Agents of Their Own Well-Being:
Older Women and Memory-Work

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Abstract

The paper adopts the qualitative feminist method of Memory-Work in order to explore our collective experience of ageing after retirement. Following Freire (1970) we argue for a humanizing pedagogy wherein we control our own learning. We specifically argue for the voice of older women as agents of their own well-being. Over several years we documented our learning journey using memory triggers (such as: Who am I, now that I am over 65?; Body maintenance; Fears; Being connected; Taking up a new challenge). What we found challenges the current script of ageing and social control that defines and limits who older women can be. For us, growing old is a privilege, full of richness. We reject the contemporary medical model of ageing in favor of a more nuanced model of both loss but also of personal growth in a changing landscape.

Introduction

The project reported here began almost by accident. During morning tea at a local café, one of the recently retired women complained about the difficulties of retirement, a feeling of loss ("Now I am just an old lady living alone with her cat") and expressed frustration at the attitudes towards older women, particularly from the medical establishment. "Well, you should write about it" suggested another member. Writing is a lonely affair, but others expressed an interest in exploring the experience of ageing together, as we searched for meaning in our lives in retirement. Memory-Work had the potential for a collective exploration of both the negatives and the positives (if there were any) of ageing. When it was first proposed that Memory-Work would be the methodology for this project, most people were uncertain about its suitability, but were willing to give it a go.

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What we got out of it was truly amazing. While some of us were used to writing in private journals and belonged to book clubs, this was the first time we wrote about our own experiences and thoughts and had a group discuss together what we had written. The process of writing for an audience became an experience in itself. As a group we embraced this writing and the sharing of our work as well as the interesting discussions that followed. We were delighted and surprised by our writing, about the universality that came out of our personal observation, and conversely how a universal concept can be intensely personal for each one of us. The initial group comprised six women and later, a second group was formed independently of the first. During the project, two dropped out for medical reasons. Ultimately, the two groups came together.

So this paper reports some of the findings of our study. True to the foundations of Memory-Work, we are our own subjects. We are a group of retired, mostly professional women, working together over three years in our project. We were motivated by an interest in the process of ageing but also by a concern for the apparent overwhelming medicalization of ageing which focused on decline and efforts to delay that decline. We were concerned about the implications for the management of our own ageing. Much of the popular and academic literature seemed overly negative, and did not recognize positive experiences after retirement. We turned to Memory-Work as a potential method to interrogate our own experiences, but also to challenge existing stereotypes of ageing. We specifically argue for the voice of older women as agents of their own well-being.

The Gerontology Perspective

Decline models of ageing remain dominant in professional practice but are also implicit in much of gerontology research and theory. The decline in physiological and cognitive functioning with ageing is well documented, as evidenced in articles throughout the recent 2015 *Handbook of Theories of Aging* and other landmark research publications. These include Craik and Salthouse, (2011), Schaie (2015), Coulson, Marino, & Strang, (2005), Huisman, Poppelaars, van der Horst, Beekman, Brug, Tilburg & Deeg, (2011). For example, Craik & Salthouse (2011) maintain that ageing is associated with decline in cognitive function. Schaie (2015) reviewed the evidence of decline. He found that longitudinal studies generally find less behavioral decrement than would be suggested by cross-sectional data. That is, individuals tend to maintain relatively constant capacity until a final rapid decline, which occurs at various ages (Huisman et al, 2011). There is a relatively small average decline in the 60s with an increasingly steep, average decrement for each successive decade (Schaie, 2015, p 59). Nonetheless, there is no expectation from these studies that at least for some cohorts there may actually be an increase in functioning. While noting that some groups of individuals show greater or lesser decline, there was no mention of cognitive or personal growth. Rowe & Kahn's

(1997) biomedically oriented "successful" ageing model stresses the avoidance of disease and disability, maintaining high mental and physical functioning, and remaining socially engaged. The emphasis is on medical interventions. Virtually all studies continue to focus on attrition and strategies to delay decline. This is true even in studies which show that cognitive capacity can be maintained, such as Coulson et al (2005) who demonstrated that older people were able to learn and retain cognitively challenging concepts. The conclusion for this finding was the hope that such learning together with a healthy life style could delay the onset of dementia. The emphasis is on delaying a declining future rather than the satisfaction that older people may derive from stimulation and new learning.

It is certainly understandable that the medical fraternity should be overwhelmingly concerned with dementia as the most common ailment in older age groups and a major cause of serious decline. Any research that provides clues to preventing or delaying the onset of dementia is very welcome. But this accounts for a fraction of the ageing experience. The majority of people at least in modern societies can expect a good twenty years or more during retirement, of moderately good health and cognitive capacity. Little is said of these people or of the possibility for personal growth.

While the gerontology literature was not reassuring, we turned our search towards concepts of lifelong learning and the potential there to provide a more positive take on ageing. The literature on lifelong learning provided evidence of the rich life histories and experience of older adults. We could connect with this literature as we have been involved in lifelong learning for most of our lives.

A Lifelong Learning Perspective
Implicit in the term lifelong learning is the assumption that the need to learn is universal and encompasses all ages and stages of human existence in the search for meaning. Within the gerontology literature, very few, such as Nimrod (2008) and Rajan & Rajan (2017) seriously explore the extent to which older people take up new, challenging activities. However, some of the lifelong learning literature does agree that ageing entails a great deal of new learning, engaging in new "careers" including the exploration of creative arts activities. The concept of "lifelong learning" appears to be far more appropriate in describing the ageing experience of at least some cohorts of older people (Findsen, 2005; Manheimer, 2008).

A look at the literature on lifelong learning however does not always reflect the presence of this basic human need in older adults. Withnall (2010) and Findsen & Formosa (2011) have both reviewed the history of lifelong learning and point out that it was initially a program to extend the notion of learning to older individuals who were still working. It was a way to keep the work force up to date in technological and information changes and mainly encompassed courses within

institutions or work places. Only in later decades when faced with a burgeoning retired population was lifelong learning extended and applied to older adults.

Manheimer (2008) reviews the rapid expansion of education programs for older learners. From a policy perspective, these programs are generally intended to maintain a sense of purpose among the ageing population, to support wellbeing and healthy activities in order to reduce levels of institutionalisation and ultimately reduce health costs. Learning in later life has now been co-opted by public policy discussions (Findsen & Formosa, 2011). From a government policy perspective these are instrumental motives with the explicit focus on achieving a specific outcome. Withnall criticizes the field of educational gerontology for addressing the needs of the providers of later life education rather than the learners themselves.

However, many programs are driven by grass roots organisations rather than government policy. Such programs tend to focus on expressive or intrinsic motives, learning for its own sake, deepening a sense of meaning. They may focus on gaining insight into one's past, developing appreciation for art or music or literature, finding a voice, seeking inner calm and insight.

Nonetheless, almost all adult learning programs maintain traditional pedagogical methods involving expert-led, performance orientated lectures. The expert provides and the learner passively receives. These programs are increasingly market driven, requiring payment for services provided (Sheridan, 2007). The older learner is allowed little autonomy, and even less capacity to share with others in the process of learning itself.

Both Findsen & Formosa (2011) and Withnall (2010) acknowledge that the voices of older people are curiously lacking in the research of late life learning and therefore in the planning of programs for the elderly. Withnall's (2010) research centered around the needs of the elderly themselves and used focus groups to tease out some of the salient features of late life learning. She tried to answer the question: What and how do older people learn? She used a reflexive methodology which reflected the subjects own views of education throughout the course. One finding was that the tastes and choices among older people are wide-ranging and varied. Moreover, the avenues to gaining knowledge have become even more varied since the pervasiveness of information technology in daily life. Significantly, the subjects themselves were involved as researchers in Withnall's study. She calls for more studies where older people are at the centre, such as that of Glanz & Neikrug (1997).

As an antidote to the anthologizing of older adults, Findsen presents the social construction model of old age wherein older adults may serve as social activists on their own behalf. Learning to deal with aspects of getting older should be the real goal of lifelong learning. Learning about this stage in all its aspects, physical, social, economic, cultural, philosophical and historical can be enriching and empowering and supports people in coping with aspects of getting older.

Learning for older people is not compulsory or institutionally based as their ways of learning may have changed from when they were young. Some studies show a propensity for informal learning or self-directed learning. Livingstone (2001) claims that in growing older one relies on the experience accumulated over a lifetime rather than knowledge gained within an educational institution. He claims that his understanding of the data shows an inverse relationship between course participation and preference for learning on one's own. Tough (1971) wrote on self-directed learning among adult learners, a method which is based on autonomy and learner control of what is being learned.

Education is a way for older people to keep active, maintain their interest in life in the face of the challenges of ageing and enable them to stay in contact with society obviating against isolation. But in much of the literature, including Withnall (2010), the function of learning in later life has been extended to "exercising the brain" in order to postpone decline. Hopefully such education will also delay the onset of dementia and other degenerative diseases (and substantially reduce the state's outlay for older declining adults). In the end Withnall (2010) is guilty of the same medicalization rationale for late life learning as state policy makers as well as many in the field of gerontology such as Boulton-Lewis (2010).

Using Memory-Work
We adopted a feminist qualitative methodology known as Memory-Work in which a key feature is that it is a collective process entirely controlled by the participants themselves. Our starting point was the Memory-Work method developed by the German feminist Haug (1987), and later explicated by Onyx and Small (2001). In this, we become the subjects of our own research. We were clear that Memory-Work is *not* about improving memory, or using memory as an accurate assessment of any particular event, as in assessing a witness. Rather memories are important not just because they represent traces of past events that were felt to be significant to the person but because they carry with them a wider set of emotional responses and interpretations of the larger social context. Thus, by examining a set of memories produced in response to the same trigger it is possible to interrogate the wider social and personal meanings of those memories.

While this feminist methodology provides a radical departure from conventional positivist research, it has proved an effective method for the analysis of phenomena from the perspective of the participants' own voice. It has been particularly useful in the analysis of emotion (Crawford, Kippax, Onyx, Gault, & Benton, 1992; Langdridge, Barker, Reavey & Stennet, 2012), leisure and tourism (Markula, 2005; Small, 1999) as well as feminist theory (Haug, 1987).

The method as we used it, followed three broad steps:

1. Each participant wrote a memory related to an agreed trigger statement (see Table 1 below for a list of triggers used). Over the three years, we used several

triggers, such as "older bodies require higher maintenance." In each case we prepared two memories, one "positive" and one "negative." This was done to avoid romanticizing our experiences, though even negative events tended to be viewed in a positive light, such as producing lessons learned. The memory was written in the third person to enable some personal distance from the event. We were to avoid biography and justification, and instead to simply describe the event or events, including the emotional reactions, in as much detail as possible.

2. We then shared our memories and arranged to meet as a group, in a quiet café or person's home, always over food! We collectively discussed the written memories, identifying common themes emerging from the set of memories as well as the unique issues of each. The group discussion then ranged to other similar experiences and what they meant to us women. We also examined notable gaps in the reported memories: what should have been noted but was not. The collective discussion was recorded and transcribed.

3. One or more of the participants then examined the emerging themes more formally, referring both to the individual memories as well as to the collective discussion. The emerging themes were related back to the existing literature. This critical process identified congruence but also discrepancies within the existing literature in order to further theorize the group findings. The more formal academic analysis was then returned to the original members for comment and revision.

One group of six retired women began to meet. First we formed a second independent group of five women dealing with the same triggers, to validate (if feasible) the emerging themes.

Our participants were self-selected within existing networks such that all participants knew at least one other participant and made a positive choice to participate. Consistent with the feminist intent of the method, there were no "leaders" although various members took a coordinating role at different points. This collective approach meant that all participants were actively involved in all stages of the project, and were self-regulated. Each participant adopted a pseudonym for purposes of identification while preserving anonymity. Table 1 provides a profile of participants, using their pseudonym.

Table 1 *Profile of memory group members**

Pseudonym	Age	Relationship status	Prior Occupation	Education	Years retired
Jo	76	Single (divorced)	Academic	PhD	3
Non* (in both groups)	76	married	Tertiary teacher	MEd	5
Caroline	75	married	Academic	MA	7
DuBois	70	married	Librarian	BA, Dip Lib.	20
Rita	69	married	International education consultant	PhD	5
Daisy	75	Single (divorced)	Community leader	Post high school Diploma	20
Jana	67	married	Social Welfare Worker	Assoc. Dip. Welfare	7
Jane	72	married	Teacher	BA, Dip Ed	16
Kate	73	married	Retail Management	High School	6
Donna	64	married	Teacher	BA, Dip Ed	2
Lucy	68	married	Art Teacher	BA, Dip Ed	7

* This information is approximate as most women had a discontinuous work history, with child rearing, family responsibilities, part-time and casual work

extending into retirement. The women in the memory groups were largely middle class, well educated, and economically comfortable.

Topics (Triggers) and Order of Discussion
Who am I now that I am over 65? February 2016
Old bodies require higher maintenance. March 2016
Being Connected. May 2016
Taking up a new challenge. May 2016
What we fear. January 2017
Becoming wise. February 2017
Careers and mission. November 2017
Loss. September 2018
Reflection on the Memory-Work project. (2018)

Over time we prepared two different conference papers for presentation at international academic conferences. Two of us presented a paper at a gerontology conference in New Zealand. The whole group attended a second international academic conference (Gender, Work & Organisation) held in Sydney in June 2018. We are now seeking ways of reaching a wider audience of professional women concerned with issues of retirement and ageing.

In presenting findings from our journey of discovery, we focus on some of the key themes that continually recurred, often in a cycle of deeper reflection. However, we stop short of including the many deeply personal disclosures that occurred in the process. The statements are drawn directly from the transcripts of the collective discussion of memories relevant to each trigger.

Results: The Journey
We began by asking the troubling question of identity: Who am I now that I am over 65?

Taking each memory at a time, each member identified her own response. Gradually recurring themes were identified. The positive memories commonly evoked a sense of joy and a sense of being privileged, frequently a surprise and a prayer of thanks for such privilege. Family was paramount in almost all memories and came across strongly in the discussion. Particularly important and gratifying were occasions of reunion, being the matriarch, bringing generations together, connecting the past with the present. We expressed pleasure in travel and in our own energy.

The negative memories referred to physical problems associated with ageing but also a sense of anger at being marginalized. We reflected that with the joy of family and new experiences, there was also loss. We also reflected that we are learning as we go and are finding out that the landscape/circumstances continues to

change as we grow older—something we certainly did not anticipate. This initial trigger was intended as general introduction to the topic and the method. We agreed to continue with a series of triggers to explore some recurring themes in greater depth.

Body Maintenance

A number of themes ran through our memories and follow-up discussions on the topic of body maintenance. Gradually, through the process of writing and discussing issues relating to health and physical limitations we came to understand our own learning: not just a realisation of the body letting us down, but new ways of dealing with these issues. We learned that while loss may occur and was indeed painful, by taking charge of the care of our bodies, we were able to develop new and positive ways of living.

Our memories expressed shock and disbelief at the initial appearance of these limitations as we came to terms with the reality of ageing. Fear of physical deterioration was noted in virtually every memory, and together with the fear of physical deterioration came the fear of loss of identity. We feared that everything was lost. Typical examples were those expressed by Caroline and Jana:

> "During her last year of working, Caroline had constantly recurring heartburn pains….It seems to be getting worse. And that means that it won't go away EVER. Is chronic discomfort something I have to face for the rest of my years? (Caroline)
> Jana sits anxiously in the sterile waiting room awaiting her summons to be inspected yet again by the young smooth skinned dermatologist. ….My skin no longer seems to fit me. How did this happen on the outside whilst I feel so unchanged on the inside? Will there be a frightening new discovery this time of something truly sinister?" (Jana)

We explored these reactions in our discussion, noting, "Absolutely your whole feeling about yourself changes. Your identity changes because of your body. People see you differently…feeling vulnerable…you're no longer that persona any more" (Discussion group 2). There was the beginning of awareness that our bodies are letting us down. We realized the importance of acknowledging the reality "you have got to be realistic or you end up falling off a ladder….Implicitly in a lot of what we are saying is that we are scared of accepting the limitations in our head" (Discussion group 1)

While on the one hand limitations are connected with the body and physical health, on the other hand we realized that there are limitations imposed by society whether justified or not. As we reflected ruefully, stereotypes of old age were starting to have an effect on how we were perceived, or expected to behave:

> "Stereotypes of old age…useless…unable to do anything…getting around with walking stick, looking miserable and thinking everyone is like that...last century granny sat by the fire, she wasn't very capable, probably demented, and very, very lonely" (Discussion group 1)

However, that was not the end of the matter, but rather the beginning, the trigger for action. This was a common experience in both groups, best exemplified by Lucy:

> Lucy was unable to walk unassisted. This was the first time Lucy had ever been injured so badly, however she was keenly aware that she wasn't exactly bouncing back and that she had to push herself and her treating doctors and other carers. At the end of November, it was recommended to Lucy that she was ready to try hydrotherapy. This sounded positive, until she discovered that the hydrotherapy pool at the local hospital was closed for renovations.…Lucy started to take herself off to the local beach at dawn each day to use the rockpool. Quite apart from the injury this was no small achievement, as Lucy was washed out of a rock pool as a child and considered herself to be a poor swimmer. (Lucy)

Our discussion reflected on this:

As the reality of the new situation set in, we began to think about what to do in order to ameliorate the situation or at least not to exacerbate it. The emphasis here was usually on taking personal responsibility to find a solution. We started to take measures—change eating habits, doing physical exercise, finding new activities. Nearly all of us had taken up regular gym work usually for the first time in our lives. The physical pleasure of well-being was augmented by a rich social life:

> Kate felt so lucky to be there at the gym, surrounded by beautiful glowing faces and camaraderie. Of course the coffee sessions afterwards, where they solved the problems of the world and some of their own, were an added bonus… (Kate)

Importantly, we were surprised by how taking measures to cope with limitations resulted in positive outcomes and personal sense of empowerment. Apprehension turned to pleasure at having learned new skills and having explored new experiences. We all took up completely new projects and activities that we never dreamed were possible before. Daisy went bungee-jumping, and became a qualified personal trainer. Jane and Jana both became serious artists, with exhibitions, and Jana also became an instructor in aerobic dancing. Rita completed a PhD. Non learned the art of jewellery making. Jo took up political activism for the first time.

Kate became a member of an elite philharmonic choir, performing at the Sydney Opera House. We each travelled, often to strange places. All of these new activities were more than a simple hobby, but rather involved a serious commitment of extended learning and action over several years, with the kind of ongoing commitment normally associated with a career. While our physical capacity continued to be an issue to be managed, we accepted the need for higher maintenance and in most cases became healthier and stronger than before. Importantly we gained in self-confidence and in our capacity to face the challenges of new learning. Life was even more rewarding.

> Rita summarized how we felt, "starting to be aware of our own physical frailty, wanting to do something about it, systematically trying out different things, some of which worked and some of which didn't, starting somewhat reluctantly and then being surprised at the pleasure it gives…very much us in control of the process"

Fear
Some months later, we turned to another trigger: What we fear. This trigger was designed to help us face the negative side of ageing. Indeed it did, but in some surprising ways. Our greatest fear was not of death: "There is nothing more to be said, we are going to die, but now let's get on with living." What we feared most was contracting dementia. We explored that in some depth, trying to understand the difference between short term memory loss, a common experience for all of us, and the deeper loss of memory associated with dementia. Gradually we came to understand that underlying our fear of dementia was a growing dependence on our loved ones, and the loss of status which that entailed.

> When I think of my grandchildren, it is just appalling to think that they would look upon me with pity…that's what we are all saying…it's your ego. You want to be part of everybody's lives, productive, useful. That's what we are saying we are afraid to lose. (Discussion of fear)

Ultimately, we feared the loss of our identity, losing our consciousness of being. Apart from dementia, we all feared the loss of mobility, either through failing eyesight or arthritis, or other forms of physical disability. Yet again the big issue was how to maintain control of our lives.

As we continued to discuss these issues, we noticed that in writing about our fears, while we certainly acknowledged them as serious, we were also inclined to make a joke of them, and indeed the shared discussion was full of hilarity. Was this a form of denial or of courage?

> In every case we twisted it into something positive which was quite amazing…some of these things have happened to us, you then move into the next stage of "OK what am I going to do about it"….and we start to be practical and work out ways of managing it….(Discussion of fear)

Our overriding conclusion was: how lucky we are to have these extra years of good living. To be obsessed with fears is to miss the joys right in front of us. Life is a privilege.

Being Connected
The literature emphasizes social circles as an important factor in healthy and successful ageing (Haslam, Tegan, Cruwys, & Haslam, 2014).

We explored the importance of being connected not only for personal support, but also as a major enhancement of our life experience. However, connections can be complex, as we realized in discussion.

> Solitude is wonderful but loneliness is tough….60% of older women end up living alone. So what does this mean for connectedness? We need to look at the different kinds of connections, beginning with the opportunity to make casual contact. While it is not "deep and meaningful," it is still important just to be able to talk to someone.…The next step, is connection between friends of different sorts. They can be friends you haven't known for long but nonetheless they are real or you can have friends that you have known for 20, 30 years and they are particularly special. Such friends become increasingly important as we age. (Discussion of connectedness)

But family is the deepest, longest most profound set of connections, whether among siblings, parents, partners, children or grandchildren. We realized that family is significant, really powerful but also problematic. For us, family represented both the best and the worst of connections, perhaps because so much hangs on these relationships. As older women, there is the pleasure of being able to connect with the generations, something that provides such great meaning in our lives that we want to maintain it. But we also reflected that some older women feel they were no longer needed, their job was done. Are we still relevant? We reflected on our efforts to remain relevant within the family and ways of maintaining connections even at a distance. Warm hugs remain important.

Many of us still live with our husband/partner, and it may be hard to adjust when you are both retired. We noted a paradox:

> Just because you have a husband does not mean you are not lonely…Sometimes having these casual on the spot, easy non-intimate connections can be quite meaningful…and at the same time the deepest, strongest relationships i.e., with a partner may not be particularly close, not a source of deep and meaningful connections any more though still important. (Discussion of connectedness)

We concluded that there are many different ways to connect. As we get older, we don't have the same variety of people as at work, so now we need to find other ways. "I'm alone and I need more connections…I'm not going to feel sorry for myself; I'm going to reach out and take the initiative" (Discussion of connectedness). But we also need to nourish ourselves, to give ourselves breathing space to adapt and plan alternative connections.

What happens when your circumstances suddenly change and you find yourself alone? This is the time to reflect on who you are, who you want to be…

> …for me this is more important as I age because I am extremely aware that my time is finite, and you want to pack in while you still have health and energy, you want to pack in as much as you can in the time left….and part of that is the pleasure of the experience, but part of it is the question: Can I look in the mirror and be pleased with who I've become…..right now….but not just now, looking at my whole life….what does my whole life mean. Have I done nice things for the world, have I become a better person? Are there things that I regret that I still have time to fix? Unfinished business…I think all of that requires reflection. And it is often quite painful. (Discussion of connectedness)

It is about being content with what we have achieved. And then considering what we may yet achieve.

Perhaps most important was the connectedness that this Memory-Work group provided as a means of collectively reflecting on who we are as we deal with getting older.

Taking Up a New Challenge
When we examined memories about taking on new challenges, we saw that there were certain common themes. A new challenge was regarded as something we had never tried before, something that took courage and required thinking creatively and involved perseverance on the part of the person taking on the challenge. We agreed that such challenges would result in personal growth, which has more to do with personhood than with ageing.

For all the participants, new challenges followed a path which diverged significantly from that of earlier careers and proceeded in totally new directions. In her retirement Jo moved into political activism when a political party contacted her seeking volunteers for the coming election. Jane revitalized a community garden project and step by step developed it into a group of dedicated volunteers. Rita finished her PhD. When she finished working full time she took on a few overseas consultancies with UNESCO and was an international observer in elections in Myanmar and East Timor.

However, most of the group chose to highlight memories of activities which were solely within the domain of personal growth. Some of these activities required learning a new technical vocabulary and developing new skills. Non in her jewelry making class learned to file, to dome, to hammer and to polish. She learned to make jump rings and make delicate bezels for garnets. Donna took up photography and attempted "to master depth of field, f-stops, aperture settings, exposure, shutter speed, lenses."

Jana volunteered to be a replacement for an aerobics teacher and worked day and night to master the difficult task of physical training but even more challenging, the mental flexibility required to demonstrate and teach a dance step simultaneously, as well as anticipate the next steps.

For most of the tasks, development and learning was accomplished by seeking out the right group or environment in which to participate and/or the right teacher or leader:

> I've developed my interest in art, a self-starter, with a group of friends, we've done a few courses together we paint together…we've developed this bond…done workshops with other artists…which helped us find our direction, how to paint, what to paint. We get a lot out of each other…three of us, interaction with other artists in courses…it was useful to be together and evaluate work and discuss what we get out of classes…then we would move away from classes and do our own thing. (Discussion challenges)

Daisy became a personal trainer and has been able to work with people ever since, attempting to change their attitudes towards exercise and fitness. She tried one bungee jump, then a second and a third. Daisy prepared for each jump with great zeal and trepidation. As with the others Daisy demonstrated courage and perseverance and a continued focus over many years in developing her new role as an extreme sports woman.

The arts were a dominant theme for many and a popular basis for new learning for Jane (sculpture), Caroline (reading literature and poetry), Jo (writing poetry),

Jana (calligraphy) and Kate (singing). The need to create or enjoy the arts was embraced with enthusiasm.

Jane continued her commitment to art and sculpture throughout her later life before and after retirement. She continues to run workshops and to hold exhibitions of her own and others' work and is involved in an official capacity with a major metropolitan gallery.

All of the challenges we discussed, whether academic or not, strongly emphasized the importance of taking ourselves and our challenges seriously, with courage and commitment. We were acutely conscious that our approach stood in sharp contrast to the way society often expresses its disdain for older people. Ageism and stereotypes about older women were evident in our reports of dealing with professionals to which we responded with considerable indignation, but then concluded:

> Well does it matter what people think? Just keep going at it…I think when you're young you're very aware of people's opinions. When you're older people's opinions don't worry you so much. …If you look at our lifespan, we spent so much time being a mother being a sister, being a grandmother and that took up so much time, being a wife, being a worker 50 years or longer, but now you've only got 20 years left and compared to 50 years living, you feel…it's confronting…and I'm not going to waste it staying in cotton wool. An awareness of running out of time, so you want to do what you can while you can. Almost a sense of urgency….If I don't do this now, I'm going to feel like I'm dead….there has to be that inner sense. (Discussion challenges)

In a later group discussion we explored the notion of career. What we have done after retiring is much more than a hobby. If it is leisure then it is serious leisure. Rarely is it paid, but it is a career nonetheless. Careers are not about money. In fact for some of us, it was a huge relief to end our professional career and enter retirement. What we are doing is more than just for leisure because it entails serious learning, skill development, perseverance, personal growth over time, and it is meaningful for ourselves and others. So it is like a career, but entirely self-generated, unpaid, self-managed. We may well develop a public profile with an artistic exhibition, and become recognized within a specific professional circle, but nonetheless we are not employed…and therefore not counted? This discovery of talents and passions, and the learning of new skills, give our lives meaning, purpose and relevance as we age.

o interest, o exploreaspects of our own ageing. However, the project turned out to be more profound and complex than expected. Memory-Work is designed to use personal memories as a tool to interrogate wider social trends and injustices, potentially as a precursor to political activism. It is not intended as personal therapy. It was nonetheless therapeutic as we delved progressively deeper into those recurring issues that pained us the most. The distinction is irrelevant. The personal is political. The universal is personal. Most of all we learned a great deal, about ourselves, our fears, and our strengths. We shared strategies for coping, for managing health issues and the daily trials of social living as older women.

We realise now that we have in fact completed a collective, but also very personal journey. Our journey may be represented graphically in figure one, below. By sharing our stories we, individually and collectively, contemplated the meaning of our lives as a whole, what we had achieved, what unfinished business remained, what purpose we will accept. Perhaps above all, we came to a deeper appreciation that life is a privilege, and that we appreciate its richness even more as we near the end.

Most profound was the acknowledgment of loss, deep and painful loss in our lives which nonetheless created the space for new opportunities.

> One hypothesis is that loss is crucial in getting wisdom, in terms of the positive side of loss. The more one goes down, the more the other goes up. The more we lose the more wisdom we gain, the more we learn. So that without loss we probably do not grow much. (Discussion of loss)

When we discussed loss, we explored some profound and traumatic experiences in our past, ones which shook our sense of self-worth. The healing, if it can be called that, is not about overcoming the loss. The loss and the pain are always there, but it's about turning it into positive action. Publicly.

> If you want to move on you have to acknowledge your feelings. That's the first step….Yes to be more public about it and to show that its part of your life. Part of who you are. It's not a shameful thing. No more sweeping under the carpet. (Discussion of loss)

Sometimes, often, these new opportunities lead to new skills, new careers and sometimes to overt social and political action. We found new purpose, new relevance to our lives. We challenged the standard notion of bungee jumping as extreme sport only for the young. We formed support groups and lobbied the government for change. We created new art forms and mounted exhibitions. We worked for political parties to bring about change. We created community gardens and ran dance classes in the community.

Much of our learning could be described as a form of resistance to the prescribed script of ageing and the forms of social control that defined and limited who we could be. We rejected the current medical model of aged care, in favor of a more nuanced model of both gains and losses, in which personal growth can be greater than ever before, in which life is a privilege and full of richness, even in old age.

As older women we came to position ourselves both against the prescribed script of ageing, but also against the stereotypes of women, and especially of older women. The literature clearly identifies the *double whammy* for older women (Arber & Ginn, 1995) as age and gender intersect particularly in relation to employment and income. While older workers in general face discrimination, older women face significantly more. In terms of feminist socialist theory this kind of oppression may be subsumed within a broader class-based form of oppression. Such a position is less convincing in our case, as the memory group women were largely middle class, well educated, and economically comfortable. However, as Fraser (2009) argues, domination can occur within the economic, cultural or political dimensions. While each of these dimensions can independently create injustice, each also impacts the others. We must fight domination from wherever it stems. In particular our memory group identified deep seated cultural expressions of hostility and discrimination against older women in terms of both their age and their gender. This was most obviously visible in the medicalization of ageing. However, our purpose was to move beyond injustice and anger, towards a means of personal empowerment and emancipation, both for ourselves and for other women.

> In a sense we were breaking new ground and showing the way. Were these old ladies, in decline? By developing a whole new way of thinking, about ourselves, but everybody else as well…telling others "WOW." (Final group reflection)

It was interesting that our major preoccupation towards the end of the project was how we can use our own insights to help other women. We have developed a model of ageing that is powerful and empowering for other women. As we noted in a recent discussion:

> We're looking at ourselves but we also have to think what contribution we are making to research on ageing? The contribution could be a model for other groups. Anyone could form these groups given our model: We get together, we do this, we do that. Like book groups where we talk about books. Here we talk about growing older. Memory-Work must be the centre. It is the methodology but it is also what triggers our discussion. It has two different functions here. It is a research

methodology, but it is also something that we can use to understand what is going on, to feel better, a means for which we establish the context. A kind of group therapy? No. Not at all. It is therapeutic rather than therapy. (Final group reflection)

But to be a model for other women, we also went beyond conventional models of pedagogy. Paulo Freire's *Pedagogy of the Oppressed* argues for a humanizing pedagogy that explicitly seeks to alter the status quo between teacher and student, between oppressed and oppressor. Freire rejects what he describes as the "banking concept" of education, in which the educator's role is to regulate the way the world "enters into" the students (Freire 1970). Instead, he argues for learning-as-praxis—a combination of serious reflection and action between equals. For Freire, the true measure of this recognition is a horizontal dialogue guided by love, humility, faith and mutual trust, which results in an ever-closer partnership between dialoguers in the naming of the world (Freire 1970). There is enormous potency in the idea of who gets to reflect, and how, that goes to the heart of resistance.

Some Limitations
Memory-Work is also a research tool, but for research based on the qualitative exploration of a small group of women of a particular demographic. Obviously, the findings cannot be generalized. At one level they are appropriate only to the women of that demographic, in that social, geographic context. In this case our group consisted of women who were reasonably well educated and financially comfortable (but not wealthy). However, at another level, the findings are universal and speak to the experience of human living and ageing in today's society, at least for women. We believe from our personal experiences that what we found would also apply to a great many other women of different circumstances and cultural backgrounds. Further research may confirm this.

But that is not the point. The universality of Memory-Work, in this context, is its potential for use as a model of learning, learning as praxis, and learning controlled by ourselves, for ourselves. It offers a powerful tool for older women to speak in their own voice. We want young people to see the beauty of old age. We are old, and that is OK!

It is important to clarify that ageing extends from retirement to death. We acknowledge the "terminal drop," the usually fairly rapid decline leading to death. But for most of us there are a good 20 years or more of living before that occurs. We are concerned here with the "third age," not the fourth.
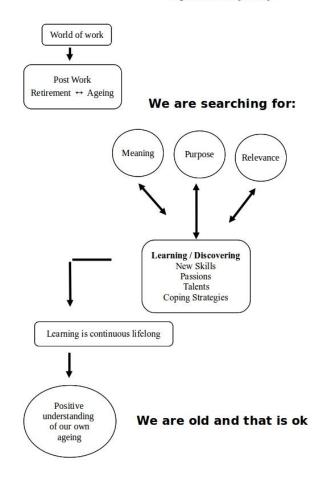
It is also true that we do not deal with the economics of ageing and of the growing cost to society of services for the old. The high cost is often taken as a rational for the growing health industry focus on dementia. However, there are two responses to that concern. One is that dying is presumably a cost at any age, more

so for the young, and should not be blamed on the old. Second, if we are correct in our findings, then applying those findings more broadly should actually decrease health costs and perhaps expand the social and financial benefits of ageing. That remains to be seen. Here our concern is not with economics but with value of life.

Conclusions
The circumstances of ageing continue to change as we age and so our learning must necessarily also continue and adapt. We acknowledge loss in its many forms. Our greatest fear is of contracting dementia and loss of mobility. We fear the loss of our independence, becoming a burden on our loved ones. We fear loss of our identity, of becoming irrelevant. We resist the negative stereotypes of ageing and in particular the medicalization of ageing in professional and broader social narratives. Nevertheless, we also learned that loss is just the beginning of new challenges, new learning, new connections, great achievements and personal satisfaction. We are enriched by that process.

Most importantly, our Memory-Work project was not simply about us as individuals. We came to understand that the personal is also the political. The universal is also intensely personal. We came to a deeper appreciation that life IS a privilege. That we must all resist the prescribed script of ageing and the social control that defines and limits who we can be. We wish to share these insights with other women of all backgrounds. Together we can create new positive pathways to ageing.

Figure one: the journey

World of work

Post Work
Retirement ↔ Ageing

We are searching for:

Meaning

Purpose

Relevance

Learning / Discovering
New Skills
Passions
Talents
Coping Strategies

Learning is continuous lifelong

Positive
understanding
of our own
ageing

We are old and that is ok

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