The Institutional Aging Process

Ethnographic Explorations of Aging Processes and Dimensions in Danish Schools and Eldercare Institutions

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Abstract
In this paper, we will present an analysis of the institutional aging process in childhood and old age in contemporary Denmark. We will take as our point of departure Jennifer Johnson-Hanks’s observation that aging should be seen both as an experiential and an institutional process, and we will apply Ingold’s topographical phenomenology and his notions of maps, landscapes and wayfaring to our ethnographic data. Drawing on field work in Danish schools and elder care institutions, we explore aging processes through their spatial organizations and progressions. We sum up by reflecting on the similarities and differences between aging processes in early and late life. We argue that even if the institutional aging process can be seen as a map of the aging landscape – which acts as a powerful construct in experiences and practices of aging – wayfaring through that same landscape takes place between several poles: chronological, biological, social and phenomenological age – and involves considerable creativity and ongoing work and negotiation from both children and elderly.

Keywords: Aging, old age, childhood, institutional aging process, phenomenology

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Introduction

In this paper, we explore aging processes in childhood and old age, drawing upon fieldworks in Danish schools and eldercare institutions. Demographic transformations – and the social, cultural and political transformations that follow in their wake – are carving out an aging landscape of growing diversity (Sokolovsky 2009). In the words of Biggs and Daatland: “That there are more older adults around than at any time in history is now well known. It is less well understood that, as the population ages, it becomes more diverse” (Biggs and Daatland 2004, p.1 cit. in Baars et al. 2006). Concepts of “third” and “fourth” ages point toward an increasing difference between those who age healthily, actively and successfully, and those who do not (Buch 2015, Philips et al. 2010), as well as an often “later onset” of old age than for previous generations, whereas the concept of “tweens” indicate shifts in the transition from child to teenager and point toward “earlier” onset of teenager hood (Ladekjær 2016). Significant markers of this can be found in how elderly people dress, travel and use the Internet (Grøn and Andersen 2014), as well as in the way tweens dress, the music they listen to, how they use the internet and marketing strategies targeted at tweens (Gjødesen 2010).

We explore how we should perceive and understand contemporary aging processes by comparing two ethnographic fieldworks conducted in schools and eldercare institutions, respectively. We take as our point of departure Jennifer Johnson-Hanks’s observation that aging processes should be approached as an interplay between institutional projects and personal aspirations (Johnson-Hanks 2002). In contrast to classic structuralistic theory, focusing on life stages and “rites de passages” between them, Johnson-Hanks argues that aging and processes regarding transitional phases are much more complex than earlier theoretical perspectives indicate – and that they more often than not differ from the view of fixed life stages inspired by van Gennep (ibid). Johnson-Hanks’s inspiration comes from Pierre Bourdieus practice theory, but due to the spatial organization of the aging processes of our fieldworks, we will rely on Tim Ingold’s topographical phenomenology, and his concepts of maps, landscapes and wayfaring (Ingold 1991, 2000, Ingold 2007, Ingold and Vergunst 2008). Also, we expand Johnson-Hanks’s two dimensions (institutional projects and personal aspirations) and explore aging processes in relation to several aging dimensions: chronological, social, biological and phenomenological age. Through an analysis of the institutional aging process in contemporary
Denmark, we will focus on the complex interplay of these diverse aging dimensions in both childhood and old age.

**Ingold’s topographical phenomenology**

Ingold describes the way humans live their life as wayfaring through landscapes. This is put in opposition to navigating using maps. The concept of wayfaring expresses how humans move, orient themselves and find their way, and the concept of navigating how we plan and carve out routes from a distance (Ingold 1991, 2000, 2007, Ingold and Vergunst 2008). We apply this distinction in order to capture both how institutions map and carve out spaces for aging processes – and how processes of aging as wayfaring through actual landscapes complicate the mapped routes. According to Ingold, maps create distance between humans and the landscape through which they are moving and by which they are surrounded (Ingold 2000). In this sense, Ingold’s two concepts of maps and landscape are related to two different types of knowledge (for similar distinctions between ways of knowing at a distance and close up, see De Certeau 1984, Jackson 1989). You can study a map and the possible routes from one location to another and decide on a route, or you can merely start your journey and decide which roads to travel as you move along. In this perspective, your goal or destination can change several times along the way, and this describes how we mostly live our everyday life (Ingold 2000). A map will outline possible routes, but does not tell us anything about the practical experience and wisdom needed to move through life. Where the map as a metaphor points toward mental conceptions about routes, the landscape as a metaphor includes the body, as well as earlier experiences with wayfaring. Landscapes are varied and ever-changing, whereas maps are more static once they have been drawn.

**Chronological, biological, social and phenomenological age**

In our fieldworks, several concepts of age are relevant, both in relation to the map and the landscape of aging. Along with other demarcations, such as gender, race and ethnicity, age is often perceived as a natural or biological given. A wealth of studies have established, though, that age is a composite and complex phenomenon that can be conceptualized in various ways. The literature is comprehensive, and we cannot do justice to the wealth of studies within the limited space of this paper. Below, we will give a brief introduction to the notions of chronological, social, biological and phenomenological age.

**Chronological age**

Chronological age is a measurement of years lived since birth based on a standardized and western calendrical system. Chronological age proceeds progressively at a constant pace. It is irreversible and independent of genetic and societal variation, and as such it has been a highly popular independent variable in a variety of studies, also where chronological age is not part of the research interest (Beall 1984).

Meyer Fortes has argued that chronological age marks our relationship to the state, as it is a number that does not stem from our place or status within the family or the intimate social network (Fortes 1984). Chronological age, he argues, is related to citizenship and marks our political and judicious rights (ibid). Fortes, like Beall, highlights how chronological age is objective and independent of biological, social or psychological characteristics, and that in the West chronological age regulates our lives from birth to death on a personal, economic, civilian, moral and educational level.

**Social age**

As shown by Fortes and other anthropologists working in “non-western” societies, this perception of chronological age is far from universal. According to Fortes, what can be ethnographically demonstrated as universal is what he calls “states of maturation”, which are related to our biological
foundations. Such states of maturation have been identified, conceptualized, culturally recognized and built into the social structure in all known societies (ibid.). Thus, in classical anthropological theory age and gender are seen as basic principles of social organization and differentiation (Hylland Eriksen 1998).

Based upon fieldwork among the Tallensi, and on a long list of studies of aging in an African context, Fortes suggests non-chronological social or kinship-based ways of representing age: birth order and generations within families (not the nuclear but the extended family) and “age set” (e.g. being part of a group, the members of which go through initiation at the same time). Fortes’s analysis of age in relation to the extended family, to a village or larger social group or in relation to an age set testifies to the complexity of aging as a principle of social organization (Fortes 1984). These “ages” do not converge, but are linked to specific social spheres, relations, events and places. In social gerontology – and in studies of aging in western contexts where chronological age is dominant – social age is linked to norms and attitudes regarding aging, specifically social expectations related to specific (chronological) age categories or life phases (Phillips et al. 2010)

Biological age

The taken for granted ways in which we think about chronological age are not only undermined by family, kin or ritual-based aging, as described by Fortes. Biological age, which we according to a common sense view often perceive as the foundation of chronological age, does not correspond with chronological age (Beall 1984). In physical anthropology, biological age is determined in relation to specific body parts, specifically the teeth or the skeleton. All children with the same skeletal development are seen as having the same biological age, even if they vary in chronological age (ibid.). Biological age or senescence – decline of a cell or an organism due to aging (Phillips et al. 2010) – thus marks the physical body’s aging process. What we want to take from this is not the specific concept of biological age as understood in physical anthropology, but rather the point that chronological and biological age do not correspond to one another. What we intend to capture with the notion of biological age is bodily age in a broader sense – as in body size or sexual maturation in teenage years or onset of sickness and physical/mental debility in old age – as an age dimension in its own right.

Phenomenological age

How to conceptualize aging is further complicated by how age is experienced – or what you could term phenomenological age. Steven Katz mentions a study on this subjective aging dimension, which concludes that, in old age subjectively experienced age is often lower than chronological age, and that the distance between the two seems to increase with progressive aging (Katz 2006). Others have demonstrated that the continuity of the self through the course of a life characterizes the aging experience, rather than old age as a distinct phase of life (Kaufman 1987), and that old age is experienced as an ever-increasing gap between the ages of the body and the mind (Leder 1990, Desjarlais 2003).

Through this short introduction to a vast discussion, we hope to have shown that aging understood as “stages of maturation” can be conceptualized in quite different ways. Moreover, that different parts of what constitutes a human being – the physical body, social and psychological dimensions, and the time of birth – can be seen as the basis of such conceptualizations. In the following, we explore the institutional aging process in Danish schools and eldercare institutions with attention to these diverse aging dimensions and through the notions of maps, landscapes and wayfaring. First, however, a short introduction to the ethnographic fieldworks will be provided.
Ethnographic fieldworks

Both the fieldwork carried out among children in school and among elderly in different institutional settings can be characterized as “multi sited”, i.e. spread over different locations, which are united through a practical or thematic concern (Marcus 1995). Moreover, they were both conducted as fieldwork “on the move” or as “go-along fieldwork” (Kusenbach 2003). Here, the anthropologist follows her interlocutors, while they move around their landscapes carrying out daily activities. The anthropologist in this go-along fieldwork gets an embodied experience of shifting sensory inputs of persons, places and spaces.

The analysis from the Danish school is based upon fieldwork that started in the spring of 2010 and ended around Christmas 2011. In this period, Else Ladekjær followed children from two classes at two different schools in the same municipality. In the spring of 2010, the children were finishing 5th grade, in the school year 2010/2011 the children were in the 6th grade, and in the fall of 2011 the children were in the 7th grade. Thus, she followed the same children over a period spanning three school grades. Participant observation, interviews, informal fieldwork conversations and go-along were the dominant methods in the fieldwork. The fieldwork was conducted as part of Else Ladekjær’s PhD (Ladekjær 2016).

The fieldwork in eldercare institutions was conducted by Lone Grøn from 2013 to 2014 and divided into two phases. The first phase, running from April to July of 2013, was carried out in three municipal eldercare centers that provide services for the elderly in a mid-sized Danish town. In each center, the same three-week process was repeated: the first week was dedicated to elderly people living in their own homes and receiving home services or care, the second to elderly people living in institutions, and the third was used to follow up on any other relevant sites that emerged during the first two weeks. The fieldwork thus took place in an institutionally and geographically diverse landscape involving both urban and rural, and well-off and deprived neighborhoods. In the second phase, from November 2013 to February 2014, Grøn focused on nine elderly people who represented some of the diversity in the life situations and histories from the first phase. The data for this paper is mostly drawn from the first phase of fieldwork. The fieldwork was conducted as part of a study of vulnerability in old age in contemporary Denmark (Grøn and Andersen 2014; Grøn 2016).

Mapping the institutional aging process

In fieldwork marked by feelings of doubt and uncertainty about age, what it is, how and when one ages etc. there has been a remarkable consistency when it comes to what Grøn has termed “the institutional aging process” and Ladekjær “the institutional age” (Grøn and Andersen 2014; Ladekjær (former Olesen) 2013). The institutional aging process denotes progressive aging through diverse welfare institutions and services. At one end of the spectrum, children move through the different childcare and schooling institutions, such as nurseries, kindergartens, schools and after-school clubs, which are designed with specific chronological ages in mind. In relation to this, it is important to mention that the institutional settings and their various purposes have a far-reaching significance for children’s everyday life, as well as their life span in a Danish context (Højlund 2002; Gulløv and Højlund 2005; Gulløv 2009). At the other end of the spectrum, we find institutions and services that are organized around biological age and increasing physical and mental decay in old age: patient schools for people with chronic diseases at community health centers, activity centers, home care services, day centers, housing for the elderly, nursing homes and dementia wards.
When doing fieldwork in these welfare state institutions, you get an almost physical sensation of moving from one age phase to the next, when moving from one location to the other: from one section of the school to another, or from one floor or section of the municipal eldercare center to another. In the following, we will introduce this topographical and progressive aging process, first in the context of the school and then through various elder care institutions.

From child to teenager in school

In the following, the focus will be on the journey from child to teenager within the institutional map of the Danish school. The school system is characterized by being a national unity cultural institution (Qvortrup 2003). In Danish schools, institutional views on specific ages and aging are pervasive and ever present. The school is organized according to the children’s chronological age. This is evident in the grade structure, as all the children born in the same year belong to the same grade. Moreover, the school is organized in three sections according to specific age groups. First, we have the introductory period from the 0th to the 3rd grade, then the intermediate stage from the 4th to the 6th grade and finally the final stage from the 7th to the 9th grade. In a typical Danish school, the division into three sections and ten different grade levels is also evident in the spatial arrangement of the school, both indoors and outside. This determines which parts of the school yard the different sections have access to, which parts of the school the classrooms of the different sections are located in, and which rules of conduct apply to a specific section or grade. The fieldwork carried out among children at two schools shows that both the material and symbolic surroundings are relevant when focusing on children’s transition from child to teenager (Ladekjær 2016). Thus, both the material and symbolic organizations of the school space support the children’s route through the institutions of childhood (Hejlund 2009). In the following section, we will walk through the halls of one of the two schools from the fieldwork, in order to show how the material and symbolic surroundings collectively shape the school space – and provide the sense of moving forward in terms of age, as the children move from one grade to the next and from one section to the next.

Moving around “Vestervangsskolen” you notice and sense differences among the three sections. The section of the school for the introductory period is characterized by a lot of color, for instance from the many paintings and drawings displayed on most walls. The furniture is small, there are locked cupboards with pictures of scissors, glue and paint – and all sorts of outdoor clothes, shoes and bike helmets are lying about in the hallways. Moving to the section of the school intended for the intermediate stage, the décor is characterized by posters illustrating the characteristics of specific countries, word classes, mathematical rules and historical periods, and poems written by the children. Chairs and tables have grown in size, and there are sofas in the common room. A few of the chairs and tables are larger than the rest, reflecting that some of the children’s bodies do not fit the average furniture intended for the intermediate stage. Moving to the spaces dedicated to the final stage, the stories told by the décor and furniture changes once again. Here the walls are embellished with posters of pop and reality stars as well as posters from the local youth clubs and associations promoting various activities, such as homework assistance, parties, plays and excursions. There is access to computers, and the locked cupboards contain end-of-term exams, not utensils for painting and drawing.

Moving from one grade to the next, the transitions from 3rd to the 4th and from the 6th to 7th grade is marked not only by a shift in classrooms, but also by shifts from one part of the school to another. This means that the children will use different entrance doors to the school and walk through different parts of the school. In some schools, the shift between sections also involves getting new teachers, and the shift from the 6th to
the 7th grade can mean entering a new school as well as a new class. The children’s shifts in both the organizational and physical surroundings thus mark shifts in the institutional aging process.

The division into the three sections is also mirrored in the schoolyard, each section having its own part of the schoolyard. The division of the schoolyard is not necessarily marked physically by buildings, fences or hedges, but the children know the boundaries between the different areas. This is evident, when the children are asked to show me their schoolyard, as the following example with Jane and Mona illustrates:

We walk out of the door and onto the terrace, the girls agree that this is a place that they are allowed to use – but they seldom do. Jane says that last year they used to spend a lot of time on the terrace. Today it is empty except for a few girls standing by the railing looking down on the playground below them. We walk down the stairs from the terrace to a plateau. Here, there are swings, a climbing frame, other playground equipment and a lot of younger children. The girls point to different places and explain where they are allowed to go and where they are not allowed to go. A large part of the area is for the youngest children at the school (the introductory period) only, but the older children (the intermediate stage) are allowed to use a few areas in the playground. The girls say that they seldom come to this area of the school grounds. They mostly use the other side of the school buildings (where there are no playground facilities). Mona says that the playground is for “babies”. Jane laughs and says that they actually do not know that much about this particular place.

The girls’ tour demonstrates that the school yard for the introductory period is usually a playground with swings, sandboxes and climbing frames. The area for the intermediate stage is typically organized with soccer fields and other types of playing fields, whereas the part of the schoolyard intended for the final stage usually has benches, open spaces and maybe a basketball field or similar. The organization of both the schools’ indoor and outdoor areas communicates the institutional perspectives on and expectations to the different age groups (Højlund 2009), or social age as it is conceptualized within social gerontology. The organization of the school yard shows that the youngest children are expected to be active in a variety of ways and be challenged physically by their surroundings, whereas the school yard for the intermediate stage is characterized by particular ball games and fields for these games – showing expectations of increasing bodily mastery of specific sports or games – while the outdoor areas for the eldest children are not oriented towards movement. The division into grades and sections – the map of the institutional aging process – is a central part of the invisible pedagogy at school that informs the children’s affiliation to specific spaces, i.e. where specific age groups are meant to be, and also how they are expected to behave in these places.

From the beginning to the end of old age

The institutional aging process at the end of the life starts out in people’s homes, with home visits from social and health workers and nurses. Below, excerpts from field notes are given.

We arrive at a villa close to the fjord. A huge, new luxury winnebago, an expensive, small, white sports car with the roof down and a more ordinary car – a VW Polo – are parked in the driveway. Huge old villa, huge garden. In the living room, a woman about 65 years old is lying on the couch. Her husband is also there, keeping in the background. She complains a lot: about him, about her situation, about pain – but in ways that seem out of sync, she is obviously demented. The husband looks tormented and exhausted; and the tension and despair inside this house is palpable. The next house is located on the outskirts of town, close to the fields and the woods. An old and dilapidated smallholding. It looks neglected, like a hermitage. And it is. The social and health worker explains that it has been quite a struggle to be allowed to enter. The male resident suffers from chronic obstructive lung disorder, but he wants to manage on his own. She is allowed
in now to wash his back, and twice a week she also washes his feet. He is a bachelor and always has been. We enter into an entry room with a rough cement floor. Raw and cold as in a barn. Then we enter the kitchen where a radio is playing loud German “schlager” music. Everything is brown, deteriorated and dirty. There’s an oil cloth on the table. Next, we move on to an apartment located in another part of town. It is a new building, yellow brick, and most residents are referred to this housing complex from the municipality due to some kind of problem. The social and health worker explains that the male resident used to be an alcoholic, now he drinks less but suffers from alcohol dementia. We enter an apartment on the second floor, a strong smell of cigarette smoke, and a broken glass on the toilet floor. There are cigarette butts, tobacco leftovers (he rolls his own cigarettes) and dirty dishes everywhere – and drops of jam on the floor. Cleaning under the bed, I find 8 used lighters – and more cigarette butts. While we do a rough clean up, the male resident is picked up by the bus, which drives to the day center, where he gets food and twice a week also a bath. Finally, we return to the part of town where we started out in the morning. Before we enter, the social and health worker explains that the man in this house is paralyzed in one side. He is living here with his wife, and is driven to the day center every day for baths, meals and physical training. Their residency is a small house with a small garden. We enter through the kitchen to a hallway with two rooms at the end. He sleeps in the room on the left, she in the one on the right, so that the helpers do not wake her up. He sleeps in a hospital bed, the floor lift is next to it and behind it hangs a framed picture: a heart with their names on, congratulations, 50 years and 2004 written on it, surrounded by flags. They must have celebrated their 50th wedding anniversary almost 10 years ago. The social and health worker says that they used to be very social, festive and outgoing, but his sickness has changed all that. After she has woken him up, washed him and lifted him from the bed to the wheelchair – all accompanied by joking exchanges – he wheels himself to the hallway, opens the door to the other room and calls his wife’s name. As she slowly wakes up, she joins in the joking conversations.

The institutional aging process at this end of the spectrum is organized around biological age, the deteriorating mind and body, compensated by institutional care. In the beginning of this process, we see the diversity in living spaces and situations, Progressive aging creeps in on both well-off and marginalized people. In homes there are material markers of life lived over time, of social position and relations and the biographical self, even when these spaces are also marked by increasing institutional presence. All this changes when we enter into the institutional spaces.

In close proximity are activity centers, day centers, nursing homes and dementia wards as well as offices for the staff that carry out home visits for those still living at home. As we move from one section to the next, the people there are increasingly sick, though due to the proximity people from different section’s paths cross, as when the demented move through the hallways to go to some event. This puts the residents of “earlier phases” of the institutional aging process in the same place as those in the “later” phases. Elderly people in activity centers expressed strong fears of one day finding themselves in these physical spaces of “the old” (Grøn 2016). Several interviewees expressed hopes of dying, rather than progressing through the later stages of the institutional aging process.

The spaces look the same, like little worlds or societies unto themselves, and it is difficult to orient oneself, both within the spaces themselves and in relation to the surrounding world. Where I am doing fieldwork today, there is a nursing home and also a large day center. The dementia ward and the dementia day center are also located in this block, which is exceedingly large. There are clothes for sale in the entrance hall, when I arrive in the morning. Later in the day, when I am leaving, the same entrance hall is full of elderly people in wheel chairs: day center participants who, after activities, food, a bath and a nap, are waiting to be picked up by red busses. It is a slightly disturbing image, like seeing children in pushchairs about to leave

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for a picnic. Only they are not children, and even though there have been some activity during the day at the day center, knitting, looking through gardening books, singing, what is striking is the lack of activity, motion and movement. Unless it is meal time or there is a training session with a physiotherapist, many of them just sit in their chairs, some asleep, without talking to each other. In all institutional spaces, efforts are being made to make the spaces homely. Nevertheless, it is difficult to shake off the institutional feel of these places: hospital beds, all kinds of lifts and medicine in locked cupboards are some of the disturbing presences. The organizational structure also marks these spaces: the daily work routines which are planned to fit the staff’s working hours and tasks, giving a strong uniformity to each passing day.

A summing up of the institutional aging process will be based on different dimensions of age in each site: for children in schools it is based on chronological age, for elderly people on progressive bodily decay and sickness, i.e. biological age. In fact, chronological age is almost completely absent from these institutional spaces. In terms of biological or physical age, there is also a remarkable difference in the amount of physical activity: children’s spaces are filled with activity, but through the institutional aging processes they are taught, by the invisible pedagogy, to move less or to move in specific ways, whereas the spaces for elderly people are marked by progressive stillness, only interrupted by meals and training sessions aimed at keeping them active. This of course has to do with the biological aging process, but also very different aspirations and hopes: The children aspire to grow older – most of the children cannot wait to move to the next grade or for their next birthday. Turning thirteen, becoming a teenager and attending the 7th grade and out-schooling (the 7th to the 9th grade) are very important age markers on children’s path from child to teenager. The children generally have a strong drive to moving forward in their institutional settings, while the opposite is the case among the elderly. What we want to suggest from this map of the institutional aging landscape is its centrality to how progressive aging is perceived and practiced in a Danish context. The picture drawn by the map of the institutional aging process might seem overly simplified in being based on either chronological or biological aging, but when we get to the wayfaring through the aging landscapes, intersections and clashes between different aging dimensions complicate the map.

Wayfaring through the institutional aging landscape

Too big, too old, too small or not old enough

The former section on the map of the institutional aging process showed that the school as an institution is a vector of certain views on and ideas about children (Sørensen, Gilliam and Waltorp 2010; Gilliam & Gullov). A large proportion of these ideas evolve around connections between the body, movement, chronological age and grade. Children can act and move age-appropriately – or according to specific age imaginaries (Alexander 2010). A large proportion of the children comply with these age imaginaries and specific expectations to a certain degree, but several children deviate from the norm. Most of these children are oriented “upwards” age wise, but there are also children for whom the opposite is the case. In the following, we will see examples of both cases.

Alex is among the most physically developed of the boys in his class. This was the case in the 5th grade, and in the 7th grade he still stands out from most other boys in his class. Alex’s body looks older than his chronological age – this was especially the case in the 5th grade. However, the way Alex uses his body in the 7th grade hardly differs from the way the boys used their bodies in the 5th grade; he is very physically active and does not want to stay inside during breaks – which several of the other children do, since staying inside during breaks is a sign of being older. Alex likes to climb trees, run around the school grounds or play
basketball. Alex says: “Their [the younger children’s] play things are more fun and they have the best climbing threes. They are over there (by the playground)”. After the breaks, Alex often comes back into the classroom with dirt on his pants, and one day when Alex enters the classroom wiping sweat of his forehead with his shirt, Hanna whispers to Sarah: “I’m glad I’m not sitting next to Alex, when he smells like sweat like that”. Sarah looks at Alex and wrinkles her nose. Alex is not one of the boys mentioned when the girls talk about boys – just as he does not appear on any of the girls’ top 3 lists of the boys they would prefer as boyfriends. He does not comply with the social expectations for his chronological age and school grade. In other words, his biological, chronological, social and “institutional” age do not concur. However, most of the time Alex succeeds in staying in his preferred areas of the school grounds, even though he is not supposed to be there. Alex describes his strategies:

You have to be nice to the younger children and maybe play with them, but you must not be too wild, like on that day on the swings, where Simon [one of the teachers] sent me away. But most of the time you are allowed to stay there, as long as they [the teachers] do not see or notice you too much.

Like Alex among the boys, Britt is one of the tallest and most physically developed girls in her class. In the 5th grade, Britt told me that she was the first girl in the class to get her period. When it is that time of the month, she sneaks out to the restroom to change her sanitary towel and she does not feel comfortable participating in physical education during those periods. On one day, there was a queue for the restroom:

Britt is holding a case with her sanitary towels while she is waiting to get in. Asger, the shortest boy in the class, asks: “What is that?” Britt answers, “Nothing!”, and turns away from Asger, who shakes his head, looks at me and says: “Girls!” before he runs out the door.

Britt: “I have only told Jane, you know she can keep a secret... It’s just no fun, when you know you are THE ONLY ONE, then you can feel a bit left out. It’s the same when I don’t join in physical education. Luckily, my mom has written a note for the teacher, but what am I supposed to tell the others?”

Britt is normally one of the most active girls in physical education, and for this reason her classmates notice when she does not participate. In the 7th grade, the situation has changed, and several other girls have caught up with Britt – but now she feels left out of the community of girls in other ways. Several girls have started using make-up, but Britt is not allowed to do this by her mother. Britt sits still, not saying a word, while some other girls eagerly discuss the make-up they use. When we are alone, Britt tells me that she would like to use just a little bit of make-up at school, but that she is not allowed to.

Both examples show how Alex’s and Britt’s chronological, biological, social and institutional ages do not match, but Alex and Britt have different strategies. Alex consciously chooses to act like a younger child by taking part in physical activities typical of 5th graders and using the area for younger children. Britt actively seeks to fit in with the other girls and her social age, but has her physical maturity and her mothers’ rules as obstacles. The examples with Alex and Britt illustrate the immense difference between the map and the actual practice of moving through the institutional aging process, and how wayfaring requires creativity, cunning and effort – often an ongoing effort to try to fit in or negotiate an exceptional position for oneself.

The significance and ambiguity of age is also evident in other cases. One of them being that of Niels, who is a year older than his classmates. Thus, Niels’s chronological age does not match the institutional placement in his grade. Moreover, Niels is very tall – he is the tallest in the class, and his table and chair are larger than those of the rest of the pupils in the 5th and the 6th grades. Niels is very interested in sports, but he does not take part in the ongoing soccer games during breaks. Niels tells me that he would like to join in the soccer games, as he likes soccer and is good at it. Niels used to play soccer with his classmates in the local
soccer club after school, but due to his chronological age the national tournament rules do not allow him to be a part of the same team as his classmates. In the beginning of the 6th grade, their soccer coach was not aware of this rule and after a victory the opposing team filed a complaint over Niels’s age and him being a part of the team. Both the coach and the rest of the team are very concerned about their results. As a consequence, Niels is no longer on the team. He could play for another team with boys born in the same year as him, which would give him membership based on chronological age rather than institutional grade age. Niels stopped playing soccer, though, and he no longer participates in the boys’ soccer games after school or during breaks at school.

Being a year older or younger than your classmates in terms of chronological age often means that body and age group in school are in conflict with each other, as can be seen from the case of Niels. Niels’s chronological age impacts his social relations and opportunities for participating in specific activities and communities. Previously, Niels always knew with whom and where he would spend his breaks, but now he is left to find other activities and communities. Just as is the case with Alex, Niels tries to initiate activities and recruit playmates, but no matter how much he tries, he does not succeed.

Unlike Niels, Tim wishes he was older than he is, that his chronological age was higher, and that he was in a higher grade. Tim says that he does not feel that he belongs in his class. Tim is tall and thinks a lot about which clothes he wears. Tim does well in school but does not spend a lot of time doing homework. He is good at sports, but he does not practice any sports at the moment, because he thinks it is childish, and, as his class teacher says, Tim can play the guitar and melt all the girls’ hearts. Tim has one close friend in his class and finds the rest of the girls and boys too childish for him. After classes, Tim disappears just as quickly as the boys heading for the football field, but in another direction. During breaks, Tim spends time with the older girls at school. Tim often stays indoors during breaks, even though he has not reached that phase of the institutional aging process himself. Tim avoids the categories and rules that come with being a pupil in the 5th and 6th grade. As Tim puts it: “They (the teachers) probably think that I belong with them – that we have the same rules.”

The empirical examples show that the children’s diverse biological ages, as evident in body size or movements, and their chronological, social and institutional grade ages are not in a one-to-one relationship with each other. This complicates the map of the institutional aging processes and the examples demonstrate the work they put into moving along as they go, the wayfaring through the landscape of tweens, which requires considerable practical wisdom and creative skill.

Being too well or too sick, too old or too young

As we saw in the map of the institutional aging process in old age, progressive aging is not related to chronological age, but to the progressively deteriorating body and mind. The institutional aging process starts out in people’s home, through their increasing need for compensation and care. We return here to the house of the couple where the husband is paralyzed in one side.

The wife explains that vulnerability emerges when one gets sick. It is a daily struggle. All help is directed at her husband and even though she is in a lot of pain due to back problems, they expect her to be able to take care of him. The amount of washing if he has had an “accident”, for instance, can wear her out completely and it is very hard to coordinate with the helpers. Sometimes they scold her if she is in the bathroom in the morning, when they need it for him, or if one of her blouses is in the laundry; they only have to wash his clothes. It is the not the individual social and health worker that is the problem, most are really good, especially their main helper, but the system, which is unfair, inhuman, she says. They cannot make it
fit their particular situation. They have applied for an apartment in a nursing home, because they cannot cope with the situation any more. But then again, their situation might not be seen as sufficiently bad, because she is counted as a resource, which is seen as reducing the severity of his predicament.

As this couple vividly explain, what has made them suddenly old is sickness, not chronological age. They cannot do the things they used to, they need help from both institutional staff and their daughter. It is a painful process, and what becomes apparent in this example is how the institutional sphere creeps in on their home space: the presence of staff banishing the wife from the bathroom, and as we saw earlier the hospital bed and the floor lift. Moreover, we see the impact of social or relational age on biological age – and their place within the institutional aging process. Their biological ages are both subtracted from and added to one another: her deteriorating health is subtracted from his, the help and services only apply to him, but when they ask to be moved to a nursing home, her better health can be added to his – preventing them from “progressing”. This social or relational dimension of age is also seen in the following example, where old age is negotiated between a resident, Dagmar, and a helper in a nursing home.

I am following the helper on her morning round. Dagmar is lying in bed when we enter, and I am told that she is perfectly capable of doing things herself, but that she likes to complain. She has to have a bath on that day, which she loathes. While we help her get out of bed, the following conversation takes place.

Dagmar: “When do you get old?”
Helper: “I don’t know. When?”
Dagmar (with force): “I am asking you!”
Helper: “You’re not old!”
Dagmar (hesitating): “Yes, I think I am beginning to get a bit old …”

Dagmar is asking the helper to look at her from the outside and help figure out whether she is old now, but she is also asking someone who requires something of her – that she should get out bed, get dressed, have a bath – and who drags her off to all kinds of social activities. Given the helper’s description of Dagmar, she could be trying to negotiate. If she is in fact old, could she then be allowed to be less active and maybe even be excused from the social activities at the nursing home? Would this mean that she could avoid taking the dreaded bath? We see the evaluation of being active as something that signals being “younger”, i.e. a social expectation, or to do with social age, which is institutionally backed in recent transformations toward enablement in Danish elder care policies and practices (Rostgaard 2014, 2015).

In the institutional spaces, conflicts and tensions also emerge between those placed in shared spaces. Even though there are large-scale divisions in the state of mental and physical decline between actual spaces – activity centers, day centers, nursing homes and dementia wards – people who inhabit these spaces are not at the same stage of deterioration. This gives rise to considerable tension and conflicts between residents preoccupied with the precarious business of being in a better or worse state than others.

At the dinner table in the nursing home, a conflict builds up between Ragnhild and Karen. Ragnhild is demented and deluded, Karen is not. She used to be quite sick but has recovered and now seems to be in a considerably better state than the other residents. Ragnhild is declaring in a loud voice that she has to go to the hospital. Karen responds dryly: “Hmm, you also had to go yesterday.” Ragnhild responds that it was closed, but that now her son-in-law is coming to pick her up. Karen: “Lucky you!”, “Ragnhild: “Well I am very happy about that.” Ragnhild then explains how her daughter is on her way in a helicopter to pick her up, but that she is afraid of flying. Karen responds wryly and with ill-concealed irony that then she can just take an ambulance instead. At no point does Karen state directly that Ragnhild is lying, but she hints at it,
and Ragnhild gets it. At one point, she shouts: “Are you saying that I am lying?” banging her fist into the dinner table. Karen backs off and says no. She shakes her head looking to the staff or me for support. Meanwhile, Ragnhild is “seeing” people in front of her and talking to them (mostly the daughter approaching in the helicopter), and she signals to people at the dinner table to move out of the way. Then, Karen again asks wryly who she is talking to.

Another exchange at a dinner table in a dementia ward also shows how your physical and mental capacity, your biological age, is central to the institutional aging process, here also linked to morally proper ways of behaving, or social age:

Oda is making conversation with Esther. They are the two who are most well, meaning that they small talk and make conversation at the dinner table. They both say several times that one should stay active, not just sit there doing nothing (with direct reference to other residents at the table who are immobile and unable to talk). It seems like Oda and Esther are having a good time and that they accept the (lack of) presence of the others. They simply feel superior to them. When at one point Oda laughs heartily at something Esther says, Esther responds sharply: “You’re not sitting there laughing at me, are you?” “Not at you, with you,” Oda responds, and keeps laughing.

Here, a possible conflict is prevented from escalating, but smiles and laughter can be sensitive issues in these institutional spaces. Who is more demented? The one who laughs or the one who does not want to be laughed at? This makes social age, or expectations regarding behavior in the institutional aging process, unpredictable: some are physically impaired, some mentally impaired, some, like Karen, not so impaired, which makes social interaction quite challenging and often highly frictional. This exchange, like the exchange between Dagmar and the helper above, demonstrate that being active or passive are strong age markers in the institutional aging process, much stronger than chronological age, which is not mentioned at all in the above exchanges.

Chronological age is not absent, though. In the following fieldwork excerpt, I introduce Poul, who is only 58 years old. In the map of the aging landscape, we entered his flat, which was full of cigarette butts, broken glass and lighters under his bed. Here we are at the day center, where he goes on all work days.

After having breakfast, we sit in the smoking room. Apart from the dinner tables, this is Poul’s preferred spot in the day center. I ask him about old age. He says, that it is no fun, if you just have to “sit like that”, showing with his body how many of the elderly here just sit, unable to hold their bodies upright, staring into space with their mouths open. How do you think that feels, I ask. He says not to think about it. “If you think too much about it, you become old.” A social and health worker comes to get us, asking us to take part in an activity. When we get there, ten elderly ladies and two social and health workers are sitting around the table. Some are sleeping, some are talking loudly about grandchildren. They are of very different physical and mental abilities. Poul just sits there, not talking to anybody. Several times, the staff invite him to join in, to make some candy. “No thanks, I will just watch”, he replies politely, but firmly. Several times – both before, during and after the candy making – he looks at me and says: “Sometimes, it’s a hell of a long day!” or “You see, nobody says a word, except what needs to be said!” There is a lot of silence, but in fact he is the one who stays most silent. When people have a conversation, he refrains from participating.

Grøn only followed Poul for a few days, but often saw him while carrying out fieldwork at the eldercare center. These glimpses confirmed the first impressions: he just sat there, day in and day out, either at the dinner table for meals, or in the smoking room trying to light a cigarette. Looking at all those who, in his words, have “one foot in the grave” and for whom the next stop involves “digging a hole in the ground”.

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He is still a young man, chronologically, even though he is old in terms of institutional age. He does not mingle, and this goes against the social expectation of this space and this particular event: if you are well enough, like Poul, you are expected to participate and thereby place yourself among those who are able; if you are impaired you are exempt from activity and participation. But what is Poul trying to accomplish? Does the distance he keeps serve as a form of protection, a bulwark against becoming old like them? If you do become old, as he states, by thinking too much about it, then you might also become old if you were to involve yourself with those with “one foot in the grave”. Poul’s observation – that it is somehow dangerous to think or talk about getting old – is widely reflected in this fieldwork. Phenomenological age, or how you feel or think about aging, is seen as a very important causal factor of aging. Chronological age is referred to by many as being “just a number”. What counts, they say, is your state of mind. How you think and feel about your situation determines whether you are (getting) old.

Thus, we have seen that the main marker in the mapping of the institutional aging process in old age can be summed up under the biological age dimension, the level of physical and mental decline, and also that activity in general indicates whether you are younger or older. In the absence of chronological age, being in a better or worse state than others indicates your place in the institutional aging process, yet social or relational age complicates any simple reference to biological aging. People develop strategies for how to maneuver within these institutional spaces, even though they do not actually fit their place within the institutional aging process. Moreover, due to the multitude of possible ways of being impaired, as well as the diverse possibilities of being in a better or worse state than others, social interaction is demanding and often frictional. And while chronological age in some cases does play a minor role in how people fare, we have also seen that phenomenological age, or how you think or feel about your age, is seen as an important dimension in this institutional aging process – as a bulwark against progressing to the later phases.

Conclusion

In this paper, we have asked how we should perceive and understand contemporary aging processes, in the face of dramatic demographic, social and cultural transformations of both local and global aging landscapes. We have compared aging processes from two ethnographic fieldworks conducted in schools and eldercare institutions, respectively, and taken as our point of departure Jennifer Johnson-Hanks’s observation that aging processes should be seen as an interplay between institutional projects and personal aspirations (Johnson-Hanks 2002). Due to the spatial organization of the aging processes of our fieldworks, we have relied on Tim Ingold’s topographical phenomenology and his concepts of maps, landscapes and wayfaring (Ingold 2000; Ingold 2007; Ingold and Vergunst 2008; Ingold 1991). Moreover, we have expanded Johnson-Hanks’s two dimensions (institutional projects and personal aspirations) (Johnson-Hanks 2002) and explored aging processes in relation to chronological, social, biological, and phenomenological age.

We have found that the institutional aging process is based on different dimensions of age in the two sites: for children in schools it is based on chronological age, for elderly people it is based on progressive bodily deterioration and sickness, i.e. biological age. In fact, chronological age is almost absent in the institutional spaces of old age. In terms of biological or bodily age, there is also a remarkable difference in physical movement: children’s spaces are filled with movement, but through the institutional aging processes they are taught to move less or to move in specific ways, whereas spaces for the elderly are characterized by progressive stillness, only interrupted by meals and training sessions aimed at keeping them active. The children aspire to grow older and have a strong drive towards moving forward, while the opposite is the case for the elderly. The elderly persons in the earlier phases of this process who are confronted with the subsequent phases express strong fears of one day finding themselves in these physical spaces of old age and “the old” (Grøn 2016). What we want to suggest from this mapping of the institutional aging landscape is its
centrality to aging processes in settings like Denmark, where childhood and old age are highly institutionalized. While the picture drawn by this initial mapping of the institutional aging process might seem overly simplified, when we get to the actual wayfaring, intersections and clashes between different aging dimensions complicate this image.

The empirical examples of wayfaring through the aging landscape show, that the children’s diverse biological ages, as reflected in body size or movement, thoroughly complicate their placement within the institutional aging process, and that their chronological, social and biological ages are not in a one-to-one relationship with each other. This complicates the map of the institutional aging processes and demonstrates their ability to move along as they go, the wayfaring through the landscape of tweens, which requires practical wisdom and creative skill. In the wayfaring through institutional landscape of old age, being in a better or worse state than others indicates whether you are younger or older in the institutional aging process, though the map is complicated by social or relational aging dimensions. People develop strategies for how to fare well in these institutional spaces, but due to the multitude of possible ways of being impaired as well as the diverse possibilities of being in a better or worse state than others, social interaction is demanding and often frictional. Also, while chronological age in some cases does play a minor role in how people fare, we have also seen that phenomenological age, or how you think or feel about your age, is seen as a very important dimension in this institutional aging process.

The complexity at the core of the notion of age is pervasive, even though, at first sight, the institutional aging process maps specific aging trajectories. Thus, the indeterminacy of a social marker like age does not only show up through deconstructivist and cultural comparison approaches. We have taken a phenomenological approach and found both determination and indeterminacy to be central to aging processes in contemporary Denmark. Maybe this complexity is to be expected, if we consider that aging processes relate to big questions: what makes up a human being — body, mind, soul or community — and what is time and development over time? These questions have occupied the natural and social sciences, philosophy and religion for decades, and they still tend to evade our attempts at grasping them.

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NOTES

i. In Denmark municipal primary and lower secondary school or “Folkeskolen” covers the 0th to the 9th grade. The Danish “Folkeskole” is a central part of the Danish Welfare State, the school is funded through taxes and is thus free to attend. Approximately 81% of Danish children attend the Danish “Folkeskole” (https://www.uvm.dk/Service/Statistik/Statistik-om-folkeskolen-og-frie-skoler/Statistik-om-elever-i-folkeskolen-og-frie-skoler/Elevtal-i-folkeskolen-og-frie-skoler?allowCookies=on).

ii. Denmark along with other Nordic countries has developed and implemented, over a number of years, wide-ranging and encompassing social policies leading some researchers to label the Nordic countries “caring states” (Leira in Rostgaard 2015). Access to benefits is based on citizenship, not merit or contributions, and social services for both children and elderly people are based on the universal and public welfare model. The state and local authorities in combination subsidize care services over income and local taxes. (Rostgaard 2015).

iii. The publication “Bevægelser fra barn mod teenager i folkeskolens rum og regler – et antropologisk perspektiv” (Movements from child to teenager in the spaces and rules of school) was written by Else Ladekjær using her maiden name Olesen.

iv. The example with Britt’s position in school points to parents and parenting as an interesting phenomenon in relation to children, age dimensions and school. Are parents involved in creating the map, do they guide children’s wayfaring, or how does the parent play a role? Parenting as another dimension could be a highly interesting supplement to the analysis of children and institutional age. Unfortunately, the ethnographic material at hand does not cover this area. The relations between child and parent as well as child and teacher is significant in relation to institutional age in school. The teachers role is unfolded in Ladekjærs thesis from 2016.