

# BUSY BODIES: Activity, Aging, and the Management of Everyday Life

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**ABSTRACT:** *With the rapid aging of Western populations, professional practices, gerontological research, and popular opinion have jointly focused on the connection between activity and well-being in old age. However, as experts in gerontology, recreation, and leisure promote regimes of care and lifestyle based on activity, scant critical attention has been paid to activity as part of a larger disciplinary discourse in the management of everyday life. This article examines the theoretical and practical aspects of activity in the gerontological field, and considers how activity has also become a keyword in radical and popular vocabularies for narratives of the self. Conclusions consider aging and the ideal of activity in the wider political context of a neoliberal “active society.”*

## INTRODUCTION

The association of activity with well-being in old age seems so obvious and indisputable that questioning it within gerontological circles would be considered unprofessional, if not heretical. The notion of activity, a recurring motif in popular treatises on longevity since the Enlightenment, today serves as an antidote to pessimistic stereotypes of decline and dependency. Indeed, Francis Bacon's nostrum that older individuals should “live a retired kind of life” but that “their minds and thoughts should not be addicted to idleness” (1977:180), would not be out of place as a credo of modern gerontology and associated healthcare professions that promote activity as a positive ideal.<sup>1</sup> Therefore, activity in old age appears to be a universal

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“good,” and to prove it, a host of gerontological studies convincingly demonstrates the benefits of physical and social activities to those who must cope with illness, loneliness, disability, and trauma. Of the many examples in the literature, Patterson and Carpenter (1994) showed how greater participation by widows and widowers in leisure activities helped maintain higher morale, and Misra, Alexy, and Panigrahi (1996) examined the positive relationship between physical exercise, self-esteem, and self-rated perceptions of health among a group of older women, the majority of whom lived alone.

However, activity is also a relatively recent conceptual and ethical keyword that has helped to shape gerontology and our understanding of later life. For these reasons, reflecting upon activity's unique intellectual status and practical importance within the field is a worthwhile exercise, apart from elaborating the gerontological nexus connecting activity, health, and successful aging. More specifically, in this article I wish to explore some of the critical intersections between activity and regimes of care and lifestyle with a focus on the management of everyday life in old age. In so doing, I seek to raise three questions: (1) what does the concept of activity reveal about the theoretical and empirical means by which gerontological knowledge and gerontological subjects are brought together; (2) how have researchers and professionals formulated activity as an instrument to administer, calculate, and codify everyday conduct in institutional and recreational environments; and (3) what role might activity also play as a resource for those who contest the normalization of old age through activity regimes. Conclusions ponder the wider contexts of activity where the declining welfare state has encouraged neoliberal policies and market-driven programs to “empower” older individuals to be active to avoid the stigma and risks of dependency.<sup>2</sup>

But what is activity? Despite the pervasiveness of the term in gerontological research, there is no universal definition or standard science of activity. There are certainly different forms of activity referred to by gerontologists; in particular, activity as physical movement, activity as the pursuit of everyday interests, and activity as social participation. Although these forms are studied and promoted both separately and jointly, it is apparent that the idea of activity courses through a gerontological web of theories, programs, and schools of thought whose influence and status are based less on *what* activity means than on *where* it is utilized (which is everywhere). Thus, mapping the circuitry of activity within a field of practices—as a gerontological theory, an empirical and professional instrument, a critical vocabulary for narratives of the self, a new cultural ideal, and a political rationality, among other things—might better account for its widespread appeal in discourses on aging than simply tracing the progress of formal activity models within gerontology. Nevertheless, such models provide a point of departure from which to consider how the idea of activity first entered gerontological thinking and practice.

### **ACTIVITY AS A GERONTOLOGICAL THEORY AND THE PROBLEMATIZATION OF ADJUSTMENT**

In the postwar period, American gerontologists adapted social science perspectives to the study of aging to expand it beyond medical and social welfare models. Two

important formations in this undertaking were the Gerontological Society in 1945 and *The Journal of Gerontology* in 1946. The American Social Science Research Council had earlier established the Committee on Social Adjustment in Old Age in 1944. Under its auspices, Otto Pollak published the influential *Social Adjustment in Old Age* (1948). A second text, *Personal Adjustment in Old Age*, by University of Chicago researcher Ruth S. Cavan and her colleagues followed in 1949. It was an equally significant indicator of the new convergence on *adjustment*. Why adjustment? Not, it seems, because it was developed as a rigorously theoretical concept. The definition provided by Cavan et al. that “personal adjustment finds its context in social adjustment” and that “social adjustment” facilitates “personal adjustment” (1949:11) hardly seemed to break new intellectual ground. Rather, adjustment was a complex problem that encouraged researchers to explain new social issues of aging and retirement according to the dominant paradigms of the time such as functionalism, individualism, and role theory. For example, research on adjustment consolidated data on individual adaptation, attitude, satisfaction, morale, and happiness into quantifiable indicators of the problems of aging.

To revisit adjustment as a focal point for a wide array of professional ideas and social contexts, it would be useful to consider it as a *problematization* in the sense of the term used by Michel Foucault. For Foucault, a problematization involves a set of practices that transforms a realm of human existence into a crisis of thought. Foucault stated,

For a domain of action, a behavior, to enter the field of thought, it is necessary for a certain number of factors to have made it uncertain, to have made it lose its familiarity, or to have provoked a certain number of difficulties around it. These elements result from social, economic, or political processes. But here their only role is that of instigation. They can exist and perform their action for a very long time, before there is effective problemization by thought. And when thought intervenes, it doesn't assume a unique form that is the direct result of the necessary expression of these difficulties; it is an original or specific response—often taking many forms. (1984:388–389)

Hence, problematizing practices discipline everyday life by transforming ordinary and sometimes arbitrary aspects of human existence—such as adjustment to retirement—into universal dilemmas that call for administrative and professional interventions buoyed by a politics of “thought.” Indeed, Foucault summarized his life’s work as a series of studies about how normalizing practices problematized madness and illness (*Madness and Civilization, The Birth of the Clinic*), how punitive practices problematized crime (*Discipline and Punish*), and how practices of the self problematized sexuality (*History of Sexuality* series) (1985:10–12). In his work on ancient aesthetics and “the arts of existence,” Foucault asked: “How, why, and in what forms was sexuality constituted as a moral domain? Why this ethical concern that was so persistent despite its varying forms and intensity? Why this ‘problematization?’” (1985:10). Following Foucault, we might also ask how, why, and in what forms was active adjustment to old age constituted as an ethical domain, and why has this ethical form become so persistent despite its varying forms and intensity? Ad-

addressing this question leads to our tracking the persistency of activity and adjustment in relation to the social problems to which they appeared as fitting conceptual, ethical, and practical solutions as well as in the professional discourses that framed them as such.

Foucault also argued that the power/knowledge arrangements that arise out of a particular problematization often endure beyond its initial crisis to supplement other political movements. In a related way, the academic focus on individual adjustment eventually lost its prominence as social gerontologists proceeded to cultivate sociological notions of social role, social status, subculture, senior citizen, stereotype, generation, class, ethnicity, and gender. As an intervention by "thought" into the dilemmas of the new labor, welfare, and retirement cultures of the postwar period, however, adjustment, with its cluster of theoretical, practical, ethical, and professional issues, became a benchmark problematization that gave rise to the ideal of activity within aging studies. This emerged most clearly in the University of Chicago's Committee on Human Development's influential project in Kansas City in the 1950s, the *Kansas City Study of Adult Life*, that in turn, led to some of gerontology's first social science theories. The two most consequential were *disengagement* (Cumming and Henry 1961) and *activity* theories, the celebrated debates with which gerontologists are all too familiar and that do not warrant repeating here, except to note the following developments of activity theory.<sup>3</sup>

Activity theory predates disengagement theory. In the 1950s, gerontologists emphasized the importance of activity to the process of healthy adjustment in old age. Havighurst and Albrecht (1953) insisted that old age can be a lively and creative experience, and that idleness, not aging, hastens illness and decline. They also targeted for support those services and programs that stressed active participation and integration. During the 1960s and 1970s, however, critics of disengagement theory consolidated prevailing ideas about activity into a *theory* of activity that jelled with popular and philosophical writing in championing retirement life as busy, creative, healthy, and mobile. For these reasons, the activity position emerged as the winning formula to the problem of adjustment, while disengagement theory was drummed out of the gerontological field and condemned for advocating that disengagement from lifelong activities could have certain advantages. Those who have courageously revisited disengagement or related theories, particularly in connection with research on very old age or death and dying, have proceeded defensively even as they critique the original theory's functionalist limitations (Johnson and Barer 1992; Kalish 1972; Marshall 1980; Tornstam 1989).

Criticisms made of the activity position and affiliated frameworks are also well-known within gerontology. During the 1980s, political economists such as Carroll L. Estes (1983) and Meredith Minkler (1984) castigated activity theorists for their narrow focus on individual adaptation and satisfaction to the neglect of larger structural issues and differences in old age based on class, race, and gender. The critical legitimacy of activity theorists that derived from their censure of passive or disengagement models of old age did not extend to a concern with social inequality in areas such as housing, healthcare, and social security. Cultural critics have also pointed to the kinship between positive activity models of aging in gerontology and consumerist ideologies. For example, David Ekerdt saw the construction of an active

“busy ethic” in retirement to be a form of moral regulation akin to the work ethic: “It is not the actual pace of activity but the preoccupation with activity and the affirmation of its desirability that matters” (1986:243). Likewise, what Harry Moody called the “frenzy of activity” in old age can actually mask, rather than diminish, the emptiness of meaning (1988:238). Martha Holstein (1999) has gone farther to illustrate the sexist implications of gerontological models of “productivity.”

Despite the criticisms, however, the enduring legacy of activity theory is that it provided a conceptual space for the ideal of activity to emerge and circulate expansively within aging studies and among those professions where new roles in recreational counseling, health promotion, and rehabilitation therapy were being created. In other words, activity survives activity theory as a core discourse within gerontological studies for two practical reasons. First, as intellectual capital, activity continues to extend the disciplinary flow between gerontology and old age by coordinating sociological theories, research subjects, academic expertise, and ethical concerns. Second, as professional capital, activity continues to frame the relationships between the experts and the elderly because of what it connotes: positive healthy independent lives. In short, activity expands the social terrain upon which gerontologists and related professionals who work with the elderly can intervene while addressing the problematization of adjustment from multiple vantage points. This article now turns to this terrain by examining activity’s practical utility within institutional and leisure environments.

### ACTIVITY AS AN EMPIRICAL AND PROFESSIONAL INSTRUMENT

Ignatius Nascher, the American physician who coined the term “geriatrics,” stated in his formative text *Geriatrics: The Diseases of Old Age and Their Treatment* that although “mental stimulation is the most important measure in the hygiene of the aged” (1919:488), “a walk through an unfamiliar forest path will not alone give physical exercise but will stimulate the brain and cause continual mental exhilaration. Nothing, however, equals a few hours of fishing when fishing is good” (p. 492). Nascher’s commonsensical advice seemed to advocate contemplative as well as physical forms of stimulation. Likewise, G. Stanley Hall, another pioneer in aging studies, reported on his visits to old age homes in his seminal study *Senescence: The Last Half of Life* (1922). In response to his question, “To what do you ascribe your long life?” residents listed a number reasons: heredity, physical activity earlier in life, good habits, and absence of overwork (pp. 324–325); “one determined early in life to make the mind rule the body” (p. 325). There was no talk in Hall’s research, however, of activity schedules or lifestyle standards. In fact, Hall said that his subjects “all praise early retiring and insist that a generous portion of the twenty-four hours must be spent in bed, even if they do not sleep” (p. 327). Again, meanings associated with contemplation and rest are given some priority over meanings associated with continual activity.

As the problematization of adjustment and the ideal of activity emerged in the postwar period, leisure in old age became less associated with contemplative pursuits. This shift was reflected in the work of activity researchers who devised empiri-

cal methodologies to measure the aging process in terms of ranked and static categories of behavior and conduct, often infused with culturally laden values around individualism, family, and senior citizenry. For instance, in *Personal Adjustment in Old Age*, Cavan et al. (1949) created an "adult activity inventory" that classified activities into five groups: leisure (including organizations), religious activities, intimate contacts (friends and family), and health and security (pp. 137–142). The activity inventory, together with the attitudes inventory, are supposed to provide the researcher with a methodology to gauge *how* older individuals are adjusting to old age. Again, the fact that terms such as adjustment and activity are vague and imprecise takes nothing away from their authority or gerontology's claim to objectivity. The main point, as Cavan et al. stated, is that

... one general criterion of adjustment is the extent and degree of the person's participation in a wide range of activities such as work, recreation, having friends and visiting with them, family association, membership and status in organizations, and church membership and religious behavior. (1949:103)

We see here an early rhetorical pattern bound for elaboration and duplication in activity studies. Elements of everyday existence are converted into activities; these activities are classified as scientifically observable facts; these facts in turn become the bases upon which other calculations, correlations, and predictions are constituted.

An influential study by Neugarten, Havighurst, and Tobin (1961) attempted to measure life satisfaction by rating and scoring types of activities. In one category, "Zest versus Apathy," the high scorer is one who

... speaks of several activities and relationships with enthusiasm. Feels that "now" is the best time of life. Loves to do things, even sitting at home. Takes up new activities, makes new friends readily, seeks self-improvement. Shows zest in several areas of life. (P. 137)

In the middle is the person who "has a bland approach to life. Does not seem to get much pleasure out of the things he does. Seeks relaxation and a limited degree of involvement. May be quite detached (aloof) from many activities, things, or people" (Neugarten et al. 1961:137). At the bottom are those who live "on the basis of routine. Doesn't think anything is worth doing" (Neugarten et al. 1961:137). Thus, the aged subject becomes encased in a social matrix where moral, disciplinary conventions around activity, health, and independence appear to represent an idealized old age (see also Hepworth 1995).

More recent studies and applications of activity regimes further illustrate this form of subjectification. For example, Tinsley et al. (1985) featured a classification of leisure activities that took the simple and once impulsive act of picnicking and reassigned it to a "compensation" cluster of activities:

... the most salient characteristics of which were the high level of compensation and low level of security experienced by picnickers. This suggests that picnicking

satisfies the elderly person's need to experience something new, fresh, or unusual. The low score on security suggests that elderly persons do not perceive themselves as making a long-term commitment to the activity but as engaging in it to experience temporary escape from their daily routine. (P. 176)

Tinsley et al. (1985) also hoped that their approach to picnicking and other clusters of conventional activities would be "cost effective in that a leisure program can be developed that provides the broadest array of psychological benefits from a relatively small number of leisure activities" (p. 176). Hence, activities are not just classified but are rationalized as part of a "leisure program."

Key to the management of old age through activity is the reinvention of activity itself. But again, what exactly constitutes an activity in gerontology is more elusive. In *Activity and Aging: Staying Involved in Later Life*, Kelly (1993) opened his introduction with a straightforward definition: "In this book, *activity* refers nontechnically to what people do" (p. vii). Meanwhile, the chapters that follow correlated increasingly technical types of activities and typologies of leisure with taxonomies of cognitive functioning and life-satisfaction factors. For example, one study organized activities in bluntly economic discourse (Mannell 1993). In it there were "high-investment activities" that involved "commitment, obligation, some discipline, and even occasional sacrifice" (p. 127), "serious leisure" activities where "leisure may be no fun" (p. 130), and "flow" activities where skills and personal satisfaction matched the activity (p. 132). This study was performed with 92 retired adults who carried electronic pagers for one week and, upon receiving signals that were given at a random time within every two-hour block between 8 A.M. and 10 P.M. daily, stopped to complete a survey on their experiences (p. 135). Based on the 3,412 self-reports that were produced, the overall message Mannell (1993) gives is that virtuous commitment to high-investment activities wins over pleasurable less-committed pursuits. Also, so-called volunteer/home/family activities are considered both freely chosen and highly satisfactory with no reference to gender differences.

The *Activities of Daily Living* (ADL) is another standardized framework through which specific physical competencies necessary to maintain an independent life are measured. In turn, ADL indicators are linked with other indices, such as *quality of life* (Lawton, Moss, and Duhamel 1995). ADL studies are further used by researchers to articulate and operationalize a variety of local concepts and problems that determine successful aging. However, there is much more to ADL as the following broad explanation from *The Encyclopedia of Aging* illustrates:

ADL is central to any assessment of level of personal independent functioning. Information on ADL activity capacity has been used more extensively, and for a greater variety of purposes, than has information from any other type of assessment. It has been used to indicate individual social, mental, and physical functioning as well as for diagnosis; to determine service requirement and impact; to guide service inception and cessation; to estimate the level of qualification needed in a provider; to assess need for structural environmental support; to justify residential location; to provide a basis for personnel employment decisions; to determine service change and provide arguments for reimbursement; and to estimate categorical eligibility for specific services (e.g., attendant allow-

ances). Accurate assessment of ADL is probably one of the most valuable of measures. (Fillenbaum 1987:4)

The influence of empirical activity frameworks such as the ADL reaches beyond individual assessment to encompass housing, financial, and service provisions. Thus, activity is not simply something people do, but is a measurable behavior whose significance connects the worlds of elderly people to the largesse of expertise.

Where problems and limitations in the measurement of activity exist, these can become exacerbated when activity is used to schedule and organize life in institutional settings.<sup>4</sup> James R. Dowling, an activity specialist at the Alzheimer's Care Center in Gardiner, Maine, wrote in *Keeping Busy: A Handbook of Activities for Persons with Dementia* that although "a good activity program restores a sense of purpose, identity, and control," activity directors

... still find some participants who are sleeping, some are wandering, one or two are shouting, and one who is absorbed in disassembling her soiled diaper—but few who join in a carefully planned activity or show evidence of being enriched by it. (Dowling 1995:vii)

One way to deal with such problems is for "behavior management" to keep the individual constantly occupied: "In a prosthetic, dementia-appropriate environment, behavior management generally means keeping the individual occupied. This, in turn, means being busy enough without being too busy, without becoming overly tired" (Dowling 1995:4). According to Dowling (1995), group programs may last an hour, the rest between is often less than 15 minutes, and "quiet hour" itself rarely lasts sixty minutes. Although I appreciate that Dowling and others who work with persons with dementia certainly face special challenges, often with limited resources, their exhaustive approach to scheduling also reinforces the point that bodies, to be functional, must be busy bodies.

Activity work is also central to the success of care institutions. As Gubrium and Wallace (1990) pointed out, activity programs provide professionals and activity specialists with a way to measure their own resourcefulness and account for their productivity:

Fieldwork in several nursing homes and rehabilitation facilities also suggested that there could be an ideological aspect to ordinary theorising. Theories were used that coincided with particular interests. For example, in speaking to activity therapists in several nursing homes, they mentioned the 'pressure' they could be placed under if they did not show evidence of participation by patients and residents. According to the director of one department, they 'had' to see things in terms of patients being active or they would eventually lose their justification for being, not to mention their jobs. (Pp. 139–140)

I have used the representative examples above to argue that activity is utilized to manage everyday life in old age where professionals coordinate the following techniques: empirical classification tables of activities, applications of activity checklists, correlations of activities with other factors in successful human functioning, persistent



monitoring of bodily conduct, and unyielding time scheduling. However, management by activity can also inspire resistance to it through anti-activity activities.

### ANTI-ACTIVITY ACTIVITIES

In reality, the totality of life's activities in old age, as with any age, is immeasurable even in institutional contexts. Activities overflow the boundaries of scheduled environments and disrupt the stability of standardized calculations. For example, the activities checklist used in a study by Arbuckle et al. (1994) was chosen to predict cognitive functioning in the elderly. According to the researchers, for some activities such as "napping" there is little expectation of a relation with cognitive functioning, but napping is included in the checklist to "provide a reasonably comprehensive list of daily activities" (p. 559). On the one hand, napping falls out of the classification system because it does not correlate with anything in particular; on the other hand, there is no way of disregarding napping because it is such a prevalent part of people's lives. In related research, ambiguities also surface because the distinction between passive and active behaviors is often constructed according to the diversity of local circumstances and the interpretive criteria of the researchers. For instance, in their investigation of impaired elders and their caregivers, Lawton et al. classified television watching along with resting as a passive category, yet they also admitted that "some portion of television watching is unquestionably active and stimulating" (1995:163).<sup>5</sup>

Whereas the methodological difficulty with translating and codifying everyday behavior into activity lists presents one problem, the omission of particular activities from the lists presents another. Activity studies are often moored to traditional moral virtues; sex, drinking, and gambling, for example, are rarely registered. Indeed, what many activity checklists indicate as appropriate, normal, and healthy activities for older individuals are those which coincide with middle-class moral and family-oriented conventions. Most neglected are the activities of people who resist normalizing activity practices and inflexible scheduling. In this sense, senior centers, which provide activity programs full of tours, hobbies, and reports, can double as the sites where elderly clientele challenge the activity-driven management of their lives. A study of a London, UK day center found that members were not interested in fitness, language, health, or beauty classes "because members preferred to be engaged in activities where competition and testing out of achievements were not required" (Hazan 1986:317). An ethnographic treatment of the active "social worlds of the aged" invisible to social science research (Unruh 1983) and a penetrating study of aging political activists in Britain (Andrews 1991) also demonstrated that older people engage in a variety of socially productive activities not necessarily limited to the measurable individual activities promoted by gerontologists and professionals in research journals such as *Activities, Adaptation, and Aging* (launched by The Haworth Press in 1980), and mostly linked to minimizing the risks of dependency.

Equally significant and overlooked are the *conceptual* activities of elderly persons who construct their own analytical models of later life based not on gerontological

theories or activity schedules, but on the lived experiences routinized in their everyday environments (Gubrium and Wallace 1990). In particular, as Gubrium (1992), and Gubrium and Holstein (1993, 1997, 1998) have shown in a number of insightful studies, people theorize their lives by translating professional vocabularies into personal narratives. We all extract pieces and elements from standard psychological, medical, and sociological vocabularies and fit them into our daily discourse to explain ourselves to others and to address problems that seem to demand some kind of familiarity with professional knowledges. People discussing grief or chronic illness, for example, inevitably talk about "stages" of coping. Although such stages are originally a product of academic scholarship, they become embellished, emplotted, and molded to everyday contexts through social interaction and narrative discourse. Thus, people fracture and recombine the conceptual, practical, and ethical aspects of professional vocabularies in ways that shed new light on both the vocabulary and its embeddedness in everyday life. With these points in mind, in the next section I consider the relation between vocabularies of activity and narratives of active living.

### **NARRATIVES OF ACTIVE LIVING**

Narrative gerontologists seek to understand what Kenyon, Ruth, and Mader called "the inside of aging" (1999:54).<sup>6</sup> These authors show that narratives are more than just biographical stories: They are practices that connect the contents of stories and the circumstances of storytelling to the art of rendering lives coherent and meaningful. What happens to activity as a professional vocabulary when it enters the narrative practices of older people and the inside of aging? Further, if the problematization of adjustment and the theories, ideals, and practices of, and resistances to activity management were powerful elements in situating older people in the postwar social order, then how might stories of becoming active senior subjects in this order illustrate the incongruities of activity as the hallmark of responsible living? Inspired by these questions, I recently supervised a project involving interviews with retired individuals who live part of each year in a trailer-home resort on Lake Ontario near Toronto.<sup>7</sup> When questioned about their plans and ideas for retirement, the respondents frequently referred to activity and activities as key elements in their lives. Although they incorporated the professional vocabulary of activity into their stories of retired living, they also demonstrated a keen theoretical understanding of activity as a plural term riven with contradictory meanings. Specifically, as the following examples suggest, older people are sharply aware that the usefulness of activity as a concept is limited by its regulatory and instrumental connotations. And even though they freely participate in a wide range of new and continuing activities, they understand the potential for activities to be imposed and spliced into a larger ethical regime of self-disciplining in later life.

Agnes, age 62, worked as a teacher and librarian. Reflecting on her past, she says, "At first I thought I have to keep going—got to make a contribution—make sure your life is worthwhile. And now I still have to struggle with days when I feel

I'm not doing anything." However, she also believes that people are "conditioned" to feel this way, and that living in retirement communities can often bolster this conditioning: "If you live in these places [retirement communities] and don't participate you are pressured into taking part. People with the best intentions want you to participate." Speaking of her own community, Agnes says, "I don't feel compelled to be on any of the committees [at the trailer-home resort], but I could be on this committee in town, which these [resort] people don't know about and don't care about."

On the one hand, Agnes rightly understands how activity and participation are professional and cultural ideals that condition and pressure elders. On the other hand, she asserts that activities are things that one can choose to do against the grain of overly managed retirement living, as in the case of her joining the committee in town instead of the one at the resort. Agnes refers to this situation again when asked to comment on how lifestyles have changed.

I think, say twenty or thirty years ago someone sixty years [old], especially a woman dressed in browns, navies, blacks, and wearing oxfords, stayed in the background and kept her mouth shut, unless you were really weird, like a bird watcher or a mountain climber or something (laughter). [Seniors] still have an interest in life [and want] to be active. Seniors don't just sit in the background and observe, they participate and they are encouraged to participate. Now we see seniors in pastel jogging suits . . . the "white fluffies." The whole emphasis is not just for seniors, but for everyone to be active and participate. This sounds like a contradiction to what I said earlier, when I said I don't want to take part in activities. It isn't that I want to be nonactive, though, it is that I want to choose.

Although seniors want to be active, they are also encouraged to be so along with "everyone." The question for Agnes, therefore, is not whether to be active or inactive, but whether to be active in directed but personally delimiting ways, or in ways that open up her life to new possibilities.

Another discussion with a retired couple, Joe and Dorothy, revealed how activity was a vital element in their decision to move to Florida where more year-round outdoor activities are available. Joe's philosophy of life is also activity oriented:

Busy hands are happy hands. You have to generate your own energy . . . if you are doing something you enjoy, you seem to find the extra energy to do things. . . . If something happened like you had a stroke, you could find things. Like if I could play chess or read a book and that's all I could do, I would still be active.

Meanwhile, Dorothy recounts her perception of their retirement community in Florida:

We live in a community in Florida and some of the people there are what I call institutionalized. Now this is what I call the thing. They tell you we're going to have a pancake breakfast at eight o'clock on Wednesday; now all you little seniors have nothing to do. Everyone gather here at eight, see. . . . We live there,

we hardly do anything in there, we have a lot of lovely friends, and we enjoy their company at home. I went to school as a child; I don't want to go back to that as a senior. [Laughing] Now we're going to clap our hands and going to go like this.

That is what this lifestyle [referring to the more organized communities] communicates to me, because that's what they call them down there [Florida]. There are people who have been in that park for eight years that cannot believe that we know the mayor down in our town there, that we know people at the country club, that we know the poorest people on the street. They say, "How do you meet them?" You just get out of this little community here and you go. That is the awful part about this.

Joe interjects, "You see some of the parks down there [Florida], they have Recreational Directors and they have programs set up for every day of the week whether it be bingo, shuffle board, or dance." Dorothy adds,

You have no idea—exercise—it's just like you were back at school, as if you're such imbeciles you couldn't think of a thing to do yourself. When people say, "Oh, you should take line dancing," I say, "Oh, I'm not old enough." Inside this body, that may look like it's aging to you, is still a fourteen year old screaming to get out.

Joe and Dorothy are obviously critical of regulated activity programs that transform communities into school-like institutions (according to Dorothy). Yet, the couple also agree that being active in retirement is progressive. When asked about generational relations, Dorothy replied, "Sometimes I see the next generation being even more active than we are, and then I see some of them revert back to when granny was in the rocking chair." Joe and Dorothy understand themselves as part of a transitional generation in a changing demographic and increasingly aging society. The challenges they face in avoiding scheduled environments while experimenting with new activities require a dynamic conceptualization of their lives as active.

A final example is Harriet, who comments on the idea of an "active senior lifestyle":

You have to decide what a "senior citizen" is. Do you want to be told what to do, when you should go and play golf, when to join a group, or do you want to do things because you enjoy them? For example, in senior citizen retirement homes, your meals are planned for you and your company is planned for you. You see it right here too, that is, what we would call a senior citizen or active retired "lifestyle." I think some people need this retirement lifestyle, because they are insecure. They want to have their meals planned, they want to be told what to do. This is a good, comfortable way of life, but it's not for everybody.

Harriet also remarks that the idea of an active retired lifestyle is attractive because it provides a break from handling children, especially since she had small children around her up to the age of 65.

What we liked most was, number one, it was an active retired lifestyle. This means that I didn't need all the little kids around, but I like to sit out on the deck and hear them in the park. I like to walk down there and see them with their bikes and everything. I didn't want to be placed in a portion of the park where you never heard a young child again. I just didn't want them crawling around the trailer. So, for us, it was the best of two worlds.

Hence, an active retired lifestyle in this case has no one set of meanings, but includes ways of life that intersect along lines of being freed from certain activities such as caring for children, while possibly being tied to other activities such as having planned meals and social events.

When the retirees speak of activity, therefore, they narrate and qualify its meanings and images in personal terms even as they adapt it as a keyword in an authoritative vocabulary on lifestyle. Thus, their narrative practices also become theoretical practices as they translate their experiences of activity and social participation into critical reflections on contemporary social aging. In so doing, Agnes, Joe, Dorothy, and Harriet also touch on a larger political issue, which is the association between their negotiated identities as active senior citizens and their participation in an emergent "active society."

### **CONCLUSIONS: BUSY BODIES IN AN ACTIVE SOCIETY**

Most gerontological and policy discourses pose activity as the "positive" against which the "negative" forces of dependency, illness, and loneliness are arrayed. However, retired and older people understand that the expectations for them to be active present a more complex issue than that suggested by the typical positive/negative binarism inherent in activity programs and literature. Specifically, as neoliberal antiwelfarist agendas attempt to restructure dependency through the uncritical promotion of positive activity, they also problematize older bodies and lives as dependency prone and "at risk." It is not only the medical and cultural images of an active old age that have become predominant, but also the ways in which all dependent nonlaboring populations—unemployed, disabled, and retired—have become targets of state policies to "empower" and "activate" them. The older social tension between productivity and unproductivity is being replaced with a spectrum of values that spans activity and inactivity. To remain active, as a resource for mobility and choice in later life, is thus a struggle in a society where activity has become a panacea for the political woes of the declining welfare state and its management of so-called risky populations.

Mitchell Dean (1995) and William Walters (1997) have already discussed the impact of the "active society" on unemployment policies. With reference to Australia, Dean argues that income support for those at risk of long-term unemployment now requires "activity tests" and the monitoring of a person's attitudes, conduct, and social networks. Becoming "job-ready" is a project demanding self-discipline as well as bureaucratic supervision. Yet, the positive spin put on training, entrepreneurship, volunteer work, job clubs, and so forth, transforms an involuntary dependency into an imaginary opportunity for career empowerment and self-improve-

ment. Perhaps, in a related way, we are witnessing today a new mandate to encourage people to be "retirement ready" and "retirement fit" by allying their active subjective efforts at maintaining autonomy and health with the wider political assault on the risks of dependency.

Again, Foucault's notion of problematization is useful here, especially in his analysis of how the professional knowledges associated with disciplinary forms of power problematized the human body in the nineteenth century. In his text *Discipline and Punish*, Foucault critiqued the "control of activity" (1979:149–156) that focused on the deployment of scheduling in the pursuit of regulation, productivity, and efficiency. Although the older use of time-table

... was essentially negative, discipline, on the other hand, arranges a positive economy; it poses the principle of a theoretically ever-growing use of time: exhaustion rather than use; it is a question of extracting, from time, ever more available moments and, from each moment, ever more useful forces. (Foucault 1979:154)

Furthermore, the new "positive" investment of time in the body also constitutes a new kind of body, "the body of exercise" (Foucault 1979:155). Thus, exercise is not simply natural but a construction of the *natural in the body*.

Applied to the context of aging and old age, Foucault's critique neatly encapsulates much of what I have been arguing in this article. In particular, activity is part of a positive economy that shapes aged subjects within gerontological knowledge and research as knowable and empowerable, and inside care and custodial institutions as predictable and manageable. The production and celebration of an active body in old age is a disciplinary strategy of the greatest value. Indeed it is the construction of the body as active that allows it to become such a productive transfer point in the circulation of intellectual capital and professional power.<sup>8</sup> It is within this disciplinary constellation of knowledge, power, healthcare, and lifestyle industries and practices, where nonstop activity is meant to take the place of personal growth in later life, and where those "who prefer their inner worlds to the external world" (Kalish 1979:400) are considered problem persons, that many elderly persons find themselves today. Hence, their struggle, as the interviews with retired individuals above suggest, is not simply for better pension plans, housing, and care facilities, but also to reclaim their bodies, subjectivity, and everyday lives from their management by activity. Perhaps we can anticipate, therefore, that the strongest opposition to the political and marketing rationalities governing today's "active society" will come from older, rather than younger, cohorts of people because it is they who are experiencing and critically reflecting upon the professional, practical, and ethical circuitry that links social success to human activity.

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## NOTES

1. For synopses of longevity literature see Cole (1992), Freeman (1979), and Gruman (1966).

2. The idea of empowerment as a governmental strategy has been developed by Barbara Cruickshank in her analysis of the American "war on poverty" (1994), and by Chris Gilleard and Paul Higgs in their examination of consumerist discourse in British healthcare policy (1999).

3. Here and elsewhere (Katz 1996) my interest is how problematizations in old age, rather than schools of thought, determine the prominence of gerontological theories. However, intellectual history in gerontology is an important and often undervalued aspect of gerontological research (see Achenbaum 1995). Of the many overviews of the disengagement/activity debates, the most theoretically inventive are by Marshall (1994, 1999) for his linking the debates to wider disciplinary developments in the social sciences.

4. Critiques of ADL measurements also exist within the empirical gerontological literature because the application and contexts of such measurements are constantly changing. For example, Sinoff and Ore (1997) reported that the validity of the Bartel Index for assessing ADL may be limited among people over 75 years old because of discrepancies between self-reports and actual ADL performance scores for this age group. In another study, Rodgers and Miller (1997) pointed out that measurement errors in ADL surveys contribute to apparent changes in functional health data.

5. The question of whether or not "passive" behaviors are also activities is an interesting one. Lawton (1993) notes that in cases of physical decline and chronically ill people housebound or in institutions, "behavioral space is greatly restricted, but continuity may be maintained through such means as looking at photographs or iconic representations of past behavior, watching the activity of others, or recounting one's past achievements," so that "continuity of meaning may be maintained in the face of behavioral decline. Such mechanisms as fantasy, reminiscence, onlooker behavior, and passive social behavior may supplant the more active forms" (p. 38). In other words, the active production and continuity of meaning can be maintained by rather passive means.

6. See also the special issue of *Journal of Aging Studies* 13(1), 1999, devoted to narrative gerontology.

7. Names of participants are fictionalized.

8. I have not ventured here into the relationship between activity and consumer economies, but the critical literature on travel, cosmetic, leisure, and real estate "gold in gray" markets has been growing (Laws 1995, 1996; Minkler 1991; Sawchuk 1995). How these markets exemplify aspects of a new "ageless" and "postmodern lifecourse" is also significant (Featherstone and Hepworth 1991; Featherstone 1995; Katz 1999; Turner 1994).

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