citizenship from different perspectives. These theories are mostly based on Marshall's (1950) class-based framework, and represent attempts to account for the effects on citizenship of gender (Lister, 1990, 1997, 1998; Pateman, 1988, 1989; Young, 1989; Yuval-Davis, 1991), race (Oommen, 1997), ethnicity (Joseph, 1999; Castles, 2000, Yuval-Davis, 1991), conflict and struggle, (Turner, 1990), relational networks (Somers, 1993) and voice and representation in a politics of difference (Yeatman, 1993, 1994). Others have written about the effects of disability for men (Oliver, 1990; 1996) and women (Morris, 1991) on citizenship rights. New Zealand writers have framed their discussion of rights in terms of culture (Wilson, 2000; Hunt, 2000), mana (Durie, 1998), and Maori women's experiences of colonisation and gender oppression (Johnson and Pihama, 1994; Hoskins, 1997; Irwin, 1992).

The Language of Citizenship

Language, as demonstrated in the opening paragraph of this chapter, is not a "value-neutral medium" (Lister, 1990, p. 445) and while the language of citizenship is employed increasingly in contexts where there is a struggle for equal rights (Oliver, 1996), the concept itself is contested "at every level from its very meaning to its political application, with implications for the kind of society to which we aspire" (Lister, 1997, p. 3). There is general agreement that citizenship is about belonging to a community and about relationships, both within communities and between individuals and the state (Voet, 1998). But whether that membership is defined primarily by the rights or by the "duties, actions, virtues and opinions" (ibid, p. 9) that follow from those relationships is a matter of debate, as is the

nature of those rights and duties, or (to use the official language of the New Zealand citizenship application form) privileges and responsibilities.

Words like “citizenship” and “dependency” are the embodiment of ideas, and as such they shape our political culture (Lister, 1990, p. 446). If, Lister argues (*ibid*), “the ideas that they embody are assumed, wrongly, to be gender-neutral, such language is helping to perpetuate the invisibility of women and of their needs in our political culture”. Focusing on the meaning of citizenship for women, Lister recognises that it will also be mediated by other factors such as social class and race, and she examines how this meaning is shaped by women’s roles as mothers, as carers and as paid workers and is also “constricted by the ideology and reality of women’s economic dependency” (*ibid*). Age is another factor that mediates the meaning of citizenship for women and for men because, as Lister argues, “neither the question of dependency nor of citizenship can be divorced from that of power” (1990, p. 445).

Theories of Citizenship

There is a flourishing academic literature on citizenship, from a variety of countries. I have drawn on work primarily from the United Kingdom, the United States, Australia and New Zealand, drawing particular inspiration from Lister’s (1997) work towards constructing a feminist theory of citizenship. Her work is focused on developing a citizenship theory and practice which is universal, in that it includes both women and men, and specific, in that it pays attention to the ways in which women and men are differently positioned in relation to the public and private spheres. Her focus is to pose a challenge to the historic and enduring exclusion of women from full citizenship. My focus is on older women and men, and on the extent to which they are able to enjoy full citizenship in New Zealand. Taking Lister’s feminist perspectives of citizenship as a starting point for a broadly inclusive perspective, I have also built on the work of theorists whose interest in citizenship focuses on the processes through which and the relational networks within which citizenship is able to be exercised or performed (Cox, 2000; Somers, 1993; 1994; Joseph, 1999).

When a former mayor of the New Zealand city of Napier, Ernest Ron Spriggs MBE JP and a Knight in the Order of the Legion of Honour, died in April 2000 in his 103rd year, his funeral was described as “a memorable, fitting and emotional send-off for an old soldier who served his King and country, and who in civilian life served his home town and its people so very well”. In the eulogy he was

described as “a great citizen” (Hawkes Bay Today, Wednesday, April 5, 2000, p. 3). Except for the reference to a king, these words could be a tribute to a citizen of ancient Greece, aptly describing the attributes of the earliest ideal citizen, who was of course male, and whose commitment to the ‘polis’ or city-state was based on property, military service and patriotic identity (Heater, 1990). Paid employment has replaced military service as “the key to citizenship” (Pateman, 1989, p. 186), and women and men have a very different relationship to the official economy of paid employment, with implications for their role as citizens in relation to both the state and the arenas of society in which people enact their citizenship (Lister, 1991).

The low status accorded to elderly people results not only from capitalist relations in which they are viewed as non-productive, but also from patriarchal relations because most elderly people, especially very elderly people receiving care, are women. In talking about gender and citizenship, Lister (*ibid*) argues that there is a danger of treating women and men as two monolithic groups, when other factors such as race, class, poverty, disability, sexual orientation and age will affect the relationship of both groups to citizenship. Thus the development of a gendered conception of citizenship becomes part of a broader project which attends to diversity and difference and focuses not only on the rights of citizenship but on the political, social and economic conditions which shape people’s ability to exercise their citizenship rights. Emphasizing the importance of participation in decision-making as a means of increasing respect, Voet (1998) proposes an active, sex-equal, woman-friendly type of citizenship. In her conception of citizenship, the highest form of human capacity is building and shaping a community. If women want to be respected, and to respect themselves, Voet argues, they must participate in public decision-making, sharing responsibility for developing and practising “public virtues”, in particular “doing the best one can for the public good, promoting political justice for women and men, and developing and using the skills of speaking, acting and judgement” (*ibid*, p. 145). Citizenship is likened to a craft which citizens practise in order to develop their skills for their task of governing. It is not necessary for all people to be active citizens all of the time in order to be full citizens, but Voet argues for active participation for both men and women over time, so that women as well as men are included in the process of ruling and being ruled.

Ultimately then, the question of citizenship concerns the distribution of power (Lister, 1991), and my own project is to use notions of citizenship which address

the structures on which social power is based to extend and strengthen the social rights of citizenship in a way which makes the contribution of older women and men count, without trapping them into limited, and limiting, roles as consumers or unpaid carers. A first step is to examine the ideal of citizenship. The next few sections of this chapter will consider citizenship in its historical context. Using a broadly chronological approach, I will trace the development of the concept from its beginnings in ancient Greece to twenty-first century debates which grapple with notions of citizenship in various contexts such as globalisation, migration between nations, and ethnic and cultural differences within nations.

The Citizenship Ideal

It is to Aristotle that we owe the earliest thorough discussion of the nature of citizenship, a subject about which he declared that there was no universally agreed definition (Heater, 1990). There is, however, some agreement that notions of citizenship are central to political discourse, and that there has been a resurgence of interest in the idea of citizenship since the early 1990s (Lister, 1997; Vogel and Moran (Eds), 1991; Heater, 1990; Andrews (Ed), 1991; Kymlicka and Norman, 1994; Yuval-Davis, 1991; Yeatman, 1994). Yeatman (1994, p. 57) argues that it is “postcolonial conditions, the success of the welfare state in delegitimising old ideas of hierarchy based in class or race, and the contemporary feminist movement” that have prompted a reconsideration of what we mean by “citizenship”. Kymlicka and Norman (1994, p. 352) argue that at the theoretical level the concept of citizenship is a natural successor to “the demands of justice and community membership - the central concepts of political philosophy in the 1970s and 1980s respectively”. Citizenship, according to them, is “intimately linked to ideas of individual entitlement on the one hand and of attachment to a particular community on the other” (ibid). They suggest that a number of international political events and trends, including increasing voter apathy, have created a renewed interest in citizenship theory.

In Britain, it has been claimed (Heater, 1990; Yuval-Davis, 1991) the parties of both Left and Right appropriated the concept of citizenship in response to a decline during the 1980s in citizens’ rights and in civic virtue respectively. The debate about citizenship is about the relationship between the individual and the state, with those on the political left stressing citizenship rights and the state’s responsibility to resource people so that they can exercise their citizenship, and those on the political right emphasising citizenship responsibilities, in particular the responsibility of the individual citizen to be self-supporting and to contribute

to society through voluntary work. While the debate over the exact nature of citizenship continues without final agreement, the way we define citizenship is nevertheless important because of the way it is intimately linked with the kind of society we want for ourselves. This has been so since ancient times, beginning explicitly with Aristotle's ideal citizen in the Greek city-state of the ancient world.

The Ideal Citizen

Aristotle's vision of ideal citizenship was naturally linked to the social and political environment in which he lived, with many people, including foreigners, women and slaves, excluded (Heater, 1990). Citizenship in this tradition of the Greek city-state was a privilege, bestowing a status which was generally inherited and which depended not so much on rights to be claimed as on responsibilities to be shouldered. Citizens were required to be actively involved in the judicial processes and the public debate which preceded the formulation of policy and the political decision-making of the city-state. The existence of a diversity of interests among the citizenry was considered essential to the practice of citizenship, with good government depending on a balance between the various perspectives. Citizens, for Aristotle, were those who were "able and willing to rule and to obey with the virtuous life as their aim" (cited in Voet, 1998, p. 137). The dimension of citizenship which implies belonging, contributing to, and participating in a political community is reflected today in our opportunities to vote and stand for public office, and in the requirement to undertake jury service. The link between citizenship and participation can also be seen in the assumption underlying official information legislation "that citizens should have information about the decisions of our political representatives (i.e. open government) in order to be able to scrutinise decision-making and to make an informed contribution to the public policy process" (Forgie et al, 1999, p. 7). A report prepared for the Office of the Ageing, Department of Human Services, Government of South Australia (Ranzijn and Andrews, 1999, p. 16) has indeed suggested that contributing to society "seems to be a normal and natural part of life at all ages, including older age". There may, the authors argue "be an innate psychological urge within all adults to do things for the benefit of society". This is consistent in theory, though not of course in practice, with the conviction of the Greeks of the city-states that "participation in public life was crucial to the full and proper development of the human personality" (Heater, 1990, p. 2).

The concept of world citizenship, while not confined to western civilisation, seems to have emerged in the fifth century BC in Greece. Citizenship in the Greek city-

state was practical but exclusive, while citizenship of the cosmopolis was, Heater argues, “generously ecumenical but hollow” (ibid, p. 16). Its successor, Roman citizenship, was in turn, according to Turner (1990, p. 202), “of very circumscribed significance, being the status of (rational) property-owners who had certain public duties and responsibilities within the city-state”. The Romans also introduced the concept of dual citizenship, so that a man could be simultaneously a citizen of his own city and of Rome, and a limited citizenship, by which the private, but not the public rights could be exercised.

Our understanding of the ancient world depends on the surviving literary evidence, much of it written by elderly Greeks and Romans, who were almost universally male and belonged to the ruling classes. This literature, it can be argued, tends to present two images of elderly people and of ageing: one insistently positive, asserting that the elderly have a vital role to play in society, and one harshly negative, to the effect that old people are a nuisance to and a burden on society (Parkin, 2000). It seems that, as today, demographic and social variables played a large part in determining the status and role of the elderly, a status that depended very much on gender and social standing, as well as on an individual's economic and physiological status. Old age was acceptable so long as it was useful. An older person who could no longer fight was expected to govern wisely, and an old person who could not maintain his or her position in society was likely to be effectively excluded. The extent to which an individual was included in society both determined and was determined by status. Responsibility for welfare lay with the family, and ultimately with the individual. The idealised image of a golden age for elderly people in the ancient world is likely to have been restricted to rich, healthy, patrician males.

The Medieval Citizen

The Graeco-Roman model of citizenship, in which tradition, law and education had required loyalty to the state, gave way to a multi-faceted and more complex pattern of relationships in which both the Church and the local lord claimed allegiance. In England the county was the real focus of commitment, and elsewhere the term ‘citizen’ was confined to the medieval city or town, and depended on the principles of freedom and fraternity, the latter invoked in military service, and commonly, membership of a guild (Heater, 1990), an association of men sharing the same interests, such as merchants or artisans. It was the city-states of northern and central Italy, especially Florence, which went farthest toward recovering the classical ideal of active citizenship. As in the ancient world, people

were included or excluded from the ranks of citizens on the basis of their gender and class. After the Reformation in the sixteenth century the Protestant churches offered passive, obedient citizenship in return for secular, military support for the faith, resulting in a private realm of religion and the family and a public world of politics and commerce (Turner, 1990).

The Beginnings of Modern Citizenship

Challenges to the authority of the British monarchy, the doctrine of popular sovereignty and the religious tensions released by the Reformation contributed to the development of the modern egalitarian form of citizenship, and the opening up of actual opportunities to put the theory of active citizenship into practice. The Mayflower Compact drawn up in 1620 by the Pilgrim Fathers in America reflected such an opportunity, and they formed a “civil body politic” (Encyclopaedia Britannica, 1989, p. 396), in the process developing a modern view of citizenship “based on voluntary allegiance to a community defined by territory (Heater, 1990, p. 30). In Europe, Alfonsi (1997) argues, a dual model of citizenship developed, originating on the one hand from the ideas of Locke and the liberal tradition of natural law, in which the power of the citizen consisted in knowing how to use the rights guaranteed by the state “for his own welfare” (ibid, p. 55). The other tradition is the republican model based on the concept of the Greek ‘polis’ in which the individual interest of the citizen is subject to the collective ‘common good’. It was this latter model that was more fully developed during the French Revolution, in which the “concept, status and title of citizen came into its own” (Heater, 1990, p. 48). In fact some citizens turned out to be more equal than others, in that they were divided between active and passive citizens, of whom only the former could vote. Nevertheless the French Revolution provided significant opportunities for participatory citizenship, and effectively consolidated the concept of citizenship (Davidson, 2000).

Citizenship Rights

Current theories of citizenship are almost inevitably informed by the analysis of T.H. Marshall in his influential essay “Citizenship and Social Class”, published in 1950. Marshall (1950, p. 10) called modern citizenship “the latest phase of an evolution of citizenship which has been in continuous progress for some 250 years”. He argued (ibid, pp 28 - 29) that:

citizenship is a status bestowed on those who are full members of a community. All who possess the status are equal with respect to the rights and duties with which the status is endowed.

Marshall's analysis of citizenship incorporated three sets of rights, related to but independent of each other, and evolving cumulatively from the eighteenth century. Marshall argued that civil rights, including the right to work, accrued to all (male) members of the community during the eighteenth century, when the status of citizenship equated, at least for urban dwellers, to the status of freedom; political rights, "the right to participate in the exercise of political power" (ibid, p. 11) were gradually extended throughout the nineteenth century; and social rights, ranging from "the right to a modicum of economic welfare and security to the right to share to the full in the social heritage and to live the life of a civilised being according to the standards prevailing in the society" (ibid) were added during the twentieth century.

Marshall's theory has been expanded by various writers to include participation rights (Janoski, 1998), difference in the form of cultural and gender rights (Castles, 2000), and a broader and more detailed analysis of the historical development of (western) notions of citizenship (Turner, 1990). It has also been extensively criticised on several grounds: that the development of rights is not a linear, progressive process and that rights can be lost as well as won (Cheyne et al, 2000); that it takes no account of the gendered nature of citizenship, and how the meaning of citizenship for women is shaped by their roles as mothers, carers and paid workers and reduced in theory and in practice by their economic dependency on men (Lister, 1990; Voet, 1998); that it is Anglocentric (Parry, 1991) and gives insufficient recognition to "the specific historical and geographic factors shaping the development of the welfare state in different countries" (Cheyne et al, p. 63). The conflation of nationality with citizenship is another aspect of Marshall's account that has become increasingly problematic with the rise of migration and ethnic revival since the 1960s (Alfonsi, 1997; Higgs, 1997; Joseph, 1999; Vasta, 2000).

Recent commentary on Marshall's account of citizenship (Urry, 2000) highlights its weakness in relation to inequalities of gender and sexuality and the fact that it ignores mobilisations of the citizenry as a result of military conflicts, and the role that class, gender, ethnic, gay, disabled and other forms of social mobilisation play in the struggle for citizenship rights 'from below'. While conceding the appropriateness of Marshall's focus on national citizenship at the time he was writing, Urry contends (ibid, p. 167) that contemporary citizenship now needs to be seen as 'post-national' and citizenship rights as "more globally reinforced notions of human rights (that) stem from an array of new processes and institutional

arrangements stretching across different societies". This post-national citizenship Urry sees as connected with the increasing migration of people across national borders, as well as global interdependence and a wide variety of different kinds of citizenship developing in today's world. Instead of Marshall's "citizenship of stasis", Urry proposes (ibid, p. 167):

citizenships of flow, concerned with the mobilities across various borders, of risks, travellers, consumer goods and services, cultures, migrants and visitors, and of the rights and duties that such mobile entities should enjoy. Such flows involve both threats to, and forms of resistance around, civil, political and social elements that cannot be distinguished from each other.

Since Urry wrote of these "citizenships of flow", there are, of course, intensified risks, restrictions on citizenship rights, and a re-emphasising of national borders for many travellers as a result of America's declared 'war on terrorism' in the wake of the September 11, 2001 attack on the World Trade Centre in New York.

Citizenship Responsibilities

Critiques of Marshall's account of citizenship from the New Right focus on "the need to supplement (or replace) the passive acceptance of citizenship rights with the active exercise of citizenship responsibilities and virtues, including economic self-reliance, political participation, and even civility" (Kymlicka and Norman, 1994, p. 355). Finally, an increasing number of theorists whom Kymlicka and Norman call "cultural pluralists" (ibid) are focusing on the need to revise current definitions of citizenship to accommodate the increasing social and cultural pluralism of modern societies. The question is whether citizenship can provide a common experience, identity, and allegiance for the members of society, and whether it is enough simply to include historically excluded groups on an equal basis (ibid).

An area in which contemporary notions of citizenship go beyond Marshall's state-centred conception is in terms of the 'ethics of care' of the environmental movement: "an ethics of responsibility which insinuates itself into almost every mundane decision that is made" (Urry, 2000, p. 168). The global environment, Urry suggests (ibid, p. 177), involves "a new kind of 'performative citizenship' constructed from below and involving duties developed on the basis of conscience". Emphasising the complexity of contemporary citizenship, Urry cites the inability of nation-states to protect their citizens against the incalculable risks which result from the market forces of the global economy, threatening the rights of individuals, including those who are distant in time and space. Urry's evocation

of global citizens whose allegiance is to humanity rather than to a national identity links strongly to the later-life task of generativity and the desire of many older people to protect the environment for future generations. Communication and media images are fundamental to these new types of citizenship in which the public sphere becomes in effect a world stage, thereby blurring the edges of the previously separate public and private spheres. Electronic communities, for example, have no territorial boundaries and have the potential, Urry argues (*ibid*, p. 177), to “diminish or even eliminate older forms of identity based upon territory”. They also, significantly, have the potential to diminish or eliminate forms of discrimination based on the visible signs of ageing.

The global citizen who operates on this level is the contemporary successor to the cosmopolitans of the Enlightenment, an elite group of highly educated and privileged men (Heater, 1990, p. 56). The danger Lister (1997, p. 57) sees is “that this elite group, enjoying considerable economic power and status, opts out of citizenship at the national level without contributing to its development at the global”. She questions, given this group’s abstinence from the “principles and practice of citizenship”, whether the term ‘citizens’ should be applied to them at all. On the other hand, it is reported that over 18 per cent of adults over 65 with employment or other income over New Zealand Superannuation have access to the internet (Ministry of Social Policy, 2001b). Among the research respondents it was clear that some older men and women were using the internet to maintain communication with family members, especially grandchildren, and to enhance their own access to information and knowledge. Older people are currently under-represented as users of computer technology (*ibid*), but this is changing, as is demonstrated by the success of SeniorNet, an organisation which encourages and supports older internet users, seen by “the hi-tech sector” as a key market and one that is open to development (Sunday Star Times, August 19, 2001, E1). While older people who have opened themselves up to the new world of electronic communications may be rewarded by better access to information, enhanced opportunities for communication with family, friends and communities of interest, and greater clout as consumers, there may also be a positive impact on their income through employment opportunities.

Citizenship as Participation

In her critique of Marshall’s account of citizenship, Somers (1993, p. 611) argues that citizenship should be redefined as an “instituted process” rather than a status. Analytically, she argues (*ibid*):

a focus on status is attached to individuals and categories, while an “instituted process” focuses on networks of memberships and relationality. Thus, the abstractions of state and capitalism, citizenship, and social class can be replaced with the concept of contingent patterns of relationships and social practices grounded in time and space. The rights-based definition of citizenship can also be revised - citizenship cannot be explained by looking for rights granted “ready-made” by states. Instead, the focus must be on the presence of national universal laws and legal institutions, which under certain conditions of place, political culture, and participation could be transformed into rights. English citizenship was not granted as a right - it was created by the activities of peoples in particular situations who interacted with institutions, ideals, and rules of legal power and governmental participation that *could not remain attached irrevocably to any class or institution*. Whereas rights inhere only in individuals or corporate entities, laws are free-floating forms of empowerment and cultural resources, whose practical meaning depends on relationships, not individual autonomy. Citizenship rights were relational social practices, not things.

In her work on the citizenship experiences of migrants, Joseph (1999) also begins the discussion with Marshall's influential tripartite schema of citizenship rights. She argues though, that his discrete categories no longer fit the lived realities of people's lives, particularly in the light of modern migrations of people within and between national borders. Investigating the range of possibilities to exercise citizenship that are available to individuals and communities on a daily basis, Joseph too sees modern citizenship as an activity rather than “an imagined community” (ibid, p. 155). Like Somers, she sees participation in social networks as a critical aspect of citizenship, which she says is unstable, tenuous, “a chasm to be filled with incomplete desires of community and allegiances” (ibid, p. 19). Vulnerable to changes in government and policy, citizenship is “an ambiguous process” dependent on “expressive enactments” which reinforce the idea of a “network of performed affiliations - private and public, formal and informal” which make up the “lifeworld of citizenship” (ibid). My research project constitutes an exploration of the possibilities that exist for participation and performances of citizenship in the relational networks of elderly New Zealanders. The vulnerability of their “lifeworld” to shifts in government policy, the ambiguity and tenuousness of the process of citizenship for older people are key concepts in this thesis.

Citizenship as Membership of a Community

Citizenship as an activity to be performed (Joseph, 1999) or a craft to be practised (Voet, 1998) pertains to a citizen's responsibilities, while citizenship as membership of a community has to do with the privileges or the rights of citizenship. Adhering to the view that citizenship is a social status, Held (1991, p. 21) argues that its benefits are defined in terms of individuals, who enjoy entitlements “on the basis of a fundamental equality of condition, which is their membership of the community”. In this way citizenship as a status incorporates a citizen's individual

rights with community consciousness (Parry, 1991). Citizenship rights, those rights that are guaranteed to citizens by the laws of a particular state, are central to a “social liberal” view of citizenship: “citizens receive rights, but whether or not they exercise them is their business” (Voet, 1998, p. 62). Barbalet (2000, p. 95) cites Marshall’s definition of citizenship as “a status bestowed on all those who are full members of a community”, viewing it as a form of social capital, in the sense that it is an arena “through which the capacities of individuals, as citizens, are enhanced”, though he warns that because of the state’s control over access to citizenship and the quality of citizenship status, citizens can put only a very qualified trust in the states of which they are members. Part of my thesis is to explore the extent to which elderly New Zealanders can and do trust the state to provide arenas through which their capacities as senior citizens are enhanced.

The Citizen as Consumer

Another contemporary conception of citizenship, which again blurs the division between public and private worlds, is the notion of consumer citizenship, in which advertising and branding are central components. Urry (2000, pp 184 - 185) points to a “de-differentiation between public information and private advertising, between education and entertainment, (hence edutainment), and most importantly between textual information and visual imagery)”. Urry does not contend, however, that the ‘consumerisation’ of citizenship is conducive to social equality, or that global forms of citizenship have replaced national forms, but rather that contemporary citizenship is not the fixed and bounded conception of Marshall’s theory, and citizenship rights are not simply incremental and inviolate, but are vulnerable to a range of risks or hazards which transcend national borders and against which nation-states are largely powerless. This tension between formal and substantive rights means that while a citizen may enjoy equal rights under the law, it is necessary to ask, as Held (1991, p. 23) does, whether he or she also has the “capacities (the material and cultural resources) to choose between different courses of action in practice”. Held questions further (ibid, pp 21 - 22) whether “existing relations between men and women, between employers and employees, between the different social classes, or between blacks, whites and other ethnic groups, allow citizenship to become a reality in practice”. Equally it might be asked whether existing relations between different age groups allow citizenship to become a reality in practice for older people, although people of the third age constitute a growing market for certain types of real estate and leisure goods and services, which does put them in a position to exercise power

as consumers, even if it is differentially distributed.

This chapter has so far considered a range of historical and contemporary thinking about citizenship from a variety of perspectives in order to define some of the ways in which the notion of citizenship may be applied in contemporary settings. Continuing the theme of citizenship, the concluding sections of the chapter will consider theories of citizenship which may be applied specifically to questions about age, ageing and ageism.

Citizenship and Old Age

The notion of citizenship, according to Oliver (1996, p. 44), has become “a shorthand device for talking about the relationship between individuals and their societies” and in recent years has been used “not simply to consider the social integration of the majority into society but also as a yardstick to measure the extent to which certain groups are not socially integrated” (ibid, p. 45). Failure to achieve full citizenship rights can be experienced by elderly people in similar ways to disabled people. For example, if they experience difficulties with mobility and transport related to disability or frailty, the same issues of access that apply to disabled people often restrict older people as well. It has been suggested (Willis, 1993, p. 9) that a “language of entitlement” conveying “the right to be treated as fully competent, autonomous individuals” ought to replace ‘the language of community care’ when applied to elderly people as well as to disabled people.

Two situations in which some elderly people in New Zealand are seen to be failing to achieve full citizenship rights have recently been addressed by the Law Commission. These are retirement villages and Enduring Powers of Attorney. In the case of retirement villages, the Law Commission’s Report (1999, p. 7) argues that the very fact that the consumers concerned are in a particular age group (sixty-five to eighty-eight) justifies special protections. Illustrating the complexity of citizenship rights, this appears to be a situation where “equality, based on removal of disadvantage, may in fact require that people be treated differently, and not the same” (Cheyne et al, 2000, p. 59). At the same time, though carefully worded to avoid generalising, the report runs the risk, while trying to protect those who are vulnerable, of appearing to promote an image of old people as inherently inept and incapable of making their own decisions. In its discussion paper “Misuses of Enduring Powers of Attorney”, released on 31 July 2000, the Law Commission acknowledged that although there is “strong evidence that abuse occurs” there are no effective safeguards against it (www.lawcom.govt.nz). Elder

abuse is an area where citizenship rights are invoked only in the event that they are violated (Alfonsi, 1997). It also appears to be a risk or a 'hazard', in Urry's (2000) terms, in which the state has limited power to guarantee the safety of the citizen.

Theories of ageing which take an implicit citizenship approach include the political economy approach, which attempts to explain the status of old people in terms of their 'structured dependency', created by the effects of social policy, the societal structures of the labour market and the economy, and also the way people in society are divided according to their class, race and gender (Phillipson and Walker (Eds), 1986). However, this approach has been criticised on the grounds that, in advocating full citizenship rights for older people and trying to overcome 'dependency' by focusing almost exclusively on the structure of society, it tends to over-state both the homogeneity and the relative disadvantage and powerlessness of elderly people (Higgs, 1997; Koopman-Boyden, 1993). In addition, it overlooks the role played by interpretation and meaning in the everyday lived experiences of elderly people (Koopman-Boyden, 1993), and ignores the existence of more affluent sections of the older population, increasing numbers of whom are constructing old age as a process of lifestyle and leisure (Higgs, 1997). Higgs (ibid, p. 129) argues further that the growing importance of consumption and lifestyle as features of modern life has undermined many of the assumptions of citizenship theory and practice. In particular its universalist, collectivist foundations and the substantive rights of social citizenship are being replaced, in the context of British social policy, by a regime of individual contracts and surveillance in which the citizen "is there to be monitored for 'risk', not to be active" (ibid). In this contradictory new mode of citizenship, he contends, the idea that older people will be able to exercise rights as consumers is naive:

Citizens, through 'technologies of the self' (Foucault, 1988), are encouraged to take greater personal responsibility for their health and for extending the period of their third age; however, as those who move into a fourth age of needing health and welfare services discover, at this point they are transformed from consumers into objects of consumption (ibid, p. 129).

The power of the 'medical gaze' and the "surveying state" to create "a sub-class of consumers unable to exercise choice, even though they are the only ones eligible to receive services paid for or organised by the state" (ibid, p. 129) is also pertinent to Oliver's (1996) consideration of citizenship in respect of people who belong to more than one 'oppressed' group. Referring to the situation of older

disabled people, he argues (1996, pp. 51 - 52), quoting from a previous study by Zarb and Oliver, that “the combination of ageism, disablism and other forms of oppression means that many are forced into a life of dependency and denied even the most basic rights of citizenship”.

Citizenship for Older Gay People

A different kind of denial of their citizenship rights may face older people who belong to other minority groups such as the lesbian and gay community. There is evidence to suggest that older people “may feel obliged to express satisfaction with services and not complain because they fear that the service might be taken away or reduced as a result” (Willis, p. 11). As well as the lack of power felt by many older people in the community, older gay and lesbian people may find themselves facing the issue of invisibility raised by Harrison (2000). Invisibility, she argues, acts in a cyclical way: if sexual minorities lead hidden lives, their needs are not acknowledged and there is no evident need to provide services. Gay and lesbian baby boomers, many of whom will have been influenced by the Gay Liberation movement, are seriously afraid, she warns, of becoming dependent on aged care services where they are likely to encounter homophobic attitudes and services. Hospital and residential admission forms, for example, exclude the experience of gay and lesbian clients, and training does not prepare staff for situations where gay and lesbian clients need services. Harrison also draws attention to the “heteronormativity” of most gerontology literature, revealing a discourse which excludes the experience of homosexuality. Likewise, it is possible that there were older lesbian or gay people amongst my research participants who remained invisible and their stories untold because of this “heteronormativity” which is excluding of their experiences.

Citizenship for Older Ethnic Minorities

Despite a rhetoric of inclusion, Castles’ (2000) investigation of the extent to which members of ethnic minorities are full citizens in western nation-states concludes that formal inclusion has not led to full political participation, or to economic and social citizenship. In addition to a failure of the state to contain the racism that is directed against some groups of people, Castles notes that one of the key impacts of globalisation and economic restructuring is a growing spatial differential within cities, divided into two main categories of social exclusion and social segmentation. Social segmentation occurs when people are “incompletely incorporated into mainstream economic and social systems with continuing discrimination of various kinds” (ibid, p. 33), rendering their position insecure and their social citizenship

unable to be guaranteed. Beyond this, however, Castles argues (ibid, p 33) certain minority groups suffer social exclusion:

These are generally racially or culturally distinct minority groups, who are particularly susceptible to marginalization, due to a weak legal position, racial stigmatization, lack of human capital, and specific historical conflicts ... Members of these groups do not enjoy social citizenship. ... Their disadvantage is so severe as to weaken the social bond and to question the strength of citizenship as an integrating force in contemporary society.

It is possible to suggest that the spatial segregation that occurs when old people are at first incompletely included in certain social systems, (for example by being labelled 'economically inactive' or 'dependent'), stigmatised, and finally confined to purpose-built institutions, is analogous to the "downward drift" towards "ethnic enclaves" that Castles (ibid) describes for ethnic minorities. Despite these assertions, however, it is possible, as my research shows, that belonging to an ethnic minority can actually *enhance* the citizenship status of elderly (Maori) people by excluding them from the ageism of mainstream society.

Citizenship for Older Maori

In the New Zealand context there are concerns by and for older Maori about the 'euronormativity' of social policies and social services which rely on "excessive reference to the norms of the majority" (Durie, 1998, p. 91). Maori social policy, based on the Treaty of Waitangi, has sought to promote the well-being of Maori with reference to a world-view that emphasises and values collective identity and a unity between the material and the spiritual worlds (Cheyne et al, 2000, p 47). Inherently holistic, it is based on concepts of whanau and hapu networks and social connections based on the models of the extended family and tribal obligations (Durie, 1998). Durie (ibid, p. 91) argues that "outcome measures preferred by Maori are those which recognise the importance of being able to remain Maori in a cultural and lifestyle sense". In practice, however, according to Durie, in spite of claims of cultural sensitivity, "the formulation of social policies, if not the delivery of social services, is still heavily biased towards Eurocentric views and philosophies" (ibid, p. 91). As a result, despite the Crown's Treaty obligation "to actively protect Maori citizenship rights" (ibid, p. 99), there is a shortage of specific services for older Maori people which enable them to remain Maori in their culture and lifestyle, and thus to take up the rights and responsibilities of full citizens. A further difficulty with a normative approach stems from the diversity of Maori lifestyles (Durie, 1998).

Citizenship and Social Standing

Oliver (1996, p. 49) argues that the failure to achieve full citizenship rights “may call into question the idea of citizenship as a means to the social integration of individuals into society”. At any rate the discussion so far has shown that the social rights that allow and ensure membership of a community, even if secure in theory, are vulnerable in practice. To address this vulnerability:

citizenship requires some specification, and some institutional protection, separate from and beyond the simple extension of democracy. ... It appears that a plausible resolution of some of the dilemmas of contemporary politics can only be provided if enhanced political participation is embedded in a legal and constitutional framework that protects and nurtures individuals, and other social categories, as ‘free and equal citizens’ (Held, 1991, p. 23).

Plant (1991, p. 63) argues similarly, that:

the social rights of citizenship ... have to be redefined in today's more individualistic and consumer-oriented context; and the issues of enforceability of rights and the reciprocity of rights and obligations will have to be developed in practice.

Lister (1997) argues, as did Marshall (1950), that the notion of citizenship has potential as an organising principle in that it offers an ideal to which efforts may be directed, and against which progress can be measured. Taking Marshall's famous essay as a focus of engagement, Vogel and Moran (1991) argue that, while current debates about the nature of citizenship can be used to serve partisan political functions, they have also opened the contested nature of the territorial, temporal, social, political and behavioural frontiers of citizenship to critical analysis.

Citizenship and Civil Society

Janoski (1998) conceptualises the processes of citizenship as taking place within civil society, spread across four overlapping and interactive spheres of society, the private, market, public and state. In his definition of civil society, the state sphere includes the executive, judiciary and bureaucratic functions of the state, while the private sphere consists of family life, networks of friends and acquaintances, and the disposition of private property. Between these two spheres, interacting with both as well as with each other, are the more complex public sphere, including a wide range of voluntary associations, interest groups and social movements, and the market sphere, including private and some public organisations whose primary function is to generate income through the production of goods and services.

This conceptualisation of civil society is a useful descriptive way of contextualising

the relationship between the state and the citizen, and the nature and function of what Janoski calls “mediating institutions” (ibid, p. 12). While citizenship rights are vested in the state sphere and depend on bureaucratic and political implementation through legal sanctions, the debate over citizenship takes place in the public sphere “where any group or person can make citizenship claims” (ibid, p. 17). Thus the processes and practices of citizenship take place within and between, and are mediated by the organisations and networks of all four spheres. Public and private relationships are not confined to the public and private spheres, but are distributed differentially among all four spheres. The extent of the overlaps between spheres and the size of each sphere relative to the others are critical aspects of a framework which may be used to evaluate a society in terms of social interconnectedness and citizen participation.

Janoski’s final vision of citizenship is prescriptive and conservative in its emphasis on sanctions, obligations and social closure (for example, he advocates limiting “aimless” (ibid, p. 236) geographical and social mobility in order to build community), and fails to acknowledge the gender implications of the ideological construction of the public-private divide except in a cursory end-note to the effect that “feminism” is on the side of pushing private questions into the public sphere (ibid, p. 265). Notwithstanding these emphases and omissions, Janoski’s conceptualisation of relational networks operating within and between the various spheres in civil society avoids a rigid conceptual division between public life and the private life of the family, thereby offering a perspective from which unequal power relations may be identified and challenged, whether they occur in the bedroom or the boardroom, to modify Cox’s (2000) apt expression. Cox seeks to overcome the gender bias of the ideological division between public and private by defining civil society as public space and placing all relationships along a continuum which includes family, community, market and state. A particular advantage of Janoski’s framework is that it allows for a more nuanced understanding of family. For example, families can be sites of protection from racist oppression, and exploitation of low-paid workers, as well as of sexual oppression (Lister, 1997). Lister argues that in the project of “engendering” (ibid, p. 125) citizenship, the public-private divide has to be seen as a movable political construction which is subject to continuous struggle and negotiation to control its meaning and its location. By positioning public and private as overlapping, interactive spheres within civil society, Janoski’s model is compatible with a

performative, relational kind of citizenship such as that envisaged by Somers (1993) and Joseph (1999).

Summary

This chapter has outlined the way the idea of citizenship has developed from its exclusive beginnings in the Greek city-state. Marshall's influential model represented the social rights secured during the twentieth century as the third stage of a tripartite process of accumulation in which civil and political rights had been acquired in the eighteenth and nineteenth centuries respectively. Marshall's thesis took account of the inequalities of social class, but ignored other inequalities. More recently, feminist scholarship has been instrumental in showing that the exclusion of women was integral to both the theory and practice of citizenship from its very beginnings. In addition a variety of theorists have shown how Marshall's model of citizenship failed to account for the experiences of women and minority groups in modern societies, and the possibility of global citizenships operating outside the boundaries of nation-states.

Theories of citizenship which do begin to account for the everyday experiences of people in heterogeneous modern societies include those which view citizens as autonomous agents engaged in relational networks and in processes of citizenship. Thus a view of citizenship begins to emerge which is grounded in relationships rather than individual status, flow rather than stasis, and active performance rather than passive rights. The notion of agency is integral to these conceptions of citizenship, and rights are conceived of as always under negotiation, needing to be defended and extended through political participation, and extending well beyond the formal rights envisaged by Marshall. This chapter has reviewed theoretical approaches to citizenship in order to show how writers from Aristotle on have developed ways of thinking about citizenship in terms of rights and responsibilities, status and process, national and international institutions, spheres of civil society, the individual and the group, and most recently, gender, culture and ethnicity. The aim of this review has been to identify the elements of a theoretical model of citizenship in order to be able to develop a conceptual model of senior citizenship against which the current realities of older people in New Zealand society may be measured. Taking up Joseph's idea (1999, p. 4) that "the lifeworld of citizenship entails a network of performed affiliations - private and public, formal and informal", the following chapter will investigate the various possibilities which exist for older people to perform such affiliations and enact their citizenship.

Chapter Four:

Avenues of Citizenship

The public sphere denotes a contested participatory site in which actors with overlapping identities as legal subjects, citizens, economic actors, and family and community members, form a public body and engage in negotiations and contestations over political and social life (Somers, 1993, p. 589).

Introduction

This chapter will consider in detail the arenas for citizenship introduced in Chapter Three, examining the extent to which older people in New Zealand are able to access opportunities to exercise their citizenship. The chapter begins by considering some of the attitudinal barriers that mediate the experience of older people as citizens, and goes on to consider the avenues that are available to older people in western societies, and New Zealand society in particular, for participation and the performance of citizenship. Section One discusses the avenues of civil society, and Section Two the community connections through which older people may perform their citizenship.

Public Attitudes to Older People as Citizens

Despite the resonance that citizenship has for many people (Lister, 1997), consultation with senior citizens in New Zealand has revealed that they generally feel they are portrayed as a burden on 'society', regarded negatively, treated with a lack of respect and understanding, patronised, stereotyped, labelled and treated like children, and that "their wants and needs are often overlooked or given low priority" (Senior Citizens' Unit, 1990, p. 22). Senior citizens have reported feeling "discarded and marginalised by our society as being no longer relevant or able to participate in meaningful ways" (Prime Ministerial Task Force on Positive Ageing, 1997a, p. 10). While the Task Force recommended the adoption of a code of practice to eliminate ageism in the media, this move was not supported by either the Newspaper Publishers' Association or the Broadcasting Standards Authority. Australian research (Minichiello, Browne and Kendig, 2000) has also found that older people as a group are treated negatively, with the health system and health professionals recognised as major sources of ageist attitudes and treatment. It has been acknowledged by New Zealand geriatrician Dr Margaret Guthrie (in Gillon, 2001, p. 38) that many GPs "confuse ageing with illness per se":

'What do you expect at your age?' is a mindset that prevents them adequately investigating what might well be a treatable illness. It also upsets older people very much. They depart from a consultation feeling hurt and put down in an ageist way.

Health researchers have found that negative stereotypes about ageing can affect physical function in older people, including how fast and how steadily they walk (New Zealand GP, 17 November 1999). All forms of ageism can be damaging to older people, but ageism in interpersonal relationships may especially harm an older person's "self-perceptions and their feeling of safety in the community" (Minichiello et al, p. 275). Positive attitudes to ageing and towards older people were identified by Dwyer, Gray and Renwick (2000) as critical to the independence of older people, and ranked in order of importance above income, support with health and disability needs, housing and security, access to transport, recreation, education and use of public amenities, and work. The authors argue that the prevalent view of older people as dependent and as a burden on society is costly in a number of ways. Firstly, in failing to acknowledge or preserve an active and useful role for older people it is blind to the interdependence of all citizens of a society and the transfers of money and support from older to younger generations that keep a community going. It undermines the confidence and assertiveness of older people, and hence their ability to look after themselves and others. It contributes to a sense of isolation, exclusion and depression, accentuating intergenerational divisions, and it leads to services and amenities which do not take account of the needs of older people.

The question is, is this the full story? Is ageism so fundamental to our entire civilisation, as some writers have claimed (de Beauvoir, 1977; Hazan, 1994), that there is little hope of realising the 1999 United Nations International Year of Older Persons goal of "a society for all ages"? Will older people, as they begin to display in their bodies the visible signs of ageing, have to resign themselves to keeping out of sight in order not to upset those younger members of society who do not wish to be reminded of their own mortality? When they feel the Fourth Age coming on, will they need to learn to 'grow old gracefully', recognise that they have 'had their day' and remove themselves quietly and graciously from the mainstream society in order not to be a nuisance? Featherstone and Hepworth (1993, p. 331) have argued that indeed the "disturbing image of old age as a dirty secret ... will be difficult to displace from centre-stage".

Citizenship operates to exclude or to include individuals and groups through formal and substantive modes of citizenship (Lister, 1997). Formal citizenship is an

essential but insufficient condition of substantive citizenship. Racial discrimination, harassment and violence are some of the “exclusionary processes” (ibid, p. 43) that undermine substantive citizenship for some citizens, including elderly citizens. Social divisions and poverty also erode full citizenship, as do restrictions on mobility, transport and access to buildings and services. When physical or mental health and safety is compromised by poorly maintained footpaths or lack of lighting, or by restricted access to health care, citizenship rights are involved. Older people are discriminated against, for example, when those over 65 (and “housewives”) have to wait for surgery while priority is given to “workers” (Hawke’s Bay Today, February 21 and 22, 2001), and when a local newspaper columnist refers to “old-age pensioners ... who refuse to accept that the nation can’t afford them” (Duff in Hawkes Bay Today, June 11, 2001).

While the exclusionary power of formal citizenship is an issue for some immigrant groups, such as elderly Pacific Island ‘overstayers’ in New Zealand, for most older New Zealanders, whose legal status as citizens is not in question, it is the social consequences of ageist attitudes that mediate their ability to enjoy full citizenship. For example, many older New Zealanders are subject to fear of violence, which can lead to a loss of freedom and mobility and to a degree of self-imposed isolation. Verbal, physical, financial or emotional abuse all have the potential to impinge upon people’s rights and to violate the United Nations (1991) principle that older persons should be able to live in dignity and security and be free of exploitation and physical and mental abuse. Each has the potential to erode the substantive citizenship of senior citizens. Taking up the idea that “the lifeworld of citizenship entails a network of performed affiliations - private and public, formal and informal” (Joseph, 1999, p. 4), this chapter investigates the possibilities which exist for older people to perform such affiliations and ‘enact’ their citizenship.

Section One: Civil Society

Lister (1997) argues, as did Marshall (1950), that the notion of citizenship has potential as an organising principle in that it offers an ideal to which efforts may be directed, and against which progress can be measured. Building on Lister’s conception of the public-private divide as a movable political construction which is subject to continuous struggle and negotiation to control its meaning and its location and using Janoski’s model of civil society as outlined in Chapter Three, this chapter will examine the myriad complex networks of society to assess the extent to which they afford older people opportunities to exercise their citizenship

in and through their relational networks. In order to examine the extent to which the 'instituted processes' (Somers, 1993, p. 589) of citizenship are available to older people, I begin with a discussion of the political institutions in which people may, or may not, participate as citizens. The sections which follow will discuss in turn the labour market, the community and the family, exploring each in order to understand their importance as arenas for the performance of citizenship for older people, especially of the third age.

Participation

Genuine participation may be limited by physiological constraints as well as by limitations on access in an ageist society. For this reason I distinguish here between older people of the Third Age for whom the main limitations on participation will be structural, and with whom I am mainly concerned, and those of the fourth age whose physical and mental capacity may constitute major limiting factors in addition to the structural ones.

Research about elderly people and political participation tends to fall roughly into three arenas of national politics (e.g. Levine and Roberts, 1993; Phillipson, 1982; Vincent, 1996; Cutler, 1983; Binstock, 2000), local government (e.g. Gee and Glasgow, 2000; Willis, 1993), and the environment of community or residential care (e.g. Biehal, 1993; Abbott, Fisk and Forward, 2000). The possibilities for participation by older people in each arena will be discussed in turn.

Political Activity

The Citizen as Voter

Citizenship as political enfranchisement has become progressively more inclusive, gradually giving almost everyone over the age of eighteen the right to vote in elections, which are held in New Zealand every three years. Although it has generally been considered an obligation of citizenship to exercise one's vote, participation has often been so low that some countries, Australia for example, have introduced legislation that makes voting a legal obligation (Heater, 1990). Levels of political participation are influenced by class, with non-voters in New Zealand more likely to be poorer, younger people of Maori or Pacific Island ethnicity (Ministry of Social Policy, 2001b, p. 58), divisions which may relate to the perception that the benefits of participation tend to go to those who are already well off (Pateman, 1989). Political participation is also influenced by age, New Zealand and overseas evidence suggesting that as people grow older they become more rather than less likely to vote (Levine and Roberts, 1993; Cutler, 1983). Voter

turnout rates, which can be seen as indicating levels of citizen involvement in the political process, and trust in political institutions, are high in New Zealand, at around 80 per cent, though this is declining slowly in line with trends in other OECD countries, and tends to be lowest in provincial cities (Ministry of Social Policy, 2001b).

In 1990 Age Concern called for changes to income support, health, social services, education, transport and the human rights legislation, in the process drawing attention to the capacity of elderly people to mobilise their votes on age-related issues (Levine and Roberts, 1993). In the 1999 general election Grey Power promoted older people's issues, particularly superannuation and health, and then celebrated the election of the Labour-Alliance coalition and the "break with the treachery and opportunism" of the previous Government (Grey Power Magazine, December, 1999, p. 3). As Levine and Roberts (1993) note, the issue of superannuation is likely to emerge as a major election issue whenever its continuity (and adequacy) is in doubt. The influence of older voters may increase as both the number and the proportion of older people in the population continue to grow, and increase sharply in the first half of the 21st century, reaching 25 per cent or well over a million people, by 2051 (Statistics New Zealand, 1997, p. 14). In summary, although any sense of political equality is largely an illusion, with electoral participation varying according to socioeconomic status and age, voting offers old people an active, but extremely limited form of political participation.

The Active Citizen

The right of older people to form movements or associations of older people is affirmed in Principle Nine of the United Nations Principles (Age Concern, 2000, Appendix Five), and indeed a long philosophical tradition affirms the value of citizen participation in civic and public affairs. This is because participation "affirms dignity and self-respect; it develops political and moral awareness and responsibility; it develops community cohesion; and it empowers communities, community groups and individuals to pursue their own interests and to challenge existing power structures" (Abbott, Fisk and Forward, 2000, p. 327).

Since the late 1960s there has been increasing recognition of forms of political action beyond the limited and occasional exercising of the right to vote for elected representatives. In particular, Forge, Cheyne and McDermott (1999, p. 7) note "the growing influence of new social movements and consumerism (which) have seen recourse to more direct action such as petitions, marches, rallies, boycotts,

strikes and demonstrations”, all struggles which have contributed to a proliferation of political ‘spaces’ and, more fundamentally, a renegotiation of citizenship. The evidence of such movements suggests that social wellbeing derives “not merely from familiar forms of security and support (such as income, health care, and access to tertiary education) but also from the health of democratic structures and processes” (ibid). Initiatives mounted by older people themselves, such as the Gray Panthers in the United States, have offered a model for collective political action against a broad range of ageist attitudes and policies (Bytheway, 1995).

Arguing that material and social factors which mitigate against political participation will be outweighed by the sheer numbers of older people in the future, Phillipson (1982) has predicted that political action by older people in Britain will become increasingly common, and will be based on a broader range of issues, with the pensioner organisations of the future drawn either along class lines, for example related to superannuation issues, or single issue campaigns around issues like health and education facilities, which would attract a broad coalition of support. In America the demographic changes which will produce larger numbers of better educated old people are expected to lead to an increasingly important role for age in political affairs (Cutler, 1983). In New Zealand the appointment of a Minister for Senior Citizens in 1990 identified the needs of older people as a substantive policy area. Despite a perceived age disparity between the politicians making policy and the people “consuming” it (Levine and Roberts, 1993), there have been signs of a broadening agenda among those promoting the interests of elderly people, Grey Power’s criticism of the sale of state-owned assets being one example.

However, in New Zealand at least, predictions of greater political participation in the future may be compromised by socioeconomic factors. A recent report (Fergusson et al, 2001, p. 5) found that while most older people had relatively few material restrictions and difficulties:

the person most at risk of poor living standards was characterised by a mix of low income, no savings, high accommodation costs, a history of economic stress, being younger (aged from 65 - 69 years), being of Maori or Pacific ethnicity, and having held a low-status occupation.

The implications of these findings for the future are that more older people will be poorer than current generations of older people and the experiences of their generational cohort will have reinforced the notion that political participation, even in its weakest form of voting every three years, is not worth their while.

The language and values of citizenship are increasingly influential in shaping theory in the politics of various social movements in the United Kingdom (Lister, 1997). Citizenship as a process in which active engagement in the struggle to extend or defend rights is as important as the substance of the rights themselves combines elements of the participatory republican and liberal-social rights traditions of citizenship, with the notion of human agency providing the link between them (Lister, 1997). The two different approaches to citizenship reflect different emphases on the individual and the community. Liberals argue that individual freedom is the core attribute of a democracy (Forgie et al, 1999) and that every citizen should have equal formal civil and political rights. In this approach social rights equate to equal opportunity, with welfare assistance available in the event of misfortune (Cheyne et al, 2000). Civic republicanism, on the other hand, emphasises political participation for the common good and represents a demanding conception of citizenship as obligation, in which citizens transcend the interests of their own particular group by engaging in collective political activity (Lister, 1997). The American Gray Panthers have taken this approach in fighting against discrimination against both young and old and for a society which includes people of all ages (Bornat et al, 1985). In New Zealand the Grey Power movement seems to have aligned itself much more closely with the liberal rights tradition, showing little interest in an intergenerational approach. In summary, older people are more likely than people of other ages to vote, and in New Zealand they have an advocate at ministerial level in the Minister for Senior Citizens. Levels of political participation are predicted to rise as the population ages, but this will depend upon the socioeconomic status of senior citizens in the future. Another arena in which older people may gain more power with greater numbers is that of health and social services.

Senior Citizens as Service Users and Service Providers

In public services driven by market models participation has been defined as consumer choice, with service users regarded as consumers who will benefit from competition between a range of providers (Biehal, 1993). Yet old people who are the recipients of community or residential care services can not be equated with consumers of commercial services because they are seldom in a position to "take their custom elsewhere" (ibid, p. 444). People in the third age are also major voluntary providers of formal and informal support services to other older people.

Lister (1997) has proposed that an emphasis on user involvement in welfare services, both statutory and voluntary, brings together a rights-based notion of citizenship as status and a complementary understanding of citizenship as practice. Greater user involvement in decision making in the context of community care can be a strategy for helping to ensure that users are treated in a way that offers them full and equal, rather than different and limited, citizenship (Biehal, 1993). Policy statements setting out user rights need to be backed up by specific strategies for user participation in decision-making to make any difference in practice. Access to information, both information about services and information that is held about individuals themselves, is an important part of the process: failure to provide adequate information to users may limit participation and serve as a covert means of rationing services. Also important, and complex, is the definition of need, commonly imposed by professionals to correspond with existing services. Barriers to participation can occur at both the individual and the structural level, arising from a reluctance by workers to encourage participation, from the low expectations of service users themselves, and also from resource rationing imposed by budget constraints (ibid).

Although only a small minority of third age people live in residential settings at present, it is an option that increasing numbers of retired people are choosing. An ageing population with burgeoning numbers of third agers is seen as a rich marketing opportunity for a range of increasingly upmarket shared and/or sheltered housing options. Social and democratic participation in residential settings for older people in England and Wales was the subject of a study by Abbott et al (2000). They found (ibid, p. 335) that while the notion of participation “logically includes the notion that discussion is permissible and encouraged, very few informants indicated that they felt able to make suggestions or complaints”, no residents or staff indicated the existence of a complaints procedure, and just four out of over a hundred residents “expressed clearly and positively their aspirations to be involved more strategically in the running of the residence” (ibid, p. 336). Staff appeared to regard social contact as the major mode of participation, and democratic participation in the management of the residence as of little or no importance. In general, Abbott et al (ibid, p. 339) found that the five principles of access, information, choice, redress and representation which underpin a citizen-consumer model were not adhered to or pursued in the situations in which their informants lived. To summarise, senior citizens who need health or social service support in the community, or in residential care, have little real choice among

service providers and hence limited power to exercise their citizenship. As growing numbers of well-off older people choose residential lifestyle options, however, they may be in a stronger position if they are perceived as consumers rather than service users, and if consumer rights are upheld in practice.

The Citizen as Consumer

The citizen as consumer is a relatively recent concept with the potential to assure quality and accountability and influence responsiveness to the voices and needs of service users (ibid), although there are limitations to the consumer model, which Cheyne et al (2000, p. 136) argue is quite different from participation:

While an individual may be able to seek redress where there has been a breach of agreed service, this approach is individualistic and complaints-based and provides for only a limited form of user influence in shaping public services.

A key determinant of the level of interest in consumer needs or preferences is the vulnerability of the producer, as became apparent for New Zealanders in the 2001 winter power crisis when dissatisfied consumers left one electricity supply company only to find they were not wanted as customers of another company: neither voice nor exit was an effective option in this instance. Abbott et al (2000, p. 328) argue that “the scope for people to act fully as citizens and/or consumers is eroded as they become older”, partly as a result of the socially constructed dependency and assumed passivity frequently attributed to older people (ibid). Opportunities for participation as citizen consumers by older people are eroded by the trend, noticeable during the last few years in New Zealand, to remove post offices which are extremely important to many older people, as well as banking and retail services from smaller communities. This has changed the basis of service provision (Forgie et al, p. 59) for a group of people, amongst whom are those who have chosen to retire to smaller communities precisely because of the ease of access to services, as well as lower housing costs which leave them with a higher disposable income.

In New Zealand it has been shown that most older people have access to considerable resources (Fergusson et al, 2001). Due to the effects of ageism, however, they are not widely perceived as members of a powerful consumer market. The exception to this is specialised markets such as the retirement accommodation industry, which caters for the wealthiest old people. Many of the poorest, typified by those who do not own their own homes, depend on local government rental flats for their access to accommodation. The next section will

explore the role of local government in providing opportunities for older people to exercise their citizenship, as voters, participants, service users and consumers.

Local Government

Acknowledging different communities of interest, and giving local people a voice in community matters are both important functions of local government in New Zealand (Forgie et al, 1999). A low voter turnout (an average of 49 per cent from 1962 to 1999) raises questions about how well these purposes are being achieved (ibid). Accountability and opportunities for participation depend largely on the annual planning process. Gee and Glasgow (2000) found that most councils consult beyond the statutory requirements by publicising the plan or holding meetings or briefings. Some councils have developed specific mechanisms for older people or their organisations to have an input into the strategic planning process. More rarely, an individual on the council is given responsibility for older persons' issues. This strategy was explicitly rejected by a local council on the grounds that older "does not necessarily mean wiser" (Hawkes Bay Today, April 21, 2001).

Gee and Glasgow found (2000, p. 13) that the perception that older people "take more interest in Council activities and therefore have more input" matches international research which shows that up until very old age older people are more likely to vote in both national and local elections. The researchers suggest (ibid) that the "active citizenship" of older people may reflect the fact that, being out of the work force, they have more time to participate, and it may also reflect values such as patriotism and civic duty. A lack of education or relevant information, coming from a non English speaking background, poor health, disability, reduced mobility, difficulties with transport, and caregiver commitments may all limit participation in such processes for older people. As well as good information, which is a prerequisite for involvement in the decision-making process, participants need affirmation, for example that they will not be perceived as complainers, that their investment of time is worthwhile, and that the consultation is 'real' (ibid, p. 13). The researchers found that just three of the 74 councils reported developing specific older people's policies, with accompanying action plans and review processes.

On enquiry, both Hastings District Council and Napier City Council personnel advised that their councils' support of older citizens was limited to the provision of low-cost one-bedroom rental flats for people over sixty. The 1996 census found

that 13,056 older people, or over a quarter of those who rent, had a local authority as their landlord (Gee and Glasgow, 2000, p. 21). For these people, councils can provide a secure and supportive environment, and enhanced opportunities for participation and for ageing in place by careful planning and attention to design standards. Local government provision of well designed and maintained low-cost housing, subsidised travel, recreational and educational facilities, and free information and advice can all reduce the impact of low income on older people and enhance their opportunities to participate as active citizens (Willis, 1993). Libraries, which are used more by older people than by any other age groups, are identified by Gee and Glasgow (2000) as a key source of information, socialisation and education, as well as access to and training in internet technology for older people. While these facilities have the potential to strengthen citizenship rights for older people by supporting their inclusion and participation in the community, the report cited above indicates that only about a third of New Zealand local authorities intend to increase “services, strategies and activities with older people” over the next three to five years (ibid, p. 58). Another avenue of participation in the community, with which most older people have an extremely tenuous and usually retrospective relationship is the labour market.

Citizens as Workers

Income from paid work is “a primary determinant” of living standards for most New Zealanders, and the income people manage to save during their working lives contributes to their standard of living on retirement (Ministry of Social Policy, 2001b, p. 48). Employment is also an important way in which people gain access to participation in society, social status and a sense of social connectedness (ibid). Paid work is closely associated with self-esteem, wellbeing and a sense of belonging. A major contradiction exists in our society between the existence of a healthy, able, ageing population and a labour market which does not want older workers, and in which the number of jobs which pay a living wage is falling. By 2000, it was reported recently (Weekend Herald, March 30 - 31, 2002, p. G3) the percentage of long-term unemployed in the 45 to 54 age group had risen to more than 45 per cent. These figures indicate a mismatch between older workers and the job market which researchers have concluded “is creating serious social exclusion” and a “powerful and perceptible loss of psychological wellbeing experienced by older people seeking work (which) cannot be conveyed in any description of quantitative data or its analysis” (ibid).

Although changes to the Human Rights Act in 1999 made age discrimination in

the workplace illegal in New Zealand, and the labour force is defined as those over fifteen who are employed or registered as unemployed (Ministry of Social Policy, 2001b), employment statistics, usually given only for people up to age sixty-four, still reflect a close link with the age of entitlement for superannuation. The Prime Ministerial Task Force on Positive Ageing (1997a, p. 10) found widespread evidence of age discrimination in the workplace and heard that:

Many people felt discarded and marginalised by our society as no longer being relevant or able to participate in meaningful ways, and disliked the idea of having a “use by” date implied by the word “retirement”.

Looking back to the introduction of a means-tested old age pension at age 65 (when the average male life expectancy at birth was 57.4 years and female life expectancy was 60 years), the Task Force (*ibid*, pp 15 - 16) argued that this “milestone in the development of our welfare state” also “served to define old age in chronological terms and perhaps unwittingly, to characterise older people generally as unproductive and cause them to withdraw from the social and economic mainstream”. Despite the argument that the payment of a universal pension reinforces ageist stereotypes (*ibid*, p. 17), any attempt to encourage people to remain in work longer by raising the age of entitlement for New Zealand Superannuation would cause hardship to many, perpetuating inequality into old age. Such a move would also be considered discriminatory in New Zealand on account of the significantly lower Maori life expectancy. Indeed the question has already been raised as to whether eligibility for Maori should be set at a lower age than for Pakeha (Maaka, 1993).

Despite efforts by successive governments to encourage private superannuation schemes to play a greater role in supporting the income of elderly people (Dharmalingam and Barnes, 1998), only 17 per cent of New Zealand employees contribute to an employer superannuation scheme, compared with 90 per cent in Australia, 51 per cent in America and 50 per cent in Britain (Patterson, 1999, p. 11). In addition, as Patterson points out (*ibid*, pp 11 - 12), the New Zealand trend towards decreasing levels of secure employment with increasing age is likely to reduce the capacity of many people to save adequately for their retirement, raising the likelihood that for many people New Zealand Superannuation will be their sole source of income in retirement. Arguing that most people find life more satisfying if they are involved in “interactive and productive activities”, Patterson suggests (*ibid*, p. 12) that as a society we need to develop “a norm of continuing and changing activities, some paid and some not, throughout life”. Being involved in such activities means taking advantage of opportunities for senior citizens to participate at the local level in their communities.

Section Two: Community Connections

Community, like citizenship itself, is “an increasingly contested concept” (Lister, 1997, p. 14). It is however, generally accepted that most citizen participation will take place at the local level, and Lister suggests that “the more remote the locus of politics, the less likely it is that people will become involved” (ibid, p. 27). Citizens are affected by decisions made at local neighbourhood level, as well as at national and international levels, so the practice of citizenship has to be able to incorporate all these levels. Part of the importance of citizenship lies in fact, in its creation of “a sense of community” (Lister, 1997, p. 27). Citizens who make their own choices about where and when to be active will create a sense of community. Community is located therefore, “not in formal organisation, but wherever there are individuals who take the practice of citizenship seriously” (Oldfield, cited in Lister, 1997, p. 28). Lister’s emphasis on the inseparability of the public and private spheres is echoed by Voet’s (1998, p. 137) argument that “the borderline between social and political participation evaporates” in the kind of citizenship activities “through which one rejuvenates society by cooperating with other people”.

Community and a community building approach is a key concept in this study because of the way that bringing older people together in their local communities offers opportunities for them to focus on particular issues in a constructive and active way. Using and celebrating existing community links and networks helps to highlight community resources and assets and avoid a preoccupation with the problems and deficits which are inclined to dominate media attention and can become dispiriting for older people who live in a community. Elliott (2000, p. 106) argues that while stocks of social capital are to be found throughout a community, there appear to be some points in the lives of individuals, families and communities where the potential for building community and generating social capital is enhanced. Following Vaillant’s (1993) adaptation of Erikson’s theory of adult development suggests that the later life tasks of generativity and “keeper of the meaning” (ibid, p. 145) are likely to make old age an opportune time for family and community building activities. Developing the human capital, that is the skills and knowledge, of the people in a community, and attending to the physical infrastructure, so that people have access to venues and activities that enable them to meet and get to know each other are important prerequisites for the development of social capital, as are adequate levels of material wellbeing. Support for elderly people in a community depends also on the generation of “ethical capital” as well as physical and human capital (Dharmalingam and Barnes, 1998, p. 15).

Active “ecological citizenship”, rooted in particular local communities (Lister, 1997) provides opportunities for older people to express their appreciation of and concern for the environment as well as to engage in activities that are generative in the sense of leaving an environmental legacy for future generations. Although substantiating data is not available by age, anecdotal evidence suggests that substantial numbers of older New Zealanders express and exercise their “ecological citizenship” (Lister, 1997, p. 27) through membership of national and international organisations such as The Royal Society for the Protection of Forest and Bird, Greenpeace, and various local groups such as the church-based one which featured strongly in one of my research groups. A woman celebrating her hundredth birthday was described as having been “actively involved in getting the “industrial” designation of Ahuriri changed to “residential” which resulted in the beautification of the area” (Hawke’s Bay Today, June 22, 2002).

For Maori the notion of community is strongly linked to the environment through the role incumbent on tangata whenua “to be guardians of a resource or taonga for future generations” (Durie, 1998, p. 23). Maori notions of community are associated with iwi and hapu boundaries where there is a close cultural and historical attachment to tribal land (Te Puni Kokiri, 2001). Almost a quarter of Maori, however, do not associate with any iwi (ibid), and for those people and others who are living away from their own iwi, perhaps for employment reasons, a proliferation of Maori organisations such as church groups, educational trusts, urban authorities, kohanga reo and local branches of the Maori Women’s Welfare League can provide a community focus (Durie, 1998). Another aspect of community for Maori is linked with fluency in the language as a key way to “achieve and maintain participation in Maori society” (Te Puni Kokiri, 2001, p. 19). The proportion of Maori language speakers increases with age and is greatest in smaller place-based communities where the Maori population predominates. Older Maori speakers play a vital role as models of high quality language use within homes, neighbourhoods and schools, and on marae. Outside these “language domains” Maori language initiatives in broadcasting, information technology and education constitute “virtual communities” (ibid, p. 20) which again rely on the availability of older Maori as language resources to support contact with the language by those Maori who are isolated from their iwi or are living overseas.

Full membership of a community, according to Parry (1991), involves participation in making the rules that govern the extent and conditions of membership:

communities, he argues (ibid, p. 183), “interpret their wellbeing in the light of their understanding of their history and culture”. Contemporary older New Zealanders share memories of the innovative social policies put in place by the 1935 Labour Government, including the highly-regarded housing scheme. They also share disturbing memories of more recent highly disruptive health reforms, ongoing since the early 1980s. Keeling (1998a, p. 42) sees these changes:

as being particularly relevant to older people, in that they no longer know who to talk to about local and political concerns, in respect of services designed to meet their needs. The introduction of market models and notions of commercial sensitivity to health services has made little sense to older people, and has removed the earlier capacity to communicate through elected representatives on local Hospital Boards.

Ironically, since Keeling made her observations, a Labour-led coalition Government has reinstated elected representation on health boards, but current underfunding of health services and strategic planning in which the health of older people is not a priority (e.g. Hawke’s Bay District Health Board’s Draft Strategic Plan for 2002 to 2012) still leaves older people with limited capacity to communicate their concerns effectively, and little power to effect change. The public sphere, with its emphasis on ‘voice’, is essential to a liberal democracy, but, as Cheyne (1997, p. 287) argues, is increasingly lacking, in part because citizens “may not have access to the information and knowledge necessary for the growing technicality of decisions that are being made”. Despite a facade of consensus, decisions made by politicians and policy-makers on the advice of professional and expert advocates are impervious to appeal by ordinary citizens (ibid), whose everyday concerns are with local issues in local communities.

A Sense of Place

One of the ways in which people make sense of their lives is through a sense of place (Pearson, 1994). Despite the argument that national citizenship is giving way to both a more universal model of “globally reinforced” human rights, and to “increasingly overlapping memberships of different kinds of citizenship” (Urry, 2000, p. 166), it nevertheless remains true that even global citizens do not live in the world in general, but in particular settings from which their lives are unable to be separated. Keeling (1999, p. 104) argues further that “spatial connections are particularly intense for older people, in light of their long duration”. Notions of time are also very potent for old people, because of their own long lives and also because of where they stand in relation to linear time. The ‘fusion’ of self, space and time is dynamically recreated in memory, which is “energised through social practices, as people remember together and work at producing their memories

within particular social contexts” Urry (2000, p. 136). Memory is also closely linked to the conceptualisation of home and a sense of belonging:

A sense of belonging, in which the house belongs to the person, and the person belongs to the community in which the house is located, is thus connected with any discussion of independence in a community setting (Keeling, 1999, p. 104).

Urry (2000) argues that local communities carry traces of the memories of the different social groups who have lived in or passed through them historically. Thus different local communities are organised according to “different temporalities” (ibid, p. 139) which concern both the historical richness of the location and the historical perspective of its individual inhabitants, for example the extent to which they bring their own sense of generational continuity to that place, as well as the extent to which their social involvement makes the place they inhabit rich with opportunity. Urry (ibid) makes a useful distinction between ‘land’ and ‘landscape’, whereby ‘land’ is seen as a physical resource, conceived of in functional rather than aesthetic terms, that can be inherited and passed on to future generations, and often includes particular tracts of land whose history and geography are known in intimate detail. By contrast, ‘landscape’ entails an intangible resource defined by its appearance rather than its function and emphasises leisure, relaxation, and visual consumption. The rights attaching to the practice of ‘landscape’ are presumed to belong to everyone who can gain access to it, including future generations who constitute potential viewers of landscape. The planting and growing of trees is an example of how particular families or communities participate in a long-term collective process in what Urry calls “glacial time” (ibid, p. 157), a metaphor he uses to describe a kind of time which resists instantaneous time and seeks to slow time down to nature’s speed, in which change occurs over generations and is observable only intergenerationally. The competing practices of land and landscape come into the sharpest contradictions “when those seeking to experience landscape try to ‘dwell’ temporarily on the land” (ibid). This effect can be seen in the stories of the research participants, for example, when traditional food-gathering places and practices are disrupted by the introduction of horticultural land use driven by global competition which demands immediate monetary returns. Local communities such as those from which the participants were drawn are also places of consumption, both in the sense of providing the context within which various goods and services are consumed, and in the sense of being themselves consumed by means of the senses. In addition, Urry argues (ibid), people in a local community feel the weight of history, the memories and practices of a

particular place which will still be there after many generations to connect people to that place and to each other.

Social Connectedness

The concept of 'social capital', given wide currency through the work of Coleman and Putnam (Cody, 2000, p. 1) refers to "the values, history, traditions and behaviours that link a group of people together" (Te Puni Kokiri, 2001, p. 10). It is an extension of the idea of human capital (skills, labour and knowledge) and recognises that to function effectively and maintain stability, human societies need not only human and physical capital (resources), but strong bonds between people (Cheyne et al, 2000, p. 234). A key element is trust, which takes time to develop:

through people's contact in a range of settings, from involvement in the grand structures of political life to the rituals of everyday life in public space. Experiences, mediated by expectations, will build daily personal scripts into grander narratives and we draw from these interpretations of what is fair or unfair in social and political institutions (Cox, 2000, p. 79).

Cox (ibid, p. 80) argues for the distribution of sociability as a determining factor in the development of social connectedness and suggests therefore, that "public spaces, community services and other collective provisions may perform more than a service delivery function, if appropriately resourced". This approach suggests that public places which are experienced as safe, with good public transport and easy access to 'public culture' all contribute to "the way we see ourselves and others" and to the accumulation of social capital (ibid).

Cheyne et al (2000) argue that there is increasing acknowledgment by people on both sides of the political spectrum that the neo-liberal economic and social policies of the 1980s and 1990s have been corrosive of social capital or social cohesion. They cite (ibid, p. 235) indicators such as "fear of crime, increasing distrust of politicians, social exclusion, and inequalities and divisions (which) are linked to a wider malaise: a failure to recognise the interdependence of human beings, interdependence between human beings and their environment, and interdependence of generations". Recognising human beings as primarily social and relational rather than economic beings (Elliott, 2000; Cheyne et al, 2000), who are interdependent in a variety of complex ways, and building social connectedness through stronger communities are seen as more effective ways of enhancing well-being, both for individuals and for the society in which they live, than traditional social-democratic or neo-liberal approaches to social policy.

Social capital, in the form of community networks and organisations, is “a prerequisite for effective public policy and ... an expression of healthy citizenship” (Lister, 1997, p. 31). Social capital is increasingly seen, not so much as a kind of glue which holds things together in society (Gilling, 1999), but as something more expressive, dynamic and relationship-based (Cox, 2000; Elliott, 2000) which helps the movement towards making choices. A key issue is who makes decisions about resources and whether they are mandated by the group for whom and about whom the decisions are being made (Robinson, 2000). It is debatable whether in fact the term ‘capital’, linked with the market and the capitalist system of exchange, is an apt one to describe something which is developed in situations where people do things with and for each other without a specified reward, creating experiences which, as Elliott (2000) argues, go on outside the financial structures of our society, but are nevertheless essential for a sense of wellbeing and quality of life. While there is no clear definition of social capital, there is significant interest in the potential for its creation across a range of relational settings, from the informal, between friends and neighbours, to the more formalised building of trust and reciprocity between government and citizens. Cox (2000, p. 78) suggests a broad conceptualisation of social capital as:

the overall ‘climate’ of interaction and contact between people within a range of social situations. Membership of groups and ongoing interaction are part of the accumulative process but so are the positive occasional experiences with people who may be similar and different, familiar and strange. Sharing public spaces, seeing the same performances, enjoying the same beaches, cleaning up parts of the environment together may be transitory but significant experiences.

An emphasis on family and community ties and on the creative links and relationships between people arguably makes the concept of social connectedness more apposite to a study of citizenship than that of social capital, though links to the market sphere are still significant. Social connectedness occurs in the numerous institutions and networks that make up the public and private spheres. Closely linked to the concept of citizenship, it is a useful way of measuring the extent to which people are included in the fabric of society. An important factor in whether older people can participate in their communities is the question of access.

Access and Mobility

In New Zealand, nearly one third of people aged 65 and over live in either smaller urban areas or rural centres, and the growth of elderly people as a percentage of the total population is highest in these areas (Pachana and Long, 2000). Some

older people are 'ageing in place' while others are moving to, or moving back to, smaller centres in retirement. A move back to ancestral tribal areas among Maori is a trend (Durie, 1998) which will have increasing impact as the population ages. Joseph and Chalmers (1996; 1998) have also commented extensively on the questions about sustainability that are raised by the steady growth in the numbers of elderly people living in the service- and job-depleted villages and towns of rural New Zealand. The loss of services and facilities such as post offices, banks, supermarkets and health care services particularly disadvantages elderly people, who are more likely than other age groups to rely on other people or public transport to access distant services. It is the present cohort of elderly New Zealanders who helped build a society where the rural economy was clearly pivotal, and where "the economic and social threads of life seemed to be woven irrevocably into the fabric of the local community " (1998, p. 29). By contrast, since 1984 service provision in rural and provincial New Zealand has been irrevocably changed through the privatisation and rationalisation of previously public services. The result is a society in which "the mobility of people and information is of paramount importance" (ibid, p. 31). Acknowledging the tendency to stereotype older New Zealanders as dependent and a problem to their communities, Joseph and Chalmers (1998, p. 35) conclude that the current cohort of elderly people, active in life-long support of their communities, can and should be constructed as a community resource and as part of the solution to, rather than a cause of, the problem of building sustainable communities:

The role of the elderly in maintaining the social vitality of communities is entwined with their individual efforts to grow old in place; they help each other directly and participate in volunteer work to sustain local social institutions (ibid, p. 34).

There is a strong relationship between home ownership, mobility, and the independence of older people. The loss of mobility is very likely to result in enforced institutionalisation, in the sense that there is 'no choice' but to go into a rest home. In his discussion of what is meant by 'dwelling', Urry (2000, p. 132) considers various forms of belonging, and argues that "contemporary forms of dwelling almost always involve diverse forms of mobility". Further, he argues, certain components of these mobilities, such as cars and computers, powerfully reconstruct the relations of belonging and travelling" (ibid). The possession of a car and the ability to drive it, he contends, are "crucially significant rights" (ibid, p. 191). Conversely, not to have a car and not to drive "is to fail to participate fully in western societies". Joseph and Chalmers (1998, p. 33) noted the opinions of their elderly respondents about access to a car as a "vitally important component

of day-to-day living” in their service-depleted rural town. Along with the loss of freedom and mobility associated with lack of access to a car goes, less measurably perhaps, but just as inevitably, a loss of status. As Cahill argues (*ibid*, p. 250):

Consumer goods express one's social standing and cars are the perfect example: advertisers and manufacturers endow them with sexuality, style and power.

The implications for older people who are excluded or who risk being excluded are immense in terms of a sense of themselves as citizens, as well as in terms of their physical ability to continue as citizens participating in their communities. Given New Zealand's relatively small, unevenly distributed population, almost universal dependence on the car, and the infrequency or unavailability of public transport in rural areas and in and between smaller towns and cities (Hawke's Bay for example has lost its passenger rail connection to Wellington, or anywhere) the consequences of giving up driving can be severe, impacting negatively on the mental health, social connectedness and often the caregiving responsibilities of the older person (Pachana and Long, 2000). It has also been found that loss of driving ability is a strong predictor of depression, “which can in turn further decrease functioning in an older individual” (*ibid*, p. 44). The affordability of keeping a car on the road is also a problem for some older people in the third age and there is concern, under the current controversial licensing regime, that older drivers are paying disproportionately for their licences: people over 80 pay \$76 to sit their licence every two years, while those aged 75 - 79 pay \$37.50 for a five-year licence, with both groups also having to pay for a \$40 medical certificate. All other drivers pay, at most, \$29.50 for a ten-year licence, which costs \$45 to produce but is subsidised by the government. Amendments proposed in June 2002 (Land Transport Safety Authority, 2002) include the option of a conditional older driver test which, if passed, would apply an 80 km/h speed zone condition, enabling older drivers to maintain their “independence, mobility and ability to participate in the community” (*ibid*, p. 29).

Walking is an important way of getting around for some older people, especially those who do not drive: it accounts for almost a third of the journeys made by people over seventy (Gee and Glasgow, 2000). Unfortunately it is also quite risky, as older people account for around a third of pedestrian fatalities (*ibid*). As Gee and Glasgow observe, the infrastructure provided by local councils can help or hinder pedestrian mobility and safety. The increasing use of roundabouts at intersections, and the short duration of crossing signals at lights both confirm the impression that the general focus of road use policies is on keeping the traffic

flowing rather than on pedestrian convenience or safety. In summary, it seems that, despite the possibilities of policies which promote accessibility rather than mobility for enhancing the sustainability of the environment, addressing social inequities and improving the fitness level and health status of the population, in New Zealand the emphasis is overwhelmingly on mobility, with issues of accessibility, to buildings, to services and to facilities, hardly rating a mention outside the somewhat uneven efforts of local councils.

Voluntary Work

In her delineation of the public sphere, Lister (1997, p. 29) includes what Leca (1992) has called “the ‘reservoirs of citizenship’: the myriad of voluntary associations of civil society, most particularly the kinds of campaigning and community groups in which women are most likely to be active” and into which many older people, women and men, often pour their considerable reserves of energy, skill and wisdom. In recognition that much of the alarmist debate about the projected economic crisis due to increasing numbers of older people has centred on the costs side of the equation, an Australian study (Ranzijn and Andrews, 2000) was commissioned to try to redress this imbalance by estimating the financial value of the productive contributions that older adults make to society and to compare this to the cost of maintaining them in good health and wellbeing. The authors conclude that the argument that older people are a drain on society does not stand up in the face of their results, which show that overall the productive activity of the older population, if converted into dollars, would pay for the aged care costs of all older people. Their estimates do not account for the value of the contributions that older people have made over their lifetime, through taxes and unpaid work, “to develop the infrastructure of society for the benefit of both present and future generations” (ibid, p. 12). Nor do they include the value of priceless and immeasurable contributions to social capital such as providing “wisdom, guidance, family stability and continuity, and passing on cultural history and traditions” (ibid, p. 11), as well as money.

In New Zealand, the 1999 Time Use Survey estimated that women over 65 spent on average 34 minutes per day on unpaid work outside the home, while men over 65 spent an average of 41 minutes. Maori people over 65 spend an average of 48 minutes per day, while rural people also spend longer on unpaid work outside the home than non-rural people “reflecting the importance of social networks and voluntary work in the functioning of the rural sector” (Ministry of Social Policy, 2001b, p. 91). Volunteering to do meals-on-wheels, engaging in voluntary

decision-making at a community level, and caring for a relative could all be called voluntary work, or community work. It is less clear, however, where the dividing line lies between activities which merit the label citizenship and those which do not. In the case of the meals-on-wheels example used above, sociability, amongst those who deliver the meals and between the deliverer and the recipient, may be an unintended consequence of the volunteer work, thus enriching the 'stock' of social capital, and offering enhanced opportunities for active citizenship. Caring for a relative within the home, however, if there is no alternative and little support for the carer, and the work is undertaken out of a sense of obligation rather than choice, is likely to be highly stressful and corrosive of the citizenship of both carers and the people they care for (McPherson, 2000).

Guthrie (2000) raises this aspect of the personal development of the individual citizen involved in community organisations or social movements. Older volunteers contribute about 15 per cent of all unpaid work in all sectors of the community. Dr Guthrie argues that volunteering can be satisfying emotionally and spiritually, contributing as well to the physical and mental wellbeing of the volunteer and providing an opportunity for older people to learn new skills and to continue to contribute actively to their communities. An area in which older people contribute often hidden, but significant amounts of time and energy, is that of the family, as recent New Zealand studies (McPherson, 2000; Koopman-Boyden, Dharmalingam, Grant, Hendy, Hillcoat-Nalletamby, Mitchell, O'Driscoll and Thompson, 2000; Abbott and Koopman-Boyden, 1994; Te Puni Kokiri, 1997; Ministry of Social Policy, 2001b) have shown. The next section will consider the extent to which families and whanau constitute arenas in which elderly New Zealanders are able to perform their citizenship.

Families and Whanau

The social and family traditions of New Zealand have grown out of the mainly British traditions of the immigrants who arrived in the nineteenth century and the Polynesian traditions of the indigenous Maori population, with later arrivals from Pacific Island nations, the contribution of a longstanding Chinese population and more recent and increasing Asian immigration (McPherson, 2000). Levels of intermarriage are high, so that any wider family group may contain both Maori and Pakeha sub-groups (Dharmalingam and Barnes, 1998). From her review of the literature on the various traditions, McPherson concludes (ibid, p. 52) that ideologically both Maori and European extended families depend "very heavily on notions of mutual obligation, reliance, caring and affection".

The term “whanau” has gained currency over recent years and is now used in a variety of contexts, by Maori and Pakeha, to describe groups of people who are not necessarily connected by kinship but who relate to each other according to highly regarded whanau values (Taiapa, 1994). Williams and Robinson (2000) explain how whanau values contribute to social connectedness in Maori society, emphasising the primary importance of extended family relationships as the basis for all other relationships. In this context social capital is understood as being created through whanau networks and relationships, with the whanau as the nucleus, moving seamlessly to the wider family (hapu) and the tribe (iwi), so that the whanau becomes the community and the community in turn is made up of the whanau. The tribal community extends beyond geographical boundaries and exists wherever its members are. Linked to this notion of connectedness is “knowledge of and knowing your place in Maori society” (ibid, p. 2).

Maori families, according to Selby (1994, p. 149) “have come to find increasing benefits for whanau membership, and for living close to one’s marae”, the permanent ancestral home, whereas individual family homes are “merely temporary”. Among the benefits of building kaumatua flats on the ancestral land of the marae are the reciprocal communal support, convenience and sharing of resources for kaumatua, and the support provided by kaumatua in the maintenance and activities of the marae. Maaka (1993, p. 226), on the other hand, warns that kaumatua flats on marae, if the community has moved away from the marae, may isolate kaumatua in a “ghetto”. Selby (1994, p. 147) suggests that retirement homes are “full of people who have expertise which our Pakeha cousins in their small nuclear families so desperately need” while Maori elders are treasured as taonga, “with many homes in which to contribute their love and expertise”. Maaka (1993, p. 225) argues, on the other hand, that Maori society has been slow to address the housing needs of the elderly because of the assumption that they will be “absorbed back into the whanau”. The reality of the increasingly nuclear nature of the Maori family, he argues, will create difficulties for Maori families similar to those faced by Pakeha families in taking care of their dependent elders. While Maori may find it difficult to relinquish values which “have outlived their usefulness” but have provided a flattering comparison between themselves and Pakeha, Maaka warns that failure to do so may lead to services to Maori being delivered under a “rigid and outmoded view of cultural appropriateness” (ibid). A falling Maori birth rate and the return migration of older Maori to smaller urban or rural areas (Te Puni Kokiri, 2001) will compound this problem in the future.

The functions of whanau, Taiapa (1994) argues, are usually described in terms of management of ancestral land, mutual support and the nurture of children, and the organisation of hui, or family gatherings. Not all Maori belong to functioning whanau, hapu or iwi, and, as Taiapa notes, some Maori leaders have voiced the view that the ideology of tribal structures is outdated and no longer serves Maori needs. The effects of colonisation and increased migration in search of work have isolated many Maori from their hapu and iwi. Nevertheless, it is reported (Ministry of Social Policy, 2001b) that ninety-one per cent of Maori families reported participating in family/whanau activities. This figure compares with eighty-eight per cent of Pakeha families, eighty-six per cent of Pacific Island families and eighty-seven per cent of the total population of New Zealand.

Because they are traditionally held on marae, and follow established kawa, or protocol, hui (meetings) and especially tangi (funerals) highlight some of the values related to ceremony and the transmission of knowledge and resources that mark a difference between Maori whanau and Pakeha extended families (Dansey, 1975; Rangihau, 1975; Walker, 1975; Selby, 1994; Taiapa, 1994). Marae and marae kawa also mark differences within Maoridom in terms of gender and tribal affiliation, differences which make the marae a current site of contestation and struggle for many Maori women, including kuia. The struggle is centred on speaking rights for Maori women, and as Irwin (1992) explains, some features of the formal marae welcome procedure, in many tribes, but not all, are gender related. The karanga, or call of welcome at the entrance to the marae, is usually performed by a kuia, an older Maori woman. After the karanga any further speaking is done, inside the meeting house, usually by men. The women of Ngati Porou from the East Coast of the North Island and Ngati Kahungungu from Hawke's Bay are considered exceptions to the general rule that women do not speak on the paepae, at the front of the meeting house (Awatere Huata, 2002; Irwin, 1992). Irwin maintains that Maori women do speak, according to Maori tradition in which the karanga is acknowledged as a form of speech. However, other Maori women writers (Johnson and Pihama, 1994; Hoskins; 1997; Awatere Huata, 2002) continue to raise the issue of the silencing of Maori women. Hoskins (1997) claims that even when women are permitted to speak in formal proceedings on and off the marae, in practice it is rare and unsafe for them to do so. These writers call for changes to contemporary expressions of Maori culture in which they claim Maori women have been marginalised and silenced by discourses of authenticity and tradition which serve the interests of Maori and Pakeha men to the exclusion of Maori women.

Some whanau, like some Pakeha families, can be more damaging than supportive for vulnerable members (Te Puni Kokiri, 1997; Munford, 2000). While agreeing that there appears to be a higher level of support, especially financial, and a higher level of reciprocity, among Maori families than Pakeha, McPherson (2000, p. 386) argues that “lack of economic resources and geographic mobility are leading to modifications in traditional whanau support practices”. Durie (1998, p. 86) also predicts that the rapid ageing of the Maori population (the proportion of Maori over sixty-five years will increase from three per cent in 1991 to thirteen per cent in 2031) will be accompanied by social and cultural change:

It is highly likely, for example, that many of the elderly in the next century will be neither fluent in Maori nor familiar with the customs and culture of the marae; moreover, they may not be able to count on consistent whanau support.

Internal and external migratory patterns, with Maori moving back to tribal areas or alternately overseas (Durie reported in 1998 that 26,000 were recorded as resident in Australia) also affect social connectedness and wellbeing for Maori.

A recent study of New Zealand families (Koopman-Boyden et al, 2000) found that health and personal relationships, both of which were largely determined within the family group, were the most important determinants of quality of life for the mid-life respondents. Though they did not live in multi-generational or extended family households, the caring family network extended outside the household to provide care to almost three-quarters of their close relatives: they were most likely to provide care to their partner/spouse or children, and least likely to care for their parents-in-law, with parents and grandparents in between. Nearly half of the respondents reported receiving care, whether they had a health problem or not. The authors stress, therefore, the value and importance of the family group and the link between individual well-being, health status and social relationships. An earlier New Zealand study (Abbott and Koopman-Boyden, 1994, p. 19) found that the groups who provided most of the family care for older people were retired, unemployed and “home makers”, with an unexpectedly high number of men providing care at home. The authors of this study warned that conflicting mid-life obligations, geographical mobility and rising levels of divorce or marital separation, combined with a lack of recognition and support for family caregivers will result in a reduction in the supply of caregivers at the very time when demand is rising due to population ageing. McPherson (2000) on the other hand, found that future demand for family support was less likely to come from rising numbers of elderly people than from declining numbers of young adults in the child-rearing age

group, and in addition, that far from being a burden on families or on the state, elderly people, particularly the “young elderly” are key providers of support. While McPherson argues that if elderly people do require care, their previous support for the younger generation would more than justify it, she found little support among her respondents of all ages for the idea of adult children caring for their elderly parents. Her findings do, however, indicate a possible shift from intergenerational to intragenerational family transactions in a substitution of siblings for adult daughters as long-term providers of care for elderly people.

These findings suggest that the largely unacknowledged role of third age people as primary caregivers for not only their partners, and siblings, but increasingly their parents as well, will be in increasing conflict with pressure on these same third age people to be available for paid work. McPherson found a culture of independence in Pakeha society which conflicts with an ethos of family dependency and obligation, so that if family members were forced to compromise their participation in paid work to provide unpaid care for a dependent family member, the citizenship status of those receiving as well as those providing care was adversely affected. However, it is clear from McPherson’s study that the extended family functions in Pakeha society to provide mutual support to its members, with a sense of obligation qualified by capacity and choice, and by the belief that government assistance is needed to complement the support that families can provide. This section has discussed some of the many places and activities in which older people are engaged as citizens. The following section discusses structural or attitudinal factors which can hinder or foster full and meaningful participation in society by older citizens.

Factors which Influence Participation

Introduction

Two closely related problems identified with participation are tokenism, where people are consulted or informed but have little or no real power to affect a decision; and co-optation, or becoming involved in the power structure which they meant to oppose (Ife, 1995). The former problem is frequently encountered by even well-informed and active Pakeha senior citizens, for example in relation to the local government annual planning process. The latter problem of being co-opted is more often a pitfall for Maori elders who may find they have been used to lend mana to a project about which they have been inadequately informed and which they may not support. Membership of a community involves both rights and responsibilities, and Ife (1995) argues that despite the difficulties people *will*

participate in community structures if certain conditions are met: if they feel the issue or activity is important; if they feel that their action will make a difference; if different forms of participation are acknowledged and valued; if people are enabled to participate and supported in their participation; and if structures and processes are not alienating (ibid). In seeking to find ways of democratising decision-making processes to include group representation so that the voices of all groups may be heard, Young (1989, p. 266) argues that:

Public life and decision-making processes should be transformed so that all citizens have significantly greater opportunities for participation in discussion and decision making. All citizens should have access to neighbourhood or district assemblies where they participate in discussion and decision making.

Money as a Resource for Citizenship

Taiapa (1994) argues that while Maori have the same rights and duties as other citizens of New Zealand, and share the same political and social institutions, they are not fully integrated into the social and economic life of the country in that they are over-represented in the lower socioeconomic levels. In the context of whanau obligations, the value attached to money constitutes an important difference between Maori and Pakeha families. In her study, for example, Taiapa (1994) found that Maori regarded money as a resource to share. Mana, denoting power, authority and status, was ascribed on the basis of knowledge of marae kawa and tikanga (protocol and custom) and ability to speak te reo (the language). It was not derived from the accumulation of wealth or material possessions, and Maori families gave priority to the needs of whanau and community, often needing to balance the needs of their household against those wider obligations. As whanau members they shared a collective attitude to money and faced costs associated with participation in whanau events and other whanau obligations such as making their homes and resources expansively available to other whanau members. In New Zealand Pakeha families, on the other hand, Fleming (1997, p. 127) found that "money flows down the generations" in a linear model of the family in which "the uses of money articulate and reinforce relationships based on age and gender and structured on dependence". In Pakeha families, Fleming argues, money and financial independence is associated with having power, and financial dependence with powerlessness. Access to money is important in a consumer society, and Pakeha children learn early that having money to spend brings enjoyment. Later, they learn that earning a high income is both "a gendered task" and "an expression of their success in life" (ibid, p. 128).

The symbolic meanings attached to money in Western discourses have a long, complex and often contradictory history, deriving from one view of money as intrinsically evil and an opposing view of money as the source of individual and societal happiness and prosperity (Fleming, 1994). The idea that money is powerful, Fleming argues, is supported by experience as well as ideology. Even if people reject the materialism of the consumer culture, money values are still intrinsic to Pakeha society. As the basis of our economy money provides not only subsistence, but consumer choice and access to both self-expression through material goods and self-development through education, travel, sport and leisure.

Agency

Agency is a particularly important concept in this discussion about older people and citizenship because of its potential to suggest more active and creative ways of thinking about old age, and to challenge both the silences and the less than helpful notions of dependency and victim status which prevail in the popular press and in dominant discourses. The idea of human agency is used to identify individuals as “autonomous, purposive actors, capable of choice” and involved in a process of self-development (Lister, 1997, p. 36). Political action on a small scale at the local level is important in this regard, as “the very act of coming together to express one’s political voice can help to build up women’s self-esteem and sense of themselves as political agents” (Lister, *ibid*, p. 39). Voet (1998) also stresses the reciprocal link between participation and respect: women must participate, she argues, in order to be respected, and conversely, women must respect themselves in order to be able to participate. As Lister (1997) points out, however, it is possible for people to be simultaneously “the subordinate objects of hierarchical power relations *and* subjects who are agents in their own lives, capable of exercising power in the generative sense” (*ibid*, p. 40).

In order to avoid the implication that political participation is a necessary obligation of citizenship, Lister (1997, p. 41) distinguishes between citizenship as a status, which means enjoying “the rights of citizenship necessary for agency and social and political participation” and citizenship as a practice, which means “fulfilling the full potential of the status”. Like Lister, Voet (1998) argues for a type of citizenship in which both women and men are free to participate over time. Another factor which can empower older people in the exercise of citizenship is the development of a cultural identity, which is discussed in the following section.

Cultural Development

Cultural globalisation has followed economic globalisation, resulting in the emergence of a universal culture which is, as Ife (1995, p. 155) argues, “propagated through increasingly global media which are largely controlled by, and work in the interests of, transnational capital”. Ife (ibid) notes that “television, music, architecture, food, drink, clothing, film, sport, and other forms of recreation” are becoming increasingly standardised and similar throughout the world, with television, advertising and computer technology imposing a relentless uniformity. In the face of all this sameness, it is very difficult for communities to maintain their own distinct culture, yet this is a critical component of community development. It is culture which gives people “that critical sense of identity and belonging” (ibid).

At the same time as culture is becoming globalised, it is also being affected by a process of commodification, whereby cultural activity becomes “something that is produced, packaged, bought and sold, rather than something which is the property of the whole community and in which people are free to participate” (ibid, p. 156). Music, drama, art and sport are all activities which “are done by the few for the consumption of the many, rather than being widely participatory” (ibid). Instead of participating, we tend now to watch and applaud, taking the message that it is for the professionals to participate, and the rest of us to consume a packaged product. This is a relatively recent development which has contributed significantly to a widespread sense of loss of community. Ife argues that local cultural traditions, including historical events and geographical features, local produce, crafts and possibly languages, are “an important part of a sense of community, and help to provide a community with a sense of identity” (ibid). If such cultural features can be emphasised as part of community life, the local cultural tradition can provide a focus for participation in the community and various aspects of community development, although such a strategy must, as Ife insists, be informed by social justice principles and structural analysis of the issues of class, gender, race/ethnicity (and I would add age) which are at work in any particular community. Because older people are less likely to be in the paid work force, with 5.2 per cent of all older women and 14 per cent of older men in the labour force (Statistics New Zealand, 1997, p. 48), they are likely to be in a position to take up opportunities in which they can make a real contribution to the cultural life of a community in the way that Ife (1995) describes, especially if there are suitable public spaces available for holding events and coming together in groups to sing, perform, learn or pursue special interests or hobbies together. There was

evidence of this happening in the communities to which the research participants belonged, dependent on another factor which is important in facilitating the exercise of citizenship in older people, and which has less to do with physical structures and spaces, and more to do with the attitudes of older people themselves.

Attitudes of Older People

Participants in a South Australian report (Barnett and Associates, 1999) on attitudes to ageing were asked specifically about the factors which indicate a positive experience of ageing. The most important factor for those with an English speaking background was a positive attitude, described by those involved as “enjoyment of life, a sense of purpose, an acceptance of ageing, an outlook which sees all stages of the life cycle presenting opportunities to be pursued” (ibid, p. 13). The second most important factor was the existence of strong friendships and involvement with others. Key indicators of a negative experience of ageing were a negative attitude (involving a fear of growing older, bitterness, dislike of change, complaining and blaming others for their situation), followed by loneliness and lack of strong personal relationships (ibid, p. 16).

The informants in a study (Minichiello et al, 2000) which examined the meanings and experiences of ageism for older Australians viewed active ageing as a positive way of presenting themselves as ‘not old’, so as not to be seen or treated as old. As a consequence they tried to create a new image of ageing for themselves as a defensive strategy against ageist assumptions, which involved “convincing people that they are as mentally capable as they have always been and that they are the same person” (ibid, p. 274). Closely allied with attitudes and also influential in supporting or hindering participation is the status accorded to older people by others in society.

Social Status of Older People

In New Zealand, Maaka (1993, p. 215) argues that the status of kaumatua as the repository of Maori values has greatly increased “as the culture becomes less secure and the language is increasingly threatened”. This means that holding on to the meaning of the past and being repositories of knowledge and values enhances the status of kaumatua and their active participation in Maori society. The converse is also true, that lack of these skills presents a barrier to participation and achieving kaumatua status for many older Maori. Of the aged Maori who do participate actively in the community, there are those, Maaka argues, whose niche

in Maori society is as workers at the back of the marae, in the kohanga reo and in the church, and whose presence gives prestige to any gathering they attend. Kaumatua status though, for both men and women, is most visible in those who take leadership roles at the front of the marae. This cultural leadership requires language skills and a deep knowledge of both traditional learning and current community issues and is expressed in the “high performance art forms” of the karanga (ceremonial calling) for kuia and whaikorero (oratory) for koroua (ibid). The title kaumatua is given by the community and carries a heavy responsibility for the welfare of the community.

Maaka argues (ibid) that the status and the range of activities available to kaumatua have expanded with the growing confidence and public assertiveness of the Maori community. For example every Maori organisation and many local and national organisations, including government departments, have a supporting kaumatua or group of kaumatua to offer advice, and also validation of the group, as “the presence of a kaumatua on the committee makes the group appear to be a representative Maori voice in local and national issues” (ibid). The result is that many kaumatua, instead of slowing down in their ‘retirement’ years, actually speed up, becoming busier than they have ever been.

Maaka is cautious about whether kaumatua leadership is an appropriate model for the 21st century, considering the tendency for the position of “culturally competent” older Maori to be undermined by an urban-centred “cultural zealotry” which tends to see culture in terms of “ritual performance, religious rules and a rigid prescription of the values of Maori society (ibid, p. 226), and a possible weakening of its validation role as Maori society inevitably becomes increasingly diverse and westernised. The emergence of paid cultural advisors, for example, has created “a new elite” which is “a far cry from the idealised situation of a kin group bestowing the honour on a revered elder” (ibid), and more akin to the stratification of older Pakeha, whose social status in old age depends very much on their current and/or former relationship with the labour market, and on their gender. Thus older men who have held professional positions are often recruited to serve in professional or semi-professional roles as advisors, consultants or board members in various organisations in the public, market and state spheres, thereby maintaining a level of prestige consistent with their former occupational status. Older Pakeha women, on the other hand, are much more likely to be relegated to the private sphere, becoming increasingly invisible, and doing what they have always done, taking care of other people and running households.

The opportunities offered by the kaumatua role in Maori society for full and productive involvement of older people in their communities and for “greater emotional integration, more mature relationships and a renewed confidence in self if not in humanity as a whole” (Durie, 1999, p. 103) are restricted in Pakeha society to an elite few, overwhelmingly male, elders. Something which is reported to be in short supply for some kaumatua (Maaka, 1993; Durie, 1999) but which is available to many older Pakeha people, for whom there is no corresponding role or status in Pakeha society, is time, an important resource for the exercise of citizenship.

Time as a Resource for Citizenship

Time is the major resource required for volunteering, and it is a frequent assumption, by governments, voluntary organisations and families, that women and older people, and especially older women, retired or excluded from the paid work force and, in the case of older people, ‘free’ of the primary responsibility for childcare, will be ‘free’ to volunteer for unpaid work. Time, as Lister (1997, p. 133) argues, is a resource for citizenship:

that either constrains or facilitates choices in a highly gendered way. It is a resource that has profound implications for the ability of women and men to act as citizens in the public sphere and to pursue the process of self-development identified earlier as critical to effective citizenship.

The evidence suggests that women overall work longer hours than men, and have less leisure time than men, with the leisure time they do have often being swallowed up by the open-ended nature of their responsibilities in the private sphere of the family (Ministry of Social Policy, 2001b, p. 90). These responsibilities do not necessarily diminish with age, and sometimes they increase, if caring for adult relatives or grandchildren replaces caring for their own children. This has implications for the health of older people, both physical and emotional, and for their freedom to act as citizens in the public sphere (Lister, 1997, pp 132 - 133). In New Zealand older women, “the traditional volunteers for community work and support”, spend long hours in unpaid work, with older Maori women working slightly longer hours than non-Maori women in voluntary activities, and 14 per cent of those who do such work doing more than 30 hours per week (Ministry of Women’s Affairs, 1999, p. 7).

Some older people do not have the resource of time to do caring or volunteer work because they still need to do paid work to earn an income, at least until they reach the age of 65 and qualify for New Zealand Superannuation. Anecdotal

evidence suggests that older women are doing menial low-paid work in the homes and gardens of other older people who can afford to buy their time. Nevertheless many older people do find that the time they have available to them in their so-called retirement years opens up possibilities for active citizenship in a variety of creative and generative ways, from coaching to carpentry.

By explicitly including the “everyday politics” of community organisations, Lister (1997, p. 31) makes the case for an enlarged conceptualisation of citizenship which is “no longer rooted in the experiences of men and divorced from those of women”. This broader kind of citizenship would actively include the experiences of older people, both women and men, who frequently feel that they are invisible as citizens and that their time is not valued. Closely linked with the concept of time as a resource for citizenship which is more readily available in old age is the unique opportunity that such time can afford for telling stories about one’s own life. Such biographical storytelling can play an important role in later life, contributing in several ways to the exercise of citizenship for older people.

Story-telling and the Performance of Citizenship

As a possible avenue of citizenship available to older people, the telling of stories is integral to my investigation of how older people enact their citizenship. Telling stories of all kinds, Pateman (1988) argues, “is the major way that human beings have endeavoured to make sense of themselves and their social world”. As part of normal human activity telling stories can contribute to “the maintenance of identity, the presentation of self and the passing on or transference of key cultural and personal elements” (Chamberlayne, Bornat and Wengraf (Eds), 2000, p. 9). Oral history, a discipline with rich potential as a research method, also has the potential to enhance the dignity and social wellbeing of the participants by highlighting their assets of experience and wisdom (Norris, 1986, p. 4). Reminiscence work with older people implies an active role for the person whose memories are sought. There is a clear focus on human agency, on the part of both the older person and the interviewer, a focus which is reflected in two papers recording New Zealand experiences of reminiscence projects: Frizzell and Hewson (1996, p. 9) recommend reminiscence work as “a powerful means of maintaining wellness in older people”; and Baty, Martel and Mansell (1997, p. 10) focus on the biographical life review as a means of dealing with “unfinished business”. According to Sherman (1991, p. 146), life review reminiscing has been found to be more characteristic of people in their sixties and seventies, with people in their eighties found to be “somewhat resolved, contented and mellow but infrequent reminiscers”.

Closely linked with conceptions of active citizenship for older people is storytelling conceived as performance (White, 1997). Such performance is conceived of as a way of allowing people “to reiterate their collective and personal identities” (Myerhoff, 1978, p. 184). The performative aspect of storytelling is also pivotal, in a cultural context, to the task of establishing or re-establishing indigenous cultural as well as individual identity in the wake of colonisation. Performance, with storytelling at its heart, is seen by Potiki (1992, p. 153) as a way of re-establishing Maori cultural identity and re-asserting “the mana of the tangata whenua”. She sees this storytelling as “tino rangatiratanga in action”, offering an arena in which Maori can nurture spirit, intellect and emotional well-being by focusing on themselves and telling the stories that Maori communities need to see and hear (ibid, p. 154). A potentially powerful role is available to older people in such performances as cultural “keepers of the meaning” (Vaillant, 1993, p. 145). Linked with storytelling as performance by the key concepts of empowerment and community is the process, based on structural analysis, described by Barndt (1989, p. 1) as “naming the moment, or political analysis for action”. It relies on a critical tension between identifying long-term structural inequalities and power relationships in society and understanding current social forces so as to be able to take up existing opportunities for consciousness raising and empowerment for change in the short term.

Summary

This chapter has surveyed various arenas of the social world in which people participate as citizens or are discouraged or prevented from doing so by physical, psychological or social barriers to citizenship. It was found that though older people are conscientious voters, this is a thin kind of participation, and ordinary citizens enter the political arena only on special occasions, such as elections, or when their interests seem especially threatened (Pateman, 1989). Ageist attitudes clearly create barriers to participation for older people in the labour market, although there is an important case to be made for the right of people in the third age *not* to work, and to enjoy a period of leisure and financial security after a lifetime of work. Older people are currently valued as workers in voluntary organisations where they donate large amounts of time, energy, knowledge and skills to community projects.

Many older New Zealanders also exercise their citizenship through their caregiving responsibilities and support roles within their families and whanau, though it must be remembered that not all older people have family members nearby and some

are estranged from their families. It is clear also that there are cultural differences in the way in which citizenship for older people is perceived and exercised. The capacity of older people to participate in the political and social life of the community depends on the extent to which they have been educated culturally and politically (Pateman, 1989) as well as on the opportunities that are currently available to them. Older citizens' experiences are influenced by their life histories, including historical events which they share with their generational cohort. Instrumental among these cohort experiences are changes to the social policy environment during their lifetimes, changes which will be discussed in the next chapter.

Chapter Five:

The Social Policy Context

Introduction

This chapter investigates the social policy environment and some of the particular policies and practices in the three key areas of income support, health and housing which have influenced the experience of ageing in New Zealand over the lifetimes of the research respondents. Their expectations of state support in old age were shaped by their experience of having lived through an era when the state did provide substantial support for old people. The section begins with a brief explanation of what is meant by social policy for the purposes of this study.

What is Social Policy?

Social policy may be defined in various ways, and definitions can include the practices as well as the policies of the welfare state (Williams, 1989). Shannon (1991, p. 2), for example applies the term 'social policy' to the measures a civilised society takes to care for its dependent members. However Cheyne et al (2000), recognising that social policy is not necessarily benevolent, offer a broader definition which includes actions as well as lack of action, by the state, the market and the voluntary sector, which occur outside the direct control of the state, but which affect the distribution of resources and the access of citizens to those resources. Walker (1996) refers to a social contract through which the distribution of power and resources between groups in society is mediated by the implementation of social policy. Walker argues that social policy is an important factor in the social construction of intergenerational conflict at a societal level and caring relationships at a familial level. Social policy is about public plans and intentions towards the citizenry, and inevitably it reflects and affects the distribution of power and conflicts between groups in society.

In New Zealand Maori social policy has been defined as the struggle of Maori since the Treaty of Waitangi in 1840 to assert their demands for collective control of social policy in the face of Pakeha-centred government policy aimed at the imposition of individual rights (Cheyne et al, 2000). Despite the development of policy frameworks to ensure consistency with the Treaty and responsiveness to Maori needs, there remains a fundamental contradiction between the individualism of Pakeha society and a desire to honour the Treaty and its provisions for Maori self-determination (ibid). The following section reviews the role of the welfare

state as a mechanism for delivering the social rights of senior citizens.

Senior Citizens and the Welfare State

The construction of ageing as a social problem requiring policy intervention, and the association of old age with illness have contributed, according to Saville-Smith (1993) to a deeply ambivalent attitude towards ageing. On the one hand, older people in New Zealand, as in other Western societies, are accorded special treatment as deserving (Thomson, 1998) and benefiting from extensive state expenditure without the stigma attaching to younger beneficiaries, while on the other hand they are routinely excluded from the public sphere and increasingly segregated from society by institutionalisation.

Old age in the nineteenth century was justly feared for the deprivation and destitution it often brought. In Britain the workhouses established by the Poor Laws inspired fear amongst elderly people who could no longer work and had no family to support them. In New Zealand successive governments did everything they could to avoid becoming responsible for the poor, including the elderly poor, by passing measures to make family members responsible for their poor relatives (Else and St John, 1998). Indeed the Destitute Persons Ordinance of 1846 and subsequent Destitute Persons Acts in 1877, 1883 and 1894 enshrined the expectation that immigrants would provide for themselves and their family members. New Zealand was presented as a land of opportunity where poverty was unknown (Preston, 1999), and public provision for the elderly was initially unnecessary because migrants were mainly young men. Whereas poor elderly people had been made a public, shared responsibility in Britain, the colonial New Zealand approach was to make families responsible for older relatives as well as children. The first key policy response to the welfare of old people was the 1885 Hospital and Charitable Institutions Act, which established medicalisation and institutionalisation as a way of dealing with marginalised old people (Saville-Smith, 1993). The second was the development of a system of income maintenance for older people. New attitudes to and aspirations for children, and growing numbers of older people by the end of the nineteenth century contributed to strong support for greater public responsibility, which culminated in the 1898 Old Age Pension (Thomson, 1998; Cheyne et al, 2000). Even so, well into the twentieth century a lower number of people were given pensions, pension values were lower relative to wages in New Zealand than in either Australia or Britain, and there was continued insistence on the responsibilities of kinship (Thomson, 1998).

The old age pension, according to McClure (1998, p. 17) “was conceived with a sense of a citizen’s rights” in acknowledgement of a lifetime of labour. It was the first state pension to be granted in the English-speaking world, and contributed to New Zealand’s reputation for progressive humanitarian legislation, a reputation which allowed other needs in the community to be obscured and the measures taken in the following decades to be “meagre and insufficient” (ibid, p. 23). The pension granted an equal income to women and men, if they were aged at least 65, had lived in New Zealand for twenty-five years and could prove they were of good moral character. Chinese and other ‘aliens’ were excluded altogether. Maori pensions were restricted by the application of distinctive property criteria: it was believed they did not have the same need for a pension, because they could live off the land, and had lower standards than other citizens (McClure, 1998; Else and St John, 1998). The Old Age Pensions Act of 1898 defined older people, at least those who displayed “civic virtue” (Dharmalingam and Barnes, 1998, p. 6), as citizens who were uniquely deserving of assistance from the state, establishing a new welfare relationship between older people and the state. It established the boundaries of citizenship for older people by explicitly excluding groups of people on the grounds of race and moral character. Being of good moral character in this sense meant not having a criminal record, but it also excluded women who had had an illegitimate child, and men who had deserted their families or been arrested for drunkenness. New Zealand had the highest standard of living in the world at the turn of the nineteenth century, yet pension payments were miserly and discriminatory, at first on the grounds of morality and sobriety, with pension claims presented in open court, and increasingly on the grounds of race, through administrators’ efforts to exclude undeserving applicants (McClure, 1998). They did, however, mark an important move from reliance on charitable aid to entitlement and regular long-term support, however meagre.

A rising elderly population and a shrinking labour market in the late nineteenth century were contributing factors in the rise of ‘dependence’ as a result of exclusion from paid employment. Widows’ pensions were initiated in 1911 and military pensions in 1912. In 1938 the Social Security Act introduced a universal old-age pension at the age of 65 and a means tested benefit at 60, and set in place a welfare system which was to remain essentially unchanged until the 1970s (ibid). There was general agreement at this time that society as a whole could and should support elderly people (Saville-Smith, 1993). A further sharp increase in the elderly population from the late 1940s (Thomson, 1992) saw the government enlisting the voluntary sector and local authorities to provide state-subsidised

accommodation and services for older people during the 1950s and 1960s (Saville-Smith, 1993). When the first Labour government came to power in 1935, the Depression had exposed the vulnerability of the whole community to events beyond the control of individuals. The new social security policy included all citizens in its introduction of universal access to health and superannuation benefits (ibid), and granted more extensive rights to income support to more groups of people. But, as McClure (ibid, p. 49) argues:

Labour's own vision of needs and the rights of citizenship was shaped in the early twentieth century workplace; social security reflected these roots and was marked by a lesser recognition of the needs of women and an underlying reluctance to grant rights to Maori. As in earlier days, the state's readiest support went to the aged.

The 1938 Social Security Act introduced universal superannuation, a taxable payment to everyone over sixty-five. Although this improved women's chances of achieving equal citizenship rights in old age, it was introduced so slowly that for at least twenty years it would give only a small addition to other income. The old-age pension, renamed Age Benefit, retained many of the old restrictions, including income and character testing, and it was to be another thirty years before the government abandoned the legal requirement for adult children to maintain their aged parents, and pensioners to be "of good moral character and sober habits" (Thomson, 1998, p. 165).

The most significant achievement of Labour policy in the 1938 Act was "not merely to illuminate people's individual needs, but to turn needs into rights, and then to ally those needs and rights with those of the middle classes" (McClure, 1998, p. 61). Labour's vision of a "'pervasive' welfare that would symbolise citizenship and unite all citizens" (ibid), while clearly mandated by the electorate, provoked major funding disagreements, the focus of which was the old age pension (ibid, p. 65). The result was "a minimum token superannuation": the state would provide a Universal Superannuation payment of ten pounds a year for all men and women over sixty-five years, effective from 1940. Payments to superannuitants would increase by two pounds ten shillings each year until parity with the Age Benefit was reached. This point was reached only in 1960 (Preston, 1999).

However small, the superannuation payment was universal, linking rich, middle class and poor people in the one system of support. The renewed sense of entitlement and the principle that all citizens were vulnerable made it a symbol of citizenship, with important consequences for the status and inclusion of senior citizens in the community:

... with social security and citizenship closely allied, the system as a whole was removed from the taint of charity and became a source of national pride (McClure, 1998, p. 83).

Unusually in comparison to other countries, this entitlement recognised the social contribution of the unpaid work of women, while continuing the discrimination which effectively excluded Maori from full citizenship rights during the early 1940s. Superannuation, having monopolised the planning for social security, was equated in the public mind with the payment of tax, and in fact the deferral of the full rate meant that those who had paid the social security tax for most of their working lives gained the most from superannuation (ibid, p. 86). The first Labour Government also raised Maori benefits to the same level as Pakeha, a move for which the government, and the Prime Minister Michael Joseph Savage is still remembered with gratitude. One Maori woman amongst my research respondents had assumed as a child that he was a relative because his picture hung in an honoured place on the wall. She was amazed to discover that the same photograph hung in a place of honour in numerous other Maori homes.

The war years saw a shift in the priorities for social security spending towards mothers and children, culminating in the 1946 Universal Family Benefit. This was the period in which the ideal of the suburban nuclear family, with a breadwinner husband in the public sphere and an unpaid housewife and mother in the private sphere, was explicitly approved, supported and encouraged by the state (Schrader, 2000). It was a work-rich period when the older people among my research respondents, those now in their late seventies, eighties, and early nineties were busy establishing careers if they were men, and mostly keeping house and caring for their families if they were women. State support for families, in particular state housing policies and the Family Benefit paid to every household, enabled most people to buy their own homes, with consequences in turn for the financial security and citizenship status of today's older people. Stories about this time in New Zealand's history depict a golden era, a time of full employment and universal prosperity. Many of the children of those post-war years look back on childhoods of plenty, but it was their parents, those who are now elderly, whose future expectations were irrevocably shaped by the implicit promises as well as the explicit benefits of the welfare state. Implicit in the contract between the family wage-earner and the state was the promise that in return for taxes paid while working, the state would guarantee a comfortable income in retirement. It was the cradle-to-the-grave promise of the welfare state rather than the situation of older people at the time that entered the consciousness of that generation and shaped their expectations of retirement.

By contrast, people who were old and had ceased to work were increasingly seen as a burden on a production-oriented economy after the Second World War (McClure, 1998). Pensioners, whose relative incomes had gradually declined while wage earners and other groups in society flourished in the general prosperity of the 1950s and 60s, felt disillusioned, especially those on means-tested age benefits (Preston, 1999). The housing shortage after World War Two meant that high rents as well as high inflation eroded their standard of living. Especially hard hit were single old people living alone. Labour's state housing provided mostly for families, and the hostels and flats proposed under the housing scheme for old people were never built (McClure, 1998). The resulting disillusionment created tension, not only between generations, but between the better-off old people who received the universal superannuation, and the poorer aged who received the more valuable means-tested Age Benefit. Pensioners formed activist groups around the country, threatening to use their mass vote as a protest (ibid). By the 1970s public pension policy was back on the top of the political agenda. The 1972 Royal Commission on Social Security confirmed the role of social security even in an affluent society and recommended higher real pension levels. The right to belong to and participate in the community was to be the key guide to determining the level of state support.

Effective from 1977, the new National Superannuation scheme was generous, set at 80 percent of the average wage for a couple by 1978, universal, available at sixty to everyone after ten years of residence in New Zealand, simple to understand and funded from general taxation (McClure, 1998; Cheyne et al, 2000). Formulated without proper regard to demographic studies or cost, the scheme defied the recommendation of the Royal Commission to maintain the status quo, as well as the findings of New Zealand and overseas research which showed that the needs of old people were likely to be less pressing than those of other groups such as families with one parent earning and families with adolescents (ibid). The scheme was expensive, more generous than elsewhere in its age of eligibility, and enlarged expectations of what the state would provide. The first cutback in the scheme was made in 1979, but any hint of further cuts resulted in strong protest from superannuitants. People close to retirement age at this point had been led to regard a generous pension as a right of citizenship. Middle-class Pakeha families who lived longer, earned more than others and sent their children to university benefited most from the policy changes of these years, which also provided for better access to tertiary education (Cheyne et al, 2000). The high cost of social security, and particularly of superannuation, in the tougher economic environment

of the late 1970s and early 1980s raised tensions between the generations and between different groups in the community who were competing for state support. In the face of high public expectations, reinforced by the Royal Commission's recommendations, the welfare system, and superannuation policies in particular, were strongly contested.

Current Policies and Debates

During the 1970s and 1980s health care and particularly institutional care for older people, while still subsidised by the state, was increasingly provided by the private sector. This produced a complex mix of public, private, voluntary and religious sector provision (Joseph and Chalmers, 1999; Saville-Smith, 1993). Several major policy shifts in health service delivery and an increasingly complex system of provision for older people in both health care and housing since 1984 have had the effect of successively alienating older people and compromising their ability to age in place (Keeling, 1998a; Joseph and Chalmers, 1999). More than a decade of structural reform in New Zealand from 1984 produced a shift away from the comprehensive services previously provided by the state as a right of citizenship (Kelsey, 1997). Entitlement to welfare was no longer based on citizenship rights but on individual need (Thomson, 1995). The legitimated claims of social citizenship were "progressively disestablished" (Yeatman, 1990) and citizens who had counted on a lifelong entitlement to public healthcare became customers, forced to choose amongst public and private services in a system whose values they did not share (Kelsey, 1997). In summary, the erratic nature of the policy changes which imposed a tax surcharge on superannuation, tighter targeting and financial and psychological penalties for those who fail at positive or successful ageing (Keeling, 1998a) have produced a sense of betrayal and suspicion amongst older New Zealanders (Joseph and Chalmers, 1999) which has undermined their sense of citizenship, even when the changes have not imposed significant personal hardship on individual older people.

Policy debates over superannuation, however, represent more than just the interests of contemporary superannuitants. They also reflect a wider debate over social relationships generally, intergenerational relationships in particular, and intergenerational equity, a topic which has been addressed by a number of New Zealand writers (Thomson, 1991; 1998; Keeling, 1998a and 1998b; Else and St John, 1998; St John, 1999; Ng et al, 1998). In 1998 Else and St John argued that the fact that old people rarely asked for food from foodbanks indicated the success of the current arrangements. However, they also view continuing inequity between

struggling younger people and the wealthiest old people as a threat to the future security of all older people. In order to avoid having to raise the age limit or lower the level of superannuation payments, they advocate adjustment of the current system to limit payments to the very wealthiest old people, backed up by the development of a coordinated policy on ageing beyond a narrow focus on income. Keeling (1998a, p. 47) noted that issues of ageing and economic independence were the subject of a “deeply problematic dialogue”, and Ng et al (1998, p. 17) warned that negative stereotypes, “to the extent that they are widely shared in society ... will create an unfortunate stumbling-block against the promotion of generational cooperation in society at large and cause divisiveness within households and families”.

The next sections will consider policies in the areas of income, health and housing which have affected the life chances and well-being of older New Zealanders, with particular reference to those born before about 1940.

Income Support for an Ageing Population

A secure and adequate income for older people is the first goal of the *New Zealand Positive Ageing Strategy* (Dalziel, 2001, p. 20), with increased future security of publicly funded retirement income cited as the first key action to be undertaken. In May 1999, the New Zealand Retirement Commissioner had commented:

Our policies relating to the provision of state-funded retirement income have undergone fundamental change on at least eight occasions over 100 years. It is not surprising that most New Zealanders now rank greater stability in retirement income policy as a high priority (in Preston, 1999, Foreword).

Later the same year a poll commissioned by the Super 2000 Taskforce (August 1999), later disbanded, showed that nine out of ten New Zealanders wanted a multi-party agreement on a long-term policy for superannuation. New Zealand is unique among developed countries in having a totally tax-funded universal pension, New Zealand Superannuation (NZS), as its only form of public pension for those who have reached retirement age (Preston, 1999). This scheme is arguably one of the most effective in the world (Else and St John, 1998) and despite the political rancour that has accompanied pension debates in New Zealand over the last one hundred years, the actual framework of retirement policies, the tax-funded state pension supplemented by voluntary saving has proved extremely stable (St John, 1999). The current Labour Government has introduced a plan to build up a capital fund for investment in order to ensure continued entitlement at age 65 to a universal, non-means tested income for a

married couple worth 65 per cent of the average net wage. However, at the time of writing this plan was not universally supported in Parliament, despite calls for consensus by organisations such as Age Concern New Zealand and Grey Power.

Policy advice to the incoming Minister for Senior Citizens (Ministry of Social Policy, 1999, Paper 4, p. 1) advised that an adequate income “is fundamental to the enjoyment of the opportunities retirement years can bring to people”. The National Health Committee (1998a) had already determined that income is the single most important determinant of health, that during the 1980s and 1990s New Zealand experienced the fastest increase in income inequality of any country for which data are available, and that the effect of this growing inequality is an increase in relative poverty. In all countries, the report concluded (*ibid*, p. 25), “poverty excludes people socially and materially from full participation in the life of their community”.

New Zealand was at the forefront of the world-wide trend towards economic liberalism during the 1980s and 1990s (Kelsey, 1997). It was a time of policy changes in a deregulated economy, with a ‘reluctant’ state which introduced a range of strategies to cut welfare spending. In 1985 the fourth Labour Government introduced a taxation surcharge on superannuitants’ other income. It affected a total of 23 per cent of superannuitants (compared with the two-thirds excluded by the means test on the 1898 Old Age Pension) but was highly unpopular with superannuitants (Preston, 1999). The surcharge was politically indefensible, considering that Labour in opposition had promised to protect superannuitants. Else and St John (1998) have argued that it was sensible in light of a top tax rate that fell from 66 per cent under National to 48 per cent in 1986 and 33 per cent in 1988. However the surcharge was resented by ordinary people who had worked hard and planned for retirement through private savings schemes only to find that they were penalised by it while much wealthier people with more sophisticated savings schemes were able to find legal loopholes to avoid it. In an appeal to older voters the National Party had promised before the 1990 election to remove the surcharge. Instead they tried to moderate spending on superannuation by narrowing the entitlement, bringing it into line with other benefits, and they also introduced other measures aimed at replacing universal benefits with closely targeted ones. The changes had been effected so rapidly, and it seemed to the public so arbitrarily, that there was strong public demand for political consensus on a long-term pension policy (Preston, 1999).

As a result the Todd Taskforce on Private Provision for Retirement was set up by the National Government in 1991, and endorsed the continued public provision of a tax-funded pension, supported by increased voluntary savings by income earners, but taking into account the intermittent employment experienced by most women, and increasingly by men as well. It also endorsed a gradual lowering of the pension-wage ratio, targeting the pension and raising the age of entitlement to 65 by the year 2001. The reforms of the early 1990s had introduced a “new morality” (McClure, 1998, p. 234) in which citizenship was closely allied to work, so that it was to be earned by active participation in the work force. While superannuation was not reduced to the level of other benefits, the changes, along with constant media representation of the elderly as selfish and greedy, induced a feeling of insecurity in older people, as well as a feeling that their citizenship rights and status were under attack. Continuing strong protest made it clear that political cooperation would be needed if a cap was to be put on superannuation spending. The multi-party Accord on Retirement Income Policies, set up in 1993 and guided by Taskforce proposals, succeeded in stabilising pension policy for several years, and the rising age of eligibility cut the numbers of superannuitants from 510,000 in 1992 to 470,000 in 1995.

An emphasis on self-reliance in the public rhetoric constructed ‘independence’ as “good news”, with slogans of positive ageing and successful ageing all too often equating to invisible or unproblematic ageing by assimilation into the mainstream of New Zealand society (Keeling, 1998a, p. 1). Despite attempts to achieve a multi-party accord, public debates continued to rage, and indeed the issue of how to protect the income security of New Zealand’s senior citizens became a driving force behind the rise to prominence of the New Zealand Grey Power movement (Keeling, 1998a) and a major issue in the 1996 election. The election resulted in a coalition between National and New Zealand First, which had not been a party to the Accord, and whose leader wanted to abolish the surcharge and introduce a compulsory social insurance type of superannuation scheme. The surcharge was removed, in April 1998, but in a September 1997 referendum, the proposed Compulsory Retirement Savings Scheme was rejected by 91.8 percent of voters (Preston, 1999), despite costly promotion, in favour of a universal tax-funded scheme provided by the state.

The gendered nature of retirement income policies was highlighted during the debates surrounding the referendum, when it was estimated that eighty percent of women and sixty-five percent of men would not be able to save enough to

provide adequately for their retirement (Cheyne et al, 2000). Most people who are eligible for national superannuation receive most of their income from NZS and there is a greater dependence upon NZS amongst women and Maori (Statistics New Zealand, 1997, p. 28). The household savings rate, expressed as a percentage of disposable income, has generally been dropping since 1980, from 12.8 percent of disposable income to 1.4 percent in 1996 (ibid). A survey carried out for Age Concern in 1990 showed clearly that the cost of living in old age depends heavily on housing and health, and as Else and St John (1998) argue, no amount of urging them to save is going to change the fact that it has taken most older people a lifetime of earning to pay off their only major asset, their home. If people in New Zealand are still renting in their sixties, it usually means they have never been able to afford to buy a house, and in addition to spending a significant proportion of their retirement income on rent, are unlikely to have any other major assets.

The Labour-led coalition government elected in 1999 acted quickly to restore the floor for New Zealand Superannuation from 60 to 65 percent of the average ordinary time weekly wage from April 1, 2000. In October 2000 it announced a planned superannuation scheme to provide a universal pension set at 65 percent of the average wage, payable at the age of 65, and funded from the New Zealand Superannuation Fund. At the time of writing the age of eligibility is 65 years, and NZS for a married couple is \$21,380 per year, or \$14,117 for someone living alone. The latest available figures show that NZS is the only source of income for 31 percent of Pakeha men, 47.7 percent of Maori men, 41.5 percent of Pakeha women and 52.9 percent of Maori women: in the year to March 1996, 72 percent of women and 54 percent of men received at least three-quarters of their income from NZS and only seven percent of men and two percent of women received less than a quarter of their income from this source (Statistics New Zealand, 1997). People who had planned to retire at sixty but found the age of entitlement extended to sixty-five in the meantime may be eligible to receive the Transitional Retirement Benefit until they qualify for NZS (Work and Income New Zealand, April 2001). Single superannuitants living alone are eligible for the Living Alone Allowance, which plays an important role in keeping older people, especially very old single women, from slipping into poverty (Else and St John, 1998). Since 1898 the state in New Zealand has accepted a measure of responsibility for income maintenance of older citizens, and in the superannuation debates over the last one hundred years or so can be seen the conflicting views of those who see financial independence in old age as a citizenship right, and those who see it as a matter

of individual responsibility (Keeling, 1998a). New Zealand is not alone among countries struggling to devise retirement income policies to accommodate ageing populations. What is unusual is the simplicity of New Zealand's retirement income policies, which provide for a tax-funded universal basic income supplemented by voluntary saving with no tax incentives and no compulsion. The major implication of the scheme for senior citizens is that there is no stigma and nobody is excluded (St John, 1999).

It remains to be seen whether the proposed superannuation fund, along with the initiatives of the *New Zealand Positive Ageing Strategy* (Ministry of Social Policy, 2001) will help to secure an intergenerational contract that New Zealanders feel is fair. If not, headlines such as 'Bedtime extended to save money', over a story (Hawkes Bay Today, September 16, 2000) about superannuitants staying in bed for fifteen hour stretches or sitting wrapped in a blanket with a hot water bottle to avoid using electricity will only become more common. This issue, on the surface about income levels for superannuitants and the price of electricity, also has important implications for the health of older people, another area where older people are often portrayed as a burden on the wage-earning population, and the subject of the following section.

Health of Older People

Health Status of Older New Zealanders

Health has been inextricably linked with its social, cultural and economic determinants (National Health Committee, 1998a). The link between income and health is well known (Ministry of Health, 2000; Else and St John, 1998). Not only is income a predictor of health status, with lower incomes limiting options for purchasing health care, health insurance, appropriate housing, food, clothing, heating and other health-promoting goods and services, but poor health can also limit income-earning opportunities as well as costing more (Dwyer et al, 2000). A National Health Committee report (1998a, p. 3) emphasised income as "the single most important determinant of health". The committee found that employment and occupation, education, housing, population-based services, social cohesion and culture and ethnicity were also highly influential factors. Older people have lower incomes than the average: the median annual income for someone aged 65 or over in 1996 was \$12,040, compared with the median income for all New Zealand adults of \$15,600 (Dwyer et al, 2000). They also spend more on food, housing, household operation and transport, and significantly more on personal and health services than other households do (Statistics New Zealand,

1997). Along with sole-parent households, sole-occupant households where the occupant is an older person (65+ years) account for forty percent of low-income households, defined as those in the lowest twenty percent of income distribution (Ministry of Health, 2000).

Deprivation of area of residence, a concept introduced in Chapter One, is increasingly recognised as a key predictor of citizens' life chances (Crampton et al, 2000). Inequalities in health have been shown to be pervasive in New Zealand, and to exist at all ages, from infancy to extreme old age (Ministry of Health, 2000). Increasing levels of area deprivation are associated with increased total mortality as well as lifestyle and disease risk factors, including cardiovascular disease:

The relationship between socioeconomic status and cardiovascular disease persists in old age and risk factors cluster around the less well educated and less affluent for whom the need to prevent cardiovascular disease is greatest (National Health Committee, 1998a, p. 79).

This report from the National Health Committee recommended that smoking cessation programmes and specific initiatives to increase physical activity should be made available to older people. However, a subsequent report from the National Health Committee (2000) found that little direct investment had been made in health promotion for older people.

While there is an acknowledged link between ageing and poorer health status, and increased rates of hospitalisation and disability (Dwyer and Gray, 1999; Ministry of Health, 1999), research suggests (Flett, Kazantzis, Long, Millar and MacDonald, 1999; Te Puni Kokiri, 1997) that older people in New Zealand, both Maori and Pakeha, regard their own health positively. However, international studies have shown that older people are at risk of mental illness when recently discharged from hospital, recently widowed, living alone, or economically and socially disadvantaged, with men more at risk than women (Dwyer and Gray, 1999). Funding arrangements that focus on residential care services rather than on providing support for "wellness and independence" (National Health Committee, 2000, p. 3) in the community leave older people with mental illness, and their families, few choices.

Mental Health

The mental health needs of older New Zealand adults have been given very little attention, either in policy or in practice (Flett et al, 1999; Melding and Osman-Aly, 2000). Dwyer and Gray (1999) cite research which suggests a higher risk of

mental illness among men than women, and a high suicide risk among older men, surpassed only by that among younger men. A survey initiated by the New Zealand branch of the Faculty of Psychiatry of Old Age (Melding and Osman-Aly, 2000) found that the development of mental health services for older people had been neglected as a strategic planning issue. The authors also identified:

an urgent need to resolve ... ideological differences and formulate a coherent, national strategic plan to guide future provision of mental health care that can meet older patients' needs (ibid, p. 439).

The ideological differences include differences of opinion about the division between age-related disorders (especially dementia) and non age-related disorders, and whether they belong to geriatric or mental health services. The authors comment that neat divisions are difficult to apply to patients who are suffering from more than one disorder. Another difficulty referred to is that there are conflicting ideological perspectives on whether older people with functional disorders can be 'mainstreamed' into adult psychiatric units or whether their physical, cognitive, spiritual and mental health needs should be managed in comprehensive age-specific services, as endorsed by the World Health Organisation and international professional associations.

The report cited above highlights the strong association between medical disorders and mental health problems, with disorders that often trigger depression and suicide in older people, such as cerebrovascular disease, chronic pain and physical disability featuring prominently. Survey data indicates that age-related and non age-related disorders are not separable. The authors found that in most areas there was no provision for treatment of drug and alcohol problems for the over 65 year age group, that numbers of beds, available psychiatrists and other specialist staff fell below international standards, and that for the thirty percent of patients whose needs were not considered met, the greatest perceived gap was a lack of community programmes and caregiver support. In summary, the concern is that ideologically driven differences of opinion between medical specialties may be impacting negatively on the delivery of mental health services to older New Zealanders, in the process compromising their capacity and opportunities for citizenship.

The Health Reforms

Older people in New Zealand, along with the rest of the population, have lived through a "turbulent decade" of health reforms since a major shift in both the ideology which governed health policy and the organisation of health care

occurred in 1991 (Hornblow, 2000, p. 133). The health reforms, with their stated goals (Upton, 1992) of improved access for all New Zealanders to an effective, fair and affordable health system; efficient, flexible and innovative service delivery; reduced waiting times; wider consumer choice of services; enhanced working environment for health professionals; improved illness and injury prevention; health promotion and increased sensitivity of the health system to the changing needs of the population, have been well documented (Ashton, 1999; Hornblow, 2000; Cheyne et al, 2000; Ashton, 2000; Roberts, 2000; Simon, 2000), and comprehensively deemed to have failed to meet their key objectives. In particular the reforms failed conspicuously to improve access to health care, two major indicators being surgical waiting lists and waiting times. One result of the reduced amount of elective surgery being performed in public hospitals is a growth in private health insurance claims and an increase in premiums, especially for elderly people, who are finding private health insurance increasingly unaffordable (Ashton, 1999).

Older people who feel they can no longer afford private health insurance face the dilemma of waiting for an indeterminate length of time on a public waiting list if they should need to have a hip replaced or a cataract removed, or funding an expensive private operation from their own dwindling capital assets. If their only major asset is their house, or if they are renting and have no other access to cash, then they have no choice but to wait, in pain or with an impaired quality of life, until they arrive at the top of the waiting list. Contractual purchasing arrangements introduced by the health reforms have resulted in a fragmented health service for older people in the absence of real policy and planning (Guthrie, 2000). Guthrie, a prominent geriatrician, claims that older people were outraged and disadvantaged by the move to make older people's health part of Disability Support Services. In addition, she argues, the morale and wellbeing of older people was jeopardised by inadequate funding.

Since the election of the Labour/Alliance Coalition Government in 1999 the Ministry of Health has reappointed a Manager for Health of Older People Policy to co-ordinate the development of a strategy, and funding has increased for home support, respite care and the reduction of surgical waiting lists. However, health of older people is not a priority in the New Zealand Health Strategy (King, 2000), and funding is still a major issue, as is a chronic shortage of trained health professionals. In the care of older people, Dr Guthrie (2000) argues, this impacts negatively on the provision of psychotherapy for older people who are depressed

and may be at risk of suicide, and on standards of care, especially in residential care. The consequence is an increasing number of referrals to elder abuse and neglect services.

The Coalition Government's reinstatement of District Health Boards, with members first appointed and later elected, should enhance community representation, though whether that in turn will enhance the ability of the boards to purchase the services that consumers prefer depends on the level of funding provided. The failure of the health reforms to improve the health status of New Zealanders (Ashton, 1999), and the change of government have seen an attempt to return to a more social democratic model for the health system (Cheyne et al, 2000), although the central challenge remains that of managing a large government-funded area of social policy, emphasising "quality, efficiency, responsiveness, and social democratic values in a largely free-market economy" (Cheyne et al, *ibid*, p. 223). There has been a trend away from the language of competition and the jargon of economics and management. However Ashton (1999) warns that changing the language will not restore the trust and commitment that have been lost unless government spending on health services is increased. The major issues currently affecting health care for older people relate to underfunding and lack of co-ordination in health promotion and assessment services as well as in acute and long-term health care (National Health Committee, May, 2000). Roberts (2000) argues that the health care needs of an ageing population are entirely predictable and can be planned for. However there has been a major erosion of citizens' trust in the public health system during the last two decades of the twentieth century. A survey on elderly people's experience of health care carried out over five nations (Schoen, Strumpf, David, Osborn, Donelan and Blendon, 2000) indicated that 25 percent of older New Zealanders, as opposed to 19 percent in the U.S. and 13 percent in Australia, the U.K. and Canada, are very concerned that they will become a burden to their family, and 19 per cent are very concerned that they will have to leave their home because of a health problem. New Zealand, with the United States, also leads the five-nation group in the percentage of elderly people who have serious concerns about being able to afford the level of health care they will need, and 48 percent of elderly New Zealanders feel that medical care has deteriorated over the last five years. One of the lessons of the health reforms which has major citizenship implications is that:

our public health system is seen as a national taonga, and that erosion of the sense of ownership and confidence becomes a shared loss for the community as a whole (Hornblow, 2000, p. 134).

This view of the public health system as a taonga (treasure), a shared national asset, is strongly linked with ideas about good health as a critical component of wellbeing and hence of belonging and social inclusion (Ministry of Social Policy, 2001b). Maori older people are especially dependent on the public health system (Te Puni Kokiri, 1997). The following section will discuss the reasons for this and will consider policy related to the healthcare needs of older Maori.

Health Care for Older Maori

One in seven people were counted in the Maori ethnic group at the 2001 Census (Statistics New Zealand, 2002). While only about 3 percent of the Maori population was aged 65 and over (Health Funding Authority, 1998), the proportion of Maori elderly is expected to increase to 6.6 percent by 2011 (Maaka, 1993). A report (Te Puni Kokiri, 1997) on the health and wellbeing of older Maori found that 85 per cent of respondents depended on government superannuation for their income in retirement and 87 per cent did not have private insurance. Preliminary findings from a report on the living standards of older New Zealanders (Fergusson et al, 2001) support other evidence that Maori as a group experience lower living standards than other New Zealanders. The study found that this is not entirely explained by economic disadvantage (measured by income, savings and accommodation costs). A recent discussion document (King, 2001) outlines the government's response to the fact that Maori as a group have the poorest health status of any group in New Zealand and acknowledges that this finding cannot be explained by socioeconomic status alone. Other factors which affect health outcomes are genetic predisposition, behaviour, the environment and the availability of health services. Maori, with higher disability, youth suicide and young adolescent birth rates, are also far more likely to smoke than non-Maori (Ministry of Social Policy, 2001b)..

Although the gap between Maori and non-Maori life expectancy closed significantly between 1950 and 1990, Maori life expectancy has not increased since 1990 (National Health Committee, 1998) and there is still an average of eight years' difference. In addition Maori continue to experience a heavier burden of disease and injury than non-Maori (King, 2001, p. iii). A recent study of the health care needs of older Maori (Hirini, Flett, Kazantzis, Long, Millar and MacDonald, 1999) has indicated a higher level of physical ill health and a lower level of health care use than among older non-Maori, findings which indicate unmet need and inequitable access to formal health care. The authors conclude that if equity in access and utilisation of health care as a policy objective for New Zealand health

services is to be realised for older Maori, then a preference for informal health care through Maori social networks, and the potential influence of attitudes and beliefs within a Maori cultural context need to be acknowledged. In view of the dramatic projected increase in the numbers of older Maori (Statistics New Zealand, 1998), and the Maori preference for “integrated policy and planning to address Maori health needs” (Hirini et al, 1999, p. 150), the authors stress the value of Maori participation in shaping the delivery of health care to Maori, and contend that:

policy should extend to the recognition of Maori aspirations for autonomy, self-empowerment and a reduced reliance upon the State in health policy planning and the provision of health care. Such recognition will require a vastly improved capacity for Maori participation at all levels of decision making in policy and implementation concerning the health and wellbeing of their living taonga (ibid).

It seems that the opportunity for Maori to provide services for Maori created under the Disability Support Services framework “has not yet resulted in (a) significantly better performing sector or improved outcomes for Maori” (Cunningham, 2000, p. 3). Cunningham (ibid) argues that Maori “have a distinctive pattern of morbidity, mortality and disability characterised by earlier onset”. The onset of ill health occurs for Maori about five years earlier than it does for non-Maori (ibid, p. 7), so age, and 65 years in particular, is not a suitable measure to use for funding formulae, as it is biased towards populations with longer life expectancies. Cunningham (ibid, p. 9) argues that inconsistencies in the collection and analysis of Maori health data and Maori ethnic statistics generally make it difficult to report reliably on trends for Maori or to make judgements on actual progress in health outcomes. Data which do exist on the health of older Maori (Health Funding Authority, 1998) make explicit the extent of some of the inequalities. For example, coronary heart disease and cancer are the leading causes of death for Maori aged 45 to 64 years, and for those aged 65 and over: Maori women in the younger of these two age groups were nearly three times as likely to die from lung cancer as non-Maori women, and four times as likely to die from cancer of the cervix. Maori men were more than twice as likely to die from stomach cancer as non-Maori men. Maori men also have twice the rate of deaths from coronary heart disease. Respiratory disease was reported to be the leading cause of admission to hospital for Maori women aged 65 and over, three and a half times the non-Maori rate, and the second leading cause for Maori men, at just over twice the non-Maori rate. The National Health Committee (1998a, p. 41) summarised the health status of Maori as relatively poor and noted that Maori carry an excess burden of mortality and morbidity (illness).

The Maori health policy (Health Funding Authority, 1998) developed by the Health Funding Authority of the former National Government was framed as a response to the Treaty of Waitangi as New Zealand's founding document, and to identified Maori health issues. Its strategies were intended firstly to increase Maori participation at all levels of the health sector, recognising the importance of whanau, hapu and iwi structures to Maori health; secondly, to support and encourage the contribution of Maori service providers and workers within the health sector; and thirdly, to ensure that mainstream providers respond appropriately to Maori health needs. The policy response of the succeeding Labour-led Coalition Government (King, 2001) endorses these priorities, recognising the principles of the Treaty of Waitangi and the importance of safeguarding Maori cultural concepts, values and practices, in particular the important contribution made by whanau, hapu and iwi structures to Maori health. It supports a 'for Maori by Maori' approach to health services that practise 'holistic' Maori views of health and healing. The District Health Boards have primary responsibility for planning, funding and delivering or ensuring services to Maori and non-Maori. A particular problem noted in the discussion document (ibid, p. 45), also noted by other writers (Cunningham, 2000; Durie, 1998; Blakely, Robson and Woodward, 2002) is the lack of high-quality statistical information about Maori which is available to assist in the development of public policy.

Current Directions in Health Policy for Older People

The Government's *Health of Older People Strategy* (Dyson, 2001a), closely linked to the *New Zealand Positive Ageing Strategy* (Dalziel, 2001), acknowledges that current health and support services for older people "lack a coherent policy and funding framework", and can be confusing for older people who are trying to identify their health needs and support options (Dyson, 2001a, p. xi). The strategy envisages instead an "integrated continuum of care" which:

will facilitate the wellbeing of older people, their control over their lives, and their ability to participate in and contribute to social, family, whanau and community life.

By contrast, current media reports and anecdotal evidence reflect an environment in which a lack of leadership and expertise, and an increasingly critical lack of money in the health system results in reduced access to publicly funded health services, impacting negatively on the life chances and wellbeing of older people and reducing their capacity to exercise their citizenship rights and responsibilities. It remains to be seen whether confidence can be restored by the government's

initiatives, but in any case it is clear that health programmes alone cannot improve the health of New Zealanders “without major improvements in housing, education, incomes, and employment” (Cheyne et al, 2000, p. 223). The last section of this chapter considers the impact of housing policies on the lives of older New Zealanders.

Housing Policies and Older New Zealanders

The third goal of the *New Zealand Positive Ageing Strategy* (Dalziel, 2001) is affordable and appropriate housing options for older people. As well as providing the basic necessity of shelter, housing can also become an indicator of social placement, a source of wealth, an arena for self-expression, and a place of shared memories (Thorns, 1993). While my focus is on housing for older people now, it is also important to understand something of the historical and public policy background, not least because the people who are elderly now have had their housing expectations and realities shaped by their housing experiences over a lifetime. Housing policies have been influential in creating a difference in disposable income that has significant implications for citizenship between elderly people who own their own homes outright, and those for whom rental or mortgage payments represent significant housing costs. In New Zealand there has been a strong belief in home ownership as a solution to housing problems, including that of housing elderly people, since the late 1800s when housing became a political issue with the emergence of a permanent wage-earning class (Isaac and Olssen, 2000). Policies which provided for low interest home loans, schemes for capitalising the Family Benefit or renting to buy acted as incentives for families to maintain the home they lived in, and to own their own home. The First World War and the influenza pandemic of 1918 reinforced a recognition of the link between substandard homes and social unrest, but it was the Great Depression that put housing back on the political agenda. This time the rights of citizenship, rather than fear of contagious disease, were increasingly prominent, and it was now accepted by most that it was the government’s role to address the issue (Isaac and Olssen, 2000). The Labour government elected in 1935 moved quickly to address the acute housing shortage and the first state house was opened in Miramar, Wellington, in September 1936 by Prime Minister Michael Joseph Savage. Those allocated state houses (including two research respondents who occupied some of the very first state houses in Petone) were lucky enough to belong to the target group:

that is, young, married couples with children, who were 'respectable' and could afford the rent. Those who fell outside this group - the poor, single and elderly - had to continue to look to the private sector to meet their accommodation needs, a fact that drew some criticism (Schrader, 2000, p. 136).

Labour's state houses, while not privately owned, were consistent with the 'New Zealand dream' of the ideal family in the ideal suburb (Gatley, 2000). Although more funds were actually provided through State Advances loans for owner occupation than for state rental housing the state houses were an improvement on the existing housing stock and helped raise the national standard of living. People who occupied state houses did so with pride in the quality and design of the houses, later buying them as they became available for purchase under a later National Government. Access to housing for different groups of the population varied as a consequence of the housing policies of successive governments during the 1970s, a time when rapid increases in land and house prices made the move from renting a home to owning one progressively more difficult (Thorns, 1993). From the 1950s government funding subsidised rest homes, assisted local authorities in the construction of pensioner housing and provided finance for older homeowners to swap large older houses for smaller units or build relocatable granny flats (Dharmalingam and Barnes, 1998).

The ability of people to achieve their housing goals is constrained by a range of societal factors, including public policies, and individual or household factors such as residential history, capital accumulation, income and household structure and stage in the life cycle. In recognition of the differences between the Pakeha system, based on the housing market (Thorns, 1993), and the Maori desire to remain at 'home' in the context of whanau, hapu and iwi structures of Maori society based on the marae, the Papakainga Housing Schemes were introduced in the 1980s. Acknowledging Maori spiritual connections with the land and the difficulties faced by multiple owners in securing loans for housing on Maori land, the schemes provided access to home ownership by offering loans secured by the house rather than the land (Dharmalingam and Barnes, 1998).

A report (Campbell, Ny and Thorns, 1987) commissioned to investigate the relationship between the different housing requirements of the elderly and the range of accommodation options open to them noted the dominant tendency for elderly people to remain in their locality after retirement and identified a trend towards increased private sector provision, with the greatest increase in areas where levels of state provision were lowest. Older people were found to be "reluctant borrowers" (ibid, p. 81), so even those who owned their own homes

might be unable to move if there was insufficient equity in their existing property to purchase a more suitable one, and if asset criteria for cheap rentals excluded them from the rental market. The report concluded that housing provision bore little relation to demographic need: consumer preferences were not known, and housing policy to then had been “ill-defined and ad-hoc in nature” (ibid, p. 80), with little attention given to consumer involvement in housing choice and location.

A report on the views of senior citizens to the first Minister for Senior Citizens (Senior Citizens’ Unit, 1990) declared that housing provision was not seen as a major problem for senior citizens, as most people were homeowners by the age of sixty. There was more concern amongst senior citizens about home maintenance costs, particularly for older women living alone, and about the rising cost of rates, which could threaten the security of home ownership. The lack of reasonably priced and sized rental housing was an issue for participants, who felt that low rental housing should be the responsibility of both central and local governments. There was a general feeling that people may plan for their accommodation in retirement, only to find the rules had changed when they got there, disadvantaging senior citizens who had worked hard to remain independent. Asset qualifications for council flats, and allocation procedures for state and council housing were felt to be too stringent, and there was support for a wider range of communal and residential accommodation for people who could no longer manage to live independently, and for facilities which would cater for the cultural preferences of Maori and Pacific Island senior citizens.

Government housing policy in New Zealand, in line with international trends, was to assume a more residual character from 1991, with reforms designed to remove the state from its traditional role in the direct provision of housing and finance, replacing this with an accommodation supplement to assist low-income households (Murphy, 1999). The new policy regime impacted negatively on low-income housing, with housing costs contributing to increased poverty in New Zealand in the 1990s (ibid). A National Health Committee report (1998a) confirms this link, and also makes a direct link between housing tenure and mortality, with people in rental accommodation experiencing higher death rates than owner-occupiers, even after other socioeconomic variables are taken into account. This link is of major concern, especially in the light of New Zealand’s falling home ownership rate (Badcock, 2000) and the projected rise in the number of superannuitants with no other source of income as the population ages. In 1986 New Zealand’s home ownership rate was the world’s highest at 73.7 percent. It

is now eighth, at 67 percent (Weekend Herald, March 30, 2002). A survey of the living standards of older New Zealanders (Fergusson et al, 2001) found that amongst single respondents, 68 percent owned their own home and a further 16 percent lived in a home owned by a family trust or a relative. Amongst couples, 86 percent owned their own home. For a further 8 percent their home was owned by a family trust or a relative, and few had mortgages. In a survey of four hundred kaumatua aged sixty years and over Durie (1999) found that over half owned the home they lived in and about half lived alone or as a couple. Home ownership is strongly linked to citizenship status for New Zealanders:

Owning your own home is considered almost a birthright in New Zealand. And selling it to finance a comfortable retirement has become the preferred way of facing old age for huge numbers of us (Ansley, 2001, p. 17).

The accumulation of wealth through housing depends on marital status and regional variation as well as ethnicity, with single people, especially women, and those outside the main centres likely to have a smaller range of choices available to them on retirement (Thorns, 1993). The links between health and housing are well documented (Howden-Chapman, Signal and Crane, 1999; National Health Committee, 1998; Dwyer and Gray, 1999; Age Concern, 2000), showing that cost, location, quality, insulation and level of overcrowding all have a direct impact on the occupants' health. These links and the national prominence of the concept of 'ageing in place' (Keeling, 1998, 1999; Howden-Chapman et al, 1999; Dalziel, 2001; Thorns, 1993) as well as the symbolic importance of concepts of 'home' make housing a crucial issue for older people, and one that influences their capacity to participate and to exercise their rights as senior citizens. Murphy (1999) sees access to appropriate housing as a basic human right. More than just a commodity, housing is a "site of socialisation" and provides a context for interaction with the wider community (ibid, p. 235).

The ageing of the population and the changing structure of New Zealand households (especially a huge rise in the number of people living alone) are key drivers in the pattern of future housing demand, which will be complicated by the differing needs of an older European population and much younger, but also ageing Maori and Pacific Island populations, as well as by a growing regional divergence (Badcock, 2000). Current population and labour market trends will contribute to an increased demand for low-cost housing, and the private rental sector, which currently provides about a quarter of the private dwelling stock in New Zealand, cannot be relied upon to increase the supply of low-cost rental accommodation (ibid). The lack of a reliable information base for monitoring the

condition and availability of adequate housing make both comparisons and planning difficult (Statistics New Zealand, 2000). Badcock (2000) argues that under-maintenance is widespread in the private as well as the public sector, and that in some regions of New Zealand there is a serious mismatch between housing needs and available dwellings. Overall New Zealand's existing housing stock, more than 35 per cent of which was constructed before the Second World War, presents some significant issues for our ageing society (Howden-Chapman et al, 1999). Housing built before April 1978 was not required to have insulation, and dampness and cold have been shown to be issues for older people who try to keep costs down by economising on heating, risking "voluntary hypothermia" (ibid, p. 18). New Zealand data suggests that a very large proportion (87 percent) of domestic hypothermia-related fatalities occurs in those over 65 years (ibid).

Little consideration has been given in the past to the indoor or outdoor spatial needs of older people, but recent research (Howden-Chapman et al, 1999) has challenged the assumption that older people do not want or need much space. Badcock (2000) also argues that 'bedsitters' are no longer a suitable form of accommodation and should be phased out, subject to occupier preferences. A mismatch between Housing New Zealand tenants, applicants on the waiting list and available rental stock presents another spatial and intergenerational equity problem. Due to the tenure protection granted to some Housing New Zealand tenants in 1994, some one and two-person households are still occupying so-called family homes. By contrast, the reality of extended family living amongst Maori and Pacific Island people needs to be acknowledged by the provision of sufficiently large and structurally appropriate public housing stock to accommodate sometimes several generations of family members (Howden-Chapman et al, 1999; Badcock, 2000).

Older people have identified space and security, as well as family, as critical issues with respect to their housing needs (Dupuis and Thorns, 1996). Security for older people is related to issues of personal safety and to assets and money (Thorns, 2001). While older people in New Zealand are likely to own their own homes, for many it is the only major asset they have, accumulated over a lifetime (Davey, 1998). New Zealanders, with around seventy per cent of their net worth in property compared to fifty per cent in Australia, are often asset rich and income poor and a problem arises when they try to generate retirement income out of their one major asset, their home (Ansley, 2001). As the population ages and more retirees want to sell the suburban family home and move to something smaller, perhaps in a sunny coastal town, there will be an oversupply of larger houses, with a

corresponding depression of the market, and a shortage of well-located retirement homes, for which the price will increase accordingly (ibid).

While survey results in the U.S. have been cited as indicating (Friedan, 1993) that age-segregated environments may be conducive to greater levels of participation and mobility in their neighbourhood for some elderly people, the long-term effects on society as a whole of policies which segregate people on the grounds of age are not known. Changes in policies affecting accommodation, care and support have led to fears amongst older people about funding long-term care. The concept of a continuum of care introduced in 1991 was supposed to enable older people to make appropriate choices from a range of available options. Instead the asset-testing regime limited choice to either home ownership or publicly funded residential care. Despite constant modification of the income and asset testing regime (Joseph and Chalmers, 1999; Ashton, 2000; Keeling, 1998b), there are still inequities, in particular between people aged sixty-five and over and those who are younger than sixty-five, or who are the victims of violent crime, for whom residential care is not means-tested (Ashton, 2000). Anecdotal evidence suggests that people who need residential care (or their families) may be putting it off through fear that the asset test will use up their life savings (usually in the form of their home) before they reach the level of eligibility for a government subsidy. The contentious regime discourages saving, an effect which conflicts with the efforts of the office of the Retirement Commissioner to encourage private provision for retirement. In addition it is open to avoidance through the setting up of family trusts to protect assets (ibid). The symbolic values which attach to the family home beyond its market value help to explain why a policy which dictates how and when older people must dispose of their assets threatens their sense of identity as independent homeowners, their autonomy in maintaining and passing on their family's inheritance (Keeling, 1998), and their sense of themselves as senior citizens.

Despite the fact that many elderly people tend to interpret the debate about equity release as an attack on their past thrift, Thorns (1993) argues that there is a case to be made for using the capital gain for supported accommodation, especially in the case of people who retired in the 1980s and 1990s after having experienced particularly favourable conditions and subsidies throughout their housing and working careers. In the meantime, the asset test for residential care remains: a single or widowed person needs to have less than \$15,000 worth of assets (plus up to \$10,000 in prepaid funeral expenses) before qualifying for the Residential

Care Subsidy. A house is included in the assets unless a partner or dependent child lives in it (Work and Income New Zealand, April, 2001). In December 2000 the Labour-Alliance government introduced income-related rents for state house tenants, ensuring that they pay no more than 25 per cent of their income in rent, and in the 2001 Budget plans were announced for an extra 300 state houses to be built and 9000 to be upgraded over four years. The head of the restructured Housing New Zealand Corporation (Lennon, 2001) argues that an increased and more varied demand for low-cost housing, driven by population trends, labour market conditions and the different requirements of an older European and younger, faster-growing Maori and Pacific Island populations, necessitates the development of innovative policy and funding initiatives to make available more third sector housing. Third sector housing refers to housing developed by agencies in which the values of the organisation emphasise social purposes rather than profit. The Abbeyfield communities, for example, offer a model of housing for elderly people which provides companionship and an affordable home for independent older people. Thorns (2001, p. 3) argues that this model:

could provide important data for researchers attempting to further our appreciation of these older people's understandings of and beliefs in their continuing social role and value, and ensure that the places they live in facilitate the expression of those roles.

Considering the issues around future house and neighbourhood design, the authors of a recent U.K. study have argued that:

the designed environment is not only a physical statement of who we are, but also of how we are valued (Andrews and Townsend, 2000, cited in Thorns, 2001, p. 3).

How we house our elderly people now, and how we ourselves expect to be housed in the future, are questions that need addressing. As Thorns (2001) has argued, we need to be reflecting on how the design of our houses and our neighbourhoods values all our citizens and takes into account the changing needs and concerns of different groups. Murphy (1999, p. 27) also emphasises the community benefits that accrue from the provision of good quality affordable housing, and the need for housing policy which acknowledges shelter as "a basic right of citizenship", rather than a matter of individual consumer rights.

Constant fluctuations in policies on accommodation and caring services for older people have produced uncertainty, confusion and a sense of alienation among older people (Joseph and Chalmers, 1999). However it is also clear that, allowing for regional variations in property value, people who entered the housing market

in the 1950s and 1960s are likely to have accumulated significant wealth through home ownership (Thorns, 1993). This has important implications for future housing policy, when it is considered that conditions for the cohorts which follow, those born in the 1950s and 1960s and entering the housing and labour markets in the 1970s and 1980s, were much more uncertain, with higher unemployment, a volatile housing market and policies which did little to encourage high levels of home ownership. Later cohorts are therefore likely to enter retirement having had much more limited opportunities to accumulate wealth in the form of housing than the generations which preceded them.

Summary

This chapter has considered social policy shifts in three key areas that have been influential in the lives of New Zealanders born before about 1940, as the participants in my research project were. It has discussed in turn the policies which have most affected income, health and housing for people who belong to the cohorts now aged sixty to ninety years. The discussion has touched on policies which affected people who were elderly at the time as well as those which have impacted on people who are elderly now at different stages in their lives. This approach was based on the recognition that included among the effects of government social policies are future expectations based on the contract established between government and citizens over time. The people in my study who became superannuitants from the 1970s were those who could fairly claim to have “built” the welfare state over the previous forty years and had expectations for their own retirement based on “a highly developed policy framework and a significant role for the state” (Joseph and Chalmers, 1999, p. 164). In addition to the explicit contract between citizens and the state, Thomson (1992) argues that the distributive regime known as the welfare state established an implicit contract between generations. While the explicit contract established by the state with the “welfare generation” (ibid) has been largely protected, especially in the area of income maintenance, less so in health and housing, Thomson’s argument is that the implicit contract, based on trust in a balance between the obligations and the rights of citizenship has not been honoured, at least through the policies and the distributive apparatus of the state.

Agreeing that young New Zealand families and individuals have been the losers in the generational welfare contract, at least since the 1980s, Else and St John (1998) argue that a much broader policy focus on interdependence must replace a narrow fiscal focus on the welfare contract between generations. They advocate

sensible adjustments to the current superannuation scheme coupled with investment in the generation born around 1990. Recent New Zealand research (McPherson, 2000) suggests that the intergenerational social contract, while it may be under pressure from social policies which overestimate available levels of family support, remains intact at both the micro level of the family and the macro level of society. Familial affection and the “flow of family support” (ibid, p. 426) from older to younger generations may offset the imbalance of state support towards the elderly and away from the young. In addition, McPherson cites attitudinal data which show across age group support for increased taxes for health (weighted towards older generations), education (weighted towards younger generations) and superannuation at current levels. This discussion has indicated general agreement that the cohort to which my respondents belong benefited greatly from the initial flourish of the welfare state as they were entering young adulthood and continued to benefit until the individualist ethic of the neo-liberal ideology which came to be known in New Zealand as “Rogernomics” ushered in a new regime. The social policy reforms and restructuring that took place under the 1984 Labour Government and subsequent National governments aimed at a reduction of the state in favour of a reliance on the market to provide for the wellbeing of citizens. The introduction of Mixed Member Proportional Representation in 1996 and a Coalition Agreement between National and New Zealand First brought a new, limited form of leverage for Maori, a more negotiated approach to social policy development, and “a partial retreat from the extremes of market reform” (Cheyne et al, 2000, p. 224). The Labour-led Coalition Government which came to power in 1999 moved quickly to restore the trust of the so-called ‘welfare generation’ by immediately reversing the previous National Government’s cuts to superannuation rates. It also moved to establish a special fund to ensure that superannuation payments can be guaranteed in the future. A measure of democracy was reintroduced into the health system through elected representatives on District Health Boards, but the unpopular asset testing regime remains in place for residential care for older people, and waiting times for elective surgery are still a contentious issue, as in underfunding, a perceived lack of leadership in the health service (Fairgray, 2002), and confusion about whether privatisation of sections of the public health service, an aim of the health reforms, is still on the government’s agenda (Sainsbury and Wilkinson, 2002). In summary, social policy was generally favourable to the cohorts of New Zealanders who are now retired until the late 1980s, when the state retreated from its responsibilities for social citizenship in favour of a market-oriented consumer citizenship. The resulting lack of policy cohesion and direction has led to widespread hardship,

especially for young families and individuals; feelings of insecurity and anxiety on the part of older people; and an unsustainable reliance on families to maintain the welfare contract between generations.

The following chapter will discuss the theoretical background to the research design and methodology, and provide a detailed description of the research project.

Part Two:

Research Methodology

and

Research Groups

Chapter Six:

Research Methodology

Introduction

The broad aim of this research project was to understand how old age is experienced by New Zealand senior citizens in their local and national communities and to provide a theoretical and social policy context for their stories. Old age is understood as a social construct and citizenship as a social practice mediated by individual biographies, by access to opportunities for participation and by social policy.

Until recently both gerontological research and professional assessments have been focused on the examination of a narrow range of dependency needs rather than on what older people themselves wanted “from health and social service agencies, and from life in general” (Gearing and Dant, 1990). It has been argued that the meaning of older people’s lived experiences has often been ignored, and that they have been denied a role in defining their own needs (Gearing and Dant, 1990; Wilkin, 1990; Phillipson and Walker, 1986; Ng, Weatherall, Liu and Loong, 1998) . In the 1980s and 1990s, however, earlier functionalist perspectives which had viewed old age as a social problem were increasingly challenged by writers who viewed the structures and attitudes of society as constructing the problem (Phillipson, 1982; Phillipson and Walker, 1986; Walker, 1982, 1996; Kendig, 1986; Bond and Coleman, 1990; Arber and Ginn, 1991; Ginn, 1993; Saville-Smith, 1993; Hazan, 1994; Biggs et al, 1995; Higgs, 1997; Else and St John, 1998; Keeling, 1998a, 1998b, 1999; Ranzijn and Andrews, 1999; Joseph and Chalmers, 1996, 1998, 1999; Thorns, 1993, 2001; Minichiello et al, 2000). These critical perspectives have emphasised various socially constructed aspects of the experience of ageing, the political economy of ageing and the geography of ageing, focusing on the social networks and the arrangements that create or remove barriers to the inclusion of older people in the life of their societies. Biographical approaches (Bornat, 1989, 1994; Gearing and Dant, 1990; Coleman, 1994), in seeking to contextualise the ageing process, have contributed to the struggle to understand societal changes and “how older people have managed to get by, to respond to challenges and to cope with crises” (Peace, 1990, p. 16), as well as to the development of ways of allowing older people to tell their own stories through the research process.

During the same period, particularly the 1990s, theories of citizenship began to address various structural barriers to social inclusion based on differences of race, gender, class, sexuality and culture (Lister, 1997; Castles, 2000; Joseph, 1999). Contemporary discussions of citizenship emphasise the need to include all citizens in “a common way of life” (Parker, 1998, p. 196), seeing citizenship not as a legal status but as “a form of identification, a type of political identity: something to be constructed, not empirically given” (Mouffe, 1992, p. 231). Citizenship, in this view, is performed (Joseph, 1999), constructed through the networks of relationships in which people are “embedded” and “the multiple plots of family, nation or economic life” (Somers, 1994, p. 624).

Taking this view of citizenship as a narrative construction, my focus in this project was on asking older people to talk about their own lives in a way that would generate an understanding of their capacity for citizenship rather than focusing on the dependency and disability that has dominated much of the research on ageing. My study aimed to find out about the meaning of senior citizenship in New Zealand by inviting older people to take part in a series of group discussions about their own experiences of ageing in order to shed light on the interplay between personal biography, social policy, societal constructs of race, class and gender and the shared experiences of a particular cohort. The research aimed to explore experiences of ageing, and to what extent they are consistent with an ideal of citizenship. A further aim was to test a method which could be used both to generate data to answer the research question and to offer older people opportunities for participation by enabling them to tell their stories. This chapter will describe the nature of the research question, the research design and the methods chosen to explore the question, the theoretical justification for those choices, the research process, including data collection and data analysis, and the ethical issues and how they were addressed.

The Research Question

This thesis asks whether older people in New Zealand are treated as senior citizens. Senior citizenship in this conceptualisation is relational, linked with both autonomy and connectedness, and measured in terms of quality of life and social inclusion. This question focuses on outcomes in various key domains which have been identified as important indicators of social wellbeing and a sense of belonging (Ministry of Social Policy, 2001b). They are: physical and mental health; safety and security; social connectedness (family and community ties); material standards of living; knowledge and skills; paid work; human rights; culture and identity and physical environment.

My methodological aims were to document narrative accounts of the lives of older people, contextualised by changes in income, health and housing policies during their lifetimes, and secondly, to find ways of doing this; in other words, to test a method (Atkinson, 1994). The research process was based on “political analysis for action” (Barndt, 1989, p. 8). Aiming for the rich detail and depth of individual narratives within the “more insightful and reflective mode of a group setting” (Atkinson, 1994, p. 97), I wanted to offer opportunities for the performance of citizenship to groups of older people in community settings. The research design and methods were selected for the possibilities they offered for providing answers to the research question about the meaning of senior citizenship.

Methodological Framework

Methodology refers to the philosophical framework of a human science perspective (Van Manen, 1990). It could be described as the theory behind the method, including the study of what method should be used and why. Phenomenological human science, Van Manen says (ibid, p. 29), is “discovery oriented”, with an approach towards research that aims at being “presuppositionless”:

in other words, this is a methodology that tries to ward off any tendency toward constructing a predetermined set of fixed procedures, techniques and concepts that would rule-govern the research project.

The methods, Van Manen argues, should be discovered or invented in response to the research question. Discussions of method and methodology are meant “not to prescribe a mechanistic set of procedures, but to animate inventiveness and stimulate insight” (ibid, p. 30).

The research design is situated within a qualitative approach selected for its strengths in addressing questions of meaning and its appropriateness to the generating of individual and collective stories. However, the approach also uses critical epistemology, which searches for patterns in human behaviour and social relations rather than universal laws. The focus in such an approach is on the context of people's lives, and on possibilities rather than prediction (Smith et al, 1997). Because of my primary interest in the capacity and agency of senior citizens rather than their dependency or their needs, I was looking for a way of enabling them not only to speak for themselves, but to hold conversations with each other that had the potential to be enriching, encouraging and empowering. The development of a methodological framework was therefore guided by my search for a way of doing research with rather than on older people, as well as enabling them to engage in deliberative conversations with each other.

Despite criticism of the idea that any particular way of doing research is inherently feminist, research methods such as unstructured interviews and oral history approaches have come to be associated with feminist research because of the way they have often enabled women's stories to be told in their own words (Dupuis and Neale, 1998). Focus group interviews used by feminist researchers to conduct research which includes male participants illustrate how methods of enquiry may be adapted to explore new areas and answer a range of questions (ibid). Because it is "additive", in the sense of crossing disciplinary boundaries, and "reflexive", in the sense of challenging inherent assumptions, feminist theory has the potential to enrich critical gerontology and to "sharpen" enquiry into ageing (Achenbaum, 1997, p. 24). While there is no one way to do feminist research, feminist research does draw on research traditions which present the 'view from below', in the process challenging social inequalities, developing research techniques and providing a rationale and inspiration for researchers working with other oppressed groups. It may therefore be used appropriately to inform the research questions and methods that are used to produce complex information about older people, both men and women.

I used a group research process to locate older people in their social contexts, and through "collectivisation" of their experiences (Mies, 1983, p. 128) to offer them an opportunity to construct a shared understanding of the social, cultural, and economic determinants of old age. In my counselling work with older people with visual impairment I admired the vigour and imagination and the capacity which the people I worked with invariably brought to the therapeutic enterprise. At the same time, I noticed how often they struggled with the loneliness of isolation from social groups and relational networks. My interest was aroused about the various reasons for this. I noticed that some people withdrew from their customary social activities due to a loss of confidence or restricted mobility, and that for some their isolation was enforced by transport difficulties, the death of friends and the loss of peer support networks. My hunch was that the people I was seeing may in fact be less isolated than other old people, in the sense that having been identified as having a visual impairment they were drawn into a network of social services and volunteer support. I therefore conceived of the research project as a way of investigating experiences of 'independent' ageing and at the same time offering opportunities for participation and social inclusion. Offering people opportunities for telling their stories seemed ideal as a source of richly patterned data and as a method which had the potential to involve participants in satisfying social interaction.

Telling Stories

Stories provide the “frames” that enable us to interpret our experiences, and these acts of interpretation are “achievements that we take an active part in” (White, 1995, page 15). We work hard, White argues, to make sense out of the “ambiguities, contradictions and contingencies” that “stretch our meaning-making resources” (ibid). Thinking about the stories people tell in the therapeutic process of making sense of their lives to an audience of one in the counselling context led me to thinking about the creative possibilities of telling stories to a wider audience. I was influenced by Myerhoff’s description (cited in White, 1995, p. 178) of the “definitional ceremonies” through which an elderly, relatively invisible Jewish community found an “arena for appearing” and “opportunities for self - and collective proclamations of being”:

Definitional ceremonies deal with the problems of invisibility and marginality; they are strategies that provide opportunities for being seen and in one’s own terms, garnering witnesses to one’s worth, vitality and being (Myerhoff, 1986, p. 267).

White notes the critical role that the “outsider witness” plays in these “definitional ceremonies” (ibid) and Myerhoff herself (1982, p.103) sees such performances as “opportunities for appearing ... for unless we exist in the eyes of others, we may come to doubt even our own existence”. The self-consciousness of the old people, “promoted by collective performances and private self-narration, their recounting of stories and life histories” has “influenced and nourished their success as old people”. All of this requires “skill, craft, a coherent, consensually validated set of symbols, and social arenas for appearing” (ibid). It also, critically, requires an audience as well as performers” (ibid). In the case of the Jewish old people she studied, Myerhoff claims that others were needed “to affirm not only that their lives mattered but that they were really there at all” (ibid, p. 106). Her introduction of a set of Life History classes provided them with “an opportunity to be heard, to recount their histories and tell stories” and “another arena in which they could appear in their own terms, and I would serve as audience, conspicuously listening and documenting what was said”. She hoped also “that some satisfaction would come to them from listening to each other in formal circumstances, that they would validate one another’s accounts, and at the same time stimulate and encourage each other’s memories”: all these hopes were fully realised in the “Living History” sessions (ibid, p.114). The sessions, Myerhoff argues, were not merely verbal, but were made into performances in which people “displayed the qualities they wanted seen as much as they could and became what they displayed” (ibid, p. 115).

The term “re-mem-bering” signifies the special type of recollection which effects “the reaggregation of members, the figures who belong to one’s life story, one’s own prior selves, as well as significant others who are part of the story” (ibid, p. 111). In the process of the “focused unification provided by Re-mem-bering”, Myerhoff argues, a “life is given a shape that extends back in the past and forward into the future”, in the process becoming a “tidy edited tale” (ibid). “A story told aloud to progeny or peers is” Myerhoff asserts, “more than a text. It is an event.” (ibid, p.116), which changes both the teller, engaged in “the deep and serious work of Re-mem-bering” and the listener. Without Re-mem-bering, Myerhoff argues, “we lose our histories and ourselves” (ibid, p.111).

The Promise of Biography

Rees’ (1991) analysis of the exercise of power and what he calls “the promise of biography” is also concerned with replacing powerlessness with a sense of power, and “coherence which comes from fitting together those things which may have remained separate” (ibid, p. 9). The promise of biography lies in telling a story with a view to participating in future events in a different way:

The telling of a story will contribute to empowerment if the listeners as well as the storytellers recognise the importance of coherence: the relationship between points in a cross-section. Coherence connotes the value of joining ideas and activities which usually remain separate (Rees, 1991, p. 21).

Acknowledging his debt to Freire and others, and defining politics broadly as “mutual education, as the means of influencing choices through the constant process of communication with others from all walks of life with a view to defining the public good”, Rees argues (ibid, p. 41) that the promise of biography lies in the connection between personal and political identity through a process of change which enables people to replace powerlessness with a measure of choice and control. The reality of biographical work with older people is that some people find it unbearably troubling or pointless, and even if it is pleasurable, the evidence for the value of reminiscence work is “at best equivocal” (Gillies and James, 1994, p, 16). Another real dilemma for the researcher is the problem of withdrawing at the end of the research process if the participant is not ready or willing to finish reminiscing.

Reminiscence and Oral History

Biographical methods are linked to both reminiscence and oral history. I began by searching for examples of reminiscence work being practised primarily in hospices and rest homes. I could find no local facilities which were doing

reminiscence work, so I obtained my information from facilities in Wellington (Mary Potter Hospice) and Dunedin (Presbyterian Support). Whether carried out with individuals or in groups, this work was constructed primarily as a therapeutic enterprise, with the emphasis on the speaker's personal past and on the creation of a legacy, a tangible life story in book form, with accompanying photographs. My aim was to offer opportunities to talk about the past in a way that would link people with each other and with the present and future. Biographical stories offer such opportunities, as Munford and Walsh-Tapiata (1999, p. 24) explain:

The process of story-telling in a spontaneous and creative way, and the linking of personal troubles to public issues, can bring a sense of power to the individual and group.

This kind of collective story-telling was intended to help individual older people make sense of their own struggles "in relation to the dominant constraints and opportunities" (ibid) of the world we live in. Again, the possibilities for resistance and observable change were limited in reality by the size and scale of the research project; by the limitations of the research design; by the personal agenda and social setting of each individual; and by the group dynamics. The reality for the groups I interviewed was that people were alerted to possibilities and opportunities for change, and they planned for change, but social change was not empirically observable in the group context.

Reminiscence has developed into "a guided and structured form of self-exploration, a means to exploring and reviewing a life, through personal accounting" (Bornat, 1994, p. 2). It has been argued that separating oral history and reminiscence "risks the distancing of older people in the process and weakens their control over what is produced" (Bornat, 1989, p. 20), and that the difference between these two types of intervention is a matter of focus:

Oral history values memory as a source of information about the past. The boundary between reminiscence work and oral history is finely drawn but forms around a focus on content, rather than process. Groups of older people, with or without group facilitators whose main concern is the retrieval of past experience and its recording or preservation, in some way can be said to be taking part in oral history. When those same groups share memories with a view to understanding each other, or a shared situation, or with the aim of bringing about some change in their current lives, they are involved in reminiscence work ... The difference is fine, and indeed the most rewarding experiences occur when there is awareness and promotion of links between the two perspectives (Bornat, 1994, p. 3).

The appeal of a modified life history approach to the kind of research I wanted to carry out lay in its particular capacity for paying attention to individual and collective stories, as Bornat (ibid, p. 7) explains:

... while reminiscence work enables the recognition of shared experience and helps to build collective ties, it must always sustain an ability to differentiate experience and to value that individuality which guarantees esteem and understanding in old age.

Reminiscence and the talk that goes on in reminiscence groups are profoundly social activities that have the potential to "demarginalise" older people by acknowledging their role in nurturing and transmitting cultural values and traditions. Thus by virtue of their experience and accumulated wisdom older people are accorded a special place in society as elders and potential leaders (Buchanan and Middleton, 1994, p. 65). In addition, Buchanan and Middleton argue, (ibid, p. 73) reminiscence work "is fundamentally concerned with the rights of older people to have a voice in their relations with others". Mere (1994, p. 132) argues that the importance of reminiscence lies in its emphasis on the empowerment of the individual through the experience of storytelling, "the speaking of one's own life and having that voice listened to with an awareness of its unique qualities".

The work of remembering is integral to the developmental task described in Vaillant's (1993) model of adult development as "keeper of the meaning", which involves the wise elder in the preservation of the culture. Coleman (1994, p. 13) argues that there has been a progressive loss of a sense of culture in modern western societies: he sees the value of reminiscence in the fact that "by juxtaposing past, present and future time" it helps us to recover the public world for the benefit of present and future generations. Myerhoff acknowledged explicitly (1978, p. 268) that in contributing to her study, the old people presented her not only with parts of herself and her heritage, but with "visible models for retirement" and possibilities for her own future.

Disengagement from daily life was conspicuous by its absence amongst the old people Myerhoff studied, and perhaps theories of disengagement owe more to the effects of "the veil with which our culture covers the daily affairs of the aged" (ibid, p. xiv) than to what actually happens in people's lives. Both the context of the story-telling and the attitude of the listener or listeners is crucial to the role of reminiscence in illuminating or recovering the public world, and thereby constructing not only one's self, but one's culture. Myerhoff (1978, p. xv) characterises our species as "homo narrans", and narration can indeed confer power on older people in cultures where their status "is positively related to the amount of worthwhile information they have to impart" (Garland, 1994, p. 24).

The differing importance attached to the role of older people constitutes one of

the fundamental differences between Maori and Pakeha New Zealanders (Maaka, 1993), with the roles available to Maori elders expanding while those available to older Pakeha contract. A kaumatua “is ideally the keeper of tribal lore, the arbiter of disputes, the source of wisdom and the link with the past all rolled into one: he or she is the personification of the tribe” (ibid, p. 221). Senior status in contemporary Maori society depends partially on whakapapa (descent), but more heavily on a deep knowledge of tribal lore and of te reo (the Maori language). These differences between Maori and Pakeha elders clearly necessitated a different rationale if I was to include a group of kaumatua in my research project. For Pakeha elders, whose roles were ostensibly contracting:

the shift in what is deemed appropriate as forums for the performance of knowledge, and the regulation and exclusivity of these forums can have such a significantly fragmenting effect on a person's community that 'natural audiences' may be hard to find (White, 1997, p. 93).

However, if Maaka's observations about the expanded roles of Maori elders were valid, I might find Maori research participants difficult or impossible to recruit, firstly because they were too busy, secondly because they might wish to resist the demands of a Pakeha researcher on their time and on their knowledge, and thirdly because they already had “social arenas for appearing” (White, 1997, p. 93) and did not need an audience “for the performance of particular knowledge claims” (ibid). As it turned out, they were difficult to access, they were very busy, but once I managed to make contact, far from being resistant to the demands of a Pakeha researcher, the Maori women who participated in my research project were pleased to find an audience for their particular (Maori) knowledge claims. In particular they were glad to be included as Maori women so that they could contribute a uniquely Maori perspective to the research.

Kaupapa Maori

Kaupapa Maori refers to Maori ways of doing things. In this context it refers to Maori ways of carrying out research and means “having tino rangatiratanga over research that investigates Maori issues” (Cram, 2001, p. 37). It is, Cram (ibid, p. 40) argues, “an attempt to retrieve space for Maori voices and perspectives”. Kaumatua, both kuia and koroua (old women and old men) are regarded as integral to all stages of engagement in Kaupapa Maori:

(Kaumatua) conduct the formalities of coming together and meeting, they know how people are connected through whakapapa, and they advise on the proper Maori processes in other situations. Kaumatua are the receptacles of matauranga Maori and are the kaitiaki of te reo me ona tikanga Maori. Kaumatua are also invaluable sources of local history and other knowledge that broadens and challenges our

thinking. There is also a sense in which our research is more complete and tika because of the involvement of kaumatua (ibid, p. 43).

In a collaborative research setting, Cram argues, the researcher is learning as well as gathering data during the research process. While writing primarily to encourage research by Maori, for Maori that is both respectful and useful, Cram does not rule out the possibility of non-Maori researchers who support a Maori kaupapa carrying out research with Maori. Her discussion about the insider/outsider status of the researcher in particular, while emphasising the importance of the insider status of Maori researchers writing about their own communities, also acknowledges the existence of finer layers of similarity and difference between researcher and researched. In my own project I was initially very conscious of being an outsider as a Pakeha carrying out research with a group of Maori elders. However, with the gradual development of mutual trust over time, I became aware that I was also an insider on at least two levels, as a woman and a mother. At a third level we shared an interest in and a commitment to Hawke's Bay that flowed through the past, the present and the future.

Planning and carrying out a research project in New Zealand which is likely to include Maori participants requires particular considerations, beginning with the rights affirmed by the Treaty of Waitangi. In this context a commitment to the principles of the Treaty of Waitangi requires that due recognition be given in particular to Article Two, which speaks of Maori retaining control over Maori resources, including people, and Article Three, which secures the right to a fair share of the benefits of society (Health Research Council of New Zealand, 1998). The process of taking claims to the Waitangi Tribunal, as well as changing attitudes towards researching with Maori, indicate an increasing commitment to the Treaty of Waitangi and the partnership model it represents (Cram, 2001). Kaupapa Maori, as Cram explains, is "about providing a framework for explaining to tauiwi what we have always been about" (ibid). For Maori "knowledge underpins the functioning of the group and serves the community" (ibid, p. 38). Cram describes "matauranga Maori", the "indigenous body of knowledge that seeks to define the origins of the universe and the place of humans within it" (ibid), explaining that "part of matauranga Maori is also accepting that there will be knowledge that is off-limits" (ibid, p. 39), a view of knowledge that Cram argues is in conflict with the Western view, in which, she claims, there are no limits on what can be researched. This latter claim, however, is not supported by the experience of Fleming (1997, p. xv) and her associates in their research on income sharing in New Zealand families:

In the Maori and Pacific Island studies, focus groups were also used as a means of collecting information on issues relating to the allocation of family money. However, the idea of using focus groups in the Pakeha study was dropped after a researcher with experience of interviewing British couples about money management warned that people sharing British cultural traditions were likely to find this topic too sensitive to discuss in a group setting.

A Kaupapa Maori approach provides a framework for research which is sensitive to and respectful of the mana of research participants, whatever their cultural traditions. The seven Kaupapa Maori research principles assume a knowledge of and commitment to the Treaty of Waitangi, and are couched in Maori terms and interpreted in Maori contexts. The framework, however, supports a type of 'political analysis for action', a critique of existing power structures and inequalities which "underpins the role of Kaupapa Maori as an intervention strategy" (ibid, p. 41). The first three principles affirm the need for respect, allowing participants "to define their own space and to meet on their own terms" (ibid, p. 42); the importance of meeting with people face-to-face; and the importance of looking and listening in order to understand, waiting until it is appropriate to speak. The fourth principle speaks of a collaborative approach and of reciprocity, using the concept of *utu* to extend the boundaries of the researcher's obligation to augment rather than diminish the community's resources beyond the constraints of time and place of the immediate project. The last three principles concern the need for sensitivity, reflectiveness and a certain humility on the part of the researcher in order to empower the community. The following section will outline the methods suggested by the various elements of the methodological framework described.

Methods

Part of the research process is "the need to negotiate meanings with subjects and allow frameworks for understanding to evolve through time" (Atkinson and Shakespeare, 1993, p. 6). Research which is a shared enterprise becomes a "co-production of knowledge" (ibid). Offering research participants opportunities to talk about their lives and experiences also offers opportunities for them to develop insight and awareness through reflection, a process which can lead to changes which have the potential to outlive the research project. Change becomes possible when people, becoming aware that their situation could be different, work collectively to develop strategies for transformation (Munford and Walsh-Tapiata, 1999). In this way people's stories about their own lives have the potential to expose and to resist what White (1998, p. 1) calls "the modern techniques for the government of persons' lives, including the techniques of power and the techniques of self". The transformative potential of such a method lies in the

opportunities it offers researchers and participants to contribute to the development of a different discourse and a different sense of citizenship.

In the sense of re-membering “what has been dismembered: the capacities to think, explore, love, participate, resist, decide and act” (Smith, Wilms and Johnson, 1997, p. 7) group research shares some of the attributes of participatory action research. Active participation in any group process is political, in the sense of being involved and having authentic influence in “making decisions, taking actions, using resources, and obtaining information” (ibid, p. 226). However, in participatory action research, Hart and Bond (1995) argue, understandings need to be negotiated from the beginning, and participants must have the opportunity to be involved in decisions about the nature and direction of the research. This was not the case in my project, where negotiation was restricted, apart from discussions with key informants, to the details of time and place, the nature and direction of the conversations, and some limited planning.

A research design based on structural analysis for action has the potential to bring people together, providing an opportunity and an impetus for sharing the stories which will serve to locate them in the context of the structures of their society. It also shares Freire’s (1985) emphasis on community groups, on ‘conscientisation’ and on transformation. My project was predicated on the creation of a common space for collective deliberation and consciousness-raising, designed to bring older people together in a community forum in which participants could contribute individual stories to a cumulative communal narrative. Participants, once engaged, required little encouragement to take up the space offered: one participant even remarked, “Being here is part of community work”.

Biography

The biographical method offers a way of collecting data that takes account of the dimension of time in individual stories, thus offering opportunities to consider changes over time in relation to the ageing process (Gearing and Dant, 1990). Drawing on the traditions of symbolic interaction and the life history, a biographical approach, centred on the biographical interview, provides a way of taking account of the meaning of the lived experiences of older people and offering them opportunities to speak for themselves. In their discussion on the biographical approach to the study and practice of gerontology, Gearing and Dant (1990, p.144) identify the “biographical interview” as the central feature of this approach, in which “older people are encouraged to reconstruct their past lives so that their

current needs and preoccupations can be better understood”.

Focus Groups

Focus groups provide a way of doing research that emphasises the interaction between those participating in the study rather than their interaction with the researcher (Dupuis and Neale, 1998; Stewart and Shamdasani, 1990), and increases the likelihood that the talk generated in focus groups is similar to talk between friends, family members and colleagues (Dupuis and Neale, 1998). They also, as Neale (in Dupuis and Neale, 1998) argues, provide the research participants with access to what other people have to say about the topic. Focus group interviews offer a qualitative research method suited to the purposes of research which focuses both on the stories that will be produced and on the effects of their production on the group, that is, the process as well as the product. Focus groups can be broadly defined as a research technique in which it is the researcher's interest that provides the focus (Morgan, 1997; Dupuis and Neale, 1998; Stewart and Shamdasani, 1990) and data come from the group's interaction. Importantly, if the processes of social interaction are part of what is under examination in the study, focus groups allow participants to respond to and build on what is said by the other participants (Stewart and Shamdasani, 1990). Compared to participant observation, focus group research can seem less “natural” (Morgan, 1997, p. 8), though this will also be determined by factors such as the size of the groups, whether the participants are acquaintances or not, and whether the groups are held in a home or a more formal setting.

The ability to allow the group to control the direction and interaction in the interview gives focus groups a particular strength and Morgan (*ibid*) argues, is especially useful in exploratory research where the researcher may not even know what questions to ask initially. Thus focus groups can be used to both generate and answer research questions. In the case of my research with elderly people, it was consistent with the research questions and methods that the participants themselves should use the group process to define the issues that were of importance and interest to them. The influence of both the researcher and the group interaction on the data are acknowledged. Morgan (1997, p. 20) argues that focus groups facilitate a process of “sharing and comparing” which gives the researcher an insight into consensus and diversity as participants themselves work towards understanding their similarities and differences. The goal is not consensus or generalisability. Indeed, an anthropologist's perspective on cross-cultural studies of ageing is that if generalisations can be made about this part of

life at all, “perhaps the safest statement would be that it is more variable than regular, within as well as across cultures” (Myerhoff, 1992, p. 104).

Morgan suggests that preliminary individual interviews can help to generate focus group discussion guides by giving the researcher an indication of how people think and talk about a topic. I found that by choosing a ‘key informant’ I was able to conduct an unstructured interview, during which I gained both a feel for how the topic and the focus group technique would be received among the group I was interested in, and an introduction to another key informant. I subsequently met with both of these key people together to discuss in more detail how the research might most usefully be shaped and initiated. Hearing about these people’s experiences and perspectives and having them both involved from the beginning provided me with the sort of knowledge base which enhanced the reciprocity and the usefulness of the project to the participants and to me. Using focus groups to explore aspects of people’s lives and relationships offers them opportunities to reflect on what they have sometimes taken for granted, an experience which participants generally enjoy (Stewart and Shamdasani, 1990; Dupuis and Neale, 1998). Feedback from participants in my study was universally positive, and the only disappointment expressed was that the research process came to an end.

Practical disadvantages of focus groups for the researcher include the difficulties in finding and bringing together suitable participants; the need to acquire training and practice in the skills of moderating a group; the need for specialised equipment for high-quality recording, and perhaps the most significant; the “*extremely* painstaking and time-consuming processes” of transcription and analysis (Wilkinson, 1998, p. 122). Theoretical limitations include the fact that it is difficult to generalise from focus group data, or to make direct comparisons between groups defined as different on a single dimension, or indeed to provide “a clear theoretical warrant” (ibid) for the interpretation of the data. Despite these considerations, Wilkinson claims that by interviewing people in groups rather than as individuals, researchers can address ethical concerns about power during data collection. Focus groups can also yield “high-quality, interactive data” and offer a way of considering the person and the construction of meaning “in the context of a social world” (ibid). Despite the practical difficulties of finding respondents, moderating and recording the group conversations, and transcribing and analysing the vast amount of data generated, the use of focus groups fitted well with my goal of giving older people the opportunity to speak about their lives

and experiences of ageing. Interviewing each group over six sessions provided space and time for “opportunities for appearing”, which in Myerhoff’s experience of research with old people “influenced and nourished their success as old people” (1992, p. 233). Myerhoff (ibid) argues that:

it is erroneous to think of performances as optional, arbitrary, or merely decorative embellishments as we in Western societies are inclined to do. In this sense, arenas for appearing are essential, and culture serves as a stage as well as mirror, providing opportunities for self- and collective proclamations of being.

Ethical Concerns

Five key principles of ethical research, following the *Massey University Code of Ethical Conduct for Research and Teaching Involving Human Subjects*, are: informed consent, which requires particular attention to issues of literacy and language; confidentiality; the principle that ethical research ought not to leave participants worse off; the principle that there ought to be no deception involved and that information given to the participants about the research is accurate and comprehensive; and the principle of social sensitivity to the age, gender, culture, religion, social class and particular circumstances of the participants.

It is, however, the application of the principles to the particular research context that determine whether research is ethical or not. The issues that all researchers, whether engaged in qualitative or quantitative research, must address, are “the way methods are used, research participants are treated, and data are handled” (Dupuis in Du Plessis and Alice (Eds), 1998, p. 122). A particular issue for those carrying out research in provincial New Zealand communities is the smallness of the population, which makes reporting on any research problematic in terms of confidentiality (Tolich, 2001). Even with informed consent and the use of pseudonyms to disguise individuals or whole communities, it is difficult to ensure that research participants will be protected from harm because of the ease with which institutions or geographical locations may be identified. Even if it is possible to preserve the anonymity of the research participants, reporting on research with highly recognisable participants may involve distortion to the point of deception (French, 1993). This is part of the dilemma Tolich (2001) raises when he asks how the unique character of an institution can be conveyed if its defining characteristics must be altered beyond recognition. Similarly if any information which is likely to upset or offend the participants is removed the results may be rather bland (French, 1993). My response to these problems of identification has been to heed Tolich’s (2001) warning that ethical consideration must be given,

not just to issues of access or informed consent, but to the entire research process. I have chosen to disguise the identity of the research participants but not the communities they were drawn from because of the special character of those communities and the advantages for analysis of being able to make observations about them and comparisons between them on the basis of the available demographic data. While acknowledging that there is a possibility that individuals may be identifiable to others in their communities, the participants did not appear to be concerned that they might be identified, and I have reasoned that my overall responsibility extends to a sensitivity to what finally appears in the research report in order to ensure to the best of my ability that it does not harm the participants.

It would be falling into the trap of ageism to suggest that all older people need special ethical consideration as research subjects, and as Butler (1990) argues, *all* social research should be conducted according to a strict ethical code. Nevertheless there are some circumstances in which ageist attitudes can cause respect to be eroded, reinforcing the view that older people are “rather marginal citizens with views that do not carry much weight” (ibid, p. 170), and rendering them especially vulnerable. Invasion of privacy was such a concern in both the rest home and the retirement village setting, where institutional routines intruded on the research interviews. In the rest home setting the presence of the diversional therapist may have had a constraining factor on what residents felt able to say, particularly about their present situations. However, the obvious affection and esteem with which the residents regarded the diversional therapist, who organised the groups and the meetings, and their clear enjoyment of the sessions, persuaded me that the benefits to the residents outweighed, though they did not eliminate, my concerns.

When tape recording is the primary means of data collection and when information is shared with the whole group, as in focus group research, confidentiality becomes the responsibility not only of the researcher, but of the whole group (Morgan, 1997). Fears concerning invasion of privacy were expressed by two participants, who worried they might be expected to ‘bare their souls’, a process which they had experienced and found unhelpful in the past. It was agreed that a measure of trust is needed for the sharing of stories about people’s lives, and for my part I reassured them that they should share only what they felt safe and comfortable with. In the event it was clear that people shared what they were ready to share. Some stories were deeply personal, and the telling of them, even many years later, was still a deeply painful experience. Sometimes the story clearly required a response from the group, in the form of reassurance or advice. Frequently

members of the group would seek the views of others in the group, either specifically or in general. Overall, it seemed clear that the risks of speaking out were outweighed by the advantages of participation. Sometimes people chose to share stories with me, but not with the group. French (1993) describes her own problem of deciding whether to include in her research report information disclosed outside the formal research context. Such issues, she says, are rarely addressed, let alone advised on, and in fact she herself does not disclose whether she included informally gathered information or not. My own decision was that if a person chose not to tell the story in the group setting, then the story did not form part of the research.

Feminist research, in which researchers make explicit their active role in constructing research narratives rather than merely relaying authentic accounts of “real” experiences, poses considerable responsibilities for researchers (Armstrong and Du Plessis, 1998, p. 109). At the same time it can be liberating, allowing researchers “to let ourselves in on the act” (Atkinson and Shakespeare, 1993). While research conducted in a constructive and enabling atmosphere by a friendly, attentive and interested listener can be, and most often is, a positive experience for the participants, researchers also need to be aware of the potential for further exploitation and the betrayal of trust that can occur (Butler, 1990; Kirkman, 2001). People often confide readily in someone who is friendly and willing to listen, but the trust built up in such a relationship may lead to expectations of continuing friendship, so that, as Atkinson (1993, p. 60) suggests:

There may be, at the end, a sense of loss or betrayal when the research relationship is terminated, and the researcher moves on ... usually with the research.

Although I was conscious of the potential for this to happen, in my anxiety to attend to the participants’ needs, I took responsibility for everything from transport, refreshment and room temperature to creating a safe, relaxed and respectful atmosphere in the meetings and cleaning up afterwards. Like Atkinson (ibid, p 65) I found this a heavy responsibility at times, and I suspect as well that the potential for friendliness and solicitous concern to be mistaken for friendship is a particular pitfall for sole researchers. I have become conscious also, that when I promised to report back with my findings, the time delay might prove to be more than some of the participants had bargained for. I was made aware, for example, that the rest home residents were expecting a ‘reunion’ in a very much shorter time-frame than I thought I had indicated.

My experience of ending the groups varied. Most finished on a celebratory note with a shared meal, which amounted to a 'happy ending' for everyone involved. Where the hope of continuing the groups was raised with me, however, I explained that while I could not take on the responsibility of continuing to organise and run them, the possibility existed for each group to continue under its own steam. This would have been a satisfying development for me, because it would have carried the method of 'political analysis for action' or 'naming the moment' forward into the fourth phase of 'planning for action', and vindicated my earlier desire to describe the project as participatory action research, a description which in the event could not be justified. While some talked about it, to my knowledge it did not eventuate. I felt a little disappointed, and also anxious about the part I may have played in raising expectations with some of the Pakeha groups that were not fulfilled.

Morgan (1997) argues that the ethical concerns raised in focus group research are in many respects the same as those raised in all qualitative research. As Wilkinson (1998, p. 114) notes, issues in one-to-one interviewing, such as researcher control, do not simply disappear when the individual interview is replaced with the focus group, "in particular because the researcher retains a powerful role in the analysis and writing-up of the data". However, Wilkinson (*ibid*) argues that at least during the data collection stage of the research, "the researcher's power and influence is reduced, because she has much less power and influence over a group than over an individual". A corollary to this, however, is that the researcher also has less control over the agenda and the direction in which one or more research participants may choose to take the conversation, and therefore less control over what the respondents may say to or about each other. At times this was an issue which I found difficult to manage, and I was anxious about the effects of remarks I perceived as intimidating. Although ethical dilemmas arising from the researcher's relative lack of control over group interaction have received little attention in the literature (Wilkinson, 1998), they do merit further discussion because the researcher must make a judgement about whether to intervene, and if so, how. The researcher also has to decide when to relinquish power and when to retain it in support of group members, when to encourage "fair play" and when to let the discussion take its own course (*ibid*, p. 116). Wilkinson also suggests debriefing research participants, noting that this is another issue which does not feature in focus group manuals.

The Research Process

Having developed an interpretive methodological framework which would involve the research participants in a collective process of storytelling, remembering and making sense of their experiences of old age, and having obtained consent for the research to proceed, I began by recruiting the participants, group by group. Bearing in mind Morgan's (1997) suggestion that small groups work best when the participants are genuinely interested in the topic and respectful of each other, I aimed for eight participants in each group, as the maximum number of people who could sit around a table and converse comfortably, and whom I could later identify on tape, with six as a minimum for generating a good discussion and maintaining interest. The number of groups would determine the amount of data generated, and therefore how much time the transcription and analysis would take. Morgan (1997, p. 42) argues that "the rule of thumb that projects should consist of three to five groups comes from a claim that more groups seldom provide meaningful new insights", though he also suggests (*ibid*) that "the most important determinant of the number of groups is the variability of the participants both within and across groups". In general, Morgan concludes that the goal is to include as many groups as are required to provide a trustworthy answer to the research question, planning a target number of groups but being flexible enough to add more groups if needed. In fact I found it difficult to tell at the time of interviewing when a trustworthy answer had been provided, though I felt that the data would have been incomplete without a contribution from a group of Maori elders.

Selecting the Participants

Focus groups are often conducted with "purposively selected samples in which the participants are recruited from a limited number of sources (often only one)" (Morgan, 1997, p. 35). Such bias, Morgan argues, is a problem only if it is ignored. Moving away from an emphasis on generalisability means moving from random sampling towards "theoretically motivated sampling" (*ibid*). The most productive discussions, Morgan argues, will be between focus group participants who are homogeneous in background, though not in attitude. Background variables to be considered in running focus groups are sex, race, age and social class. The participants in my groups were theoretically homogeneous in age, and some were actually so, though in some groups participants were separated by as much as thirty years. They were almost completely homogeneous in race. The participants drawn from local geographic communities formed relatively homogeneous groups in terms of class measured by variables such as education,

occupation and ranking according to the New Zealand index of deprivation (Crampton et al, 2000) or communities of interest. The groups which were recruited from a community of interest (Grey Power) and from communal (retirement village) and institutional (rest home) living situations, on the other hand, were far more heterogeneous in terms of those class-based variables.

Morgan (1997, p. 37) suggests that there are strong arguments against mixing participants across authority or status lines, both on ethical grounds, and because the ensuing discussion is likely to be uncomfortable and difficult. The question of whether to choose strangers or acquaintances depends, Morgan argues, on the nature of the research goals, as each group can generate different group dynamics. Apart from this consideration, decisions should rely on “whether a particular group of participants can comfortably discuss the topic in ways that are useful to the researcher” (ibid). The difficulty of this approach is that it can not really be known how comfortable, or otherwise, the group will be together until the research is under way. My recruitment methods meant that I had a mixture of acquaintances and strangers in each group. Occasionally those who were well acquainted with each other allowed themselves to be drawn into private conversations, but generally discussions remained open and reasonably democratic, and there was time for everyone to have a say.

It is important to note at this point not only which older people are included in the selection, but whose voices are missing from the research. I was very conscious of the limitations of my small study. On the one hand its smallness is a great virtue in that its methods are easily replicable and adaptable for use in contexts other than research. For example the same methods could be used for therapeutic, deliberative, creative or evaluative purposes. On the other hand, I was only too aware of the people I was not able to reach, even within my confined location. I did not knowingly include, for example, socially isolated older people, older people who were very poor, very rich or learning disabled, recent immigrants or people from communities whose first language was not English, gay and lesbian older people, or koroua (older Maori men) and kuia (older Maori women) who were not part of whanau, hapu and iwi networks, and not affiliated to a marae. Older people are also present in religious communities, resorts, professional or service organisations, and internet users' groups and all would have stories to tell, issues to discuss, and information to share. The identification of these gaps implies, not that I should have filled them all, but that a number of questions need to be asked about who is not included and why. These questions have implications for future

research endeavours, but are also important reminders of the importance of avoiding generalisations in favour of reflecting the richness of diversity and variability.

Recruiting and Running the Groups

This process involved setting up six groups of people selected from four different locations in Hawke's Bay: Havelock North, Hastings, Flaxmere and Taradale. Participants were also selected according to their living arrangements, so as to include people who lived in their own homes, people who lived in rental accommodation, those who lived in grouped but independent housing in a retirement village, and those who lived in an institutional setting in what is known in New Zealand as a rest home. There were six to eight people in each group and each of the groups met once a week for six weeks. The groups were mostly arranged so as to run consecutively, that is with each one finishing before the next one started so that I could keep up with the lengthy transcription process.

For the first of the focus groups I followed a strategy suggested by Morgan (1997) in conducting a few key informant interviews on the subject of recruitment to get the participants' perspectives on the problem. In order to enlist a group of eight people living in their own homes in Havelock North, I relied on a "snowball" technique, where one key informant suggested another, who offered to host the meetings in her home. I was happy to accept this offer of a comfortable, central and accessible venue. Because I was just getting started, I met with these two key informants to decide how to proceed and it became very much a shared enterprise, with their enthusiasm for the project generating a real sense of excitement. Between them they enlisted another three men and three women. This meant that while the participants did not all know each other, at least some were acquainted, some were friends, and all lived in the same quite small local community. I phoned and paid visits of at least an hour's duration to each of them in their homes to explain the project and answer any questions they might have. This first group took the process of "political analysis for action" right through to the fourth phase of "planning for action" (Barndt, 1989, p. 27) in the way they involved themselves in deliberations about the political context and the specific possibilities that existed for them as older people to effect change, both locally and nationally. While engaged in running this first group I identified strongly with Myerhoff's (1978, p. 19) sentiment that she considered herself very fortunate in her work with elderly people to have had "an opportunity to anticipate, rehearse and contemplate" her own future. I also came as close with this group as I ever

did to the kind of bias referred to as 'going native' (Minichiello, Fulton and Sullivan, 1999) where the researcher becomes involved with and influenced by the group being studied to the point of identifying with them.

I initially approached Age Concern and Presbyterian Support for help with recruitment of the next two groups. I met with an interested and supportive senior staff person from these two organisations, and provided each with an information sheet about the project. However, these contacts did not eventuate as I thought they would, and the process of getting the next group organised spread over several weeks. I spoke about the research to a Flaxmere Age Concern meeting, and one person phoned me to say she would be interested. After approaching several possible community groups, as well as posting notices at the supermarket, the doctor's surgery, Age Concern, the community centre and the library, and even approaching people in the village, I still had only one response from a Flaxmere resident. Finally I dropped copies of my redesigned flyer into letterboxes in a group of council flats in Flaxmere. I had two responses. One was a man who seemed interested in the research project but subsequently forgot, despite reminders, to attend the meetings. The other was a woman who phoned me to say she was interested and she had a group of neighbours who would be willing to meet with me to discuss the research. I visited this group of four women (three neighbours and a friend who lived in her own home outside the complex) to explain the research project. One of these people did not proceed, though another participant who lived in the complex was recruited through the "snowball" technique by her friend, my initial respondent. This person, it eventuated, was not available for the first two meetings, so we began with only four participants in this group. Another person, a man, responded to the notice in the supermarket after we had been going a week, so the second week we had five, and by the time we had been going three weeks, we had six respondents, five women and one man.

This time the venue, suggested by one of the participants, was the Flaxmere Family Centre, owned by Healthcare Hawke's Bay (now Health Hawke's Bay). This facility is on site at the village complex where a majority of the participants live, and has a room which was available in exchange for a koha (a gift of money). This worked well, though I found it fairly labour intensive to arrive with my equipment and the afternoon tea, having provided transport for one, sometimes two members of the group, and set up the room, welcome and organise the group, tape the session, make afternoon tea, clean up and then provide transport home again. I enjoyed it though, and so did the members of the group, several

asking “When can we have another course?” Members of this group were enthusiastic about the research, keen to continue the connection, and all were very keen to meet up again for a review of the research. We did in fact meet, three months after the group’s last session, with everybody present. We shared refreshments I had brought, with a contribution from a group member as well. I was also quietly presented with a carefully wrapped box of chocolates from two of the participants. I reported back to the group on the research process and answered as well and as diplomatically as I could their questions about how they compared with other groups. They were very keen to discuss some of the issues that were current for them, in particular the dilemma posed by the lack of aged care facilities in Flaxmere, and the worry over security in the council-owned retirement complex. I agreed to help the group members try and address the latter problem by phoning the local authority’s accommodation manager and explaining the residents’ very real fears.

I also had a slow start with the third research group. I wanted to have a group from a retirement village, where the people lived independently in their own homes, but in a supported communal environment. I had a key informant, a resident who gave me access to the notice board of a large retirement complex, where I posted my notice. The notice seemed to disappear after a few days with no response to my request for participants. After several replacements, still with no response, I moved my attention to the rest home on the same property. This yielded immediate results. No sooner had I approached the manager and explained what I needed than she phoned me back to say it was all arranged, by the Diversional Therapist. I was momentarily taken aback. I had not previously thought of myself or the research as a diversion.

I had some misgivings about managing these meetings when I first met the rest home residents, because of the degree of frailty and disability of some participants. Perhaps I assumed that their obvious disabilities would make them somehow less capable, or perhaps I was wary of burdening them with responsibilities, but for whatever reason, I failed to provide notebooks and pens for this group as I had for the other groups, encouraging them to write things down during the week to raise or share at the meetings. So I felt pleased when one person arrived on two occasions with written notes to aid the telling of her story, and also sorry that I had neglected to facilitate it in the usual way. In fact any communication difficulties were soon forgotten as people gained confidence in the telling of their stories, and this group was enjoyed by all the participants, including me. I am pleased that my lack of success with the retirement village gave me the opportunity to

have a group in a rest home, because it has given me insights into the lives of those people that I would otherwise have missed, and it meant that the disabilities and the frailty of these elderly people did not after all constitute a barrier to participation in the research project. My experiences with this group also demonstrated to me the slipperiness of the dividing line between the third and fourth ages. Despite their frailty and quite extensive need for support, the capacity for participation and performance amongst members of this group belied their assignation to a fourth age of decline.

After waiting for some time for a promised introduction through the parent organisation, I made a direct approach to a retirement village in Taradale, an area which is newer than Havelock North but similar in style, and also a favoured place for retired people. The initial response was very positive. After being referred back to the governing body for the project to be approved at an ethics committee meeting, written approval was obtained and a list of names was faxed through to me. These were people who had been approached at the Christmas party by the manager and invited to take part in the project, and who had agreed to their names being given to me. I phoned each one and made an appointment to go and see them, explaining the project in detail and leaving a consent form with them. One person declined at the time of this visit, when he found that the focus groups would take place over six weeks, saying that was too much time, and another declined when telephoned later, saying it was just not for her. This group was made up of four women and three men, one of whom was very ill and died before the group ended. While group members were all aware of this, it had remarkably little outward effect on the group.

These people were all living independently in their own dwellings in the village situation, where they had the availability of communal meals if they wished, and were checked on daily by staff. Two of the men were married, one woman shared her flat with her adult daughter, and one man and three women lived alone. Although they all lived within the same complex, set in park-like grounds, these people did not all know each other, and some had not met before the group started. Despite this, their shared stories (and photographs) revealed a rich web of links as the groups progressed. Two residents, both in their nineties, had been in the same class at primary school, and one of them brought along a photograph to prove it. Two of the women found that they had been allocated brand new state houses in the same suburb in the same year, and were able to identify local landmarks and personalities that were familiar to them both. Several people in this group had been born in Napier and after years away, had returned to the area

and were keen to share their memories of specific events such as the 1931 earthquake. Stories were interrupted often as participants sought clarifying details about a shared memory. Comments at the time and feedback later confirmed that the members of this group found tremendous pleasure in hearing about each other's early experiences, and a special thrill was derived from connections discovered in the course of the conversations.

I had not realised in advance that this would be the case, but renovations were in full swing at the time, resulting from the relocation of the old geriatric ward at the Napier Hospital to the retirement village, and there were practical difficulties arising from that. For example, access to the hall, which was set up as a temporary dining room, was through a construction site and was made much more difficult than it would otherwise have been. I had to clear a table to use, and then reset it again afterwards ready for a meal, and at times there was a really intrusive level of construction noise. Also there were difficulties at times with staff members wandering in and out of the room, sometimes stopping to speak to participants. The summer weather was exceptionally hot, ventilation in the room was poor, and at times the combination of heat and noise was almost unbearable. The last two sessions were held in the home of one of the participants and the welcome change highlighted the privacy, quiet and comfort of the new venue.

The next group was made up of Grey Power members from Napier and Taradale. After an initial approach to the person nominated by the Citizens' Advice Bureau as the spokesman for Napier Grey Power, followed by a visit, several phone calls and a protracted process of negotiation I was given an opportunity to talk about the research and recruit participants at a public meeting just prior to the 1999 election, at which Helen Clark (later the Prime Minister) was scheduled to speak about the impact of Labour policies on older people. I had decided to try to talk to a group of Grey Power members because they are, by virtue of belonging to what might be termed a 'social movement', politically active at least to some extent, and I wanted to know what implications that has for them in terms of ageing and in terms of citizenship. These people lived independently in their own homes in Napier and Taradale and all but one drove themselves to the meetings. Transport was arranged for that person from within the group. A member of the group also volunteered to take responsibility for phoning each week to remind participants of the meetings. Two people offered their homes as a venue for the meetings but it was agreed that I would arrange to hire a room in a central community venue in Napier. On one occasion when that venue was double-booked, however, we did meet at the home of one of the members. Grey

Power membership turned out to be something of a contentious issue, with a leadership crisis and expulsion of the local group from the national body during the life of the research group. Some members of this group were office holders in the organisation, while others were much less strongly affiliated, so there was a wide range of attitudes within this group towards Grey Power and towards the local issues with which Grey Power had been closely associated.

The participants so far were overwhelmingly Pakeha, so in order to include a Maori perspective on old age I persisted in efforts to invite older Maori to contribute to the research, and eventually a group of older Maori women, who professed themselves pleased to be invited, was formed. I began the process of gaining access to this group through a Maori social worker to a group of local kaumatua who meet every week at the Maori Health Unit's Whare o te Whanau on the Hastings hospital site. I phoned and wrote to the manager of the Maori Health Unit several times over a period of several months, explaining the focus of the research. Despite the initial lack of response and my own misgivings about whether it was appropriate for me as a Pakeha woman to be undertaking research with Maori, I persevered because I felt the research would be missing important stories which it would be respectful to include in any research about older people in New Zealand. As has been noted already, it is claimed (Maaka, 1993, p. 213) that the situation of Maori old people differs markedly from that of their Pakeha counterparts because "in Maori society roles for the elderly expand in range and importance, whereas in Pakeha society those roles contract". The result, Maaka argues (ibid, p. 223) is that many kaumatua, instead of retiring quietly, become "super active" and are busier than they have ever been. This certainly seemed to be the case with the group of women I interviewed, though they expressed appreciation of being invited to participate, seeing the research as an opportunity to put forward a Maori perspective on old age. They also commented that when they are asked to participate in things, they do, in spite of being very busy with whanau and iwi commitments. One person in this group commented that she was only now being paid for the sort of work she had done all her life on a voluntary basis.

Data Collection

Morgan (1997, p. 40) suggests that less structured focus groups are a strong tool for exploratory research because they give participants the opportunity to discuss what interests them: "if the goal is to learn something new from the participants, then it is best to let them speak for themselves". However, he warns, data generated by such discussions will be more difficult to compare from group to

group, and therefore more difficult to analyse. Comparison is especially difficult where groups are run consecutively, as mine were, because of the changes which occur in response to reflection on the process. Analytical difficulties also arose from the complexity of the data, as the project involved the collection of several kinds of data. The first set of data was obtained by transcription of the taped focus group interviews, twenty-four in all. The second type of data concerns the observed group process, what Wilkinson (1998, p. 119) calls “the co-construction of realities in the social context of the focus group”, and the third consists of participants’ written comments on the research process. Personal invitations to attend each group were accompanied by an information sheet and a consent form. The first session for each group was used to introduce the participants to each other and set the agenda for the remaining sessions. At the end of the first session, each participant was given a profile sheet to fill in and return. This provided some background information about participants for the purposes of later analysis. At the last session for each group, participants were given a feedback sheet and a stamped addressed envelope to record and return their responses to the research experience, which 86 percent of them did.

The dimension of time is a crucial element in the development of a narrative approach. As well as providing physical space for people to come together to tell their stories, I needed to allow time for the performance of the stories to unfold, time for the group to develop the trust needed for the sharing of certain stories, and time to allow everyone to have a say. Also there needed to be time for people to think about things recursively and to go back and make links they may not have made in the past. I needed time to be able to pick up key themes, things people said, to reflect back to them or to ask for elaboration, and to allow for their stories to unfold. I had to decide how much time would be enough for this, how much time I could ask people to give me, and how much time would produce a manageable amount of data for analysis, an amount which would not overwhelm me and make the task impossible. I also needed to decide how much time is needed for each group to form a group in any real sense.

These decisions were governed by the requirements of the research method described earlier as ‘political analysis for action’ or ‘naming the moment’ (Barndt, 1989). As a way of ‘getting at’ the meaning of citizenship for these participants, and of understanding their sense of themselves as senior citizens, the research process was structured loosely around the four phases of political analysis for action: identifying the actors and their interests; naming the issues; assessing the forces; and planning for action. Barndt explains the process of collective

analysis as a different, more historical and dialectical way of thinking about the world and our place in it. The aim of the process is to suggest new possibilities for action. The group as a whole may not plan or carry out coordinated actions, but the people use their deeper understanding of what is happening now (in this case for 'senior citizens') to develop strategies to change what they decide needs changing. As Barndt (ibid, p. 29) argues, "(f)inding out who we are and what we believe is really a life-long process". The research was presented to the participants as an opportunity to engage in structural analysis, beginning with an invitation for members of the group to identify and locate themselves, exploring the influences and experiences that have shaped their lives and their views. Based loosely on the first two phases of the process, it involved inviting people to tell their stories in a roughly chronological sequence, identifying themselves and their interests and allegiances over the first few sessions, and then naming their current issues and struggles during the remaining sessions. The schedule was structured to allow time for the gradual unfolding of people's stories in a way that would bring to the fore the connectedness between people and their individual and collective positioning within the social and historical contexts of their lives.

It was intended that each session would be relatively unstructured, to an extent self-regulating (that is with low rather than high researcher involvement), and informal, and it was also my intention that, as in Neale's project (cited in Dupuis and Neale, 1998), researcher and participants would negotiate how the focus group discussion would be used to meet the researcher's needs "in ways that make maximum use of participants' knowledge and ideas". This process of negotiation continued to some extent throughout the interview period for each group, with various members of the group checking with me from time to time, during the sessions, or after them, whether I was getting what I needed for my research. Because the conversations ranged over such a wide range of subjects, and over such long life-spans, the participants sometimes worried that we were getting 'off the track'. I was interested in the process of negotiation by which it was decided who would talk and for how long, and what could be discussed, that is, the social context as well as the information provided in the stories, so I never worried too much about getting off the track. Participants were generally responsive to each other's promptings for more information or a change of subject or a change of speaker. Enabling the group to set its own agenda in this way fitted well with my research goals. Wilkinson (1998) argues that it also improves the quality of the data by ensuring "that priority is given to the respondents' hierarchy of importance, *their* language and concepts, *their* frameworks for understanding the world". In the end, because of the variability of the participants,

as well as the opportunities it provides for individual and community enrichment, the data collection phase of this type of research is limited only by the time and energy of the researcher, and by the resources available. For me there was a conflict between an intuitive sense of when enough is enough in terms of the data and an awareness of the potential of the groups for generating deliberative processes and promoting social connectedness, so that in a sense enough would never be enough.

Data Analysis

The research was designed to generate qualitative data in the form of spoken words, tape-recorded and then transcribed. The intention was to develop the generation of the data, the analysis and the theory simultaneously in the dialectical process associated with the interpretive research tradition. Making sense of the data, whatever methods are used, is always in the end a personal, intuitive and creative process (Reason and Rowan, 1981). The research enterprise involves looking for ways to understand, as well as taking the further responsibility of interpreting what is seen, heard, or read. In my focus group research, a significant challenge was to work out how to make full analytic use of the interaction between people so as to draw out the ways in which the “meaning” of ageing is “co-constructed in a group context” (Wilkinson, 1998, p. 119). Wilkinson claims (*ibid*) that focus groups have radical potential for researchers committed to understanding the person “as situated in, and constructed through, the social world”:

focus group researchers have typically been forced, by the messiness of their data, to recognise the fundamentally *social* nature of talk. It is hard to avoid this recognition when a group of people are telling stories, cracking jokes, arguing, supporting one another, and talking over one another (*ibid*, p. 121).

A broadly social constructionist theoretical framework, according to Wilkinson (*ibid*, 120), “highlights the extent to which what people say is actually constructed in specific social contexts, the extent to which any given utterance is “a discursive production” serving a particular function in a given interchange”. This means that a sensitive analysis must take account not only the content of the talk that is produced, but also the contextual processes, the interaction that characterises focus group data, in which case, Wilkinson (*ibid*, p. 23) argues:

... such data can offer insights into the relational aspects of self, the processes by which meanings and knowledges are constructed through interactions with others, and the ways in which social inequalities are produced and perpetuated through talk.

Analysis of the group discussions highlights their interactive, negotiated nature as well as their content. Allowing the participants to tell their own stories in their own words “claims authenticity and authority for their representation of an actual social world” (Tolich and Davidson, 1999, p. 162), as well as allowing the reader to determine whether my interpretations and conclusions are warranted.

The data was analysed and interpreted according to a framework in which themes arising from the historical and social contexts of the participants’ lives were set against the measures of inclusion and social connectedness developed and published as a report on the social health of the nation (Ministry of Social Policy, 2001b). I have used this analytic framework for several reasons. The first is that measurements of social well-being dependent on outcomes across a range of social domains can be used as indicators of the extent to which citizenship as defined in this study is a substantive reality for elderly people. The second is that the organisation of social outcomes into discrete but inter-related domains provides a sensible way of managing a potentially overwhelming mass of data. Another reason is that using the government-initiated framework, introduced as a first step in the establishment of a regular programme of social monitoring locates the research within a tradition of social reporting in New Zealand that aims to measure “what is important - what a society cares about” (ibid, p. 8). The report (ibid) cites the finding of The Royal Commission on Social Policy (1988) that what New Zealanders said they needed was:

a sound base of material support including housing, health, education and worthwhile work. A good society is one which allows people to be heard, to have a say in their future, and choices in life ... (t)hey value an atmosphere of community responsibility and an environment of security. For them, social well-being includes that sense of belonging that affirms their dignity and identity and allows them to function in their everyday roles.

The critical components of a good society, a society which affirms the dignity, identity and connectedness of its citizens were then, and still are, considered to be based on material wellbeing, choice and voice, security and a sense of belonging. These components are not in fact easily divided into discrete compartments, but are inextricably interrelated, as was clearly indicated by the principal finding of the National Health Committee (1998a, p. 3) that “social, cultural and economic factors are the main determinants of health”.

The social outcome domains identified by *The Social Report 2001* are not exhaustive, and the framework provided by the report is by no means a perfect fit with the experiences and interests of elderly people as they appear in the data of

this study. For example, the domain of paid work excludes most older people, and even retrospectively it excludes many older women. Human rights have been excluded from my analysis on the grounds that the whole study is about the rights of older people to exercise their citizenship, and this perspective permeates all the categories in the report. While all the social outcome domains are not equally applicable to all the groups, I believe the fit is adequate for my purposes, and there is also some value in using it in order to test its applicability for older people and to identify any gaps. The eight key social outcome domains that I have used as an analytical framework therefore include: **physical and mental health; safety and security; social connectedness (family and community ties); material standards of living; knowledge and skills; paid work; culture and identity; physical environment.**

The report (Ministry of Social Policy, 2001b) uses thirty-six indicators across these various domains to measure the nation's health and well-being against the desired social outcomes. Noting the significant gaps that exist in New Zealand's current collection of social statistics, the report acknowledges (ibid, p. 11) that it:

includes little in the way of people's own views of their lives. For example, there is information about how many people have jobs but little about how satisfying or meaningful those jobs are. The inclusion of subjective indicators of well-being, of how happy or satisfied people are about various aspects of social life, would significantly complement the more objective indicators included here.

It is these subjective indicators of well-being which constitute the data sets in the current research project.

Social connectedness describes the relationships people have with each other "and the benefits those relationships bring to the individual as well as to society" (Ministry of Social Policy, 2001b, p. 88). The extent to which people are able to participate in society and have a sense of belonging depends on a variety of factors, including the extent to which they enjoy good physical and mental health, a safe and secure environment and a reasonable standard of living. More difficult to measure, in terms of quantity and quality, but vital to the creation of 'social capital' are the relationships, both formal and informal, that people have with others in their communities. These relationships include informal contact with family, friends and neighbours as well as more formal connections with colleagues in paid or unpaid work, and club or group membership. Variations in social outcomes between individuals and communities are influenced by a range of genetic and environmental factors, including parents and family, peers, neighbourhood and community, schools, societal norms and prejudices, physical

environment, material resources, support services, intergenerational relations and attitudes, beliefs and aspirations. Just as there is significant interconnection between these factors, so there is between the social outcome domains. It is the stories people tell about themselves, their families, and their times that enable us to understand something of who they are. The following chapters are devoted to conveying something of both the individual and the collective experience of a particular generation of New Zealanders. The stories that appear were selected not because they are representative, (though they could be said to be representative in their diversity) but because they were considered worthy of telling. By reproducing conversational exchanges the text reflects the negotiated social process of making meaning.

Summary

In developing methods suitable for interviewing groups of elderly people, I made use of various methodologies in the tradition of qualitative research as well as ideas about community participation and community development work. My intention was to choose methods which would be as inclusive as possible of a range of elderly people in different communities, and would give them an opportunity to talk about their lives in a way which would be empowering.

My aim was threefold: to gather a rich account, both descriptively and conceptually, of what it is like to be growing old in our society in New Zealand at the turn of the twenty-first century; to offer groups of older people opportunities to come together in their own communities to talk about what being old means for them, thus giving them a genuine voice in the expression of their own stories and their own needs; and then to begin to map out a framework for applying contemporary theories of citizenship to these particular experiences of ageing. The next chapter and the five which succeed it will follow the political analysis for action framework of first introducing each group of participants to establish who they are and how they see themselves, and then considering their experiences of the various social domains within which they live and 'perform' as senior citizens.

Chapter Seven:

Havelock North

Introduction

The Havelock North research group of four women and four men met weekly for six consecutive weeks in the home of a key informant. Most members of this group were between seventy-six and eighty years of age, with one slightly older, and two younger. None had been born or had grown up in Hawke's Bay. They did not all know each other at the beginning, but were connected through their neighbourhood, church and Probus clubs (associations of retired professional and business people). The group members matched the statistical profile of Havelock North in that all had been educated to tertiary level and all had enjoyed professional careers in the paid work force. All were involved at the time of the interviews in voluntary work in the community. All were married or widowed and all had children. Most had grandchildren and two had great-grandchildren. All described their health as good or very good, except one, whose health, previously very good, was poor "at the moment". Values and beliefs that were important to the people in this group included family, Christian and environmental values. Special mention was made by one participant of consideration for the welfare of a grown son with a learning disability, and of the influence this had always had on the lives of the participant and his wife.

Citizenship and Locality: Ageing in Place

The identity of this group was very closely bound up with their status as residents and participants in the village life of Havelock North. This was a pervasive and recurring theme. In the first session each member of the group expressed appreciation for the beauty of the physical environment they enjoyed. The hills, the contour of the land, the trees and even the quality of the air were mentioned as factors which promote exercise, enjoyment, and by implication, wellbeing. The pleasant climate, being able to eat outside all summer, and even the village layout made Havelock North an attractive lifestyle option:

Mrs J *I think one of the things that's made Havelock North - and I haven't been here to hear the history - but the city fathers I think should be thanked, because most towns anyway, have a main street in new countries and all the main traffic goes right through the main street. Well, here they've made sure that they've got the circular road taking the heavy traffic away from the village itself, which means you've got a circular part in the village and a place as a centre ... and I think this is what makes the very pleasant ambience, and all the tree planting around.*

They all expressed satisfaction with their decision to move to Havelock North. This was an aspect of their sense of themselves as citizens that seemed particularly prominent for this group, that they were in the happy position of having the freedom, the ability and the capital to choose such a "special" place for their retirement. Mrs M's sentiments were echoed by others when she said she loved living in Havelock North:

Mrs M *I found the most wonderful spot on earth and I'm very happy there, and I hope I can stay there until my final day.*

Mrs J was also very happy with her situation, and the presence of friends was an important factor in her sense of belonging in a place where she still felt "a bit of a newcomer":

Mrs J *I've been here four and a half years, and I came with my husband to retire and unfortunately (he) died just over a year after we'd been here, but I had friends here, and have found the place very much to my liking - wonderful climate, very nice situation.*

She was not the only one to feel a bit of a newcomer:

Mr B *I'm enjoying living in Havelock North, where we came in 1980, but I'm certainly just a newcomer here, although I sense that most of us here are only newcomers to Havelock North.*

Being a "newcomer" seemed not to pose any particular barriers to a sense of belonging, which seemed to come from the satisfaction of having made a good choice, and delight in the place itself. While Havelock North people were considered very friendly, there was felt to be a hierarchy operating, with newcomers needing to 'know their place' and learn about the social and familial networks in the 'village' in order not to 'put their foot in it':

Mrs H *I'm still sure that they think they're different, though. I won't mention names, but there's two or three of my friends who will repeatedly bring me back to (the fact that) after twenty-two years I'm a newcomer.*

Mrs N *I can remember being told that there was a lady from one of the very early families, and when Havelock North was spreading its wings, this lady was heard to say "Isn't it terrible now the crofters are settling here!"*

Mrs M *That's what I mean by being parochial. It doesn't apply to everybody of course, but I do feel that the older, the original perhaps, Havelock North people have a very protective feeling about Havelock North, and they don't want this altered, and they don't want that altered. I think they want it to still be a little village in spite of the advantages of the increase in population, the shopping centre and so forth.*

Anecdotal evidence of this protectiveness and “snobbish attitudes” came from a participant who had held the most senior office in the local authority at the time:

Mr V *I came across that nearly thirty years ago - the borough was bursting at the seams, and there wasn't land available. Land suddenly rocketed in value because of its scarcity. And so we/the Council was looking at areas into which it could expand, and also you'll be interested to know, the development of terrace housing, which was seen as one solution, and in many respects would have worked, but didn't come about.*

Mrs M *It wouldn't have been accepted here, surely, would it?*

Mr V *Well, the Council didn't do it, anyway. The plan hadn't been very long promulgated on how they were going to go about this, then I began to get calls at the office, people coming into the office - “You're not going to expand the Government area, are you, the state housing area, you're not going to allow more people like that to come into the district are you?” To which I could only reply, “Well then, you tell me who can come and who can't”. And you know, but it was a serious discussion.*

Perhaps describing themselves as “newcomers” was a tactful way of distinguishing themselves from the “parochial” “original” residents, while still maintaining a sense of belonging to Havelock North. Members of this group felt a strong sense of responsibility to maintain the physical environment of Havelock North in good order for their own pleasure, and for future generations. The destruction of thirty trees to build a new car park in a church-owned residential complex had upset them greatly. Comparing Maori and Pakeha attitudes towards the value and use of land, they saw the sacrifice of the natural environment to commercial enterprise as an extension of the colonists' acquisition of land for commercial as opposed to environmental gain:

Mrs H *You can see it happening right in our village. Where now is the place for us to have breathing space? How valuable was that grassy area in the village that's completely gone now? You know, what have we lost? Whereas the Maori people may not have ever mowed the land, but there were thirty trees there that have gone, and what has that done to the environment?*

Demonstrating just how important an issue this was to them, and how involved they were prepared to get in defence of their local environment, several members of the group had protested against this loss to the community:

Mr I *I have real doubts as to just what power we have as senior people. Even in local politics and that kind of thing. Recently when the Borough Council here was allowing buildings to go on and taking up all our extra open bits in the town, I thought well, a letter to the paper should be able to do something, and I wrote one. But it didn't have the slightest effect upon the decision that was made, and the building went on with the new motel and all the St Lukes area and everything else was eaten up. And even though I got feedback from one or two people who said, oh yes it was a good idea, yes, yes, we must back you up in this, there didn't seem to be much result from a tiny little thing like that.*

Mrs M *Yes, but how far did you go? Did you put in a submission? Well, I did and I went to the hearing for two days. I could have stood up and screamed, because I didn't want to see the green area go ... but I think that you have to/it's no use just putting it in the paper. Alright, that was probably alright, you might start other people thinking. But you have to go further than that, you have to send it to the right people, put in a submission to the right people.*

Mr I *Mm, and you think it had some real effect?*

Mrs M *Well, at least your voice was heard - I didn't speak to my submission. I felt strongly about the loss of the green area and the/oh just the change of the atmosphere of that area was what I resented, but I'm not a member of St Lukes and I thought it would be rather dreadful if I stood up and spoke loudly, although inwardly I became very heated about it. But I think that your writing to the local paper yes, was good, but I think that you should have been a little bit stronger and gone a little bit further.*

Mrs H *So many people should have. You can't get back what's gone.*

While these people had been prepared to exercise their rights as citizens, using the media to exercise freedom of speech and the local government planning process to make a submission in the prescribed way, they were disappointed that their actions had not been sufficient to stop the unwanted developments. This experience of powerlessness had had an appreciable effect on their sense of themselves as citizens. They were articulate, strong people who in their former professions were used to being listened to and might have expected to be able to influence decisions about their living environment.

Naming the Issues

Physical and Mental Health

Health is acknowledged (Ministry of Social Policy, 2001b) as a critical component of people's wellbeing and a major determinant of the extent to which they can function with autonomy and participate in society. While the members of this group generally rated their health as good or very good, it was clear that an episode of illness could affect one's wellbeing, and sense of being in control of one's life, as Mrs H explained in her introductory remarks:

Mrs H *I feel very much an ageing person, having had a year of sickness, and watching things change in my own body hasn't been easy, but up till then life was a ball, and I have been a mother, a weaver, a gardener, most of all a church person.*

Mrs H's words convey her reluctance to accept the physical changes that had limited the extent to which she was able to engage in the activities that had made her life feel full, creative and enjoyable before her illness. A subsequent discussion about access to health services for older people highlighted competing discourses of ageing and health care and illustrated the extent to which these older people were caught up in, and oppressed by current media representations of ageing as a burden:

Mr B *We're a greater strain on the health resources of the country now than anyone else is, older people are.*

Mrs M *Well I wonder how many of us go to the doctor very often. I go every three months.*

Mr B *Well I'm only going by figures I've read in the paper from time to time about the number of hip operations they carry out.*

Mrs M *Yes, yes, and of course we are living longer aren't we?*

Mr B *Yeah, that's right. We're a big strain on/*

Mrs H *I never feel I'm a strain on anyone. I try and give, 'cause I just feel, we have to be worthy every day - we've got to live every day, and/*

Mr B *It's not how we feel. I'm trying to say, this is what people feel about us.*

Mrs H *And that's where the tragedy is, because there isn't a reverence for old people and their wisdom at all.*

The positioning of old people as a strain on the resources of a society from which they are excluded because they are not in the work force earning money draws on dominant Western discourses of ageing which represent old age as a time of withdrawal from productivity and of social isolation, characterised by "loss, expendability and decline" (Opie, 1995, p. 3). Such discourses, Opie argues, produce a certain fatalism and justify an approach to older people which reduces them to the sum of their needs, taking no account of their contribution to society. Mrs M and Mrs H offered comments from a competing discourse which represents old age as a time not necessarily characterised by illness and the need for medical treatment, and therefore "not a strain on anyone". Still, Mrs M was forced to concede that just living longer is popularly constructed as a problem, and Mrs H's final remark testified sadly to the pain of being old in an overtly ageist society.

Predominant discourses are also inclined to position the generations oppositionally, as if their needs were mutually exclusive, and as if having received government funded health care in the past was enough to disqualify older people from a legitimate claim to a share of the scarce health resources in the present, as the following comments show:

Mr B *The policies in education and health - people have got to strive for themselves in order to have enough money to pay for their children or to pay for what might happen. Age is - I put myself out on a limb on this one - I'm not so worried about the aged people, I think we've done pretty well. ... I can remember that, with our children growing up, ... (health treatment) was free. There was no question of waiting for months and months and months for it. ... There was no cost to any of those kind of things. Now we weren't well off - I was teaching and our salary was very low, and then I used to work in the holidays to try and make ends meet.*

Though he had struggled, even with free education and health care, to make ends meet, the inference was that those years of free medical care had fulfilled the government's obligation to Mr B and his generation, who had done 'pretty well'. Mrs H, on the other hand, resented the costs of her recent surgery:

Mrs H *... whereas I've just had one cataract, at the public hospital, and one cataract at the Southern Cross (hospital). The Southern Cross cost me three thousand four hundred dollars for two hours, and I think it's absolutely awful - straight away, "Have you got health insurance?" And we asked when we came up here, whether we would (need it) and they said, "No, because you're into the (over) sixty age (group), and the government looks after its old people", and that's only twenty years ago. And I feel if somebody wants it, and can't wait on the waiting list, it's several thousand to get your eyes done - it's wrong.*

These comments indicate that it is the cost of health care rather than access to it which is the perceived problem. Mrs H belongs to a group of older people who generally can afford to pay for the health services they need, either directly or through health insurance. Even if having to pay seems morally wrong, there is no question of being denied access to health services.

Mental health issues were not discussed directly, but in talk about the loss incurred through bereavement there was general agreement that more 'open' ways of grieving are helpful in terms of mental health outcomes.

Mr A *I must come in here with a personal observation. When (my wife) died (we talked about it before she died - we were completely open) - we brought her body back to the house, it stayed there and we carried it round to the church. Ah - there was - nothing hidden, and we had friends in to the house, and so on, and so on - and I cried for three months afterwards. I would sit down and cry, and I'm not the sort of crying person, but that helped me profoundly. But I still haven't got over her death.*

- Mrs J** *You never will .*
- Mrs M** *You don't expect to.*
- Mr A** *Oh I expected to.*
- Mrs M** *No I don't think you can expect to - the gap's there. I remember the doctor saying to my mother after my father died - he died extremely suddenly, he just sat down in a chair and just died, you know, and the doctor said to my mother - now let me get this right - the wound heals, but the scar remains, and I think this is what we say where you'll never get over it - it's always there, perhaps most days there's something that makes you remember that time. It's always there and I think we're foolish to try to push it aside and avoid it. So many people do I think, and I think they get into mental checks.*

This exchange shows how the 'meaning' of becoming a widow or a widower is co-constructed in the social context of the focus group (Wilkinson, 1998). The guidelines on how bereavement is best managed have been developed from a mixture of painful personal experience and generational wisdom, and are shared openly with other members of the group. The following conversation shows how old age and death, like bereavement, may be managed. Death is not the problem: when challenged by Mrs J, a member of the Voluntary Euthanasia Society, the other speakers hasten to assure her in various ways that they are prepared for death. What they are not prepared for, and are not willing to contemplate for themselves, is illness and institutionalisation: this conversation was followed briefly by one in which they compared sobering experiences of visiting incapacitated elderly people in rest homes. What I think is being conveyed here is not that the members of this group are any more or less vulnerable than anyone else to painful experiences, or that there is a common approach to death. What they are expressing is an unusual confidence in their ability to manage and control those experiences, to cope. The feeling that it's never going to happen to them is part of that confidence:

- Mrs M** *I don't think that when you're thirty, forty - that you really think that you're going to become old anyhow,*
- Mrs N** *That's so right*
- Mrs M** *and may need hospital treatment perhaps, a stay in hospital. I mean it's never going to happen to you.*
- Mr A** *Just like with us now, at our age group, we're never going to die.*
- Mrs M** *Oh no no, no! We'll live right up to the last minute anyway.*
- Mrs J** *It's not that far away folks!*
- Mrs M** *Oh now now!*

- Mrs J** *Well no-one likes it, you see - you don't want to talk about it! - it's incredible!*
- Mr I** *Some of us have got our plots already.*
- Mrs M** *No you're wrong (Mrs J), I'm not afraid to talk about death.*
- Mrs N** *Oh I'm not afraid to either.*
- Mrs M** *No I'm not, but I want to make the most of every second, every minute that I'm alive.*
- Mrs J** *That's right.*
- Mrs M** *But you know, everyone's going to die, so you just have to face it, I mean it's part of life, isn't it?*
- Mrs J** *Yes.*
- Mrs M** *But I don't want to be spending my days in a hospital bed thank you.*

Despite their expressed anxiety about being incapacitated by illness, there was no indication from this group that disability was a major issue for them. Instead there was a strong ethic of service and a sense that it was their duty to take responsibility for supporting others. For example, when one participant warned that she had mislaid her hearing aid and may not be able to hear as well as usual, the response from people in the group indicated that they considered it their responsibility to reduce any barriers to communication as far as possible by speaking appropriately in social situations such as U3A (University of the Third Age, a local, no-cost, reciprocal education system for third age people):

- Mrs J** *because most of our friends and people we associate with are losing their hearing to some extent. I notice this in U3A, and I must give them a reminder ...*

That no member of the group identified as having a disability singles them out as unusual, considering information from survey results reported by the Ministry of Health (1999) which shows that prevalence of disability is strongly related to age: 41 per cent of those aged 65 to 74, and 66 per cent of people aged 75 and over were reported to live with some form of disability. The likelihood of having a disability requiring assistance, which roughly equates, according to the Ministry's report, to people who are eligible for publicly funded disability support services, also increased with age. Seventy-five per cent of those over sixty-five living in households reported having a Community Services Card (which allows people on a low income to access a range of health and disability support services free or at reduced cost). However, the results also showed a significant trend towards lower levels of disability in higher income brackets, and as income increased, so did the proportion of people reporting no disability.

Safety and Security

This section concerns the extent to which people enjoy personal safety and security, and freedom from fear of victimisation, abuse, violence and avoidable injury. There was no overt discussion by the members of this group about safety and security in a personal sense at all. It is likely that this reflects a relative absence of expectation or fear of victimisation, abuse, violence or avoidable injury. This is not particularly surprising considering the exclusiveness of their neighbourhood and the statistics which show (Ministry of Social Policy, 2001, p. 44) that people aged sixty and over are by far the least likely to be the victims of any type of violent assault (under two per cent) or any property offence (under four per cent).

Community and Family ties

Community Connections and Citizenship Participation

Not only the physical environment but the people of Havelock North themselves were regarded as special, with particular capacities which are considered valuable to the community, and to the wider society:

Mr I I think the people of Havelock North are very special. Having lived in several areas, the leadership here that you find in all sorts of situations is just wonderful, and I think you've got to go a long way to find the same kind of leadership in any community. People have initiative here and they get going and do things, and you don't have to wait a very long time to get a leader for this or a leader for that or a secretary or a treasurer or whatever it may be, but these to me are very important things.

This is a strong statement about the way in which citizenship is exercised in Havelock North. These claims for the special, in the sense of exceptional and powerful, capacities and connectedness of the inhabitants of Havelock North convey a sense of active citizenship. The expression of this exceptionality, however, divided the group in an interesting way. Nobody in the group challenged the claims of exceptionality that were being made for the citizenry: there is no doubt that the area is rich in social capital, due largely to the high proportion of well educated and professionally skilled people of retirement and working age who live there. Mr B, however, did want to contextualise the discussion by alluding to the structural inequalities which situate Havelock North as a powerful Pakeha elite in the wider context of New Zealand society:

Mr B *I hesitate to say anything, because it is a lovely place to live, there's no doubt about that, and we've all indicated that we like Havelock North. But I don't think a lot of people in Havelock North realise there's a big world out there, and that there's a lot of people just haven't got any of the advantages that we have at all. ... We're by and large, a Pakeha society*

in Havelock North, and we've got to be careful about thinking that the rest of the world is like Havelock North.

It was clear that Havelock North's "peace" consisted, at least for some of its inhabitants, not only in its environmental tranquillity, but in the perception of Havelock North as a refuge from social problems and unrest:

Mrs M *I think we fully realise that and that's why we feel that Havelock North is so special. I mean, most of us have lived in, you know, several other places, and I think that's probably why we value Havelock North, that we see its beauty and so-called peace.*

Mrs H agreed. Mr A, on the other hand, challenged the notion of the homogeneity of the Havelock North community by reminding the group about a street with:

Mr A *as many problems as anywhere else in New Zealand ... violence, budgetary problems, lack of schooling, and all those other contrary factors.*

This remark had a conciliatory effect. It was conceded that Havelock North had some social problems, but they did not necessarily disturb the beauty and peace for its elderly citizens, who had the choice of whether to engage with them or not. The perception of the village as a "cosy" haven was maintained:

Mrs M *And I think too, that we're looking at it now from our age group, not as parents of school children, where you probably come up against these problems, or are more aware of them. I think that we're sitting back now, you know, cosy in our seventies, and you just don't come in contact with that quite so much, do you, personally, as when you work in, you know, social work or teaching, or whatever it may be.*

These remarks help to explain the lack of any discussion about safety and security in this community. The elderly people within its ranks are separated and protected from the disruptive effects of societal inequality by their class and paradoxically, by their age, and by their status as senior citizens who are also powerful consumers. Undoubtedly it was partially this experience of privilege and relative plenty themselves that made helping others and being involved in the community seem natural:

Mrs M *I think that probably - I don't mean to sound smug, but we as a group do, I think probably we all belong to more than one - community group, where you're helping other people, whether it's the elderly or the young. I think New Zealanders are pretty good at - lending a hand where it's needed.*

For many of these people, however, the seeds of the work they were doing in the Havelock North community in their old age had been sown much earlier, in the

communities in which they had grown up. Growing up during the Depression had had a strong influence on their attitudes to community work. Brought up to be self-reliant themselves, they had observed their parents helping other people in the community:

Mrs M *At one time Dad was on thirteen committees in this tiny little place, you know. Oh and not only that, but my mother was, you know, like minded.*

Mrs N *When you talk about community it reminds me about the Depression, because I was in England, growing up then, and I really didn't know there was a Depression. But the children from the village school, when I was at primary school, they used to come down frequently - I don't know how that happened, but we used to play - or we just had meals, and I had meals with them. ... and I always had my after school meal with the children, and we had great fun, then we went to collect the eggs, and somebody would go home with two eggs, and there was no charity in that because we were all having such fun. And I think that has something to do with my attitude, as well.*

There was no 'charity' in it because 'community service' or unpaid work in the community was regarded as reciprocal in the sense that it provided fun in childhood and opportunities for friendship and personal growth in adulthood, as well as, for this group at least, the senior status and sense of citizenship that comes with the assumption of a leadership role in the community:

Mrs M *I've done community service since - I don't know, about fifteen I suppose, and I'm sure that I would be a poorer person without it. My parents were great community service people, and it was just - just part of our life, and I've been in Guiding for I don't know how long - thirty-four years. It's probably nearer forty, I don't know - I've lost count, but I've made some wonderful friends there, and I think before I became involved in Guiding, I couldn't have sat round and talked like this - I would have sat back and not said a word - I would have been terrified -*

Mr A *So you got something out of your community/*

Mrs M *So you grow with it. Yes, especially if you've got a position of responsibility, you grow with it, and I think that this is where community service - I mean yes, you want to help other people, but I think that you gain so much from it yourself that - I think you just can't count it.*

Alison *So is your experience of being able to go and make a submission to the Council about something you didn't agree with - you can see a link with your gaining in confidence and/*

Mrs M *Oh I think so and I think also too, I wouldn't have done it while I was still married, but now without a husband, a widow, I've had to fight for so many things myself that I'm not afraid to say, well, I'm sorry I don't agree with you. I just say it now, whereas once upon a time I would have/it would have been going round up in my head and I would have been too*

polite to disagree and express my opinions, but now - I feel that I've grown very much in the last, you know, twenty-six years.

Mr A *I thought it was significant you said your parents were great social service people, so by inference this is something you've inherited. Do other people have the same experience of feeling they want to help the community because of their early years?*

Mrs N *I just grew up with it ...*

Mrs M *It's a feeling that you grow up with, you know. Neither of my parents would have said now come on, I think you'd better play the organ for church. There was no lead from them, direct lead. But because they did so much for the community themselves, it was just taken for granted that you followed on. My younger brother's the same - they're just so busy, doing things, in a quiet way.*

Mrs J's contrasting experience as the recipient of 'charity' gave her a different perspective on community work and marked her out as unusual in this group:

Mrs J *I've got something to say after everyone was talking about their early life, and their people mostly being community minded and that sort of thing, and I thought that I was really on the receiving end of charity, because my mother was left a widow when I was only two, and the Freemasons paid for my education because my father had been a Freemason. So you could say that I was very much on the receiving end of charity, but at the same time, my mother was a capable, obviously commonsense woman, to be left with a two year old, but she did have a house that was paid for by the insurance, and she took in boarders so that she didn't have to leave me. So - that's a somewhat different background perhaps to most people.*

Interestingly, the community participation and interests Mrs J spoke of were largely political (the Labour Party) educational and literary, as opposed to voluntary social services, which does tend to support Mr A's suggestion above that community service is "something you inherit". It was also, in this group, strongly associated with a Christian faith and the idea of Christian duty. The group members held a long conversation in which they worked out, by means of a variety of stories, what constitutes a contribution to the community. This discussion was summed up succinctly by Mr A in a way that made explicit the group's feeling that counting as fully human depends very much on a person's capacity to fulfil the obligations of citizenship:

Mr A *Am I hearing that we say people have to make a contribution to the community to be whole people?*

The members of this group were discerning about what kinds of organisations and activities they wanted to be involved in and committed to. Several expressed reservations about Grey Power in particular:

Mrs N *It depends who's in the group, in any of these groups*

Mrs J *Is that what's the matter with Grey Power? To me they don't seem to be united enough and they're not working as a whole, for the whole of the sixties up throughout the country. That's why they're not - yeah, that's why they're powerless.*

Mrs M *Mm, and I think they're too belligerent too. I think they do themselves an injustice.*

When one member of the group confessed to being a member of Grey Power, there was further discussion as people sought to clarify their concerns. While it was suggested that they do "tremendous good" at times, it was generally agreed that people were put off by their "aggressive" attitude. Participation in the community, as these conversations show, was considered by members of this group to be integral to the exercise of citizenship and to their sense of themselves as senior citizens. They worked hard at trying to decide what types of participation count as an active exercise of citizenship responsibilities, and as a worthwhile contribution to the community:

Mrs M *But then how are those ideas going to be put into practice? Who's going to listen to them? ... what can we do? ... do we do it with a vote every three years?*

Participation in the electoral process was felt to be a necessary but insufficient element of participation in the democratic process:

Mr A *I'm sure that we do all vote, but I'm thinking that democracy is something more than that, and that's what I'm trying to get a handle on.*

Mrs M *Mm, yes I agree with you.*

Mr V *One of the first steps is to identify a leader and to get behind and support a leader, because whatever you do needs leadership. It can only happen if you bring it together - it's not recognisable if it's disparate. It has to come together, and therefore I think you have to choose your leader, and this is where I get a little bit off on democracy. Voting is only a tool in democracy. The real issue is choosing the right people.*

The group members worked at constructing their own definition of power, and at identifying the sort of participation that would be both achievable and worthwhile, in other words that would qualify as exercising citizenship. New Zealand's small size was seen as an advantage, with reasonable access to people in power, but effective action was felt to be constrained by a flawed system, and by the contraction in what it is possible to achieve with decreasing amounts of energy:

Mrs J *You have to be in a political party.*

Mr V *But this participation thing - it's got a lot to do with attitude you know.*

Mr B *I think, we've talked about all these kind of things, one of the things that we've got to do is think to ourselves, what's something that I think needs changing? And we've just got to work on small things. We've got the power to vote and that kind of thing, but we've got to the stage now that we're pretty cynical about that.*

Mr A *It's not a question of power. It's who's got the energy?*

Mr B *Well, there's the energy, and - if there's some small thing that we can do, perhaps two or three of us, or just a man and his wife, in helping some unemployed people, for instance to dig a garden, or something like that, or grow their own - I think we've got to be prepared to do that kind of thing.*

Another perceived constraint was the relative exclusiveness of Havelock North and the separation of its inhabitants from evidence of need:

Mrs J *If you can get to know them. If you're in touch with them.*

Mr B *Oh well, that's the thing, you've got to get to know them. But that's, yeah that's - but you can't organise a lot of big changes, you just can't do it.*

In spite of these constraints, the group decided, modest changes are possible for citizens of any age with vision, leadership, energy and time. At the same time Mr B argued that old age, symbolised by grey hair, brings with it an inevitable contraction of power, status and responsibility, and by implication a diminished sense of citizenship:

Mr B *Talking about power, our hair's the wrong colour, we've reached the stage where the younger people of the community, which is the bulk of the community, don't listen to us now in the same way - we are older and we don't know what we're talking about. And in some ways they're quite right, because we don't know a lot of the pressures that they're under, and the things that are happening to them today. None of us appreciate by personal experience, our own experience, what the problem of getting jobs is and being out of work is, to young people with a family. We can sympathise with them, we can say we know, but we don't know from our own practical experience what it must be to be applying for job after job after job and being turned down. And therefore I don't think we've got the same power in so many respects. We can still do things, but as far as moving power, the power to change things, I don't think we've got the same power. Now you might not agree with me, but that's what I believe.*

This argument however, was countered by Mrs H, who did not accept that this loss of power and seniority was inevitable:

Mrs H *Something much closer to home to me is - I seem to be the only one that's disturbed about it is - with our Board of Nomination for the Church, that there isn't one person over sixty on it.*

The church was one organisation to which a majority of the members of this group committed large amounts of their available time, energy and probably money, though this was not discussed, and I thought it would have been insensitive to ask (Fleming, 1997, p. xv). Mr B explained how his church commitments took precedence over other possible claims because the church itself was actively involved in various social services:

Mr B *I think there's one thing I would like to acknowledge - I'm not involved in many things, but my involvement in the Christian Church causes me to be involved in a number of things where we're trying to help people. The very fact of what I believe is Christianity in action, that's a very, very important thing, and the involvement in the church means I can't involve myself in a lot of other organisations because time's taken up that way.*

There was also a perceived gender difference in the way older people approach community involvement. Mr B, for example, had had enough of “organising things” and “being organised”:

Mr B *I've got a theory on that. I notice it particularly in Probus. I think a lot of men have had the responsibility, they've done all kinds of things, they've retired, and they've said, Ahhh! They didn't want to do anything else. They're quite happy to go out and play golf, but as far as organising things, that's not there, see. They'll take their turn in Probus, but as far as the men's Probus is concerned, even for organising them to go on a trip, they're not particularly interested. No, they just don't want to be organised any more.*

Mr A thought perhaps it had more to do with the kind of activity that was involved, and two of the women confirmed that their participation, a mixture of formal and informal involvement, was on the whole very much an extension of the sort of caring work they had always done as wives and mothers, centred on the family and the neighbourhood. They saw community involvement as a “social thing”, or a “neighbourhood thing”:

Mrs H *I think women are happy with a social thing, whereas men say, what am I benefiting from this and they assess it, and so on. I feel that very much.*

Mrs N *We have a pretty good strong neighbourhood thing with the neighbours just sort of immediate round here, like phoning up one of them last night to make sure she hadn't fallen over upstairs and couldn't get down again.*

Family Ties and the Performance of Citizenship

As well as locating themselves very firmly in the ‘village’ of Havelock North, these participants expressed a strong sense of connectedness to their own family histories and continuing family stories. They wanted to acknowledge the parental values as well as the historical events and the social forces that had helped shape

their own visions and values. They were intensely interested in the continuity of family tradition and culture. Most knew a lot about their forebears, who without exception had originated in England or Scotland, though one could trace his genealogy back to an ancestor who had “come over” to England with William the Conqueror. They admired the values of their parents, passed on to them, but they were doubtful about whether those same values would continue into the future with their grandchildren. Mr A had been discussing this subject with an older friend, a man whom he considered “one of the elite aged”:

Mr A *Family cultures don't last much more than three generations in today's world. There's people of our generation, our children have modified their particular family responses and culture, and then their children have moved on again, and so there is this biological connection, but very often the family culture hasn't really followed through to this third generation. That was his experience and some of his friends, and I would say that applied to me.*

... I think what we were putting out were verbal benchmarks, really, and saying “Would your children do this?” And (he) said to me, I'm concerned that most of my grandchildren are sleeping around, which is an anathema to him and his moral behaviour. He still loves them, but he realises - and I'm the same I guess - he can't really discuss it with them because it's not his business.

The statement that “it's not his business” was strongly contested by two women participants, who disagreed “a hundred per cent”, arguing that the exercise of grandparents' rights and responsibilities depends on love and respect:

Mrs N *Oh yes, I think it's my business to be involved with my grandchildren. It depends on the way we make it our business - absolutely.*

Mrs H *My feeling is, we need to be available, and we don't interfere, but if we've gained their respect, there's a, a - fellowship there that's very helpful for both sides I think. We get a - feeling for them and how they're going along. I s'pose they don't tell us everything, but I think it's this matter of respect, the one for the other, and a trust, and if that disappears, I think it's pretty serious. Well I think - I mean my oldest one is twenty-eight, and she's been in Thailand for three months, and it was very hard to get word through. It was hard to get email and everything. Well, she arrived in England on Tuesday night, and she was ringing us at nine o'clock yesterday saying Gran, I couldn't even send a birthday present. It's beautiful and that's been right through with all of them, and there's eleven. We have been helping them in the way their parents can't.*

Family members and their lives were considered so much their business by Mr I and his wife, that they had moved to Hawke's Bay specifically to take up their role as supportive and involved grandparents, making a priority of this important and highly valued role:

Mr I *My wife and I are not involved in committees for a change. At one stage I think I was on thirteen different committees and that sort of thing - at the same time, but we find our role important as grandparents, insofar as our son and daughter-in-law here have an autistic child. Now only those who have an autistic child know the tremendous demand there is on people's time, life, and the way their whole life has to go round it, and we feel that we have a - well, the reason why we're in Hawke's Bay actually is that we should be able to give them all the support they need because if they lose patience or lose heart or lose anything there as they try to bring up this child who is now nine years old, and - it is the most demanding thing I have ever come across, and - so we find our role as grandparents very, very important.*

The cyclical pattern, of history in general and family history and culture in particular, came through as a strong theme, especially with two of the men in the group, who shared a strong Scottish Presbyterian background and personal faith. They traced the influence of the church and the evolution of societal norms such as de facto marriage through their own families:

Mr A *Well, what I was interested in in genealogy going back in my own family and its culture, was that back three generations from my grandfather, none of them were married in the English sense - they were in the Scottish sense - there was a clutch who got married in St Giles, in Edinburgh, but there was a clutch who just came together and said, we are married, so that you have this - if you look at it now you have this revolving situation. Back in 1805 or thereabouts Scottish people were saying, we are married, and were married. Now we're rolling around to where it's just about we're at that again.*

Mr I's grandfather had arrived in New Zealand in the mid-1800s:

Mr I *That family were very intensely involved in the Presbyterian church. Now their families have slackened off a bit, and the third generation has just about lost contact with the church, and I see this trend as happening in all kinds of family situations. But it appears to me that the family values are still there, but that the second and third generations are living on the values of the first generation to a large extent, and, I'm not suggesting that they don't think their way through these things, but this is a trend anyway that I see in one particular area. As far as my family are concerned, they're coming back to the church, and this is a very interesting trend, to see (if) it doesn't begin all over again.*

His analysis tended to suggest that the affluence of succeeding generations had been a factor in weakening their links with the church:

Mr I *My feeling is that they prospered so much that they tended to forget what their parents had really set before them, and ah, prosperity isn't always a good thing in a family. But, however, that's the way I see it.*

Attitudes towards alcohol have also changed, in the church, in society and in the family, and Mr A's comments trace the influence of historical events and social

trends on the experiences and the values of generational cohorts:

Mr A *Both parents were Scottish and their values were the same. I have values which my grandchildren certainly don't have, and I'm sure they would revolve in other families of our age who came from that particular background, because of the heavy use of alcohol in Scotland round the turn of the century, up till the first World War. Alcohol was a no-no right through the family. And that is interesting that it's ceased to be of any great importance now, because in those days if you wanted to get into Heaven you didn't drink.*

Another societal trend that was seen to recur in a cyclical pattern was the preference for women to retain their family name after marriage. It was Mr A who had noticed it in earlier generations of his own family, but it was something the women present related to at the level of the individual and the family:

Mrs M *I always wished I'd kept my maiden name. But I didn't have the courage to in 1952. But my daughter has retained her maiden name, and always said that she would, if she married, much to her father-in-law's disgust, of course. He doesn't like it, but I think probably got used to it by now.*

Mrs M and Mrs J both said they wished they had kept their own names, and all the women acknowledged the changes that have taken place in gender relations in society which have made it possible for their daughters, daughters-in-law and granddaughters to keep theirs. In spite of a certain ambivalence about the practical "complications" of this practice, which was uncommon among women of their generational cohort, the women of this group were accommodating, even approving of its use by younger members of their own families. This exemplified their attitudes, which were both generative, in the sense of passing on to their children the values that they had inherited from their own parents, and accommodating of social changes. Generativity as a senior citizen's responsibility was a strong theme in this group, both in community-building activities, and in the context of the family. The strongest personal influence in Mr V's case had been his mother, he said, and though some social practices might have changed, he had seen the values he had learned from her handed on and reflected in his grandchildren's lives:

Mr V *We've concentrated a lot on the influence of sex and liquor on, if you like, moral values or family values or family culture, but that was really only part of it wasn't it? I mean, I think by far the stronger influences have to do with things like your behaviour to one another, the question of decency, the question of respect, and I think they were the things that were certainly dominant in our household. My father died when I was eleven, and I was the eldest of three children, and my mother struggled financially for a long time, a very long time. But the strongest things that I can remember are her influence on what was right and what was wrong. It was her values, I grant you that. But I was prepared to see that they*

were good values, and I'm also able to say that my grandchildren reflect some of them. Now they reflect them also from my wife's side, which had very similar, very similar values. And they are still reflected there. Now - and I'm not talking about my grandchildren here, but the young people - their freedoms in sexual activity, or in the consumption of liquor might certainly be different, but I can still see the values in personal relationships.

Generativity has been described (Vaillant, 1993, p. 150) as a task, or responsibility of senior citizens who, "having found themselves, demonstrated a clear capacity for care, productivity, and establishing and guiding the next generation". Generativity is linked to self-esteem in a way that suggests that people's assessments of their own value are "closely linked to their evaluations of the contributions they make to others and the next generation" (Boyd and Luszcz, 2000, p. 1). What this means is "a sense of generative accomplishment over the lifespan" (ibid) which is linked to enhanced well-being. The sense of continuity and connectedness derived from involvement in family networks was closely linked with the Havelock North group's status as senior citizens. Though their conversations indicated that there were times when their power was mediated by younger people, in the family and in the organisations they supported, they expressed considerable satisfaction with the close relationships they enjoyed and the respect and seniority they were accorded within their families.

Material Standards of Living

The conversation about standards of living centred around experiences during the Depression, which had left lasting memories and influences in everybody's lives. There was some ambivalence about money, for example, and about the consequences of not having enough. On the one hand, their own parents had been able to impose sanctions and restrictions and maintain a measure of control over their children which was very different from what they were observing amongst families today. On the other hand, it was acknowledged that inadequate incomes are again putting enormous stress on families, limiting the extent to which they are able to exercise their citizenship rights:

Mr B

One thing that's got to be said, I've sat back and listened carefully to what you people are saying about your parents and I had some wonderful parents, but they were under tremendous stress the whole time, and it's the stress that parents are under, from an economic point of view, that influences how they're bringing up their children. It can't be otherwise. My father didn't have a guaranteed income. He was a jobbing carpenter, he had to work for it all the time, and I think that's a thing that hasn't come out, the work ethic. He worked from daylight till dark.

Some members of the group agreed that at the time they were unaware there was a Depression. However, even in the country the hardship that may not have been talked about, but was certainly observed, along with the parents' responses, had lasting effects. Witnessing the desperation that had produced suicides and food riots had, it was agreed, helped shape their values and attitudes, especially towards money. This was inclined to set up tensions both between their own and younger generations, and within this older generation as well, in terms of the relatively comfortable circumstances in which they now found themselves compared to the difficult times in which they had grown up, and compared to some younger members of their own families:

Mr I *We're children ... of the Depression, and one of the things that the young people don't like us talking about is the Depression, because it had a big effect upon our lives. In fact, I saw food riots in Dunedin, at that time, and the big shop window broken by hungry men, and it made a fantastic impression on me, and I suppose if I'm talking to the grandchildren about this particular period, I can't help mentioning this, because it was such a traumatic period, and - it's had an effect on our values, our money values anyway. ... and somehow or other we've got to be making adjustments there, because most of us (now) have enough pocket money to spend whatever we like.*

Mr V *How much different, how different it is between our generation and our grandchildren's generation, that we could finish school or university or whatever we did, and go to a job, and it might not have been highly paid, and they weren't highly paid, but the pay came in every week.*

The members of this group acknowledged their comfortable standard of living and the ability it gave them to exercise their citizenship rights. None of them laid claim to being well off, but they were able to manage:

Mrs N *We, our age group, we're - well I can speak for myself - I, after first saying I'll never manage, I manage fairly well on the money that I'm getting now. Before that I had a fairly decent salary, but we ... manage ...*

Mrs J *We've had a good run actually, haven't we? We've had a very good run.*

Having had "a good run" in terms of adequate and reliable incomes over time as well as currently, they were managing well, especially in comparison to younger people and those with young families, who were having to work harder than ever to provide for their needs. There was also acknowledgement of the current difficulties for families and for less affluent older people, and a stark comparison with the earlier days of the "welfare generation":

Mr B *I've searched a lot in my mind for why are we like we are today, and I wonder whether we've - and we wouldn't admit it - but I wonder whether we've become selfish, whether we're all thinking of ourselves, and what we've got to do, where it seems to me in my younger days people were helping, were willing to help one another, and they also had time to do all these other bits and pieces. But they put far more time into that kind of thing. It wasn't a case of striving for themselves all the time, and now, because of the economic situation we're in, because of the policies we've got in education and health, people have got to strive for themselves in order to have enough money to pay for their children or to pay for what might happen. Age is - I put myself out on a limb on this one - I'm not so worried about the aged people, I think we've done pretty well.*

Mrs H *But you get somebody living on their own, who has always been on their own, and some small/well it's a big thing - happens that alters their finances, well it's a huge dread ... it's awful.*

By contrast with other areas of their lives, where they expressed a strong sense of positive self-evaluation, this feeling of having done pretty well financially seemed to be accompanied by anxiety and slight embarrassment at the advantage they clearly felt they enjoyed over other retired people in less secure circumstances and especially over younger generations. There were shared memories of what the introduction of the welfare state had achieved for their own generation:

Mr B *Well my memory of it was that in health and education there was this strong desire on the part of the government that health treatment and education was to be provided for everyone, that that was an important feature. ... There was no cost to any of those kind of things. The cost of education was nothing, except for buying the books. There was no such thing as having to pay a school fee.*

There was a shared understanding and appreciation of how they themselves had contributed to the welfare state through their taxes and how it had produced a sense of security, and equity, not just for individuals but for the community:

Mr V *The purpose of the whole thing was security.*

Mr B *And you knew that if you ever needed it you'd get the help. And if somebody else needed it, well that was hard luck, that they needed help, but you didn't grudge that.*

Mr B *And I think that's the thing we've come from into this situation, and that's where we folk in that older group find this very, very difficult to think that when we go to the doctor we've got to pay so much.*

There was an awareness that the welfare system had worked well for them over time, and that they were enjoying in old age the cumulative effects of their "good run". While state-funded health and education services had played an important role in enabling them to exercise their citizenship rights, it was no longer working for their children in the same way:

Mr B *My son just said last night that the lady in the Bank said to him, have you thought about having health insurance? He says, Oh yes, I've thought about it often. She said, Well what about it? He said, Well when I've got my three children through university and when I've got a new set of teeth, and when I've got something else, well then I'll think about insurance. He can't pay in with this exorbitant health insurance that's demanded by the kind of firm that's building that big flash hospital.*

Perhaps, apart from the availability of job opportunities, the differences between this generation and their children and grandchildren were most pronounced in the area of knowledge and skills, especially information and communication technology.

Knowledge and Skills

The people in this group were very much senior citizens in terms of their educational attainment, and the knowledge and skills they had acquired throughout their professional lives. In addition, access to computer technology and the internet marked several members of this group out as unusual elders (according to *The Social Report 2001* only 11.8 per cent of the population over 65 years has internet access). For some, the internet was an important way of staying closely connected with family members, especially grandchildren who had gone overseas in search of work. For Mr A the communication was important, but of even greater significance to him was the priority placed on it, and by inference on the relationship with him, by his grandchild:

Mr A *One of my grandchildren sent me an email this morning, which I got, but it was a circular one that went round to many other people. But I looked to see where I was on the list, and I was on the top, which I thought was alright ...*

Intergenerational communication between these grandparents and their grandchildren was an important theme. Having a close enough relationship with grandchildren to have the opportunity to pass on important information and to teach them certain values was considered an important part of being a generative grandparent, and a senior citizen. Mrs H explained how she and her husband teach the grandchildren by example how to be careful with resources and how to care for the environment, values they learnt during the Depression. The exchange of information between grandparents and their grandchildren was, ideally, reciprocal, with the grandparents keen to learn as well as teach:

Mr V *And fortunately for us, at this stage at any rate, there does seem to be this blend of respect and deference to our age, but at the same time, I think it's very much a case of the grandchildren bringing up the grandparents, in many areas. And I'm happy about that. ... Keeping us alert to what is going on. You know, it's easy to get buried in last century, you know - isn't it, isn't it really? But life moves at such a pace, and the changes ... Think about how much of what we use today in our households, our parents would not even have known was coming.*

There was a strong commitment to lifelong learning in this group, to education for its own sake, for the pleasure of learning, and as intellectual stimulation and remaining active intellectually, as Mrs M explained:

Mrs M *I belong to U3A German group, which I quite enjoy, although it's not quite structured enough for me. But I've just finished a course with the Correspondence School doing German from Form Three to Form Seven, and I think that that is a great challenge - I'm sort of looking round thinking what do I do next, you know. And I found that was good. I mean it demands a certain amount of self-discipline ... but I think it's essential to make sure that it's not just all practical work, that we try to keep this going - I mean, you know preventing cerebral rust, I suppose. I think that's important.*

Mrs J too was committed to the principle of lifelong learning and taking up local opportunities which used and built on her existing knowledge and skills, and enhanced her opportunities for social connectedness and active citizenship:

Mrs J *As a retired person I belong to U3A, which has a variety of things of interest, and educational value, mostly to get people together and think about what they're doing. ... U3A is great I think for retired people because the principle is that people who are members and have some knowledge to share, or skills to share with other people, get together on a very minimal cost basis, and do the sharing, so that people with language skills/we have Spanish, German and French in Havelock. We also have a lunch group which is entirely social, which I run, a book discussion group and various other things, which are of interest. I also belong to two dramatic groups in Hastings, and the WEA book discussion group, of which the group I run is number five I think and so that's number five in Havelock, so there are at least five, if not six, book discussion groups, which shows that people do enjoy something with a structured approach, with a discussion paper and questions so that you have a bit of structure to it.*

Paid Work

Access to meaningful, rewarding and safe employment, a desired outcome in *The Social Report 2001*, was something these people were very aware of, in terms of the discrepancies between their own experience and that of their grandchildren, and which concerned them greatly:

Mr A *But that raises this issue, that it's quite clear with today's technology and tomorrow's technology, there is not going to be enough work for the people in the world, and what do you replace work with, that gives value to life, and gives you status and all the other things?*

It was not just the availability of jobs, but the ability to work and the work ethic, that was at issue. Their parents had taught them and shown them how to work, they had passed this knowledge on to their own children and they wanted to see it continue in the lives of their grandchildren. The support and encouragement offered extended to financial support, and was part of the informal exchange of family relationships, and part of the "influence" exerted by grandparents:

Mrs M *(my children) had very little, and when it came to earning money to go to varsity, they were up at five o'clock in the morning weeding onions and garlic. You know, in other words they didn't get it handed to them on a platter. They worked for it, and they didn't demand anything.*

Mrs J *But there were jobs available.*

Mrs M *Well they had to look for them.*

Mrs H *They don't have to do that today - they can just get a loan. That's where I do have an influence with my grand children. I, we have said to them, we will give you dollar for dollar while you're at varsity, we will give you a dollar for every dollar you earn. We didn't realise how that would be stimulating to them, but it completely/this is a family of five, and the middle one, she works from the minute she finishes at Massey till the minute she goes. We get huge bills, but it's what we promised, and we couldn't use our money in a better way. As well, (my husband) said, Look what it's doing to them! We're putting our trust in them, and you can't buy that. That child writes at least every week to us, because at the beginning she starts with enough money over that big break, hopefully to see her through. You know, we have to keep saying to them, this is out of the money that we put aside for our old age, but we've been lucky, and you know it's been a tremendous thing for four children so far. And for us it's like going for a trip to Aussie, or not - we're not, we've done our travelling. We're happy to stay put - we would get far more pleasure from knowing that that kid can get to varsity without taking out a loan, because the first one I think took out eighteen thousand or something. He's working now but paying huge eight per cent interest.*

This story about the grandparents' willingness to sacrifice personal leisure activities in old age to secure the educational and material wellbeing of their grandchildren, belies any suggestion of selfishness. It also secures for these grandparents the high status role of benefactors, strongly contrasted with their appearance in the (dependency ratio) statistics as dependants. This story indicates a strong sense of generativity and a very positive self-evaluation on the part of the grandmother, who with her husband has made a major investment in the future of their grandchildren. It also indicates that while there may have been some discomfort amongst this group with the feeling that they are doing better than others financially,

this material wellbeing does give them the opportunity for a legacy of generosity within, and outside, the family, as senior citizens.

Culture and Identity

For this group, part of their experience of ageing in a particular place, Havelock North, meant acknowledging the cultural complexion of that place. They discussed the implications of the monocultural ethnic identity of the Havelock North community for their own identity and performances as senior citizens. Mrs J recounted her own experience of racial segregation, which she found difficult to account for:

Mrs J *Now one of the things we noticed when we first came up, because we knew this is where a large population are, live, and always have done, and it must have been one of the most popular spots, I should say because of the climate. ... But we saw no Maoris in any of the things we attended. The first things we went to were concerts of local singing people and that sort of thing, and everything I've been to, I've hardly ever seen a Maori, or part Maori person. They don't participate in the Pakeha goings-on, as far as I can see.*

Mrs N conceded that Maori may not be very visible in Havelock North, but her personal experience was that Maori are present in familial networks like hers, and that the community is not as segregated as it appears:

Mrs N *Okay, we don't see many here, but it's not ... I have Maori grandchildren. ... So that means I have a Maori son-in-law, part Maori, and a part Maori daughter-in-law, and we don't sort of sit like this, eyeing each other up.*

Mrs J *No, but generally speaking, in the groups of people you don't see many even part Maori.*

This exchange illustrates how the “meaning” of being a Havelock North person was negotiated, and in this case found to reside more convincingly in membership of (Pakeha) community groups than in (bicultural) family networks. It seems that Mrs N wanted to introduce a different, more complex personal understanding of cultural identity and social connectedness in New Zealand, but could not deny the physical absence of Maori from public spaces in Havelock North. Mrs J had a strong sense that in the fifties and sixties Maori had been included in ‘the community’, whereas now they were excluded:

Mrs J *Now I've got to go back, say to the fifties and sixties ... there was no feeling of difference, and our best neighbour that we've ever had was Maori, part Maori, and I learned all the things about cooking in New Zealand from her, and our son and her son were absolute buddies until they were about twelve, thirteen when we moved away. There was no feeling - they were part of the community, very much a different New Zealand to today. This is my feeling.*

Alongside this nostalgia for a simpler time, there was also an acknowledgement that the assimilationist attitudes of the fifties and sixties have given way to a renewed sense of Maori self-determination, ushered in in the nineteen-seventies by various 'radical' individuals and groups whose protests laid a foundation for incremental gains in the independent status of Maori culture and identity:

Mrs H *So it's a change that's happening. They're beginning to find their own place.*

What Mr B's granddaughter had discovered matched Mrs J's perception that Maori are not visible to the Havelock North community, reinforcing Mr B's earlier comments about the monocultural exclusivity of Havelock North:

Mr B *One of our granddaughters came and lived with us while she did her seventh form year, and she was just aghast at the attitude she struck of the pupils of the High School here to the Maori situation. She was the only Pakeha girl in her school classes from fourth form up, and when she came here, the attitude that the children had to the Maori situation - she was just appalled - it was an attitude/it was a complete ignorance I think. They just didn't even seem to realise that there were other people in the world. They've been brought up that way, and they were just/ Maoris didn't enter into it at all. I'm only going by her reaction, but she was appalled.*

Lively discussion followed about the social gap between Maori and Pakeha and how it should be addressed. Mr A, for example, acknowledged a widespread and longstanding Pakeha ignorance of the Maori world:

Mr A *I think that Pakeha haven't realised the internalised anger in the Maori community because we didn't communicate, and that is still there, and it's still not recognised by most people. These issues, and this is not me speaking, I've heard of it from many quarters - these issues were rolled over and rolled over in Maori discussion for years.*

Another participant suggested, and lamented, that bicultural issues and the fair allocation of resources may be a lower political priority, perhaps for his class and generation, than superannuation:

Mr V *So somewhere along the line we have to learn to/if we want to keep our identity as New Zealanders, it's going to have to be as leaders in the way we get along with one another, and in the way that we use the resources,*

not only for our own benefit, but for the benefit of those who need those resources elsewhere. And we can do it, if we put our minds to it. But I'm afraid that doesn't seem to be high on the priority list, not as high as an increase in the pension.

The group returned again to the question of ethnicity to explore their opportunities as Pakeha to increase their understanding of the Maori world, and to look back on their 'mistakes' with recognition and some regret. This was a "re-membering", and a performance, in Myerhoff's (1982) sense, of the wisdom accumulated over a lifetime of experiences in a peculiarly New Zealand context. It was also an opportunity to celebrate the fact that this particular kind of uniquely New Zealand knowledge was increasing among their own children and grandchildren:

Mr A *Reflecting on my own life, I am now sorry that I didn't know more about marae protocol, some of the understandings of relationships within whanau and so on. Now I'm much more aware of it than I ever was before, and that's partly because of the re-establishment of Maori values among Maoris. But I am very gratified that my family who are in New Zealand are much more au fait with these things and much more aware than I was when I started work.*

Despite this movement towards Maori in terms of academic understanding, and the cultural awareness of this group of senior people, the conversation generally reflected a strongly Eurocentric world view and marked social separation between Maori and Pakeha. This made Mrs N even more determined not to allow the biculturalism of her own family networks to be suppressed:

Mrs N *And yet again we're talking about "the people", because I have two grandchildren who are part Maori. They, they just come to me ... and there's all the love and respect, and the written word of caring too ...*

There was discussion about different Maori and Pakeha understandings of spirituality, particularly in situations of loss and grief, and different cultural and familial ways of dealing with death. It was agreed that societal norms have changed in response to a variety of different influences, including Maori traditions.

Mr B *This is one of the things that we're talking about, the twentieth century, and this question of death is one of the remarkable changes there's been within the last even five years, in our whole society, with the attitude to the death of some person. When my mother died, we never took our children to the funeral. They were looked after by neighbours and so on. Now, children are taken to the funeral, they wander round, they look at the person even in the casket, all that kind of thing - it's a completely different attitude. ... Could I share something that I think has happened within our church, and that is that now after a funeral, people - I know houses are smaller, so that's a factor - but now people are quite happy to gather in the foyer, the whole lot, and the church provides, well helps provide a cup of tea and food and that kind of thing. In the same way*

that the Maoris gather, we do the same kind of thing in our church and giving people a chance to talk to one another, to talk about who's gone and so on. Not as much as the Maoris do, but it's developed, and I think that has come from the influence of the Maoris on our whole society. We recognise that they talk these things out and get rid of their grief.

Mrs H *They empty their grief, and they don't forget it. They still remember things so beautifully but they don't dwell on it, they clear it.*

Mr V *But that has also come I feel/I know, I recognise what you're saying, about the influence of the Maori people, but that has also come since we began to import a lot of foreigners, ... and while I acknowledge the Maori influence, I don't think it's dominant, and you know, another thing that has changed our attitudes to death I think, is two world wars. You know ... in the Second World War twenty-six million people destroyed, almost overnight in terms of history, and a million people a month in the first World War. What do you take out of that? How can you not have a different attitude to death? You know, it's part of your life.*

The actual experience of war was referred to as "a waste" of life, and of the youth of its survivors. Yet the following comment, evocative of the military bearing of an old soldier, conveys a culturally specific male image of senior citizenship:

Mr A *He's ninety years old - one of the elite aged in my view. He's as straight as a beanpole. You talk to him and he knows everything that's going on, he's sitting in this aged care unit.*

The reference to physical erectness, coupled with intelligence and knowledge of the world, indicates a remarkable correspondence with the profile of an elite senior citizen of the ancient world. Indeed it intrigued me that often when people found I was conducting research with senior citizens, they would urge me to visit either of two old soldiers who were both aged over a hundred and lived in Havelock North and Taradale respectively, cared for in retirement homes, and held up as fine examples of 'successful' ageing.

Summary

The members of this group were vitally interested and involved in the complex lives of often multi-generational families. They participated actively in the local community in which they had chosen to live. They were interested in and eager to engage with issues they perceived to be of national importance. They conveyed a sense of citizenship, of Havelock North, and of New Zealand, as people who have helped build the country as we now know it, and who have an ongoing responsibility to future generations of New Zealanders. Feeling that they have been fortunate in terms of the rights of citizenship, they were keen to fulfil the obligations as they perceived them, and to leave behind a caring and safe community and an unspoiled environment for their children and grandchildren.

Building on clear spiritual and moral foundations laid down by their (often pioneer) parents and grandparents, together they used the research group sessions to construct a vision of New Zealand as a small egalitarian nation which is “part of this global business”, but leads by example in areas like peace-keeping, race relations, environmental sustainability and state support for its citizens, especially in employment, education and health. These people were ‘children of the Depression’ and had experienced a world war, some at first hand. They vividly remembered the difference the first Labour Government had made to people’s lives. By comparison with what they had seen then, and with the situation facing poorer old people and many young families now, the economic situation they now found themselves in seemed more than adequate to their needs. They recognised the consumer power this gave them as comfortably off senior citizens, but they also recognised that “of course old age, the elderly, are a great money-spinner” for entrepreneurs. While their personal expectations seemed to be largely met, they were not complacent, expressing a strong commitment to community service and to giving. A statement in the sixth and last session seems to me to reflect some of the complexity of what it means for members of this group to be senior citizens in New Zealand at this particular time:

Mr V *I believe that we have got the power through participation to have considerable control over the way we use what the world is doing to us. Now it’s one thing to lie down and say, oh we can’t do anything because the big multinationals have taken over. There’s a lot that we can do, but it’s the way we do it that will matter. But we can’t change the global world.*

Not being able to change the world did not stop this group from active engagement with international, national and community issues, or from addressing head-on the difficulties of ageing. They spoke with authority, confident of their ability to express themselves competently and to communicate effectively. Mindful of structural inequalities, they were also aware of being at the powerful end of the scale in terms of race and class. They also expressed an understanding of and opposition to the inequalities imposed upon them by societal attitudes to age and, for the women, gender. They were not about to take old age lying down, as Mr A had indicated by his “rage against age!”.

One of the strongest impressions from this group was that they felt fortunate, especially in the way their parents had helped prepare them for the lives they were now leading. Their sense of the legacy and the cyclical nature of history, their attitudes to citizenship and its obligations and their values were attributed to a very large extent to their parents’ influence:

Mr V ... you don't see it at the time in quite that way, but I look back on it now and I'm very grateful for that sort of guidance if you like. I don't mean by that that I never did anything I didn't want to do, or anything - I don't mean that.

Mrs N It made you aware of the word 'respect' - is that right? I'm asking that as a question, not saying it.

Mr V Yes, yes, but you see it seemed to me that there was an inbuilt respect for your parents anyway - there was an inbuilt respect for older folk, come what may, and it didn't matter who that person was.

They wanted to be treated in old age as they had been taught by their parents to treat older people, and indications were that they were indeed treated with respect by family and community members. Shortly after the group finished meeting, for example, Mrs H and her husband were presented with prestigious civic awards in recognition of their environmental work for the community. This group enjoyed a high level of autonomy and social connectedness, and exercised the rights and responsibilities of full citizenship, though their day-to-day experiences in an ageist society had a tendency to erode their seniority.

Chapter Eight:

Flaxmere

Introduction

Flaxmere is a satellite suburb of Hastings, about the same size as Havelock North and about the same distance from Hastings. However, while there are orchards and vineyards between Hastings and Havelock North, Flaxmere is separated from Hastings by an industrial zone, and by significant socioeconomic differences. Flaxmere frequently receives attention from the press emphasising the poor health, housing, education and employment status of its residents, of whom 52 percent are Maori and around 9 percent are of Pacific Island ethnicity. Demographically the population of Flaxmere is very young, with just over four per cent of residents aged over 65 years. The suburb is not well served by public transport, and indeed transport was a particular issue for four of the six members of this group: being unable to drive themselves by car meant they were especially exposed to the threat of social isolation and loneliness. A lack of support services and appropriate housing options for older people in this community also leaves some older people vulnerable to very real fears about having to 'go into a home', thereby losing their independence.

This group ranged in age from 65 through to 85, with one man and five women. Three were widowed, one separated and two married. The highest educational level attained by anyone in this group was attendance at high school. All members of the group had children, and all had grandchildren. Two also had step-children and step-grandchildren. Most spoke of the importance of their Christian faith and values of honesty, respect and kindness as guiding values in their lives. They rated their health as poor (one), average (three), or good (two). Health problems kept members of this group away or meant they had to leave early from five of the six main focus group meetings.

Introducing the Participants:
not “born with silver spoons in our mouths”

These participants began by telling their “life stories”, as a way of introducing and identifying themselves. Two members of the group had personal experience of Alcoholics Anonymous meetings, and had some initial concerns about what the research process would actually involve in terms of “sharing”. One who had concerns about the trustworthiness of our group and expressed doubts about whether she would be able to share, found herself talking her “bloody head off”! Despite their reservations, the participants in this group shared stories of their life experiences with remarkable openness.

Mrs K’s stories of her early life on a small Pacific Island revealed stark contrasts with her subsequent life in New Zealand. She described it the way it used to be when she was a girl, constantly drawing contrasts between then and now, between the island and New Zealand, and between material and emotional wellbeing:

Mrs K *We had a very poor living, specially financial. That’s the way it is, and yet the people are happy, we’re happy. And we heard about New Zealand. That’s how I came here, I heard about it, and somebody asked if I could come over and work as a domestic, you know, working on the farm, housemaid rather, domestic work, and then I came. And I found New Zealand is beautiful, a beautiful country.*

The simple, happy way of life she had lived on the island with her family and which she described in rich detail, lingering over descriptions of the tropical fruit and the seashells that had formed part of the simple economy, was now gone, she said. She had been back, but so many people had left to find work, that it was “not the same” anywhere in the islands.

Mrs L’s early life in England was also remembered as simple but secure, comfortable and happy, until the age of fourteen, when her father was “ruined” and everything changed for her and her family for ever:

Mrs L *Well, you were never hungry, and you’d always got plenty of, like plenty of clothes and sheets on the bed and everything, but - you just bartered everything. Everything was bartered - up until I was fourteen, and then the Council wanted the farm for building, and I suppose my father was a very stubborn man - he said no. He said he’d worked hard and he wanted the farm for his daughters. But - you can’t fight the Council. So in 1928 they offered my father two thousand pound to get out of the farm. Well if*

he'd a took that I wouldn't a been sat here now! If you know what I mean! That was a small fortune, but no - he, he stuck to his guns and he ended up with about/I don't know whether it did touch the two hundred.

This event had had a major impact, not only on her attitudes, especially to money, but on her education and her job prospects, on the ability of the family to stay connected, to each other and to the community, and on her own identity as an older person who now lacked the material security afforded by the possession of land. She only hinted at what might have been had her father been able to pass on his land to his daughters, but the implication was that she would have been able to choose, and her choice would not have been to spend her old age in a council flat in Flaxmere.

While this turn of events could have been called 'unlucky', Mrs L did not see it that way. She was 'lucky' to have had two good husbands, and to be living in New Zealand, where we have "every convenience". A discussion about money highlighted the contrasting views of these two participants, both immigrants to New Zealand, but from very different cultures:

Mrs L *Money is the root of all evil.*

Mrs K *Well, money is good in one way, if we know how to use that. Yeah - without money we would die - nothing to eat! Specially here in this country!*

Mrs L's highly charged symbolic misquotation of the biblical assertion (from Paul's first epistle to Timothy, verse 10) that "the love of money is the root of all evil" contrasts strongly with Mrs K's fairly matter-of-fact straightforward account. These different views of money confirm those expressed by the participants in a New Zealand study (Fleming, 1997), which found that a Pakeha view of money as intrinsically powerful contrasted with a comparatively neutral Maori and Pacific Island view of money as a basic resource which could be exchanged for other resources. This fundamental difference, while it may be explained by the relatively recent introduction of the capitalist system into Maori and Pacific Island societies, is important, because it is between people who live together in the same social and economic environment, are subject to the same laws and public policies and the pressures of the same consumer society.

Unlike Mrs K and Mrs L, Mrs S did not remember a happy family life. Introducing herself as "a recovering alcoholic", she told of early, and continuing, difficulties

with alcohol, violence and depression. She spoke of a suicide attempt and marriage at a young age to escape from the pain around her:

Mrs S *I started drinking when I was fifteen, and there was a lot of partying and drinking and violence in my home - and I couldn't wait to get married - to get away from it all, and have a baby and live my life. That's what I wanted to do. And - anyway I got married at nineteen and I - I mean really speaking, my life from then on revolved around partying, drinking, right through really.*

Mrs B understood, because she too had struggled with alcohol and a difficult early life. An only child, she struggled through a “mixed-up childhood” and a “traumatic time” as a teenager struggling with her own emotions as well as coping with the destructive effects of her mother’s emotional trauma. She described herself as a “misfit”, who hated school, disliked her job and was married at eighteen to a man she did not love, and “started having children”. The marriage ended with her separation from her husband and her children. Her mother committed suicide and her father remarried and disowned her, his only daughter. These stories of so many painful experiences made harrowing listening, and they must have been harrowing to tell. Perhaps, having begun a process of rehabilitation and self-awareness through Alcoholics Anonymous meetings, Mrs B was able to use our research meetings to continue the healing process by re-telling some of her stories to a small group which, like AA, was bound by rules of confidentiality:

Mrs B *Whether that was why I went to alcohol really in a bad way I don't know. But I was really a mixed-up terrible person. And it's true what they say, the more you try to dig yourself out of a hole, you get into it further and further. And eventually I was hospitalised. That was in another violent marriage. He nearly killed me. And I was in hospital. And they tried to tell me I was an alcoholic, and I said, no way. Well anyway after about six months I think I realised I was. And I didn't go for treatment, I was too stubborn. And I did get the shock of my life because they put me in an old people's home. It was an experiment they were doing to try and get you to look at your life. Well it made me look at mine. Here were all these old people, sitting there, and there was no way I was going to be like them, so anyway I started going to AA, and because I did that, I started to learn a bit more about myself. It was a long, long haul, but you start to learn a bit more about your real self.*

Both Mrs S and Mrs B looked back on their stories of their own lives as they had recounted them to the group, with a sense of amazement at their own resilience. Mrs B told of her recovery from an illness which had left her unable to walk or hold a knife and fork:

Mrs S *Amazing isn't it?*

Mrs B *Mm, well it is, you know - in that context, when I look back, I think to myself, I'm a miracle, and the other part of me says, don't say that, because it's blowing your own trumpet. But well, I feel it is a miracle in my life that I've come back.*

Mrs S *Well it's a miracle in my life that I've come through a mental institution too.*

Listening to all these stories, Mrs B said:

Mrs B *... it's given me a big, broader spectrum of my life compared to your life, and compared to his life. And you can see how none of us actually were born with silver spoons in our mouths. All the same - we all had hardships, different hardships from what they have these days.*

Naming the Issues

Physical and Mental Health

One of the main health-related concerns of the people in this group, and one which had a significant impact on their ability to exercise their citizenship rights, was current change in the availability and the level of "home help" support services. A general designation which covers personal care as well as housework, "home help" is funded by the health budget and allocated on the basis of needs which are assessed on the recommendation of the General Practitioner. It is also closely linked with being able to stay at home and "age in place". The people in this group clearly regarded an adequate supply of help when they needed it as a right of senior citizenship, the right to be supported in old age in a way which protected their dignity and their safety. However the process of claiming this right resulted in confusion and anxiety, to the point where their citizenship status, and even their physical safety, were eroded.

Mrs K had voluntarily reduced her 'home help' hours from four to two a week because she felt she was recovering well from her illness and managing to do more herself. However, she had recently had her remaining two hours halved and delivered in two half hour sessions. She said, and the others who knew the size of her flat all agreed, that the time was not adequate for what needed doing:

Mrs K *So anyway ... I worked, even when I was ill, because the hospital encouraged me to get up and do things. I didn't want to, because it was painful, but I got up. I did what I could, got my shower - and I, I haven't fallen yet - and also got my breakfast, did my dishes, did my washing, even though I was ill. But I was coming gradually, you know, strength, strength each day comes, and I worked, I worked before the home help came. If I don't, I don't think the home help can clean that little place of mine. So that's what I learn, I must tidy the home before the home help because the home help got enough to do, like the floor to Hoover, and to mop and the shower, and the loo and all that.*

Mrs K's response to the problem, to do some of the work herself before the home help's arrival, and her own remark that she hadn't fallen yet, raises important questions about the correlation between inadequate support for older people in the home and an increased risk of falling. Fall injuries, one of the most common causes of hospitalisation for older people, are attributed to a combination of physical, lifestyle, environmental and social risk factors (Dyson, 2001a). Mrs L's story suggests that public health actions to reduce falls (screening people at risk, reviewing medication and running community education and exercise programmes) may be undermined by local District Health Board attempts to cut costs by reducing home help for at-risk older people to dangerously low levels.

The personality and skill level of the workers and their willingness to work flexibly within the time constraints and the contractual requirements of a rigid system were all perceived by group members as important factors which helped determine whether the support for those participants who receive home help was effective in meeting their needs. Mrs L, whose comments were informed by her own past experience as a domestic worker, clearly felt that the workers were faced with an impossible task:

Mrs L *Well I mean, I have been a home help years ago, and I couldn't do it in an hour, and I don't expect them to do what I can't do. ... You can't do it in an hour. I defy anybody on this earth to do it.*

'Home help', or 'health aid', as it is now called, refers to:

health care and home support workers. Health care workers provide hands on personal care in residential care or a client's home, assisting them with activities of daily living and personal hygiene. Home support workers perform household tasks. The two roles may be performed by the same person (Dyson, September 2001).

If this sounds confusing, it is. It involves the sort of caring and household work that almost all of the elderly (female) recipients of care have done themselves in the past, unpaid and/or paid, in their own homes and/or in the homes of clients or family members. This factor, as well as the setting and the personal nature of much of the work, has the potential, depending on the individuals involved, to predispose the relationship between the older person and the 'home help' to approximate more to a friendship between peers than a commercial arrangement between client and health worker or between employer and employee, though it often retains elements of all of these. The following conversation reflects the anxiety, the vulnerability and the indignity felt by these elderly women as they

struggled to cope with a system that seemed to have subordinated their need for competent, adequately trained support to budget constraints:

Mrs K *I found it very difficult to cope with since the hours have been cut, because there's been so much, on relief. You know, you go along, Oh well, I'm going away, I'll be away tomorrow, and I'll be away next week, and you'll have a relief in, you've got nothing to worry about!*

Mrs L *But you do worry, and then the relief comes and she looks at you - I've never done anything like that! You think well, it's about time you started! I had one - I shouldn't/she was a very willing little/well, little, she was elderly/well I don't say she was elderly, she would have been in her fifties, you know, and she put my brace on, and it felt alright 'til I stood up, then it went down to my ankles! She said, Oh I can't touch that! I mean it doesn't bite 'em! I mean they've only got to strap it round, you know, make it firm, but (the agency owner/manager) had to come out and do it.*

Mrs L's story gave an indication of just how delicately poised and easily upset the relationship can be, and how vulnerable both parties are under the current regime, the elderly person to inadequate and uncaring support, or at worst abuse, and the worker to exploitation:

Mrs L *But I've got one, that comes Mondays, Wednesdays and Fridays, and I dropped a bit of tissue in the bedroom. Well I couldn't pick it up and she walked backwards and forwards ... and left the piece of tissue on the floor because it was not on her curriculum. She wouldn't lift a duster, she wouldn't wipe the steam off the windows, or across the windowsill ... She wouldn't do anything. She just comes in as a personal care - that's my shower, my bed, commode and my brace, and that's all she does in an hour. I've got a list of things that they do, and it isn't on her curriculum to do any housework, and she will not do housework. It isn't on her curriculum to pick my rubbish up.*

Alison *And how did you feel when she said no?*

Mrs L *I felt very angry!*

Alison *Were you able to do anything about it?*

Mrs L *Well, I've got some pastry tongs, d'you know what I mean?*

Mrs M *Yes*

Mrs L *I went and got those out of the drawer! Took me about half an hour but I did it! But it really made me very angry. I wouldn't ask her to do a thing again. And when she finishes and she sits down, I very kindly say, is that on your curriculum, Brenda?*

Irony was the only defence she had available to her in a situation where both the elderly woman and her helper are shown as remarkably powerless. Mrs L's powerlessness arises from her low priority status in a health system which is

geared towards acute care and “generally ignores the needs of older women who require greater home care and not hospitalisation” (Dyson, 2001, p. 84). The ‘home help’ is also relatively powerless, caught between the conflicting demands of a frail old woman with human needs and a rigid contractual employment system which does not reward human kindness, but expects it and takes advantage of it. Mrs L herself was only too aware of the exploitative nature of this type of menial caring work:

Mrs L *The little person that I had last week - I know she was sixty-six, which is a good age for housework, I know that - she sat down in the chair and she went to sleep!*

Alison *Before or after she did your housework?*

Mrs L *While she was doing the housework! ... I thought where has she got to now? She was sitting - sitting there. I said are you alright? She said, Oh I've got asthma. I said, Oh well you sit there, I said, but don't you have an attack! You know, I mean, these things are unheard of, aren't they? But she's got a heart of gold, I mean she'd been on since half past six and this was half past three in the afternoon, and she's sixty-six - I mean, they were absolutely flogging a willing horse.*

Mr D *Perhaps because these caregivers are expected to do so much, the home help, they're expected to do so much, perhaps that's why there is a shortage of them, they don't last long and they say, Oh blow this, I'm off.*

However, Mrs L had other stories of ‘home helps’ who had “gone the extra mile”, putting in extra time at their own expense and working flexible hours to meet her needs. Shopping was another task that was on the home help’s “curriculum”, but Mrs M’s preference was to separate cleaning, which she regarded as a legitimate support need, from shopping, which for her was a leisure activity and which she preferred to do for pleasure with a friend:

Mrs M *I have a friend that's/she comes to take me shopping/I have a home help, or what do you call them now?*

Mrs L *Home Aid.*

Mrs M *Yes, she has offered to take me shopping, but I've avoided that because I feel that she can spend the time doing the cleaning rather than taking me shopping. The friend that takes me shopping is a carer at (a retirement complex), and the duties are changed fairly frequently, so I never know whether I'm going out or staying in, for me shopping. But I don't mind. I mean I go each week. I only go each week because I feel it's a break and I can please myself what I buy.*

Mrs M’s friend’s (unpaid) support work in taking her shopping in addition to, and subject to the demands of, her own unpredictable paid work as a carer exemplifies

the complexity of the networks of paid and unpaid support that are provided in the community, often by elderly people for elderly people. One such service which operates in Flaxmere is the Age Concern van which takes people shopping to a Hastings supermarket once a fortnight on pension day, in exchange for a donation. The van is driven by Mrs B's husband, and several of the research participants had taken advantage of the service, though attention was drawn to the difficulty of accommodating everybody's fortnightly supply of shopping. Discussions were evidently underway about a hoist to accommodate the special needs of shoppers with wheelchairs. The local supermarket, whose prices were generally considered too high for regular shopping, delivers groceries free of charge to those in the village retirement complex, but not further afield. It was evident that transport difficulties restricted access for the majority of people in this group to leisure activities, shopping and activities that were vital to their mental and physical health, for example going to church and visiting the doctor. Several members of this group were significantly restricted in their ability to exercise consumer choice. Having no alternative, they were limited to support, including transport, which was free but not always convenient or accessible. This in turn imposed restrictions on their ability to participate and to exercise their citizenship rights in a society that favours citizens as consumers.

There was no discussion of health insurance in this group, and their only option, the public health system, was considered so inadequate by most members of the group that Mrs B said she prayed for good health so that she would not have to go to hospital "because you hear so many horror stories". Her concerns, and those of the other participants who had experienced problems, centred on excessively long waiting times for surgery, and for acute admissions to hospital. One member of the group experienced, during the time the research group was meeting, a long and agonising wait for corrective surgery to remove a wire that had been left in her chest by mistake after earlier surgery. In the end a family member, concerned at the intense pain and disability the participant was enduring while she waited, contacted the local and national press. The result, though no causative connection was acknowledged by the hospital's spokesman, was a drastically cut waiting time for the necessary surgery, which was followed by fully funded convalescence in a Havelock North rest home. It was difficult not to draw the conclusion that involving the press had proved to be the most effective way of getting appropriate, if not timely, treatment for a member of a low status, low priority population group.

Safety and Security

A story about personal safety which highlights the mediation of senior citizenship by socioeconomic factors and the limitations of a consumer model of citizenship is the story of Mrs M's personal alarm system. It became a sort of serial, continuing from session to session, and in the fifth session I reported back, as promised, on the information I had collected about the various personal alarm systems on the market. Other members of the group explained the systems they had in place for ensuring their personal safety at home. Mr D had done some research of his own, and he was keen to report back to the group:

Mr D *You're recording all this aren't you, because I did a little bit of a run around these things too. I went to, well, a couple I thought were friends, and one or two other people, and they just didn't want to know! Once the people knew that elderly people were involved they just didn't want to know. Because a lot of the elderly people, like yourselves, don't have much money. That's what I reckon it is, you know?*

However, the situation regarding safety in Flaxmere was complex. The participants felt that the problems were due to government policy which had allowed under-resourcing of the local community, and the lack of a strong police presence. As a result the streets had become dangerous for old people because of the young skateboarders, and local facilities had been vandalised. Members of the group felt helpless, frustrated and at a loss to know what to do except blame the government for the situation. This conversation reflected a sense of powerlessness and the low esteem in which they felt they were held:

Mrs M *Yes, I mean, so - it's very difficult to know what a person can do, except to report it. I mean it's no good approaching these youngsters, because they just - well, they either abuse you or they!*

Mrs S *Well, I think you can blame the government for that.*

As the discussion unfolded over several weeks, however, and the group teased out the details of what it meant to live in Flaxmere, their stories revealed a more nuanced understanding of the situation. While Mr D had been warned off Flaxmere in advance by a land agent, he had not experienced any problems with neighbourhood safety or security himself:

Mr D *Initially I didn't even want to drive through Flaxmere. It terrorised me from what he'd said, you know? And gradually I looked round Flaxmere over the years - I used to come out to the rubbish dump and I'd go home this way, and then to the transfer station and that sort of thing, and I recognised it wasn't as bad as what they made out it was, what this bloke had made out it was, or even the paper made out it was. And so I*

said to (my wife) well look, it's better to buy something a little bit cheaper and invest the other money, than buy something in town (Hastings) or Havelock North, where you've got less to live on. So that's what we did.

Alison *And you've been happy with that decision?*

Mr D *Yeah, the only problem we've ever had is some graffiti on a shed that backs on to Flaxmere Park. There has been the odd instance where I know there's been people in the back yard at night because I'll go out in the morning and I'll find the odd cigarette butt, you know, and that sort of thing. But they can hop over the fence from the park you see, or throw it over the fence from the park. But we've had no problems, but the people on both sides have been burgled.*

Mrs S too, had heard of problems but had experienced none herself, and that seemed to be a common theme amongst members of the group:

Mrs S *Honestly I've been quite happy here, I really have. I mean, I know there was a lot of destruction around just before I came, you know, and the neighbours probably know about it, breaking in of cars and things. It was quite bad. But I must admit I haven't had any stealing going on (of anything) that I've got hanging in my porch or anything. One time you couldn't leave anything outside.*

A caring community, which everyone agreed was a strong feature in Flaxmere, went a long way to helping people feel safe and secure in their neighbourhood, though there was a common perception that some places in Flaxmere, particularly at some times, were less safe than others. Mr D was very involved in the organisation of his local Neighbourhood Watch, and felt pretty secure himself. Nevertheless, his remarks indicated how personal safety and mobility for senior citizens is mediated not only by age, but by gender and locality as well:

Mr D *There are certain places in Flaxmere still that you've got to watch it and that sort of thing. I myself/we live on the other side of the park, Flaxmere Park, and I'll walk through the park alright, but my wife won't. If she sees any young people in it, she won't go through the park. She'll walk right round the street, to get to the shops.*

Mrs S *What, in daylight?*

Mr D *Yeah, and neither of us will go into the park at night.*

The participants were aware of the prevalence of violent crime in parts of Flaxmere, and it clearly limited their ability to participate in the community and to exercise their citizenship rights, by placing restrictions on the times and places they could safely get out and about in their own neighbourhood. Even closer to home, they were fearful about the absence of a resident manager in the local authority flats where three of them lived. The complex, the only residential facility for older

people in Flaxmere, offered limited support during the day but none at night. This left some residents feeling insecure and vulnerable. They were apprehensive about what would happen in the event of a medical emergency or a break-in at night. One participant told of her recent experience when she had needed to call for medical help at night. In the absence of an on-site manager with a key the ambulance officers had had to break a window to get in, leaving her with a seventy dollar account for the repair of her window. There was strong feeling that the Council was not taking its responsibility for the residents' safety seriously. I undertook to make this known to the authorities. I also facilitated the attendance of several members of the group at the Council's annual planning meeting held a short time later in Flaxmere, so that they had an opportunity to communicate their safety concerns directly, which they did.

Domestic violence had evidently terrorised two of the participants in the past, and both were thankful that they were now free from physical fear. This raises the possibility that for women who have been oppressed or abused in the past and have been freed by divorce or widowhood, old age may be a time of increased, rather than diminished autonomy, security and wellbeing.

Community and Family Ties

Community

The participants argued that the levels of social support that were available amongst people living in the Flaxmere community were unusually high:

Mrs B *Well I noticed that while I was sick, I never had so many people ring me up, finding out how I was, things like that, people calling, and even neighbours that got to find out, they came over and saw me. They growled at my husband for not saying anything, because he'd just whizz in and out, never said a word. So I feel a bit like (Mrs S) - I've never known a place to be so friendly. And I think we care for one another - when one is missing they seem to sort of find out, you know, one way along the line.*

However, participation in community groups and activities was not something that just happened for everybody. Mrs S, for example, acknowledged that she was "a bit of a loner" and liked her own company, although her ability to participate in community affairs was also limited by transport difficulties:

Mrs S *I've been searching, searching for a church that I would feel comfortable (in), and it's taken me a long time to really feel comfortable in the Catholic Church in Flaxmere. But it's very difficult because - it's the transport problem - it's getting there. It's just that too far for me to walk, you know.*

As well as being expressive of spiritual values and aspirations, being a member of a church and attending services and functions was for her an important way of being connected socially, and of belonging to the community. Another key way of belonging, for Mrs S, was to find a way of exercising her citizenship rights, and responsibilities, by making a contribution. After what she described as a “chaotic” life with major disappointments and limited success in her own estimation, Mrs S wanted to do something worthwhile. She had chosen to sponsor a guide dog puppy, which provided her with an achievable goal and fulfilled her desire for generativity in the sense of giving to the next generation and community-building. It had become a primary focus in her life:

Mrs S *All I'm interested in now is to get to Auckland, and be taken around the training centre, where the dogs are. I would love to do that before I die, I really would.*

Mrs L lived in a downstairs council flat, where she mostly sat in a chair with everything she might need within reach. Though not very mobile, and teetering anxiously on the brink of a fourth age of dependency at the time I met her, she had been very active in fostering social activities, especially bus trips, for the pensioners in the flats, as her neighbours were quick to point out:

Mrs S *She's done a lot of work in the village though, haven't you?*

Mrs B *Oh she has, I've heard about that.*

Mrs L *Oh I did liven 'em up! I used to organise all the outings, you know, sort of ...*

Mrs M, preferring to find friends of her own age rather than rely on her family for her social connections, had also had no difficulty in making new friends when she arrived in New Zealand:

Mrs M *I have always, you know right from a kid, I've loved people, you know on the whole! But no, it's never taken me long to become friendly with people, and I mean it's a big asset in business after all, isn't it? When I came, my son threw a barbecue for all the friends to be introduced to me, and of course they were all youngsters, and no oldies, and I thought, this is no good! So I thought to myself, well they must have something for senior citizens, so I walked in to (Flaxmere Family Centre) - I said, is there any entertainment or availabilities for senior citizens? Yes, she said, there's cards this afternoon - would you like to join? So I said, Oh yes!*

Important and longstanding friendships had begun that day, and she became quite emotional when remembering the friends she had made over the past sixteen

years. The group's discussion of local social networks highlighted the way senior citizenship is mediated by social class, even in New Zealand:

Mrs B *I've noticed it since we've been here, and I've said it often, whether it's just - I don't mean to sound terrible - a different class of people, but I think they're more caring here. We take each other at face value. We don't look down at them and say, Oh, they're not my class!*

Mrs M *Oh no. It's generally known isn't it, that it's - social class, generally, and yet I've met people that have been really snooty, you know. They'll accept you, but - ignore you, you know? Not so much in Flaxmere, but in - Hastings, and one or two other places that I've been to, you know?*

Amidst great hilarity, Mrs L and Mrs M shared stories of their experience of such "snootyness" when they joined a community organisation whose meetings were held in Havelock North. As Mrs M explained, however, wider social influences, especially the greater participation of women in the paid workforce, had had a dramatic effect on such community organisations:

Mrs M *That was the last committee I was on - I've resigned since then. As I say it wasn't long after that it folded up. Nobody else/you see, all the social side of it/it was an afternoon meeting and there weren't any elderly people to take the place of the ones that had run the office so long. There was nobody to take their place, you see, because people were working, and that was it. But no, it was quite an experience.*

An important factor that has an influence on social outcomes is the way different social institutions - families, schools, churches and community groups - function and interact. For example one participant in this group expressed her enthusiastic appreciation for the local primary school's invitation to Age Concern members, and other community groups, to attend their school production free of charge:

Mrs B *I reckon it was absolutely marvellous. It really was, and I think well - I was going to mention it tomorrow (at the Age Concern meeting). They invited us along and it was free, and I reckon it'd be good to give something to the school.*

Mrs L *It would be nice, yes, it'd be a nice gesture that would, because there's a lot of talent amongst those youngsters.*

Societal attitudes and prejudices, among them ageism, inevitably affect the relationships between people and the extent to which they can connect constructively. This factor is of central importance in determining the extent to which older people have opportunities to exercise their citizenship rights, in this context the right, and the responsibility, of generativity and the chance to be interested in and involved with the next generation. While she acknowledged the prevalence amongst older people of ageist prejudice against young people -

“can't help it, I suppose it's our age”, Mrs B's obvious enjoyment of her experience at the school, and her appreciation of the way she had been treated by the school children seemed to offer hope of increasing intergenerational trust.

Membership of and involvement in groups is one of the indicators of social connectedness in *The Social Report 2001*. Several participants agreed that they were busier in retirement than they had ever been before, and gave examples of clubs and groups with which they were involved. Mr D, for example, was co-ordinator of his very active local Neighbourhood Watch scheme. Before retirement, he said, he had been fully occupied with family and work. Now he was involved in “a whole new world”, a new career he had created for himself to occupy his time in place of paid work, while his wife pursued leisure activities. This division of labour mirrored and reinforced in retirement the gender divisions that had prevailed earlier when Mr D had been in the paid workforce and Mrs D had not:

Mr D *Yeah, well I'm an amateur radio fiend, have been way back to the early sixties. So I've got a good hobby, you know, that'll keep me going for hours if I want it to. When we ran the motel, after we'd had it a couple of years I bought a computer for it, and I'd never touched a computer before, and that opened up a whole new world for me, and I've now got two computers at home, and I'm actually writing the software that runs them. You know, that's in, well, ten or twelve years, or less than ten years, and I'll sit there for hours, working on the programme. (My wife) sits behind me doing her jigsaws, or round the other side, knitting. And, you know, I suppose I spend, on the whole I suppose four hours a day, working on a computer, and then I'll have contests and that for the radio side, and - I've got one coming up this weekend, with three hours on Saturday night, three hours on Sunday night. So I've got plenty to keep me going because there's the local radio, amateur radio club that I go to, and that sort of thing. Later on this month I'm giving a demonstration there of the software that I've actually been writing. You see, so I've got quite a number of hams round New Zealand trying it out and they get back with problems they find in it, and I'll fix those problems, and - so I'm busier now than I ever was before.*

Mrs B and her husband were also busier than ever in retirement. As treasurer of a local service club she had surprised herself with the confidence she had gained through participating and taking on a leadership role:

Mrs B *Actually I never knew I had a voice until the last few months ... I've used it. I stood up last night and spoke my mind, and my husband said, You never once flinched, and he said, You somehow knew to point your eyes at the back of the hall, and not look at the people. Yes, I'm the treasurer for the Lions group that we started up in Flaxmere.*

Mrs B's experience of finding and using her voice publicly and confidently for the first time suggests that when given the opportunity to take up leadership roles in community organisations, older women can discover a strength they never knew they had, enabling them to exercise power in the public domain to a greater extent than ever before. Mrs B's story shows the positive effect of the added confidence and self-esteem on an older person's sense of identity and autonomy.

Past as well as present involvement in the community has a bearing on a person's sense of citizenship, and for some people stories of the places, people and events of childhood contribute to a sense of connectedness and belonging. This was the case for Mrs L, who, though some of the memories were painful, told stories of her past connections, especially family.

Family

Mrs L's story was richly illustrative of the influence of gender on a lifetime of experiences within the family. Her father had been a tenant farmer with some land of his own as well. With her mother an invalid, she and her sister had been "more or less Granny-reared". The widowed grandmother, the invalid mother and the two girls in the household were particularly powerless and vulnerable in a situation over which they seemed to have no control. When Mrs L was fourteen, her father was "ruined", and the family lost their home:

Mrs L *And then we, we more or less broke up ... There was my Granny, she lived with us because she, when Mother and Dad married she was a widow, and they had her/like they let her stop, and Granny always lived with us. And then Granny and myself, we lived with some friends in one house, and my sister and Mother and Dad lived with some more friends, so we were a split family. We used to meet and go and sit in the - well the churchyard, actually - there was a little lych-gate, and we were sitting on the stone seats opposite - Mum and Bin, you know, and Granny and I. We'd meet every day and talk to each other.*

In addition to their other losses, Mrs L and her sister had their education interrupted, when their father's inability to pay their fees meant they were "out of the convent on our neck". Few of the neighbourhood and community relationships survived the family's downfall. Eventually Mrs L married, but she was widowed early and brought up her son alone. When she was sixty-five and her second husband died, she sold her household possessions and moved from the other side of the world to live near, though not with, her son and his family. She still felt deeply the consequences of the catastrophe that broke up her family when she was fourteen. She had lost her material security, her home, education, status and inheritance. The cumulative effects of inequality still affected her citizenship status and restricted

her capacity for autonomy and connectedness, and her ability to exercise her citizenship rights.

For Mrs M too it was her only son who arranged for her to come to New Zealand after the death of her husband, when she was in her mid sixties. Mrs M was the fourth and youngest child in her family and the only daughter, a 'mistake' born when her mother was around forty. For the women, the war years meant that they had not only to do the caring work, but in the absence of the men they became a temporary labour force. Mrs M had moved into her husband's job:

Mrs M *Anyway, I didn't keep to the contract - I became pregnant eighteen months later, and that meant my mother looking after my son, because I was in hospital for eleven months. So - my mother was in her sixties, and you can imagine with the bombs, because we were near London, what with the fear of looking after the boy, and you know all the conditions that it entailed. So unfortunately, when the war was over, my mother's health deteriorated and I looked after her and - the family, for fifteen years. And all the time, there was my friends, you know getting their families together and getting homes and one thing and the other. I was alright, I was with my mother, wasn't I? But I wanted a home. And anyway - she agreed to - she said go out and find a house, she said, you'll find something that you like, she said, and I'll come and live with you. Well she was bedridden at the time, so anyway I said, you're sure you'll come and live with us? Yes. So right, found a house, four bedroomed house, had it all planned out, and she came. She was with me eleven weeks and decided she wanted to go back home! So she goes back home - she was home a fortnight, and unfortunately she fell and broke her hip, and that's the end. But she lived till she was eighty-two, and in that time she was a power of strength to me. Absolutely.*

Mrs L *Yes, but you were a good daughter to her too, weren't you?*

Mrs M *Well, tried to be. I mean, I had - look at it this way - she looked after my son.*

This story indicated the careers of caring undertaken by both mother and daughter, and the complex blend of love and obligation at work in the relationship between the two women, with the male members of the family present as recipients of care, and conspicuous by their absence from caring responsibilities. Mrs M was inclined to present herself as rather scatty, a woman who "messed things up" and "worried the life out of the solicitor". The stories she told actually showed her as a highly competent individual who had, like many women of her generation, taken over a man's job during the war, maintained a career of her choice while raising a child, and eventually left her house, furniture, friends and family to live in her own home next door to her only close family, her daughter-in-law. Her son now lives in another city, and she is very much on her own when it comes to making decisions material to her wellbeing.

Though these were the only two who had literally given up all other social networks and everything familiar to be near their closest kin, family relationships were of paramount importance to others as well. For example, Mrs K's relationships with her children and grandchildren were close, coloured by her concern for their individual spiritual wellbeing and for generational continuity in terms of her Christian beliefs and values. Mrs K expressed her feelings of love and concern for her eight grandchildren. She was careful, she said, not to say too much in case they got "hoha ... a bit angry" with her. She could not imagine her life without daily contact with her family:

Mrs K *I speak to them every day on the phone. I miss them, I miss them if I don't see them. Without our family, I think life is quite, sort of - quiet. Yeah, I think without family I - I don't know what we can do without our/ without a family.*

Mrs S had more than once moved house to be closer to family members, but her desire to achieve a sense of belonging and real connection with a network of family members had proved elusive. Her story reveals expectations of unstated but powerful normative family structures and relationships (Bittman and Pixley, 1997) and disappointment when these expectations remained unmet :

Mrs S *After ten years sober, I had a yearning to go to Australia, and so did my husband, to go over and be with the family. And I thought it was going to be marvellous. I'd been over on two or three occasions for a holiday, and that was wonderful. But when we decided to go over permanently, it was a whole new ball game. But the thing is, we stuck it out, for four years, eight months in Australia. And then I couldn't wait to come back to New Zealand where I belong.*

Realising that family relationships were not going to meet their expectations, Mrs S and Mrs B had learned to manage without them, and to substitute other social networks for family connections:

Mrs B *It's a feeling of belonging, isn't it? And yet there are some families ...*

Mrs S *Well I don't know, there was just my husband and I. We felt like you did - you know, this wanting to belong, with family. We came to Hastings, to my sister, just for the feeling of belonging. But when you live here, I mean they've got their lives, you know, and my sister is very busy. I'm retired, have more time on my hands, and so - I long for the phone to ring, or - you know, come and visit and all this sort of thing, and I don't get it. But the thing is, I have learnt - that you can't depend on family for the feeling of belonging, because it doesn't work - it doesn't work. I've found my life more involved since I've (been) going to Age Concern for instance. (I) go to my AA meetings, I'm doing things for myself, going to church, I'm doing things for myself, and that's the only way to survive.*

Mrs B *Mm, actually I quite agree with you. I mean when my husband's family left, he was quite upset. When you look at him now, he hasn't got five minutes to himself. He - does Red Cross, Age Concern, and Lions, and he's always being called out. Who was it - oh, one of our members down at Age Concern, a shelf kept falling down, so he went down - he loves helping people. And that's the way he's coping with it. He's got to get on with life.*

Both these women longed for the powerful ideal of a happy extended family/supportive whanau, despite evidence which suggests (Bittman and Pixley, 1997, p. xii) that “the ‘modern family’ cannot fulfil the dream of intimacy even with the best intentions”. Mrs B saw it as a cycle of deprivation in which people from unhappy families are trapped:

Mrs B *Yeah, I think - I think maybe upbringing has a lot to do with it. I've thought a lot about that lately. As from - you know - where it starts, so to speak. Yeah, my own upbringing had a lot to do with what kind of person - the real me is what you see now. When I hear documentaries on TV and watch them and hear of other people having their families right from the word go, their aunts and their uncles, and - Maori people are good for that - they have all their whanau round them haven't they? So these are some things that I think that we miss out on. Yeah, but I mean that does have a lot to do, I think, with the way you are brought up when you are young, but it's whether you can break out of that. Some people are lucky to be able to break out of that, aren't they - have a happy marriage to begin with.*

Relationships with her own children were complicated by early separation and unhappy memories, so Mrs B had decided to lower the expectations by thinking of them as friendships instead. Like many older people, she preferred “intimacy at a distance” (Macdonald and Rich, 1991, p. 60):

Mrs B *I do think that we both feel - and I know I do - that I'm happier living a distance away from my family. Because we've never been close, and they've got their own life, I think it's much more important to be friends than relatives.*

Being busy with other social connections and activities helped to take their minds off the “unhappinesses” which had occurred in her husband's family as well as her own. Sometimes, though, when reminded of the dominance of family relationships in the social world of her contemporaries, being busy did not always entirely compensate for the lack of direct contact:

Mrs B *So therefore the distance is there, and maybe you, you get sort of envious when you hear people say oh, my granddaughter's coming around or my grandson's coming around, or my son's coming to do this, or my son's coming to do that, and you think well, mine aren't. But I think you've really got to - for me anyway - you put it in perspective, and say, be thankful for what I've got. What's that saying - don't look for the moon - you'll never get it.*

Mrs B was acutely aware of the place that family support networks play in the lives of other older people, of the normative expectations around family relationships, and of her own lack of such a network. Nevertheless, against the odds she had finally “broken out of” the destructive patterns established in her own early years to achieve an identity and a sense of wellbeing as a senior citizen. Disconnected from her own family and with several unhappy marriages behind her, she was deeply appreciative of her present happiness:

Mrs B *For the first time in my life I married for love - I didn't know what it was before. And I think that's why it's working! And I think all the way through I've never actually been sober enough or had enough sense to sit down and look at myself to feel what my feelings are. And I know I'm lucky, I know I am lucky, that I've just got this far.*

The experiences of the members of this group in terms of social connectedness, as in other social outcomes, were diverse. An unusual degree of disconnectedness was partly due to the destructive effects of alcoholism on health and on relationships. Some of it too, can be attributed to the divisive effect of certain lifestyle choices, such as “religion”. Both Mr D and Mrs B had children or stepchildren who had become “very religious”, to the extent that the church seemed to dominate their family’s culture and exclude the grandparents. Mrs B felt that religious observance should bring the family together rather than come between them as had happened in her own family, although her nostalgic Cosby-style view of the family (Bittman and Pixley, 1997) was challenged by Mrs S:

Mrs B *And it's like, you know if she gets him under the church, that'll become their family. Now I think that is wrong. I think religion - there is a place for it, but it should be a family thing, like we used to see it on T.V. - or on the movies, everybody trotting off to church and then coming home and Mum gets the dinner ready.*

Mrs S *Oh but that's the - fantasy of it though.*

Mrs B *Well no, it used to be, it used to be for real. It did, but we only see it on television, but I mean the unity of the family's gone.*

Other evident influences on the quality of some of the family relationships represented in this group were geographical distance and the emotional distance created by the grandparents' criticism of disciplinary measures or manners which did not conform to their expectations. Both of these factors effectively separated the generations, and constrained the ability of the grandparents as senior citizens to guide and nurture younger generations of family members.

Material Standards of Living

The desirable social outcome in terms of *The Social Report 2001* is that everyone should have access to an adequate income and should enjoy a standard of living such that they can participate fully in society, with access to economic resources which enable them to exercise choice about how to live their lives and to access opportunities to exercise their senior citizenship.

Although subjective and self-reported, the indicators of the participants' economic standard of living highlight the impact of variables such as age cohort and gender on the cumulative effects of a lifetime's work experience. Mr D, for example, in his mid sixties, considered that he and his wife were "fairly well off". When they started planning for retirement, they had expected to be eligible for full government superannuation at 60, but, he said, "of course they changed the rules in the meantime" by gradually raising the age of eligibility to 65 by 2001. Because of the policy changes, the way "they keep changing the rules on you", Mr D and his wife, like many middle income older couples, had taken steps to protect their savings from the asset-testing regime to which older people who need rest home care fear losing their house:

Mr D *I've got to admit it, because you know, we live comfortably, we have no problems with finance. But there again my parents weren't monied, we never got it from the family, we got it myself, yeah. But one of the things that has concerned us, and you've got to look hard at like that, is to stop the Government getting it. Because if we were to both go in a home, well Government takes all the money for the house and everything. Now, the way we've done it essentially means that while both of us are alive, one can look after the other one. Fine. And if the last one then has to go into a home, the Government only gets half of everything, because the wife leaves all her half to the children, and I leave all my half to the children. But they only get it after both are dead, you see? But that's the sort of thing that the government has put on people to decide, and you know, If we'd known, we could have planned something years ago for this. But they change - keep changing the rules on you. And they just don't listen. They don't want to know. You're elderly - you're a burden.*

Mr D explained in some detail how it was through his work history, including redundancy, and reinvestment of the money that he came to be in such a "fortunate" position. Planning ahead, particularly in terms of paying into a government superannuation scheme, had allowed Mr and Mrs D to invest their money, live off the interest, and still qualify for a Community Services Card (for subsidised health care and prescriptions). By comparison with the other participants, all female, Mr D was indeed well off. The two women who took part in the discussion were entirely dependent on New Zealand Superannuation for their income. The three other women, all widows, were present but made no

contribution to this part of the discussion. Two of them lived in income and asset-tested council flats and the third lived alone in her own home. The conversation indicated marked gender differences in income and standard of living within this group, and consequently what people had been able to save, and the resources they had to live on in retirement.

Mrs M's story highlighted the extra expenses incurred by being old and female, and the way senior citizenship is mediated for many older women, even homeowners like Mrs M, by gender as well as socioeconomic variables:

Mrs M *Well, as far as women on their own are concerned, I have experienced having to get down to the fact that it is necessary for me to have an alarm, a personal alarm, and it was all going ok. I quite misunderstood a certain part of the agreement and went to find somebody else that could advise, and it involved so much money that I just couldn't think about it. There are other things that come first.*

The problem had begun with a fall that left Mrs M lying alone in her garden for two hours. Alerted to the need for an alarm, she had found it impossible to assimilate all the relevant information about each of the many rival products and systems on the market, and make an informed decision. Her mind was "fuddled" with all the information, and one of her greatest needs was for advice in decision-making:

Mrs M *And I mean, it's at that time, you know, when you've got to decide whether to say yes or no, and you've got nobody to say, well what do you think? ... I mean, I know I could get on the phone to my son, up in Auckland, but the point is that nine times out of ten he's on the road, he's busy, and then it's all lost, isn't it? But I've survived so far, I think I'll survive.*

This story provides compelling, and sobering, evidence that *The Social Report 2001*'s key "social outcomes" (Ministry of Social Policy, 2001b, p. 9) are inextricably inter-related. Sadly, whether Mrs M survives or not may quite conceivably depend on her decision not to purchase a personal alarm, even though she acknowledged that it had been identified as a health need and was necessary for her personal safety and security. In the end the decision was based on information she had received that she was not eligible for assistance, and her judgement that she could not afford it without assistance. Difficulty in accessing information and advice, as well as financial assistance, were major factors in restricting Mrs M's ability to exercise her citizenship right to feel safe and secure in her own home. Far from achieving the situation where "New Zealanders have the necessary skills to participate in a knowledge society and to become global citizens" (ibid, p. 28), Mrs M's story bears witness to a society in which an older woman, even a person of evident resourcefulness, can find the resources needed to live safely and independently in her own home are beyond her ability to access.

Knowledge and Skills

Education provides opportunities for participation in society and for full citizenship. This group of people, by their own account, had a minimum of formal education; most had left school around the age of fourteen. The three older women, now in their eighties, had reached employment age at a time when work was not plentiful, and domestic work was their only real skill, though Mrs M had been lucky enough to get a three year hairdressing apprenticeship after leaving school at fourteen. The three younger members of the group, now in their sixties, had also left school early, but had had greater job opportunities, because of the abundance of work available during the economic boom of the 1950s and 1960s.

Paid Work

This section, which includes participants' stories about their work, reflects the way the inequalities experienced over a lifetime accumulate in retirement and affect the opportunities people have to exercise their citizenship in old age.

Mrs K's stories of her own and her husband's working careers reflect the instability of the job market for low-skilled people, even in times of economic prosperity. Now seventy-one, she had left her home on a small Pacific Island at the age of eighteen and come to New Zealand to do unskilled domestic work. After her marriage to a European migrant, Mrs K had stopped work to care for the children, while her husband had worked to provide for the family. When he died she was left a widow with three children under four. Mrs K's working career, and that of her husband, indicate the lack of choice and low status of occupations open to certain population groups, even in the buoyant economic times of the 1950s and 1960s. The cumulative disadvantage of their work careers as unskilled labourers was evident in her situation as a tenant in a means-tested council flat when most of her generational cohort are homeowners.

Mrs L had also been widowed early, and was also a council tenant in old age. Finding suitable work as a young woman with a six year old son had not been easy for her:

Mrs L *I hadn't got a lot of education as far as outside work, only housework, was concerned, and there weren't many places where you could get a job and take your son with you. They wanted you, but they didn't want the child. So I was fortunate enough to go to a place (where) they gave me six weeks training as a wages clerk. And that's what I ended up as, as a wages clerk. I worked for them for fifteen years and I never saw daylight, from the time I went into the factory. I hated for fifteen years, I hated every moment of my life. I loathed it after being used to fresh air.*

Mr D's story of his working career, on the other hand, was one of hard work at a time when work was plentiful and rewarding. At the age of fifteen he had left home to work as a cow hand, as a shepherd, and then as a labourer for a government department, where he had "progressed up through the ranks". Mr D's knowledge and skills had been gained on the job. He described himself as a "Jack of all trades". After a thirty-three year career with the same government department, he had faced redundancy as a result of privatisation. Mr D had been prepared for the redundancy, however, and had planned for it. With his wife he invested the money in a motel, which provided them with a transition between work and retirement, and gave them time to "practice" being retired:

Mr D *But we had practice because we had the motel for five years, where we had to work together. Yeah, that five years served in good stead. Yeah, I can understand how people have problems when they retire, when one has been out at work every day and only comes home at night. Let's face it, a lot of men will just go and sit in front of the T.V. with a glass of beer, and the wife is still left to do the rest of it.*

Mr D's position of relative advantage in old age had resulted from a combination of factors, including a plentiful supply of work during most of his stable working career, access to work-related superannuation as well as New Zealand Superannuation, careful planning, good accountancy advice and investment of his redundancy payment in a good business. Like Mr D, Mrs M had also owned her own business. She had served a three year hairdressing apprenticeship, against her father's wishes, and married a man who was also a hairdresser. Even though it was a job she had actively chosen and enjoyed, as a woman Mrs M had little control over her career. Promoted to fill her husband's position as a manager during his absence during the war, she "messed things up" by becoming pregnant and lost her job. Eventually, however, they bought their own hairdressing business, which they ran for twenty-seven years:

Mrs M *My mother, she lent us some money, and we were able to pay her back in two years, which we thought was a very good effort, because we'd got to live as well. But at the same time, my mother became ill, and it was for us to decide whether to stay in her house or move, and we decided to stay in the house and look after, help look after mother. And that lasted for fifteen years. And I don't regret it, because she looked after my son, my baby.*

This story illustrates the complex relationship between work and the family. Mrs M was able to work as a hairdresser, which matched her training, skills, experience and career aspirations, because her mother was available to care for her son. The older woman was able to stay in her own home, despite her ill health, supported by her family, to whom she in turn provided financial and social support.

The social and emotional benefits of these household arrangements appear mutual, and substantial. They also emphasise the way gender and caring responsibilities impact on employment opportunities. Mrs M's business had evidently provided sufficient income for her to own her own home in retirement, though it was clear that this was her one major asset and that her income level placed some restrictions on her opportunities to exercise her citizenship rights.

Mrs B had worked for government departments and, like Mr D, had experienced redundancy during the insecure 1980s. Though they had only meagre savings, she and her husband had welcomed retirement from work for the freedom it provided to pursue leisure opportunities and make friends. They put their happiness down to a more tolerant attitude in old age, the locality, a "great place to retire", the friendliness of the people, and having more time and opportunity to make meaningful connections with people. Mrs B felt that life was "opening up" for her, and it was not just her faith or her own outlook on life that had improved things for her, but social attitudes as well:

Mrs B *Things are opening up - mind you, the whole of society's opened up for older people. There's so many things you can do. It's not a case of - oh you know, you're over sixty-five and you're ready to sit down and die. It's an outlook on life that you get on with it. There's things for you to do out there.*

Mrs B's account of retirement is consistent with a third age (Laslett, 1989) of unprecedented opportunities for leisure, self-fulfilment and social connectedness. After a shaky start, and some very troubled times, Mrs B, by her own account, had arrived at a place, at the age of sixty-five, of newly acquired confidence and self-esteem, and a strong sense of citizenship.

The women's work histories had been different from Mr D's, with limited or no access to work-related superannuation, periods of dependence arising from their caring responsibilities, and in general a lack of the job skills which would have enabled them to attain the same level of economic independence (Koopman-Boyden and Scott, 1984, p. 207) that enabled Mr D to live in self-proclaimed comfort in retirement. Significantly, it was the three participants who had had the most secure employment, two in New Zealand government departments and one in a skilled profession in which she was eventually self-employed, who owned their own homes, while those who had had unskilled or insecure employment with poor working conditions and few choices, were in low-cost means-tested local authority rental accommodation. As well as the impact of generational cohort

and gender, the implications of the type, conditions and consistency of employment for standards of living in retirement are only too clear.

Culture and Identity

One of the desirable social outcomes of *The Social Report 2001* is that people have the right to pass on cultural traditions and values to future generations. The people in this group raised the issue of intergenerational relations and worried about the future they were bequeathing to their grandchildren. They had done their best to raise their children as “honourable” and “respectable”. Mrs L was proud to describe her son, for example, as “an honourable citizen” but there was some concern about the changing values permeating the society in which their grandchildren were growing up. One example was Mrs K’s concern for her family’s adherence to her own faith and spiritual values. She had been brought up in a strongly Christian environment, and considered it her responsibility to raise her children, and nurture her grandchildren, in the same religious tradition:

Mrs K *Well they have been taught with the Word of God, they went to the Sunday School, to the Rally, Boy's and Girls' Rallies, they've been taught with the Word of God, and profess they love the Lord, but at the present time, they're not walking in the Lord. The things of the world had a grip on their life, but - doesn't matter. One of, two of my grandchildren just came to know the Lord, couple of months ago, and that's a joy to me. So in time, that's why it pay(s) for us to teach our children, you know, to train a child ...*

For some of the people in this group, recognition of spiritual values and the spiritual dimension of their lives had become more important in old age, contributing to a sense of strength and security, wellbeing and social connectedness. Religion had been a part of their lives, either intermittently or constantly, for many since childhood, though it was expressed in a range of very different ways and was more overt for some than others. Mrs L’s faith was a source of security about the future, and a source of strength in hard times:

Mrs L *I mean I did have my hard times, when I lost my husband, it was very hard, but - he was a Christian, so I mean we knew he'd gone to, like to Heaven - because he was only thirty-one. And then you see I'd got my son to look to. But we were happy. We hadn't got any money, but we made our own happiness. ... With the help of the Lord, we managed. I couldn't have done it without - God's help.*

For Mrs B also, her faith had been a source of strength in helping her work through “suffering” to achieve a sense of peace after a great deal of anguish. Mrs K’s security and strength was firmly grounded in her Christian faith, and Mrs S too, professed a strong personal faith in God:

Mrs S *You know, it's funny how God works in your life, to bring me back, you know.*

All the members of this group professed a Christian faith, though not all went to church. Christianity was for them a source of strength and comfort in difficult times and security for the future, as well as a source of inspiration about how life should be lived. It contributed to a sense of identity and belonging, mitigated (in theory) against the inequalities of class and gender, and gave them a sense of autonomy as people who were able to manage their lives with the help of God through prayer. It did appear to enhance their sense of themselves as senior citizens.

Physical Environment

One of the major decisions people make about how they live their lives is where they will live. The range of choices available and people's ability to exercise choice in this aspect of their lives impacts in turn on other aspects of their lives, such as safety and security, physical and mental health and human rights, as well as directly on their enjoyment of their immediate environment. The strong feeling expressed by the group members was that the citizens of Flaxmere were disadvantaged, in terms of council facilities, and private and public goods and services, because of the low socio-economic status of their suburb:

Mrs B *I still think that a lot could be done, 'cause I heard Jeremy Dwyer (Mayor of Hastings at the time) - he spoke at the Lions a couple of weeks ago, and he very glibly said all these things that they've got planned for out this way, but four people that have lived in Flaxmere for many many years wanted to say to him, just like you did, why has it not been done before? ... You know, Havelock North gets thing done ...*

Mrs B *Taradale gets things done, but Flaxmere ...*

Mr D *And it'll never change for the next twenty years.*

Mrs B *I don't see why it shouldn't.*

Mr D *Because Havelock North is where the money is, Hastings is where the money is. There's no money out here. These are the ones that are out of work and that sort of thing, the freezing workers and all that. There's no money out here - we will never get it.*

Mrs L *You see, that's why our banks and Post Office closed and went elsewhere, because we were taking money out but we weren't putting in, you see. Well, it's understandable why we don't have a bank and a Post Office in Flaxmere because there isn't the money flowing freely as there is in other places.*

Mrs B *And when they say that people should shop locally I go along with that, but the percentage of people out here are on low incomes, the pensioners, and they can't afford those high prices that sometimes are charged over here. I know that he has to make a profit.*

They talked at length about the dilemma posed by the higher prices at their local supermarket, and whether to support the local retailers and pay higher prices, or to make the trip into town and pay less for their groceries. Part of the problem, they agreed, was the greed of absentee landlords in the village shopping centre. They had strong feelings about the lack of services, and the lack of a police presence in the village, resulting in a feeling that Flaxmere had been abandoned:

Mrs B *The other day on Friday I was driving up here, and the - I would call them young men on skateboards going across the road in front of the cars, and I thought, where's the police? We haven't got any, you see. We haven't got a community constable any more, have we? So there's nothing to police the streets and say to these guys, come on, there's pensioners out here, and where do you get that kind of help? That's something I really feel they should be doing something about.*

Mrs S *Well, getting away from the police, you know, taking the police away, it looks to me as if they've just sort of given up the ghost in Flaxmere.*

Mrs B *Yeah, well that's right, because there's nobody here, any more, to say, enough's enough, we respect our neighbourhood and we want you to respect it.*

Mrs S *Yeah, so, you know, you're sort of a voice in the wilderness, if you haven't got that.*

Mrs B *I don't feel that we should be. Why should we sort of sit down and take it all? We live here. We chose to live here, and we all, nearly everybody wants to make it a nice place to live in, to the best of our ability.*

Because the members of this group had on the whole fewer choices about where they lived, their physical and mental health assumed critical importance, not just as an end in itself but as a key indicator of their ability to live independently, a goal that was clearly shared by everyone. Dependence, as opposed to independence, was not defined by chronological age, but by physical and mental frailty. This was a delicate area of discussion for those members of the group who had reached their mid-eighties, lived on their own, and recognised that they needed an increasing amount of support to continue living independently. Mr D put the case for "going into a home" as a straightforward decision made on the grounds of safety. Others in the group saw the problem as more complex and much more personal. The highly-charged conversation that ensued reflected the age and gender differences (and the power imbalance) between Mr D, in his sixties, and the two older women in their eighties. Mr D spoke of his neighbours:

- Mr D** *And they need looking after. Really I personally think they shouldn't be in the house by themselves. I think they should be in a home, or something like that, they're that bad! They've got a house alarm, which they keep triggering off! But they've got no personal alarms, so you know we just keep knocking on the door and telephoning them ... and you know, that's what neighbours are for, I think.*
- Mrs M** *That's right.*
- Mr D** *But, you know, we all, I think, try and think perhaps we're a little bit younger than what we actually are. And we, most of us try to do too much.*
- Mrs M** *Good job we do!*
- Mrs L** *You're right!*
- Mr D** *Yeah, I feel that people have got to recognise what they can do and what they can't do, sensibly. ... But of course when you get old and dodderly, we sometimes lose that!*
- Mrs L** *You wait till you get old and dodderly!*
- Mr D** *Yeah, I know.*
- Mrs L** *I'll tell you about it then!*
- Mr D** *No, but you know what I mean? But, when you get old and dodderly I think it's almost time to look to go into a home. Isn't that the safest way out?*
- Mrs M** *Oh dear! Goodness me!*

Probably the single most important factor that stood between at least two, probably three of the participants and the need to “go into a home” was the support received through “home help”. For Mrs M, whose support hours had been halved, this threat was quite explicit:

- Mrs M** *An hour and a half on Monday and an hour on Friday, that's the lot, and then of course the alternative is - “Have you thought of going into a home?”*

This alternative had also been offered as an option by her daughter-in-law, who suggested, moreover, that she “go out and enjoy herself” with the proceeds from the sale of her house. Mrs M's indignant retort reflects the importance she attached to living in her own home “doing her own thing”, her dependence on adequate home support to be able to do so, and the gap between the perspectives of the older person herself and the younger woman:

- Mrs M** *I mean, I said, Enjoy myself! I'm having a great time! I said, I thoroughly enjoy living in my own home, and doing my own thing!*

Mrs M's exclamations convey her indignation at the suggestion she should give up her home along with all that that implies: a loss of identity, a loss of personal possessions, a loss of autonomy and control over her environment, time, diet, social activities and networks, a loss of status, in short a loss of citizenship. The group deliberated for some time about the merits of shifting to a smaller place, which Mrs M had considered and rejected as too costly. Whether the home is owned or rented is immaterial to the point Mrs M and Mrs L were making, about being in control of their own environment:

Mrs L *Nobody (can) come and say, Oh! ... It's my home and I please myself what I do in my home. They don't pay my rent.*

'Going into a home' was generally felt to be absolutely the last resort. Some were more philosophical than others about the prospect, though those who hoped most fervently never to have to were undoubtedly those for whom the threat was most imminent. There are few housing options for elderly Flaxmere residents in general, and none for those who are no longer able to live independently. The resulting lack of choice significantly restricts the opportunities they have to exercise agency and autonomy and to feel in control of their lives. Where people live is also an important factor in determining the extent to which they are able to remain connected to their family and neighbourhood networks, which in turn affects their mental and physical health and their sense of themselves as citizens.

Everyone in the group agreed that Flaxmere was a very friendly place, and they all enjoyed living there. There was both appreciation of the community facilities that are provided, and criticism of local government attitudes and (lack of) actions. The group spent a great deal of time discussing amongst themselves various clubs, facilities and people, especially the owners of local businesses who were felt to be committed to the community in the way that they operated, giving to local organisations and trying to keep their costs down to cater for local people. The group came up with a plan to find a way of enlisting the support of local businesses to provide hanging baskets of flowers to beautify the village. Local problems and possible solutions were avidly discussed by the participants, who seemed to relish the opportunity to talk about what was important to them in their own immediate environment, and to celebrate the things they valued in their community. Mrs S's comments reflect the significant impact of the village environment on the citizenship opportunities of people whose everyday choices are so limited:

Mrs S *I do really, I think it's good. I only know really the village, because I haven't ventured much further. Having no transport, I mean I go to town on the bus and all that sort of thing, but I've never, you know, gone too far. But what I've seen - since I've been here, I just love it.*

Summary

There was a sense that this research project gave the participants an opportunity to build and enjoy constructive relationships with others in their community, an opportunity to participate and to share a sense of belonging. I learned in passing that a bus trip organised by Age Concern had been moved to another day to accommodate the participants who were involved in the research. They said they would not be available for the trip because of the research meeting. Although the research was something different from what anyone in the group had been involved in before, and they had clearly not known what to expect, written feedback confirmed that the opportunity to get together and discuss the things that interested them was valued, and would be missed. While some participants had had misgivings about the research process, the consensus was that it had been interesting and informative, that people had got to know each other through hearing some of the details of each other's lives, and that there was value and strength to be gained from talking about the legacy of the past. These conversations highlighted the resilience and resourcefulness of this group of older people. They also confirmed the vulnerability of women who live alone and whose income consists solely of New Zealand Superannuation. The generally poorer health outcomes of this group are consistent with the kind of socioeconomic inequalities that have a cumulative health impact over time, and are coupled in older age with the effects of lifetime deprivation and disease (Dyson, 2001a).

The cumulative effects of socioeconomic deprivation with its attendant consequences for health and housing were factors in the kind of old age these people were experiencing, with consequences for their ability to exercise their citizenship rights and responsibilities. Perhaps the words which convey the contradictions and complexities of old age as experienced by this group the most succinctly are those of Mrs L:

Mrs L *Grey hairs are honourable, but old age is abominable.*

Mrs B's words convey the respect for each other as individuals that the participants had gained through hearing each others' stories and suggest that the research process can provide opportunities for personal empowerment as well as social connectedness and community building for the participants:

Mrs B

I have been pleasantly surprised that some of us have spoken about our life and I think we've learnt, a great cross-section of how we lived when we were younger. ... It's a case of getting to know each other a bit better isn't it? And the strength, I think, that, you know, it's good to talk about your past life, because you gain, you think back, boy am I strong now! If I was faced with any of those things now I know that I would surmount them. And I think that comes with, as you say, wisdom, because you've lived it, and I think too, we're more patient to listen to one another, and be interested in what one another has said about their past life. ... Yeah, you no longer look at someone and think, gosh they're a bit of a bore, because you know what went on in their life and you understand.

Chapter Nine:

Greenvale Rest Home

Introduction

The rest home within the retirement complex which I shall call Greenvale is situated in a residential area within the city boundary of Hastings, but near orchards on the outskirts, so that the outlook is semi-rural and the property is planted with mature trees and well-tended gardens. The complex includes a group of high quality self-contained villas; a community hall complex with library, swimming pool, communal kitchen and dining room; a large, modern building which houses the rest home, where residents have their own room and meals are eaten communally; and a hospital with a dementia wing. Geographical location, a strong theme in both the Havelock North and Flaxmere groups, was less important for these participants. They had not generally chosen their current living situation so much as had it chosen for them, indicating that they were increasingly less able to manage alone and were nearing a fourth age of dependence. Variables such as education, class and even gender, were less critical in terms of senior citizenship than the health status of these participants and the fact that their frailty was generally what had precipitated them from their homes and into a precarious transitional stage between the third and fourth ages.

When I came to meet the participants it was the Diversional Therapist whom I will call Jenny, who had gathered the group together in a central position in the lounge, which was also occupied by a number of other residents. It was explained to me that some members of the group were quite deaf, so I would have to speak loudly to make myself heard. It did prove very difficult to make myself understood by everybody, and on the whole I felt I was able to convey only a very broad and partial explanation of what the research was about. I found my research project much more difficult to explain to a whole group of older people than I had when I had visited prospective participants of earlier groups individually in their homes and explained it in a personal conversation. In those situations I felt the power

was much more evenly distributed between researcher and participants, because of my attitude, which was respectful of their age and seniority, and because of the one-to-one, face-to-face situation in which they had both the opportunity and the power to interrogate me about my reasons for doing the research and what I wanted. The rest home situation was quite different.

Explaining, as Walmsley (1993) has argued, is a central and important part of the research process, and can be “a crucial determinant of what we discover” (ibid, p. 46). In retrospect, I think that what I discovered during conversations with this group was very much constrained by how, how fully and how well I had explained my purpose in doing the research. The process of explaining is, as Walmsley argues, interactive. It involves an initial explanation followed by feedback in response, and then more explanations, adjusted in response to the feedback. This process continues until feedback suggests that an understanding has been established. In the rest home setting, this process was inhibited by the public nature of my attempts at explaining, the lack of personal interaction and the difficulty of knowing from the feedback (which was mostly requesting repetition of what I had just said) exactly what had been conveyed. At the time I did the best I could and left the consent forms to be signed by the participants. I hoped that the Diversional Therapist, who seemed to understand what I was trying to do, would be able to provide further explanation later if it was needed. In fact she helped the participants fill out their consent forms, and they were all signed and ready for me, with the participants seated at a large table in a reasonably sized private room, when I arrived to begin the first session.

Three members of this group were over ninety, three were over eighty, and one was in the sixty-five to seventy age group. Three of the group of six women and one man had been born in the Hawke’s Bay area, three in other parts of New Zealand, and one in England. Three were the only children of their parents, three were the eldest, and one was the second of twins, her twin brother now deceased. Six of the seven had had primary level education only, with Proficiency as their highest qualification, and one had had secondary school education, at a private

Hawke's Bay boarding school for girls. All the participants had had paid work, except one woman. Five of the participants described their health as good (one very good), and two said their health was average. Five described their faith in God and/or the church as important to them, one cited the 'Golden Rule' of doing to others as you would have done to you, and one put simply 'family' as an important value or belief. Three of the participants were widowed, one was married and one divorced, and two had never married, though one had been going to marry "a very nice young man" when he returned from the Second World War, but he was killed in Crete. Three of these participants had no children, while four had at least one child and several grandchildren.

In their responses after the meetings finished three members of this group said they had not told their stories before, one had answered questions from a group of schoolgirls, one had told her stories to family members, and one had told some of them to friends. All said they had enjoyed being part of the research group, listening to other people's stories and relating their own, and one mentioned particularly enjoying "the way it was set up, e.g. starting from schooldays and up to the present".

Introducing the Participants

Although the rest home, and the retirement complex within which it was situated, was within the Hastings city boundary, it could really have been anywhere. Mr C occasionally went for walks outside the property, but I had the impression that he was the only one who did so, and that most outings were scheduled as special trips. The residents did not have to find their way in the local community in order to shop, for example. Their needs were all taken care of within the confines of the rest home. So it was the fact of living in a rest home which provided a defining framework for the stories of this group of middle-class Pakeha elderly people, all former home-owners and all but one of them women. The powerful implications for their status and opportunities as citizens of this intersection between the social construction of old age and the biological needs of ageing bodies provide a focus for the analysis. One of the most obvious consequences of living in a rest home

for these people was the loss of their own home, as autonomous householders and, especially in New Zealand, a country where home ownership is considered almost a right and a key element of citizenship, as home owners.

Memories of early childhood and schooldays seemed particularly vivid and important for this group, and in practice what eventuated was more like a reminiscence group than a research focus group. In this group the process took over from the purpose and became an end in itself (Brechin, 1993). The process of introducing the participants and investigating “the significance of the past for present individual and collective experience” (Bornat, 1993, p. 84) extended into all six sessions, fulfilling the requirements for oral history and/or reminiscence, but leaving little opportunity for an exploration of current issues and the process of analysis for action which was an integral part of the research methodology.

In retrospect, I think the reasons for this unexpected outcome are complex, but there are several factors which contributed to it. One is the difficulty I had explaining the research process, a problem I have already discussed. Another is the fact that the group was set up initially and organised each week by the diversional therapist, who was present at all the meetings, whereas I was solely responsible for every aspect of what happened in every other group. I could not have managed without her help (cf. Brechin, 1993), and I appreciated her commitment to the group, and to my research agenda. However, my hunch is that this setup may have conveyed the impression that I was some kind of visiting speaker or helping professional coming in to deliver a ‘course’ of some kind. One session followed immediately on the heels of a session in which the participants had been making Christmas decorations, and I remember wondering then what they made of me and my tape recorder. As rest home residents they were well used to unsolicited professional intervention, and invasions of their privacy, and they were compliant and polite in response. This is not to say they were reluctant participants, or that they did not enjoy our sessions together: I believe they did, and feedback from the diversional therapist confirmed that they had enjoyed the ‘course’ and looked forward to getting back together when I returned to report back to them on my findings.

The dilemma for me was that while my research focus was on exploring the past in order to understand present issues, and to envisage possibilities for shaping a future, the participants in this group were more interested in reminiscing. Perhaps, as Coleman (1994) suggests, in response to the challenges arising from their present circumstances they were attempting to maintain a sense of self “amidst life circumstances which have changed out of all recognition” (ibid, p. 8). My desire for them to move on from reminiscence to naming and analysis of current issues therefore conflicted with their role in controlling the agenda (Bornat, 1993), which was after all an important part, though not the whole point of the research process (Brechtin, 1993). As I have thought about this in retrospect, I have come to understand it less as a matter of misunderstanding on the participants’ part or miscommunication on my part, as a matter of “resistance and will”, a perspective which, as Bornat (1993, pp 93 - 94) describes it:

allows for the idea that older people may have a controlling role in the interview. Seen this way empowerment becomes less a question of freeing up the victims, the dispossessed, and more an issue of accepting that deliberate choices and decisions on the part of the interviewee may be shaping the content and direction of the interview. ... Though I still see the interview as a power relationship, I think I can see different expressions of power and purpose on both sides. I think I am now more prepared for the grit and determination which the other person is mediating and less inclined to think only in terms of disempowered victims.

This perspective allows for an interpretation of what the participants were doing as important as well as enjoyable. Coleman (1994, p. 15) argues that “the need to teach and inform by means of one’s life experience is still neglected”. Certainly there is little opportunity in today’s society for older people to contribute a knowledge of the past, and little value placed on the kind of knowledge they have to contribute. Active participation in the present and generative contributions to the future are highly valued in senior citizens of the third age. Models of citizenship which emphasise active participation, however, generally ignore or undervalue the traditional role of the aged in passing on the stories and knowledge of the past. The research offered an opportunity to rehearse participants’ stories and in Myerhoff’s (1978, p. 271) sense, to tell a tale that:

certifies the fact of being and gives sense at the same time. Perhaps these are the same, because people everywhere have always needed to narrate their lives and worlds, as surely as they have needed food, love, sex and safety.

At the beginning of the third session one person arrived with a notebook full of handwritten notes which she used as a prompt for her stories. She gave the impression of wanting to set the record straight, not wanting to forget anything important. Perhaps she knew what Barbara Myerhoff (1978, p. 240) had learned from her grandmother, that:

(s)stories told to oneself or others could transform the world. Waiting for others to tell their stories, even helping them do so, meant no-one could be regarded as completely dull, no place people lived in was without some hope of redemption, achieved by paying attention.

All of the participants in this group paid close and courteous attention to each other's stories. There were few interruptions and no questions from other members of the group (except to ask for something to be repeated) so people provided their own links, such as "time passed", or "time went by" and continued with their stories, interrupted only by me making sure that everyone would have time, or by the diversional therapist occasionally prompting or repeating something for someone who had not heard. In this way it was more a narrative performance than a conversation, and I was more of a witness than a facilitator or a moderator, as in the other groups.

Naming the Issues

While the participants in this group did not discuss present issues as much as other groups did, their present opportunities for exercising their citizenship being very much constrained by their virtual confinement within the physical boundaries of the rest home, their stories of earlier times did convey the courage, determination and skills they had brought to bear on their individual circumstances. These circumstances, and what each person made of them, are discussed using the key social outcome domains of the framework developed in *The Social Report 2001*. The first of these is physical and mental health, an area of critical importance to this group.

Physical and Mental Health

In Mr C's story there were many allusions to his "nervous problems" and his intermittent dependence on both formal and informal support structures. These recurring nervous problems, which he attributed to the strains of marriage and coping with a "disturbed" wife, had had him admitted to a psychiatric hospital for six or eight weeks at a time. After his wife's death he continued to live on his own in the two-bedroom unit they had bought, visiting his children regularly for a week at a time. Eventually though, his nerves got the better of him and in a suicidal

state he had contacted his eldest son. He was invited to stay, and had an accident while driving there which spelled the end of his driving days. It was the doctor who had asked him where he was going to live:

Mr C *I said, I haven't made up my mind. Well, he said, I don't want you to go into a home. You just sit around and stagnate and you die prematurely. ... And so the eldest boy and his wife said, Right Dad, you can come and live with us for the rest of your days.*

Mr C's story presents his choices, defined by the doctor as limited to family care, presented implicitly as the only secure alternative one, and rest home care, considered highly undesirable. Although Mr C had taken up the invitation to live with his son's family, the son, who was unemployed at the time, had died suddenly and unexpectedly at the age of fifty-three. Although Mr C had contributed substantially to the cost of the house in which he had had his own room, he had subsequently, as he explained in miserable detail, been "dumped" in the rest home. He still had not got his money out of the house three years later, and as a result, he was in debt to two of his children for his board in the rest home. Though he said "I'm not complaining, I'm just stating the fact" his situation undermined his dignity and integrity and denied him a sense of himself as a citizen. To be financially dependent on his children after a life of autonomy and financial independence upset his principles and injured his feelings, as well as diminishing his citizenship status:

Mr C *I've run my life for eighty-one years, owe no man anything, and when you find you can't pay your board, well - I've still got some feelings.*

It was impossible not to feel touched by the pathos of Mr C's situation. Constituting a denial of citizenship rights along with an inevitable loss of seniority, independence and self-esteem, being "put into a home" is the stuff of birthday card and bumper-sticker jokes and nightmares in our (Pakeha) culture. Yet there is another untold story about the realities, and the impossible demands, of family care. It is the story of Mr C's daughter-in-law, the middle-aged widow who had suddenly found herself faced with the demands of a job and sole responsibility for her teenage children and her frail elderly father-in-law. The fact is that there is scant support available for family care, care in the community quickly becomes inadequate when a person is physically or mentally frail, and the only alternative for most people is the one chosen in this case for Mr C, which must have seemed like a death sentence given the doctor's gloomy prediction.

For Mrs O the key factor in her move to the rest home had been her physical frailty. The move from living in her own home in the community to living in the rest home had been effected in two stages. She and her husband, in a planned move, had sold their flat in town four years before and moved into a unit in the retirement complex. When she became ill and had to go into hospital, the decision had been made that she would live in the rest home in the same complex so that her husband could visit her every day, "which he did and I've never regretted it" she said. However, it had been a difficult transition:

Mrs O *... because we hadn't been away from each other. I went back into hospital, and they got me walking again, and he decided that I couldn't come out at all, so ... but the staff and everything, they've been very good.*

Although Mrs O, like Mr C, expressed no dissatisfaction with her current living arrangements, it does seem that in her case as well, the decision was not hers to make. Underlying a determination to make the best of her situation was a sadness, born, one imagines, of not being able, or allowed, to realise her hope of going home, even though "they" had got her walking again. Mrs O's statements are powerfully expressive of the loss of autonomy and citizen status, and the powerlessness that had accompanied her illness and consequent frailty and dependence. Again, the implication is that family care, in her case by her beloved husband (who had since died) was not a viable alternative, leaving institutionalisation as the only option.

Miss M's move to the rest home, though sudden and unplanned, seemed on the face of it to be relatively straightforward. Although she had been coping fine with her housework and cooking her own meals, it was a fall which precipitated her move to the rest home. Because she lived on her own in her own home, and had no family to take care of her, she felt she had no choice but to go into a rest home. She told how she had fallen in her flat, lying on the floor all night until the neighbours noticed that she was not about in the morning and called the doctor:

Miss M *So he came along and I said to him, what are you doing here? What did the neighbours get you for? Oh they were worried, they thought you might have had a stroke or something, so I've come to see if I can get you up. Anyway, he got me up, and then he said, you know, you've been talking about going into (a rest home), haven't you? And I said, yes I have, so we rang up, and they said there's a one bedroom room there, just with one bed in it, and she's got a week to make up her mind. And I said, well go back and tell them, I've got no-one to look after me, so I don't have to make up my mind, I'll go. And that's how I landed up here.*

The last sentence of this story conveys the speaker's powerlessness and lack of agency, and her inability to exercise her citizenship. She had not chosen to move. It had simply happened to her. She didn't have to make up her mind, she said, because there was no-one to take care of her. Her family had migrated from England, and her last relative had died:

Miss M *So then I was really on my own. And a friend of mine said, why did you go into (the rest home)? Why didn't you come and stay with us? But I said, you go up to your nephews and nieces. What would I do? And they lived up in Havelock on the hill, and they said, well you could stay there, we'd trust you. I said, yes, but how am I going to get any groceries or ... because the neighbours are not close together where they live, so I said, no I wouldn't think of that idea.*

The implication is that having no family means no alternative but institutional care. Perhaps not wanting to impose on her friends, and having no relations to help with her decision to move to the rest home or to make arrangements for her, Miss M was in the vulnerable position of having to rely heavily on the doctor and the solicitor for (professional) advice. It was her solicitor, for example, who had advised her and helped her sell her house and who managed her money:

Miss M *He's acting for me, he's got Power of Attorney to do what he thinks is best. And he said, well I think you better get rid of it and invest the money, and you can have a bit to come and go on, and perhaps buy a new dress or something.*

Miss M was confined to her "one-bedroom room there, with just one bed in it", like Mrs O, who "couldn't come out at all". In a society where home ownership is the norm, and being a householder denotes autonomy and citizenship status, such contracted living space indicates a significant loss of citizenship status. Mrs E too, seemed to have no viable choice other than confinement to the rest home. Physically and mentally robust, she was extremely capable. However, she was also blind, and seemed to have internalised the link between age and disability:

Mrs E *It's my eyes that's got me. I never felt old until they went.*

In addition her husband had been suffering from Alzheimer's disease for five years before they came to live in the rest home. The problem had been difficult to define, but had become progressively more difficult for Mrs E to manage. Beginning with verbal abuse and memory loss, it had progressed to physical abuse, dangerous driving, a personality change and behaviour so bizarre that Mrs E feared for her life. It was only when the couple's daughter witnessed the

physical abuse that she agreed that something needed to be done. Although Mrs E had ostensibly been free to make her own decision, like Miss M she had felt she had no real choice. She had told her son:

Mrs E *I don't want to go into a home, but I said I can't see very much, and I can't put up with any more of Dad, and he said, well, it's not up to us, it's up to you. So (my daughter) came down again and she said, Mum what do you want to do, she said, it's your decision. I said, there's nothing else I can do, but go into a home.*

Although the rest home had afforded Mrs E some protection from outright abuse, she was still subject to her husband's violent outbursts and persistent demands:

Mrs E *Yeah, when we came first, (staff member) caught him a couple of times. He used to want to go outside for walks. And we'd go outside for a walk and he'd argue that it was the other way to come back, and it was just an excuse to give me a few punches and that, and she caught him a couple of times. And she came out and got him. And M caught him one day and she came and took him in. But he's been quite good for a few weeks up until about three days ago. But he drives you mad sometimes asking questions, because their mind goes back and they can't think of anything in the present. And he just eats lollies and biscuits. He'll sit by the hour and eat lollies and biscuits. I've got to keep his tins full to keep him happy all the time.*

Despite her own disability, and despite being in a rest home, Mrs E had clearly not given up her caring role, or her sense of responsibility for keeping her husband happy. Part of the meaning of being in a rest home for her evidently consisted in obtaining protection and support to continue caring for her husband, whose increasingly difficult and violent behaviour due to his Alzheimer's disease had precipitated the move. For her it was also a way of staying together after a long and happy marriage.

Mrs J had been married, but she had no children and no immediate family. She was also very deaf, despite having had a range of hearing aids, the latest of which had been recently modified. Well educated and articulate, she was keen to take the opportunity to share her own experience of deafness, chiefly in order to educate others. In general she was philosophical about the limitations imposed by her disability, which she saw as part of the downhill slope of ageing. Perhaps her expression of satisfaction with her situation was linked with her expectations:

Mrs J *And you get some funny looks and you know you've done the wrong thing, but - can't do anything about it. So that's it. ... Some (people) are much worse, and some perhaps haven't any problems, but of course as I'm getting older I can't expect to be going up the scale! ... But anyway I'm quite happy as things are now.*

Although the doctor was involved in Mrs V's move to the rest home, her health did not seem to have been a decisive factor in the decision. She herself said she felt she had been doing alright on her own in her own home. Her account indicated that she had had little control over her move to the rest home:

Mrs V *It was between the doctor and my daughter, I think, that they got me in here.*

When I asked her why that was, she said:

Mrs V *Well I don't know, because he just said, evidently that I had to go into a home. I don't know why. I reckon I could have remained out of it, for the time I've been here, and what I've done here.*

Though the reasons for her entry to a rest home were not clear, Mrs V had evidently been able to exercise some autonomy and agency in at least choosing which rest home she would accept. She had been taken around to see some, she said, and had made her decision on the grounds that both the building and the owner were familiar to her:

Mrs V *And then I decided on this one. We, they came, brought me here, and I said that'll do. This would do.*

What she had done in the eight years she had been in the home were household activities of the kind, she intimated, she could have been doing in her own home:

Mrs V *I haven't been sitting round doing nothing. I've been helping them here and there, out in the laundry, in the kitchen. I went down there one day and the girl was trying to dry the dishes. The machine had broken down so she had to wash everything. This was dinner meal at the time - to wash it all by hand and dry it. And I said, would you like a hand, like help? She said, yes I would. That started me in the kitchen, in the dishes. So I used to go out and wash the dishes, pack them up ready to go in to the machine, pack them on the trays, ready to go into the machine. But I didn't put them in and I didn't take them out. I left that as far as putting them in and taking them out to her, because I knew it was safe in her hands. And I was out in the laundry quite a lot, too, folding clothes, folding up, lot of the small stuff, towels, face towels and cloths and that. That was a big help to her, she said. I did a lot of that.*

Mrs V expressed her resistance to being a rest home resident, which did not fit with her sense of her own interests and capacities. Through her ability to help the staff, however, she had managed to regain some control over her life. Leaving some of the tasks to a staff member "because I knew it was safe in her hands", conveyed a sense of the authority and seniority she assumed in the kitchen, a familiar workplace for her as a result of her years of experience in a catering

business. Her story suggested that she had managed to exercise some of her citizenship rights and responsibilities through her determination to build constructive relationships with the staff, to participate in the life of the rest home, albeit as a worker rather than as a resident, and to achieve a sense of belonging and make a positive contribution by helping with household tasks.

Discussions of health were focused on previous health needs and the crisis that had forced admission to the rest home, or on ongoing disabilities, reflecting the fact that health care needs were part of the total package of rest home care.

Safety and Security

For the same reason, there seemed to be few issues with safety and security because the management would be expected to take responsibility for residents' safety and security as part of the package of care. I did feel concerned, however, about E's continuing physical vulnerability to the violence resulting from her husband's dementia, even in the rest home, and also about Miss M's financial vulnerability, with her lawyer having Power of Attorney and therefore total control over her money.

Community and Family Ties

Ties with both family and community tended to be quite fragile in many cases for members of this group. This was especially so for the two who had never married and the woman who had no children, by contrast with the others who spoke of visits and cards from children and grandchildren. Miss M spoke, for example, of the loneliness of her situation, a loneliness which seemed always to have been with her. Her experience, and her mother's experience, of loneliness may be due in part to their experience as migrants, where any possibility of a supportive network of family is left behind in the home country. However bad luck also seems to have played a part in Miss M's past and present loneliness:

Miss M *I was born in England, in 1911, and my mother and father had an offer to come out to New Zealand, and look after an elderly aunt of theirs, and we came out, and it took six weeks on the ship, because that was before there were plane journeys. And it was very hard on my mother because she was left with knowing nobody. And I didn't know that, you know, the family had broken up like that ... You notice it now when you're the only one that's left in the family. There's no one close to talk to, if you know what I mean, like you might have a sister or a brother, but I haven't got those. I would have had but I gave my mother the measles. I was so lonely when I was a child, I used to stand at the gate and watch the*

children going to school. So the day I was five I was at the gate waiting for her to take me over to school, and of course she took me over to school, and I got measles. I got the measles, and they sent me home. And of course I went home and my mother was expecting twin boys and she got the measles and lost the boys. So I might not have been on my own if I hadn't got the measles.

Miss M's story suggests a perception of the family as all-important, and irreplaceable: it was as if her only chance not to be lonely had disappeared when she was five years old and got the measles. Mrs J was in a similar situation after her husband's death, with no immediate family, and no extended family members living in New Zealand. However, this gave her the impetus to create a social life for herself, and she had begun to join community groups:

Mrs J *I was on my own for twenty years. Actually my husband didn't know anything about my hearing problems - that all came on later, and so I had to live with that on my own. Yes. And - I joined the Senior Citizens, and took up bowling, which became my passion, put it that way, and oh well, just sort of - got older.*

Mrs J had been to classes with the Hearing Association, and had learnt to lip-read. As well as education, the classes had provided an occasion for socialising and networking with other people with hearing loss. She mentioned how helpful the tutor had been, but again bad luck seems to have played a part in Mrs J's social isolation:

Mrs J *Unfortunately she died suddenly and it was a horrible shock to us all. And I had been going there for quite a few years and picking a friend up and taking her as well, to keep us in with things. And after that I didn't go on. My friend was put out into (a rest home), and I sort of felt out on a limb, but - so I didn't go back.*

In this story it was not so much the deafness alone that was isolating for Mrs J, as the disabling social environment which had resulted from a combination of factors, including the death of a familiar tutor and her friend "being put out into" a rest home. This story indicates how tenuous are some of the relationships and activities which keep people connected and "in with things". Her friend being "put out into a rest home" had resulted in Mrs J also missing out on opportunities for social connectedness. The kinds of things that ordinary citizens expect to be able to do seem often to be out of reach for people once they enter a rest home.

Miss N's work in the family business, a neighbourhood dairy (corner shop), had been an effective means of securing her a place as a local "identity" and a sense of belonging, as well as an income. On her retirement from the shop, her twenty

years of voluntary work with elderly people had taken the place of her business as a source of self-esteem, identity, and a sense of belonging. Her sense of citizenship was derived from her contribution to the community and her validation by the community as a senior citizen. Her generous and generative attitudes and actions, from her own and others' reports, indicated a strong sense of responsibility to others and to community-building. Several of Miss N's stories about the Depression of the 1930s and the 1931 earthquake contrasted the past, when she felt people were kinder to each other, with the present, when people no longer knew their neighbours. I gathered (not from her own account, but from newspaper clippings I saw in her room and from other participants) that she herself had demonstrated a capacity for care through her generous dealings in hard times with her customers, the children and families in her neighbourhood. Her stories were validating of the past and the values she saw as belonging to the past, like neighbourliness and kindness, and she contrasted her present situation in the rest home with the way she had looked after her own parents at home:

Miss N *I looked after Mother and Dad, didn't put them in a home or anything. And my doctor said to me, when Mother passed away, he said, have you had enough now? I said don't talk like that about my Mum! Anyway, when she couldn't work, she just gave in. She had wonderful health really. ... Mm, hard times, I often think about them, those times, but how happy people were, very happy ... hard to find it now, isn't it, especially with your neighbours. See, they've all got to go to work now, you know, it's that time, when people all have to go to work, it seems.*

It was family connections that had brought Mrs O and her husband to Hastings. They had moved to be near their son, their only child. It was he who had arranged the move into the retirement complex for his elderly parents because, Mrs O said, "we thought it was time to make the decision". She had no regrets, and was quite happy in the rest home, where the staff were "wonderful". At the time of the research group meetings her husband had just died, which meant that her connections to the community outside the rest home would probably be largely limited to visits from her son and his family.

For the rest home residents, especially those without close family connections nearby, "outings" were important events. These excursions were organised by Jenny, the diversional therapist, who looked after them very well, they said. She was, one resident said appreciatively, "like the Mum of Greenvale". I saw no evidence of resistance to residents being "taken out" like children and given treats, or to other practices in which it seemed to me there was a danger that treating old people like children would diminish their respect for themselves and each other and in the process diminish their sense of themselves as senior citizens worthy of

respect. However, participation is also a key element of citizenship. Taking up opportunities for participating in the life of one's community can provide important opportunities for exercising one's citizenship. For Miss M, who was used to being on her own and enjoyed the company in the rest home, the choice was simple: take advantage of the opportunities for participation, or "sit there like a stuffed monkey":

Miss M *As long as you talk to them they'll talk to you, but if you're going to sit there like a stuffed monkey and say nothing, they won't talk, and you've got to make conversation I think. ... So I expect I'll be here for the rest of my life. ... I've sold my flat and sold my home, so there's nowhere else for me to go. So I've just got to stay here and be happy.*

Similarly, the opportunities to take part in Kiwisport (age-specific physical fitness and sporting programme) was a highlight for Mrs O, who, according to the diversional therapist, joined in "everything".

Material Standards of Living

In a sense the participants in this group shared a similar, if not identical, standard of living. For example, they shared the same physical environment, they ate the same food, and they engaged (or not) in the same range of social activities. In addition, they were all former home owners and all Pakeha. The restrictions on their mobility and social participation were similar. Visible indications of their socioeconomic status were restricted to the furnishings of their individual rooms, of which I only saw two, and personal grooming and clothing. There were some discernible differences in terms of style and quality, and it seemed to me that the quality of the pleasant and tasteful furnishings of the rest home may have been an improvement over those in their own homes for some of the participants, though not for others. In this sense, while old age itself is not a "leveller", perhaps going to live in a rest home does involve a levelling down in terms of autonomy, and standard of living. Only one of the participants in this group had had any schooling past primary level, and most had left school aged twelve to fourteen.

Knowledge and Skills

While the right to have been educated is, as T. H. Marshall (1950) argued, a critical right of citizenship, access to the knowledge and skills that provide the opportunity to participate fully in society, and particularly in paid work, was limited for the participants in this group. Mrs J, born in 1908 into a farming family, was the one person in this group who had had a secondary school education. For her family, education seems to have been a high priority:

Mrs J *We had to move to town for our schooling, and from there I was sent away to schools. I went to two boarding schools, one in Masterton, and the other one in Havelock where I finished my schooling. My mother knew the headmistress, and my name was down for three years, and I finished my schooling there, and those were very happy years.*

Her mother died when she and her twin were fifteen, and after she left school, she went back to the farm to help with the housework until she married. Mrs O, born in 1934, also on a farm, stayed at home to help on the farm after leaving school. When she left it was to marry a dairy farmer. Mrs E's early experiences of school were erratic, disrupted by the trauma going on in the lives of the adults on whom she depended. She was born in 1915, and her account was of an extraordinarily difficult and abusive childhood, her schooling disrupted and her potential curbed when she was sent out to work by an abusive stepfather:

Mrs E *I had my Proficiency before I was fourteen, and we were all getting ready to go to the High School, and I got top marks in most things and we were learning French and algebra and shorthand in the sixth standard, preparing us for high school. But when I left, I was handed a bucket and a scrubbing brush and told to get out and use them. So, I went up and got myself a job at the local hotel. I was fourteen and I was taking care of twenty-three men and all the woman did that owned the hotel was the cooking.*

Mrs E married at eighteen and was a mother at nineteen. Things were tough, but at least she had managed to leave home:

Mrs E *So I had no - no happiness really until I was married, and then things were so tough, but I didn't mind that. I was away from the house.*

Mr C, born just two years later than Mrs E, had also been unable to go on to high school, but what made all the difference to his future career was that as a boy he was able to complete an apprenticeship which gave him a trade and access to a good secure job with the same firm for fifty-four years:

Mr C *I was fourteen when I got proficiency, that was standard six. Parents couldn't afford high school and so I went back to school in standard six the next year, waiting to get in as a carpenter-joiner. ... So that year I used to run the messages for the teacher and look after the class when he was out, and then I went back the following year in standard six, and come to October and I was waiting to get in as a joiner and couldn't get a job, 1933 and an engineering firm advertised for a storeman, a boy storeman, so I went there and did three years and then I got out the back in the workshop and served my five year apprenticeship in engineering - electric welding, gas welding, machining, anything at all, and they gave me twelve months of my apprenticeship when I started the apprenticeship.*

Even so, Mr C later had cause to regret the lack of a high school education, and it was to have lasting consequences for him in terms of his sense of citizenship:

Mr C *I had five years ten months in the Air Force. I went in in December 1939, the year war was declared, and I didn't get out till the twenty-fifth of October 1945. I was up to a warrant officer by then. They put me up in 1942 for a commission, officer. What education have you? Proficiency, standard six. You didn't go to High School? I said, No, people couldn't afford it see, in 1931, '32. And - that was like finished, not wanted.*

Mr C's story was that he had felt so diminished by his failure to achieve the rank and status of a commissioned officer so keenly that it prompted him to leave a secure and well paid career in the Air Force, returning to his old job instead.

By contrast the women in this group had very few choices open to them once they left school. The only real option available to most of them seems to have been low status domestic work, either at home or in the work force, until marriage, when their income and status depended on their husbands' jobs. Mrs V, born in 1908, had lived on a northern Hawke's Bay farm so remote that the groceries came in by coach only every six months:

Mrs V *Yeah, lived there for eighteen years. We were nine mile from school. I used to board. Little as I was, I used to ride the horse. I did a lot of riding before I went to school, and that wasn't until the age of nine. I didn't go to school. I just stayed home. Course, I knew no better. I didn't know what Correspondence School was. (Mother) said, Oh no, it's no good for you, I'm not going to let you go to Correspondence School. I was well behind. Of course when it come to sitting Proficiency, I objected to staying any longer at school than I had to, but to get a Proficiency it meant I had to go till seventeen. So I shifted round boarding. So any rate, I left school, about seventeen, and went home, and I stopped home. I didn't have any secondary education, no work, I just stayed home with Mum helping her, and, with the house.*

As this section has already indicated, the availability of paid work, and the opportunities for citizenship that accompany workforce participation were dependent on gender as well as on educational achievement. In addition, access to paid work depended on the availability of work at the time of leaving school.

Paid Work

The Depression had had an enormous impact on the opportunities available to this group. For Miss N it meant the end of her life on the farm:

Miss N *You see we walked off our farm - the mortgagee, a very rich mortgagee let us walk off - we had to walk off, and we had twenty-nine cows, just a small farm in those days, and we had to walk off. So we thought for a while we'd go and do some apple picking. So I got sixpence an hour - we started at half past seven in the morning, finished at six o'clock at night. And then we had to ride back home again - it was a hard day. But we were glad to have the work, because there were people coming in to that orchard all day long looking for a job.*

Miss N had never really left home, and even the family business, a dairy, had grown out of her mother's ingenuity and home-making skills and counted as home more than work:

Miss N *I was always at home, I never went to work. The only time I went to work was picking apples.*

In spite of the fact that she had gone in to the business, not because it was her choice, but because it was her "turn", she had found it interesting and it had become more of a lifestyle, with its ups and downs, than a job:

Miss N *We started a family dairy, home cookery mostly, and we didn't do too well for a while, and Father was very ill, and I went down - I think they'd just started social security or something, was it the early forties? So I went down, and I said we weren't doing too well, and could we have a little help, and they said yes, get rid of your old dairy, you'll never do any good in that. I told Mum. She said, what did you go down there asking for help from them, she said, we're going to be alright. And she made marvellous things, ice blocks, fruit salad iceblocks, milk iceblocks, made brawn and all that, you know, for the dairy, made it all ourselves. And I was there - then my turn came to go in, so I was in forty-three years, one week off with bronchitis, forty-three years, every morning at half past five. The family, my sister had died, and then Mother had passed away, and I didn't really want to go into it ... And then I went in, and I had the prices up, I used to go and just help myself for things and do the cooking, cooked my own meal at night. So then I carried on, and I was there for a long, long time.*

During her time in the dairy Miss N had developed a reputation as something of a local "character", so that when she retired her story was featured in the local press. Her sense of citizenship and of herself as a senior citizen was derived from these accolades and from the public persona which had earned them for her, rather than from the work itself:

Miss N *Then when I retired, gave the children a party, Tribune (newspaper) came up and took the photos. I've got it all in my bedroom up on the wall in a big placard, and it says on it, Miss N's going to take her first holiday - I haven't gone yet! I'm still going!*

The Depression featured prominently in many early stories, with tales of often extreme hardship, long hours and hard work. Mrs E gave a detailed description of a very long day for a fourteen year old:

Mrs E *I had the school holidays off, and then I went to work at the local hotel just around the corner, and I was getting union wages, which was thirty-two and six a week, but because I was under age I had to work longer to get them. My stepfather was taking thirty shillings off me and giving me half a crown to keep myself. So I started at six a.m. in the morning till six o'clock at night, but I did have from three to four off in the afternoon to go home and get dressed for serving the table at night. When I went in the morning I had two parlours to do, which wasn't easy work because it was old men that drank there all weekend, and they weren't very fussy what they did. It wasn't very good work for a fourteen year old.*

Mrs V was one of many women whose husbands were rewarded by the state for their war effort with a 'rehab farm', land allocated by ballot and paid off over time. In her case it was a Hawke's Bay orchard:

Mrs V *So that's where we lived for quite a long time. First year there was no house out there, but the government built a house.*

Her marriage had ended abruptly when she was "told to get out", and Mrs V had moved into a council flat in town. When she was "well in her sixties", divorced and no longer a homeowner she entered the paid workforce for the first time. Her new job provided not only an income, but social connectedness as well:

Mrs V *I was working for the caterer, with the food for the races, not only Hastings and Napier, but as far north as Gisborne, right down round and back to Hawera. There's a few race meetings on that. We slept in the race-course. My first day at the races, I was called in on a Sunday to go there, not expecting to go to the races at all. I wasn't a racing person, never have been. I helped working for about eight years, before I gave up. I always travelled in a big truck, not in a car, another woman, and a lot of equipment, and myself. There were no girls there, they were all elderly women. Only two or three of us, only the boss and ourselves, two girls, two women, and we had a lot of fun. He used to take us out for, down town for our tea, sometimes. He used to cook a good tea - there was no sitting down to bread and butter. After the day's work, you'd have a good tea cooked for you. He'd be spending the afternoon cooking the tea, while we were working, doing different things. He'd have a nice tea for us. I thought it was well paid. We were kept, we were taken there and we were kept, and we were taken home. Given a bed - if we didn't have a decent bed it was our own fault - just had to take their own mattress, blankets if we wanted.*

Mrs V's job clearly enhanced her sense of citizenship by enabling her to "get out more" and increasing her autonomy and her social connectedness, despite her reduced circumstances as a divorced woman who did not own her own home. Mr C, by contrast, had had paid work since leaving school. He had worked as a

storeman and then completed a five year engineering apprenticeship. He had worked for fifty-four years for the same firm until he was unceremoniously put off:

Mr C *I was seventy before the boss says don't come in tomorrow. There's no work for you. No thank you, kiss me foot or anything at all about it. I wasn't the foreman then.*

Miss M had taken up floristry after being put off from her job in a solicitor's office:

Miss M *He said, I'm sorry, I can't employ you, no. Although I told him I'd wait for him. He said, we're all on hard up business now, so I've got to employ my daughters, and you'll find other work to do. You'll have to find some other work to do. So that's when I started my floral business.*

Jobs were scarce and, like Miss N, she ran the business from home, remaining financially dependent on her parents, even though she was working. She had derived satisfaction from the pleasure her flowers brought others, but her account gave the impression of limited autonomy and little control over her own life.

Mrs J and her husband, after working for other people on dairy and sheep farms and orchards, had bought a small property of their own near Hastings where they planted fruit trees and grew asparagus. After eighteen years, they had sold their orchard and retired to a small flat in town. Retirement from their property was welcomed as a well-earned rest, and a reward for the hard work which had provided a good livelihood and citizenship status as homeowners and small landowners.

The resourcefulness, resilience and adaptability of these participants throughout their working lives, and the unfairness with which they had often been treated, as women and/or as older workers, were the themes which emerged most strongly from the stories about paid work.

Physical Environment

The participants in this group shared a common physical environment, pleasant and tasteful but also neutral and rather impersonal, at least in the public spaces. The environment did not feature in their conversations and it was only at the very end of the last session, when afternoon tea was being brought into the room for the last time, that the participants briefly discussed the recent change of ownership of the rest home and retirement complex in which they lived. The discussion involved four members of the group, and it was the only occasion on which there had been any spontaneous dialogue between the participants. Their concern was about the consequences of the change of ownership, with the new owners

being less visible, less involved in the day-to-day running of the home and possibly more overtly interested in making a profit than the previous owners:

- Mrs E** *Ones coming into Greenvale now I think would know a bit of a difference, because (the previous owner/manager) was so good when you came in.*
- Alison** *Was she? Helping you to get/*
- Mrs E** *Mm, she was like a mother, you know, she was very good.*
- Mrs J** *We've never ever seen the owners.*
- Mr C** *I said to her the day before she left, I said, get the biggest drum you can find and fill it up with your understanding. She said thanks.*
- Mrs E** *Oh she was really happy go lucky, you'd hear her singing up the hall, and if there was any singing going on she'd come in and join it and/*
- Mrs J** *Yes. I wouldn't know the new owners if I saw them.*
- Mrs E** *I've never seen them.*
- Mrs O** *I've never seen them.*
- Mrs E** *They own thirteen homes, I suppose they don't bother.*
- Mrs O** *Only the one thing I heard, that they were going to put up the rent.*
- Mrs J** *They're run as a business now. Now I wouldn't know any of them if I saw them.*

These comments suggest both awareness of the changes, and resignation born of powerlessness. Recent research with older people in residential settings (Abbott et al, 2000) indicates that few informants felt able to complain, and most felt it was futile to make suggestions: those who aspired to a participatory role in the running of the residence confined their activities to practical help. This was partly out of gratitude, partly because residents did not want to “rock the boat” (ibid, p. 336) or risk being labelled as complainers. These findings suggest that people who are in a fourth age of dependency and in need of rest home care may be frighteningly vulnerable to exploitation, such as unreasonable cost increases, or cutbacks in service, with little or no power to challenge those making such changes in the interests of increasing their profit margins. If such powerlessness results from institutionalisation, the effect is to deprive the older person of even basic citizenship rights.

Summary

In Greenvale the residents' lives were managed to a large extent by the staff. Participants were freed from worry. They did not need to address the issues in the wider community which may have engaged them previously. The research in the rest home took place in the weeks immediately before the general election in 1999, but the residents showed no interest in this event or in the campaign leading up to it. The residents themselves seemed comfortable with this degree of dependence. Indeed the previous owner/manager was described by one participant as being like a mother to the residents. Jenny, the 'diversional therapist' also commented, "They're like my babies". She shared with me her understanding of the effect of the research on the residents who had joined the group. She had been surprised, she told me, how openly the group members had shared their lives with me and with the rest of the group. They had very much enjoyed being involved in the research, she confirmed, and it had been a new experience for them. They had found it very interesting, she said, because usually they tend to sit back and let the action come to them, whereas the research was perceived as something active that they were doing:

J *And this is why they're so terribly interested, they felt like they have actually contributed something, don't know what, or to who, or they know to you, but what for they don't know. But they feel like they've done something for society, done something, you know, outside these four walls, that's different. It's made them come alive, in another sense, because it's been an outsider coming in here and wanting to know about them, not people who are working around them all the time, who know all about them, or mostly. It's somebody different who's interested in them, and that's sort of just woken and shaken the cobwebs out, and they've just sort of - come alive, and they're still talking about it, and they will still talk about it for a few more weeks yet.*

It seemed from Jenny's remarks as if the research was seen by the residents as a way of contributing to "society", and participating actively in the community, thereby reclaiming an opportunity to exercise their citizenship and enhance their status as senior citizens.

Jenny's comments also confirmed my feeling that the pleasure of this group was more to be found in the work of reminiscence and life review than in focus group deliberations. There was little opportunity for structural analysis during the six weeks I met with the rest home residents. Their comments at the very end about the change of ownership of the facility show that these people, while they appreciated having their immediate needs taken care of by the motherly staff, were aware of and interested in some wider issues that concerned them directly.

These areas of interest did not extend to the national elections that were imminent at the time, but they did include the 'Rest Home Olympics' (novelty games in competition with other rest homes), and for those who had family (three had no immediate family at all), the visits and the reported activities of children and grandchildren. Once the decision to live in the rest home was made, whether they had made it themselves or it had been made for them, there were few choices for the residents about how their lives would be lived. Activities were mostly organised for them. They no longer needed to manage food, households, or even money. Theoretically, and evidently practically, they enjoyed perfect safety and security, their health needs were taken care of and they were free to enjoy a safe, clean and healthy environment.

Their social connectedness and sense of belonging derived from the extent to which they enjoyed constructive relationships with staff members, to a lesser extent with other residents at the rest home, and with members of their own families. Within the confined arena of the rest home, their citizenship lay in small acts of resistance: helping in the kitchen; choosing to engage other residents in conversation rather than "sitting there like a stuffed monkey", going out for a walk even. A sense of citizenship was also to be derived from validation of the values of the past, and from stories of times when their lives were more expansive, and their social networks were more extensive, including people in the workplace and wider community as well as wider family groups. Family stories were told with care and with evident pleasure. This was an opportunity to bring them out for performance before an interested audience. Two members of the group invited me to share further in their stories by looking at documentary evidence, one in a book her husband had made, the other on a notice-board in her room. Especially for those without immediate family to whom they could pass on their stories, the research project was a legitimate and opportune time to confirm the importance of their existence and their stories.

Chapter Ten:

Mahana Retirement Village

Introduction

It seemed that although Mahana was situated in the environs of Taradale, one of six retirement facilities in the area, it had been chosen by the members of this group as much for its attractiveness and convenience as for its geographical location. The variety of terms used by the participants including “nursing home” and “rest home”, reflects a rapidly changing retirement accommodation environment and also the fact that retirement villages now commonly include a range of facilities on one site. In the absence of a clear definition of a retirement village, and probably because many so-called retirement villages have a rest home and continuing care hospital on the same premises, there is some confusion about the terminology and what is actually meant by the generic term ‘home’. An article in the local paper which discusses retirement villages, for example, is headed “Retirement homes boom in HB” (Hawke’s Bay Today, September 21, 2002). However ‘home’ generally refers to a rest home, and the article is referring to retirement villages, where residents have more privacy and autonomy, and are less dependent on medical and nursing support. Retirement villages provide a variety of purpose-built units, variously called villas, apartments, flats or studios, tailored to the needs of relatively wealthy older people. The number of people living in retirement villages in New Zealand in 2000 was estimated to be 21,000, about 4.6 per cent of the population aged over 65. There were an estimated 303 retirement villages in 2000, a thirteen per cent increase over the number that existed in 1998 (Justice and Electoral Committee Secretariat, 11 April, 2002). In 2002 there are estimated to be around 600 retirement village ‘units’ in Hawke’s Bay, with 120 more planned (Hawke’s Bay Today, September 21, 2002).

All the members of this research group were householders, living independently in their own homes within the well tended, park-like grounds of a retirement complex with a rest home and continuing care hospital. The large modern complex is within reasonable walking distance of the Taradale shopping centre, but for this group, as for the rest home residents, the specific living arrangements of the participants were more critical to their sense of themselves as senior citizens than their geographical location. The participants in this group, who referred to themselves as “flatters”, occupied modern, well-appointed homes designed with the needs of Third Age citizens in mind but also positioned for ease of transition

into a Fourth Age of greater frailty and more need for care. The term “flatters” is highly appropriate in this context, conveying as it does a life of freedom from the responsibilities of paid work, family commitments, *necessary* house and garden maintenance, even cooking, but with personal autonomy and opportunities for a social life. These older people were enjoying a true Third Age of independence, with (reasonable) health and (relative) wealth, living lives to which younger people might well aspire. However, there was also potential for a relative loss of control: the legal document covering the contract between the lessor (registered as a Charitable Trust), and the lessee (the “flatter”) specifies, for example, that the service fee payable “will cover such services and supervision as the lessor decides are necessary for the wellbeing and comfort of the lessee”.

The group was recruited with the help of the manager of this retirement community which I will call Mahana. Once approval had been sought and granted from the Board of Management of the governing body, the manager put my request for participants to the “flatters” at their Christmas dinner. Of the eight people who responded, two declined to join the research group after my initial explanatory visit, one because she just didn’t think it was “her thing”, the other because he considered that six sessions over six weeks was too long. Another person joined the group at the manager’s invitation, so we began with seven participants. We ended, however, with six, as one man who was gravely ill was admitted to hospital just before the fourth session, and died two weeks later on the morning of the last session.

There were four women and three men in this group. All were Pakeha. One was over ninety years old and two were close to ninety. One was in the early seventies, one in the late seventies, and one in the early eighties. Five members of the group were widowed and two were married. All had children and grandchildren, and at least three had great grandchildren. One had been born in England, one in Australia, and the other five in New Zealand. Two had grown up in Napier. One was an only child “with no relations”, one was the eldest in the family, and all the others had at least one sibling. Everyone had had at least two years’ secondary education, two of the women had trained as nurses and three men had had apprenticeship training in printing, electronics, and boilermaking respectively. Two rated their health as poor (one added “frail aged”), two as average, and two as good. “Family values” were considered important by three members of the group. Others mentioned caring, honesty, loyalty, respect, self-respect and keeping active in mind and body. In the written feedback most members of this

group said they had enjoyed being part of the group “very much”. The majority said they had not told the stories before, and almost everyone said they had valued the opportunity to meet the other flatters, some for the first time, and to hear about each other’s life experiences.

Third Age Citizenship: Ageing in a Retirement Village

What the members of this group, the “flatters”, had in common which could be identified even before they introduced themselves was the fact that they had each chosen to buy in and move to the retirement village I have called Mahana. This in itself was a strong expression of autonomy and independence. It was also, in each case, a strongly generative act in the sense in which McAdams and de St Aubin (1992) conceive of generativity as linking elements of the individual’s past, present and anticipated future with their social world. Each of these participants had made a deliberate lifestyle choice which involved planning, selling their biggest asset, their house, and entering into a binding legal agreement as a lessee. It involved envisaging a future for themselves, and also explicitly planning to protect the interests of their children (at least in terms of the children’s freedom and autonomy) by taking steps to avoid dependence on them. As a construct which links the person with the social world through belief, action and narrative, generativity can be seen as an important aspect of citizenship as it has been defined for the purpose of this study. The physical environment, in the sense of both housing and community itself an expression of generativity, is therefore discussed in this section as defining of this group instead of being discussed later as one of the key social outcome domains.

The flatters were unanimous that their chosen environment met their individual needs and compared well with other facilities:

Mr C *Of the ones we’ve seen now, and we’ve seen quite a few of them, to me this is the best of the lot. The grounds are beautiful, the surrounds are lovely, the staff are lovely.*

The plans Mrs M had made for herself in her old age had worked out entirely to her satisfaction. The timely sale of her house had enabled her to retain her independence, closely linked to her identity and status as a senior citizen:

Mrs M *And I lived there until I was ninety, and I decided it was time I did something and I applied for a unit over here, and there was one vacant. I had to wait two months for it, but the house was sold in two days, and they let me stay there until it was sold, and I've come over here, and I'm very, very happy. Best thing I could do. The thing you want is independence, when you get old, you want your independence, and I find, I can come over here, if I can't look after myself in the unit, and that is what I think is the great thing today, is these rest homes, and then if you can't carry on there, there's the hospital. And I think it's a wonderful idea.*

When I visited her in her flat Mrs M was delighted with every aspect of her home. As far as she was concerned, things simply could not have worked out better for her, and in her written feedback she summed up her satisfaction by writing:

My life as a flatter at Mahana is the answer to old age.

Though it was generally agreed that the grounds were beautiful, Mrs N described a long-running battle she had had over the area around her flat. As a homeowner she would have had absolute control over her own environment. In the communal environment of the retirement village she had more limited rights as a lessee. Her resistance to the loss of a special tree (and with it the loss of her privacy) and the lengths to which she was prepared to go to save the tree indicate a strong sense of her own status and power as a citizen. Her story of the actions she had taken, and threatened to take, in seeking to protect and conserve the environment are also indicative of generativity on three levels of concern, action and narration (McAdams and de St Aubin, 1992):

Mrs N *They cut down eight trees by my flat - eight!*

Mrs M *Did they? To put the new buildings in?*

Mrs N *I'm not/don't know, it was something to do with drainage, and what not. They dug up ditches and what not.*

Mr C *Have they put any more in? They might put more trees back?*

Mrs N *Well I don't know what they're going to do. I had that great big fight to save that particular tree outside my window, because now I'm exposed to the road, whereas before I had absolute privacy. And I threatened to tie myself to the tree, and all my friends were going to back me up down there.*

Mr L *I'd like to have seen that!*

Mrs N *.And they sent out the head man from Havelock, and he said, when he found out which tree it was, it's a rare tree, he said well he'd have protested too, and I've got a stay. But now of course - they used to always top it every year - and now it's got so tall, it's banging on my roof at night, and I - but I daren't open my mouth.*

The park-like gardens, and especially the trees, were highly valued by the village residents. As former home-owners who had been responsible for every aspect of the maintenance of their own homes and gardens, they enjoyed the luxury of being able to relinquish the bulk of the lawn-mowing and gardening to someone else. They did, however, feel some unease with some aspects of the alterations that were under way at the time I visited, expressing dismay at what seemed like some major design faults, some inefficiencies, and the loss of trees in particular. I asked whether there was anything they could do about particular developments they were unhappy about, and their replies indicated that they were informed, but not consulted, about changes other than in their own flats. Selling their homes and becoming flatters had released them from work and worry, but any idea of retaining their citizenship rights as independent homeowners was largely an illusion, as the move clearly involved a loss of power and an erosion of their citizenship rights.

Engaging in a discussion of the costs of buying in to the retirement complex and the conditions of the leases they had signed, the group members found that their agreements differed, and that some of them expected to have the full lump sum of their “unsecured loan” returned to them or their estate when they terminated the agreement, and some expected up to 10 percent less. They discussed the details of their contracts, and one point in particular, which bothered them a little, was that the owners, or under the contract the lessor, of the retirement village had six months after the termination of the lease in which to return the “unsecured loan” paid by the lessee (less a deduction of one per cent per year up to a maximum of ten per cent for refurbishment of the premises), while the new lessee had only one month to pay the full amount. The contracts varied according to when they had been entered into, the implication being that there is scope for exploitation and a loss of citizenship rights when older people are rendered vulnerable by their need to plan for an uncertain future, with unknown care needs.

Mrs R lived in her flat with her adult daughter, who had a learning disability. Consideration of the needs of her daughter was something from which she would never retire, and she had made the move to Mahana as part of a plan to ensure her daughter’s future as well as her own. In this sense the location close to a sheltered living facility was critical:

Mrs R *But I think coming to Mahana and the flats as a flatter, I think is the most wonderful thing that I did! After I lost my husband my health deteriorated, and the worry of the upkeep of the home and everything, and of course I naturally put my first choice of a place of retirement was Mahana for the simple reason when my husband was alive we had discussed (our daughter)'s future and we were looking ahead and planning for that, before he took ill. And we had come over together and had sort of put her name down at (sheltered accommodation nearby) - if anything happened suddenly to both of us. And that I think is why I put my name down at Mahana ... but it's a marvellous move.*

The members of the group were conscious of community attitudes to old-age "homes", which, they felt, were changing so that the stigma was becoming less:

Mrs E *But the best thing I ever did was come here. I mean to say they know I'm being cared for and I've got friends and ... but no, I think we've had a good life. Mm, though I do think that attitudes towards "homes" have changed. In the old days, you know, it was over the hill, and even when my daughter said to different ones, Oh Mum's going into Mahana, they said, Oh! Oh! And she said, No, not Oh! Oh! She said, she loves it! And she said, I could go there too, she said, it's lovely there!*

While attitudes to retirement facilities had changed, it was agreed, older people's attitudes had changed as well, and so had the retirement facilities themselves:

Mrs E *People are participating in bowls and activities that they're getting. I mean in the old days, when you got about fifty-five, sixty!*

Mrs M *You sat with a bonnet and/*

Mrs E *You went into black.*

Mrs M *Yes, I can see my grandmother, a bonnet on her head, and all in black, and my unmarried aunt looked after her, was at her beck and call. And I never wanted to be like that. I always feel sorry for those women. It's usually the oldest daughter, and she felt she had to do that, and I don't think it's right. And that's why I feel like I do about not being dependent on my family.*

Mr A *I think that the actual retirement villages have changed a lot though, in this last ten years, haven't they? They're not!*

Mrs M *Well, there was nowhere else for people to go I think, for a while. They didn't want you at the hospital.*

Comparing themselves favourably with earlier generations of old people, in their dress, their attitudes, their activities, and specifically the choice they had made to move into a flat at Mahana, this group of older people emphasised their own autonomy, their positive attitudes and a strong sense of their identity and status as senior citizens. They projected a lively and convincing confidence that the way they had chosen to live in their old age was a perfect choice for them.

Mr C was an enthusiastic and committed research participant in spite of suffering from a terminal illness. He died on the morning of the last group meeting, and so perhaps it is fitting that he should have the last word about the meaning of moving to Mahana and living there with his wife of fifty years:

Mr C *I got cancer and that was the end of that. But otherwise we - we finished up retiring and put our name down here - this was the pick of the crop. And we're very happy here, we've only been here about five months but we're very very happy and this'll do us. So that's our retirement. Oh yes, and I really enjoy it.*

Naming the Issues

Physical and Mental Health

Several members of this group had chosen to live near, but not with, their adult children. Part of the reason for choosing to live in a retirement complex such as Mahana was to ensure that in the event of ill health and eventual hospitalisation, they would be able to maintain close links with their children and grandchildren, but remain independent of them and not be a "burden" to them. Mrs M sounded adamant about her preference not to be dependent on her daughter. Mrs E, however, who had nursed her husband until she herself became ill, was pleased with her flat but still seemed just a little ambivalent about the thought of moving to the rest home in preference to family care if the need should arise in the future. She described her move to Mahana:

Mrs E *Best thing I ever did, because I have one daughter here, and the other two are over in Aussie, and I've got a granddaughter in Upper Hutt. But it was putting all the load on the daughter here.*

Mrs M *Yes, and that's what you don't like doing.*

Mrs E *That's what I don't want. Now she's not well and I feel I'm nursing myself so that I don't/but I know I've got the home to go into, which I'd rather do than/I mean she's willing, but her health's not the best, so ... but no, it's the best thing I ever did, this coming here.*

Mrs M *I think it would be very hard to go and live with other people, when you've lived on your own or with your husband. I couldn't do it and I wouldn't expect my daughter to have me.*

Mrs E *Oh yes, takes the worry off, and it means I don't have to ask the family here. And I know they'd come at the drop of a hat. I mean I'm getting phone calls every day, because they're away at the moment - how am I? What am I doing? And then I've had the grandchildren over from Aussie, and - oh no it's been good ... but I don't think I ever retired.*

Mrs E's comment that she was "nursing herself" implied that she was doing so in order not to have to depend on her daughter, but also that she was not entirely

ready to face the prospect of going into “the home”. This suggests that while the decision to buy into a retirement village may involve a high level of autonomy, choice, and power, and give an assurance of independent living within a secure environment, the onset of illness, or even fluctuations in health, can erode that security and impose the need to choose again, this time from a much more limited and less attractive range of choices, involving greater expense and significantly less power. Nevertheless, the transition to being cared for, should it become necessary as it does eventually for many people, is at least on the same site and within the same ‘village’ community.

Mrs E described a “very caring family” and caring actions, motivated by a mixture of love and obligation, which were reciprocal and intergenerational. Because her daughter was not well at the moment, Mrs E, in doing what she could to help the younger woman, was doing what she had always done:

Mrs E *I can iron, and I whip the ironing away if she doesn't see me because/ anyhow we just have to. But I've got a very caring family, and grandchildren that are caring, and I've had no trouble, you know. And I think - see Mr A saying about taking the grandchildren fishing and that - I've fished for so many hours, that if I had that many dollars I'd be a wealthy woman! And I've been to theatres and encouraged them in things/been able to be with them. We used to have them over to see us, and they called in after school. I used to help them with projects and things like that.*

The implication is that family members help each other in time of need. As family they are obligated, they “just have to”. There is also an implication that the strength of family relationships in which time has been heavily invested in the past, as in taking the grandchildren fishing and just being “with them”, will ensure that there will be no trouble accessing help when it is needed. Despite Mrs E’s expectations of reciprocal care as a right, it is not clear how widespread such an expectation of reciprocity may be. It was not a strong feature of a recent New Zealand study (McPherson, 2000, p. 367) in which only 41 per cent of participants “felt a definite sense of having to return help received, and only one in eight expected help in return for help they had given”.

Safety and Security

Safety concerns are a major reason why older people enter retirement villages, exchanging greater security for some of their citizenship rights, in terms of spending power and control over their environment, for example. The participants in this group had an extended discussion about the adequacy of the daily provision

for checking on the flatters to make sure they were alright. The training and experience of the staff, as well as their individual commitment, were all factors which were seen to influence the safety of the residents. Some alarming incidents amongst their neighbours had alerted them to the danger of someone falling and not being able to attract attention. The best solution, it was felt, would be for everyone to wear a “beeper”, a personal alarm, the kind of support and safety measure which, Mrs E said, “takes the load off the family”. Although they spoke of a time in the past when it was safe to walk everywhere and leave doors unlocked, there was no evidence that any of the participants were afraid to go out walking in the neighbourhood or that any of them had concerns about home security. While they felt the need to take responsibility for ensuring their personal safety by wearing a “beeper”, their fear was more of heart attacks or falls than of falling victim to an intruder.

Community and Family Ties

Community

Community connections for a number of these people had been built up over a long period of time. As a younger woman Mrs M had moved to Napier with her husband. It was a move away from all the familiar people and places she had ever known and she had found it very tough. One community organisation, the Townswomen’s Guild, had been an important and longstanding source of friendship, a sense of belonging, confidence and self-esteem, and opportunities to exercise her citizenship and enjoy her status as a senior citizen:

Mrs M *And I was a member for fifty-two years, I've only just given it up recently because I can't get there, and it was the happiest time. It brought me out. I was very shy. I was President and I did things that I didn't think I'd ever do, went to conferences, and really had quite a full life. ... When the Queen was here in 1953, I as President, along with my husband, was invited to meet the Queen, to represent women's organisations in recognition of the work done by the Guild.*

Mrs M's past involvement provided her with significant memories, added status and a strong sense of herself as a senior citizen. Mrs M's stories of her participation in community organisations indicate a strong theme of generativity running through her life story and providing “unity, purpose and meaning” (McAdams and de St Aubin, 1992, p. 1006). That she had had to give up her involvement in an organisation that was so important to her sense of identity and social support because of transport difficulties indicates a significant loss of autonomy and a diminished ability to exercise her citizenship. Another important loss sustained by people in very old age is the physical loss of those who have been friends for many years and who share special memories of the past:

Mrs M *When I think back over things and they come back to you ... We were in Marewa School Committee from when the school opened at Napier, and my husband was on the School Committee and I was on the P.T.A. and we worked together, we met together and worked all together and we started that school off from nothing. And we worked jolly hard, it was lovely. But that's where my friends were. And I was also on the church vestry for some time, and those friends have remained with me. They've nearly all gone now. That's the trouble.*

While many of her friends had gone (she was ninety-two), sporting interests she had begun when her children were small and continued into her old age remained an abiding passion. Mrs M's social connectedness depended on the continuity of her community connections over time. Mr L explained how the connections he had made in pursuit of his "hobby" made the retirement transition to Napier easier for him:

Mr L *One of my main hobbies was bridge. I was very interested in bridge, I played bridge in the bridge club, and I joined the Auckland Bridge Club in 1950, '51, and '52. And when we moved down here, after leaving Auckland, I joined the Bridge Club here, and found that there were one or two here I knew from meeting at tournaments.*

Mr L's quite detailed story of how he had become good friends with his next-door neighbour through small acts of kindness and reciprocity indicated the importance of neighbourhood networks that are sustaining of personal wellbeing and social connectedness (and of a sense of citizenship in the sense of giving and receiving something worthwhile). Mr C and his wife had been volunteers in Kiwi Seniors, a physical exercise programme for older people which they had set up and run in a number of rest-homes, thereby evincing a strong commitment to activities which are generative in the sense of "creative, productive and fruitful" (McAdams and de St Aubin, 1992, p. 1006).

Mr A summed up the advantages of being part of the "flatting" community in terms of freedom, autonomy and choice, all key concepts in contemporary expressions of citizenship (Lister, 1997):

Mr A *The beauty of this place is that you can be independent if you wish and if you want to join in you can, but no-one forces you to.*

For Mrs M, however, this freedom was constrained by a lack of transport, a problem she identified as "the only disability there is really, here". Wanting to be independent but not able to walk as far as the shops and therefore having to depend on her daughter to take her shopping once a week, she wanted to know if others had transport, and ascertained that they could all walk or drive to the

shops. Their level of mobility and independence enabled the flatters to live quite separate, independent and private lives within the communal environment of the village. However, lack of mobility, like failing health, can be a critical factor in precipitating an older person like Mrs M from independent living to a greater degree of dependency, thereby incurring a loss of citizenship opportunities and status quite suddenly.

Family

The importance of family ties, and generativity in the sense of nurturing a future generation, were at the heart of Mr L's moving story of a failed adoption, and a subsequent successful one. He had brought along a photograph of his wife with their daughter as a small child. He handed me the photograph, saying:

Mr L *Yes, and that's my daughter, she's now fifty-five, and I've got three great-grandchildren, and two grandchildren. So that was a great success. But that having to take the first child back, she was a beautiful little baby. ... Anyway, we made up for it. We had a good life. ... Worthwhile. Yes, but it was losing the little child, she was a wonderful child, lovely little child - we've never ever got over it. But however, we were lucky with the second one.*

There were two senses in which Mr L's story constructed the second adoption as "a great success". One was in the "good life" the couple had created with their daughter, as evidenced by the photograph. The other was in the successful creation and continuity of the family through subsequent generations of grandchildren and great-grandchildren, an important source of meaning in Mr L's "generativity script":

an inner narration of the adult's own awareness of where efforts to be generative fit into his or her own personal history, into contemporary society and the social world he or she inhabits ... The generativity script, which may change markedly over the life course, addresses the narrative need in identity for ... a satisfying vision or plan concerning how, even though one's life will eventually end, some aspect of the self will live on through one's generative efforts (McAdams and de St Aubin, 1992, p. 1006).

Family ties had a particularly defining quality in Mrs R's life as well. She was the only person in the group who was not living on her own or with a spouse. This was because the younger of her two adult children had a learning disability, which Mrs R called "a hidden disability", due to brain damage at birth. Mrs R and her daughter had been in the retirement complex flat for four years at the time of the interview. The move from their home in Hastings had been a great success, though her experience as she related it to the group underlined the limitations of

a consumer model of empowerment for an older woman caring for a dependent child. After being on the waiting list at the retirement village for over three years, she had been informed that a flat was available:

Mrs R *I came over, I brought my brother, my brother came with me, and I took one look at it and I said, Oh this is it! ... Yes, I'll have it! Oh this is wonderful! And then we went through the building to get in the car, and my brother said to the manager, You do realise that (my sister) wants (her daughter) to come too. And she looked, because he's on the committee, and she said, Oh I never gave that a thought. I thought, Oh my hat! And she said, Oh leave it to me, I'll see so-and-so. And anyhow, I said to him when we got going in the car back to Hastings, What do you mean about "Do you realise (my daughter) will be with me?" Of course she'll be with me. And he said, Oh, the rules are, it's only for husband and wife, or just the wife or just the husband, no-one else. And I said, Oh I mightn't get it then ... He says, you just hold on a while. So (they) got back to my brother about a week later I think, they'd had a meeting or something. And he rang me up and he says, it's all okay. But there's one thing, he said, it's what the other flatters will say. Yes, and at the time, when I came here, I thought Oh gosh, I might be in trouble from everyone else ... Anyhow, it all worked out and she's absolutely accepted by everyone, which is wonderful.*

Although it had worked out well for Mrs R, her story does raise the question of the precariousness of citizenship rights for both the older woman and her disabled daughter, and whether the outcome might have been different without the advocacy of her male relative who was "on the committee".

Family ties to earlier generations could also be instrumental in providing a sense of belonging for some people. Family history had recently assumed a new importance for Mrs E, who had just discovered "a massive genealogy", a whole family of whom she had been unaware. Her daughter had introduced her to the family history, and they had visited the various family graves together. This project was a great source of interest and pleasure for Mrs E, who had had a very solitary childhood with her grandmother as her only family. The discovery of new family stories added new meaning, and status, to her personal life story and her "generativity script" (McAdams and de St Aubin, 1992, p. 1006), which she was continuing to adjust to accommodate new information:

Mrs E *But my (great) grandmother on that side, the (great) grandmother that was buried at Mohaka, at Waihua, she figured very prominently and was instrumental in the saving of the Mohaka Pa during a raid of the Hauhaus, in 1869. Apparently she had a new babe, and went down to the river to get some water, and she saw them coming, and she took off her red petticoat, and waved it, and she saved the Pa. And my grandmother was the first, one of the first foundation pupils of Hukarere College. I'd forgotten all about that until I thought, Oh I haven't got anything ready for today. But there are books in the Napier Library (that) mention family. I*

haven't even got hold of those books yet, because I've only discovered that since I came up here.

Although Mrs M was very involved with her immediate family, she was also very independent. Widowed at the age of forty-seven, and a widow for nearly half her life, she had raised her children on her own and then, when her parents turned eighty and could no longer care for themselves, she brought them to live with her. Her story of how she had sold her house indicates her agency and autonomy, and her sense of herself as a strong, independent and able senior citizen:

Mrs M *After my ninetieth birthday and a wonderful family party, I realised the garden had become too much for me, a quarter acre section, and quietly called in a friendly land agent to sell my house, which happened in two days, and I then told my family.*

She conveyed a strong sense of her identity as a citizen with power and seniority by the way she had exercised her freedom and capacity to make her own decisions. Significantly, this power to act decisively and independently was not something she had acquired in her old age, or something which happened by chance. She understood very clearly that the origins of her power as a senior citizen in her nineties derived from her exercise of her autonomy over at least a forty-five year period. Interestingly, considering the lack of autonomy, freedom and power of most women of her generation, who had been largely dependent on their husbands, she traced the beginning of her autonomy to the time when she became a widow:

Mrs M *For forty-five years I'd made every decision, I had never asked anybody. If I wanted the house painted, I got someone to come and paint it. Whatever happened, I didn't ask. I always told them afterwards. And I didn't see why I should. But I was glad to tell them. The funny part of it was, everything went right. There wasn't one thing.*

Mrs E *That wasn't funny, that was good. If it had gone wrong/*

Mrs M *Well it was funny to me. Then I kept saying to myself, something must happen. Everything, my shifting, my packing, my/everything just went right and I couldn't believe it. ... But I did that myself, so I - you know, I haven't asked anybody to do anything. But I was able to do it. And I didn't see why I should put it on anyone else's shoulders.*

Even though she had a powerful sense of her own identity as a strong, independent woman, Mrs M still seemed just a little surprised at her own capacity, her ability to make everything happen in the way she wanted. She also indicated that she thought her autonomy and independence may have been interpreted by others, particularly her family members, as meaning that she did not need their help, when at times she would have been glad of it. She said of her daughter:

Mrs M *She comes every Thursday and I couldn't do without her, takes me shopping, anytime I need her, she's there. But I blame myself perhaps, sometimes, because for forty-five years I've made every decision, I've done everything, and I've never asked anybody, because they all had their things and I think perhaps I've been over/I haven't needed to ask them to do things ... I have done things that perhaps some people might have asked their family to do, in that way. ... I think that I've been let do things, instead of them coming and saying, Oh I'll do that - I think I'm a bit/I've been a bit/*

While Mrs M implied she thought she had been a bit too independent, Mrs N was also independent but could count on help from the family if it was needed:

Mrs N *Well I've been listening to you and it's made me think I've been a very bad mother. You know lots of parents ring their daughters or their sons every day. Well I don't do that. A month might go by and I wouldn't hear from anybody. But I've got an understanding that if I want them, they're available ... because I have got that sort of independence.*

Mr A and his wife enjoyed a close and “easy” relationship with their only son and his family, a relationship which clearly spanned many years of loving support, and seemed to be based on reciprocal pleasure with little sense of obligation:

Mr A *They just live across the park there. Oh yes, we're there often. We were there last night for tea ... we've got a wonderful family. I used to take my grandson fishing, take my granddaughter out, take them out in the car, stick them in the baby seats, and take them out. That's really why we came down to Hawke's Bay to be with my family. Because we lived in Auckland before. No, we had them all the time. Used to go and pick them up in the daytime to give (their mother) a break, and take them round to our place ... we've always been very close. Well my grandson came, it was his birthday, and (his mother) usually prepares it all, she's a terrific cook, and she was going ahead and he said, Oh no, he said, I want to go to Nana's, and I want Chinese, and that was it. He had his birthday here. I thought it was terrific, you know, to get your grandson decide to come to his Nana's, want to visit his Nana. Oh no, we've got a really nice, really nice family. We're lucky, really lucky, yeah. Our son comes along and we go out together and we go fishing together. It's great, it really is, yes it is. Couldn't be better. I know it isn't alright for every family though.*

One good thing about the retirement village, according to Mr A, was that he and his wife could be close to the family without being dependent on them:

Mr A *You're not dependent upon your family, once you live here. And of course we've got very nice neighbours, too!*

The flatters all spoke of a high level of social support in terms of family, friends and community connections, and all conveyed a strong sense of themselves as senior citizens with a range of opportunities to exercise their citizenship.

Material Standards of Living

The situation the flatters had chosen for themselves, and which worked so well for them, had only been made possible by their ability to fund the move, in other words their “housing wealth” (Davey, 1998, p. 17). Because a substantial lump sum payment was needed to gain entry to the retirement village, all would need to have had a house to sell. This means that the origins of their present housing comfort and security lay in the details of their housing history. Two of the participants had benefited, for example, from “the great state housing business” and were proud to have been allocated houses at the very beginning of Labour’s public housing scheme of the 1930s and 1940s (Schrader, 2000):

Mrs M *We were in one of the first ones, my daughter was four, and we were in Bedford Road, and she was born in 1934, and she was four when we went into a brand new state house, so that was '38.*

Mrs E *Well I went from Petone to a state house at Waterloo, where the railway line finished. And we moved in there in 1938, and the houses in Knight's Rd were the first ones finished. The first lot of state houses were allocated, and after that they got them by need. Course we were only married in 1935, and when we applied for the state house we said, well we'd been given notice and we had to get out, but anyhow we were allocated this house.*

Mrs M had been a widow since her husband had a heart attack and died in 1955, and her secure tenancy and eventual ownership of the house had been the key to her financial security, and her current high standard of living:

Mrs M *And I had three children, an eight year old, and a twelve and my daughter, a bit older. And - we managed, we carried on, you had to, you couldn't do anything else. And I stayed in that house, the house became freehold because we had insurance, which saved me really, saved a lot.*

Mrs M was not the only member of the group to have enjoyed the benefits of government housing policy. Others had also been able to secure, in the form of a state house which they eventually bought, both high quality long term housing and the major asset they would later convert to ensure their comfort in retirement:

Mrs M *In 1938 we went in. And I came out two years ago. I sold it and came here. It was my backbone, what I had behind me.*

Mr C *They were the greatest things that were ever built in this country.*

Mrs E *The timber in those houses was better than you can get today.*

The members of this group provided ample evidence that New Zealand’s public housing scheme of the 1930s and 1940s was extremely effective (Schrader, 2000), making good quality housing affordable without stigma, and offering real choices

to people with young families at that time.

Mr L, aged ninety at the time of the research, had been able to acquire property relatively cheaply on the private market and see it appreciate dramatically. In addition he had bought in especially “good” areas (Thorns, 1993), then sold and retired before the economic losses of the 1980s which eroded the savings of younger cohorts of senior citizens. Like some other participants of his cohort, he appreciated that the economic and social conditions of the time were important factors in his material success and his present security and comfort:

Mr L *But life in those days was so much easier than it is today. It was easy to buy a house in those days. You could get a mortgage, I think the normal rate was about four and one-eighth per cent, and if you started off at four and one-eighth per cent for twenty-five years, it stayed four and one-eighth per cent right through.*

Despite becoming a widower, and suffering from a significant sight loss, Mr L had managed another transition to his present home in the retirement village, which he found was “the ideal life as far as I’m concerned”. This “ideal life” shared by the “flatters” was due in large measure to their “housing careers” (Davey, 1998, p. 25) and the cohort effect by which they had been able to acquire “home equity” (ibid, p. 17) which they had then sold to finance their highly successful move to a retirement village.

Legal arrangements vary, with 65 per cent of villages offering licenses to occupy, 13 per cent unit titles and 7 per cent lease arrangements, with the balance offering alternative legal arrangements (Justice and Electoral Committee Secretariat, 2002, p. 6). There was some considerable confusion amongst members of the group about the implications of these legal details, and indeed the Retirement Villages Bill, before a select committee at the time of writing, acknowledges that the nature of village occupancy is not well understood; it aims to promote an understanding of the financial and occupancy interests of residents (ibid, p. 2).

The “flatters” recognised themselves as a privileged group, especially by comparison with young people today, who struggle to become homeowners against greater odds, like the student loans scheme of the 1990s.

Knowledge and Skills

Knowledge passed on within the family about how to get the best value for money and how to make the best use of whatever was available had had an important influence on children growing up during the Depression. The members of this

group, for example, sustained a long and energetic discussion about meat in general, and tripe in particular. They compared notes on how it should be chosen, prepared, cooked and served. The discussions about meat may have been a way of displaying a certain cohort identity, in the sense that to these people (in contrast with younger people today who are inclined to regard meat, or at least too much meat, as unhealthy) being able to put meat on the table regularly would have been a significant sign of being “comfortably off”, especially to those born in the United Kingdom. The discussions about tripe may also have signified a desire to display their ability to make much out of little, and their hardiness in appreciating something that younger people would eschew. As well as the evident pleasure the participants gained from sharing these stories, there was a sense of generativity in terms of “preserving good traditions” (McAdams and de St Aubin, 1992, p. 1006) in the sense of ‘making do’, making the most of what was readily available, and celebrating traditional knowledge and skills that were passed on within the family, as Mrs M’s comment illustrates:

Mrs M *My mother was brought up by her/went to live with her aunt because they had a big family, and she was an only child there, and her uncle was a butcher, and what my mother didn't know about meats! And she's passed it on to me, and I think I've passed it on to my daughter.*

This was a group of people with a continuing interest in and passion for knowledge, whether exploring their own family histories or creating new inventions or sharing photographs and documents to illustrate their talk of earlier times. The knowledge and skills that provided opportunities for them to continue to participate satisfyingly in society had, it was evident, been acquired early. Despite their current relative affluence, however, even those who had been born into reasonably well-off families were “children of the Depression” and had known hard times personally. Most had had their education cut short and some, like Mrs E, had been thrust early into work and premature adulthood. Raised by her grandmother, she had been privately educated:

Mrs E *And then the Depression struck. And my Grandmother decided to close the business down, and she decided well, I was fourteen, it was time I went to work. I had a very entertaining childhood, but I missed that when I started work, because my grandmother had lost all her money and we didn't have the means. So that from then on I had to learn what life was all about.*

Mrs N’s education was also interrupted by the Depression:

Mrs N *I was all ready to go back to High School for my fourth year - my uniform all pressed and whatnot for February the second, and my father suddenly said, that same morning, I don't think I'll send you back, because there's six of you to educate and you're the eldest - and it was slump time - I think you'd better get a job. Well it was an absolute wasted year. I was home a year and couldn't get work, no matter what. I applied for every job that was in the paper. And I finally landed a job, and then, the morning I was to start, the lady came down and said that her son had just come back and she thought they'd better train him rather than me, so that was that. So that's how I came to be a year out of work. I'd be just coming up - seventeen about, by then.*

As well as being out of work herself, she had been deeply affected by the widespread unemployment and severe hardship in the community at that time. Mrs M, aged ninety-two, had planned to be a teacher, but that option was closed to her, again by the hard times of the worldwide Depression:

Mrs M *I finished Wellington College, and I did a general course, thinking I wanted to be a school teacher. You could have taken a commercial or a general and like you (Mrs N) when I came out there were no jobs, there was nothing. The Teachers' Training College was closed down for two years because they couldn't afford to keep it going. It was the slump coming on you see, it came on a long time. It was from about 'twenty-four. And - I didn't know what I was going to do. Otherwise there were factories you could go and work in and I didn't want that, or my parents didn't. So my mother paid for me to go to Miss Carr's Commercial College, on Stewart Dawson's corner, upstairs.*

Mrs R, from a remote farming family, and some years younger, had not been affected by the Depression, but by her father's influence on her choice of career. She had always been determined to be a nurse but had to be content with the less rigorous training and work of a Karitane, or baby nurse:

Mrs R *But Dad had a big influence over it, (and) was determined I would not be a nurse. I don't know why. And then during the war of course I was going off to be a nurse. And he put his foot down, and I went to do Karitane nursing. But he got his way that I wouldn't be a general nurse.*

Mr A, born in the north of England, considered himself fortunate to get a job and an apprenticeship after leaving school at fifteen, though it was not what he had wanted, and the terms and conditions would be considered unacceptable today:

Mr A *I wanted to be an electrician, actually. I couldn't get a job, it was the Depression period of course, it was 1933, 1934, and you were lucky if you got a job. I only got the job because the lady next door's husband owned the printing works, and that's how I got the job. But for the first six months I had to be a message boy, just to prove I was a good boy. And that was how you actually started. And as a message boy I got ten shillings a week, for a printer's apprentice I got seven and sixpence a week, so actually I took a decrease of half a crown a week to be an*

apprentice. It doesn't make sense does it? And that was a seven year apprenticeship, a forty-eight hour week it was then, and if you were off sick or you didn't go to work, you had to make the time up at the end of your apprenticeship. You also had to go to night school to evening classes in those days.

Mr A's apprenticeship had been interrupted halfway through by the war, and he went into the Air Force at nineteen:

Mr A *I still had three and a half years of apprenticeship to serve, and when I came out the Government had brought in an order saying that you could serve half of it and the Government would subsidise your wages for half of that time, then you were a fully qualified printer.*

Mr C had been born and raised on the outskirts of a small town in Australia. His mother's strong influence had ensured that he went to high school during the war years, though it meant getting up at half past four in the dark, travelling sixty miles by train each way, and arriving home at seven-thirty in the dark. His training in a trade was also at the insistence of his mother, who had made some considerable sacrifice to make sure he succeeded in getting a qualification:

Mr C *But actually my mother was the influence on me. She said, you've got to go to Newcastle, you've got to learn a trade, you know, blah, blah. This was during the war. And Mum said, right, she said, I'm coming down. So she got a flat there and brought my brother down and me and we stayed in this flat. I served my time (at the steel works as a boilermaker), five years, started on thirteen shillings a week, and they took ninepence out for the student benefit, so I got twelve and threepence a week. But the beauty of it was, in the fifth year, we got tradesmen's wages.*

For the men in this group, training in a trade had been a key to assuring a secure future. For the women, marriage was generally expected to be their future, an occupation which, with no training, you were expected to do, as Mrs M said, "for the rest of your life".

Paid Work

Though work had been difficult to find for the oldest members of this group, those now in their seventies had started work at a time when jobs were readily available. Though working conditions were sometimes difficult and dangerous, there was no shortage of choices for a qualified tradesman like Mr A, a printer:

Mr A *You could get jobs easily then. If you could do your job, you could get jobs anywhere. And then the war started, I was in the Air Force for six years. And so I decided that Lancashire wasn't the place to be after seeing all the different places in the Air Force, and I applied to come to New Zealand. That was forty-five years ago. I worked for the New Zealand Herald for twenty-five years.*

Mrs E had been thrust into a job in a large department store in an unfamiliar city:

Mrs E *So, that was quite a lonely time, because I didn't know many people in Wellington. I came from school. The first couple of months I had very sore feet, and I was extremely tired, worn out, because, you know, bit different sitting at a desk in school. It was a long, long day, and of course I was getting nineteen and six a week, and couldn't afford to get a tram home and had to walk. And no holidays. You weren't paid for holidays.*

The transition from school to work and earning her own living was sudden and hard, but for Mrs E, as for most of the women in this group, paid work was mostly confined to a fairly brief period between school and marriage:

Mrs E *So when I married I automatically left work.*

Mrs M *They didn't have married women working in those days. If you were in the government, definitely you weren't allowed to stay on. When you married you had to leave. They didn't have married women in any of the shops or anything.*

Mrs N *It was only the war that let women/*

Mrs M *Yes, when men were short then they brought women in.*

Mrs R had loved her career as a Karitane nurse, until she married, she said, "and that was it". Her story revealed also the social and economic vulnerability of some of her contemporaries, older women who had not married:

Mrs R *There were two older ones there, a lot older than us, and they had nursed their mothers, you know, looked after their mothers, and lost their mothers, and did Karitane training so that they could take children into the homes that had been left to them by their mothers.*

Persistence, and helpful social connections, had helped Mrs N succeed eventually in her ambition to go nursing. Her professional career as a tutor sister had been illustrious and highly regarded in the community, ensuring her continuing prominence, seniority and high citizenship status amongst those who knew what her career had been. Her high status and future care would also have been secured by her reputation within the medicalised environment of the rest home and continuing care hospital stages of the retirement village, should there come a time when she needed them. However, with expectations high and working conditions so tough that out of her class of ten, two girls had died, Mrs N worked in the hospital system for twenty-five years. She was the only woman in this group to combine her career with marriage and motherhood, and she spoke of her struggle to care at home and at work, and of the high cost in terms of her physical and emotional health. She spoke of pressure to return to work, health

that was “shattered for life” by the demands of her work, and huge tension between her role as a nursing tutor and her role as a wife and mother:

Mrs N *So I went back and tutored for eight more years, doing the most extraordinary hours from eight in the morning to when I'd finished. Thank goodness my husband could cook a little bit, but if he wasn't free - and he had by that time developed Parkinson's and I'd come home at seven at night to very disapproving children, you know, Mum at work and no dinner and ...*

Mrs M, unable to pursue her career as a teacher, had found work after a year of commercial training, but the wages were so poor that her transport costs made the job not worthwhile. At her next job the pay and working conditions were barely adequate:

Mrs M *There were no facilities. One of the men used to bring up a basin of water from down below every day and that was what you washed your hands in. And it was standing on wooden boxes, and there was a piece of soap there. The water was black by lunchtime, and that's all you had. There were no toilet facilities for a woman. I had to go either next door, or else I used to go to the YMCA at lunch-time.*

Her story conveys the limited choices that were available for both men and women and the terrible consequences of being out of work in those times:

Mrs M *And then I met my husband and we were going together for five years, because you couldn't afford to get married, you know, in the late twenties, and we were married in thirty-two. He was buying a section in the Hutt, and when he got put off work in 1932 - there were fourteen of them put off the same day, and one of them, he was crossing the street and he called out, I've got the bloody sack! - and he screamed it out. They had two children and another one expected, and here he'd got the sack and this was Depression days. And we were sitting in the train this Saturday, and we were going to be married the next Saturday, and he said, I've got the sack, and that was the week before we were married. Well all you could do was just carry on. If we hadn't got married, he would have had to have gone to a single men's camp, right up in the forest, and they got ten shillings a week.*

Although she had expected to stop work when she married, Mrs M had managed to keep her job until her husband found work again, and when her children were young she did casual part-time work “doing odd bits and things in between” to supplement the family wage. Though Mr C was assured of work because of his trade qualification, and jobs were plentiful, they did not necessarily provide a secure or sufficient income to support a family. Mr C, and his wife as well, had a variety of different jobs, sometimes several at once, to make ends meet:

Mr C *So I got a job on the wharf, in 1950, but it didn't last very long 'cause the '51 strike came on and I was unemployed. But anyhow, to eke out a few bob, the baby, our first son was on the way then, so we used to go out fruit picking and go out picking spuds or picking broad beans, anything at all that would make a quid, you know? And - we survived. (My wife) looked after the baby. She was teaching dancing too, you know. I got a job on the railway, in a carpentering gang. And then at the weekends I had a part-time job in the Clarendon Hotel as a barman. And then I did a couple of seasons at Whakatu (meat works). They were long hours. And then I got a job at the Gas Works, which lasted for quite a while, doing shift work there. But in the days, you know I'd have a day off or I'd work night shift, I'd have a few hours during the day, I had a job welding. And my wife was cleaning offices, and I was going up helping her. It was pretty busy, you know, we had three or four (jobs) just to get a few bob to try and get a house together.*

Mr L considered his career, beginning in radio in Napier, and moving on to his goal of working in industrial electronics in Auckland, as “one of the most interesting jobs you could have”. His line of work still fascinated him intellectually, and he was still, he said, working on various projects that particularly interested him, such as a home heating system. He had run a very successful business for twenty-three years before he retired. If there was a marked difference between the work experiences of the men and the women in the group, there was an equally marked difference between their experiences of retirement. Retirement was a largely meaningless concept for most of the women, as they agreed:

Mrs E *So you didn't retire.*

Mrs M *No, and I don't think I've retired yet when you've got to cook all your own meals. I've come from that to this, and I'm still doing everything for myself. I still cook and clean and wash, and*

Retirement for the women really meant coping with the consequences of their husband's retirement, which had been a difficult transition for at least two of them:

Mrs E *He'd come out in the kitchen and stand in the middle of the room, lost, because he wasn't going to work, and I'd say, do this, go and do this. I'd be finding him jobs, because he'd never been home. I felt like saying whatever you do, don't stand in the middle of the kitchen.*

Mrs R *But that was the sudden retirement, that we sort of plunged into, which wasn't long after leaving the country, and he'd been a farmer, just like I was, way out in the sticks as you might say. And sort of being plunged into town, and then suddenly whang, his work was finished and our lifestyle was turned upside down.*

For Mr A, on the other hand, retirement was a well-defined period of his life which he had planned for and which he enjoyed immensely, a true “Third Age” (Laslett, 1989). He had retired at sixty because everything in the printing trade had changed

so much and he didn't want to have to "start all over again". Early retirement had been, he said:

Mr A *the best move I ever made in my life! When I retired at sixty, there were two reasons; one, I had wonky knees and they weren't getting any better. Two, printing was taking a huge change. That was another thing, and they were changing over and they wanted me to stay and change over. I couldn't see any point in changing over for someone else to walk in and do it, and you've got to start all over again. And the third thing was I decided I was going to retire at sixty anyway, and I could take early retirement. We had a superannuation scheme, which if you got permission from the authority where we ran it, you could retire without the compulsory however many years it was. So I got all my superannuation, and they treated me really well. And I retired at sixty. And I think it's been great. I've never regretted it, I've never been bored.*

To Mr A, a healthy retirement with "no worries" meant that he was free to help others, including his neighbours, and free of the constraints of paid work:

Mr A *But, no, I think retirement's great. I think if you retire with a positive frame of mind, it's good, yeah. You can always find something to do if you want to. If you want to do voluntary work, you know, it's always there. But it's never worried me. I've never been stuck for something to do. But I look at it this way, particularly in printing, you're on deadlines all the time, and someone's chasing you the whole time, and you can go home, and say, that's it, no one's chasing me, I've no worries, I'm just my own boss, I can do what I like. No, I think if you've got your health, which is the main thing, and you can still get around, retirement's good, great.*

In retirement Mr A and his wife had agreed to share the household tasks, so that she did the gardening, which he hated, and he did the cleaning, housework and cooking. This had worked to his wife's advantage when they moved to the retirement village flat with its tiny garden, but as Mr A said wryly:

Mr A *When you make a bargain, you make a bargain, and we've been married fifty-six years now, so I mean, you know, a bargain's a bargain isn't it?*

This kind of arrangement was unusual though, and in general the gender divisions established early in their working careers remained fairly well established for this group. Unlike Mr A, Mr L was fairly ambivalent about the concept of retirement. He had had a very satisfying working career, and the means to consider early retirement:

Mr L *Well to be honest I find it very difficult to say exactly what retirement is. I reckon that in my business in Auckland I reached my peak at about forty-five, forty-eight, and I feel, after that I started to go down, and it wasn't until I was in my late fifties that it dawned on me that I wasn't coping as well as I should with the type of work that I was doing, and at that point I*

decided that I would ease myself out of the business and just take on those (jobs) that I felt more confident to take on.

However when he did retire, it had proved to be a disappointment to him:

Mr L *When I turned sixty, I only had the one daughter and she was married and they'd moved over to Australia. So my wife and I decided we'd retire, and come down here, and that's what we did. But I - I was retired for about three or four months, and I couldn't settle down as a retired person. I wanted to be back in business. But coming down here, I broke all my connections with Auckland. Now as far as retirement is concerned, I'm a little bit different from you (Mr A) - I was a bit disappointed in retirement. I felt that - I'm out of everything, I'm not part of it.*

And my wife and I would go for walks and that sort of thing, but after a while I got I suppose a little bit - difficult, because of not having something to do, and then I heard that Robert Holt and Son, in their hardware, they were interested in somebody to give a hand out for a short period, in their retail, somebody that understood engineering equipment. And I went and saw them, and I got the job. It was supposed to last for about three months. Well it lasted for ten years and I was well into my seventies when I retired. Then, oh well, coming up fourteen years ago my wife passed away, and I've been on my own ever since. But although I've been retired, I've been very active in developing different things for different purposes and that sort of thing.

Despite keeping busy and active with various interests, Mr L had felt "lost" in retirement. His words convey a sense of loss; of role, of direction, of status, and of opportunities to exercise his citizenship, which for him was concomitant with his work. The contrast between his experience and Mr A's is highlighted in the following conversation.

Mr L *But, going back to retirement, I found it very difficult to retire. I found that I was, well sort of, I was lost I suppose, particularly once my wife had gone.*

Mr A *Well you were in business on your own, weren't you?*

Mr L *Yes, yes.*

Mr A *Yeah, well I think it's different having your own business and working for someone else. I think it's a totally different attitude of mind when you retire. When you're working for someone else you retire, that's it, you're your own master. When you work for yourself and you retire, you're nobody's master, you've got nothing. And I think that's the difference between being retired after working for someone else, and working for yourself. I think it's a different thing altogether. I often find that people that work for themselves don't retire very easily.*

Although Mr L, like many men of his generation, had found retirement an isolating experience, he had continued to apply his mind and his considerable professional experience to various inventions, and to ideas over a wide range of interests. In

the sense that he was constantly thinking about how things, from home heating to electricity generation to the organisation of the labour force, could be done differently and better, and was keen to pass on his ideas to interested listeners, his attitudes and his behaviour were highly generative. The narrative account of his lifelong interests provided his life story with continuity, purpose and meaning by creating an identity for himself which linked his extremely satisfying career with his interests in later life, and by providing evidence of a worthwhile legacy, in terms of detailed plans, for future generations.

Culture and Identity

The members of this group had grown up in times when the dominant cultural values and practices in New Zealand were unquestioningly British. Like many older Pakeha, they remembered a time when race relations were considered exemplary in New Zealand society, but there was no mention of contemporary issues for Maori or of relations between Maori and Pakeha. Religious values were important, but if people spoke of citizenship, it was British citizenship they were thinking of. They had been brought up to be “good citizens”:

Mrs N *Thieving and all that sort of thing was just beyond the pale. The British weren't a race like that. You were British citizens, and England was the motherland, there's no doubt about it.*

War and economic depression had both been important influences in the lives of these people. Mr A spoke of the “waste” of war as a major factor which had, in his opinion, “killed a lot of patriotism”, and had important consequences for the sense of citizenship of the survivors:

Mr A *I mean, when you come home from war, you're nothing, are you? I mean, you're great while you're fighting but if you get killed or wounded, they don't want to know you after that, no-one wants to know you.*

Loyalty, like patriotism, was a value that had been actively taught in school and promoted in the family. “Family values” were also highly important to this group. Members of this group generally acknowledged the high degree of security and stability they had enjoyed in childhood, despite hard economic times. Several referred extensively and appreciatively to the caring support they had received, and the values they had learned from their parents. The group discussed the cultural changes that have taken place during their lifetimes in terms of gender equality, particularly in the division of household labour. While Mr A took primary responsibility for the cooking in his household and Mr L declared himself “quite capable of cooking and that sort of thing”, the women all agreed that their

husbands had been “hopeless” at shopping and cooking, especially by comparison with both the men and women of their children’s and grandchildren’s generations. They saw evidence of younger men taking responsibility for caring work as well:

Mrs M *I find that the younger men are doing things today, looking after the babies and all that sort of thing that men in my age group didn't ever (do), change them and everything.*

Language too, had changed, as had values, and they found that their families, particularly the grandchildren, were prepared to discuss topics that were formerly considered unmentionable in language that was previously forbidden. Their response was that they were quite prepared to accept the changes in order to maintain intergenerational communication and relationships, as the following exchange shows:

Mrs M *Well I've changed! I mean I used to be horrified at things, but I think, well what can you do?*

Mrs M *It's just everyday talk.*

Mrs E *Just everyday, they accept it. Well I accept it too, because I think it's good that they do speak out in front of me.*

Mrs M *But you've got to. They wouldn't tell you anything if you didn't.*

Members of this group appreciated the many opportunities available to older people now for lifelong learning and participation:

Mrs E *I think there's a lot more to keep the older people's brains more active now.*

Mrs M *Well you can learn.*

Mrs E *And I think it's important to keep on learning, and to keep your brain active.*

Mrs M *I'm afraid my brain's going all the time, I'm listening to every thing that's on. I listen to talkback, and you know, you get other people's opinions and things. And there's something to think about.*

Mrs M compared herself, actively involved and participating in a variety of community activities into advanced age, with her parents, who had just “stopped”, becoming inactive and quite quickly bedridden, and doing nothing. The comparison highlighted her strong sense of her own identity as a senior citizen who was actively involved in seeking out opportunities to exercise her citizenship.

Summary

This group became very much a forum, used for telling stories and discussing a range of topics. The members were very active listeners and participants, not only generating stories, but also bringing photographs and other special items to show. The group had taken up the invitation to tell their stories of their own lives with enthusiasm and energy, and one small exchange in particular reminded me of the value of allowing time for the stories to unfold in an unstructured way. The group was remembering Armistice Day and the way it used to be marked by a universal silence:

Mrs M *It was really/ I can't forget. It sort of stirs me, when I think about it.*

Mr C *But the more we talk here, the more you'll remember though, that's the thing.*

This “talk” provided precious opportunities for the telling and hearing of stories and produced immensely gratifying connections between people who had been born at different times and in different places, but had come together in older age in the retirement community at Mahana. This group very much enjoyed sharing the commonality of local and national history and the pleasures of being with other people who had lived through the same cultural, political and economic changes and events as they had. The events of the times they had lived through had had varying effects on the individuals in the group. Some, for example, had been unable to pursue their chosen careers because of the limited choices imposed by the economic Depression. Some had “lost” six years of their lives during the war. On the other hand, they had clearly gained from the housing and other family policies of the welfare state during the 1930s and 1940s, continuing to enjoy the public benefits of economic prosperity during the 1950s and 1960s, and the generous superannuation schemes, both public and private, of the 1970s and early 1980s.

The connections they discovered as the group progressed were visibly energising. As a group they projected a confidence that owed much to their satisfaction with their present surroundings and circumstances. Though they had not all met each other at the start of the project, by the end of it they had created a strong sense of community, evident in the relaxed familiarity of the later meetings, and in the way the group sometimes pursued its own agenda, which related to the activities of the village community rather than to the research agenda. Their stories reflected the resourcefulness and resilience of their age cohorts. This group in particular was remarkable for the way its participants had fulfilled their own expectations of

old age by planning ahead in organising housing for themselves that met their present needs, and could also be counted on to meet their future needs. By moving to Mahana they had secured space and privacy to pursue their own interests and activities, and enough communal space and connectedness to both the retirement village community and to the wider community to have a sense of belonging to both. The narratives of these people provided evidence of the inter-relationships of the various social domains, and the impact of the social policy environment of their earlier years on the standard of living they were able to enjoy in their retirement years. Mr A's story of how he came to be in his present situation indicates something of this intersection of factors, in his case a felicitous mix of cohort effects, family connections, educational achievement, hard work, good health, and a positive attitude:

Mr A *Well it goes back a long, long way. When my wife's aunty moved to New Zealand, oh years and years and years ago, and they came out to visit my wife, well no, her parents, she was only at school, only five or six years old. And they brought a tiki, you know a heart, in greenstone, and they gave it to her. It had New Zealand on it, and she always wanted to come to New Zealand after that. And eventually, as I was reading the trade magazine one day, there was an advert for the New Zealand Herald - wanted, staff - so I said, shall we have a go? And she said, yes, so I applied, and got the job, and here we are. My only regret is we didn't come out sooner.*

For Mr A, as for the other members of this group, living as “flatters” in the retirement village which they had chosen to make their home in old age contributed to a strong sense of themselves as senior citizens. They lived independently as householders in their own homes, and enjoyed a high level of social connectedness, in the village with other “flatters” and in the wider community which invariably included family members. Most enjoyed close, reciprocal relationships with their children and grandchildren, but had chosen their “flatting” lifestyle specifically to avoid dependence on their families. A key factor contributing to their ability to choose the lifestyle they now enjoyed, and to their seniority and their strong sense of citizenship, was the wealth accumulated during their working lives and invested in housing. All had witnessed financial hardship as children, in their families and communities, and all had worked hard, in the workplace and, if they were women, in the household as well, to achieve their current level of security and their current status as senior citizens. Theirs was a distinctively Pakeha model of senior citizenship which derived from a highly successful balance of autonomy and social connectedness.

Chapter Eleven:

Grey Power

Introduction

Having looked at dimensions of senior citizenship derived from living in and belonging to particular localities (Havelock North and Flaxmere), and two different sets of communal living arrangements, (Greenvale and Mahana), I wanted to continue the theme of Third Age citizenship by interviewing a group of Grey Power members in order to gain an understanding of the opportunities that exist for political participation in the Third Age. After some introductory meetings with a key informant I was invited to put my request for research participants to a public meeting held shortly before the 1999 election. At this time I paid a modest subscription and joined the organisation, as a gesture of support, and in order to receive the literature from the national organisation. However, shortly afterwards the branch I had joined was officially disaffiliated amidst serious allegations and legal action. At times this background activity proved disruptive to the research process, but it did highlight the complexity, and some of the difficulties for older people mobilising to effect political change for their peers.

All the participants in this group were New Zealand born, and two were originally from Hawke's Bay. Three members of the group were over eighty, one in the early seventies, three in the late sixties, and one was in her early fifties. All members of this group had education to secondary level, two were former teachers, and one was still working as an accountant. Five members of this group were married, one for fifty-eight years, two were widowed and one was divorced. All members of the group had children, most but not all had grandchildren and several had great grandchildren. Group members expressed a diversity of values and beliefs, ranging from a life-long Christian faith (one person) to caring for the environment and doing to others as you would want them to do to you, loyalty and integrity. Appreciation was also expressed for "my city and my lovely country", and although

I had recruited these participants for their affiliation to Grey Power, there was also a sense of place and a strong thread of belonging and loyalty to Napier in their stories and conversations.

Exercising Senior Citizenship Through Political Participation

This was a group of people drawn together by me on account of their membership of the Grey Power organisation. By recruiting a group of Grey Power members, I hoped to investigate the avenues which exist for older people to exercise their senior citizenship through political participation. As a group these participants were extremely heterogeneous. They came from different age cohorts, different neighbourhoods, different classes, and different educational and occupational backgrounds. They even had different attitudes towards Grey Power and their membership of the organisation, and they expressed a variety of different interests, which is important considering the Grey Power Mission Statement *To be the appropriate voice for all older New Zealanders* (www.greypower.co.nz). For Mr V, who was the spokesman for the local chapter of Grey Power, participation was the key to Grey Power's success. The organisation was designed, he said:

Mr V *to practise unity of strength for a common purpose. And that has worked, I think, quite well, in a lot of areas, throughout the country. ... You can indeed be a political force, which is what I consider Grey Power to be, because of their unity of numbers. And they've really got to make sure that they don't lose that. But generally, they're not party political, they don't support any one party. No-one can tell anybody else what their politics must be. They musn't do that anyway. But as Grey Power you need to show them what their choices are, simply lay the facts out for them, so that they can say, oh well, yeah, and make up their own minds, as to what it is they want.*

Mr V was my original Grey Power contact and key informant. He identified himself as a strong advocate for older people, though he appeared to distance himself from them by referring to "they" and "the elderly". He spoke as if all older people were vulnerable victims under attack from every direction, including local and national government, all conspiring against "the elderly", who, he said:

Mr V *come together, and need to come together, for their own self-protection, and to try and help one another, seeking protection, like a school of fish, 'cause they find protection in the same manner. Grey Power, they really get it from everybody, you know, the elderly people of New Zealand get it from every direction, from the time they start to turn into old people, every which way they go, they get nobbled; they get nobbled by the*

council, they get nobbled by the government, they get nobbled by local politicians, they get nobbled by churches, and all kinds of things happen to the elderly. And always, at the end of it, if they're going to want some money, to take some money off somebody, they always find the elderly are the easiest marks because they don't resist as much as the younger ones do. So they're always a good mark for revenue.

Mr R, the local Grey Power treasurer, agreed that older people seemed to be a target for what he called “discretionary treatment” and he emphasised the opportunities for Grey Power members to advocate more actively for the rights of older people. Both he and Mrs E, however, were keen to promote an image of older people as active and feisty, and to dispel any image of passivity:

Mr R *I mentioned the words thrust and parry before, and that's very much in evidence in the Grey Power movement, and if you think old people are relaxed and ready to get into a rocking chair, you've got another think coming.*

Mrs E *No way! We're not getting into rocking chairs! I don't want one, put it that way.*

Mrs E felt that Grey Power was useful as a forum for older people to come together and defend their rights, though in terms of active participation she clearly felt that it was the responsibility of the “younger” old to lobby on behalf of those who were “too old”. A long-term concern of the Grey Power organisation in New Zealand, for example, and a strong preoccupation with members of this group, was the erosion of the value of New Zealand Superannuation:

Mrs E *I knew that, but you can't seem to tell a lot of people, you know, they're not figure-minded, and they didn't realise how far they were getting pinched in a lot of cases. You see, old people are just not/well possibly a big percentage are too old, and they've got past the stage of worrying about it, sort of style. But that means that the younger ones in the Grey Power movement have just got to get to work and make sure that that doesn't happen. It's been happening. It's been happening for the last five years, gradually.*

As a woman in her eighties, Mrs E clearly saw an important role for Third Age people in active political lobbying to maintain the level of New Zealand Superannuation. Other members of the group expressed different levels of interest in being involved with political activism. Mrs U, in her sixties, indicated only a mild interest in being informed of current issues and implied that any requirement to exercise the rights of citizenship through political participation could also be perceived as an unwelcome additional responsibility and an imposition by some members of her age cohort:

Mrs U *I think a lot of us older ones don't have a lot of motivation, really.*

Some members of the group were concerned that the local Grey Power organisation may have gained a reputation as a group of “squabblers” and “a lot of troublemakers”. However some members of the group, concerned to protect the democratic right to freedom of speech, considered that it was the newspaper that had taken a stand against Napier in general, and the Napier Grey Power group in particular:

Mr V *Napier no longer has a democratic voice, it's gone. If the paper doesn't want to print it, they won't print it, and they've done that to us (Grey Power) on many occasions, (refused to) report on anything that we have to say or whatever we're involved in. They have got to the stage now where they, if it doesn't suit their agenda, they don't print it. They don't print letters, or they don't print articles.*

Mr R *But if they pick up anything that could reflect badly on us, they're in boots and all.*

This was an important issue considering the prominence among Grey Power's aims of informing older people about current issues and about their rights. Some members of this group had joined Grey Power in order to engage with the political issues at a community level. There was one particular issue that had motivated several of the participants to join Grey Power. After lengthy consultation, and much controversy, public hospital services had recently been removed from the Napier Hospital site, against strong protestation from many Napier people, and resited at the Hawke's Bay Regional Hospital in Hastings, leaving only a small emergency service in central Napier. The discussion showed that, although the decisions had already been made, the hospital issue was still alive for most of these Grey Power members. The discussion also showed that the decision to keep fighting was by no means consensual:

Mr V *Well if there are issues that need attention, it goes back through the democratic process to the membership, and the membership are asked, what do you want to do about this problem or that problem?*

Mrs M *That was how I joined. I joined through when they were fighting for the hospital, and I was very, very, very irate about the hospital situation, and we joined. We joined up when Grey Power started to do something for the hospital. Yeah, I walked to the hospital, arms around the hospital.*

Mrs E *But we didn't get the support we needed though, not by a long way.*

Mr V *Well don't discount the hospital, because you haven't yet lost it.*

Mrs M *I haven't, I haven't!*

Mrs J *I don't think you should turn the clock back, you can't turn the clock back.*

Mr V *Oh yes you can!*

Mrs J *It's flogging a dead horse.*

Mr V *Sometimes the clock should never have been turned forward in the first place, and that was the case with this.*

Mrs C had got involved because she wanted to know more about senior citizens' issues in general, and, like several others, because of the hospital:

Mrs C *I was interested enough to see what was going on, you know to go along to the meetings. Oh and you get more idea of the issues. A lot of us don't understand what is going on until somebody sort of tells you outright, and points of view on things. But the hospital issue was really the main one. That brought us all in, I think.*

It was the opportunity to participate in political action to protect the rights of older people more generally that had attracted Mrs E to join Grey Power. She had felt encouraged to join up locally by the ability of the Grey Power organisation in Australia to muster citizens' support for a campaign against prescription charges:

Mrs E *I joined Grey Power because I thought to myself if they've got that much clout over there, we should be able to do the same here.*

Alison *And how have you found it to be?*

Mrs E *I find that we're just being a lot of pussy-footers, because we're not prepared to put it down and say, that's that, and that's what I want. You know there's eight hundred and fifty thousand of us, around the country.*

Although in fact there were 451,000 people aged 65 and over living in New Zealand at 30 June, 2000, Mrs E was taking a stand and making a strong plea for solidarity and political activism amongst older people. Mrs J, however, had joined for reasons that were economic and social rather than political:

Mrs J *Well Grey Power's a very small part of my life. In the first place, I think I joined because my friend had discounts! So I got a discount book, and I've never been able to use it because it didn't apply to anything much here. I think I thought also there might be some companionship of people my own age. But that didn't work out either, at all.*

The important issue of whether Grey Power is or should be a source of social connection and social support was a matter for ongoing discussion:

Mr V *It's not really a social club, although we would like to see that part of it develop. We'd also like to see more where people are able to help one another, when people are sick and they need someone to look after them, so that Grey Power can look after their own. Also to develop work skills. You know, when you're looking at Grey Power and you're looking at all the old fellas you're looking at lifetimes of experience and that to me seems to be a tremendous waste of potential, and resources.*

Participation in discussion at a political rather than a social level was an important element of senior citizenship for all these participants. Even those who did not necessarily see themselves as political activists were very interested in information and discussion of current political issues. I asked them if they had any other forum apart from the research group for this type of discussion:

Mrs E *Nowhere.*

Mrs C *Nowhere - no, we were also brought up that you do not discuss politics or religion.*

Mrs U *Or money.*

Mrs J *You do learn, don't you, that it's just not done, because it usually causes a lot of argument.*

Mrs C *And we've grown up that way - we're not used to discussing it. That's the point. Now we're trying to again now, and trying to take an interest, and it's not easy - I don't find it easy.*

Mrs J *I don't know whether the older people are more interested in/I know I'm more interested in politics now than I was when I was younger. Is it because I've got more time to think about it, or is it because I listen to talkback? Talkback makes people very interested in politics.*

Talkback radio, Mrs J felt, was a very "powerful" medium for discussion, offering older people information that was not available elsewhere. Most members of the group said they listened to talkback radio, though they also expressed disappointment at finding that there was little opportunity for the expression of views, let alone thoughtful discussion about issues that interested or concerned them. The research group offered these people an extended opportunity to be taken seriously, to tell some of the stories and discuss some of the issues that were on their minds. Like talkback radio, it offered an avenue for participation, but with crucial differences. Perhaps the most obvious advantages of the research group for these participants, and the factors which gave them opportunities to exercise their citizenship as senior people were time, respect and the opportunity to tell their stories and to hear the stories of others.

For Mr V, involvement in the Grey Power organisation had provided a “cause” and a new career which effectively replaced work and kept retirement at bay:

Mr V *Well it's kept me/when I was told that I better go away and retire, I thought, Oh, 'cause I'd spent a lot of my time being really busy, you know, and I was coming and going, and keeping myself flat out, and I couldn't imagine myself sitting out in the garden and that was it. So got into Grey Power. And I had the opportunity, once someone asked me if/they wanted something done so I put my hand up, and I've never stopped since. Sometimes I wish I'd never stuck my hand up!*

The members of this group acknowledged that time spent on involvement in community organisations like Grey Power brings benefits, including a sense of belonging, which involves being needed and feeling you have a contribution to make, the pleasure of relating to others in a social context, and the benefits to health and wellbeing of participation in and connectedness to the community. One disadvantage, however, which can be corrosive of a sense of citizenship for older people, is the feeling of being exploited because of the assumption that older people have plenty of time at their disposal, or the allied assumption that older people will accept low status, even unpaid roles to remain involved:

Mr R *You generally find other people come along and say well, you know, we've got a job for you to do, sort of thing.*

Mrs C *You find yourself doing all these freebies, nobody's ever paid me a cent since I finished at the shop, not a cracker! Oh yeah, yeah. You've got plenty of time, you don't work, do you?*

Mrs U *It's a bit like that with me.*

Mrs C *Your kids give you work too, and/*

Mr R *I think it's a two-way street, though. It's a two-way street. They might want to make use of your time, but I think they believe that they want/that they're continuing to want you to be part of/*

Mrs U *the organisation or whatever it is/*

Mr R *or the scheme of things, you know. They still want you, put it that way.*

Mrs U *Well it's good, because you're with people, you see, too.*

Mrs C saw voluntary work as both a right and a responsibility of citizenship during the Third Age. What she was concerned about was the element of choice, that fundamental component of a sense of citizenship, as well as recognition for the contribution made during their Third Age by senior citizens like her. She did want to be involved, and she was happy to work (she volunteered to phone around the members of the research group to remind them about each week's meeting), but

she was objecting to the ageist assumption that old people will pick up all the jobs nobody else has time for, and she wanted to be seen for who she was, a contributing member of society. She also wanted to be able to choose whether to participate or not, and to choose the level and type of participation for herself. Mrs M too, had chosen particular activities, including voluntary work, from which she derived a sense of wellbeing and autonomy. Her sense of herself as an active and capable senior citizen was strongly linked to her independence, demonstrated by living alone and keeping her quarter acre section “respectable”, and continuing to train and show her dogs, which, as she said, for an eighty-six year old was “not too bad!”.

One of Grey Power’s main goals is to protect the entitlement of senior citizens to an adequate superannuation payment (www.greypower.co.nz). Mr R, an accountant, and treasurer of the local Grey Power group, spoke of the need to clarify the level, and question the adequacy of current and future entitlements:

Mr R *I'm talking about the surtax, the attempt to reduce the percentage of the New Zealand Superannuation as a basis against the average wage. There is a misinterpretation here of the average wage. There is a fallacy here, inasmuch as it presumes that an older couple for instance get sixty-five per cent of the average wage. Now in this enlightened age, for many years women have been part of the workforce, it's not like the old days where the woman's work was in the home and the husband was the breadwinner. It's not the case now, so women, married women and those with partners, as they call them now, are part of that average figure, but a married couple receive only half of the sixty-five per cent of the average wage, so there's quite a fallacy there. These are the pressures that are coming to bear on the older people.*

The argument here is that the average wage is no longer a family “breadwinner” wage, enough to keep a household: setting the floor level of the superannuation payment for a married couple at sixty-five per cent of that wage produces an entitlement of 32.5 percent for each partner, and 42.25 percent for a single superannuitant living alone (Grey Power, 2000). The “fallacy” referred to by Mr R is that a superannuitant receives sixty-five per cent of the average wage, and his argument, a compelling one, is that superannuation set at half that level for an individual married person, and only a little more for a single superannuitant, is inadequate to guarantee a decent standard of living and ensure participation in the community without some form of supplementary private income. Mrs E was also concerned about the failure of the “pension” to keep pace with the cost of living, an issue which affects all older people, but which, as she argued, not all have the energy to contest. While agreeing that older people are vulnerable to economic changes, Mrs J was insistent that they are not alone in that. She refused

to be drawn into the idea of a conspiracy against old people as a motive for her interest in political issues:

Mr V *I think it's because you're an easier mark, and you're aware of it now, as you get older, you're the easy one to take the money off.*

Mrs J *Well no, I don't, I don't feel like that at all, I feel the young people are having a bad deal too. The young people are having a very bad deal. ... We've all worried about a grandchild here, or a grandchild there perhaps, that's out of work, and you just wonder, you know, how their spirits would stay up, and a son-in-law out of work on one occasion, and I know how depressing it can be, the terrible distress of not working. And the young people who've never had jobs, they must feel very useless. So it's not only the old people that are missing out at the moment.*

An area where the views of the participants converged perhaps most convincingly was in their insistence on the right of older people to be respected as senior citizens. The principal aim of human rights, according to *The Social Report 2001* "is to protect the dignity of individuals whatever their status or circumstances" (Ministry of Social Policy, 2001b, p. 56). The status of senior citizens, measured by the respect, or lack of it, shown to older people in New Zealand was a major concern for this group.

Ageism, in the form of discrimination and a general lack of respect for older people, was felt, from personal experience and anecdotal evidence, to be worse in New Zealand than in Australia. Respect for older people could be shown in various ways, according to the participants, but subsidies on public services such as transport were felt to be an important mark of respect by the state for senior citizens. These participants concluded that respect for senior citizens was distinctly lacking in New Zealand; at a political level, because of the government's failure to address the adequacy of the state pension; at a local level, because of the way older people were treated in the street, and generally in the community. The trend away from local and personal to national and technological service provision by banks, government departments, utilities and large commercial institutions was seen as a major barrier for many older people (Joseph and Chalmers, 1999). Mrs J's account of her frustrated efforts to comply with the demands of a "threatening sort of a message saying that if you didn't fill this in and return it promptly, that you wouldn't be getting your Superannuation" conveys something of the sense of alienation and exasperation felt by many senior citizens as they grapple with faceless and depersonalised service systems.

Naming the issues

Physical and Mental Health

Health needs of the older population were a strong focus for this group. It was health needs that had brought Mrs E and her husband to live in Napier:

Mrs E *forty-three years ago from Masterton. We didn't come because we wanted to, we came because my husband was very sick, and he was put under a specialist who was in Napier, and so we thought, oh well, better sell out, so we sold up the business and came up here really for him. From the point of view of the climate, it's very good, especially for us older people.*

However, even if the climate was considered good, the health care environment, especially for older people, was not. A major issue at the time of the interviews, as already discussed, was the loss of hospital services for Napier people. A more overarching problem, however, was access to affordable health services. Several members of the group told stories of their first-hand experience of a two-tier medical system that seemed to be catering for the needs of the medical specialists, transferring patients with health insurance out of the public system and into their own privately funded hospital system, rather than the patients. Those who had experienced delays (two years for a cataract operation) and had to pay extra costs not covered by health insurance felt exploited and “bitter” about the situation. In order not to have to spend years on a surgical waiting list, some people had felt forced into buying medical insurance, but even that did not necessarily cover all the costs associated with so-called ‘elective’ surgery. The interface between the public and private systems and the role of health insurance were not at all clear to most participants, who felt frustrated at their sense of powerlessness about having to wait and angry about having to pay for health care they thought should be free:

Mrs U *Well do you know what I blame? I blame the medical insurance, and I reckon that's a vicious circle. Because you go to these doctors and specialists and things, and they say to you, Have you got medical insurance? Yes, and the dollar signs, I feel, light up their eyes straight away, and they think, Oh good, this guy can go private.*

In fact the subsequent closure of one of the private hospitals in Napier, along with the rising cost of health insurance, and the high cost of specialists' fees, limits the available options still further. Mrs C's story suggests that access to the public health system depends also on the attitudes and advocacy of individual doctors:

Mrs C *I have to admit that specialists do cost you. When they send you too often and you have these specialists every time it's not so funny.*

- Mrs E** *A hundred and twenty-five dollars first visit, eh?*
- Mrs C** *Ninety, I think it was.*
- Mrs E** *Well you're dead lucky.*
- Mrs C** *Anyway I had to have an op, and I said, Well how long am I going to have to wait, and he said, No, no, I'll get you in there by February, you wait and see. And he did. And he didn't push me to go private or anything like that, you know. He knew I had no insurance. I had insurance till you get to what - sixty-five?*

Mrs E had her own very effective solution to the problem of health insurance premiums that rise exponentially with advancing age:

- Mrs E** *You see, at seventy-five they were going to double my insurance for medical insurance, so I simply said, hmm, double, that's just a fraction off of two thousand a year, and I thought about it, and I thought, Oh no you don't, that means if I don't need this for ten years, you've got twenty thousand out of me. To hell with you! I can put it in my own bank. So I said, alright, I'll put the equivalent of that into it each year, and when I came up to have my hip done, it was there to pay for it, but I wasn't telling the orthopaedic surgeon what I was doing. That was my business. When he said to me, have you got medical insurance, I wasn't telling him. That's my affair. So that's exactly why I didn't say, because I'd just put this money away in a compound interest account, and it's building itself all the time, apart from what you put in, and that's the best way!*

By taking responsibility for researching the options and deciding to take control of the situation in this way, Mrs E felt she had achieved a satisfactory outcome for herself, and outwitted the surgeon and the insurance company in the process, all of which gave her evident satisfaction and a strong sense of her autonomy and power as a senior citizen, competent and capable of making her own choices.

Safety and Security

Something that made it difficult for the members of this group to feel in control and to gain or maintain a sense of their own autonomy and power as citizens was the pace and scale of the changes in society that people were struggling to understand and cope with. These participants expressed a sense of puzzlement, frustration and alienation in the face of apparently senseless changes. While there was an acknowledgment that the trend to change for its own sake was not an entirely new phenomenon, a general lack of trust and care and a loss of personal human contact had resulted in a loss of social capital and left people feeling vulnerable and rather bereft, as the following conversation shows:

- Mrs C** *I was thinking about the old-fashioned postman, that you got to know, your postman, and he was a friend, and he did things for you. He was bringing your mail for you. Now they're just somebody that's on a bike going past that can't even read the address half the time, and they're just doing it for the money, as quick as they can get finished, you know.*
- Mrs M** *They haven't got time to say good morning even.*
- Mrs C** *No - the postman in those days, if he saw anyone in trouble he'd get help.*
- Mr V** *Well people cared for one another then - they don't any more.*
- Mrs J** *And we knew where to go - for help. What I mean is, you could go to the post office for this, that and the other thing. Now with all the name changes, it's very difficult to know which are government departments and which aren't.*
- Mr R** *I think I've summed it up quite frequently by saying that in my day you agreed something with somebody and you shook their hands and you both kept to your part of the bargain. Today if you want to reach an agreement with somebody over anything you rush off to the solicitor and have an agreement drawn up. If something turns sour, you rush back to the solicitor, to see if he or she can find a loop-hole in that original agreement.*
- Mr V** *Yep, it's the American way.*

Whether this was “the American way” or a loss of trust at a local level resulting from the movement of global forces and the impact of years of neo-liberal economic and social policies which subordinate human need and “social cohesion” to the demands of the market (Cheyne et al, 2000, p. 235), these participants expressed strong feelings of personal insecurity as a result.

On the one hand personal safety was raised as an issue, especially for children and for the large number of older women on their own, in what is widely perceived to be an increasingly violent and dangerous society. On the other hand this group tended to feel that older people might have an advantage over people of working age in terms of safety and security in their own homes, because they were likely to spend more time at home, and to be willing to join forces with their neighbours in a Neighbourhood Watch scheme to combat crime:

- Mrs J** *I think the young ones aren't so keen on it either. It's in the older communities that Neighbourhood Support seems to be more popular.*
- Mrs E** *But I can't see why. I think they're a bit silly, really speaking, because there's where all this stealing that goes on, isn't it. You have the odd case of elderly folk being broken into, but you don't have the number of cases of thefts and break-ins that there are in the other houses. And that I think is the clue that you've got there; they are not in groups watching each other's places. That's how we do. We're supposed to be just*

talking about elderly people I know, but I think it would be a good thing if it was extended to the younger groups, and all get to work and have groups.

Again, by taking control and initiating or maintaining neighbourhood networks several participants in this group expressed a sense of their own seniority and power. As senior citizens they indicated they were taking a leadership role and setting an example that all citizens would benefit from following. There were some comments to the effect that people who did not join the Neighbourhood Watch scheme or did not co-operate or communicate their intentions well were “too independent” and “difficult”, and others were not seen as trustworthy enough to be included. Other participants had involved themselves in more modest and informal arrangements, and in some, formal and informal, there was an element of reciprocity, so that for some people their Neighbourhood Watch organisation connected neighbours with each other through lawn-mowing and home baking, as well as providing some security. Not everybody was interested in being part of a neighbourhood network in this way though, as Mrs M indicated:

Mrs M *I don't fraternise with neighbours at all.*

Some of the social relationships with the neighbours, where they existed, seem to have been developed out of a fear of crime, with a focus on security rather than friendship, though this was not clear-cut and some were also the source of companionship and social support, the subject of the next section.

Community and Family Ties

Community

In the study of ageing it is common to assume the attenuation of intimacy in older age, with detrimental consequences for the health, social connectedness and “general wellbeing” of the older person (Jerrome, 1993, p. 226). In the context of a society which attaches value “to caring, to sociability and to social success”, and emphasises the capacity to make intimate relationships and to maintain or replace them, loneliness is a stigma. Loneliness can occur at any stage in the life cycle, especially to women at home with young children. Mrs J remembered her loneliness as the wife of a young farmer:

Mrs J *But it was alright for him, he had a cobber out there and different people to talk to. But I was at home, and expecting a baby, and I found it very lonely, didn't know anyone. And this is what you get when you move into a different district, where you've left all your friends, childhood friends behind. But anyway, we got through that, and I had two more, and I first began to meet people when I went to Women's Division and that was lovely.*

Mrs J's stories of her later life, however, consistent with the Eriksonian model of adult development, encompassed "a progressively widening circle of social relationships" (Vaillant, 1993, p. 146). She also spoke of greatly increased confidence in her old age, and it seemed that her social connectedness and her sense of personal wellbeing had increased during the course of her life to a point where in old age she felt a strong sense of citizenship through the achievement of a "stable identity" (ibid, p. 150). Her capacity for connectedness and care, and involvement in a wide range of positive relationships, testified to a social network which had increased, rather than attenuated, with age .

Some of the social implications of divorce and changing family structures are indicated in Mrs C's account of her loneliness when her first marriage ended and she decided to return home to Hawke's Bay. A powerful expectation of being a member of a couple, and a family, means that being excluded from either type of relationship is seen as "a misfortune, if not a personal failing" (Jerrome, 1993, p. 227). Mrs C's story reflects the coercive power of these ideological expectations, and the loneliness she felt as a single older woman:

Mrs C *I'd bought and sold houses and cars and businesses, I thought I was just doing fine, you know, but I was so lonely back here, I think that's what it was. ... So I up and got married again. And it didn't work out very nicely.*

Like many women of her generation who are widowed or divorced or both, Mrs C, having retired from work, was now on her own again, and even though she had a large family of children and grandchildren and a busy life, she, and others in the group as well, felt that loneliness was likely to become an issue again in old age, especially if friends were located in one place and family in another. She was not alone in thinking friendships, especially longstanding ones which provide continuity, were likely to provide more secure and stable social networks for older people than family, and there is some support for this position in the literature (Jerrome, 1993). A discussion with significant social policy implications concerned the 'pros and cons' of older people moving to where their children live:

Mr R *It's the wrong time to shift.*

Mrs C *Oh you shouldn't go, your friends are more important than family those times when you retire. As a couple it mightn't be so bad, but certainly not on your own.*

Mrs J *It depends, you see. I moved down here because I had to leave all my very lovely friends behind twelve years ago, and I do miss them. I've made more down here, but you know, they were rather special.*

Although Mrs J had made new friends after her move in old age, she had not found it easy, and it had required a determined effort on her part:

Mrs J *I remember, I'd go home and write down the names of all the people I'd met so that I could remember their names next time I met them!*

The same difficulty in making friends at an older age had been encountered by almost all the women, who had looked to a wide range of organisations, including Grey Power, in the hope of making new friends. However, few groups had provided the companionship they were looking for:

Mrs G *I'll tell you something that's guilty of that too, and that's Grey Power. Grey Power is actually guilty of that. It came up at one meeting, and someone said, you all sit in there and I sat on my own and no-one came to me. And I admit, that was a very great failing.*

Mrs C *Oh definitely. There's nothing social about it ... and it should be.*

It was evident that belonging to any group, whether age-segregated like Grey Power, or age-integrated, was no guarantee of friendliness or friendship. Mrs C explained how the same problem had existed in her church until a successful strategy was implemented to nurture the social connections between people:

Mrs C *I used to go to church on a Sunday and go home again. And if you're on your own and you've got a whole weekend of talking to nobody you know, sort of thing. But now we have family groups that are just - mixed up family groups. They chose them in a strange sort of a way in lots of ways, and we've stuck together and now you'll go outside our church, people are talking everywhere. It's made all the difference to people knowing somebody to begin with and then they know another group.*

Another view was that it is the responsibility of the individual to make connections with others. Mrs E had had a powerful role model in her own mother, who was ninety-three when she died, and "busier than I was", she said. Jerrome (1993, p. 251) says that despite participation in and enjoyment of club activities, "membership is agreed to be a fallback position: a solution to loneliness and inactivity, better than staying at home". The participants in my study agreed that there were opportunities for older people to make social connections, even though not everyone chose to participate in them:

Mrs C *That's all there is to it, you've got to put yourself out and do it, you know. If you sit at home, you'll stay there, by yourself.*

Mrs E *Well that's right too.*

Mrs M *That's what I do, stay home.*

When asked whether she stayed home from choice, Mrs M replied that she was “not a going out person”, but added, “I go if I’m invited”. She had been put off driving, especially at night, by some frightening experiences, and this had curtailed her mobility and her opportunities for participation. For Mrs U, who had lived in the area for forty years with her husband, both family and friends were important to her sense of belonging, and to think of moving and “starting again” would be too disruptive to those networks. Her account shows how the quantity as well as the quality of connections helps to make a locality “home”:

Mrs U *You make friends, I feel, through your interests, and thus it would mean uprooting all that I suppose. You'd have to start again really, and I'm not a confident person, and I'd find that very difficult. I think, when you've worked in a place, a public place like I did, you know a lot of people to say hello to, but it's just to say, hello how are you today, and you keep on your way, you know. But it's still faces that you sort of know I suppose. Everywhere you go, you usually see somebody that you're familiar with.*

Napier, the participants felt, was a good size for making connections, in that it was not too big, although people’s experiences of meeting their neighbours varied widely. Mr R’s account of his involvement in his neighbourhood confirms Jerrome’s (1993, p. 251) argument that “men’s friendships tend to be sociable rather than intimate, and focused on shared activity”, while women look for friendships that are more intimate, more extensive and more meaningful:

Mr R *As has already been spoken about here, it's difficult to get new friends and acquaintances. That's - as simple as that. I'm deputy co-ordinator of our local Neighbourhood Watch. That's sort of comforting. But at the same time any neighbour who comes in, I'll make myself known to them, but make it quite clear that we don't live on our neighbour's doorstep. However, if the neighbour feels they need help, they can consider us as the first ones they call upon. But I like to sort of know the people immediately around me anyway, you know.*

Because of the informal and voluntary nature of friendship, finding new friends in older age can be hard and the participants in this group expressed this difficulty:

Mrs E *You're very lucky if you get a lot of people close handy to you that you get along well with, you're very lucky. It's very hard.*

In spite of the difficulties, however, Jerrome (1993) argues that women do retain their capacity to make new friends throughout their lives, as indeed it seemed Mrs J had managed to do, even though she had moved to be near her family.

Being connected to the community through a shared history was another important theme in this group, though it would be sad if a nostalgic view of the past seemed

to propose large-scale disasters as the only effective means of building social capital:

Mr V *Family ties are very strong, and I know that they're strong for Napier people, and they always have been. And I think the old earthquake had a bit to do with binding people in Napier together. Unfortunately they don't come together enough.*

Social connectedness and “community-building” generativity (Vaillant, 1993, p. 150), was a strong theme in this group, expressed in various ways. Some participants were evidently struggling to achieve the level of social connectedness they desired. Grey Power had been seen by some of them as a potential source of friendship and meaningful social connections, but had not met their expectations in this respect. Neither had other community organisations and there was a level of dissatisfaction about that lack. For other participants their social connections were strongly centred in family relationships.

Family

Though it is difficult to separate community and family ties, for many of the participants in this group, family ties took priority over other relationships:

Mrs J *But I did move down to where I had two daughters and seven grandchildren, so that has made a difference. And the thing is I think people often move to where their family is because it's so expensive and difficult for the family to go and see to you when you're unwell.*

As Mrs J remarked, age, circumstances and lifestyle, as well as the quality of the family relationships, are important factors in determining whether moving to be near family will be as successful as it had evidently been for her:

Mrs J *Because you often have to balance friends against family, which can be/ I've heard of other people too, who've had to balance between family and friends, and decided on staying with their friends. It probably depends on family circumstances and how occupied your family is with their own life. In my case I came down to seven young grandchildren, that I was able to take part in their lives. But it could have been different if they had been older as they are now, and so I don't see so much of them. But I still see a lot of my daughters. It worked out well. Although as they are both working, it means it's only at weekends, more or less, but still, one of them rings me every day.*

Mrs J's story of her move and her relationships with her daughters and their families emphasises the significance of the mother-daughter relationship. Jerrome (1993) argues that this relationship, as the most significant dyad in our culture along with that of marriage, is the basis of important reciprocal exchanges over time. This perspective of the female caring role in the context of a dyadic

relationship emphasises a daughter's caring for her elderly mother as one in a series of acts based on reciprocity (ibid). Mrs J's story confirms the reciprocal nature of the relationship between mother and daughter, and also indicates something of its subtlety and complexity:

Mrs J *Yes, well the younger daughter who had quite young children - about eighteen months - she said to me when I stayed on for two years up there, after my husband died, Oh, I think it's such a waste your being up there. So I thought, Oh well, she feels that, you know, I'm losing out on the contact with grandchildren. And also I think she probably felt that I could be/well I don't think she thought I could be useful, but she might have. She wasn't putting herself first really. I think she was just thinking, what a pity not to see more of the grandchildren.*

The kind of support that Mrs J reported receiving from her daughters and giving to them and to her grandchildren is the sort of informal intergenerational family transaction that mostly remains hidden within the family. Mrs J's account supports the notion of the reciprocal nature of family caring and the interdependency of family members on each other (Johnson, 1993), and adds details about the quality of the relationships. Johnson (ibid, p. 262) argues that "old age is the classic example of the giver receiving back reciprocal gifts, presented and received over time". Although Mrs J said she had not really done any "community work", what she described was "family work" (Jerrome, 1993, p. 239); a labour of love (Graham, 1983; Ungerson, 1990); and an intergenerational exchange or "expressive interdependency" (Kendig, 1986, p. 85):

Mrs J *Well you know, I haven't done any community work, really, but my time's been very filled with grandchildren. I did a bit of coaching for them. I was able to help them with their School Certificate work and things like that, and yet I was only a primary school teacher. I had to teach myself how to do the maths for School Certificate. I had been acquainted with New Maths at primary level, but it was hard work because I'm not a mathematician by any manner of means. But he was having such poor marks that he was going to fail, and - got him through! Quite nicely. It was wonderful! I felt very proud of it. That was quite an accomplishment for me because figures, to me, are so difficult. It was my worst subject at school.*

For Mrs J, a former teacher for whom education was highly valued, the coaching offered the opportunity to give of her time and energy, to use her professional teaching skills, and to engage in new learning herself. There was also the opportunity to build a special relationship with a loved grandchild. For the parents of the child, it may be that they would otherwise have had to pay for private tuition for their son to help him pass his important public examination. Social capital is difficult to measure using current indicators because they do not "capture" either the nature or the quality of informal relationships (Ministry of Social Policy, 2001b,

p. 88) such as the one between Mrs J and her grandchild. Other intangibles include the longterm value of educational success for the grandchild, the strengthening of the bond of affection between grandchild and grandparent and the psycho-social gain in confidence and self-esteem for the older woman. Mrs J's story conveyed her pride and her sense of herself as a "generative person" (Vaillant, 1993, p. 151) whose wisdom and valuable life experience had been of unique benefit to her grandchildren (Jerrome, 1993).

For Mrs M it seemed that family connections were less important, though in answer to a question about the importance of family involvement in her life, she emphasised both her own independence and autonomy, and her daughter's evident concern and care in cooking her mother a meal four days a week. Mrs M also expressed her pride in her newly acquired status as a great-grandmother. Mr R, by contrast, had two children but no grandchildren, a situation over which he acknowledged he had absolutely no control, but did feel as a lack, perhaps in terms of his own "generativity script" (McAdams and de St Aubin, 1992, p. 1006), perhaps more by comparison with his age peers, or with other members of the group, who were all grandparents. Jerrome (1993) has argued that siblings grow closer to each other in later life, and indeed Mrs U confirmed that this was the case for her. She was seeing more of her brother lately, she said:

Mrs U *I think we've got closer as we've got older. He lives down in Trentham, and I think as we get older you know you sort of go back to your roots a bit, you know.*

The group agreed on the importance of "family ties" in old age, though what they meant by that varied from relationships with adult children to forbears to a sense of belonging to a particular locality, and even included childhood friends who were like family, all of which emphasises the importance of continuity and security in relationships in older age:

Mr V *Don't you think though, as you're getting older your family ties get stronger? How many would be here that have been out of Napier for a period of time, and come back to your roots? And fit back into your family ties. I know that that's the reason, well it's one of the reasons I'm back here, because I had twenty-four years away, and that was another life somewhere else, completely different altogether. But when the chips came down you just scurry off back to where your family roots are, and I think as you get older, those ties get stronger, with the family that's here, with the family that's pre-deceased you.*

An important point was made about the loss of longstanding friends who have provided companionship and continuity, and the value of having friendships with

younger people as well, so that the losses in old age are not overwhelming. Friendships with people of different ages can be of mutual benefit, as the comments show, with older people able to offer wisdom, life experience and support, and younger people offering conversation, companionship and intimacy:

Mr V *Yes, and you were talking before about friends when you were younger, and they're pretty important friends, you know, but unfortunately when you come back after twenty odd years, most of the faces are gone.*

Mrs J *That is a point of getting old too. As you grow older, some friends get not with it, some friends die, and you've really got to be sure that you've got younger friends coming on all the time, don't you?*

Mrs G *Well that's where a lot of your older people, I look to them for guidance and advice. They helped me with the kids, and I look on them as my family, people around. You can do the same for other people, underneath you.*

Material Standards of Living

A person's standard of living concerns their physical circumstances, the goods and services they are able to consume and the economic resources that enable them to exercise choice about how they live (Ministry of Social Policy, 2001b). Despite a working-class background, an abusive marriage and "bad luck" with property, Mrs M had managed to make up for what she had "missed out on":

Mrs M *I had a bit more than half a share in a property, and I took myself on a trip! By that time my eldest son was in the Navy, and my sister took my two girls, and my brother took the two boys, the younger ones. And I went for a working holiday to Australia. And had a ball! I lived some of the life that I'd missed out on. It was adventurous but very/not ... like you other ladies have had.*

Mrs M's story of her holiday working as a barmaid in Australia had been the adventure of her life, resulting in a romance and eventually a blissfully happy second marriage. The telling of this story was a consummate performance of senior citizenship. It engaged the audience as appreciative witnesses to Mrs M's jubilant reclamation of the "adventurous" and romantic life she had "missed out on" earlier, and it affirmed for her that she had indeed led an interesting and worthwhile life, in her own estimation, and in that of her listeners, in spite of very limited means and a miserable start to her life. Her story conveyed her success as a senior citizen against the odds.

Mrs E's aptitude for business, and her husband's health problems meant that she had always taken a large share of the responsibility for the family's financial wellbeing, and when he became unwell she had taken over entirely, investing in

property to provide a “worry free” retirement income for her and her husband. Mrs C was also successful in business. A trained teacher, she had married and had eight children. Her story illustrates the extent to which, however resourceful and hardworking she may have been herself, her income and standard of living was linked to that of her husband, a gambler and an alcoholic, for better or worse. However, when her marriage ended with the loss of the house which had been not only her home but her “security”, she managed her assets surprisingly well:

Mrs C *So I came out of there quite nicely thank you, just about owning my own home, and a two year old car, and didn't realise how well I'd done.*

By contrast with the women's accounts of success in spite of caring work, intermittent paid work, and no opportunity to plan ahead, Mr R had had continuous employment as an accountant, which enabled him and his wife to plan for their retirement and a time when they might not be able to drive a car:

Mr R *It was being mindful of that possibility that caused us to move to Taradale from out in the country, to be able, if either one of us or both of us lost our licence, we could just walk to Taradale. You see we're within one k(ilometer) of the shopping area in Taradale. We actually planned ahead even further than our action. In the event we purchased a section some years before, but we were going to build some years later than what we did, but the Government decided to bring in goods and services tax, so we decided, well, housing won't be any cheaper than what it is now, we brought our retirement plans forward by about ten years.*

The group's long and detailed discussion of retirement living options for senior citizens explored the close relationship between income, physical environment and safety and security. Their main objection to retirement village options was based on financial considerations. The main attraction appeared to be “peace of mind” and security. The conversation emphasised the considerable power that many older people hold as relatively affluent consumers with a range of choices, as well as the emotional and practical difficulties they face in making a choice. The participants were interested in exploring and expanding the range of options available for older people in order to maximise their citizenship rights. Mrs C, for example, had no intention of moving for some time, if at all, but had her name down for a retirement village ‘just in case’:

Mrs C *I think the attraction in the (retirement) villages was/see my neighbour was robbed next door, and that scared me stiff. So I put my name down. They were building it at that stage, and I got over it after a bit, and two or three times since they've written to me and said am I still interested and I just say yes. At least if your name's there you can do something, but if it's not, you don't have to.*

Mrs G's list of advantages (amenities, health services, company, aesthetic appeal, and proximity to services) and disadvantages (restricted privacy and space) of 'retirement homes' emphasised the tradeoff between a pleasant, secure, maintenance free living arrangement and the loss of autonomy, power and certain rights, such as the right of a homeowner to privacy and control:

Mrs G *But you've got some good retirement homes too. Dad's in a neat one. His is like an apartment. You've got a hot swimming pool down there. We can go in and use it too. Tennis courts, all the sports. You need to have your own space if you don't like being told all the time you can't do this, that and the other. It would drive me up the wall. But on the other hand, they've got a complete health team there. We can go in and have a meal when they have it. They've always got someone playing piano, singing and whatever. It is a home away from home, and I actually said, right, now when Dad dies I want this place. I'd come and live there tomorrow. Because it'd suit me, nothing to look after. And it's lovely. Close to everything.*

There was discussion of both public (footpath maintenance) and private (retirement village buses) attempts to cater for the special mobility needs of older people in retirement facilities which are often situated at some distance from local shops. The size of retirement accommodation was also an issue and participants argued that very small dwellings do not suit all older people. Additional issues raised were loss of autonomy and identity, loss of continuity and familiar surroundings, and loss of independence, especially if older people were not able to choose their own surroundings:

Mrs G *Generally you say your children are gone, you need to go in a smaller unit or whatever. Well I find that, from what I've seen, does not work out. I don't think we should/we, the Government, should push people into these little boxes and whatever, because they don't have the space, and they feel, that's their last bit, that's it, they need a bit more space to be recognised as what they are, you know, do a bit more.*

Mrs M *I had a friend of mine, a couple of weeks back, just say exactly those words. She'd been moved out of a unit, an individual unit somewhere there. Anyway her family had moved her into one of those units in Taradale, and she told me on the phone that she felt as if she'd had all her independence taken away from her.*

The discussion highlighted the range of lifestyle choices available to Third Agers enjoying a time of wealth, health and leisure (Laslett, 1989):

Mrs E *It's strange you know, because a lot of people have gone and bought units in those places and have still got their own cars and everything and drive out and go away for holidays. They've bought places so they can do just that. And we've got a number of them playing golf, living in the retirement homes.*

Neither the costs involved in buying into a retirement village nor the costs of long-term care were well understood by members of the group. In fact the latter can not exceed \$636 per week at the time of writing. Costs above this level are met by a government subsidy. There was a strong feeling amongst members of this group that the retirement village industry is exploitative of older people, and the government neglectful of their needs. The focus was on the citizenship rights of older people; the right to protection from exploitation, and to government-subsidised long-term care that did not necessitate people selling their only asset, their home, and having to “eat their money”:

Mr V *It's a real growth industry, and they're only getting bigger and bigger because the Government's reneged their responsibility to take care of the aged as they get older.*

Mrs E *Well that's right, that's the asset stripping.*

Mrs U *And they're very expensive, aren't they ... like rest home care and what not?*

Mrs C *Well over five hundred, and a lot of them are right up to a thousand. And where does it come from?*

Mrs U *Which is scary because they just eat their money don't they?*

Group members were also concerned that some retirement village options open to older people may be more complicated legally and less secure financially than they appear to be. Residents or potential residents may have difficulty getting their money back if they wish to leave; they may lose their money if the project fails; and they may be subject to unscrupulous practices by retirement village owners. The focus was clearly on the rights of senior citizens to advocacy and to legal protection from harm, especially in this context, from financial abuse.

The following discussion indicated strong resentment among members of this group about the subsidised residential care available to elderly people who meet the (asset-tested) criteria, on the grounds that it unfairly advantages people who have not saved enough to pay for their own care, and disadvantages those who have worked hard to accrue assets, usually in the form of a house, to leave to their children and provide a ‘nest-egg’ for their old age, only to find it used up on expensive rest home care. Unless the house is protected by a trust it can be sold and the proceeds, (excluding \$6000 and the cost of a pre-paid funeral) used to pay for the home-owner’s residential care. Although it does provide security for the least affluent, as Mrs J suggested, the policy was considered unfair to other groups. It was unpopular with this group, who felt that their assets, representing

their life's work, should not be used to pay for their own long-term care:

- Mrs C** *Well I visited an old lady the other day, out in (a rest home) and she said to me, they pay everything/they pay us you know. And of course she'd come from a council flat. So she had nothing. And she said, I don't pay for my hairdos, they pay that. And they give us so much every week. And I thought to myself, yes, bloomin' heck, if you've got nothing, you get it all!*
- Mrs J** *But it is security, isn't it? The thing is, you like to leave something to your family, I suppose, but it is security, you know you're going to be looked after, don't you?*
- Mr V** *But what does your life's work mean, if they're going to take it all off you?*
- Mrs J** *Well it encourages you really to go for lots of trips overseas and really spend up and enjoy yourself.*

A primary determinant of the standard of living enjoyed in old age is the amount and type of paid work available over the course of a working life, determined, at least in part, by training and education, which is discussed in the next section.

Knowledge and Skills

As in all other social domains, this group had had variable access to educational opportunities. The major variations were between cohorts, with, in general, younger members of the group enjoying more years of formal education. Three members of the group had professional qualifications, gaining them access to higher status work, higher rates of pay and generally a higher standard of living than those who had not acquired qualifications to tertiary level. There was also, however, a gender difference, so that qualifications were less critical for men, especially if they were of an age to start work during the post-war years. The following conversation between two women in their eighties indicates both the limited career opportunities that existed for young women of their generation, and the long-term effects of poor health, another variable which could limit job opportunities. Mrs M described her life experiences as "very insignificant":

- Mrs M** *I came from very poor people, and I can remember, when I started to work, it was about nineteen thirty-five, and the only work I could get was housework. And I earned seven and six a week.*
- Mrs J** *I worked at housework while I was waiting for exam results. If I passed, I could go on (as a teacher) if I didn't, I'd stay and do housework. And I worked for six weeks, and I got thirty-six shillings. That was six shillings a week. But I was useless, I know that.*

Mrs M *Well I always wanted to be a nurse, but I wasn't robust enough. I remember my mother took me up to the Napier hospital, and I'm not sure who the matron was, I couldn't remember, but she turned me down because she said I wasn't strong enough. I had had rheumatic fever when I was young. And apparently that's a no-no, though I'm going very well now.*

Mrs G had wanted to go nursing too, she said, and regretted the long-term employment consequences of failing to complete the course.

Paid Work

Involvement in the labour market is a primary determinant of living standards, participation in society and social connectedness, confidence and mental and physical health (Ministry of Social Policy 2001b). The Grey Power group's work experiences were as diverse as in every other social domain, reflecting a wide range of cohort and gender effects as well as individual differences. Mrs E, for example, the eldest of six children, recalled leaving school to start her first job, working in a hotel during the Depression when jobs were scarce, "like hen's teeth". Mrs M, of a similar age, had also finished school at a time when the career choice for a woman was often limited to housework or marriage:

Mrs M *I didn't work very much, there wasn't very much work going when I was in my teen years, it was Depression time, and times were very hard. My parents were really struggling, you know. And it must have been before thirty-five when I was working, because I got seven-and-six a week, and when the first Labour government came in Michael Joseph Savage was the Prime Minister, and they upped my money by two and six a week, and I thought I was on the seventh heaven. I didn't have a coat, and I can remember I could afford to buy a coat ... for seven and six, and I thought I was Christmas! And then I got married, very young. I think I was nineteen. And then I had a baby, within nine months - and (after) three months of that existence I knew I'd made a gross mistake, but I stuck it out, because my mother said I hadn't tried hard enough. And five children and eighteen years later, I walked out.*

After leaving her marriage Mrs M worked in a shop, from "nine to five", and her mother looked after the children. Later, finding it impossible to keep the job and care for her sick mother, she found work which she could "sandwich" with caring for her mother. With a succession of unskilled or semi-skilled jobs fitted in around her caring responsibilities, Mrs M had no opportunity to save for her retirement.

Mrs C, by contrast, had come from a reasonably affluent "professional" family background and had trained as a teacher herself, but she had had eight children, and, like many women of her generation, had to be extremely resourceful to survive. At a time when her husband as the breadwinner was expected to provide for the

family's needs, his unreliability due to his alcoholism meant she had to find extra work to make ends meet:

Mrs C *I used to make all the primary school gyms for one of the shops too, and that's when I had all the kids. And I had a little sewing alcove where I used to do it, and I was never in there when my husband came home. He did not approve of me working. The fact that I had to feed and clothe the kids was immaterial.*

Mr V had left school at fifteen, without qualifications and against the wishes of his parents, but at a time when jobs were plentiful, at least for men. As a result Mr V, like many men of his cohort, had had a string of interesting and satisfying work and business opportunities. Though he had experienced redundancy, he had never been long out of work, until health problems forced his retirement:

Mr V *But in the end the old diabetes caught up with me, so I had to pack it in really. I was told, go away and retire. So here I am.*

Mrs U had also retired, although her work, at least after she left a job in a government department to "start a family", consisted of unskilled or semi-skilled work which she fitted in around her husband's shift-work, and the needs of her children and her employer:

Mrs U *I gave up work to be a mother, and then I've done grape picking, school cleaning, night filling at supermarkets, worked as a checkout operator at Deka. They still occasionally call me in, but not much, you know. I'm never called, of course, when students are available. It will be interesting to see if they want me this year. I don't know what their cut-off is.*

Mrs U appeared to accept without rancour the fact that she would be asked to work only if students were not available. In addition, she seemed to think, in spite of the existence of legislation against age discrimination, that whether she was called up to work or not would depend on her age. Although the work experiences of men and women, and people of different cohorts in the group had been markedly different, the opportunity to work had been a key factor in their social connectedness. Their sense of themselves as citizens who had had the opportunity to exercise their citizenship through work of their choice had left a lasting feeling that they were special:

Mr V *What was available in the days all of us were young was plenty of work, and I think you hear a lot of young people today say we had the best times. And I'm sure we did. And I don't think it'll ever come back again. It wasn't so much the work, as that you had the choice and the opportunity.*

The women also looked back on times when they had had a sense of being valued as citizens for the work they could provide:

Mrs J *But the time (Mr V) was speaking about when there was no bother getting work, people were actually begging you to go to work, weren't they? Asking married women to come back to work. They were actually short of workers.*

The fifties and sixties were remembered as a time of much greater equality than now, with work available for everyone. This enhanced the participants' sense of themselves as senior citizens who had contributed to society through their work, and in turn been respected and valued for their contribution. By comparison they felt that their children and grandchildren had fewer job opportunities and therefore fewer choices about where and how they would live, which in turn had social consequences for other family members, especially grandparents:

Mr V *Now, you don't have the opportunities nor the choice, and I feel very sorry for the youngsters today, because there's a lot of pressure on them. And it's splitting families badly. Well I know one of my kids and the two grandchildren are way the hell over in Perth. Well you can't go and see them every month, and I know of many people who have the same problem where their kids have had to go away overseas to get work.*

Mrs C *Yes, I had five of mine overseas at one stage - two have come back, there's still three. It's all work, that's all.*

Mrs J *But the wages are very good, aren't they? I think, you know, they do find - I have grandchildren working here, and grandchildren in London, and it's just shocking the difference in what they are paid over there, tremendous wages.*

By comparison with the work experience of the participants, their children and grandchildren were struggling with either too little or too much work in a casualised, part-time labour force. Although technically illegal, discrimination on the grounds of age, and ageist attitudes were felt to be a real issue, and the discussion emphasised the rights of "older" workers:

Mrs J *I'm wondering too, I think sometimes the older people, the forty year olds and the fifty year olds, they're looking at employers that are much younger than they are. And I think the younger employers perhaps don't like dealing with older workers.*

Mrs C *They don't like dealing with anyone with any experience. Because they want to be able to tell them what to do and how to do it. They don't want anyone back-chatting and saying there's a better way to do it.*

One member of this group was still in part-time paid work. His job was important to him and took priority over other commitments, such as his voluntary work for Grey Power, affording him an obvious sense of satisfaction. Continuing to fulfil a

valued, and paid, professional role enhanced his seniority and his opportunities to exercise his citizenship, both through his work and as a consumer.

Both men and women in this group held traditional views on women, work and the family. While acknowledging that changes have taken place in society, indeed in their own families, in family structures and in relations with the labour market, their comments reflect a strong desire to defend the traditional family with the father as a full-time breadwinner and the mother a full-time housewife:

Mrs E *A man should be able to earn a wage that he can keep his family and kids.*

Mrs U *A lot of women have taken on a man's role, today. A lot of the young women are taking on a man's role.*

Mrs C *I still like to think the man's the head of the family. Plenty of women don't any more.*

It was paradoxical that even in the light of evidence from their own stories about the injustices and inequalities of the patriarchal nuclear family the group members maintained their belief in the traditional structures and “family” values. This belief in the desirability of the nuclear family, according to Bittman and Pixley (1997, p. 14) is part of the “myth of the nuclear family (which) does not perish when exposed to the cold light of contradictory evidence”. The gap between these “normative expectations” of family life and the real experiences of many of the people in this group is a measure of the extent to which equality and substantive citizenship have eluded women of their generation. However, it was suggested by members of the group that the feeling of no longer being “needed” in retirement was likely to be more of an issue for men than for women, and it may be that this is directly related to the quantity and the quality of their social connections, as well as to their work, before retirement. The two men in this group were both office-holders in the Grey Power organisation and both had expressed a reluctance to retire from work. By contrast the women, even if they had professional careers, had relinquished them already, sometimes several times over, in favour of family commitments. Both men had been continuously in work since they left school, except for short periods of redundancy or between jobs. The women had spent shorter periods in the workforce and most had spent extensive periods caring for children, a sick spouse, and/or an elderly parent. Indeed some were still involved in caring for grandchildren. It is likely that the men’s main interaction with the community has been through their work or through their wives, whereas the women have made more varied connections, often through their children’s activities, or voluntary work, and built up a network of relationships which are not dependent

on involvement in paid work. The women had a wealth of information about what was available in the community and were interested in a range of activities, many of which combined physical or intellectual activities with relationship building: card games, scrabble, walking or tramping with a group.

There were striking differences between the men's and the women's attitudes to retirement and to Third Age activities, with the men fearful of the extra leisure time they would have, and the women keen to suggest physical activities that would keep them (the men) busy. Grey Power involvement represented voluntary work and community activism for the men, while for the women it represented an opportunity to be involved in specific community action such as a protest march or a meeting, and a search for friendship and companionship. The women's voluntary work tended to be focused elsewhere, on welfare services like meals on wheels or church initiatives.

Culture and Identity

Naturally the members of this group expressed the variety of cultural values and practices which had been passed on to them by their families and the social world in which they had grown up. Napier "born and bred", Mr V identified himself as a person of Maori descent (as opposed to Maori ethnicity), a citizen, and an advocate for the geographical area with which he allied himself:

Mr V *Origins: Maori, quarter, half Irish, and quarter English. My forebears on the Irish side came to New Zealand in 1841, to Auckland, on my mother's side of it. The other side came through the Bay of Plenty. So we've been here for a long time, we're fairly proud of the district, and consider ourselves to be spot-on citizens, and always make sure that we try to do the best for our area.*

Mr R, who had lived for more than forty years in Hawke's Bay, defined himself in terms of his professional career, emphasising the close alignment of his sense of himself as a citizen with his continuous relationship with the labour market.

Mr R *I'm a chartered accountant, have been so - member of the Society or Institute now as it is called - for forty-two years.*

Hard work and a "hard life" were recurring themes in several of the women's stories, and there was ample evidence of the gap between a belief in the institution of the family and "happy families" and their actual experience of inequality within the family. Within a deeply-rooted cultural tradition the ideological sexual division of labour and the hierarchy of the patriarchal family structure is maintained (Adkins and Merchant, 1996) into old age, even when a man does "woman's work"

(because he does it “properly”):

Mr R *As far as my upbringing and values are concerned, I would like to think that I had developed some of my own over the years, but I have to really give credit to my parents I'm sure. I think parents play a big part in the passing on of values to their children. And a reflection of that is the lack of discipline in today's society. Yes, and today whilst I will not interfere in the kitchen at all, in fact I'm not allowed to, I'm able to and can sort of “pig in” when necessary. My wife was very ill about eighteen years ago, and of course I had to run the house. And it was run - properly.*

Another set of cultural traditions which reflected deep, and enduring, gender divisions was evident in various graphic accounts of the harsh discipline routinely meted out to children. Both men in the group felt their discipline at the hands of their parents had been fair, and they aimed to pass on those same values to their own children. While Mr V valued his parents' stern discipline, and his father's values of hard work and stability, he also felt a sadness about the suppression of his “Maori side”, whose values had not been passed on so assiduously, or at all:

Mr V *The Maori side of it really didn't come across too much because of some of the background that Mum had had in her area. The Maori side of it, they had treated her badly and she really wasn't all that keen on. I used to go out in the sun and get burnt and she used to scold me because she'd say, Look at you, you're getting burnt, you're just like a Maori, and I used to say Well, I am Mum, you know. And when I look back on it I think it was a little bit sad really.*

Some of the women had experienced harsh discipline as well, and, after listening to others in the group, Mrs M said she had had it “really really tough”. Her voice choked with emotion as she told stories of her early life. However, she had emerged from a miserable childhood with a determination to refuse the kind of life her mother had had, as well as to “make it up” to her mother as best she could. She had certainly learned endurance:

Mrs M *But never mind, we have to be overcomers, and I think the hardships that I've endured have helped me to be an overcomer. And I have good values, I think I have anyway. Yes, and I learned from that lesson because I got married, and I always said, I used to say to my mother, I would never put up with what you put up with, the minute that happens, it's out the gate, and I carried that out to the bitter end. But I didn't live like her. I didn't ever endure what she did.*

Mrs C, by comparison, remembered an early life of relative privilege. Looking back, she realised the far-reaching effects that her parents' educational, social and economic standing had had on her own life:

Mrs C *I didn't know anything about any Depression, we never went without anything. We didn't have a lot of it. Mum was very careful, which has rubbed off on me, thank goodness, because I had to be very careful in later years - at least I could survive. It was really a pretty easy life when I listen to you other people. They were strict parents, and strict at school too, of course, but Dad was one of the kindest souls. We were expected to take on a professional job, there's no question about it.*

The values and attitudes of the family her parents established had evidently provided a powerful model for their children, and for Mrs C, especially in terms of family stability and education, that model remained ideal. In her own active, healthy Third Age, Mrs C was admiring and affirming of her parents' values and aspirations and had adopted them as her own. The stories of these participants illustrate the long-term effects that parental values and childhood experiences can have over a lifetime in helping develop a sense of identity as a valued person with a contribution to make as a citizen, and in old age, as a senior citizen.

Physical Environment

There was a strong sense of loyalty to the city of Napier, especially amongst those who had been born in 'The Bay'. Mr R planned to stay in the Napier area in his retirement years primarily because of the pleasant rural environment as well as family ties. His comments indicated that he had chosen Taradale above other viable and agreeable retirement options available to him:

Mr R *I'd like to stay in Taradale, because it's closer to the rural scene - about the only reason. Well no, that's not the only reason, because our roots are here. We've got a very close-knit family. There's no reason for us to leave here, and say go up to Tauranga.*

For Mr V it was hard to reconcile the place he had grown up in with the city he felt had been left to "run down quite a bit". He felt strongly that changes to the local built environment had been driven by economic rather than social imperatives:

Mr V *You know, if you walk down the Parade now even, you've got difficulty seeing the sea! Well I mean that's a bit stupid isn't it, because you're a seaside town, and that's one of your big assets. ... Well everything there is geared to money. There's no goodwill on that Parade left, I don't think.*

He felt that the changes to the city that had taken place over the years were not to the advantage of the citizens and indicated a weakening of the democratic process. It was this sense of a loss of control over the streets and services of his own city that had driven Mr V to get involved in Grey Power, and to become an activist for

Napier, campaigning hard against the removal of the hospital to Hastings and the Napier/Hastings amalgamation proposal, and working to motivate people to “get together and stand up for themselves”:

Mr V *There's nothing for all the people. I would say, yeah, I'm a bit disturbed about the direction Napier's going. There's things that have been put in place without consulting the people any more. I think that the job (of) Town Clerk (being) replaced by a CEO was a very bad move on Napier's part. Because he would appear now to have a little bit more power and swing than the mayor and councillors. He can override the lot. So I don't know what they're going to do about it, other than the same old thing of everybody's got to try and get together and stand up for themselves and tell the Council that they're just not doing the right thing by the people. They've got to come back and they've got to restore a bit of democracy.*

Mr V, as the local Grey Power spokesman, was passionate in his advocacy on behalf of older people. True to his leadership role in Grey Power, Mr V was committed to political change, in local as well as national government. Other members of the group were also not happy with the way the city was being run, but expressed a desire to be “positive” and felt there was a fine line between constructive criticism and destructive negativity about the city and the region.

Summary

This group of people spanned a greater age range than any other research group. Their stories would therefore be expected to reflect a marked heterogeneity in terms of their experiences in all the social outcome domains, and they did. The differences were particularly marked in terms of their experiences of the labour market, with an abundance of work available for the men reflecting the experience of their cohort, and much greater variation in work careers for the women, though their working lives were all much shorter and had been interrupted by periods of child-rearing. In spite of earlier experiences, especially for two of the women who had left abusive marriages as a result of extreme insecurity and inequality, the group members (except for the youngest, in her early fifties) assumed a paradoxical preference for the traditional division of labour and the family model of the male breadwinner and the female housewife.

The labour market was an important source of status and power for those who had professional careers, and/or stable work careers. The welfare state, especially the measures introduced by the 1935 Labour Government, were remembered with gratitude and a sense of wonder by Mrs M, who expressed the reverence for Michael Joseph Savage, the Prime Minister of the time, common to many working-

class people of her generation. However, talk of the contemporary welfare contract in this group, particularly in terms of superannuation and health care, tended to promote the rights of the “welfare generation” (Thomson, 1991, pp 212 - 215) to special lifelong protection ahead of younger generations. In spite of this emphasis, concern was also expressed for younger generations, who participants felt had inherited a more difficult and dangerous world than their own. The group acknowledged the specific difficulties of younger people in their own families, but felt that younger people in general, especially “unmarried mothers”, and poor older people like the woman who “had come from a council flat so she had nothing” did not deserve any special claim on the welfare state. They had no desire to underwrite such indigence: indeed, they said, they themselves would rather “spend up” and go on “lots of trips overseas” than see their money go to support such people. There was an acknowledgment that work had been plentiful when many of them were bringing up families, but no acknowledgment of the support for all New Zealanders of their generations through substantial social spending and state investment in health, education and housing.

Family networks provided a sense of belonging, “roots” were important as a source of continuity and social connectedness. Intergenerational links, especially the mother-daughter relationship, and relationships with grandchildren were important, and missed if they were lacking or damaged. The stories these people told portrayed them as vigorous, resourceful, independent and self-reliant, as was implied when Mrs J suggested she would be too nervous to tell her story after listening to stories from other participants, “brave and courageous and capable women!”. Though they had come from different backgrounds, some working class, and some middle class, all were homeowners, and they did not refer to themselves as restricted or deprived in any material way. On the contrary, they presented as a group of people whose standard of living offered them a range of choices. Though several spoke of having endured tough times in the past, and there was a certain camaraderie to be found in communal memories of local and national disasters which were felt to have brought people together in the past, few had known privation themselves. It was more often their parents who had, and this was especially true of those who were “children of the Depression”. Having chosen to live in the city or suburbs of Napier for various reasons, they expressed a strong and at times parochial interest in their city. Though they were not keen to be seen as complainers or trouble-makers, they were, on the whole, ready to stand up for their rights as senior citizens and for senior citizens in general. A favourite theme, consistent with the Grey Power Mission Statement *To be the*

appropriate voice for all older New Zealanders (www.greypower.co.nz) was that older people in New Zealand need to “stand up on their hind legs”, and be unified in their battles for a secure and adequate income, affordable health care, and the respect which is their due. It seemed that an awareness amongst members of this group that their citizenship was increasingly under threat as they aged had goaded some into a belligerent attitude towards the state, and towards the younger generations they held responsible for the ageist attitudes of society.

Chapter Twelve:

Maori Kuia

Introduction

The stories told by the women in this group presented a uniquely Maori perspective on the concept of senior citizenship. Doubts about whether it was appropriate for me, as a Pakeha woman, to attempt to gather together a group of Maori women and invite them to talk to me about their experiences of ageing were prompted by my own ethical concerns, about reciprocity and respect in particular: what did I have to give, and as an outsider could I engage in research that was “culturally safe” (Cram, 2001, p. 46), which is to say, did I know enough about Maori to be sensitive and respectful of their mana, and to hear what they were saying? References by Maori researchers (Cram, 2001; Irwin, 1994) to the harm inflicted on Maori communities by Pakeha researchers support these concerns, and the issue of whether or not it is appropriate for non-Maori to be involved in Maori research is a matter of ongoing debate (Cram, 2001). The major consideration, and what kept me going in my efforts to include Maori voices in the research project was my concern that without a Maori perspective the research would utterly fail to reflect the unique structures and patterns of New Zealand society. I was persuaded by this desire for inclusiveness, and by encouraging supervisors, to go ahead and find out, rather than remain paralysed by anxiety about whether I would be considered an appropriate person to conduct the research. As it turned out, the women were without exception welcoming, open and generous towards me and my questions. They welcomed the group as an unusual opportunity for them, as a majority, to tell me some of the *good* things about being Maori, to put forward their own, particularly Maori perspective on ageing, and to tell their own stories. Each meeting was a sociable occasion, with laughter and good humour in which I was graciously included.

All eight women in this group were born in Hawke’s Bay, and five of them specified individual marae as their place of origin. Through an acknowledged lack of Maori

participation at the earliest stages of the research, the documentation I used to gather background information from the participants was generic and failed to take specific account of Maori social structures, so that the profile sheet did not include a question about tribal affiliation or iwi. However, the local affiliation is to Ngati Kahungunu, with strong links to Ngati Porou on the East Coast and links by marriage to other North Island iwi. Five women were in their mid to late sixties, two in their early seventies, and one in her early eighties. Four were married, one had never married and three were widows. Between them they had forty-eight children, one hundred and fifty-five grandchildren, and between the six who specifically mentioned great-grandchildren there were twenty-five. One person with six children and one with thirteen mentioned their fifteen and thirty-six grandchildren respectively, but did not include the number of great grandchildren. Most of the women in this group assessed their health as average, one good and two (one in her sixties, one in her eighties) as very good. Values or beliefs listed as important were “the family unit”, Christianity, Maoritanga and whakapapa (genealogy), arohanui (love), and the church, variously Anglican, Roman Catholic and Mormon.

Maori words and expressions were often used in the conversations I had with this group of women. They were seldom translated or explained at the time, and wishing to reflect as accurately as possible what people actually said, rather than what I think they meant, I have preferred to provide a glossary of Maori terms for the reader rather than intrude on the text with explanations. Also it is increasingly common, in certain (notably government) publications and certain social settings in New Zealand to find Maori words used where an English translation does not adequately convey the meaning. This signals a trend towards the use of Maori language to convey Maori concepts, and my wish is to acknowledge and support this practice as respectful to Maori. In this group the English plural form -s was used consistently when applied to Maori, although this usage (Maoris) is contrary to the convention that Maori nouns do not change in the plural (Ryan, 1995).

In this chapter I have maintained my practice of distinguishing individual speakers

from each other, although I wish to acknowledge that this group already had an identity and function of its own over and above, as well as before and after, its life as a research group. Partly reflecting their preference for a collective group process, and partly because they were intimately connected (two were sisters, three were cousins and they were all close friends who knew each other's social networks), they frequently tended to agree with rather than add to what was said, in the process constructing a collective story in which the strands of spoken and unspoken language were woven together and presented mainly by one or two members of the group. One thing the women themselves particularly encouraged and enjoyed was hearing stories of each other's younger days and "the openness of each one's life unfolding like a book". Overall though, they were clear that what they wanted to convey was "the Maori perspective of ageing", or "the Maoriness that's never understood by Pakeha". The agenda, the kaupapa, was firmly in their hands. My ethical concerns about being Pakeha and doing research with Maori participants, and about reciprocity, were allayed over time by a conviction that my usefulness to them lay in respectful listening and reporting on what they said in a way that would enhance Pakeha understanding. Perhaps too, as something that they saw as "good for Maori women", it might enhance their mana as Maori women.

A Tangata Whenua Perspective on Ageing

Each person in this group introduced herself initially by name and then where she was born. Each story was remarkably similar in its essential details, allowing for the fact that some had spent time in other places, and they had different family configurations. The following was fairly representative:

I was born here ... and I lived here all my life, went to school ... and from there to high school, it was a co-ed at that time. And I'm the fifth in a family of ten. And I married, lived here, worked here, and I'm still here, and hope to die here. That's me.

While many of the women identified less with a city than with a particular local marae, they were also acutely aware of regional and local differences, especially socioeconomic discrepancies:

Mrs R *I think the poor old Havelock residents, I think they just about died in their beds when they put, what do you call it, state homes there. It used to be just the elite!*

Mrs P *Oh no, you've got to have money to live there!*

Mrs R *Yeah, in my young days, my school days, you know, when I was young, you know, you looked on that as being the Hollywood of Hastings.*

Their locality was intimately connected in various unique ways with their identity as Maori women, and with their Maori culture, as a place to belong. The feeling of “identity and commitment to Maori things” gained by growing up in a Maori community, is a matter of learning by observation and participation (Rangihau, 1975, p. 221). Critical to the concept of kaumatuatanga, referring to “older Maori who command a level of high status amongst whanau, hapu, iwi and non-Maori” (Te Puni Kokiri, 1999, p. 1) is the possession of a secure cultural identity:

The concept of a secure identity rests on definite self-identification as Maori together with quantifiable involvement in, and/or knowledge of, whakapapa (ancestry), marae participation, whanau (extended family), whenua tipu (ancestral land), contacts with Maori people, and Maori language (Durie, 1998, p. 58).

A secure identity, with access to Maori resources and the Maori world, may also afford protection against poor health, and is likely to be associated with active educational and labour market participation (ibid). “Being a Maori”, being able to participate fully in cultural activities and “to instinctively know what you should and what you shouldn’t do”, depended, the kuia agreed, on learning by standing back and watching, but more than that, it was a matter of “spiritual understanding”:

Mrs N *But I thought it was instinct that taught us what to do, you know. You'd be surprised, it just sort of comes to you, you're gifted that way I think, it really is instinct. A lot of things that I've done that I didn't know, it just came to me to do.*

Mrs R *I think it comes down to, if you've got the wairua, which a lot of us, a lot of Maoris have, but there's a lot of Maoris that don't have it. Wairua's the spiritual understanding.*

Mrs L *From the heart.*

Mrs R *And that's the same with their beliefs and understanding of Maori, eh? You know, if you haven't got the wairua, nothing's going to make any sense to you. And nothing is ever going to feel right, look right, and you'll always hear these ones saying, Oh, what are they doing that for? That tells me straight away, eh, well sorry lady, or man, or whatever you are, you're never going to understand unless that wairua comes to you. And I think that's why we - we instinctively knew what to do. Eh?*

Mrs N *Yes, I think that way.*

Mrs R *Because this is how I look at it - apart from our parents not teaching us the language, I do know that my parents instilled that wairua in us, in me. And it wasn't something they said, it was the way they acted, and what they did in our home that gave me a lot of understanding. You know, I often ask myself now, why do I understand that, why do I know what to do, and why is this? But thinking back, eh, it's what happened in our own home, that gave me that wairua.*

Mrs N *It does. I'll give you an example - when they came back, when they took the taongas overseas to America, everybody there, the feeling that they felt there, their ancestors were there! He said it was such an unusual feeling that went through them all, that their ancestors were there with them. You see, this is what happens with being a Maori. As you say, it's the spiritual part of us, that it just comes to us naturally.*

Part of "being Maori" the women agreed, was an awareness of the spiritual values of places and things:

Mrs R *That's one thing that all Maoris, regardless of religion, have, eh? If they go to a new environment, you know, it's to bless the place, that sort of thing. And after funerals, bless the building, if the body's been laying in there, you know. I think that's sort of just us as Maori, and it's nothing to do with religion, really.*

Mrs P *No, no. Yeah, because even my daughter, she was a very staunch Catholic, but she gave it away completely, and she does a lot of that. You know, if she had some taongas there to give out to people, in her work up in the Council service, she might have some greenstone stuff, she always wants them blessed before she gives them out. So you're right there, you know, it's something us Maoris do, as Maori.*

As well as being more tuned in to the spiritual world, "starting and ending everything with a karakia" Maori, the women agreed, were a more emotional people than Pakeha. This was evident, they said, in their tears when they grieve, and even in their body language. Rangihau (1975, p. 223) also contrasts the "cold-as-steel" Pakeha world with the warmth of the Maori world, and the spiritual and emotional richness that goes with "being Maori" is, the women intimated, something to be recognised, nurtured and celebrated as uniquely Maori:

Mrs P *Very emotional, Maori. I find the Pakehas sometimes are very cold!*

Mrs W *Very cold. I know for my husband, the eleven years he spent with his mother were very cold years. Well I mean, he spent forty-five years with me. And so what he did with his Maori side of his family, you get that warm feeling, you look at him and then I say, Oh yeah, the Maori side of him is coming out, because you just look at the face, eh? It shows. But when it comes to the Pakeha side, he sort of sits up straight, and I know, Oh, here we go! These Pakehas are coming out again, and my children are like that sometimes. Like a businesslike sort of a way, when they sit up straight, and I go, Oh, they're like their father! That's when their father's part is coming out, and when they just crouch like how I'm sitting now,*

oh yeah, that's the Maori side coming out. But I always tell them, don't ever think because you're white, that you're a Pakeha. I said, no, you've still got me in you. It may be only small but it's there. To always remember you're a Maori. Try and keep on your Maori side more than your Pakeha side.

Being a fair-skinned or blue-eyed Maori is an issue for an increasing number of New Zealanders as a result of intermarriage between people of different ethnicities (Statistics New Zealand, 2000). Mrs W's comments convey a strong sense of cultural pride and resistance to any form of assimilation that would threaten the wairua, the spiritual aspect of "being Maori". She also expresses a pragmatic understanding of the social and economic power of a Pakeha identity in a world of socioeconomic inequality and racial prejudice. Her children had been instructed not to forget "their Maori side", but given Pakeha names:

Mrs W *to keep on the Pakeha side. And I said, yeah, granted they get the jobs from the Pakeha side, but they gotta always remember they are Maoris, because of me. I always tell them, because you've got Pakeha names, it doesn't make you Pakeha. And because you look like one, it doesn't make you Pakeha. You're still Maori.*

Mrs P *And I'm afraid there's a lot of them looking like that.*

Mrs W *Yeah, because they've got part Pakeha, they think they're Pakehas. They forget their Maori side, because they've never been told. I keep instilling it in mine, right down to my grandchildren, and now my great granddaughter, she's got blue eyes. I keep telling her mother, don't forget, she has got a bit of Maori in her, always remember she's still a Maori. In spite of what colour her eyes are, she's still a Maori.*

Just as these Maori women were connected to the spiritual world by their wairua, they also described their connection to the land in a distinctively Maori way:

Mrs W *... and we all belong to the same land, us three, we're all first cousins.*

These three cousins told how they had all built houses on the same piece of family land. Mrs L and her husband had been living in Auckland, but she was homesick, she said, and wanted to come home:

Mrs L *My Dad wrote and he says, You need to come back. You can have part of the land, and you can build on it. And yet we had already put in our application for a home in Auckland. And then just when we were making plans to come back, the answer came through that we got the home - Oh no, I want to go home, I want to come back here! Yeah, so we came back here, and then we had our third son, here in Hastings here. We built where our father wanted us. He was happy. Oh yes, I was happy to come home. And my husband's not sorry. He loves it here.*

Being Maori, “the feeling of Maori” was “just something that’s in there”, but also depended, according to the women, on maintaining the connection to “home” (involving both whanau and whenua tipu) in order to make sense of it:

Mrs R *Yeah, I think so long as your family’s living around you, not necessarily in the same house, but around you, those children, half-castes, they get that, what can I say, that feeling of Maori eh? But see, I’ve got two now that’s Australian, and I will always say that they’re going to be Australian. But at the same time, I kind of fear for them, because sooner or later those feelings of Maori are going to come up and they won’t know what it is. I don’t know how to explain it, really, because ... How do you explain it?*

Mrs L *Well my niece just came back from Australia, and she brought her children with her, and we happened to have something at the marae, and these children that don’t know anything about Maori, they just loved the environment that was around the marae. And they didn’t want to go home because they felt good about themselves being back in New Zealand.*

Mrs R *Yeah, and this is what I say, they’re going to get some feelings, and they won’t know what it is, until they come over here, and come back to New Zealand ... that side of them, their roots.*

The women were concerned to protect and nurture the spiritual and cultural aspects that contributed to the “feeling of Maori” for fear it would prove too fragile to survive the emigration of whanau members to Australia:

Mrs R *I want my kids, one of my daughters, to do a video, if they were to land in Auckland, and follow the roadway back to where their grandfather comes from, the marae ... my Australian mokopunas, because at the moment they’re typically Australian. And I’m really determined that I’m going to do that for them, because they won’t come back so often now to New Zealand, because it’s too expensive, eh? And if they come back as teenagers, or when they can travel on their own, then a video’s there, and then maybe they could put things together, eh?*

The women saw the Maori and Pakeha worlds as quite separate, and on one level mutually exclusive. On another level, they saw Maori experiencing a constant struggle to be Maori in a Pakeha environment. Racially distinctive characteristics are becoming less reliable indicators of race (as with Mrs W’s blue-eyed mokopuna), and the socioeconomic differences or “gaps” constantly invoked in the media define Maori as failing with reference to the norms of the Pakeha majority (Durie, 1998, p. 91). Trying to “put things together” is difficult enough even for Maori living in New Zealand, as Mrs P, recounting an exchange she had had with Pakeha in the context of her church, explained:

Mrs P *You're born with a special something that's strictly Maori. And you are a Pakeha, you know. And I don't blame you for how you are, and how you see things out there. And I said, and we're in the time where we've had massive changes, or tried to have massive changes. And I said, and you're okay, you were born, and you just went on living your normal life, learning your normal things. Whereas we were born and we had two things to put up with. One of them was that we're Maori, but we've got to live in a sort of Pakeha environment, and live how the Pakeha want you to live. So we had two things. And I said, us Maoris having the struggle, that's what we're having. So I said, don't ask me to tell you how to feel like a Maori, because you'll never feel like a Maori.*

Mrs P's words echo those of a Ngati Porou kaumatua (Pewhairangi, 1975, p. 9) on the impossibility of communicating "the Maori heart" to Pakeha:

I know there are a lot of Pakehas who would love to learn, not only the language, but the Maori heart. And it's a thing one can never teach. ... One thing hard for the Pakeha to understand is that our elders never allow us to sell any knowledge of anything Maori that is really tapu. To them it is priceless. ... This is how we get to know things. They're handed down from generation to generation and it becomes part of you. And this is the part of Maoritanga you can never teach.

Mrs W had a great grandmother who was part Scottish, but said of herself "I was born a Maori and I'll always be a Maori". For her the Maori and Pakeha worlds were fixed and distinct. Belonging to the Pakeha world meant being defined by the status attached to formal education and socioeconomic class. For her, being Maori involved resistance to the risk of being defined by the signifiers of Pakeha culture, especially capitalist notions of material wealth. To avoid this risk she was determined to define herself in emotional and relational terms:

Mrs W *Unless you've got a bit of it in you ... that little bit will make you feel like a Maori, because my husband tried to make me live like a Pakeha for years. And I said, excuse me, I live like how I want to live, this is how I was brought up, and this is how I'm going to die. I came into this world with nothing, and I'll go with nothing. He said, be like so-and-so, white people, they get up there and that's why they're so high up. I said, yeah, but no matter how high I get, I will always be a Maori. There's no use him pushing me up there. Well he wants me to better myself. I may not have had the best of educations, but he's trying to make me something that I can never be. My thoughts are still down there where I started, at humble beginnings. He can get me anything I want, I'll never get up there. I'll be still down the bottom, still with the same people that I started with.*

This statement expresses the different emphases in Maori and Pakeha notions of citizenship, and the complex and paradoxical conceptualisations of seniority that are involved when a very senior person of high status in Maoridom places herself at the bottom of the social hierarchy. Maaka (1993) describes the situation of Maori older people who are estranged from their roots as similar to that of older

Pakeha. Estrangement, he says (ibid, p. 216) can result from a number of contributing factors, including assimilation through intermarriage and “desire for upward mobility (and being Maori is synonymous with being poor, unsophisticated and at the bottom of the social barrel)”. Set in this context, Mrs W’s struggle can be seen as a determined stand *against* assimilation into the dominant culture and for a distinctive cultural identity as Maori (Durie, 1998).

For Mrs W, being Maori, being true to her own identity and sense of herself as a citizen, was not about educational achievement, upward mobility or material possessions, all strong markers of citizenship status for Pakeha, but irrelevant to her view of what constitutes status or mana. Rather it was the integrity of her thoughts and feelings as a Maori, and her relational setting, the structural and cultural relationships in which she was embedded, and through which her “narrative identity” (Somers, 1994, p. 624) was constituted, which made her a woman of power and standing in her own world. Her story of struggle, her “counter-narrative” (Somers, 1994, p. 631) is, as Somers says, a critical strategy for people whose identity, values and social realities are excluded from the dominant public account and are invisible to those who inhabit the privileged world, in this case of educated middle-class Pakeha. As well as substituting alternative values for the dominant Pakeha ones, Mrs W’s “narrative of empowerment” (ibid) inverts the social categories of the dominant society, turning the “little bit” of Maori, historically stigmatised and socially unacceptable, into an essential requirement for admission into a world where feelings and relationships are valued over material resources and social status.

An important part of being Maori, having access to Maori culture and identity, is cultural knowledge. One aspect of the culture which the women shared in their stories was their rich heritage of knowledge about the gathering, preservation, preparation and eating of traditional foods:

Mrs R *‘Cause we’re seasonal eating people, like sea-food, there’s a season for certain seafood, you know. And so, we used to be able to go out, get a big lot, and then dry what we couldn’t eat at the time. And then we’d have that through the year.*

Mrs L *And it’s the same with the eels, when you go out eeling - yeah, then you dry the eels out and put salt on it, and dry it out. It keeps, for a long time.*

Mrs R *Preserves it eh? ‘Cause you know, we were doing the dehydration and things like that long before Pakehas came on the scene ... with all their mod cons. We used the sun, we dried everything through the sun. Seaweed, kohino we call it, you go out gathering that in the time, and you dry it out in the sun and half bake it in the oven, and you put it out in*

the sun again, you know. You sort of got to learn these things.

Mrs L *Well, this is right, 'cause we relied on the sea to give our food. You can not get it as often like how we used to.*

Mrs W *Yeah, can't do it now.*

As children they all remembered fishing for the plentiful carp with a basket. Children no longer fish for food, they said, partly because, through changes to the environment, the streams have dried up. Wild mushrooms, plentiful seafood and produce from large vegetable gardens would be shared amongst the community, and nothing, even the most unpalatable parts of the kina, was wasted. Restricted access to some traditional foods through environmental change or contamination had affected the material standards of living, and the sense of wellbeing, of local Maori. They felt exploited when they had to pay for foods they were accustomed to gathering freely to fulfill their obligations to whanau members. As Taiapa (1994) explains, despite the fact that Maori are living in a complex society with a cash economy, one of the most important cultural values remains that of manaaki, or hospitality, in which food plays a major part:

Mrs N *The part that hurt me most when I wanted puha and I went to this shop, because my family were coming from Auckland, the time I had bought all that puha for one meal, it cost me nine dollars. You don't even pay that for a cauliflower, and that's what it cost, and I thought, Oh! I felt, really you're putting it across we Maoris. I do, I feel that, you're really putting it across us by charging, I think it was about three dollars or two dollars a bunch, and I had to have all this, and I thought, nine dollars for one meal - of vegie! And I did feel then that some of the Pakehas were really putting it across Maoris, because they knew in their heart that we would go and buy it.*

Mrs R *And we started buying, eh, because it wasn't safe any more to go into the places where we used to gather it, because of the sprays. ... I mean we live across the road from orchards and we always used to get our puha from there. But we don't go anywhere near it now because of the spray they use, you know. So, people are taking advantage of us really, you know, when you think about it.*

Just as they had seen once abundant and freely available traditional foods become scarce and expensive, so they had seen other cultural practices, once the preserve of Maori women, come under the auspices of the male-dominated Pakeha helping professions. The women could all remember a time when women's and children's health were the domain, not of the medical profession, but of local Maori women with particular skills and knowledge, delivering midwifery and child health services in their own communities. They saw the trend towards home births assisted by midwives as a return to those practices. They spoke of the cultural practices involved in mourning the dead as appropriately remaining in and under the control of the community rather

than being removed to the professional premises and services of the undertaker:

Mrs N *We get over our grieving much quicker than Europeans, because we can let it out. You'd be surprised how we can sit next to that casket, and we can cry and cry and cry. And as soon as we've settled down, we can laugh. ... But as soon as the next lot of people come on to the marae, we can cry again. But while we're sitting there, we're not sitting there glum, no way. We're all making jokes and laughing,*

Mrs W *Remembering things, eh?*

Mrs N *Yeah, remembering different things, and then we'll laugh. But you see this is why we get over our grieving so much quicker than what a European would because we can let it all out in tears.*

Mrs W *To grieve, to get over the grieving.*

Mrs R *Yeah, one of the things I always think about is that Maoris treat their dead like they're still alive, until they're buried in the ground. You know, they'll talk to them, really talk to them like they're still living, because that's the way we feel. I mean, they're not gone until they're buried.*

The intersection of religious and cultural practice afforded some of these women senior status through expert knowledge and skill over and above their cultural pride in the Maori way of managing death:

Mrs N *Well I must tell you about these people with this performance just when I was young. They weren't embalmed like how they are today, and every day their church, they would take that body out of the coffin, and they'd wash that body, that whole body, and they'd say to the person, I can remember, move your arm, Mary, and that arm would soften! And they'd put it back in the coffin again. It was wonderful. That was when I was young. Now, well you don't have to do those things any more.*

Mrs L *We still talk to them. Yeah, when we're dressing them, we say, make it easy for us, so we can dress you.*

Mrs W *So we can make it pretty.*

Mrs R *Yeah, well in my own personal family, Mother and all that, when they died, we always called on the Mormon ladies, because we knew they were expert at that sort of thing. They had this special something about dressing the dead, you know. Yeah, most Maori families would prefer that they do it themselves, or have someone come in and do it, someone that they know, rather than leave it to the undertaker. It's a very special time, that dressing them, they tell me they have such wonderful experiences!*

These rituals and others the women mentioned by means of which the ancestors "speak" to the living to give guidance or encouragement when it is needed, as well as the practice of taking the deceased "home" all speak of a particular view of death. The fear of death is overcome by keeping the dead among the living and the ancestors are treated as an important part of the family and the community.

Combined with a Christian world view in which death is not the end, but the beginning of a new life, these practices serve to 'enliven' death, so that it is no longer the last dreaded frontier to be faced, but a part of life. This speaks of a cyclical, rather than a linear view of time, in which old age and old people, rather than representing the last bastion before death's inevitable victory, and hence something to be raged against, or feared and put away lest it remind everyone else of their own fate, are part of society, to be embraced and cherished like everyone else. This Maori perspective on death and dying is a key factor in understanding why a person's mana as a kaumatua is not diminished by the stigma of old age but instead is enhanced by the experience and special cultural knowledge acquired over time by growing old.

While the women agreed that "getting old's just nothing at all really", they did feel the effects of ageist attitudes. They wanted respect from younger people, but they also valued their independence. Like many women of their age, they did not feel old (Bonita, 1993) and they did not want to be treated as old:

Mrs R *I don't know about anybody else, but I hate people that make the comment, Oh of course, at your age ...*

Mrs P *Try and put you in a separate basket.*

Mrs R *Oh some people seem to love saying things like that, you know, Oh well I suppose it's because you're old, and ... this, you know! One of these days - there's this woman that keeps saying it to me - I think I might have a say!*

Mrs N *(Mrs R) you are right about that. I fought back once because I couldn't help it. I was saying how little our younger people realise that we want to help ourselves while we can. And a lot of them think, oh well, because we're over sixty or seventy, we can't help ourselves, but we still want to be independent. Somebody had asked me - I had gone to a meeting and they said, Oh fancy her daughters letting her go on her own - and it was one of my cousins. I felt sorry, I knew she meant well, but I didn't want anybody to fuss over me. She didn't realise what she was doing to me, she really smothered me. I was so used to helping myself. I helped my mother. My mother was about mid eighties or close to ninety, and I took her arm - this is where I learnt this lesson - I took her arm, to take her across the street. She took her arm away. This is when I realised that though she was that age - she was almost ninety - she still wanted to walk that street on her own. Then she took one of my grandchildren to do shopping - she's putting these things into her basket, and they were saying to her, you don't need those Nanny, they put it back. She went back and she took that and put it back in her basket. My daughter didn't realise that she wanted to do her own shopping. It's just because they have great respect for the older people, but they sometimes don't realise that they are making us old before we really want to be old. Because I saw it when I was in my forties, some of those people I lived with, at forty, they were old! Now in the good old days at sixty and fifty, you were an*

old woman. They were old, they dressed old, they all sat with black scarves around their heads.

Mrs R Yes, that's right, you dressed like an old lady, and you talked like one.

Mrs H We're in a different era, this group here. We're not old like that any more. We have changed. That's one thing we have, in Maoridom, we have changed in that way, the Maori women today, they're really up with it, they're not growing old until they get into their seventies and eighties.

In spite of earlier remarks that ageing was “nothing”, and despite the acknowledged respect for age in Maori society, these comments indicate strong resistance to being regarded as “old”. On one level this may indicate the effects of conflicting pressures being brought to bear on kaumatua in the intersection between the Maori and Pakeha worlds and within the Maori world of the kaumatua. On the one hand they are operating in mainstream Pakeha society, subject to the messages of mainstream media about the overt subordination of age to youth and beauty, and the covert invisibility of old people, especially old women (Bonita, 1993). On the other hand they are part of the Maori world, where the status and power of old people is elevated and they become more rather than less visible in public places. The women are clearly influenced by the high value put on independence in Pakeha society, and in Maori society as it becomes more “Westernised” (Maaka, 1993, p. 227), reacting against the kind of over-protective behaviour which family members may see as fulfilling their obligations but which Durie (1999, p. 104) suggests may be “defensively adopted to ward off subsequent accusations of family neglect”. One woman told the group of her strong reaction to her daughter's ‘help’ in packing up in preparation for moving:

Mrs P *I said, How do you know what I need? I don't go into your cupboard and tell you what to pick out for your garage sale! So we had these words, you know. I said, I know I've got to scale down all what I've got. But let me do the choosing. Don't come in there and tell me what I've got to give away, and what I've got to keep, and what's got to go to the garage sale. So that's one of the things with age. They've got to leave it to us. I say, no, if we need help, we will call out to them, eh? There's time when we do need it.*

While the women agreed wholeheartedly that they wanted to make their own decisions as long as they were capable, they were also well aware, like some Pakeha participants in other groups, of the risk of seeming “too independent” in turning away help now that may be needed in the future. The difference was that the Maori women seemed more comfortable about confronting this issue of intergenerational dependence and independence and bringing it forward for discussion as a legitimate concern, something to be negotiated together:

- Mrs R** *I think they think you're incapable of making your own decisions, eh? And again too, I think it's about, you know, they're trying to be helpful.*
- Mrs N** *They mean well, they mean well.*
- Mrs R** *Yeah, but then it makes you feel like you haven't got a brain in your head, when they start doing things like that, you know. And that can hurt, eh? You know, I just often wonder, now when I really need the help, will they be there to do it, because I've told them so often I can do it myself.*

Mrs P's story indicates some of the difficulties of trying to accommodate different generations of family members on the same property, while protecting the independence and autonomy of the older person. Conscious of the incursions on her space and time, she was nevertheless willing to make considerable concessions to have her grandchildren close and to be involved in their lives:

- Mrs P** *Well, they've come into my house, and they're going to build me a granny flat outside, the kaumatua flat, they call it. And until then, well we've got to find a niche somewhere, to put all my whole lot of things, in a little corner like that! I don't mind because I love having them here, because I've got my two mokopuna near me. That's my way of looking at it, and they give me that little something that nannies want sometimes. Oh, they drive me up the wall when the mother and father just get up, do their lunches, and away to work, and leave you there. Now you get out of bed and they're moaning, this one's groaning, "You got me up too early!", and all that. But that's the way, of nannies. But I love them to death. Keeps your focus on them.*

This section has discussed the aspects of being old and being Maori that are defining of the women as kaumatua. The following section discusses the "social outcome domains" (Ministry of Social Policy, 2001b) the avenues of citizenship and the networks of affiliations (Joseph, 1999) in which and through which they performed their kaumatuatanga.

Naming the Issues

Physical and Mental Health

These women were representatives of the small group of Maori aged over sixty-five who make up only 3.9 per cent of the Hawke's Bay Maori population. They were remarkable for that reason alone. They made few references to their own health issues, their comments supporting the view that kaumatua have an optimistic view of their own health in spite of their poor health status in the population, and that disability is viewed as "an inevitable and irreversible consequence of ageing" (Te Puni Kokiri, 1997, p. 62):

- Mrs W** *I enjoyed my life being a mother. And I still do now, enjoy being a mother, a grandmother, great grandmother. I mean it keeps me alive, keeps me young again, to have them, keeps me on my toes. I don't think about my*

sickness that I've got, I just, you know, take it as it goes, take life as it goes.

Despite this woman's life-threatening condition, she preferred to deflect attention away from her own health and concentrate on her whanau relationships, in particular her obligations to her mokopuna. This is consistent with research with older Maori (Te Puni Kokiri, 1997, p. 60) which found that:

Health status did not appear to be a significant determinant of being able to care for others, nor surprisingly, was poor health a single predetermining factor for receiving whanau care.

Related findings of lower health status in "those kaumatua who seldom or never enjoyed the kaumatua role" (ibid, p. 62) and a causal relationship between age-related disability or poor health and "weakened marae participation and weakened cultural identity" (ibid, p. 59) may also be considerations which inhibit disclosure of ill health or disability among older Maori. However, Durie (1999) suggests that kaumatua may measure good health less by the presence of illness than by the capacity for participation. It is also possible that their attitudes of quiet acceptance and coping with ill health were partly due to a tendency among their parents' generation to minimise health issues, especially women's health. The resulting ignorance, highlighted in the women's memories of the arrival of menstruation, was common among women of their birth cohorts. However, the corresponding silence in all the other research groups is in sharp contrast to the candid reminiscences amongst these Maori women about a "shared, regular and unavoidable experience in women's lives that is, at the same time virtually unmentionable" (Brookes and Tennant, 1994, p. 103). Each one had a vivid story to tell about her first period, which without exception arrived unexplained. Some thought they were dying, and for some the only acknowledgment was that they were no longer allowed to sleep in the same room as their brothers. All agreed that their parents had been unwilling to talk to them about their bodies at all, and like Mrs F, who had her first child at twenty-one, they dared not ask:

Mrs F *Because being brought up by my uncle, well! It was a bit daunting even talking to him. You remember him, don't you (Mrs H)? Lay down the law, and children should be seen and not heard. Had to be a goody-good, and so I couldn't talk to him about anything personal. And when I had my first baby, I wasn't sure where it was going to come out. That's how green I was because I had no-one to talk to. I couldn't talk to his wife. She had her own young children, and she was young herself, and I didn't like to ask anyone else in case they thought I was really dumb, and I was. I soon found out, but I found out the hard way - yeah.*

When I asked about who she talked to when she was raising her eight children,

her reply highlighted the danger of assuming that all Maori are, or were, surrounded by a warm and supportive whanau (Te Puni Kokiri, 1997; Taiapa, 1994). She knew the loneliness experienced by Pakeha women in the other research groups as young women isolated in their homes with small children:

Mrs F *No-one at all - no mother, no mother-in-law, no grandmother, no nothing - just neighbours, neighbours and friends.*

Alison *Were they important, or did you just rely on yourself?*

Mrs W *No - just managed.*

The women in this group were all personally involved through their roles as kaumatua in supporting the development and promotion of health services to Maori through the Maori Health Unit, Nga Punawai Hauora, a discrete complex set up four years earlier on the grounds of the regional hospital. In addition Mrs R was employed in the unit in an administrative position. As kaumatua with insider knowledge of the health unit, and as consumers of health services, the women were critical of the “whole system” of hospital management, which they held responsible for staffing shortages, poor staff conditions and discrimination which hindered the employment and promotion of Maori staff:

Mrs R *Yeah, it is sad, because, you know, we really want Maori nurses, but Maori nurses will go training, but they won't come into the hospitals. It's this whole system that they don't like. It's not Maori-friendly. And yet there used to be heaps of Maori nurses. That was one of the things that they did, was nursing, office work, teachers, you know, and there was heaps of Maori nurses, but it was more friendly.*

But there was another, more convincing argument, as Mrs R reflected:

Mrs R *Or maybe it was because we'd become so colonised that we didn't see the difference.*

This discussion highlighted the way the mainstream system has excluded Maori from equal participation in the labour force, first through colonisation, and then through structures which, though designed to include Maori on their own terms, still act as a barrier to achievement in the Pakeha system:

Mrs R *But you see, in every service of the hospital, that's what's been happening, Maoris have been there for years and years and years, and they put in for a promotion, and they don't get it. And so that makes them discontented and they leave. They put it down to racism. But we've suddenly realised it's not so much racism as the fact that they think Maoris only get promoted for Maori services.*

I suggested that a return to Health Boards with elected Maori representatives

from the community might help make the system more Maori-friendly, but the women expressed little confidence in the effectiveness of this type of political participation, particularly the selection process:

Mrs R *Yeah, and yet, well we only hope that people nominate the right Maoris, the ones with the skills, and not ones that are going to go there and demand, and live in the past. It is still Government that actually makes the decision of who goes on there. But at the same time, there's so many committees up there, before it comes down to the consumer, that they're just going to get themselves all tangled up in meetings.*

From their active involvement in current structures and processes, the women had observed that hospital management was top-heavy, with little knowledge among managers about the core business of health, and what medical staff actually do:

Mrs P *Yeah, there's far too many (managers). I was quite surprised when we came here and we had this meeting for the management for mental health, and I said, well, what's this other fella for? Well he's the overall manager. And what's he for? Oh well he's the one for the hospital. And he's the one for this, all these people! And the manager for mental health, he goes and chooses his group of four people. And you've got all these little people working under you, eh?*

Mrs R *Yeah, too many chiefs and not enough Indians! And they haven't got enough Indians over there, like nurses I mean, poor nurses are run off their feet.*

Mrs P *Well see those managers, what are their jobs? To see that both sides have been attended to, eh? The staff as well as the patients. Hmm ...*

Mrs R *The pity of it is, they've got men sitting up there that know nothing about health, nothing about how hospitals run. They think one nurse can attend to ten patients and we'll just leave it at that. Yeah, but you get those ten patients, and if a nurse is caught up with a patient, which sometimes happens for an hour or whatever, and yet the other nine have to wait, and one of those nine might be dying, and the button is going, and that nurse is busy over there. It's ridiculous!*

In spite of these problems the Maori Health Unit was perceived as making a difference to improving health services for Maori, and to making health services in general more "Maori-friendly":

Mrs R *Our manager (of Maori Health) is trying to change that way of thinking. He's been in the game for many, many years, and he's worked from way down the bottom of nursing to where he is now. And he's worked in the Pakeha system all his life, so he just knows how to get them to listen! See all the dreams we had, he just knew how to approach the big-wigs up there. He said, it's no use going there and saying, we want this or we*

want that! It's a real strategy he's got, and it is starting to work, you know. So we're really pleased about that.

The women's kaumatua role in relation to Maori health gave them status as senior citizens, and it also gave them opportunities to exercise their citizenship through active engagement at a senior level in issues of vital importance to Maori.

Safety and Security

The women dwelt on the richness of their own connections with their families and communities and the security of knowing, for example, that they would be "alright" in their old age because they were assured of the love and care of their whanau. They also acknowledged, however, that there are older Maori for whom those connections are not available for various reasons, including mobility, and that these other kaumatua are at risk as a result:

Mrs N *See I must say now too, to you, we've given you the rosy part of our lives. We are the kaumatuas who can get around, but we have those too, who can't. And we hear these things, that some of these old kaumatuas, they're being ill-treated by their families. This is the other side, this is the dark side of we kaumatuas, and this is why for the last two years, we've really been pushing for a home for the kaumatuas, a separate home. This is the kaumatua whose grandchildren or perhaps their children, are not really treating them right, but they won't leave their homes, because they won't go into the Pakeha homes. People might think oh well we're racist by wanting our own, but this is the reason why we want one of our own. Those women, we think to ourselves, why do they have to put up with a life like that when they're old? I mean, they're in their seventies, I suppose, most of them, perhaps some of them are in their eighties too. Therefore we felt that if we had a home for the Maori women alone, well they'd be able to sit like this, and talk with people, and be free of worries. But we do hear some terrible stories, I suppose the daughter and her husband perhaps are fighting outside, and she locks herself in her room, and then some of them, they just take all their (money) because they handle their benefit. They'd rather stop there and put up with that, and I suppose it's the love you have for your family, regardless of dignity.*

This discussion highlighted again the separate worlds of Maori and Pakeha and the issue of "cultural safety" (Cram, 2001, pp 46 - 47) in terms of the Maori elders' reported refusal to enter mainstream "Pakeha" rest homes, regardless of the loss of dignity and/or economic autonomy or the abuse they may be suffering in their homes at the hands of whanau members. Mrs N's proposal for a separate home for Maori women who need care is consistent with Maaka's (1993) argument that the social realities of changing family structures within Maori as well as Pakeha society demand modification of values that assume elderly Maori will be cared for within the whanau. He suggests the development of homes with a "comfortable cultural ethos" and the facilities to accommodate whanau visits as an appropriate

area for Maori investment (ibid, p. 255).

Their discussion reflected the women's concern, raised by participants in other research groups as well, about the lack of respect of some younger people for their elders, an area in which traditional values have given Maori "a flattering comparison between themselves and Pakeha" (ibid), hence the women's sadness in acknowledging a falling away from traditional Maori values of respect for kaumatua. The discussion is also a reminder that there are two sets of social influences at work on Maori society, those of the dominant Pakeha society, and those, peculiar to Maori, experienced as a result of the cumulative effects of over one hundred and fifty years of colonisation and subsequent struggles to achieve self-determination. It should not be surprising if traditional values and social structures are under extreme pressure in these circumstances (Maaka, 1993).

Community and Family Ties

Family

As soon as the women in this group began to tell their stories it became clear that each one was part of a wider web of whanau connections which spanned several generations and family groups. For this group, identity, who you are and who you belong to was closely linked to a sense of place, where you belong, or "where you're from". They were able to offset many of the consequences of "being Maori" - "being poor, unsophisticated and at the bottom of the social barrel" (Maaka, 1993, p. 216) with "a more powerful form of 'property' in association and membership" (Somers, 1994, p. 633).

Featuring in many of the women's stories and providing a role model for some aspects of their own old age was the grandmother figure or "Nanny" with whom they had been closely connected as children. One of the women told a story which illustrated the spiritual as well as the physical quality of these connections. As a child she had loved to climb on to her beloved (adoptive) Nanny's lap for a cuddle. When the old lady died, at some distance away and unbeknown to her:

Mrs P *The smell went past my nose, and it was my Nanny's smell, of sweat and cashmere bouquet talcum powder. And it was something that stayed with me all my life. And I came home, and she was already buried by the time I got home.*

The other women knew immediately what this story signified, that the old lady had wanted her mokopuna to know of her death and had communicated with her in a special "Maori" way. She was not alone in being brought up by a grandmother:

Mrs H *I was brought up by my grandmother, two grandmothers, they were sisters. I was brought up by my father's mother, and then I went to the other grandmother, my father's aunty, and they were both very lovely to me, they were good to me. They both brought me up and I went everywhere with them.*

Stories abounded of “Maori” adoptions or whaangai, informal arrangements, usually within the same whanau “where adults other than birth parents and grandparents are the primary caregivers of a child for any significant period” (Hall and Metge, 2002, p. 61). These arrangements recognise the critical importance, in terms of Maori values, priorities and social connectedness, of the child’s being brought up with a knowledge of whakapapa and cultural heritage as a Maori:

Because of the importance of descent in establishing personal identity and group membership, it is vital that individuals know their true whakapapa and connections (ibid, p. 62).

Whaangai adoptions, common amongst the participants, are still common in Maori families. Some of the women had been adopted themselves and some had adopted children of their own:

Mrs W *Well I got a - not a fully adopted, legally adopted - daughter that I brought up. And I call her my daughter, she's just a whaangai to me as far as everybody else is concerned, but she's my daughter. And I've included her in everything that I have and say, she's always my daughter, and her children are my grandchildren. And they don't know their own grandmother, they know me as their grandmother. Her children call me their grandmother, and they just say they got two nannies. I'm proud to be their grandmother. And I acknowledge them as my grandchildren, I love them. So it wasn't a legal adoption, it was just a Maori way of adopting a person, you kei them in and you bring them up.*

They had stories of the way they themselves or a brother or sister had been singled out for special treatment by parents or more often grandparents. They spoke lovingly of their grandchildren, but with those they had raised in their own homes, there was a special bond:

Mrs P *They do stick to you, eh, because you've had that much closeness with those particular children. And they do something to you. They pull at your heartstrings, more than the others.*

Mrs W *That's how my grandson is to me. That's why he won't leave. I brought him up when he was born. As soon as his mother came out of the home, I had him, from that day, to now. I've still got him. It's the same thing, you know, I can't let him go.*

Although widely regarded as a right of the grandparents, who sometimes used their seniority to wield power over the parents in such situations, the women

agreed that informal adoptions could cause a lifelong sense of alienation and rejection in the child who was “given away” by the birth parents. There were many stories of children struggling in this way:

Mrs P *One thing I've learnt about being adopted, and this is something, you know, that a lot of people don't realise. When you're adopted, nine children out of ten, will always want to go back to their own parents. They will always carry a ...*

Mrs W *Yes, a chip on their shoulder.*

Mrs P *A chip, they'll always carry a chip. I was one of those. And I've watched my nephews go through it, and my nieces, the whole lot of them. And I'm thinking, well I was like that too, so you can't blame them. It's something that's in here, that they always have when they grow up and say, Why did my mother or my father give me away?*

Gender could also be an issue in a whaangai adoption, as in the following story:

Mrs R *Yeah, I've got a brother, he's Pakeha, and when the people that brought him up died, he came to our place and said he wanted to be our brother! So you know, the same as (Mrs W), he's our brother. But he was better off than us, I mean he actually learned to speak Maori and we didn't. Well, he had my father most of the time, you know, he had the privilege of growing up with our father, and being a boy, our father used to talk to him in Maori all the time so he just knew, he just learnt. But that's the way it was in those days. You want to come and live with us, okay, there's your bedroom.*

Mrs P spoke of the distress and confusion she experienced as a whaangai child not knowing something as fundamental to her sense of identity as her own name:

Mrs P *Yes, it was very ticklish because when I was getting married, and they said to me, well you've got to go to the registry office and get your birth certificate. Oh dear! I give all these names - No! So I go home again and I go and give some other names. But I ended up going home and I'm crying, and my Uncle from home was there, and he said, What's the matter with you? I said, Well I've been up to get my birth certificate so I can get married. And he said, Well? I said, But I can't find it, they can't find it. I've used all these names, I've used the one I went to school with, and I used your name. He said, No, because you're not any of those. I said, Well, what am I? I knew who my birth parents were, and - not my birth father but my birth mother - and I was using their names, plus my adopted parents' names. And that just wasn't coming across, because it wasn't under that name. It was under a name I never even heard of.*

Apart from legal entitlements, to land claims for example, the women spoke of their names as carrying important implications for their sense of identity and belonging. Knowing their name meant also being known officially, and quite literally, counting for something. It also meant belonging to a particular family group and being able to trace their genealogy back through that group to their

ancestors, which carried profound implications in terms of citizenship status, and legal and social entitlements, as well as social connectedness and personal identity. The following discussion highlights the citizenship implications of an individual struggle to retain personal information, and of not having been counted in policy development or planning for health, education and social services:

Mrs W *At least you had a name - I didn't even have any. When I was born I didn't even have any and nobody's even registered me, and when I went to apply for my passport, nobody knew me. They said, No, nobody's registered under that name.*

Mrs R *Well see, Maoris didn't have to register in my time, and so I wasn't registered either, so it'll be all our time. And so none of us would have been registered, because they - well, they weren't interested in seeing how many Maoris were being born.*

Mrs W *You've got to be able to whakapapa yourself back to that name that you've got.*

Mrs R *You've got to know all those names that are involved in that particular whanau.*

The women were, like their Pakeha contemporaries in another group, accepting of the practice, common among their daughters and daughters-in-law, of women keeping their own names after marriage, because “they don't want to lose their identities, so they want to keep their name”. Knowing one's name is important in establishing personal identity, but in a tribal society, it also establishes group membership and is a vital means of making social connections (Hall and Metge, 2002, pp 62 - 63) which foster participation and a sense of belonging:

Mrs R *Here in Kahungunu anyway, we haven't got a kaumatua that is a leader. 'Cause we're still tribal people regardless of where we are, and how we've been brought up and everything else. We're still tribal people, and we still look for that person that we can look up to. Yeah, and that happens with all Maoridom. And you'll find that a lot of the young people now, because they can't connect themselves back to any iwi, or any tribe, you know, they're lost and a lot of them are the ones that cause a lot of this trouble. Try to find their roots and don't know where they come from, and all that.*

Knowing where they came from was of paramount importance to these women as Maori, though some of them had not had this vital information passed on to them by their parents for various reasons, including Maori systems of adoption and partly as a result of the assimilationist policies of the time. They were all determined that their own children and grandchildren would know their whanau, hapu and iwi roots, where they were from and to whom they belonged:

- Mrs L** *So therefore we need to teach our children, to let them know where they come from and who they belong to.*
- Mrs N** *Yes, well it is happening, they do know now, it's lucky, you know. It's just that when they go to those maraes, to those different areas, they know that they belong. See, I mean, even I didn't know. It's just in the last two years that I was told. That's why I say to my children (who) their great great grandmother is. That's why I say that if you go to Tokomaru, well you know that that's your marae too. And I was eighty-one before I realised that we did have a hold in Ngati Porou. Now you see, we are telling our children, but our parents didn't, they didn't think it was/*
- Mrs R** *Well, it was mainly because too, that was the time when government and that were trying to push out our culture, eh?*

Knowing their whakapapa, having a place to belong, and people to whom they could connect themselves and their children and grandchildren was an important aspect of kaumatua for these women. It is through genealogical descent, as well as “cultural competence, location (living near or on a marae), or family ties” that those who take on kaumatua roles “will inevitably be caught up in the nexus of Maori society” (Durie, 1999, p. 103).

Also vital to their wellbeing was the link with younger generations, the family ties, which for some women in this group, as for their Pakeha contemporaries, were threatened by their children and grandchildren emigrating to Australia to find work. In 1997 it was reported (Te Puni Kokiri, 1997) that 17,000 Maori were living in Australia, and the stream has been steady since then. The women expressed the deep pain, “like a big hole in my heart”, that they felt as mothers and grandmothers at this separation from their families. Their stories frequently indicated a high level of grandparental involvement and influence:

- Mrs L** *Well I had my three sons, and when they left home it was really hard, and they left at quite a young age, 'cause they went to college. And when it came to my grandchildren, I thought, no, I'm not going to send them to college too early, because I missed out on my children. So I wasn't going to do that to my grandchildren. They were only young then, when they came to me. And no, I wouldn't let them go early at all, if I can keep them here as long as I can. But I'm grateful for the last one that I had here with me, that he stayed with me. And now I'm sorry they're all gone.*

For these women caring for the family had been, and still was, a constant and ongoing responsibility. One brought her granddaughter along to two of the sessions, and one had to drop out of the group before the end because she had committed herself to babysitting for one of her daughters. Her sister, who took her place in the group, described herself as “sort of a caregiver for life”: she had not really wanted to be a grandmother at thirty-eight, she said:

Mrs F *But, well, when I became a grandmother it was lovely, because I was still bringing up my other younger children. The youngest was about seven I think, when I became a grandmother. Then when I turned fifty, Oh my God, half century! Is there anything I want to do? I've just been keeping our kids all my life, and my father lived with us for eighteen years, and I'd been used to him, and he died of lung cancer. And I was just bringing up a family all those years. And when I turned sixty, well I thought, Oh God, I can't be sixty, where have the years gone? The children left home, but they didn't go far so I've seen a lot of them, and their children. The doors are open, actually I can't lock them ever, 'cause there's always someone coming in! One family lives with me. When my husband died, my daughter came back to live with me, but she's got four children.*

Close family relationships were strongly influenced by obligation and loyalty on both sides. For example Mrs W spoke of the closeness between her and her grandson whom she had raised, and who, at twenty-eight, still lived with her and took an active role in caring for her and about her. Another of the women who had never married had helped her father raise her brothers and sisters and then brought up two of her sisters' children. Now involved in caring for their children, she too, spoke of the care she received from these children and grandchildren as well as the care she continued to give them.

The women thought of their homes too as "part of your family", and of special significance to them as Maori. They distinguished Maori concepts of home from a Pakeha attachment to home, which they stereotyped as tenuous and transient:

Mrs R *For us, for Maoris, if that's the house that you had your children in, you know, and your husband and you lived in, it's like part of you, and it's hard to part with it. A lot of people I know, Pakeha people, they move from place to place to place ...*

Mrs F *All the time.*

Mrs R *'Cause I think to myself, gosh, it's like they haven't got any roots, you know! But it doesn't mean anything to them, 'cause it's only - boards. So I think, you know, we have a different concept of our homes.*

The concept of home was central to a Maori sense of belonging and citizenship, even after death, in relation to the Maori custom of bringing the deceased home to the ancestral marae for the tangi, a central focus of whanau obligation (Taiapa, 1994). Several of the women, determined to avoid undignified arguments over rival claims on a deceased loved one, had had discussions with their families about the customary practice of hari mate, taking the body back to the ancestral home for burial. The following conversation shows how the concept of "home" conveys both a spiritual and a physical connection not only to the immediate family, but to the ancestors and the ancestral land:

- Mrs P** *We talked about different things like that, and it's a good thing to talk about, where he's going to go, and where I'm going to go, and vice versa. So I said to him, you know you're not going home! And he was saying, why not? Why won't you take me back, 'cause that's where I want to be? And I said, well, why haven't you been there for the last forty, fifty years? He said, Oh yes. I said, you've got to think about us, we're not going to go back there and see you, but if you're handy, we will go and see you.*
- Mrs W** *It's things that you got to talk about, because my brother-in-law, he's determined to take his brother back home. I said, Put it this way brother, you've got a mother in Auckland, and you've got a father in Pipiriki, and my husband's got a daughter here, and he's chosen to be with his daughter, not with his father or his mother. So he's going to be buried where I want him. I said, well I'll always be here because I'm from here. And my husband said, if I die, brother, leave me here with my wife and my family, I want to be here, not because I don't want to go home, this is where I am. So whether my brother-in-law is going to stick to it, but I think he's still going to stick to his guns.*
- Mrs N** *That's what happens with us because the families fight to take them back, to be buried with their ancestors.*
- Mrs P** *Yes, well actually, when you come to think of it, it doesn't mean anything 'cause spiritually, we do believe that he can go anywhere he wants to go. So it doesn't really matter where it is, but it is nice if you know that your remains are there, and you can go sometimes and see them, and talk to them, and whatever. Yeah, so it is something with Maori that these sort of things should be ironed out amongst the family.*

The women felt these responsibilities keenly as part of their whanau obligations, and hence as an integral part of their citizenship responsibilities according to the structures of Maori society. They had all seen at first hand the disastrous and unseemly consequences of rival claims over a deceased loved one, and as women who were likely to outlive their husbands, they were determined to take their family responsibilities seriously and carry them out with dignity.

Community

For these women, ageing and the transition to old age was “not a big deal”. The relationship between kaumatua and the community, Durie (1999, p. 105) argues, is one of reciprocity, in which “a positive, if demanding role is complemented by an assurance of care and respect”. Some studies (Te Puni Kokiri, 1997; Durie, 1999) have found that kaumatua may find their new roles burdensome, but the women in my study indicated that their kaumatua responsibilities required little adjustment. On the contrary, the transition was easy, marked by a sense of continuity linked with a lifelong involvement in community work. Mrs R tried to explain how it “just sort of happened”:

Mrs R *Well it's funny, I mean you just get/well I don't know how I got involved with so many things, I really don't. You know, it just sort of happened. And for me, I never went looking for things, but people would ring me up and say, Oh we're doing this, clubs and different things, and can you come and help us? And so I got very involved with sports clubs, as (Mrs N) knows, and maraes. That filled in those years from about thirty I suppose, until about fifty, sports clubs and maraes. And then from that I moved on to Lottery Welfare, sitting on that committee in Wellington, and I don't even know how it happened. I think you get involved with a lot of things, and then people just come and ask you because you're doing it.*

Community connectedness, or “togetherness” for Maori also meant mourning together as Maori, rather than in separate churches, as Mrs N explained:

Mrs N *What I'd like to bring in here too, our togetherness too, is the fact that if there's a funeral, you find most times, that you have a Mormon, Catholic, Anglican, all the different denominations would take part in that service. You find it in most of our services now, for the dead, and the funeral service will be all those different denominations, never one. We combine in that way all the different churches. One would take a prayer, but we all have the mourning together. This is why we're pretty well close together, as far as the church is concerned. So that's a good thing.*

For these women, the right of inclusion in the community and acknowledgement as kaumatua was balanced by the responsibility of participation. Comparing their own status as kaumatua with the Pakeha old people they saw being “pushed aside”, they clearly saw participation in the community as an obligation integral to senior citizenship status and to being acknowledged as kaumatua:

Mrs P *It's because they have never been in touch, in their lives, you know, they're busy living their own lives, and they've lost that touch with their families, with their friends/*

Mrs W *With the community.*

Mrs P *And with the community. It's the community that they've lost. You know, you can't stay home and say well, I want to watch T.V. all day long! You know, no matter how old you are, isn't that right, (Mrs N), you've got to get out.*

Mrs N *Yes, you've got to get out.*

Mrs P *You see like this, like this, come to these sort of things, wherever it is, just go, be with ... And unless those Pakehas do that, they'll always be pushed aside by their young people. Their young people would not have them, because what do they know? What can they give to them? Because all the years they've gone on and they've lost touch.*

Mrs W *Yes, because I've been to a lot of things for the hospital ... and they've taken me along as their kaumatua. And I've sat in there and they've always acknowledged the kaumatua. See well, if they had a Pakeha kaumatua, you know, somebody that can come in to represent them, it would be lovely.*

Mrs P *Yes, and to acknowledge, because the Maoris will always acknowledge, they will always acknowledge their kaumatuas, always.*

They saw themselves, being Maori, as having better defined social responsibilities, and being more willing to engage with them than Pakeha old people. This generalisation, though undoubtedly over-simplified and of debatable accuracy, is supported at least to some extent by Durie's (1999, p. 103) observation that when Pakeha New Zealanders "might be contemplating withdrawing from public life, Maori elderly need to consider whether they will accept the new responsibilities expected by their own people". The women's accounts suggested that, unlike Pakeha elderly people, they never considered the possibility of not participating, and they saw the difference between the roles of elderly Pakeha and elderly Maori as a gap in which Pakeha elderly people were disadvantaged as a result of structural inadequacies in Pakeha society:

Mrs W *Maybe if they gave their Pakeha elderly some responsibility like even me. It's only an on-call job that I've got, but I'm there when they need me. They call me, ring me up and I'm there. Maybe if they gave one of theirs like that a job, something just to give them a lift. Well it gives me a lift when I come out here, to be with them, and you don't feel so old.*

Formal community responsibilities which, importantly, spanned both Maori and Pakeha worlds, took precedence over other things in their lives, and they were conscious of the social and personal rewards:

Mrs W *Even if I was busy doing something, I would say yeah, I'll be there in a minute, I'll be there. I asked them one time, they wanted me to be there, and they told me, and I said well I'll be there, I'll try and make it on time. Sometimes I'm given only ten minutes!*

Mrs P *Well even myself, I'm more busy now that I'm long in the tooth! I'm on a panel for Social Welfare, and I'm on the trustees for the Poukawa Labour. I said, I've never been so busy! But I enjoy it. It keeps you going.*

Mrs W *Oh yeah! Keeps you alert!*

They were conscious of the status and the position of power they enjoyed in exchange for the demands placed on them, and they acknowledged other older Maori who, for various reasons including inability to speak or understand Maori, alienation from whanau and iwi, and lack of cultural knowledge and skills, did not have the same opportunities to respond positively to the pressure to take up these "significant senior roles within Maori society" (Durie, 1999, p. 103).

Material Standards of Living

While the details of individual lives differed, one thing about the research that stood out as particularly enjoyable, as one woman put it, was hearing each other's stories, knowing that they came from similar "humble" backgrounds:

Mrs W *We all had the same things when we were little kids. We all started from humble beginnings.*

One woman had been born literally in a market garden, one in a shed, and many of the women could recall living conditions that were rudimentary by today's standards, with dirt floors, newspaper on the walls and water having to be carried from a communal pump. However, these conditions of birth were considered more likely to indicate cultural preference than deprivation:

Mrs R *because in those days it wasn't appropriate for Maoris to go into maternity, or hospital. And so most Maoris gave home births, and it's interesting to see now that they're going back to that again.*

Similarly, the houses they remembered, though basic and often without running water, were kept clean and nobody remembered going hungry:

Mrs T *We learnt to milk, we used to work in the vegie gardens before school and come home and milk the cows. Oh yeah, I think we all had a hard life compared to what kids do today, but we all survived and we were all hard up, but you made do.*

Mrs R *But we didn't moan about it, that we had nothing, we were never hungry, eh? There was always food on the table. We mightn't have had flash clothes or anything, but you knew your mother and parents couldn't afford it. You just didn't worry about it.*

The details differed from person to person, but the setting was consistently rural and it is interesting to note that in 1996 older Maori were still more than twice as likely as older non-Maori to live in rural areas (Te Puni Kokiri, 1999). They remembered the hard domestic work done by women to maintain high standards of cleanliness. They agreed that, relative to the standards prevailing at the time, their lifestyle had been simple, but not poor. Expectations had been more modest, and the world had been less consumed by materialism than it is now. Even so, there had been a noticeable difference between the expectations of the Maori and Pakeha children in the same community:

Mrs R *We all didn't have that very much. We lived on the bare essentials, but that wasn't a problem. I mean we accepted it that way. One of the things that stands out in my mind is Christmas and birthdays, because I was brought up in a Pakeha community, every time Christmas and birthdays came along, the Pakeha kids would always get a present. And I always used to think to myself, why don't I get a present? But it sort of flashed*

through my mind, but never any resentment or anything. Our expectations weren't so high, eh? I don't even know whether I thought we were poor. I don't think even that thought went through my head. It was just, that's the way it was, and so long as we had clothing and food, but we seemed to have a good time though, as kids, just doing the basic things. I mean even going for a bike ride was a real thrill. It was just simple living, when I think about it now, material things didn't matter.

By contrast another woman had experienced “two worlds”, an affluent (Pakeha) world of servants, expensive cars and fine linen in which she lived a life of privilege as a “little princess” until the age of seven, and then a quite different (Maori) world of hard work and harsh conditions. She recounted how, with the Pakeha influence gone, the family's standard of living was dramatically lowered, and stigmatised. It was only later that she interpreted the behaviour of Pakeha neighbours as racial discrimination:

Mrs P *I knew, through growing up, how the Maoris were being treated by the Pakehas, and it came from that man. Whenever we went there - because I was a kid and his daughter and I went to school together and were great friends - I could play around with her dolls' house and everything she had in the front of their home, but if he had visitors I had to go round the back. And it never dawned on me why. It was because I was Maori, eh?*

As a young married woman, with her husband working as a farmhand, she felt 'rich' again, taking pleasure in family life and caring for the children (they had nine) rather than in material possessions:

Mrs P *We did so well. We were rich! I thought we were! 'Cause we had our own cow, we milked our own cow. And had our own hens to get the eggs.*

They spoke with pride and pleasure and a sense of celebration of the skills and the knowledge they had acquired through the hard work of caring for their families. In today's more complicated world, where their children and grandchildren were no longer prepared to “make do”, there was a feeling, common also among Pakeha “children of the Depression” that a more affluent life is not necessarily a better life. At the same time, there was a recognition, as among Pakeha older people, that times are hard for young families:

Mrs R *Yeah, things are hard now, I think they're very hard, a lot harder than our time.*

Mrs P *Oh hell yes, I wouldn't have nine kids today, definitely not, you couldn't cope.*

They also saw evidence in their own families that attitudes have changed, becoming both more materialistic, and more individualistic:

Mrs N *And it really, it definitely changed our children, it really did. I mean, as they got older, I take it from my own family, my older ones, they're in their forties now, and fifties, well do you know, they were happy to go and bring something home. One of my sons, he's fifty, he couldn't get home quickly enough to give me his pay. It didn't worry him to give it. And as my family increased, the others, they were completely different. Their money was their own. You know, this is how things have changed.*

These differences which Mrs N saw as generational may also have reflected important cultural differences in family relationships and obligations. In a study of income sharing in New Zealand families, for example, Fleming (1997) found a clear contrast between Pakeha families, who expected children to pay an increasing proportion of their own expenses from money earned outside the home, but were reluctant to accept money from them, whereas Pacific Islands parents expected their children to contribute to the household expenses and to supporting their parents as soon as they began to earn money. Mrs N's experiences suggest that an older set of values has given way over time in Maori families to the more individualistic Pakeha model as Maori society has become more "Westernised" (Maaka, 1993).

The women spoke with an almost personal affection of the 1935 Labour Government and the Prime Minister of the time, Michael Joseph Savage, a man revered by many (as noted in Chapter Five) as a hero who had dramatically improved conditions for Maori. Like Pakeha older people, they remembered good times when well-paid work was plentiful, but Mrs N explained why, even with "fabulous" wages at the "freezing works" (meat processing plant) and redundancy when the plant closed, she had been unable to save for retirement:

Mrs N *Sometimes my mother used to say to me, 'cause we were working at the freezing works, both my husband and I, and she used to say to me, you know, giving me good advice, I think it's time you started to put a bit of money away for your old age, because she knew that we were helping our families all the time. You know, our children have no-one else to turn to but Mum and Dad. And I said, Mum, it doesn't worry me about saving up, it's the love that my children show to me, that's better than anything else. I said, I'll be alright in my old age. There were times when I used to sit down and think, oh, we could have had such a lot of money and then we could retire! As it was we didn't! And we got all this redundancy pay, and oh that was wonderful! But we were still spending it to help our children. We didn't really have anything left for ourselves, because it's what you want to do for your children. And I thought, Oh, the pension is quite enough, keeps me going. And I haven't regretted giving all our money to our children, to help them along in their lives.*

The women drew a clear distinction between Maori and Pakeha attitudes towards money, and especially towards saving. They contrasted the attitudes and practices they had passed on to their own children:

Mrs R *Pakehas when their children are young, they teach them to save, don't they, right from a young age. But money didn't mean anything to us, eh? We didn't have the same thoughts for teaching our children, taking out insurances and all that sort of thing. It never entered our heads to do things like that, did it?*

Mrs W *My children were different, because my husband's part Pakeha, and my husband taught our kids how to save and to help themselves. If it had been my way I wouldn't have bothered. He taught them to save and I give thanks to him that we are in our position where we are now, we've got everything. I don't need anything, but I still help my children behind his back! Typical Maori mother, to help out her children!*

They saw Maori and Pakeha attitudes to money as symptomatic of their separate Maori and Pakeha worlds. In Pakeha society money is often seen as an end in itself, strongly linked with citizenship status and opportunities, whereas Maori tend to see it as a means to an end, such as fulfilling whanau obligations. This view is supported by the findings of the comparative study cited above (Fleming, 1997, p. 126) in which Pakeha parents “used pocket money strategies to train their children to manage their money in a consumer society”, an element of training which did not occur in Maori and Pacific Islands families, who gave money to their children with no obligation to earn and save. The women in my study approved of what they saw as “the Pakeha saving thing”, but the bottom line for them was that helping their families was the right thing to do as Maori mothers, because “we’re there to help them”. Although this may not be an exclusively Maori response, it does contrast with Pakeha middle class social norms which encourage parents to train their children for independence (Fleming, 1997).

It is significant that these people, who because of their age and their relationship to the labour market are officially classed as ‘dependent’ have, by their own account, been prepared to sacrifice material security in old age to secure a future for their children, and their grandchildren. It may indicate, as they argue, the different values of Maori and Pakeha, and a greater emphasis on family loyalty and obligation than on financial success among Maori people in general. What it does indicate very clearly is that, like most New Zealanders of their generation, they are unlikely to be financially dependent on their families. The statistical evidence on self-reported standards of living (Ministry of Social Policy, 2001b, p. 86) shows that only 6.5% of adults aged over 65 reported their standard of living as low or fairly low, compared to 15% of Maori families. Comparative survey data

shows that older people report fewer material restrictions and difficulties than younger people, and that this trend holds for both Maori and non-Maori (Fergusson et al, 2001). Considering also the high rates of home ownership among people of their generation, including Maori, it is likely that families will continue to depend on their older members for material support.

Knowledge and Skills

Knowledge, or lack of it, was a recurrent theme, and scattered throughout the sessions the women told many stories of how they had been denied both formal and informal opportunities to learn the skills they would need later in life. Some had been denied an education, being taken out of school, or leaving voluntarily to help with younger children or to accompany their parents in the shearing shed. In common with Pakeha of their generation, many had missed out on basic information about adolescence and reproduction, and on pursuing the careers of their choice. As children and as adults they had been denied access to traditional knowledge, most critically knowledge of the Maori language. In 1913, 90 per cent of Maori school children could speak Maori. By 1953 it was 26 per cent, and by 1975 it was less than 5 per cent (Durie, 1998, p. 60). Policies of assimilation and the promotion of English as “the only language of progress and advancement” were blamed for the decline (ibid), which was the subject of a Waitangi Tribunal ruling in 1986. As a result a range of innovative language development strategies have since raised enthusiasm for the language to the point where 2001 census figures show that one in four people of Maori ethnicity speak the Maori language (Statistics New Zealand, 2001).

Even the skills associated with the traditional woman’s work of cooking were a mystery to them until they learnt ‘on the job’. Several of the women told, laughing, how they had had no idea how to cook and had to learn from their husbands after they got married. As a result, they had tried hard to educate their own children in the things they would need to know:

Mrs R *I think that’s what we did, eh? All the things that we weren’t taught, we made sure that we’d teach our children. We didn’t want them to be as dumb as us! It wasn’t dumb really, it was just that we weren’t taught, we had to learn.*

Opportunities to learn the Maori language, unavailable to them, had been more available to their brothers and male peers. Maori writers (Hoskins, 1997; Johnson and Pihama, 1994) have drawn attention to these historical experiences through which Maori women have been denied access to the language, and thus effectively

silenced, on and off the marae. Hoskins (1997) argues that the male hegemony of the marae culture has become so entrenched that it has been internalised by Maori women to the point where they will choose not to speak even off the marae, a situation which Hoskins says (ibid, p. 38) indicates that many Maori women “have been denied the opportunity to gain the confidence to speak or indeed the confidence or belief that we may have anything meaningful to say”. The women in my study felt their lack of proficiency in Maori as a great sadness. They felt the deep irony of the fact that their parents, believing it was more important to ensure their children were proficient in English, and not believing they could manage both languages, had denied them a facility with their own language. They felt frustrated that, despite their cultural knowledge, a lack of fluency limited their marae performance, something which Maaka (1993, p. 221) claims “lies at the heart of kaumatuatanga”.

Paid Work

Johnson and Pihama (1994, p. 95) argue that Maori women have been denied access to “the credentials and qualifications that would provide Maori women with options other than those of domestic and service workers”. The career options that were ostensibly open to the women on leaving school were the same as for Pakeha women of their age, though one woman explained how being Maori meant that her working life did not work out as she had planned. In effect she had had two careers, one paid and one unpaid, throughout her working life. It was only now, as an older woman, that she was being paid for the first time for work that she had previously done ‘for love’:

Mrs R *Tertiary education wasn't a big deal in my day. The most they encouraged you to do was go for three years at high school, and the things that were open to us, mostly, was nursing, office work, or teachers, and I was trained in office work, but I never really did it for money. I started to work in hotels and waitressing and different things, and I really enjoyed it, because you had a lot of good contact with people. And what I learnt at school about office work, I really did it all for nothing, for clubs, and the church that I'm in. And that was me for the rest of my life until now. I mean I have to wait till I'm over sixty before I get paid for what I was trained to do in the first place!*

Mrs R had been singled out by a male kaumatua when she was “just a kid”, still at primary school, and pressed into taking on long-term administrative responsibilities for her church. She had no choice in the matter, because “in those days you didn't argue with kaumatua”, but Mrs R acknowledged that her long voluntary career had prepared her well for her current paid work:

Mrs R *But it gave me good grounding, because I'm a very methodical person now, in the work I do. And I had to be, because otherwise I'd be in a real mess. And so it's really taught me a lot. If you're going to do something on a big scale, you have to be organised. You can't just walk in there, and hope that everything will happen for you.*

Mrs N had wanted to go nursing, but had been advised by the doctor that she was too frail. Ironically, Mrs N was the oldest member of the group and one of only two who reported that her health was very good. Several of the women had left school to do domestic work and childcare, either paid or unpaid, after which they married and raised their own children. Fruit and vegetable picking and packing, in which the whole family was often involved, provided a supplementary income for many of them during those years. All of the women, most of their husbands and some of their children had worked at the local meat processing plant, which had provided much more than just a job. One woman spoke of how, when asked by her son to take care of his children she had searched for some way of being able to stay at work as well. Her solution, that her husband, a farm worker, would be the caregiver for the children indicates how important the job was to her in light of the high priority placed on caring for the family.

One major aspect of the job was the friendship it afforded, but more than that even, it was an “enclosed environment”, a complete social world and way of life, something that they had not realised fully until the plant closed and they were all made redundant. There were clear differences in the way the closure affected the women and the men, a major one being that the women had to carry on caring for their families, while many of the men had sunk into lasting depression. The whole community, but particularly the Maori community, was affected by the closure of not just one, but two meat processing plants, with the loss of several thousand jobs and more than one income for many families (Te Roopu Rangahau Hauora A Eru Pomare, 2000). As the women explained:

Mrs N *It was our young ones that we worried about, not ourselves, it was our young ones who just got homes, had all these mortgages.*

Mrs R *Yes, that was the reason why they both worked there, because the money was really good in those days. So they went to make good money to get their homes together and suddenly it was just whipped away from under their feet.*

The effects on the citizenship status of local Maori elders were complex. Beyond its role as a source of income, employment at “the works” had also provided “social support, self-esteem, identity and community” (Te Roopu Rangahau Hauora A Eru Pomare, 2000, p. 55). The effects of the closure had been especially crushing

for many Maori elders whose major role in providing emotional and material support for their children, many of them with young families and large burdens of debt, overshadowed their own material losses.

Culture and Identity

According to *The Social Report 2001* (Ministry of Social Policy, 2001b, p. 62):

People need the skills and opportunities to express their cultural values and practices and to pass these on to future generations should they want to.

Full participation in Maori society, for example, is contingent upon competence in Maori language. The report (ibid, p. 63) considers that “older Maori are more likely to be able to converse in Maori than younger people, and figure prominently among fluent speakers”. The experience of the women in this group suggests, however, that gender and place, as well as age, have had a significant and continuing impact on individual competence in the language, and hence ability to express cultural values. Cultural values were expressed on a range of topics, but the pre-eminent theme was the language.

Language

The oldest member of the group, now in her eighties, remembered a time when Maori language and Maori culture seemed to be accepted by local Pakeha:

Mrs N *It was wonderful when I was a girl, there was no difference. My grandmother couldn't speak a word of English, but they all knew her, "Come on Nanny", when she'd go to town. There was just none of this racism that we're having today. It's really sad.*

Mrs R, twenty years younger, recounted her early experience of sensing a greater threat from assimilation than from discrimination at a time when government policy as well as cultural and language practices within Maori families actively fostered cultural assimilation.

Mrs R *When I was going to school, my brother and sister and I were the only Maoris at the school we went to, and we always knew we were Maori, but the Pakehas there never thought of us as Maori. And I said to them one day, I'm a Maori, and they says, No you're not, you're one of us. And I said, I am not! So you see it was there alright but it wasn't as bad as it is now. But you see because we were the only ones in the school, they kind of took over and thought we were the same, put us in with the Pakeha. And I kind of kicked up a little bit about that, because I wanted to be known as a Maori.*

The marae, the “centre for cultural and traditional activities (and) the most enduring Maori institution” (Durie, 1999, p. 103) is the permanent home of the whanau or

hapu, built on ancestral land (Selby, 1994, p. 149), and the focal point for communal activities. It is “the most enduring forum for debate and decision-making” (Durie, 1998, p. 221), ideally suited, according to Walker (1975, p. 23) “to allow a community to arrive at decisions by consensus”. Marae protocol is the subject of ongoing contemporary debate, especially about women’s speaking rights (Irwin, 1992; Hoskins, 1997). Marae protocol or kawa varies from marae to marae and from tribe to tribe, but in general it is accepted that a visitor must wait to be invited on to the marae by the formal call of welcome, the karanga, performed by a senior woman of the tangata whenua and responded to from the manuhiri, the visitors. In most tribes women do not speak after this initial exchange, but Irwin (1992, p. 15) says that Ngati Porou and Ngati Kahungunu are two tribal areas where women do speak on the marae atea (the courtyard usually reserved for male oratory) which makes the inability of my research respondents to exercise their speaking rights even more poignant. They felt a deep sadness at the loss of their own language, and a feeling of humiliation at looking the part as kuia, while being unable to meet the cultural expectations they felt placed on them by their age. As children they had been excluded, and now as old women they were still excluded from something they saw as vital to their identity as Maori:

Mrs R *I was never brought up in the marae situation. And now that I'm an adult, I don't have the reo, this is the language, but I understand it. And, you know, it took me a long time to understand why that was. And it was because as a child growing up, Maori was spoken all around me, but it was never actually spoken to me. And that was because Maori language was being sort of pushed aside, and we were being denied our own culture really. And I have many regrets about that now that I'm older. I think to myself, well if that hadn't happened, I'd have been fluent, most of us would have been, we'd have been all fluent speakers. But it happened in our time of growing up, so that, you know, I really feel like I've missed out on something there.*

Mrs N *Like me - that's the saddest part of my life, that I'm eighty-three and I can't speak Maori either. I'm too nervous now. I can understand it, I can sing it and I can read it, but when it comes to speaking - Oh, I get all worked up and I can't! I'll tell you, I'm eighty-three and there wasn't one child in our marae that knew how to speak Maori, not one! I never ever picked it up and it's been the saddest part of my life. Because you do feel embarrassed today, you think you're old, and you get amongst these people and you can't speak Maori. It's terrible. It's a terrible feeling, especially when you get older, you know, I feel quite embarrassed that somebody might talk to me and I can't answer.*

Mrs P *My nanny, she spoke good Maori, and she never spoke to me in Maori at all, when I was home. So I missed out badly, like all the rest of our crew, we all missed out badly. And of course when I got married and my husband was a fluent Maori speaker, and he tried to teach me - well, you can't teach anyone that's stubborn like me!*

Mrs R *Mm, because the older you get too the more embarrassed you are to learn. Because when you're learning, you don't want to make a mistake, because they assume because you are old that you should know.*

As Kahugunu women they were less likely to be fluent in Maori than their husbands or brothers, or indeed their Ngati Porou relations from the East Coast. Their lack of fluency had become an issue for them only in the last few years, as they grew older and as the language enjoyed a revival. One woman had returned to school as an adult student to learn the Maori language:

Mrs W *I went back to High School to learn, and I got my School C in Maori, so I've got enough to get me by. I went back when I was old, in 1985, for two years. I had a grandson, I didn't mind that, and I had partly grey hair, sat in the class with all the children. Felt a bit embarrassed at times, but I wanted to learn. I was the only Maori that sat the School C. My other ones that went with me were Pakeha ladies, and we all got our School C. So I hold a ticket but I don't use it.*

She explained that she did not use her "ticket" because it is the men who usually speak on the marae:

Mrs W *The women sort of keep in the background; the job I do now, I'm a kaikaranga for their group and I just do the karanga, welcome the people in, and the men do the rest of the talking, and we, as ladies, get up and sing for them, that's about all.*

Others had tried to learn the language by going to classes, but had failed for lack of opportunity to practise, again due to the excluding effect of gendered cultural practices. Maori from different tribal areas can also find themselves excluded on account of hierarchies of language practice. One of the women, who considered her late husband "a real Maori - he knew the reo so much, and he did a lot of work", recalled her criticism of his regional pronunciation, and its effect:

Mrs P *I think that's a beautiful thing, to be able to speak Maori, it really is. I regret the day I laughed at my husband when he spoke. Because he was Wanganui, he dropped the aitch because that rohe drop their aitches. And I laughed my head off, I said, Gee, you sound so funny! And it made him shy, he wouldn't speak Maori.*

Whereas language had not been "a big deal" in their youth, it was an important issue in their old age, and they were acutely aware of their own deprivation, especially by comparison with their Ngati Porou neighbours, whose women have always spoken on the marae, and whose children tended at that time to be sent to Hawke's Bay's well known Maori colleges, Hukarere for girls, Te Aute for boys:

Mrs P *I went up there when I was about nineteen, and I was amazed, from babies up to teenagers, grown women, children, speaking so fluently, and I always thought it was beautiful, the best one in the whole world was Ngati Porou, because that was one of their sayings, e tama! The way they said things, you know, it sounded pretty.*

Mrs N *But what I found with the Ngati Porou people, eventually they could speak both languages perfectly. But Maoris, sometimes here, when I was younger, well, some of them really sounded pretty awful. English wasn't really that good. But you go to the Coast and they speak beautiful Maori, and beautiful English! It was just marvellous. Mind you, they all came to colleges, to Hukarere, to Te Aute, to all the different colleges, and I suppose that's where they picked up their English, but they speak beautiful English.*

These women considered Maori children today fortunate because the language is “coming back”. Although they were totally affirming of kohanga reo (Maori language pre-schools), which have made “such a big difference to our Maoritanga”, they were sceptical about “total immersion” for older children:

Mrs P *Their English is not very good, some of them. That's bad, and it seems as though it's a complete reversal of what we went through.*

Current language practices and educational models were discussed at length. The women were determined that their grandchildren should not suffer the language disadvantages they had experienced. They wanted them to be competent in both English and Maori, and considered bilingualism a better way forward than total immersion for today's children.

Mana

A key concept in Maori culture and a critical component of the concept of kaumatua is that of mana, denoting seniority, and also agency, the “power to perform” (Marsden, 1975, p. 194). Although the participants expressed a strong sense of their own seniority and power as kaumatua, nevertheless as Maori women their gender and culture intersected at certain times and places to ‘silence’ them within their own culture. They affirmed the seniority of the men on the marae, where their mana derives from their ability as orators, as opposed to younger people with head knowledge but lacking deep cultural understanding:

Mrs R *Yes, but I often think, you know, oh, our young ones sometimes put their foot in it, eh? ... The way I look at it now is, most of these young ones are being taught in universities, schools, their reo and when they learn a little bit about Maori, they become over-confident and they think they know the lot.*

- Mrs N** *You're right, (Mrs R). I notice that when our younger ones speak. You know when our old men spoke, they - just to the point. Now I listen to some of these young ones, they go on and on - whakapapa, and it's/*
- Mrs R** *Not relevant.*
- Mrs N** *Not to the kaupapa, you know, and I listened and I thought, Oh our men didn't speak like that. They just go on and on, about this and about that, and I think, oh they want to change it, if only they were able to really sit down and listen to those old men, how they speak, and they only say certain things.*
- Mrs R** *And the other thing, like talking about going on to maraes and that, and especially in a tangi, like the tangata whenua, on the pae, they're not supposed to be singing the praises of the person that's dead. It's supposed to be left for the manuhiri to do that. But you'll find that they're doing it, and you think oh, it goes on and on and on. But if you get one that's really fluent in Maori, when it comes to their turn to talk, most of them will say something like, well there's nothing left for me to say, because it has been said from that side. So, you know, this is all to do with our culture.*

Even though the women lamented their lack of facility with the language, they were nevertheless often called upon as leading elders to lend mana to an event or an undertaking by their presence. Durie (1999, p. 103) explains the significance of age to the senior status of kaumatua who are called upon to lend mana to an occasion involving Maori participants. The woman discussed the unique role they were frequently asked to play, and the reservations they had about being “used” sometimes to lend power and weight to a decision. This appropriation by younger people is a situation where kaumatua may feel their status is compromised, in Somers’ terms (1994, p. 630), “an incoherent experience ... where we feel controlled by a greater power than our own”. Whereas older Pakeha can feel exploited because of their generally diminished status, the Maori women felt they could be exploited, paradoxically, because of their high status which can be misappropriated under certain circumstances:

- Mrs R** *Young people feel comfortable about having kaumatua, whether they're men or women, around at certain times. You know it gives their hui or their meeting, or their whatever, a certain kind of status, if kaumatua or older people are there. And it also, you know, it's like we're supporting whatever it is that they're doing. And if they're seen to have kaumatua there, others feel, well this is worthwhile, this has got to be worthwhile, otherwise they wouldn't be here, you know. And I think that's the reason why we do get called out a lot, don't you think?*
- Mrs N** *Yes, it is the reason.*
- Mrs F** *Yes, they need the backing of the kaumatua for any hui to be successful, really.*

Mrs R *And at the same time, we can be used. I mean, when I say used - sometimes we're inclined to go, because we think it's the right thing to do, but then, sometimes when we get there, the kaupapa, or the subject, is not altogether what we believe in, or agree with, you know. We've been given a different picture. And so, to push their kaupapa to others, they have kaumatua there, you see, and then they say, well we've got the kaumatua and they agreed, they supported us. You know, so we can be used sometimes, I think. Don't you think so?*

Mrs N *Yes, true.*

Mrs R *It gives it, yeah, that bit of mana, you know, to have kaumatua there. But sometimes we forget, and we don't always ask, now tell me, sit down and tell me what this is all about, you know. It's not until we get there and then we're saying, what's going on, what's the whole thing about? And once you're there, it's sometimes too hard to back off. You know, so it's our own fault. We should make sure what we're going to support before we leave, before we get there. Then again, it's the young people's fault for not giving us enough time, and letting us know exactly what their hui is about. It doesn't happen very often, but - we have what is quite well known as having radical Maoris, and they turn on a nice front to us, but then when we get there/*

Mrs W *It's something else, something that we don't agree with.*

A cultural tradition in which language and cultural knowledge are vital factors is the contested cultural concept of the kaumatua.

Kaumatua

This group had been referred to me as a 'kaumatua group', and although the term kaumatua is widely used to denote respect for older Maori, men and women, strong views were expressed about the inappropriateness of this usage. The women believed the term, correctly applied, should be less age-specific and more explicitly applied only to people with certain competencies, which in theory meant that it could be applied correctly only to men. Taiapa (1994, p. 11) argues that status is conferred on "those men and women who hold the knowledge of marae kawa and tikanga, who speak 'te reo Maori' and are well versed in tribal history, oratory and waiata". Maaka (1993) says that seniority depends partly on whakapapa, but more on tribal knowledge and command of the language. The central component mentioned by the women was "deep" cultural knowledge:

Mrs R *But see now that's a modern concept now, eh? Kaumatua - you've got to be over sixty. You know, it's totally wrong. I mean kaumatua - in those days you were brought up to be that, and you could be a kaumatua at forty, even at thirty, if you had the knowledge. I actually don't like being called kaumatua, because I know I'm not that. I'd rather be called pakeke.*

Mrs P *To a certain degree, yeah.*

Mrs R *Because it gives people false impressions when you're called kaumatua*

and you don't have the reo and the knowledge too. It's, you know, it's all involved with very deep knowledge of Maori. So most times when anybody calls me a kaumatua, I say no, I'm a pakeke, or a kuia. Modern Maoris now have just (started) calling everybody over sixty a kaumatua, or over fifty now, a kaumatua, and it's not really quite correct.

Mrs P *No, the definition of a kaumatua is a man that can speak well, and they've got the knowledge of what he's speaking about, and a wide, wide knowledge of all things.*

This humility and shyness about identifying themselves as kaumatua is understandable in light of Maaka's (1993) assertion that self-appointed kaumatua can be harshly criticised. However, it was clear from other comments that these women had been formally identified as kaumatua:

Mrs R *We have two kaumatua groups. One is run by Maori Mental Health, and then the one that we run is just purely to, what we say, awhi our whole service, and we meet once a month.*

The women agreed that they themselves were quite comfortable with current marae protocol, in which male and female roles, and places, were clearly defined:

Mrs W *Well I do that, I sit on the paepae, but I never speak. But I will waiata for them. As we were taught at home there's always a place for us women to talk, but we got to get under the front of the marae. There you can speak on the marae, on the outside of the marae. A woman never speaks on the full mat, but underneath the verandah, yes. I know they speak at our marae, the women spoke on our marae, but it was always there.*

They also acknowledged that Maori women were now pushing against those old boundaries and that things were likely to change in the future as a result of a new vigour, confidence and energy among all generations of Maori women. The following conversation amongst the women reflects their strength and seniority, and their sense of citizenship as Maori women:

Mrs N *It's the attitude. We Maoris, our attitudes have changed, Maori women. Well I'm eighty-three and I don't feel old. It's just one's attitude today. And we have changed. I will say Maori women have changed in their attitudes. As I say I can remember, once you hit forty - I look at it that way - they were really old. Their thoughts were old, they sat around like old women. Not today. We're not that type of Maori now, I think we're only as old as we feel. And it's a good attitude, it's really a good attitude.*

Mrs P *I was saying that too. I said, I looked at my Dad, and when he died he was old. He had what they call dropsy, and he was old! But now when I looked at his stone he was only fifty-nine! At fifty-nine, I didn't feel that old! ... It's just an attitude of the time.*

Mrs H *The times have changed for us.*

- Mrs P** *And I reckon there'll be a time when women really are going to take over. I mean they're taking over in Parliament anyway.*
- All** *Yes!*
- Mrs P** *Yeah, and I reckon they will take over, I mean on the marae, unless our young men put their heads together and bang up some ideas. Because there's no one there!*
- Mrs W** *The men are dying out more than the women.*
- Mrs P** *Yeah, they're dying so fast, that the women will have to do it!*
- Mrs R** *But then they say in Kahugunu, women can speak on the marae.*
- Mrs L** *Oh, some of our women are pushing.*
- Mrs N** *I know one woman, she always speaks. She wants the women to be able to speak on the marae.*

It is significant that there is no word in English equivalent to the word 'kaumatua', which bears the weight not only of individual citizenship status, but the mana of a whole tribe. Durie (1999, p. 102) explains that the standing or mana of a tribe "relates more to the visible presence and authority of its elders than to the vigorous activities of its younger members". It is the older generation, he says, "who carry the status, tradition and integrity of their people". It is not age alone, but wisdom and leadership skills which are required for the roles of kaumatua, which, Durie argues (ibid) are "not only positive, they are critical for the survival of tribal mana". It is not surprising that the women conveyed a high degree of satisfaction with their identity as Maori and their special role in the traditional culture as highly-esteemed and critically important elders.

Summary

As already mentioned, this was an elite group just by virtue of their survival to old age. Although Maori women live longer than Maori men, their life expectancy at 72 is still lower than that of non-Maori women by nine years (Te Puni Kokiri, 2000). In addition Maori experience earlier onset of disease (Dyson, 2001) and twice the hospitalisation rate of non-Maori (Te Puni Kokiri, 2000). While presenting as enjoying reasonably good health themselves, they were acutely aware of the statistical risks to Maori as a people in terms of both physical and mental health, and were interested and involved in initiatives to promote health in the Maori population. They were also aware that as acknowledged kaumatua they enjoyed a status, both symbolic and material, which was not equally available to all older Maori women, or to most Pakeha women. Although they spoke of their husbands, brothers and fathers, they were careful not to speak for them, and the comment

was made that it would have been good to hear from the men. Indeed the Maori world they reflected was strongly gendered and hierarchical, a world in which they “knew their place” as women. Their relations with the labour market, specifically their jobs in the “freezing works”, were less gendered, so that they enjoyed equal status (though not equal pay) with the men in the realm of work. Before and after work, though, they had still shouldered the responsibility for caring for their children. After being made redundant or leaving work, the women went back to their roles as “caregivers for life”, while the men, with no socially sanctioned roles available to them, were generally more vulnerable to the multiple losses of unemployment, including severe depression.

Actively involved in very dense networks of family and friends, the women welcomed their participation in the research as an opportunity to share their own stories with other members of the group, and importantly, to articulate a uniquely Maori perspective on old age. They specifically cited the research group meetings as the type of activity old people need to be involved in to remain active and alert, and to demonstrate that they are indeed a visible and important part of the community. Their attitudes to education epitomised the struggle they articulated to remain Maori in a Pakeha world. They themselves had received scant education, being kept in what they now regarded as ignorance of what counts as important in both worlds. Growing up at a time when their language and culture were being “pushed aside”, they had had to learn about the things of the Maori world “the hard way”. Raised by parents and grandparents who were trying to do their best for their children by pushing them into the Pakeha world, they themselves had raised children who were entirely at home in the mainstream Pakeha world (indeed many were married to Pakeha), and grandchildren who were increasingly at home in the Maori world, but had been raised in a world dominated by Pakeha values of individualism and capitalism. Excited by the revival of Maori language and values, these women were determined to see that their grandchildren did not miss out on their “Maori side”. At the same time, they recognised the value of an education that would give their children and grandchildren access to good “Pakeha” jobs.

Although saddened by the erosion of some of the values and sanctions, and the nourishing and sustaining physical environment that had characterised their own Maori society in their growing up years, they projected a confidence, and a sense of wellbeing and enjoyment of life that was entirely at odds with their status as old Maori women in the context of mainstream society. It was, however, profoundly consistent with their roles as kaumatua in a society which embraces old age as

integral to, rather than extraneous to, real life, placing real demands on old people and offering real security and status in return. The concept of mana, denoting authority and control (Durie, 1998) and a critical component of the acknowledgement of seniority by the community, is a vital ingredient in kaumatuatanga which tends to increase with age, in sharp contrast with senior citizenship status in mainstream Pakeha society. Conspicuously missing from these accounts is the loneliness, declining status and sense of loss that tends to be prominent in Pakeha accounts of ageing.

This group of people was probably closer to 'senior citizen' status in terms of being and feeling involved and *more* powerful than when they were younger. Yet this seniority did not depend on income, education, or even good health. It depended above all on being valued in society. Factors such as income and standard of living appear to be less important determinants of kaumatuatanga than involvement in whanau, hapu and iwi structures of Maori society, and knowledge of the culture and language. In summary, it is clear that the concept of senior citizenship is culturally specific, differing in important ways from the concept of kaumatuatanga as it is used in this chapter and this thesis.

These women were intensely alive, enjoying highly esteemed, interdependent roles in whanau, hapu and iwi, with a status and visibility that was enhanced rather than diminished in their old age. Even with the losses they had sustained, as a people and as individuals, they communicated an undeniable sense of their own power and autonomy, a sense of themselves as citizens with real seniority.

Chapter Thirteen:

Narratives of Senior Citizenship

Introduction

This chapter will provide a short descriptive summary to conclude Section Two of the thesis. In the previous six chapters I have used the framework from *The Social Report 2001* to provide an indication of the outcomes for older people in New Zealand in each of the social domains identified by the Government as influencing the quality of life and social inclusion of all New Zealanders. The framework, which is intended to provide a basis for discussion and debate is by no means definitive (Ministry of Social Policy, 2001, p. 9). However, unlike conventional measures of poverty and inequality such as Gross Domestic Product, which focus exclusively on the economy and on market-based activities, it does reflect a concern to include a greater range of ways of understanding and measuring inequality and wellbeing. It has in common with newer measures like Genuine Progress Indicators, the United Nations Human Development Index and concepts of social exclusion, time-poverty and well-being an intention to measure a wider variety of indices than earlier measures (Briar, 2000). A particular focus of the framework I have used is finding ways to measure the extent to which people have control over their own lives and access to “the resources and capacities to live the kind of lives they value” (Ministry of Social Policy, 2001, p. 9).

Narrative Identities

Over the time spent together in discussion, each group built up an account of citizenship that was unique to that group. Through their narratives and “counter-narratives” (Somers, 1994, p. 631) the participants contributed to a dynamic process which does not define senior citizenship but embodies or exemplifies it. In an attempt to avoid the long tradition of defining Maori with reference to the dominant Pakeha “norm”, I begin with a discussion of the citizenship narratives of the group of older Maori women. This is a deliberate strategy to avoid any implication that any group represents a “deviation” and to celebrate their variation (Somers, 1994, p. 632).

“Getting old’s just nothing at all really”

The women in this group did share similar narrative identities and relational settings. Their stories were deeply imbued with notions of “being Maori”, and set within the context of whanau, hapu and iwi relationships. Although they were unwilling to characterise themselves as kaumatua, it was established with humility

and grace through their stories that they were fulfilling the special obligations and receiving and exercising the mana accorded to older people in Maori society who are invited to fulfil the role of kaumatua. Robinson and Williams (2001) explain that the practice of whakaiti, humbling oneself, is an important way of contributing to the mana of the collectivity rather than building up one's individual status. Kaumatua status is not accorded just on the basis of age, but also takes account of cultural knowledge and skills, which for the women could include karanga, the ritual call of welcome on to the marae, and special knowledge of their whakapapa or genealogy. Fluency in the language was highly prized, and it was a matter of sadness to the women in this group that they were not brought up to be fluent in te reo, the Maori language. They had found it hard to learn in their old age, though one woman had gone back to school as a grandmother to learn Maori and was proud of her achievement in getting her "ticket", her School Certificate in Maori.

Though their health status was variable, they were deeply involved in marae activities, being called upon regularly to lend mana to a hui by their presence. There were many areas in which the women had a wealth of knowledge and understanding, including spirituality, ritual and whakapapa. Politically astute and acutely and personally aware of the effects of colonisation on their people, they were knowledgeable about Maori development initiatives and particularly affirming of the educational models of kohanga reo and kura kaupapa, which have almost certainly saved the language from extinction.

They had a strong sense of belonging and place, rooted in knowing their ancestral home or marae, around which their social and political participation revolved. The women were knowledgeable about the culture and deeply confident of their place in Maori society, essential components, as Robinson and Williams (2001) argue, of a Maori concept of social capital, the basis of which is the whanau. They communicated a sense that they were thoroughly aware of their own value, to the whanau, hapu and iwi, and to the survival of the culture. The result was that ageing to them was "nothing at all", though in fact it did represent an added status, a strengthening of their authority, a heightened visibility and an intensification of their seniority in the community. They had an average of six children each, and many grandchildren and great grandchildren. They were deeply immersed in the lives of their families, supporting children and grandchildren financially and through childcare, hospitality and passing on the culture to the next generation as "keepers of the meaning". Their citizenship was

manifest in the way they moved and spoke, with assurance, dignity and authority. The struggle they described as older Maori women was not a struggle for recognition within the culture. It was the struggle of their people, a struggle for self-determination, a struggle to retain their “Maoriness” and to nurture and protect the Maoriness of their children, and particularly their grandchildren and great grandchildren, living within the dominant Pakeha society with its different and often conflicting values. They were clear in acknowledging that they did not represent all older Maori women, but they were conscious of representing a successful Maori model of ageing which showed up the Pakeha model as lacking by comparison. These women appeared to have positively accumulated their sense of citizenship along with their store of knowledge and wisdom over a lifetime of social connectedness and community development.

“I rage against age”

By comparison with the Maori group, whose ancestral land was where they had been born and where they would die, the Havelock North group collectively defined themselves as “newcomers” to Havelock North, managing to convey a strong but very different sense of place, and to establish that they belonged to Havelock North, but that they were different from the “original families” whom they characterised as parochial and resistant to change. As “newcomers” the participants established that each had come to live in Havelock North as the result of a deliberate choice. They had choices and they had chosen Havelock North over other places for its beauty and peace, and its pleasant climate. They were rich in community connections. As well as strong family ties, including knowledge of their genealogical roots, and neighbourhood friendships, they belonged to various organisations in which they held a range of leadership positions. They attached great importance to good moral values and the important task, as part of their citizenship obligations, of passing them on to younger generations. They held strongly to a sense of responsibility and obligation as citizens, not only to support and engage with their children and grandchildren, but to sustain and nourish the environment and to help others in the community. Spiritual values, expressed for most members of this group through their strong Christian faith, provided a firm foundation for this group.

Active in churches and other community organisations, they were also politically active at the local level. Well educated with professional careers behind them, they continued to seek out opportunities for learning and sharing knowledge with others, as in U3A, the University of the Third Age. Interested in ideas, knowledgeable, keen

to learn from each other and to engage in debate about social issues, this was a group of very senior people whose citizenship was secure. Because these were people who could afford, on the whole, to buy the support they might need, their worries tended to be about the needs of others in the community who were not so well off as they felt themselves to be. They were generous and generative, conscious of the public goods they had received through the welfare state, and keen to reciprocate. If the factors considered necessary by Robinson and Williams (2001, p. 53) for building social capital are applied to this group, they were active and knowledgeable citizens operating within a rich network of voluntary associations. A theme which emerged strongly in this group was the ethos of obligation, and the importance of giving to family and community, in terms of attention, commitment and knowledge, as well as time and money. These were people whose citizenship had been most assured during their years in the work force. While still enjoying the relative health and leisure of a Third Age, they were conscious of a loss of power and status with advancing age, and raged against it.

“Grey hairs are honourable, but old age is abominable”

Whereas the Havelock North participants were fairly representative of the people of their “village”, the people in the Flaxmere group represented a very small proportion of their ethnically diverse, lower socioeconomic, very young community. They themselves were a highly diverse group, although the observation was made that “None of us were born with silver spoons in our mouths”. They were happy to be living in Flaxmere, they said, which was a very “friendly” place. They felt the people of Flaxmere were more friendly than in other places; they were drawn into defending it against perceptions of Flaxmere as a place characterised by poverty and crime. One person had made a conscious choice to retire to lower-priced Flaxmere, against expert advice, in order to have more disposable income in old age. Two other people were home-owners, and the remainder were women on their own, renting council flats. Four of the six participants had very restricted mobility. One was not able to leave her home without assistance, and the other three were dependent on public transport, voluntary organisations such as Age Concern, or friends, for any shopping trips or “outings”. Other restrictions on the choices available to members of this group were limited income, frailty and physical limitations, health problems, difficulty in accessing services, both public support services and private goods and services provided by the market.

Most people in this group had few strong family connections, partly through alienation as a result of alcohol dependency, depression and divorce in earlier

years, partly as a result of smaller families, and partly through geographical distance. The exception was a woman from the Pacific Islands community who had contact with her family every day. She was also very involved in her church, and defined herself in terms of her strong evangelical Christian faith. Community connections seemed to centre on Age Concern, and churches, and were largely based on the search for company, support and entertainment. Mobility was severely restricted for several members of this group, especially those in the older age groups, who were mostly confined to their homes.

There were strong gender differences, though there was only one man and he was younger than most of the women. He was involved in hobbies which provided him with absorbing interest, a small intermittent income and a retirement “career”. He had planned well and was proud of the successful outcomes of his planning. The women, by comparison, seemed to have few choices available to them. They had not had the financial security to plan for old age, for example, and even being a homeowner in this group did not guarantee any choice but to stay put. Members of this group were generally good-humoured and optimistic, extremely interested in each other’s life stories and strongly supportive of each other. They were appreciative of the rare opportunity to tell their stories, and their lively discussions appeared to generate an increased interest in and commitment to each other and the people in their neighbourhood and community.

Although they had a strong sense of place and belonging to Flaxmere, there was no marked evidence of connectedness or generativity, either in terms of their genealogical roots or in their attitude towards their children and grandchildren. The kinds of narratives people used to make sense of their situations accentuated both the loneliness of their struggles to accommodate certain “incoherent experiences” (Somers, 1994, p. 630), and the successful outcome of their struggles. They had resisted invitations to succumb to confusion, powerlessness and despair, and survived to tell the tale. In the same way, old age was a struggle to remain visible and to find a voice. To the extent that they succeeded in doing that, in the community and in the research group, their stories were narratives of resistance to the loss of autonomy and power that seemed inevitable in old age.

“As long as you talk to them they’ll talk to you”

This remark from one of the participants refers to the business of making conversation as a way of managing her life in the rest home which I called Greenvale. The participants in this group constructed other narratives of

empowerment, especially about their earlier lives and their experiences of the Depression and other hardships. Their stories of the more recent past, on the other hand, tended to reflect confusion (about why they had “landed up” there), powerlessness (about being “dumped” there), as well as counter-narratives of resistance to the invitation to rest in the “rest home”. For two of the women particularly, these counter-narratives about activities such as helping with domestic duties, caring and keeping house within the rest home environment evidently represented strategies by which they were able to maintain the continuity of former lives as wives and mothers, as well as retaining useful valued roles and developing relationships with staff members. There were other counter-narratives about “sacking the doctor”, not sitting there “like a stuffed monkey”, and about making sure people speak up so you can hear them.

It was clear that the world of the rest home was contracted by comparison with the former worlds they had inhabited with their families or in their neighbourhoods and friendship networks. Connections with others on the outside were restricted by the participants’ removal to the rest home environment. In terms of the public and private worlds, even though the rest home was not really a home at all, and some parts of it were public spaces, the confinement of these participants to the private sphere and their exclusion from the public world was almost complete. Nevertheless, in terms of their own relational narrative subjectivities, by their own account they were continuing to make choices, and to engage with the world within the rest home. It would be a mistake to think in terms of disengagement, even though their engagement was limited to a few relational networks, most of which were not chosen but imposed by their circumstances. Their narratives were not narratives of despair and depression at their confinement and loss of autonomy. Instead they continued to engage in the struggle to make themselves visible through their stories of the past and the present, “taking each day as it comes” and continuing to relate to people, as they did to me, as the opportunity arose. Their struggle to retain their sense of themselves as citizens depended to a large extent on their ability to relate to others and to remain socially connected.

“My life as a flatter is the answer to old age”

The participants in the retirement village I called Mahana shared with the rest home residents the fact that they lived at a communal address, and had no need to worry about security or home maintenance. In almost all other ways, however, the situation of the “flatters” at Mahana could not have been more different from the rest home residents’ circumstances. Whereas the latter had withdrawn or

been relegated to the rest home by default, either because there seemed no other viable choice or because others had made the choice for them, the former had withdrawn by choice from the engagements of society which characterise the Second Age (Laslett, 1989), the work of production and reproduction. In Laslett's Third Age of personal achievement and fulfilment activities are voluntary, and people are free to create whatever forms of social collaboration suit them. There is an emphasis on planning for and enjoying a period of leisure characterised by good health and opportunities for both participation and withdrawal.

Third Agers have to conduct their lives as far as possible "in the presence of their future selves", says Laslett (*ibid*, p. 154), meaning that they need to imagine and plan for a future, while not knowing how long it may last. Planning for a period of healthy, active leisure had been an important part of the process of retirement for some of these participants, especially the men. Although the transition from work to retirement had not always gone entirely smoothly, and the women denied that they had retired at all, their lives in the retirement village suited them perfectly. They felt they were independent yet they remained connected to their networks of family and friends. They lived in their own homes so their privacy was assured, but if they wished to participate in the communal life of the retirement village the facilities and the people were at hand to enable them to do so, to the degree that suited them. The environment was effective in meeting their needs for autonomy because they had control over their lives, and for social support because they could choose to remain connected to their old networks and enter new networks. The element of choice was very important to their sense of themselves as citizens. They were conscious that their happy situation was not universal for older people. It had required planning, and substantial reserves of capital and knowledge resources. They had needed, for example, to be home-owners with sufficient material resources to pay a substantial amount of money on entry to the village as well as ongoing maintenance fees and living costs. They had also needed to have access to knowledge resources in the sense of knowing what choices are available and having access to the necessary information as well as the ability to weigh up and choose among them.

This group enjoyed a high level of autonomy in that they had a range of viable options and the power to act on their choices, and they were also embedded in secure relational networks, both inside the village and in the wider community. The key to their sense of citizenship was that by choosing the communal environment of the village they were able to protect themselves against the most

corrosive elements of an ageist society by regulating and controlling the extent of their exposure to it.

“A lot of people have the impression that Grey Power people are squabblers and troublemakers”

Developing a group consciousness is one way in which older people can protect themselves from the ageist attitudes that threaten to diminish their sense of citizenship (Bond and Coleman, 2000). But the members of the group had joined Grey Power for a variety of reasons, which were as heterogeneous as most other things about these people. This diversity makes it as difficult to reflect their different perspectives on ageing as it is to envisage how Grey Power as an organisation can represent a group of people with different socioeconomic, political and even age group characteristics and interests. That they were attempting to do so was what had brought them together and what distinguished them from the other groups. The difficult nature of their self-appointed task was no doubt responsible, at least in part, for their reputation, referred to in the heading, as “squabblers” and “troublemakers”.

In this group the diverse subjectivities of some members, especially the women, tended to be subjugated by a powerful master narrative which constructed both male and female subjectivities as universal. Within the group’s narrative co-construction, this “archetypal” master narrative allowed certain stories to dominate. These “everyman” stories were stories “that not only represent maleness, but in effect replicate the metanarratives of classical social theory” (Somers, 1994, p. 630). There were certainly examples of “counter-narratives”, expression of which Somers (ibid, p. 631) calls “a crucial strategy when one’s identity is not expressed in the dominant public ones”. One such was the story of a working-class woman from a poor family who recalled her “adventurous” trip of a life-time, which was “not like you other ladies have had”, she said. Other counter-narratives were the articulation of the loneliness and social isolation experienced by women as young mothers, and the story of the woman who had decided against paying rising health insurance premiums in favour of putting aside the money to pay privately for her hip replacement.

Narratives of empowerment were present, but they tended to be subordinated to more dominant stories which focused on the dependency and powerlessness of “the elderly”, perpetuating stereotypes of poverty and deprivation in old age which, as far as I could ascertain, bore little relation to the actual lives of the people in the

group. This discrepancy was a cause of unease amongst the members of the group themselves, with some participants expressing their dissatisfaction with the public image of Grey Power as an organisation in the community. A majority of the women also said that Grey Power had failed to provide the kind of “companionship” they were looking for as members.

The stories of the participants in this group displayed their resourcefulness and capacity for social connectedness, especially to family networks. There was also expression of a longing for higher levels of friendship. All seemed assured of a reasonable standard of living and were able to exercise choice about where and how they would live. However, that did not stop them from feeling disempowered, even victimised at times, by the rate of change in society, and by the ageist attitudes they felt were directed towards them as elderly people.

This short descriptive summary of the groups’ narrative identities concludes Section Two. Section Three is the final section of the thesis. Chapter Fourteen offers a discussion of senior citizenship and Chapter Fifteen concludes with a conceptual model of senior citizenship and some recommendations for policy and future research.

Part Three:

Senior Citizens?

The Relational Dimensions of Senior Citizenship

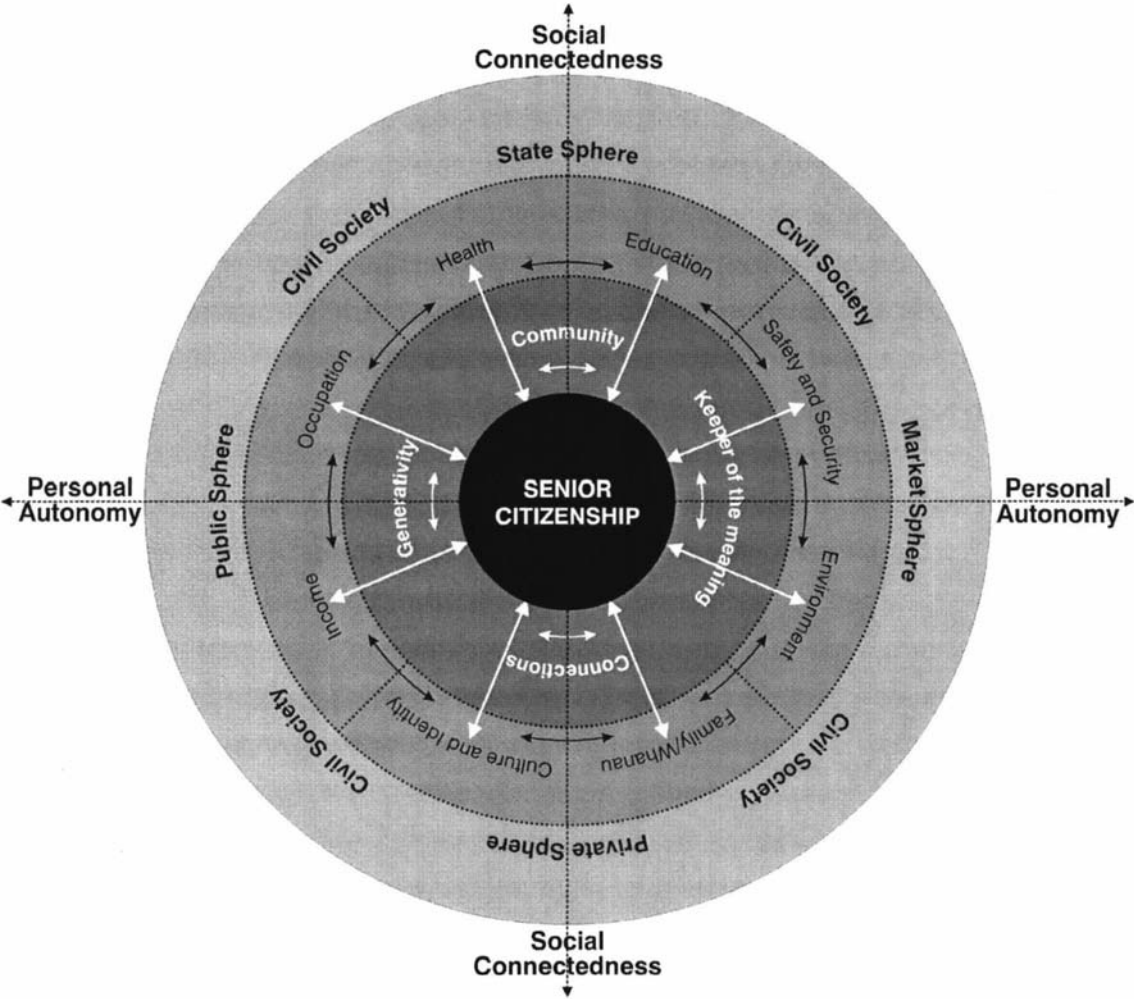


Figure 1

Chapter Fourteen:

Conclusions and Recommendations

‘Maku tenei, ma te ra e to ana. He aha kei a koe? Kei te ra e huru ake ana.’

‘Leave this for me, the setting sun. And what is for you? The glowing sun is the rising sun.’

If children are the hope for the future, then kaumatua, older people, are the foundations upon which that hope can be built (Durie cited in Cunningham et al, 2002, p. 4).

Introduction

This chapter concludes with a discussion of the construction of senior citizenship, and in particular the ways in which the research participants' experiences in this project were mediated through social and political structures and relational practices of the social world. Citizenship is seen as a relational performance, not fixed but contingent on legal constraints and cultural practices, and mediated by individual biographical narratives, with a focus on personal autonomy and social connectedness as key indicators of what constitutes citizenship for groups of older people in particular geographical and cultural settings.

Citizenship is defined as a participatory process enacted in and through the networks of relationships and affiliations that constitute the social world. The performance of citizenship is mediated by the institutions of political and social life and the intersection of age with other key variables such as gender, class and ethnicity. Viewing citizenship as a continuous process of participation and a struggle for inclusion in relational networks provides space for an active notion of performed citizenship which includes and transcends the legal, political and social rights of citizenship. The research aim was to understand how and where citizenship is performed by senior citizens in New Zealand, recognising that people's actions are guided by the cultural and structural relationships in which they are “embedded” and by the stories “through which they constitute their identities” (Somers, 1994, p. 624).

In this study research methods using focus groups and story-telling were selected to provide the participants with an arena in which to appear as senior citizens. Participation in groups offered the respondents opportunities to make sense of their own experiences and the experiences of other older people, and also to think about the issues facing them as senior citizens. Six groups were recruited in order to explore commonalities and differences in their experiences in eight

social outcome domains (Ministry of Social Policy, 2001b) of health, education, safety and security, environment, family/whanau, culture and identity, income and occupation. A biographical life cycle approach enabled older people to 'remember' their lives and emphasised the impact of social outcomes over time. A major objective was to provide opportunities for the telling of individual stories in the context of group narratives. The data generated was intended to provide a historical context and a basis for analysis of senior citizenship which is capable of addressing issues of both structure and agency by interrogating the key concepts of seniority and citizenship.

Key findings of this thesis are conceptualised in the theoretical model of senior citizenship (Figure 1, page 374) which explores the ways in which older people are, and are not, able to participate in the polity as senior citizens. Beginning at the outer sphere the model shows how the capacity for senior citizenship is influenced by the nature of the various spheres of civil society and the relationships which exist between the citizenry and the mediating institutions of the state, the market and the public and private spheres. Overlaying these arenas of civil society is a sphere with permeable boundaries divided into eight segments and representing an interacting network of linked 'social outcome domains' within which people live and exercise their citizenship on a daily basis. Overlaying this sphere is a smaller one symbolising the personal networks of connections which sustain older people and within which they perform the later life tasks of 'generativity' and 'keeper of the meaning' (Vaillant, 2002). Two axes, representing respectively personal autonomy and social connectedness, intersect the whole figure, showing that both are necessary components of performed citizenship. Importantly the model is dynamic, in that each sphere rotates independently, indicating that what happens in each of the social domains impacts on the senior citizens' connectedness and capacity for citizenship, and in turn is influenced by the degree to which an older person is able to retain personal autonomy and social connectedness.

Social outcome domains: arenas for the performance of senior citizenship

This section discusses the "spheres of enactment" which constitute the "lifeworld" of citizenship (Joseph, 1999, p. 15), using a narrative identity approach to focus on the "narratives of meaning" (Somers, 1994, p. 629) which explore and explain people's experiences over time within their relational networks. Somers argues (ibid, p. 628) that:

Just as an adequate material life is an essential means of preserving normative relations, so cultural and symbolic relations provide material resources for livelihood.

This is to say that a sense of citizenship derives from and depends on both the material resources which are necessary for autonomy and participation, and the cultural and symbolic relations in which people are embedded. Eight key social outcome domains, proposed as a way of organising measurable indicators of social wellbeing (Ministry of Social Policy, 2001b) are represented in the conceptual model as eight interconnecting segments of the social sphere. These domains of health; education; safety and security; environment; family/whanau; culture and identity; income and occupation are used as a framework for this discussion.

Health

Health status is a major determinant of the ability to participate: outcomes in the health domain concern the ability of people “to function, participate and live independently in society” (Ministry of Social Policy, 2001b). Discussion of health outcomes with older people reveals a perceived preoccupation with notions of dependence and being a ‘burden’ that indicates a lack of congruence with seniority and is not evident in the health discourse concerning younger citizens. In the participants’ stories both physical and mental health connected with notions of independence, which in turn linked with the idea of being able to stay in one’s own home. The key consideration was what alternatives existed in terms of care and accommodation if a person was no longer able to carry on living alone with the support available. Having very limited options or no perceived choice at all added considerably to the fear of becoming too sick or frail or disabled to manage alone. The material consequences of past episodes of mental ill health and/or alcohol dependency appear to have followed participants into the present, particularly in terms of more limited lifestyle options and attenuated or broken relationships in family networks.

Members of the kaumatua group were less interested in discussing their own health issues than health issues for Maori in general, and in particular the necessity for appropriate health services that are provided by Maori for Maori. Their positive appraisal of their own health status may reflect both the secure cultural identity of the particular group interviewed and general kaumatua attitudes to health, which Durie (1999) suggests are measured by the capacity to participate more than by ill health or disability. The importance these kaumatua attached to being able to fulfil their obligations and participate in their community was a strong incentive to remain active and healthy, and to minimise the importance of ill health if it arose.

Health services provided for older people by the state both through hospitals and in the community were perceived by participants in all groups to be inadequately funded, inequitable and ageist. Long waiting times for surgery such as hip replacements and cataract surgery had resulted in people buying increasingly expensive health insurance in order to get the services they needed in a timely fashion. The public/private split in health was felt to be particularly inequitable, with surgeons operating in both domains and perceived as managing the public waiting lists in order to maximise their own private profits. Despite the return, after years of market-led health reforms, to a more social democratic model of health care, there was no evidence from participants' stories that their trust in the public health system had been restored. Instead, their experiences reflected a health environment in which a persistent lack of policy direction, leadership and money have resulted in reduced access to publicly funded health services for older people, which in turn has impacted negatively on their wellbeing, independence and ability to age safely in place, and consequently on their opportunities for performed citizenship.

The participants' stories reflected an association between health status and socioeconomic status over time: those participants who lived in the higher socioeconomic suburbs had a higher level of enduring good health, while those who lived in lower socioeconomic areas were more likely to be suffering from longstanding debilitating conditions such as diabetes or heart disease. The rest home group was the exception, in that the participants had come from a range of suburbs and socioeconomic backgrounds, classified according to their level of dependence or independence, which in turn was determined by their health or disability status. Health status was a key determinant of independence, and hence of autonomy, for the Pakeha participants. For the Maori women health status was a key determinant of participation in whanau, hapu and iwi networks.

Education

Outcomes in the educational domain concern opportunities to acquire the knowledge and skills that enable people to participate fully in society. Educational attainment plays a large part in determining whether a person is able to achieve seniority in status and citizenship in terms of ability and opportunity to participate. Access to formal education was generally less available to the participants and their peers than to younger generations, though educational achievement was also strongly influenced by social class and gender, as well as cohort. The oldest participants were the least likely to have acquired any formal education beyond

the age of fourteen and the women were less likely than the men to have received professional or trade training. Tertiary education when young was closely linked with class and gender: it was restricted to those male participants with the highest standard of living and socioeconomic status in later life. Lifelong learning, however, including tertiary education, was pursued by both female and male participants with high stocks of social capital. Their stories indicate a strong link between early and continuing educational opportunities and a capacity for performed citizenship through the later life tasks of 'generativity' and 'keeper of the meaning'.

The Maori women had very different perspectives from the Pakeha participants on education and on knowledge. Despite low levels of formal education they experienced a rise in seniority as they aged, unlike the Pakeha participants who generally experienced a loss of citizenship status in older age, notwithstanding higher levels of formal education. Education in the Pakeha system had failed to teach the Maori women *te reo*, their language, or to reflect their realities and their culture as Maori women. Even tribal structures and education at Maori colleges had failed to equip them in the way that their husbands and brothers had been equipped with the capacity to perform as fluent Maori speakers.

Maori values were seen to be quite different from Pakeha values, in education as in other areas. In both cultures status attaches to people who have acquired knowledge, but the status is accorded differently to different kinds of knowledge. In Pakeha society the highest status is accorded to institutionalised knowledge which is traded as a commodity: within Maori society the highest status is reserved for the elite knowledge of the *kaumatua*, the elders in age as well as in authority. Their knowledge stretches backwards in time through the *whakapapa* and the times they have lived through, and forwards through the cultural knowledge and the wisdom imparted to succeeding generations. Some Pakeha participants were also knowledgeable about their genealogies, but this knowledge is considered optional in Pakeha society, while in Maori society it is considered essential to a personal sense of integrity and belonging and to "the "survival of tribal mana" (Durie, 1999, p. 102).

It is clearly demonstrated in the stories of the Maori women that their senior status and opportunities for citizenship in the *whanau*, *hapu* and *iwi* networks of Maori society derived not from formal educational attainment but from the seniority and the cultural knowledge acquired over a lifetime of 'being Maori', and that this seniority tended to increase with age. For the Pakeha participants, educational

achievement was closely associated with socioeconomic status and gender, the highest status being accorded to the men with the highest educational attainment, equating to the highest former earning capacity. This status had a tendency to diminish with age, for both men and women.

Safety and security

Outcomes in this domain concern the degree to which people are free to exercise their citizenship rights without fear of personal harm. For older people whose vulnerability may be increased by the ageist attitudes of those around them and whose ability to defend themselves from abuse may be diminished by lower reserves of physical strength, a lack of safety and security can severely diminish their sense of citizenship and their opportunities to be senior citizens. The degree to which people enjoyed a sense of personal safety and security depended on their gender, on whether they lived alone, on the socioeconomic status of their suburb, and on the degree to which they were protected from injury and violent crime by separation from the wider society. Participants who had retired, in both senses of the word, to a high status suburb, as in the Havelock North residents, or to a secluded environment, as in the rest home residents, or to both, as in the retirement village residents, enjoyed a high level of security and personal safety. By contrast, the residents in the lowest socioeconomic suburb felt at risk from crimes of home invasion and abuse and violence in the community. The Grey Power group attached a high level of importance to securing their homes against break-in, seeing Neighbourhood Watch or informal neighbourhood support networks as the answer to home invasion. Feelings of vulnerability about their personal safety indicated both a loss of personal autonomy and compromised social connectedness, resulting in a diminished sense of citizenship.

By contrast the Maori women expressed no fears for their personal safety, which appeared to be strongly related to their senior status and to the high levels of whanau participation and mutual support they enjoyed. A strong sense of agency and autonomy, and very strong and nurturing social networks contributed to a secure sense of citizenship. For the Pakeha participants personal safety was related to their socioeconomic status, which to a large extent determined their capacity to protect themselves by distancing themselves from places where crime is perceived to be more of a risk, and on the extent to which they saw old people as victims. The capacity and opportunity to perform their citizenship depended, in terms of safety and security, on the extent to which they were able to insulate themselves through the use of material resources if they were Pakeha, and through social resources if they were Maori.

Environment

This domain has been expanded from its use in *The Social Report 2001*, where it concerns the maintenance of a clean and healthy environment (Ministry of Social Policy, 2001b, p. 9), to provide an opportunity for people to talk about the place where they live and the impact this has on their sense of citizenship and opportunities to be senior citizens. For some of the groups a strong sense of place was an important part of their understanding of themselves as senior citizens. This was true of the Havelock North group, who had actively chosen the suburb for its trees, hills, climate and general “ambience”. The village of Havelock North conferred social status on its inhabitants, an effect which was independently confirmed by comments from members of other groups, and which furnished the Havelock North participants with a wide range of accessible options for participation and performed citizenship. Flaxmere participants, who also displayed a strong sense of place, were acutely aware that *their* ‘village’, despite its friendliness, was notorious for its high levels of crime and the low socioeconomic status of its inhabitants. They had far fewer opportunities available for the exercise of their senior citizenship. The rest home participants had so little interaction with the ‘outside world’ that they could have been anywhere; location did not seem particularly important, except perhaps for access to visitors. The location of the retirement village residents in an exclusive suburb was important to their sense of security and safety and also to their physical wellbeing and to their opportunities for participation. The Grey Power group, especially some members who had been born in Napier, or had lived there a long time, expressed a strong sense of belonging and loyalty to the city. Local struggles had attracted most of them to join Grey Power and provided a catalyst and an arena for citizenship performances.

Environment, for the Pakeha participants, was strongly linked to socio-economic status. A sense of place was inevitably linked to a sense of class, augmenting or diminishing the performance of senior citizenship, in terms of both capacity and opportunity, according to where, in the “degrees of deprivation” a place of residence appears in the atlas of socio-economic difference (Crampton et al, 2000). The higher the socio-economic status of one’s environment, the greater the capacity and opportunities for appearing and performing as a senior citizen.

The kaumatua had a particularly Maori sense of place, summed up by Robinson and Williams (2001, p. 56):

It is essential to have knowledge of, and to know one's place in, Maori society, which is multi-dimensional, covering the geographical place to which one belongs as well as a place within the hierarchy of whanau, hapu and iwi where one belongs.

The Maori sense of place is also multi-dimensional in relation to time, in that the marae, the ancestral home, is permanent and timeless, enduring both backwards and forwards in time to nurture and protect succeeding generations of whanau. Unlike the Pakeha sense of place, this Maori sense of place was not linked with socio-economic status, but with notions of belonging and connectedness. It had the effect of nurturing capacity, encouraging participation and strongly supporting the performance of citizenship.

Strongly linked with a Maori sense of place, and also expressed by some Pakeha participants, was a commitment to protection of the environment for future generations. Generative attitudes, and active participation, indicated a capacity for the obligations of citizenship, in terms of contributing to the wider society and passing on the meaning of conservation and sustainability to younger generations. This generativity was linked with cultural values for Maori, and with high levels of social capital and socioeconomic status for Pakeha.

Family/whanau

The social domain of family and whanau networks provides a significant arena in which citizenship may be performed. Through universally important ties of love, loyalty and obligation which bind family members together, older people can continue to participate in and belong to society even though they are more likely to be living alone or with a spouse than with, or even near their adult children and grandchildren, siblings or members of the wider family or whanau. Even so, seniority within the family still depends on the degree of respect accorded to older people within the culture.

For the Maori women their genealogy, linked to the marae or ancestral home, was an important aspect of a secure identity, which in turn depended on whanau, hapu and iwi connections. Their conversation about the importance of names and their use of the word whakapapa, or genealogy, as an active verb - "You've got to be able to whakapapa yourself back to that name that you've got" - indicated the active nature of their connectedness. It was not just a matter of knowing their roots, but of actively engaging with them, in a spiritual as well as a physical sense, as the stories show. For the Maori women and the one Pacific Island participant, their relationships with their large families of children, adopted children, grandchildren and great grandchildren were absolutely critical to their wellbeing. Their sense of themselves as citizens over time was "rooted in the whanau" (Robinson and Williams, 2001, p. 55).

Integration into the whanau, hapu and iwi relational networks of Maori society was closely linked for the Maori women with a secure cultural identity. While the highest status was reserved for older Maori men, especially skilled orators who were competent in speaking the Maori language, spiritual and cultural leadership were among the roles bestowed on the women and demanded of them as part of their kaumatua status within the whanau. Advanced age, secure cultural identity, cultural and spiritual leadership and knowledge all contributed to their mana as kaumatua, but the critical factor was their social connectedness: their mana derived from and was bestowed by the community. Kaumatua status assured them of respect, dignity, security and the right to be cared for (rights of senior citizenship) and in return demanded time, commitment, availability and obligation to participate (responsibilities of senior citizenship).

Family ties were vital to the Pakeha participants' quality of life as well. However, they were, on the whole, less securely "rooted" in the family: their family networks were smaller, and some Pakeha participants had no family at all. Family and community networks were quite separate, with the latter acting as a substitute for the former where family relations were absent, strained or broken or where family members lived at a distance. In those circumstances other social networks were actively sought out and cultivated, to take the 'strain' off families, who were said to be busy with their own families and work, and to assuage feelings of loneliness.

The Maori elders' citizenship status and opportunities for the performance of citizenship, dependent on their whanau networks, increased with age. By comparison citizenship status for the Pakeha group tended to decrease with age, regardless of their social connectedness or socioeconomic status, on account of the negative images of ageing and old age which pervade our youth and consumer-oriented society (Featherstone and Hepworth, 1993). However, seniority may also derive from the roles played by older people within their families, and there were significant variations within as well as between the groups. The existence of strong and caring family networks tended to mitigate the effects of differences in gender, race and class: the participants, both women and men, Maori and Pakeha, 'rich' and 'poor' who spoke of strong and reciprocal family relationships expressed through loving acts of care were the ones whose stories indicated the greatest seniority within the family and the greatest capacity and opportunity for citizenship performances.

Culture and identity

Fundamental to a conceptualisation of citizenship for older New Zealanders is the understanding that senior citizenship is a cultural construction and that Maori and Pakeha notions of what constitutes senior citizenship are couched in quite different terms. The reasons for this are complex, and historical. As Durie (1998, p. 53) argues, New Zealand history “at least since 1840, suggests that Pakeha New Zealanders have had some difficulty tolerating a strong Maori cultural presence alongside Eurocentric values and beliefs”. It is Eurocentric values and beliefs, rather than for example the principles of the Treaty of Waitangi, that still dominate notions of what constitutes citizenship for both Maori and Pakeha older New Zealanders, because those are the values and beliefs that dominate the political and social institutions of the country, reflecting the dominance of people of British origin in New Zealand. On the other hand, New Zealand is a South Pacific nation with a robust indigenous Maori population and a significant, rapidly growing Pacific population (Statistics New Zealand, 2000) made up of people from traditionally “age-honouring” cultures in which older people enjoy a position of prestige (Ministry of Social Development, 2002, p. 22). This means that senior citizenship in New Zealand is not a fixed concept, but is relative to the cultural context of communities with distinctive values and different perspectives on ageing.

Maori access to citizenship depends on a secure cultural identity supported by access to whanau, hapu and iwi networks and involves the right for present and future generations of Maori to advance collective Maori aspirations in Aotearoa/New Zealand. Tino rangatiratanga, Maori self-determination, lies at the heart of contemporary notions of citizenship for Maori. Despite diversity, Durie (ibid, p. 240) argues, there is agreement among Maori that:

the central goal of tino rangatiratanga is for Maori to govern and enjoy their own resources and to participate fully in the life of the country. Maori want to advance, as Maori, and as citizens of the world.

Pakeha notions of citizenship, in the context of this thesis, involve independent and autonomous actors who perform their citizenship by participating in relational settings consisting of networks of people and social and political institutions. For Pakeha participants, including migrants from the United Kingdom, senior citizenship involved feeling respected, included within their communities, and having control over their own lives. Maori notions of citizenship, by contrast, are concerned less with individual autonomy and power than with cultural integrity and responsibility for the collective wellbeing of whanau, hapu and iwi. The Maori

women's seniority was determined not by good health or income or education, but by their cultural norms, and a degree of acceptance of these norms by the Pakeha public sector. To a significant extent these women had been denied full citizenship by the state, through policies of discrimination and assimilation and by social exclusion, for example by not being "counted" in official statistics, a problem which persists into the twenty-first century (Cunningham, 2000). Their senior citizenship status in old age, arguably the most secure of all participants, is therefore a remarkable tribute to their determination as Maori to retain their culture and to resist official attempts to undermine the language and the culture.

Income

This domain involves the notion that access to an adequate income and an acceptable standard of living enables people to develop the capacity for citizenship and affords opportunities and avenues through which citizenship may be exercised. While there was considerable variation in the evident living standards of participants, it was apparent that they were doing reasonably well in old age, and consistent with survey findings (Fergusson et al, 2001, p. 5) they "had relatively few material restrictions and difficulties". Those with the greatest seniority were Pakeha homeowners with high levels of educational achievement who had had high status professional careers and had been able to accumulate savings and investments and buy health insurance to provide for their retirement. They were generally conscious of doing well, especially by comparison with their children and grandchildren, many of whom had not been able to find suitable work in New Zealand.

Participants who were living in local authority rental accommodation and paying correspondingly higher costs than the freehold home-owners were a small minority. This finding is consistent with survey data which found (Fergusson et al, 2001) that 68 per cent of older people owned their own home and only 5 per cent were paying rent to a local authority. The participants in this research project were all, with minor variations between cohorts, members of the group Thomson (1992, p. 3) characterised as the:

first and only 'welfare generation': the young adults of the welfare state for youth, who became once again in the 1970s and 1980s the prime beneficiaries of the revamped welfare state for the ageing.

While most participants expressed sympathy and concern for young families trying to manage financially in today's difficult circumstances, they also felt a strong

sense of entitlement to the income security they had been led to expect in retirement. Indeed, several members of the Grey Power group said they had determined to travel overseas and use up all their money rather than risk losing it to the government's "asset-stripping" regime. The Maori women had quite a different attitude towards financial security: it was their job as parents, they said, to keep on giving to their children when it was needed, even if they had little left for themselves. If money was loaned, and never paid back, or if the parents could not save for their own old age, then "kei te pai" - it's all right, because their children would take care of them just as they had taken care of their children. Their attitudes were consistent with Taiapa's (1994, p. 9) assertion that "Maori find their self-worth in giving rather than in accumulating wealth".

Pakeha older people also gain satisfaction and status from having sufficient income to give, to their families, and to community groups and 'worthy causes'. This kind of giving constituted an important avenue of performed citizenship, especially for the higher socioeconomic groups. Citizenship performances amongst the Pakeha participants with the least social and economic capital tended, by contrast, to take the form of claiming support from government and private agencies as a right of citizenship. The capacity for citizenship and the availability of opportunities to perform their citizenship were shaped and constrained for the Pakeha participants by the availability of material resources. The Maori participants, on the other hand, could count on being cared for by whanau, hapu and iwi in old age because of their senior status as kaumatua and the respect they were accorded by the tribe. For them, financial security and citizenship status were still strongly linked, but were shaped less by material than by cultural considerations. However, it must be noted that for many Maori the profound effects of colonisation may still outweigh the benefits of a secure cultural identity.

Occupation

The domain of paid work is a major source of status and seniority in New Zealand society. Consequently retirement from work generally brings with it a loss of citizenship status as well as diminished social connectedness and fewer opportunities for participation. Nevertheless older people often derive some residual status (and income) from their former occupations, which, along with gender and cultural differences, helps to account for differences in seniority between them.

The whanau concept had extended into the workplace for the Maori women, with the result that the loss of work did not involve a loss of social connectedness or

opportunities to participate, and consequently there was no loss of seniority or citizenship status. For many, if not most of the Pakeha women, however, the greater part of their lives had been spent caring for their husbands, raising children and running households while their breadwinner husbands worked. Most continued to care for husbands and run households into retirement, and to continue running their households after being widowed, a state of affairs which caused several women to comment that they had never retired, even if their husbands had. As members of the “welfare generations” (Thomson, 1992), the women’s caring work had been supported by the welfare state, and their retirement was also later supported, at least initially, by a generous state pension. The effect of this was that for all but the very youngest research participants, early disparities in education and later in work, between men and women and between people from different socioeconomic groups, were not translated into great inequities in old age. Instead the welfare policies implemented during the adult lives of the participants, as well as the endowment effects of widowhood, could be seen to have been effective in reducing inequality in old age, compensating to some extent for the structured inequalities of the labour market. Such policies had not, however, compensated the women for the lack, or loss, of citizenship status incurred by their total, or partial exclusion from the labour force. The abundance of work during the time of their working lives and the close association between paid work and citizenship status in capitalist societies such as New Zealand’s (Pixley, 1993) combined to assure the men and one or two of the women, of citizenship status while they were in work, and a significant loss of seniority and status on leaving the work force.

All of the men conveyed a sense of citizenship that was strongly linked to their work force participation, and in retirement to the status attaching to their former occupations. For some of them retirement was perceived as a time of leisure and well-earned rest: for others it was a case of finding meaningful activities to replace their paid work. Volunteer work is an important dimension of Third Age life (Patterson, 1999) and an important arena for the performance of citizenship. Retired professional people, both men and women, tended to find voluntary work of various kinds which made use of the knowledge and expertise they had gained during their working careers. The participants’ relationships with the labour market during their working lives continued to exert a strong influence on their capacity for citizenship in later life and on their opportunities for participation in voluntary work as an arena for appearing and performing as senior citizens.

The Relational Dimensions of Senior Citizenship

The model of senior citizenship developed in this thesis can be used to explain, analyse and begin to evaluate 'performed citizenship', that is citizenship which is performed in and through the relational networks and affiliations that constitute the various domains of civil society, and is contingent upon the intersection between personal autonomy and social connectedness.

In the Havelock North group, the participants' autonomy derived from educational attainment, socioeconomic status and, residually, from their former occupations; and their social integration derived from their high levels of generativity, participation and agency. The result was a strong sense of senior citizenship, enhanced by the exclusive nature of their suburb which insulated them against the worst effects of an ageist society. This combination was also found in the Grey Power group, made up of people from diverse backgrounds and locations who all exercised a considerable degree of autonomy and enjoyed quite extensive social networks. In spite of this there was an evident yearning for a greater degree of social connectedness and "community". A dual focus on the rights of senior citizens and their vulnerability seemed to promote a sense of powerlessness amongst members of this group.

Limited autonomy and social segregation were features of life for participants in the rest home research group. These were older people who had generally little control over their lives, and social networks that were limited by their situation to small numbers of family and staff members. They were protected by their seclusion from the ageism of the wider society, at the cost of a loss of autonomy and few real opportunities to exercise their citizenship. This combination is also observable in the Flaxmere group, which brought together people from a suburb where low levels of educational attainment and socioeconomic status prevailed. These were participants who generally had a limited range of choices and limited control over their lives, and whose experiences over time had diminished their levels of social connectedness.

High levels of self-determination combined with social segregation were found in the retirement village group, which consisted of a group of people who had chosen to live independently in their own homes within a segregated communal environment. Enjoying a high level of autonomy, they had provided themselves with a community within which they could choose to be protected from the effects of ageist attitudes while still enjoying social connections in the wider society and a sense of freedom and social inclusion.

Social connectedness and autonomy were evident in the kaumatua group, whose members enjoyed a secure cultural identity and were strongly connected to whanau, hapu and iwi networks. Despite generations of Western influence, Maori society generally views old age and old people in a positive light (Cunningham, Durie, Fergusson, Fitzgerald, Hong, Horwood, Jensen, Rochford and Stevenson, 2002, p. 4). This seniority conferred by their age, leadership skills and cultural and spiritual knowledge was the key to their citizenship status, which, despite inequalities imposed by gender and socioeconomic status, was enhanced rather than diminished by advancing age. Their high status as kaumatua and their connections to whanau, hapu and iwi networks combined to offset and overcome the effects of low lifetime incomes, lack of formal educational attainment and poor health. For these women a strong element of their senior citizenship was their ongoing struggle to be Maori in a Pakeha environment, and to protect the culture in their kaumatua role as “keepers of the meaning” (Vaillant, 1993).

Senior Citizenship in New Zealand

This thesis has developed a relational model of senior citizenship which is used to explain, analyse and evaluate the concept of performed citizenship. This model was informed and influenced by different theories of ageing and citizenship reviewed in the literature, and then revised and modified in the process of integrating the research findings. It represents an interpretation of ideas from the literature about citizenship, ageing, and society in the light of the narrative research data. It shows that the capacity for senior citizenship and the opportunities to perform as a senior citizen depend on outcomes over time in each of the social domains and on the extent to which older people can retain control of their own lives and remain connected to their communities. The extent to which they can exercise their citizenship depends in turn on the size and connectedness of the state, market, public and private spheres of society. The dimensions of senior citizenship for older people depend on the intersection between personal autonomy and social connectedness expressed through participation in relational networks in their communities and represented in the model by two intersecting axes.

This model of citizenship looks backwards as well as forwards in time. It takes account of both obligations, in terms of the contributions people make to their communities over time, and rights, in terms of the relationship between the citizen and the state. It is this relationship, the basis of formal citizenship, which is broadly represented in the outer circle of the model. Citizenship, in this view, is underpinned

by the social rights which are the responsibility of the state to its citizens. These statutory rights, such as the right to receive New Zealand Superannuation on reaching the age of sixty-five, and the right to protection from discrimination on the grounds of age, are secured through legislation in the state sphere, administered through the apparatus and personnel of the public service in the public sphere, exercised by the spending and/or earning of capital in the market sphere, and converted to goods and services for use and enjoyment in the private sphere.

The middle circle of the model represents the social world where all citizens live and move within and between the networks of relationships that make up each of the 'social outcome domains' of health, education, safety and security, environment, family/whanau, culture and identity, income and occupation. Citizenship status for older Pakeha New Zealanders is connected with social class and the performance of citizenship with the ability to accumulate, and distribute, wealth. It generally diminishes with old age due to the pervasive effects of ageism and the severing of links with the labour market, with which citizenship status is closely linked in capitalist societies, including New Zealand. The factors which cluster around less well-educated and less affluent people, posing risks to their health and social participation, also result in a diminished sense of citizenship, which decreases even further in old age through ageism and exclusion from the labour market. However, with reference to the model, the stories of the Maori women indicate that a secure cultural identity and environment combined with strong whanau connections can outweigh the effects of income, health and education disparities that could be expected to diminish citizenship status for older Maori women in a dominant society which is ageist and racist as well as sexist. Age, in Maori society, brings respect and recognition (Durie, 1999, p. 103), and increased status. By contrast there is no particular status attached to the accumulation of wealth or material assets in traditional Maori society.

Working inwards towards the centre of the model, the third circle represents the networks of community connections and affiliations within which older people carry out the activities that are linked with the performance of citizenship through the developmental tasks of 'generativity' and 'keeper of the meaning'. 'Generativity' involves commitment to and investment in the wellbeing of younger generations, a citizenship responsibility which was evident in the stories of those participants with the highest stocks of social and cultural capital. The role of 'keeper of the meaning', applied to older people who are respected for their wisdom, cultural

knowledge and understanding of the 'meaning' of the past, is most closely associated in this study with Maori models of ageing. The extent to which older people are seen to be successful in completing these psychosocial tasks is the extent to which they may be considered truly senior citizens.

Clearly there are some major discrepancies between Maori and Pakeha notions of citizenship for older people. These are not the same as the socioeconomic gaps which are currently the target of government policies to raise Maori health, education and employment status to parity with Pakeha. Both Pakeha and Maori participants clearly valued the inclusive social policies and universal benefits which brought about greater security and greater parity in the 1930s, but the difference at issue here is between Maori and Pakeha cultural conceptions of what constitutes citizenship. The analysis in this chapter shows clearly that senior citizenship is most closely allied with a secure cultural identity for Maori, and with a high socio-economic status for Pakeha older people.

The major contribution of this thesis is to have identified a variety of interacting factors which contribute to a heightened or diminished sense of citizenship for older people. Using the framework of a performed citizenship emphasises the dynamic nature of citizenship as a participatory process mediated by the effects of gender, class and ethnicity on outcomes in various domains of the social world. Incorporating both citizenship rights and responsibilities, the resulting multi-dimensional model takes into account psychological, physiological and sociological as well as macro-social factors which contribute to an individual's capacity for senior citizenship. In this way it reflects the agency, the complexity and the fluidity of the experience of senior citizenship.

Research Methods: A Critique

In this research project old age is understood as a social construct and citizenship as a social practice mediated by individual biographies, by access to opportunities for participation and by the effects of key variables such as gender, class, ethnicity and culture. A participatory approach was chosen for the opportunities it offered older people for the performance of citizenship through storytelling in community settings. The qualitative methodological framework was oriented towards reaching understandings and discovering insights, not towards proving a predetermined hypothesis.

The development of the methodological framework was guided by my search for

a way of enabling older people not only to speak for themselves, but also to hold conversations with each other that could be enriching, encouraging and empowering. Based on the principles of “political analysis for action” (Barndt, 1989) the participatory group method, closely linked with the notion of performed citizenship, was designed to provide arenas and create opportunities for the performance of citizenship among the participants. One important challenge for the researcher using group research methods is the ethical dilemma presented by the ‘appreciative audience’ of participants who are listening when any one participant is engaged in the performance of citizenship through storytelling. In this situation confidentiality becomes the shared responsibility of the group, not just the researcher. I described and explained the research procedures and the right to withdraw at any point to each participant individually and then reiterated this advice at the beginning of the first and each subsequent session. There was one occasion when it was volunteered to me that some participants, though uncomfortable about some observations that had been made during the previous session, felt able to trust my judgement about what should be included in the final report. When disclosures were made outside the group setting, or when information was shared that seemed too sensitive or too personal to share with a wider audience, it was not included in the report. Closely linked to this dilemma is the researcher’s judgement about when and how it is appropriate to intervene in the group conversations. Clearly this is an issue to which any researcher who engages participants in a group process must be sensitive, and which requires a level of skill and experience in making such judgements.

Another aspect of the participatory research process which requires ethical consideration and a particularly sensitive and respectful approach from the researcher is the delicate task of disengaging from the data collection phase of the research project. While this will be less of a dilemma for a researcher who is also an experienced counsellor or social worker and is trained and skilled in this area, it can still be a challenging exercise. My experience in this research project suggests that the risk of group members coming to depend on continuing contact with the researcher is less acute because of the possibility, indeed the probability, that ongoing relationships of trust may develop with other members of the group. My experience likewise suggests that trust began to be developed as soon as recruitment of the participants began, and that mutual trust was a critical component of the ensuing research relationships, between researcher and participants, and between participants.

Positive responses and feedback from the participants suggests that participation in the groups brought advantages which outweighed the risks. In particular I suggest that small groups focusing on storytelling as a research method can enhance the potential for citizenship performances amongst older people whose citizenship is compromised by institutionalisation. The findings of this study indicate that the inclusion of older people in small groups focused on their accumulated experiences and wisdom can make a useful contribution to breaking down some of the barriers to citizenship and enhance their sense of themselves as senior citizens. It is also clear from this study that small neighbourhood groups have the potential to enhance opportunities for older people to be involved in democratic processes in a meaningful way, for example by supporting deliberative decision-making processes, modelling participatory practices, establishing and nurturing social networks and seeking to influence policy making in the interests of older people.

Another particular issue that arises with the use of focus groups to generate data is the predictable one of huge amounts of data that are difficult to manage. I chose to transcribe all the data myself, with the result that I developed a greater familiarity with the stories and the storytellers than would have been the case if I had employed someone to do it for me. For me, as well as for the participants, the risks posed by the methods chosen were outweighed by the significant advantages, especially the richness and depth of the stories, and the trust that developed over time, and without which the stories would not have been told.

Policy Implications and Recommendations

The findings of this study show that older Maori with a secure cultural identity were uniquely able to take up opportunities to exercise their citizenship *and* to enjoy senior status in their capacity as kaumatua. The capacity for exercising citizenship and achieving senior status was not available to the same degree to most people in the non-Maori majority, with some groups of participants experiencing major barriers even to the exercise of full citizenship. Given New Zealand's Pacific location and growing Pacific population, and given the prevalence of inter-ethnic marriage, it could be considered surprising that the Third Age experiences of the Maori and non-Maori groups were so different, and have remained culturally so distinct. On the other hand, the Maori participants were clear in their determination to preserve, nurture and pass on their cultural heritage, and to promote the advancement of Maori as Maori, and as citizens of the world (Durie, 1998). Given the importance of their kaumatua role as 'keepers of the

culture', their seniority and capacity to exercise their citizenship rights and responsibilities may not be so surprising. Still, it is striking that a historically colonised and dispossessed group, whose people have the least material resources and the poorest health and education, were arguably the most secure in their senior citizenship status. They had not lost status in old age, but gained it, and they seemed in no danger of becoming lonely and isolated.

If the opportunities of the Third Age are to be taken up by the Pakeha majority in New Zealand, it will take more than recognition of their skills, knowledge and experience and what they have to contribute to their communities as volunteers. They will also need to be valued for themselves, and for the vital role they play in passing on the values and traditions of the past. They should be encouraged to investigate and develop a diversity of ways of ageing that offer them greater choice and freedom about how and where they should live. However the responsibility should not lie primarily with older people themselves to age more 'positively' or more 'successfully' in order to qualify as 'senior citizens'. The key to citizenship is inclusion: the key to senior citizenship is mana, deriving from and vested in "the older generation who carry the status, tradition and integrity of their people" (Durie, 1999, p. 102). It is the structures of mainstream society which require adjustment to include senior citizens in the privileged way that whanau, hapu and iwi structures ideally include and honour kaumatua.

The New Zealand Positive Ageing Strategy, with its commitment to incorporating the Treaty of Waitangi as the founding document of New Zealand and the basis for the relationship of "good faith, mutual respect and understanding, and shared decision-making" (Dalziel, 2001, inside front cover) between Maori and the Crown, provides a comprehensive though not exhaustive framework for policies of inclusion for older people. A major contribution of this thesis has been to show that Maori and Pakeha models of citizenship for older people are radically different, and that this difference has important implications for all New Zealanders. If older Maori are secure in their identity as Maori and are supported materially and culturally to participate in their community networks, old age can be a time of fulfilment, life-enhancing enjoyment, and significant contribution to society. It has been argued that the wide application of the whanau concept by Maori and Pakeha indicates its association with a highly esteemed value system (Taiapa, 1994). As a model which promotes intergenerational care and respect, the kaumatua model of citizenship could be protected and supported not just at the level of rhetoric but also at the level of social policies which take seriously the

Crown's duty to protect the Maori way of life (The Royal Commission on Social Policy, 1988). Such policies could take into account not only the changing profiles of Maori elders and the changing nature of Maori society, but also the potential for Maori values to influence mainstream society in this area as they have done in others such as child and family care and protection, and justice. The Treaty of Waitangi is the basis of the relationship between Maori and the Crown, and is widely understood to provide a guarantee of protection of Maori interests. A stronger link between the Treaty and the policy-making process, with reference back to the Treaty principles, could help ensure that taonga such as effective models of senior citizenship are actively supported in accordance with the principles of tino rangatiratanga, Maori control of Maori resources (Durie, 1999).

The research findings indicate that investment is needed now to ensure that lifelong access to an adequate income, health care, housing and education enhance the citizenship capacity and opportunities of the senior citizens of the future. Retirement housing in particular is an area in which the market alone has been left to provide choice: this deficit could and should be addressed by proactive government housing policies and partnerships which encourage and support all older people towards creative housing choices, whether they involve 'ageing in place' or a planned move. Lastly, but importantly in the ongoing struggle to change attitudes to old age, I believe there is a place for local and national government commitment to an advertising campaign similar to the Hillary Commission 'Push Play' promotion of physical exercise. A 'Get Connected' campaign aimed at enhancing capacity and opportunities for participation for *all* citizens could be effective in helping to create the conditions for a more inclusive society.

Research Directions

The concept of performed citizenship could be developed as a tool in the measurement of social outcomes and social inclusion, and applied to research with other population groups, such as new migrants and people in the Second (or 'middle') Age, in order to contribute to policy-making for a more inclusive society in which citizenship is a dynamic concept with credibility and real meaning. This study indicates that senior citizenship is a cultural construct which can confer citizenship status and real seniority on kaumatua, Maori elders who enjoy both a secure cultural identity and autonomy as individuals, and are closely connected to their whanau, hapu and iwi. These findings indicate an ongoing need for research which seeks to understand the experiences of older people from other

'age-honouring' cultures in the Pacific and Asia who will constitute increasingly important populations in New Zealand in the future.

Research could be carried out using different research methods to investigate various ways, for example through individual story-telling or biographical writing, in which people may be taking up opportunities for the performance of citizenship, or may be encouraged to do so. There is also scope for investigating ways of developing capacity and opportunities for the performance of citizenship through different avenues such as dance, drama, art, education and sport. There is also major scope for investigating the capacity and opportunities for performed citizenship among people of the second or middle age, and among young working age people. Cohort studies which aim to measure citizenship capacity and opportunities over time would enhance our understanding of social inclusion and our ability to measure it in order to gauge the social health and wellbeing of the nation.

Conclusion

Some amongst current generations of older people are indeed valued, acknowledged for their contribution and encouraged to participate, even accorded leadership roles and status. Others are effectively denied meaningful participation and full inclusion in New Zealand society. The differences are due to lifelong inequities in a society divided according to class and gender, and to cultural differences between the mainstream Pakeha society and Maori society which is struggling for tino rangatiratanga, Maori control of Maori resources. The Treaty of Waitangi is widely acknowledged as the founding document of New Zealand (Dalziel, 2001). I have argued that recognition of the Treaty as a relevant consideration in the formation of public policy could help protect and strengthen kaumatuatanga as an effective model of senior citizenship which honours older people and offers them real opportunities to perform as senior citizens. Strategies should also be developed to protect and promote successful models of senior citizenship found among Pakeha participants, notably those with a high level of material resources, especially the homeowners and the "flatters", who shared with the Maori participants an unusually high level of satisfaction and enjoyment of their Third Age. Policy initiatives aimed at supporting the material wellbeing of older people could ensure that variations of the "flatting" model are made widely available to older New Zealanders.

The conclusion I draw from my study is that the conceptual model of 'performed'

senior citizenship developed here has the capacity to define and measure what constitutes senior citizenship and how it is enacted through the networks and affiliations and the social outcome domains of civil society. Coherent and integrated policy initiatives which support the personal autonomy and the social connectedness of older people will enhance their capacity to select avenues in which to perform their citizenship. This capacity will in turn equip them to enjoy a Third Age which is not a burden to the individual or to society, but an opportunity to exercise the rights and responsibilities of full citizenship as true 'senior citizens'.

Glossary of Maori Terms

awhi	support, help
arohanui	compassion, great love, devotion
hapu	sub-tribe, group of whanau descended from the same ancestor
hari mate	return the body to the ancestral marae
hui	meeting
iwi	tribe
Kahungunu	tribal people of Hawke's Bay
kaikaranga	ceremonial caller
karakia	prayer
karanga	ceremonial call of welcome at hui and tangi
kaumatua	respected elder, senior citizen
kaupapa	theme, topic
kaupapa Maori (research)	Maori methodologies
kawa	procedure, protocol
kei	include
kina	a type of seafood
koha	gift, donation
kohanga reo	Maori language pre-school
kohino	inner part of the kina
korero	talk
kuia	old woman
kura kaupapa	Maori language primary schools

Maoritanga	Maori culture and identity
mana	power to perform, authority, seniority
manaaki	hospitality
manuhiri	visitors
marae	meeting place of whanau, hapu or iwi
marae atea	courtyard
Maoritanga	Maori culture, Maori perspective
mokopuna	grandchild, grandchildren
Ngati Kahungunu	tribal people of Hawke's Bay
Ngati Porou	tribal people of the East Coast
paepae	orator's place on the marae
Pakeha	non-Maori New Zealander of European descent
pakeke	old people
puha	green leafy vegetable
rohe	territory, district, area
tangata whenua	local people, people of the land
tangi	funeral
tangi mate	taking the deceased's spirit back home
taonga	treasure
te reo	the Maori language
tika	valid
tikanga	customs
tino rangatiratanga	Maori self-determination, sovereignty

tipuna	ancestors
urupa	cemetery
utu	reciprocity
waiata	ceremonial song
wairua	spirit
whaikorero	make a formal speech on the marae
whakaiti	humility, to humble oneself
whakapapa	genealogy, lineage, ancestry
whanau	extended family
whangai	adopt, nurture a child
whenua tipu	ancestral land

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Appendix 1:

The Groups in Context

Introduction

This chapter provides a brief historical and geographical contextualisation of the regional community of Hawke's Bay, and an introduction to each group in the context of its own local community, in the order in which I conducted the focus group interviews.

Community Studies: A Sense of Place

People feel the weight of history, of those memories and practices within that very particular place ... (Urry, 2000, p. 159).

Despite the documented difficulties of defining community (Bell and Newby, 1971; Ife, 1995), and the argument that it is no longer a significant element of contemporary society, community remains a powerful concept (Ife, 1995), if an increasingly contested one (Lister, 1997). Urry (1995, p. 10) follows Bell and Newby's distinction between community as: the topographical boundaries of a settlement; a local social system involving networks of local people and institutions; and 'communion' or a sense of belonging and warmth which does not necessarily result from "routine propinquity". He also adds (ibid) a fourth sense in which community can be understood as ideology, "where efforts are made to attach conceptions of communion to buildings, or areas, or estates, or cities and so on, in ways which conceal and help to perpetuate the non-communion relations actually to be found there". It is this fourth sense, it seems to me, that is evoked by property developers who, Urry says (ibid, p. 219) are able:

to construct new landscapes of power, dreamscapes for visual consumption that are simultaneously stages, sets within which consumption takes place. Such constructed landscapes pose significant problems for people's social identities which have historically been founded on place, on where people come from or have moved to.

It was argued in Chapter Three that citizenship is both a status, bestowed on the full members of a 'community', and a practice, which involves obligation and some degree of participation in the community (Lister, 1997). In both senses citizenship is mainly, though not exclusively, experienced and expressed, at whatever level or to whatever degree, in particular geographic localities, as well as social networks. Urry argues (1990, p. 187) that in spite of the influence of homogenising processes (such as economic globalisation and the increasingly

widespread use of information technology), there has been “a resurgence of interest in the study of developments that appear to have heightened local differences and the symbolisation of such differences”. Urry (1995, p. 165) is particularly interested in how people define themselves, how identities are constructed “amidst the processes of globalisation and fragmentation, especially when part of the image of place is increasingly produced for actual or potential visitors”. Examples of these “images constructed for tourists” (ibid) are visible in the New Zealand landscape as “symbols of place and location” (Urry, 1990, pp 187 - 188) like the *Hawke’s Bay Wine Country* slogan with its accompanying golden sun against an azure blue sky. This is the image which welcomes visitors to the province; printed on billboards, tickets, aprons and menus, and flying on banners above every vineyard and food outlet, it is used to market products as diverse as lavender and apples, outdoor concerts, art, cafes and restaurants.

Urry (1995, p. 176) argues that it is not just places that are transformed by tourism, but people too: the right to travel, to be a tourist, “to look on landscapes with interest and curiosity (and then to be provided with many other related services), has become a right of citizenship from which few in the ‘West’ are formally excluded”. This means, according to Urry, that citizens are increasingly defined by their ability to purchase goods, services and cultural products in whatever society they choose throughout the world, rather than by their political rights and duties within a territorially demarcated nation-state. A modern person, Urry claims, is one who is able to exercise the right to travel anywhere and “to consume other cultures and places throughout the world” (ibid, p. 165). It remains to be seen to what extent such cosmopolitanism, with its “intellectual and aesthetic stance of openness towards divergent experiences from *different* national cultures” (ibid, p. 167) will survive in the aftermath of the defining moments of September 11, 2001 in which the World Trade Centre in New York was destroyed by terrorist attack. This is relevant to our current study because the generation of New Zealanders who are now in their eighties are the very ones who had their citizenship rights expanded by the generous state provision which enabled them to travel overseas in unprecedented numbers (other than to a theatre of war), in what Urry calls (ibid, p. 176) “a ‘democratisation’ of the tourist gaze”. This citizenship right is not universal or undifferentiated: senior citizens can only be away from New Zealand for three months at a time without compromising their superannuation payments, but their grandchildren are travelling overseas (or at least they were at the time of the interviews), temporarily or permanently away from New Zealand in search of exotic experiences or highly paid work, or both.

Social networks will be determined and bound by locality for some people, for others less so: “the ‘mesh’ or the connectedness’ of the network clearly varies from locality to locality” and “the ‘range’ or ‘spread’ of the network will vary from individual to individual” (Bell and Newby, 1971, p. 52). The geographical limits of communities then, can be defined, but remain permeable, and with advancing communication technology, increasingly so. In addition, as Urry (1990, p. 189) argues, different social groups will have different kinds of interest, or different stakes, in a place, with their interests ranging from the “more obviously material (which itself varies from the straightforwardly ‘economic’ to that of ontological security) to the more cultural and aesthetic”. In this situation, Urry suggests, it is the interests of the groups which have the best resources, or their ideas about what is in the best interests of the locality, that are likely to be the ones which dominate, notwithstanding the fact that their interpretation of the locality’s interests may be driven by altruism rather than a narrow self-interest. Fitzgerald, Hall and Thorns (1983, p. ii) argue that ‘community’ is formed only in certain conditions:

These preconditions relate to the existence of reasonably clear locality boundaries and a local set of organisations which build and maintain the local network of relationships. For these preconditions to lead to “community”, relations of propinquity have to become manifest through the process of “communion” and thus be recognised by people within the locality.

Bell and Newby (1971, p. 42) argue that the community study as a method has some advantages in “bringing the researcher closer and closer to the interconnectedness of the data”, although they warn against its tendency towards idiosyncrasy and non-comparability. They also acknowledge, however, (ibid, p. 252) that local variations may affect the ‘problem’ being studied, and that “it will always be perilous to ignore the particular local configuration of social institutions that has resulted from the unique history of the community”. While locality, including geographic, demographic and economic indicators, is not the primary focus for this present study, this chapter does set out to provide a brief overview of the local context for the conversations I had with a number of older people in a range of communities or ‘sub-communities’ (Bell and Newby, 1971, p. 34) in Hawke’s Bay, the locality which is my home and which is currently home to four generations of my family.

Hawke's Bay: A Regional Profile

The Land and the Physical Environment

Covering 14,164 square kilometres, the Hawke's Bay region stretches from north of Mahia Peninsula to just south of Porangahau, bounded in the east by the Pacific ocean and in the west by the Ruahine, Kaweka, Huiarau and Ahimanawa ranges. The region has a rich and diverse landscape, consisting of mountains, hill country, alluvial terraces, sand dunes and swamps. The mountain ranges shelter the area from the rain, and it enjoys a sunny, temperate climate with warm summers and mild winters (Statistics New Zealand, 1999).

History

The history of the place is part of the historical context of the lives of both researcher and respondents in this study. It is also part of the kind of story-telling that nurtures the performance of citizenship, as Borofsky (2000, p. 29) argues:

History telling is an active, participatory process ... It is a part of ordinary citizenship. History telling invigorates the present; it charts identities. It affirms who we are by describing what we have been. It inspires what we might yet become.

The first Maori to settle in Hawke's Bay probably arrived during the ninth century, when the land was covered with a dense layer of bush. At first nomadic, and then living relatively peacefully in unfortified villages, these early Maori began to burn off the bush and open up the land for agriculture by the tenth century. Increased populations and more permanent settlements followed, and the sixteenth and seventeenth centuries saw many minor battles between rival Ngati Kahungunu hapu. Ngati Kahungunu settlements were clustered along the river valleys, with those near the coast relying largely on shellfish for food, and those further inland establishing gardens where they grew kumara and other crops (Wright, 1994).

Even before Captain Cook arrived in 1769, naming the area after Sir Edward Hawke, First Lord of the Admiralty, European technology in the form of muskets had introduced a major agent of change, arming rival hapu within Ngati Kahungunu in their struggle for control of the rich and fertile plains of Heretaunga. The first European adventurers arrived in the 1820s, followed by whalers and traders in the 1830s, and missionaries in the 1840s. Ngati Kahungunu welcomed the newcomers, and in 1839 W. B. Rhodes negotiated with individual Ngati Kahungunu chiefs to acquire a strip of coastal land thirty miles deep, from Mahia to Castle Point, totalling 1,228,000 acres, for three hundred and forty-three pounds. The practical effect of the Treaty of Waitangi, which came to Hawke's Bay in June 1840, was to bring European settlement under control. Traders and 'merchant

adventurers' were stopped from buying up land for a pittance, and Rhodes' purchase of practically the whole of Hawke's Bay was disallowed, though he was compensated with 2,500 acres near Clive (Wright, 1994). Pastoralism and the arrival of Europeans brought profound changes to the land and ecology of Hawke's Bay: the environment was transformed by the demolition of forests, the building of roads and railways, and the introduction of plants and animals from Europe. Fruitgrowing began early, even before European settlement, when Maori pas had groves of peaches grown from stones used as currency by trading vessels (Mannering, 1999). Fruit trees and grape vines were planted during the 1840s and by the turn of the century a mini fruit-growing boom was under way. The first apples were exported to London in 1892 and the Frimley Canning Factory opened in 1904.

Pastoralism, however, was the general mode of European settlement in Hawke's Bay, with graziers from the Wairarapa moving north to establish sheep stations in the region. Maori were keen to sell, and by 1861, when land sales were halted, the Crown had purchased nearly two million acres in northern and central Hawke's Bay, paying on average two shillings an acre. The result was the foundation of a "landed elite" who "assumed the role of noble landowners" (Wright, 1994). Although many had arrived with relatively little money, quick returns on cheaply acquired land gave them the means to establish towns, roads and industries and get involved in ventures ranging from gold mining and sawmilling to land speculation. Wool and tallow were the main sources of income until transport improvements and refrigeration enabled lamb to be exported. Freezing works were built at Tomoana, Pakipaki and Whakatu, and butter and cheese factories established.

Napier was founded in 1855, and in 1858 Hawke's Bay was proclaimed a self-governing province with Napier as its capital. Havelock North was established in 1860 by the Chambers family. In 1864 a syndicate of twelve settlers known as 'The Twelve Apostles' purchased the Heretaunga block, and though the land did not come cheaply, the deal, while not strictly illegal, greatly upset the Maori chiefs involved (ibid). In 1872 construction began on the Wellington to Napier railway, (which, due to subsequent privatisation, carried its last passengers on October 7, 2001). In 1873 the town of Hastings was laid out, and it soon came to rival Napier as an economic force in the region. Politically, however, Napier assumed supreme importance as provincial capital, and even when the provincial system was abolished in 1876, Napier continued, as the only export centre and largest town

of the region, to reflect the “entrenched political, economic and social interests of the pastoralists” (ibid, p. 52).

The first half and quarter acre sections of Taradale went on sale in 1866, and it soon became a busy town, fiercely independent of Napier, and with its own clubs, sports organisations, businesses, public buildings, and many new houses. The towns dwindled during the depression of the 1880s, with unemployment levels peaking in 1887, but prosperity increased again in the 1890s, helped by the new export of frozen sheep meat, starting from Napier in 1884. The 1890s were marked by the building or renovating of impressive homesteads with decorative gardens and lawns, and by “spectacular social occasions, a wide variety of sporting events and a generally flamboyant way of life” by the middle-class ‘elites’ (Wright, 1994, p. 127). Civic pride became more pronounced and the towns vied with one another to build impressive public buildings. Hastings particularly flourished as a result of recovery in the farming sector, while Napier’s progress was impeded by its size, being “hemmed in by swamp” (ibid, p. 130). After prolonged difficulties this problem was solved when the Tutaekuri River was finally diverted into a new bed.

In the early years of the twentieth century the great estates were broken up by subdivision in response to new tax laws, which spelled the end of provincialism and saw marginal farmland revert to scrub. Soldiers returning from the First World War were settled on marginally economic blocks of rugged back country land. The 1920s were years of decline for the towns of Hawke’s Bay. In Hastings this led to vigorous efforts to restore prewar prosperity: led by local draper H.W.C. Baird (my grandfather) the Progress League, formed during 1922, organised a Carnival Week with decorations, parades, a masked ball and gala entertainments. By contrast, political apathy in Hawke’s Bay was so great at the time that Napier did not field a candidate for the United Party which won the general election in 1928 (Wright, 1994). Against a background of economic depression, young people in Hawke’s Bay held jazz parties and dances and looked to Hollywood for inspiration and glamour. Interest in California was intense and by the late 1920s new buildings were featuring white stucco and the Spanish Mission style of architecture. When a disastrous earthquake, measuring 7.9 on the Richter scale, struck Hawke’s Bay in 1931, the city of Napier was flattened. The rebuilding which followed has made Napier one of the world’s most celebrated examples of art deco architecture. The new suburb of Marewa was designed in the Californian modernist style that had guided the reconstruction of central Napier. Hawke’s

Bay's first state houses were built in Hastings in 1937, and the suburbs of Napier and Hastings continued to sprawl outwards. The Hastings suburb of Flaxmere was "a careful exercise in 1960s town planning" where short-sighted planning decisions by the local authority in the 1980s and a government scheme to help people on low incomes buy their own homes, coupled with the greed of developers, have left people stranded and feeling unsafe in "unfriendly streets" and tiny houses "packed two - and three - to an eighth of an acre" (McLeod, 2001, p. 1). In 1984, when the Labour Government deregulated the economy and sold off state assets, it began a process which left Hawke's Bay reeling from the closure of Whakatu and Tomoana meat processing plants and the loss of thousands of jobs. The long and short term effects on the community were devastating, as were the effects of Cyclone Bola the same year, which cost Hawke's Bay farmers millions of dollars in lost production (Quaintance, 2001).

According to the Department of Labour's report for the East Coast to June 2001, the regional economy's key sectors are agriculture, horticulture, primary processing and forestry, with retail trade and accommodation, cafes and restaurants also important due to tourism. The regional economy has been boosted by farming and tourism, employment has risen steadily in the region as a result of economic growth, and the outlook for the next year is positive, though the lack of population growth in the region is a negative factor for the regional economy. Skill shortages, allied with the difficulty of attracting people to the region, the Napier/Hastings rivalry and a lack of co-ordination in some industry groups were identified as factors which may threaten long-term growth.

Local Government

In August 1999, the year in which I carried out my research, the Local Government Commission proposed a reorganisation scheme for the union of Napier City and Hastings District to form a Hawke's Bay District, "to promote the good local government of Napier City and Hastings District" (Local Government Commission, 1999, p. 5). An emotive community debate ensued in which parochialism was out in force, with all the old, and new grievances about the siting of the airport (nearer Napier), the hospital (in Hastings) and the regional newspaper (in Hastings) being aired in the media and in public debates. Signs saying 'No!' (to amalgamation) appeared all over Napier, and signs saying 'Be Positive' and 'It's Time for Unity' in Hastings. Apart from the parochialism, much of the debate centred on local community representation and on access to the democratic process. The referenda produced a convincing "yes" from Hastings and "no"

from Napier. It was not clear whether the public campaigns mounted in each city were causal or symptomatic of the results. Napier and Hastings are only sixteen kilometers apart, and many people live in one and work in the other, with Napier's cafes and restaurants and Hastings' wineries attracting people from around Hawke's Bay. New mayors were elected for both cities at the 2001 local body elections. More cordial official relations between the cities bode well for the future of the region as a whole.

Havelock North

The Village

Havelock North is a prestigious 'village', with a population of just over 10,000, well serviced by an extensive range of shops and amenities, and notable for its predominantly exotic trees. It has many sought-after old and new homes, and a recent proliferation of retirement complexes and upmarket subdivisions. Havelock North began as an agricultural township in the late 1850s, part of a Government effort to combat the social and economic momentum of pastoralism and provide opportunities for small-scale agriculturalists. In the twentieth century, historian Wright (1996, p. 248) claims, "a new dynamic made itself felt in the village, driven by the enthusiasm of powerful individuals ... A sense of egalitarian community spirit replaced the individualist world of the pastoralists":

Havelock North became a tight-knit community, a spiritual centre, a village proud of its heritage and unique sense of purpose. This community spirit was something more than the sum of the ambitions, aims and beliefs of the movers behind the Havelock Work; it was a new social dynamic that took on a life of its own, adopted with pride by new generations. Socially, Havelock North was unique. Nowhere else in New Zealand did a living sense of small-town community spirit gain such strength and endurance.

The Havelock Work was a literary and cultural group which organised plays, entertainment and social events and was considered pivotal to the growth of village spirit. Amalgamation with Hastings loomed over Havelock North for many years. It seemed to threaten the independence of the village, and was consistently opposed by the ratepayers. In 1980 a referendum showed that 78.6 per cent favoured Havelock North retaining local government autonomy, and in 1988 a poll indicated that 92 per cent of the voting public in Havelock North were in favour of continued independence. Despite the fears of the community members and the staging of a mock 'burial' of independent Havelock North, the strong village spirit survived the merger which finally came with the local government reforms of 1989. Havelock North has been described as "a wealthy, sunny enclave beneath Te Mata Peak and within wine-spitting distance of Hastings", "a long-

distance cousin of those English rural communities where the well-heeled gather” and where “the State-house part of town is confined to a few streets” (Barber, 1999, p. 13). Real estate prices are generally higher than in Hastings and Napier, pushed up recently by Aucklanders, Wellingtonians and expatriate New Zealanders returning home or buying investment properties. The village has a well used library and community centre, which is in constant use as a meeting, event and information centre, and as a gallery for local artists.

The People

Perceptions of Havelock North and its population are revealed in following words, reported in the local press: “I think of them as people who are careful with their lives and who are careful with their money and who have their old age sussed out. They’re always dressed nicely and tidily but not necessarily excitingly” (The Hawke’s Bay Herald Tribune, Saturday, March 6, 1999). Also revealing is the rather indignant tone and the assumptions implicit in the opening words of a more recent editorial (Hawke’s Bay Today, Tuesday May 15, 2001):

A couple of short years ago the country’s biggest daily newspaper, *The New Zealand Herald*, profiled Havelock North, describing it as possibly the best place to live in the country. And it still is a beautiful place - nice homes, great shops and friendly people. But the plague that has infected much of the rest of our province - endless crime - has even invaded this affluent little village.

Statistics drawn from the 1996 census show that Havelock North had a higher percentage of people born overseas, a higher percentage of people of European ethnicity (89.67 per cent) and a lower percentage of people of Maori (8.25) and Pacific Island (0.83) ethnicity than anywhere else in Hawke’s Bay at the census. It had the highest percentage of dwellings owned without a mortgage (48.37) and the lowest percentage of dwellings rented or leased (13.89); the lowest percentage of households with young children (11.34 per cent), and the highest percentage of households with one or more superannuitants (32.71 per cent); the highest percentage of people with a personal income of over \$30,000 (26.71 per cent) and the highest number of professionals as a percentage of the workforce (18.04); the lowest percentage of people aged less than fifteen (20.45), and the highest percentage of people aged 45 to 64 (25.19 per cent), and over 65 (18.57 per cent); the highest percentage of people with tertiary qualifications of all kinds, and the lowest percentage of people with no academic qualifications.

Flaxmere

A Model Suburb

Flaxmere, with a (declining) population of just under 10,000 at the 2001 census, takes its name from the land on the west of Hastings which was the share of the original Heretaunga block owned by brothers William and Andrew Russell. Originally a raupo swamp, the land was drained in the 1860s, subdivided by 1900 and laid out as a suburb on what was thought to be unproductive land in the 1960s (Mannering, 1999). An article which appeared in the national press following a grisly murder in the suburb (McLeod, 2001, p. C1) describes the part of Flaxmere which was established then:

Houses at the start of Flaxmere Avenue were once show homes, softened today with trees, established plants, lawns and neatly paved driveways. The first park areas are large and attractive, and the shopping centre too, has a pleasant villagey look ...

Newer areas, however, particularly west Flaxmere, have cheaply constructed houses packed on to tiny sections, few fences except for the fortifications of the local (Black Power motorcycle) gang headquarters, and few gardens. The same article (ibid) describes the western end of Flaxmere Avenue:

This wide boulevard - it must have looked grand on paper - divided by central islands of grass and trees begins in triumph and leads to ... a dead end where plastic bags grow among weeds and the marks of wheelies linger in the gravel. You will be looked at with suspicion if you hang around to stare. But if you look hard you'll see a vineyard on the horizon. Flaxmere was developed and built on because it was considered unfit for growing anything. The land it's built on has now turned out to be perfect for grape-growing.

A local authority survey of Flaxmere West revealed that sixty-five per cent of households felt unsafe in the suburb, and fifty-eight of the sixty-nine households surveyed felt the area was abandoned. People wanted a youth centre, children's playground, more police, flowers, clean sections and speed bumps. The Hastings District Council responded in March 2001 with an action plan which details how it will spend \$1 million in the next eight years planting flowers, cleaning the streets and painting houses (Hawke's Bay Today, March 27, 2001).

Flaxmere has a predominance of rental accommodation (thirty per cent at the 1996 census, the highest percentage of rented or leased dwellings in Hawke's Bay) and inadequate public transport. There is a limited range of shops and services, a tavern, a library, a covered swimming pool, and no bank. The buildings in the shopping complex are owned by a consortium from outside the area and the rents are high, so the shops are often empty. It is only after years of waiting

that Flaxmere now has its own secondary school, which has a good reputation, and is a source of local pride. Flaxmere has a community police station, but no full-time police presence. Since the research was completed Flaxmere has continued to receive a constant bad press in the local and national media. Reports of homicide investigations and public meetings about drastically reduced property valuations are typical of the kind of attention directed at the suburb in any one week. The Hastings District Council maintains its largest complex of sixty-four pensioner flats close to the Flaxmere shopping centre and library and swimming pool. These pensioner flats provide the only residential facility for elderly people in Flaxmere, and cater for those over 55 with cash assets up to \$30,000 for a single person and \$45,000 for a couple.

The People

While Flaxmere has a high proportion of people born overseas, it has the lowest proportion of people of European ethnicity (38.59 per cent) in Hawke's Bay, and the highest proportion of people of Maori ethnic origin (52.03 per cent), and Pacific Island ethnicity (8.45 per cent). Flaxmere has the highest proportion of people under fifteen years (32.96 per cent) and the lowest proportion of people over 65 years (4.35 per cent). Only 1.23 per cent of people in Flaxmere have a tertiary qualification, and 56.56 per cent have no academic qualification at all.

Hastings

The site occupied by Hastings City was first settled in 1864. Hastings grew rapidly, becoming a prosperous rural service centre, which was portrayed during the 1870s and early 1880s as "a paragon of Victorian social and commercial virtue" (Wright, 1994, p. 115). Rebuilt after the disastrous 1931 earthquake with many Spanish Mission style buildings, it did not share the rapid reconstruction or the uniformity of Napier, which was able to proclaim itself "the newest city on the globe" (ibid, p. 166). The fruit industry developed rapidly after the revival of pip-fruit exports to Britain in 1946, and between 1958 and 1968 the orchards around Hastings produced almost a third of the national apple crop from less than a fifth of the trees. Technology, and especially aerial topdressing, brought land abandoned two generations before back into production, and freezing works expanded with the boom in export meat. Hastings suffered huge job losses with the closure of the meat works in the 1980s, and the effects are still visible.

The People

The population of Hastings city is nearly 29,000. Fifty per cent of people in Hastings receive Income Support, and over 39 per cent of the population was not in the labour force at the 1996 census. People of Maori ethnic origin represent 22 per cent of the population and 73 per cent are of European ethnicity.

Taradale

The area of Taradale was bought in 1858 by Henry and George Alley and named after George's birthplace of Tara in County Meath, Ireland. The first half and quarter acre sections went on sale in May 1866, when Henry Alley touted Taradale as a 'favourable opportunity for judicious speculation', suitable for the 'experienced colonist' (Wright, 1994, p. 55). Fiercely independent of Napier, Taradale became a busy Victorian town with its own social life, clubs, businesses and public buildings. Until the 1931 earthquake Taradale and Napier were separated by a swamp, and even afterwards, with the swamp gone, each town guarded its independence fiercely. However, Napier gradually spread towards Taradale, and a merger, first considered in 1948, eventually took place in 1968, amidst fears, which proved unfounded, that Taradale would lose its individuality.

Taradale is the site of the Eastern Institute of Technology, and, with a style similar to that of Havelock North, it is also a favoured place for retired people, with six residential care facilities listed at April 2000 (Perry, 2000). By comparison Napier City had five, Hastings seven and Havelock North had nine.

Napier

Napier, a city of 53,462 people at the 1996 census, was set up by the government as a 'port town' in 1853. Alfred Domett was commissioned to plan the town: he named the main streets after men of literature to avoid being "constantly reminded" of the "ruffians ... and runaway convicts" he thought would give their names to the streets otherwise (Wright, 1994, p. 52). Dismissed in 1860 as a hopeless site for a town, the main business district was bordered by swamps and was prone to earthquakes. However, as provincial capital between 1858 and 1876 Napier remained the focus of the region. Rebuilt after the 1931 earthquake in the modernist style that has made it the 'art deco capital of the world' and a popular tourist destination, Napier enjoyed a "renewed town spirit" and "escaped to a certain degree from the gloom of the depression" (Wright, 1994, p 166). Rivalry between Napier and Hastings, apparently based on "borough area and population statistics" (ibid, p. 192), is nevertheless deeply entrenched and flares up from

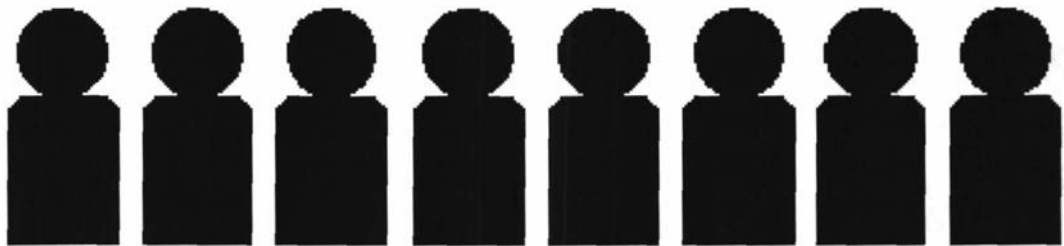
time to time over particular issues. It was the hospital issue which had galvanised many of the members of the Grey Power group I interviewed into joining up with Grey Power in order to protest against the move to Hastings. The Napier City Council has attracted continual media attention because of the acrimonious nature of its public debates, allegations of secrecy over Council decisions and some high-profile disputes among the mayor and councillors. This is the background against which Napier-based Grey Power Hawke's Bay was disaffiliated from the national Grey Power federation "for bringing the name of Grey Power into disrepute" and subsequently brought unprecedented court action against the federation and a Hastings solicitor (Hawke's Bay Today, Monday September 18, 2000). Napier City, with a population of 24,000 has a European population of 79.8 per cent, and a Maori population of 17 per cent. It has an older population than Hastings, with 14.68 per cent (compared with 11.9 per cent) of the population aged over 65, slightly more people with tertiary qualifications and slightly fewer people with no qualifications at all than Hastings. Napier has slightly more people with a personal income over \$30,000 and slightly fewer receiving income support than Hastings does. The hill in Napier is a highly sought after location, with properties close to the city and with views of the Pacific Ocean commanding prices similar to those in Havelock North.

This chapter has been included as an appendix to provide the reader with a brief local geographical and historical context to complement the social and political contextualisation of the group discussions and to add depth to the discussions about the participants' physical environments and sense of place.

Appendix 2:

VOLUNTEERS NEEDED

AGED 65 +



TIME NEEDED - Two hours per week for six weeks

PLACE - A local venue to suit participants

TASK - To talk about your expectations and experiences of ageing: e.g. do you have concerns, stories, ideas that you are willing to share, about

health? transport? savings?
services? housing?

WHY? - As a researcher in the field of social policy and social work, I need to find out what older New Zealanders think about growing older - what does it mean for you? To do this I need people who are willing to share their experiences in a small group.

WHO? - **Alison Kerr**, doing research for a project which is authorised and supported by the School of Social Policy and Social Work, Massey University.

HOW? - Telephone me at **879 6160** if you are interested in taking part. I would really appreciate your time.

Appendix 3:

A Study with Elders in the Community Who are Willing to Share their Experiences and Ideas

The Background

Here in New Zealand, as in other countries, the population is ageing rapidly. By the year 2041 there will be 1.1 million people aged 65 and over. It is vital that policies are shaped and services provided in a way that meets the needs of this large group of people, now and in the future. We need to know what older people think about what used to happen, what happens now, and what should happen in the future. I am keen to contact elders who would like to meet with a small group of interested people for a series of six weekly focus group discussions, each lasting between one and two hours. A focus group is a research technique that is used to find out what people think by listening to them in conversation. The group is intended as an opportunity for people's stories and ideas to be heard and shared. It is also intended that group discussions could lead to practical action, including recommendations for policy design.

The Research Project

These focus groups will be part of a doctoral research project being set up in the Hawkes Bay area to investigate aspects of ageing through the eyes of elders themselves. The study will offer selected groups of people in a range of living situations the opportunity to come together informally to discuss issues that are of interest and concern to them. Research questions will be both generated and answered during the focus group conversations, which will be recorded by the researcher. The data will be analysed and written up in a research report. The project is authorised and supported by Massey University and funded by a Massey University Doctoral Scholarship.

The Researcher

The researcher is Alison Kerr, and this project is being undertaken as part of the requirement for a PhD in Social Policy and Social Work.

Do you enjoy a good discussion?

Would you enjoy an opportunity to share the knowledge and the wisdom you have acquired over the years?

Would you like to talk about your own experiences of ageing and share those of others in a small group?

If the answer is “yes”, you may be interested in joining a small group of eight people plus the researcher to be held at a time and place to suit the participants. If you would like to join, or to know more about the research project, please write your name and phone number in the space below and I will telephone you. If you prefer to telephone me, you can phone me, Alison Kerr, at home on **879 6160**.

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Stories of Innocence and Experience Ageing in New Zealand at the end of the 20th Century

INFORMATION SHEET

THE RESEARCHER

Alison Kerr is a PhD student in the School of Social Work and Social Policy at Massey University. She can be contacted at home: Telephone 879 6160.

RESEARCH SUPERVISORS

All research students have staff supervisors who are available to offer support and guidance to students through the research project. Supervisors for this project are:

Associate Professor Robyn Munford
Head of School of Social Policy and Social Work
Massey University
Palmerston North Telephone: 06 350 5224

Dr Celia Briar
School of Social Work and Social Policy
Massey University
Palmerston North Telephone: 06 350 4299

AIMS OF THE RESEARCH

This research project aims:

1. To investigate the experience of ageing in New Zealand at the end of the twentieth century from the perspective of elderly people themselves, with particular reference to the impact of social policy on their lives.
2. To use focus group interviews to produce a descriptive account of the process of ageing.
3. To use focus groups to provide opportunities for older people to tell their own stories, and to respond to the stories and ideas of others.
4. To record and write up the stories in a way that allows many voices to contribute to a respectful understanding of the stories, and the concerns, interests and needs of elderly people.

WHAT THE RESEARCH INVOLVES

As a research participant you will be invited to:

1. Come together with a group of seven other people to discuss the research topic and issues related to it.
2. Meet with the same group of people in the same place at the same time every week for six weeks to discuss the issues the group has decided on.

WHAT WILL HAPPEN TO THE INFORMATION PROVIDED

If you decide to participate in the research, the group discussions will be recorded and then transcribed by Alison for use in presentation of her PhD thesis and possible future publications. When parts of the research are presented in public, nothing will be included which could identify you. The only exceptions to this would be if people wish to be identified, and if the group, that is, everybody in the group, wishes to provide public access to the tapes by offering them to a research archive, such as the local oral history archive. This would be after discussion and agreement from the whole group.

YOUR RIGHTS AS A PARTICIPANT

1. You have the right to confidentiality; that is, that the information you provide will remain confidential to the researcher and the group, unless we decide together to make it available to others.
2. You have the right to decide not to participate in the research project.
3. If you do decide to participate, you can still withdraw from the project at any time.
4. If you decide to participate, you have the right to decline to answer any question which may be put to you, at any time.
5. You have the right to be treated with respect, care and dignity at all times.
6. A summary of the research results will be made available to you if you wish.
7. If you have questions about the research, you have the right to ask Alison, or to contact either of her supervisors.

Stories of Innocence and Experience
Ageing in New Zealand at the end of the 20th Century

CONSENT FORM

I have read the Information Sheet, and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I understand that I am free to withdraw from the study, or from any part of it, at any time, and to decline to answer any particular questions.

I agree to provide information to the researcher on the understanding that my name will not be used without my permission, and that the information will be used only for this research and publications arising from this research project.

I agree to the group discussions in which I will participate being audiotaped, and I understand that they will be transcribed by the researcher, Alison.

I wish to participate in this study under the conditions set out in the Information Sheet.

Signed:

Name:

Date:

Stories of Innocence and Experience

PROFILE SHEET

Name:

How you would like to be addressed:

Age: 65-70 71-75 76-80 81 -85 86 - 90 91 - 95 96 - 100

Place of Origin:

Place in your family of origin:

Education: Primary

 Secondary

 Tertiary

Occupations:

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Would you describe you general health as: poor
 average
 good
 very good

Are there values and/or beliefs that are important to you?

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Are you: Single - never married
 Married
 Widowed
 Separated or Divorced

Children:

Grandchildren:

.....

Anything you would like to add (please use the back):

**Stories of Innocence and Experience
Ageing in New Zealand at the end of the 20th Century**

RESEARCH GROUP REFLECTIONS

Why did you agree to join the research group?

Did you enjoy being part of the research group?

If you enjoyed it, what did you like about being part of the research group?

If you did not enjoy it, what did you not like about being part of the research group?

Did you have a chance to say what you wanted to say in the group during the discussions?

Is there anything you would like to add?

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