

**“Don’t sit back with the geraniums, get out”: The Complexity of Older Women’s Stories of Sport Participation**

Sean Horton<sup>1</sup>  
Michael Gard<sup>3</sup>  
Patricia Weir<sup>1</sup>

Rylee A. Dionigi<sup>2</sup>  
Joseph Baker<sup>4</sup>

*<sup>1</sup>University of Windsor*

*<sup>2</sup>Charles Sturt University*

*<sup>3</sup>The University of Queensland*

*<sup>4</sup>York University*

Encouraging sport participation ‘for all’ is one method governments have utilized in the attempt to facilitate a more active senior citizenry. To date, investigations of seniors’ participation in sport has focused primarily on physiological variables, with fewer investigations devoted to psychosocial outcomes or what playing sport means to the older person in the context of wider health promotion discourses. Our qualitative investigation consisted of in-depth interviews with women competing in the 2013 World Masters Games. Interviews were conducted with 16 women ranging from 70 to 86 years of age and data were analysed within a post-structural framework. Three main themes emerged from the analysis: Multi-faceted benefits, Overcoming barriers, and Social roles. Unquestionably, there is complexity inherent to older females’ sport participation, in that our participants held views that both challenged and perpetuated some of the most common aging and gender stereotypes. On the one hand, by competing in sport at an older age these women were resisting traditional views and structures that excluded them from sport. On the other hand, they were conforming to the contemporary ‘sport for all’ ideal while subtly disparaging others who do not play sport or keep active. Thus, our findings critically analyze health promotion trajectories as they relate to older women and sport.

In the summer of 2015, Canada crossed a key demographic threshold, as for the first time more of its citizens were 65 years and older than under 15 (Evans, 2015). This mirrors the demographic trends globally; by 2050 the number of adults over the age of 60 in developed countries will nearly *double* those under 15 (United Nations, Department of Economic and Social Affairs/Population Division, 2015). These aging trends have caused a certain degree of consternation in public policy circles, as governments try to prepare for the impact of an older population on social programs (Canadian Medical Association, 2015; Horton, Baker, & Deakin, 2007). Exacerbating the demographic trend is the fact that we are living longer. The average lifespan has increased by an average of three months per year since the 1840s, to the point that individuals born in advanced industrial countries can now expect to live into their 80s (Oeppen & Vaupel, 2002; World Health Organization, 2016).

Rapid growth in the senior cohort has fueled interest among academics and policymakers in how to maximize time spent living a life high in quality, and simultaneously compressing the time living with disease and disability (King & Guralnik, 2010), hence the focus on what has been most commonly referred to as ‘successful aging’ (Rowe & Kahn, 1987;1997) as part of a wider health promotion policy direction. While successful aging is the most commonly used term in gerontology, it is also a highly

contentious term (see the 2015 special issue on successful aging in *The Gerontologist*), and other concepts have also been widely utilized in research and policy, including positive aging (e.g., Bowling, 1993) aging well (e.g., Peel, McClure, & Bartlett 2005), optimal aging (e.g., Aldwin, Spiro, & Park, 2006), active aging (e.g., Pike, 2011; World Health Organization, 2002) and productive aging (e.g., Warburton & Peel, 2008). Central to all of these concepts is the notion that aging is, to a certain extent, subject to our control and that ill health is as much about sedentary living and disuse as it is about age (Vopat, Klinge, McClure, & Fadale, 2014), which are key reasons why the promotion of sport and physical activity participation has appeared in health and aging-related policies (Gard & Dionigi, 2016). Much of the supporting evidence for ‘successful aging’ comes from research on physical activity involvement (or lack thereof) in older adults (Colley et al., 2011; Dogra & Stathokostas, 2012; Harvey, Chastin & Skelton, 2015; Meisner, Dogra, Logan, Baker, & Weir, 2010). For the majority of people, involvement in physical activity declines precipitously as we move through the lifespan (Colley et al., 2011), yet for those who can and do remain active, fitness and health measures are generally superior to their peers, and often equivalent to those in a much younger cohort (Leyk et al., 2010; Wroblewski, Amati, Smiley, Goodpaster, & Wright, 2011).

Encouraging sport participation ‘for all’ is one method governments have used in

the attempt to facilitate a more active senior citizenry (Gard & Dionigi, 2016; Pike 2011). Regardless of whether governmental influence is actually having an effect on participation rates, it is clear that sporting events for older adults are growing in popularity. A notable example of this is the World Masters Games (WGM) which began with the inaugural event in 1985 and 5,000 athletes competing. It has since expanded to the extent that it is now the largest sporting event in the world, with up to 30,000 participating in the quadrennial event (Weir, Baker, & Horton 2010).

A number of researchers have asserted that Masters athletes represent an important group to study (see Geard, Reaburn, Rebar, & Dionigi, 2017). Some argue that many of these Masters athletes represent an aging “ideal,” at least from a physical perspective (Cooper, Powell, & Rasch, 2007; Hawkins, Wiswell, & Marcell, 2003; Spirduso, Francis, & MacRae, 2005). More recently, Pesce and Audiffren (2011) suggested that partaking in sports that were high in cognitive demands enhanced mental flexibility, thereby contributing to “successful cognitive aging” (pg 623). Maintaining physical and cognitive functioning, along with avoidance of disease and disability are two defining features of Rowe and Kahn’s (1987; 1997) model of successful aging. The third component of this model, an active engagement with life, is also associated with sport involvement, as the opportunity to develop friendships, travel to new places, and receive social support are all cited by older adults as

benefits of participating in Masters events (Dionigi, Baker, & Horton, 2011a).

Notably, Rowe and Kahn’s model has, despite its high profile (or perhaps, because of it) come under criticism for its narrow, biomedical focus, with comparatively little attention paid to various psychosocial aspects of aging that seniors themselves consider important to age successfully (Geard et al., 2017; Liffiton, Horton, Baker, & Weir, 2012) nor the wider cultural context within which meanings of aging and physical activity are situated (Dionigi, Horton, & Bellamy, 2011b). Investigations of how older adults define successful aging have led to broader conceptions than those forwarded by Rowe and Kahn, and included items such as happiness/enjoyment with life (e.g., Bowling, 2006; Knight & Ricciardelli, 2003), having a positive outlook (e.g., Hilton, Gonzalez, Saleh, Maitoza, & Anngela-Cole, 2012; Tate, Leedine, & Cuddy, 2003), personal growth (e.g., Fisher & Specht, 1999), acceptance of oneself (e.g., Reichstadt, Sengupta, Depp, Palinkas, & Jeste, 2010; Tate et al., 2003), and close personal relationships (e.g., Lee & Fan, 2008; Matsubayashi & Okumiya, 2006).

Consequently, a consensus definition of successful aging has proven elusive as researchers have revised and expanded the concept to the point that a recent systematic review unearthed 84 unique definitions (Cosco, Prina, Perales, Stephan, & Brayne, 2014). This proliferation inspired Geard et al. (2017) to divide successful aging into four distinct areas: physical, psychological,

cognitive, and social, arguing that, while the evidence is still in its early stages, particularly for the latter three of these areas, Masters athletes may exemplify successful aging in all four domains (Geard, Rebar, Reaburn, & Dionigi, in press). Geard et al.'s (in press) assertion has some support from a recent systematic review by Gayman and colleagues, which suggested that seniors may derive benefits from partaking in sport over and above those accrued from involvement in physical activity (Gayman, Fraser-Thomas, Dionigi, Horton, & Baker, 2017). Nevertheless, these studies rarely consider what participation in sport means to older women within the broader cultural context.

Investigations of seniors' participation in sport has focused primarily on physiological variables, with fewer investigations devoted to psychosocial outcomes (Baker, Fraser-Thomas, Dionigi, & Horton, 2010; Dionigi, 2016; Gayman et al., 2017). Gayman et al. (2017) uncovered ten articles that focused on psychosocial outcomes of sport participation in adults 60 years of age and older. Of these ten articles, five focused on men's participation (Langley & Knight, 1999; Lobjois, Benguigui, & Bertsch, 2006; Lobjois, Benguigui, Bertsch, & Broderick, 2008; Roper, Molnar, Wrisberg, 2003; Rotella & Bunker, 1978), four examined the experiences of both men and women (Eman, 2012; Grant, 2001; Pesce & Audiffren, 2011; Reed & Cox, 2007), with just one focused on females exclusively (Kirby & Kluge, 2013). Kirby

and Kluge (2013) conducted a qualitative investigation with eight novice female volleyball players ranging in age from 65 to 76, many of whom were participating in athletic activity for the first time in 50 years. The authors speculated that this team environment, overseen and sponsored in a university setting, which included high quality coaching, may be a viable model for introducing non-athletic women to competitive sport.

Research by Pfister (2012) has also focused exclusively on females - two older athletes who still participated in sport competitions. Pfister (2012) discussed the "double barrier" women faced with respect to participation in competitive sport as a result of being both older and female. Indeed, past literature has emphasized the historical difficulties women have encountered in the sporting world (Vertinsky, 1995) and McIntosh (2015) has described the history of women's sport as a "history of struggle." Drawing on post-structural theories and using a critical, qualitative approach, Dionigi (2010; 2013) noted how older sportswomen (aged 55 years and over) across a range of sports simultaneously resisted and conformed to discourses of sport, aging and gender.

Post-structural theories help explain the ways in which dominant cultural notions (e.g., of sport, gender, or aging) can be challenged, used, or reinforced through individual experiences and practices (Markula & Pringle, 2006; Shaw, 2006; Wearing, 1995). For example, older women

can resist negative stereotypes of aging that portray old age as a time of weakness and frailty by maintaining a strong, healthy body and thereby deriving a sense of competency and empowerment. Alternatively, the increasing cultural and social pressure to remain active and participate in sport, evident in government policy, academic literature and the media, can result in the marginalization and stigmatization of those who cannot or do not want to engage in these activities, as well as a heightened individual and cultural fear of aging (Dionigi, Gard, Horton, Weir & Baker, 2014; Gard, Dionigi, Horton, Baker, Weir, & Dionigi, 2017). Given the distinct lack of research specific to older women's (i.e., 70 years and over) sporting experiences, despite their apparent growing involvement in sport, this qualitative study (framed in post-structuralism) of older women competing in the 2013 WMG expands existing knowledge on this topic. Historically, both participation in and the public discourse surrounding sport has been dominated by young to middle-aged men, leaving the voices of women, older women in particular, notably absent (Dionigi, 2013; Freysinger, Shaw, Henderson, & Bialeschki, 2013; Hargreaves, 1994; Vertinsky, 1995). If being heard is a form of power, then listening to the voices of older, female athletes is potentially valuable in helping to redress this imbalance.

Thus, the aim of our study was to better understand the meaning of sport in the lives of older women who currently compete in

individual, paired and/or team sporting events within the broader context of sport, aging, gender, and health promotion discourses by taking a critical approach to qualitative research, shaped by a post-structuralist perspective.

## **Methodology**

### **Research paradigm**

A critical approach to qualitative research “requires a look beyond the immediate, to question that which we take for granted and seek connections between seemingly disparate ideas; it is an approach that nurtures creativity...with an eye toward social change” (Swaminathan & Mulvihill, 2017, p. 4-5). It involves interrogating and questioning taken-for-granted assumptions, such as sport and physical activity should be practiced by all, and pays close attention to power and privilege, such as sport being a middle-class preoccupation. A critical approach also accepts multiple or partial truths, examines context and structure alongside personal empowerment, and resists separating the researcher from the research process (Swaminathan & Mulvihill, 2017). Therefore, although qualitative research attempts to see the world from the standpoint of participants, we recognize that researcher (and reader) bias is inevitable and, indeed, embraced in qualitative research and writing (Denzin & Lincoln, 2011). Our critical research paradigm aligns with post-structural perspectives which claim that there is no single interpretive truth and cast doubt over any discourse, theory or method holding authoritative

knowledge over another (Denzin & Lincoln, 2003; Richardson, 1998). Post-structuralism is also interested in issues of power and the rights of individuals. Within this research design and theoretical framework, we used semi-structured interviews and purposive sampling methods (Patton, 2002), as explained below, to better understand sport and aging from the perspectives of older female athletes.

### **Participants**

We recruited athletes participating in the 2013 WMG in Turin, Italy. This is a global event that attracted approximately 20,000 athletes from countries around the world. Research team members approached athletes at various athletic venues with the purpose of initiating a conversation. We did this at a time when athletes were not competing so as to be minimally disruptive to their routine. Early in our conversation we would mention the research we were undertaking and ask if they were interested in a more formal interview, which we would conduct at a time and place most convenient to them. Overall, we found that athletes were receptive to sharing their experiences with us, as we have found in our past research on older athletes (Dionigi et al., 2011a; Dionigi, Horton, & Baker, 2013).

Data presented here were collected as part of a larger study that examined ideas about sport involvement, sport promotion, training and competition, role models of aging, and involvement in physical activity.

For this paper, interviews with 16 women ranging from 70 to 86 years of age were analyzed to gain a better understanding of older women's experiences and meanings associated with competing in sport in the wider context of aging, sport, gender, and health promotion discourses. Participants were selected, using purposive criterion-based sampling, (Patton, 2002) based on age (70 years and over), gender (women), and language (ability to speak English). The women participated in a variety of paired or individual sports, specifically: track and field, swimming, weightlifting, table tennis, and badminton. Eleven different countries were represented in this group of 16 women. All identified as Caucasian, with the exception of one woman from Canada who identified as Aboriginal. This was a highly educated group, with only one participant indicating less than high school education, and 11 with some schooling beyond high school (i.e., college courses, university degree) and one woman reported obtaining a Ph.D. Almost all of the women were either fully (10) or partially (5) retired with one indicating that she was still working full time. Reported careers varied considerably, and included teachers (5), nurses (2), and physicians (2). Other careers mentioned included secretary, engineer, lawyer and bank teller. Seven women were widowed, six were married, and three reported being divorced. More than half of the women talked about being multi-sport athletes, with 10 mentioning involvement in sports other than the one they were engaged in at the

WMG. Participants provided informed consent, and the ethics approval was obtained from a university's Research Ethics Board. All participants were given pseudonyms for the purposes of data presentation to protect their confidentiality.

### **Interview Format**

Participants were interviewed individually in a quiet space at a time when they were not competing. Interviews were conducted in a semi-structured format (Patton, 2002), which provided the interviewer the flexibility to probe participants' answers for more detail. Each author is an experienced qualitative researcher, and all participated in the development of the interview protocol (Johnson, 1997). We met frequently over the course of the WMG to discuss the interview process, to share our experiences, question one another, self-reflect and make slight adjustments when necessary.

An interview guide provided the basic topics. Sample questions included: what role does sport play in your life? What do you get out of participating in sport? What barriers do you experience in relation to your continued participation in sport? What is the hardest thing for you about competing? Why do you think many older people do not participate in sport? Interviews generally lasted from 30-60 minutes, although some lasted upwards of 90 minutes, were digitally recorded and later transcribed. Discussion amongst authors continued throughout the coding process to ensure critical reflection on the data and to

establish agreement on the emergent themes and categories (Johnson, 1997). In addition to this 'peer debriefing' (Sparkes & Smith, 2014, p. 189), below we provide 'detailed descriptions' (Sparkes & Smith, p. 181) of the analysis process, our conceptual framework and biases so readers can further judge the credibility and quality of this research.

### **Analysis**

Interview transcripts were analyzed and interpreted within a post-structural framework (Markula & Pringle, 2006; Shaw, 2006). Post-structuralism rejects universal norms for truth and morality, focusing instead on a world that is uncertain, fragmented, diverse, with plurality one of its essential components (Merriam, 2002). Sport contains within it multiple power structures, which both shape and are shaped by its participants (Markula & Pringle, 2006). There is no single way to 'do' sport, and there are a plethora of reasons that drive participation. Furthermore, there are numerous conditions under which sport participation can shape one's self-concept and identity, and vice versa.

Post-structuralism's strength as an analytical approach is its "power to resist and work against settled truths" (Williams, 2005, p. 3). This approach recognizes that people attach multiple, dynamic, and contradictory meanings to their aging experience, as well as how meanings influence and are influenced by language and discourse at all levels of society. While

an individual's concept of self and identity will be diverse, fragmented, and culturally specific, we can gain an understanding of one's experience of aging and the sense people make of their actions through the stories they tell about themselves and their bodies. Our reading and interpretation of the interviews was done in this spirit, albeit with an abundance of caution given that, while the language participants used to talk about their lives is steeped in historical context, our analysis of their stories is similarly influenced by our own culture, bias, and background. Thus, in the findings we have included a number of verbatim quotes to provide context, with the expectation that the reader may interpret these somewhat differently than the authors.

When analysing our data we used an inductive approach for the coding, in which quotes from the interviews were identified as 'meaning units' (Côté, Salmela, Abderrahim, & Russell, 1993; Côté, Salmela, & Russell 1995). Subsequently, common features from these meaning units were identified, compared, and organized into our main themes (Côté et al. 1993; Tesch, 1990). Within these themes, we grouped similar meaning units together into categories. For example, a number of our participants commented on the pain and injuries they were managing in order to continue sport participation. These comments were grouped together into a category entitled *dealing with disease, pain, and injury* (please see Table 1 for all the themes,

categories, and example meaning units). This approach to qualitative analysis has its roots in the constant-comparative method (Glaser & Strauss, 1967), which involves contrasting the data until "saturation," when no new themes or categories emerge. This approach to analysis allowed us to reveal the meanings and contradictions in the data, which aligns with the post-structural framework outlined above. That is, like previous studies in this area (e.g. Dionigi, 2010; 2013), we did not use Grounded Theory explicitly, however we did incorporate components of that approach (coding and constant comparison) so that our themes emerged from/were grounded in our analysis of the data (Merriam, 2002). Based on the interview questions that were asked, numerous readings of the transcripts, and our analysis, three broad themes were established – *Multi-faceted benefits*, *Overcoming barriers*, and *Social roles*.

## Findings

### Multi-faceted Benefits

The first theme, *Multi-faceted benefits*, consisted of three categories: benefits that were *Social*, *Psychological*, and *Physical* in nature.

**Social benefits.** Virtually unanimous amongst our participants was the conception that there were major social benefits from partaking in sports in general, and Masters games in particular. Lisa (aged 72, swimming) noted, "Masters (events) have given me an opportunity to meet women who will be my friends all my life."

Alexis (72, swimming) expressed comparable sentiments, stating “the enjoyment, being with the group. I’ve made a lot of great friends because of it.”

Similarly, Nora (70, swimming) noted that “the camaraderie you get, and the support you get, especially from the club. Locker room chatter is wonderful.” Betty (70, weightlifting) discussed how the WMG become a way for the athletes to stay connected or reconnect:

The friendships you make, all people around the world, if you get to travel around the world to championships, and then you don’t see them for a year, you might have an email now and then, it’s just lovely to see them again and they all support each other.

The social component of sport and competition was clearly one of the most important benefits highlighted by our participants. At the same time, the women in our study, unlike the majority of older women, were ‘privileged’ - they had the means, ability and desire to travel the world and play sport. In addition, they were conforming to the culturally accepted view that one should be socially active in later life, which aligns with the active engagement aspect of successful aging and health-related promotion policy trajectories, such as ‘sport for all’ (Carr, Smith, Weir & Horton, in press).

**Psychological benefits.** While social and psychological aspects overlapped to a certain degree, participants described distinct psychological benefits. The women

discussed a variety of topics that included stress relief, mental health, positive self-perceptions, goal-setting, meeting challenges, and even improving their organizational skills. In preparing for events like the WMG and setting goals, Sarah (81, swimming) noted: “All that gives me new things to look forward to, get a little nervous about, which is not a bad thing.” Geraldine (70, track and field) discussed improved stress levels, but also the extent to which her perceptions of herself changed once she became an athlete:

Stress relief is one but it’s more than that, it’s the effect it has on you and your perception of yourself as a person, so that self-concept, that I believe changes... You see yourself, not just the mother, the wife, the teacher, but an athlete. It adds that extra dimension to your self-concept.

Our participants in this study grew up at a time when women’s roles were predominantly limited to that of a wife or mother, or some other caring role like a teacher or nurse. Therefore, becoming an “athlete” was a new part of Geraldine’s identity and one that was not typical among women of her time. Mary (73, badminton) drew a direct link between fitness and her state of mind. “It’s that feeling of being fit; I just think you’re more mentally alert.” Mary’s statement indicates that benefits from sport can generalize to an overall feeling of well-being. Just as there was frequently overlap between the social and psychological benefits women described,

there was also overlap between the psychological and the physical, exemplified here by Mary. This ties into our final category within this theme, that of physical benefits.

**Physical benefits.** Our participants talked about improved health, looking and feeling younger, and generally feeling better about themselves. They seemed very invested in their bodies, in terms of how they functioned, how they performed, and how they looked. In a culture that values youthful, fit, sporty, functional bodies, it is perhaps not surprising that these ‘privileged’ women also valued these traits in others and in themselves. What was particularly noteworthy, however, was the extent to which these women extolled therapeutic benefits, as many of them were dealing with pain and/or injuries. Betty had been battling rheumatoid arthritis, including weight issues as a result of her condition, and had four hip replacements which affected her technique as a weightlifter. She started competing at age 60, and stated, “It gave me back my life, it really did. Because as the muscles became stronger, those weak joints were supported, pain lessened.” Betty clearly derived important physical benefits from her weightlifting. At the same time, getting her “life” back is associated with this improvement in physical function, with a subtle insinuation that her life was somehow of less value in its previous (physically weak, overweight) state. Therefore, Betty’s quote is reflective of, or perhaps buys into, the value western cultures place on the fit,

strong, performing body, and simultaneously, the negative cultural emphasis on the weak, ‘fat’ and/or aging (female) body.

Nora also struggles with arthritis, which began when she was 35. In addition to the arthritis, she recounted other injuries she had suffered throughout the years. Asked what kept her coming back to swimming, she responded:

Because I know I’m going to heal. I’ve healed every time. Swimming actually makes me feel good. When I had arthritis really bad, the first five minutes of swimming was very painful. After that it felt good, and the pain would go away. It just made me feel good in body and spirit.

These sentiments expressed by Nora and Betty are representative of the distinct physical benefits experienced by these older, female athletes. They also reveal the extent to which these women are invested in their physical health and functionality, which relates to the next major theme - overcoming barriers.

### **Overcoming Barriers**

Within this theme, three categories emerged from our analysis, which consisted of *Dealing with disease, pain, and injury*, *Financial obstacles*, and *Combatting gender and age norms*.

**Dealing with disease, pain, and injury.** Many of our participants had dealt with, or were currently dealing with, serious injuries or health issues. Alexis talked about

her recovery from a recent stroke. Lisa discussed her heart attack of 10 years ago, and managing associated complications since that event to allow her to swim competitively. Others spoke of hip replacements, broken bones, or debilitating arthritis. Common to all of these women, however, was a determination to get past these serious health issues, with sport as an important component of their therapy. Often it meant making adjustments, for example, learning a different swimming stroke to accommodate for an injury. The body is, in a sense, treated as an instrument, to be fixed, prodded, mended, and brought back to 'life'; disease, pain, and injury are thus insufficient reasons to give up on sport. Betty spoke of changing her weightlifting technique to accommodate for a wrist injury and having both hips replaced. She commented on the therapeutic benefits of exercise for people more generally: "I know it's hard with pain to make the first step, but if they could possibly do it they would find in time, they feel better." Some changed sports completely. Sarah moved to swimming, noting its low impact nature:

I want to get these older people in the water ... anything else is often unforgiving for bones, because I have a hip replacement, I broke this one skiing; but in the water, there is no pain, it's wonderful. You are free of all that stuff.

Alongside these women's feelings of personal empowerment is a belief in the idea that exercise can help to prevent aging and disease and a belief that one must fight

or resist the aging body. Fiona (70, badminton) was particularly noteworthy due to her battle with Parkinson's disease. She described her symptoms as being "well controlled" with her medication, and that a combination of this and her active lifestyle help to maintain her good health. In her words, "I firmly believe with the right level of activity, you can improve any medical condition." Fiona's optimism is striking, considering how debilitating the symptoms of the disease can be without her medication. She commented that, "If I don't take my medication I find I can't walk very well" and that even a few hours delay taking her medication can have fairly drastic effects on her badminton performance. She faces these obstacles as rewarding challenges, however, and speaks of constantly seeking out new ways of pushing herself:

When you quit doing things, and looking for new challenges, that's when you get old. Your body starts to fall apart... It's the best way I know to fight disease - don't give into it. I could say 'oh, I have Parkinson's' and there are people who do that.

These women were dismissive of barriers that others might, perhaps logically or justifiably, consider substantial in nature. What is remarkable about women like Fiona is the resilience, determination, and optimism that they display. At the same time, Fiona's resistance subtly denigrates the term 'old', associating it with giving up and quitting. She also subtly denigrates those

who ‘give in’ to disease by differentiating herself from people who do. This way of thinking has the potential to blame individual choice and behavior for disease, which is problematic given the random nature of so many diseases and the socio-cultural determinants of health outcomes, particularly as one ages. Resisting disease, resisting the tendency of the body to ‘fall apart’ as we age appears to be crucial to Fiona’s sense of self. The body is of most value to Fiona, like others in this study, when it looks and performs in a youthful manner.

Our participants were determined to do what they wanted, and not much was going to stop them. This is perhaps best exemplified by 81-year-old Sarah, who, after describing her broken hip from skiing, her back surgery for arthritis, and her resulting struggles to perfect a new swimming stroke, said “Real barriers? I think I would crawl over them; I am so determined to do the things I want to do.” As a society, we admire and celebrate women with such an attitude, and perhaps rightfully so. This kind of fierce resistance and resilience, however, tends to conform to Rowe and Kahn’s (1987; 1997) biomedical model of aging, which assumes we all can, and should, take responsibility for our health, and that the way we age is very much under our control.

**Financial obstacles.** This was an obstacle that our participants recognized as real, and important, but it did not really apply to them. Participating in an event like the WMG can be an expensive undertaking,

particularly if you do not live in close proximity to the host venue. Many of our participants built the Games into their larger travel plans, and used it as an opportunity to explore new places and new countries. They did acknowledge, however, that such endeavors are problematic for many people, and they also acknowledged the privileged position they occupied. Alexis noted, “I know some people that couldn’t afford to go and it’s a big problem getting all your money together.”

Similarly, Betty remarked that it took considerable financial resources, combined with reaching an age at which other financial obligations are absent, to be able to afford participating in the WMG. “The younger ones have got commitments, they’ve got mortgages, they’ve got children. It’s too hard to be spending as much money as we are spending coming here.” The women recognized the travel costs, but also the considerable expenses associated with the year-round training, equipment, and coaching that many masters athletes accrue in order to compete. Betty does go on to distinguish, however, between the expenses associated with events like the WMG, and the ability to partake in basic exercise, declaring “...you don’t have to be an Olympic weight lifter like I am, you just have to get a couple of tins of baked beans and hand weights.” These women were passionate about exercise, and insisted that one does not have to take it as seriously, nor have the financial resources they have, to derive benefits. In fact, the pervasive

attitude in our data appears to be that there is no rational reason for a completely sedentary lifestyle, irrespective of age, health status, or economic circumstance, an attitude also implied in 'sport for all' and related health promotion messages. Our participants lamented the lack of sport or even basic physical activity in the majority of older adults, a topic which is covered in more detail in a subsequent theme.

### **Combatting gender and age**

**“norms.”** All of our participants were born prior to the end of WWII, and some of them referenced the lack of opportunities in their childhood. Fiona spoke of the limited prospects for engaging in sports during her school years:

When I was in school, there really wasn't much for girls... we just played with each other. That's really all there was... I guess there were people who thought athletic girls were kind of strange.

Similar sentiments were expressed by Nora, who was surprised to arrive in the United States from Austria as a young adult only to find few opportunities to participate in sports. “When we came to the United States, my age group, the women were told they had to be ladies. Sports was not the done thing.” Sarah experienced issues in her marriage as a result of perceived gender roles:

That's not nice to say so but my husband, he discouraged me from almost anything that I wanted to do and that has caused a problem in our

marriage. ... In the 1950s and 60s, you had the Victorian time.....the wife did what the husband said.

Clearly these attitudes did not prevent these women from becoming athletes, and in this sense they were just one in a series of obstacles our participants overcame which helped them to feel empowered. And while earlier in their lives they faced barriers related to gender norms, more recently they have encountered stereotypes associated with age. Once again, these women feel that, while these stereotypes do exist and can be powerful, they apply to older people more generally, rather than themselves specifically. Hence, their comments reflected that perception. Lisa observed:

I think most adults feel that they are not capable. 'No, I can't do that, I'm 70 years old. I can't take a yoga class, I'm 70 years old.' I think we need to encourage senior men and women to come out of themselves and take a risk, take a chance, try it, see if you can do it. Don't just say so quickly, 'I can't do that.'

Similarly, Sarah suggested that most seniors sell themselves short, and more media exposure of events like the WMG would help change perceptions of what is possible:

I think that the older population wasn't brought up in that; you need to get that realization that, why can't older people do this? You need to advertise that and show that it can be done.

Our participants knew, in one sense, that they were the exception rather than the rule,

and that they represented a model of an older (female) adult who was active and athletic at a relatively late age. To a very real degree, these women thought of themselves as examples of how one should live life at their age, which leads us to our last major theme.

## **Social Roles**

This final theme includes two categories, *role modeling*, and *evangelical about exercise*.

**Role modeling.** There was considerable variety in how our participants referred to themselves with respect to their social roles. Kim (72, swimming), for example, was quite overt about referring to herself as a role model. “My family is very athletic and I am a role model for my family so they know that everybody has to pick a sport.” Similarly, Sarah indicated, “I hear awesome people telling me ‘you’re my role model.’” Lucinda (83, swimming) notes that she is held up by prominent people in her town as someone to emulate: “The mayor of my town always calls me the example for other elder people. ‘Look at her!’ You know geraniums? There’s a saying in Holland: Don’t sit back with the geraniums, get out.” Others were slightly more reticent, but did acquiesce to the notion of being a role model. Betty, for one, has been profiled extensively in her hometown’s local media: “I don’t see myself as a role model but the other ladies would probably disagree. So I (have had) a lot of radio and magazines written about me.”

A common sentiment that emerged was the notion of “if she can do it, why can’t I?” This went both ways, in the sense that our participants recognized that they inspired other women, yet notably there were instances in which our participants were similarly inspired, generally by women older than themselves who were still active and competing in sport. For example, Sarah (aged 81) noted that, “there is a woman here, her name is Barbara... she is 89 and she is fantastic.” Similarly, Sally (70, swimming), who works out a gym five mornings a week to complement her swimming training, and is met in the mornings by “one of my friends (who) is 81. So, I’m inspired by her.” Betty noted that part of the reason she competes is so that people can see that “she can still do things.” It is important to Betty to put her body and abilities on display, and show her physicality and prowess through her sport. She believes she inspires others in this manner, and also derives inspiration from her co-competitors, some of whom are “...a lot older than me. You get out there and they see that you can do it.”

Whether or not our participants explicitly saw themselves as role models, they all saw themselves as having a distinct “role to play.” Our participants wanted to share their passion for sport, exercise, and fitness in the hopes that they would inspire others to become more active. In a sense, these women were “exercise evangelicals” which constitutes our final category.

**Evangelical about exercise.** Our final category focuses on the messages that our participants try to convey, in varying ways, about the benefits of exercise and/or sport involvement. Most were rather blunt in their recommendations, which they often perceived as encouraging and supportive of others. Martha (86, swimming) is direct in her advice: “I say to all of my friends, ‘you wouldn’t be limping like that if you came swimming with me.’” Similarly, Mary has a similar message to her friends: “I always say to them ‘live! You are young enough to participate and learn new things, do more things, play more sport.’” Betty was very forthright about her evangelical nature: “I give lectures to the ladies, as you can tell, on this subject, the need to do weights, even with a tin of baked beans in each hand. There are enormous health benefits.”

Geraldine has spent many years running exercise classes and pursuing advanced graduate degrees related to physical education and motivation. Some of her work takes her into nursing homes, where she tries to implement PA programs.

I work in a nursing home so these people are there, you’ve got the captured audience, you go around and you tell them we are just going to do a little bit of movement, you don’t say exercise... they say “I’m too old for that, I did all that when I was young.”

This evangelical nature is a double-edged sword, for while the messages conveyed by our participants are intended to be encouraging and supportive, the attitude

often conveyed is that individuals who do not partake in exercise or sport are shirking their social and moral responsibility to maintain an active, healthy lifestyle throughout their senior years. This can be subtle, as with Leena (80, swimming) who notes, “I’ve always been active and never one to just sit around with a bunch of women and talk about my aches and pains. Not that I condemn them.” Some of our other participants, however, were more willing to offer some level of condemnation for a less-than-active lifestyle. Betty stated:

Hopefully more and more because if not then people will start getting more and more obese, the health system will fail, but the trouble is there is still a lot who just don’t want to listen, who still smoke, and they are the ones who will drain the system when you get to pension age.

When Iris (72, table tennis) was asked why more seniors are sedentary rather than active in their lifestyle choices, she responded:

Lazy, lazy, only lazy. They like to eat a lot of food, junk food, they don’t want to walk. Simple. WALK. Use your body, use your muscles. Don’t let your muscles die. If you’re not moving, you’re dying.

It does appear to be a slippery slope from taking responsibility for your own health and well-being to castigating those who cannot, for whatever reason, do the same, thereby blaming them for ill health or disease. These findings clearly highlight the

complexity inherent in older women's stories of sport participation within the wider context of sport, aging, and health promotion discourses.

### Discussion

Our study both supports and extends the literature on older (female) masters athletes. Previous investigations of the sporting experiences of older athletes have emphasized the multiple and varied benefits these individuals derive from sport participation (Dionigi et al., 2011a; Kirby & Kluge, 2013). Similarly, our athletes discussed the social, psychological, and physical benefits of their sport involvement. For women like Geraldine, sport can be an empowering experience, expanding one's self-concept and identity so she sees herself not just as a mother, a wife, and a teacher, but also as an "athlete." Biographical interpretations of aging successfully emphasize the possibilities, despite potential changes in health status and socio-cultural and economic resources as one ages (Dionigi et al., 2011b). These transitions can be interpreted as important components of one's life story and create multiple understandings of one's "self" while also creating alternative meanings of the aging process (Chapman, 2005; Dionigi et al., 2011b; Phoenix & Sparkes, 2009).

Older females have traditionally faced numerous barriers to sport participation, due to culturally-based stereotypes and norms related to both age and gender (Vertinsky, 1995; Dionigi, 2013; Pfister,

2012). A number of our participants discussed these barriers, and how they experienced a lack of opportunities in their youth, or a less than supportive spouse. What was striking, however, was the fierce determination these women displayed in the face of numerous barriers, whether these were societally based, or more individual in nature (i.e., overcoming disease and injury). Our participants talked at-length about various adverse events that had occurred in their lives, yet they were determined to continue with exercise and sport. This was perhaps best exemplified by Sarah, who spoke of crawling over barriers, because she is "so determined to do the things I want to do."

Clearly our participants have displayed determination and persistence, and this may be worthy of both admiration and emulation. We broached this possibility, and while only some of them overtly referred to themselves as role models, virtually all our participants saw themselves as having a *role to play* when it came to encouraging others to be more active in sport and/or physical activity. Kirby and Kluge (2013) discussed the potential of the female volleyball players in their study to be role models, both for their peers and for younger generations. Considering these women were described as volleyball novices who had never participated in competitive sport previously, they are perhaps well-suited to inspire other seniors. Importantly, the WMG emphasizes and encourages participation, with multiple divisions catering to everyone from elite

athletes to those who are primarily recreational in nature (Weir et al., 2010). Previous research has indicated that older athletes who are more “elite” may actually intimidate other seniors from getting involved in sport (Horton, Baker, Cote, & Deakin, 2008; Horton, Dionigi, & Bellamy, 2013; Ory, Hoffman, Hawkins, Sanner, & Mockenhaupt, 2003). Role model research that has been conducted with young people suggests that the ideal role model was someone who was slightly older and had achieved outstanding, but not impossible success in an area in which respondents hoped to excel (Lockwood & Kunda, 1997). While having appropriate role models for young people is widely acknowledged to be important (Beck, 1989; Nauta & Kokaly, 2001) research on this topic for seniors is in its infancy (Joop, Jung, Damarin, Mirpuri, & Spini, 2017). There is, however, growing awareness that it may be a significant research area for a senior population that is growing in both age and number (Horton et al., 2013; Kirby & Kluge, 2013). McIntosh (2015) noted that one senior female athlete in her study exclaimed ‘we need role models too!’ The early evidence suggests that what constitutes a viable role model for youth may be applicable to seniors (Horton et al., 2013; Joop et al., 2017; Lockwood & Kunda, 1997). However, while more research is needed on role models for older adults, it may be that some of the women in our study, given their elite-athlete status, may be more suitable role models for younger generations than for their age-

matched peers (Lithopoulou, Rathwell, & Young, 2014).

From a post-structural perspective, individuals will often challenge, negotiate and conform to dominant cultural conceptions through their words and practices (Markula & Pringle, 2006; Shaw, 2006; Wearing, 1995). By resisting traditional gender and aging stereotypes the women in our study and others of their ilk may help to change perceptions of what it means to grow old. Indeed, extraordinary older female athletes are occasionally profiled in the popular press. Ruth Frith was one of two athletes over 100 years of age participating in the 2009 WMG in Sydney, Australia, and she became a media star (Pfister, 2012). Somewhat ironically, these elite athletes have the potential to resist traditional aging stereotypes, but also simultaneously reinforce them (Dionigi, 2010; 2013; 2016). They reinforce aging stereotypes by distancing themselves from other women their own age who are sedentary. While our participants see themselves as having a role to play, their evangelical enthusiasm for exercise potentially masks a disdain for those who (supposedly) lacked the initiative or will-power to engage in physical activity. Words such as ‘lazy’ or ‘drain the system’ were used to describe non-exercisers. In this manner, our participants reinforced a biomedical approach to aging that emphasizes self-responsibility for one’s health and devalues ill-health in old age (Dionigi et al., 2014). This is problematic for those who lack the

resources, knowledge, ability or even the interest to engage in physical activity and/or sport in later life (see Gard et al., 2017). While our participants acknowledged their privileged position, and similarly acknowledged that many people could not afford the expenses associated with competitive sport, there was considerably less sympathy for those who did not partake in any kind of physical activity, whether that constituted walking, or using a tin of baked beans to maintain muscular strength.

On an individual level, the manner in which our participants resist an aging body, and the control they attempt to assert over various physical and social barriers, may be an effective and empowering way to approach their lives. Much of the literature in psychology suggests that locus of control (i.e., beliefs regarding whether one's health is controlled by oneself, others, or fate) is an important predictor of mental health and well-being, as well as proactive behaviour (Cheng, Cheung & Lo, 2016; Cobb-Clark, Cassenboemher & Schurer, 2014; Norman, Bennett, Smith, & Murphy, 1997). From a societal perspective, however, this focus on individual agency is problematic, for it assumes that everyone, irrespective of health condition or economic circumstance, can exert similar control over the aging process (Gard et al., 2017; Gard & Dionigi, 2016). This exhortation to make individuals take responsibility for their own aging is a compelling critique leveled against Rowe and Kahn's (1987; 1997) biomedical model (e.g., Dillaway & Byrnes, 2009; Katz &

Calasanti, 2014; Rubinstein & de Medeiros, 2015). Despite these criticisms within the academic literature, Rowe and Kahn's successful aging model maintains a prominent place in discussions on aging and in government policy (Geard et al., 2017). Notably, our interviews with older female athletes suggest that their views fall very much within Rowe and Kahn's framework.

Our participants, sometimes subtly, and other times less so, conveyed the notion that obstacles, whether those constituted disease or injury, or even aging itself, were simply barriers to overcome. While their determination is laudable, the danger here is twofold: First, what happens when they eventually succumb to old age, as we all do unless we die on the field of play (Dionigi, Horton & Baker, 2013; Gard et al., 2017)? By resisting deep old age so vehemently, do we potentially fear it more, and adjust more poorly when the inevitable arrives (Dionigi, 2016; Dionigi et al., 2014)? Second, what are the implications for those who do not, for whatever reason, engage in a similarly active lifestyle? Are they at risk of being treated by people, and by governments, as somehow morally inferior for lacking the determination and fortitude to make the choices that would improve their health (see Gard et al., 2017)? Minimizing societal constraints that influence the aging process provides the rationale for governments to reduce funding or eliminate programs, placing the burden of aging successfully squarely on the individual (Dionigi, 2017; Dillaway & Byrnes, 2009; Rubinstein & de

Medeiros, 2015). These potential implications of older women's sport participation call into question current sport and health-related promotion policy directions that encourage 'sport for all', regardless of age, gender, race or circumstance. Largely absent from the literature are the views of minimally active and sedentary women on the prospects of sport involvement (Horton et al., 2013). Given that older women who are inactive constitute the majority of that cohort, and are the primary target of government initiatives and 'sport for all' promotional strategies, procuring their stories takes on greater importance and constitutes an intriguing avenue for future research.

### **Conclusion**

The 16 women that we interviewed derived important benefits from their participation in sport and physical activity in general, and the WMG in particular. The stories they shared identified clear social, physical, and psychological dividends associated with sport competition. Sport has allowed them, or in some cases forced them, to conquer a variety of societal and personal barriers, including traditional aging and gender stereotypes. In many respects, our participants are trailblazers in their participation in competitive sport at a relatively late stage in life, yet their effect on stereotypes of aging and sport participation more generally remains equivocal, largely due to the complexity and 'double-edged sword' inherent in their stories, experiences,

and attitudes. These women seemingly have the power and potential, through their words and their actions, to both inspire and discourage others with respect to sport and physical activity participation.

Our participants were eager to spread the positive message of an active lifestyle and the benefits to be accrued from physical activity; they clearly felt they had a role to play when it comes to promoting sport. In this manner, these women challenged typical stereotypes of aging as a time of physical decline and sedentary living and resisted traditional views and structures that excluded them from sport. At the same time, these women were conforming to the contemporary 'sport for all' ideals, including advocating self-responsibility for health, purporting sport and physical activity participation as 'cures' to aging-related disease and disability, as well as believing that everyone *should* be physically active to some degree as they age. Somewhat ironically, by subtly denigrating their peers who are not active, these sportswomen may also reinforce the very stereotypes that they resist. Rather than encouraging other seniors to partake in physical activity and sport, their example may have the unintended consequence of discouraging their peers. Their actions could also unintentionally reinforce negative stereotypes towards, and the marginalization of, those who do not compete in sport at an older age.

Pfister (2012) noted that women who began sport as a remedy for aging quickly

dropped out when they failed to experience joy and satisfaction. Perhaps seniors would be better served if we moved away from prescriptive and promotional statements about the health benefits of sport and physical activity, and instead focused our efforts on the social components and fun that are a primary motivation for and benefit of playing sport. In that way, sport will be seen as another opportunity for older people to enjoy later life, rather than as a 'tool' to control individual behaviour.

---

## References

- Aldwin, C. M., Spiro, A. III, & Park, C. L. (2006). Health, behavior, and optimal aging: A life span developmental perspective. In J.E. Birren & K.W. Schaie (Eds.), *Handbook of the Psychology of Aging* (6th ed., pp. 85-104). New York: Elsevier.
- Baker, J., Fraser-Thomas, J., Dionigi, R., & Horton, S. (2010). Sport participation and positive development in older persons. *European Review of Aging and Physical Activity*, 7(1), 3-12.
- Beck, L. (1989). Mentorships: Benefits and effects on career development. *Gifted Child Quarterly*, 33, 22-28.
- Bowling, A. (1993). The concepts of successful and positive ageing. *Family Practice*, 10(4), 449-453.
- Bowling, A. (2006). Lay perceptions of successful ageing: Findings from a national survey of middle aged and older adults in Britain. *European Journal of Ageing*, 3(3), 123-136.
- Canadian Medical Association (2015, August 24). A policy framework to guide a national seniors strategy for Canada. Retrieved from [http://www.caep.ca/sites/caep.ca/files/caep/files/final\\_policy\\_framework\\_eng\\_-\\_aug24.pdf](http://www.caep.ca/sites/caep.ca/files/caep/files/final_policy_framework_eng_-_aug24.pdf)
- Carr, K., Smith, K., Weir, P., & Horton, S. (in press). Sport, Physical Activity, and Aging: Are we on the right track? In R. Dionigi & M. Gard (Eds.) *Sport and Physical Activity across the Lifespan*. London: Springer Nature.
- Chapman, S. A. (2005). Theorizing about aging well: Constructing a narrative. *Canadian Journal on Aging*, 24, 9-18.
- Cheng, C., Cheung, M. W. L., & Lo, B. C. Y. (2016). Relationship of health locus of control with specific health behaviours and global health appraisal: a meta-analysis and effects of moderators. *Health Psychology Review*, 10, 460-477.
- Cobb-Clark, D. A., Cassenboemher, S. C., & Schurer, S. (2014). Healthy habits: The connections between diet, exercise, and locus of control. *Journal of Economic Behavior and Organization*, 98, 1-28.
- Colley, R. C., Garriguet, D., Janssen, I., Craig, C. L., Clarke, J., & Tremblay, M. S. (2011). Physical activity of Canadian adults: accelerometer results from the 2007 to 2009 Canadian Health Measures Survey. *Health Reports*, 22(1), 7.
- Cooper, L. W., Powell, A. P., & Rasch, J. (2007). Master's swimming: an example of successful aging in competitive sport. *Current Sports Medicine Reports*, 6(6), 382-396.
- Cosco, T. D., Prina, A. M., Perales, J., Stephan, B. C., & Brayne, C. (2014). Operational definitions of successful aging: a systematic review. *International Psychogeriatrics*, 26(03), 373-381.
- Côté, J., Salmela, J., Abderrahim, B., & Russell, S. (1993). Organizing and interpreting unstructured

- qualitative data. *The Sport Psychologist*, 7, 127-137.
- Côté, J., Salmela, J., & Russell, S. (1995). The knowledge of high-performance gymnastic coaches: Competition and training considerations. *The Sport Psychologist*, 9, 76–95.
- Denzin, N. K., & Lincoln, Y. S. (2011). *The SAGE handbook of qualitative research*. Sage Publishing.
- Denzin, N. K., & Lincoln, Y. S. (2003). Introduction: The discipline and practice of qualitative research. In N. K. Denzin & Y. S. Lincoln (eds.) *Collecting and Interpreting Qualitative Materials* (2<sup>nd</sup> ed., Vol 3) Thousand Oaks, CA: Sage Publishing, pp. 1-45.
- Dillaway, H. E., & Byrnes, M. (2009). Reconsidering successful aging: A call for renewed and expanded academic critiques and conceptualizations. *Journal of Applied Gerontology*, 28(6), 702-722.
- Dionigi, R. A. (2010). Older sportswomen: Personal and cultural meanings of resistance and conformity. *The International Journal of Interdisciplinary Social Sciences*, 5(4), 395-407.
- Dionigi, R. A. (2013). Older women and competitive sports: Resistance and empowerment through leisure. In V. J. Freysinger, S. M. Shaw, K. A. Henderson, & M. D. Bialeschki, (Eds.). *Leisure, Women, and Gender* (pp.167-176). State College, PA: Venture Publishing.
- Dionigi, R. A. (2016). The competitive older athlete: a review of psychosocial and sociological issues. *Topics in Geriatric Rehabilitation*. 32(1), 55-62.
- Dionigi, R. A. (2017). I would rather die than live sedentary: Is the demonization of passive leisure creating a future generation of older people who will not accept inactivity? *Topics in Geriatric Rehabilitation*, 33(3), 156-161.
- Dionigi, R. A., Baker, J., & Horton, S. (2011a). Older athletes' perceived benefits of competition. *The International Journal of Sport and Society*, 2(2), 17-28.
- Dionigi, R. A., Horton, S., & Baker, J. (2013). Negotiations of the ageing process: Older adults' stories of sports participation. *Sport, Education and Society*, 18(3), 370-387.
- Dionigi, R. A., Horton, S., & Bellamy, J. (2011b). Meanings of aging among older Canadian women of varying physical activity levels. *Leisure Sciences*, 33(5), 402-419.
- Dionigi, R. A., Gard, M., Horton, S, Weir, P. and Baker, J. (2014). Sport as leisure for older adults: Critical reflections and recommendations. Paper presented at the 14<sup>th</sup> Canadian Congress on Leisure Research: Our New Leisure Society, Halifax Nova Scotia, May 21-23, 2014.
- Dogra, S., & Stathokostas, L. (2012). Sedentary behavior and physical activity are independent predictors of

- successful aging in middle-aged and older adults. *Journal of Aging Research*, 2012.
- Eman, J. (2012). The role of sports in making sense of the process of growing old. *Journal of Aging Studies*, 26(4), 467-475.
- Evans, P. (2015, September 29). More Canadians are 65 and over than under age 15, statscan says. Retrieved from <http://www.cbc.ca/news/business/statistics-canada-seniors-1.3248295>
- Fisher, B. J., & Specht, D. K. (1999). Successful aging and creativity in later life. *Journal of Aging Studies*, 13(4), 457-472.
- Freysinger, V. J., Shaw, S. M., Henderson, K.A. & Bialeschki, M.D. (2013). Many voices: Historical perspectives on women's leisure. In V. J. Freysinger, S. M. Shaw, K. A. Henderson, & M. D. Bialeschki, (Eds.). *Leisure, Women, and Gender* (pp.27-50). State College, PA: Venture Publishing.
- Gard, M., & Dionigi, R.A. (2016). The world turned upside down: sport, policy and ageing. *International Journal of Sport Policy and Politics*, 8(4), 737-743.
- Gard, M., Dionigi, R.A., Horton, S., Baker, J., Weir, P., & Dionigi, C. (2017). The normalisation of sport for older people? *Annals of Leisure Research*, 20(3), 253-272.
- Gayman, A. M., Fraser-Thomas, J., Dionigi, R. A., Horton, S., & Baker, J. (2017). Is sport good for older adults? A systematic review of psychosocial outcomes of older adults' sport participation. *International Review of Sport and Exercise Psychology*. 10(1), 164-185.
- Geard, D., Reaburn, P., Rebar, A., & Dionigi, R. A. (2017). Masters athletes: Exemplars of successful aging? *Journal of Aging and Physical Activity*. 25(3), 490-500.
- Geard, D., Reaburn, P., Rebar, A., & Dionigi, R. A. (in press). Testing a model of successful aging in a cohort of masters swimmers. *Journal of Aging and Physical Activity*.
- Glaser, B., & Strauss, A. L. (1967). *The Discovery of Grounded Theory: Strategies for Qualitative Research*. New York: de Gruyter.
- Grant, B. C. (2001). 'You're never too old': Beliefs about physical activity and playing sport in later life. *Ageing & Society*, 21(6), 777-798.
- Hargreaves, J. (1994). *Sporting females: Critical and sociological issues in the history of women's sports*. London, UK: Routledge.
- Harvey, J. A., Chastin, S. F., & Skelton, D. A. (2015). How sedentary are older people? A systematic review of the amount of sedentary behavior. *Journal of Aging & Physical Activity*, 23(3).
- Hawkins, S. A., Wiswell, R. A., & Marcell, T. J. (2003). Exercise and the master athlete: A model of successful aging? *The Journals of Gerontology Series A*:

- Biological Science and Medical Sciences*, 58(11).
- Hilton, J. M., Gonzalez, C. A., Saleh, M., Maitoza, R., & Anngela-Cole, L. (2012). Perceptions of successful aging among older Latinos, in cross-cultural context. *Journal of Cross-Cultural Gerontology*, 27(3), 183–199.
- Horton, S., Baker, J., & Deakin, J. M. (2007). Popular stereotypes of aging and the effect on the health of seniors in North American society. *Educational Gerontology*, 33, 1021-1035.
- Horton, S., Baker, J., Côté, J., & Deakin, J. M. (2008). Understanding seniors' perceptions and stereotypes of aging. *Educational Gerontology*, 34(11), 997-1017.
- Horton, S., Dionigi, R. A., & Bellamy, J. (2013). Canadian women aged 75 and over: Attitudes towards health related role models and female masters athletes. *The International Journal of Interdisciplinary Social and Community Studies*. 7(3), 33-47.
- Johnson, R.B. (1997). Examining the validity structure of qualitative research. *Education*, 118, 282–90.
- Joop, D.S., Jung, S., Damarin, A.K., Mirpuri, S., & Spini, D. (2017). Who is your successful aging role model? *Journals of Gerontology: Series B*, 72(2), 237-247.
- Katz, S., & Calasanti, T. (2014). Critical perspectives on successful aging: Does it “appeal more than it illuminates”? *The Gerontologist*, 55(1) 26-33.
- King, A. C., & Guralnik, J. M. (2010). Maximizing the potential of an aging population. *JAMA*, 304(17), 1944-1945.
- Kirby, J. B., & Kluge, M. A. (2013). Going for the gusto: Competing for the first time at age 65. *Journal of Aging and Physical Activity*, 21(3), 290-308.
- Knight, T., & Ricciardelli, L. A. (2003). Successful aging: Perceptions of adults aged between 70 and 101 years. *International Journal of Aging and Human Development*, 56(3), 223–245.
- Langley, D. J., & Knight, S. M. (1999). Continuity in sport participation as an adaptive strategy in the aging process: A lifespan narrative. *Journal of Aging and Physical Activity*, 7(1), 32-54.
- Lee, L. Y. K., & Fan, R. Y. K. (2008). An exploratory study on the perception of healthy ageing among Chinese adults in Hong Kong. *Journal of Clinical Nursing*, 17(10), 1392-1394.
- Leyk, D., Rütger, T., Wunderlich, M., Sievert, A., Eßfeld, D., Witzki, A., ... & Löllgen, H. (2010). Physical Performance in Middle Age and Old Age. *Dtsch Arztebl Int*, 107(46), 809-816.
- Liffiton, J. A., Horton, S., Baker, J., & Weir, P. (2012). Successful aging: How does physical activity influence engagement with life? *European Review*

- of Aging and Physical Activity*, 9, 103-108.
- Lithopoulos, A., Rathwell, S., & Young, B. (2014). Examining the effects of gain-framed messages on the activation and elaboration of possible sport selves in middle-aged adults. *Journal of Applied Sport Psychology*, 27(2), 140-155.
- Lobjois, R., Benguigui, N., & Bertsch, J. (2006). The effect of aging and tennis playing on coincidence-timing accuracy. *Journal of Aging and Physical Activity*, 14(1), 74-97.
- Lobjois, R., Benguigui, N., Bertsch, J., & Broderick, M. P. (2008). Collision avoidance behavior as a function of aging and tennis playing. *Experimental Brain Research*, 184(4), 457-468.
- Lockwood, P., & Kunda, Z. (1997). Superstars and me: Predicting the impact of role models on the self. *Journal of Personality and Social Psychology*, 73, 91-103.
- Markula, P., & Pringle, R. (2006). *Foucault, sport and exercise: Power, knowledge and transforming the self*. Abingdon, Oxon: Routledge.
- Matsubayashi, K., & Okumiya, K. (2006). Older adults' views of "successful aging": Comparison of older Japanese and Americans. *Journal of the American Geriatrics Society*, 54(1), 184-187.
- McIntosh, C. J. (2015). *Aging female athletes: The challenges of performance, policy and the pursuit of health* (Unpublished doctoral dissertation). University of Calgary, Calgary, Alberta, Canada.
- Meisner, B. A., Dogra, S., Logan, A. J., Baker, J., & Weir, P. L. (2010). Do or decline? Comparing the effects of physical inactivity on biopsychosocial components of successful aging. *Journal of Health Psychology*, 15(5), 688-696.
- Merriam, S. B. (2002). Introduction to qualitative research. In *Qualitative research in practice: Examples for discussion and analysis* (pp. 3-17). San Francisco, CA: Jossey-Bass.
- Nauta, M. M., & Kokaly, M. L. (2001). Assessing role model influences on students' academic and vocational desires. *Journal of Career Assessment*, 9, 81-99.
- Norman, P., Bennett, P., Smith, C., & Murphy, S. (1997). Health locus of control and leisure-time exercise. *Personality and individual differences*, 23(5), 769-774.
- Oeppen, J., & Vaupel, J. W. (2002). Broken limits to life expectancy. *Science*, 296(5570), 1029-1031.
- Ory, M., Hoffman, M. K., Hawkins, M., Sanner, B., & Mockenhaupt, R. (2003). Challenging aging stereotypes: Strategies for creating a more active society. *American Journal of Preventive Medicine*, 25, 164-171.

- Patton, M. Q. (2002). *Qualitative Evaluation and Research Methods (3rd Ed.)*. London: Sage Publications Ltd.
- Peel, N. M., McClure, R. J., & Bartlett, H. P. (2005). Behavioral determinants of healthy aging. *American Journal of Preventive Medicine*, 28(3), 298-304.
- Pesce, C., & Audiffren, M. (2011). Does acute exercise switch off switch costs? A study with younger and older athletes. *Journal of Sport & Exercise Psychology*, 33(5), 609-626.
- Pfister, G. (2012). It is never too late to win – sporting activities and performances of ageing women. *Sport in Society: Cultures, Commerce, Media, Politics*, 15, 369-384.
- Phoenix, C., & Sparkes, A. (2009). Being Fred: Big stories, small stories and the accomplishment of a positive aging identity. *Qualitative Research*, 9(2), 219–236.
- Pike, E. (2011). The Active Aging agenda: Old folk devils and a new moral panic. *Sociology of Sport Journal*, 28, 209-225.
- Reed, C. E., & Cox, R. H. (2007). Motives and regulatory style underlying senior athletes' participation in sport. *Journal of Sport Behavior*, 30(3), 307-329.
- Reichstadt, J., Sengupta, G., Depp, C. A., Palinkas, L. A., & Jeste, D. V. (2010). Older adults' perspectives on successful aging: Qualitative interviews. *The American Journal of Geriatric Psychiatry*, 18(7), 567–775.
- Richardson, L. (1998). Writing: a method of inquiry. In N.K. Denzin & Y.S. Lincoln (eds.) *Collecting and interpreting qualitative materials* (1<sup>st</sup> ed., Vol. 3), Thousand Oaks, CA: Sage Publications, pp. 345-371.
- Roper, E. A., Molnar, D. J., & Wisberg, C. A. (2003). No “old fool”: 88 years old and still running. *Journal of Aging and Physical Activity*, 11(3), 370-387.
- Rotella, R. J., & Bunker, L. K. (1978). Locus of control and achievement motivation in the active aged (65 years and over). *Perceptual Motor Skills*, 46(3), 1043-1046.
- Rowe, J. W., & Kahn, R. L. (1987). Human Aging: Usual and successful. *Science*, 237(4811), 143–149.
- Rowe, J. W., & Kahn, R. L. (1997). Successful aging. *The Gerontologist*, 37, 433–440.
- Rubinstein, R. L., & de Medeiros, K. (2015). “Successful aging,” Gerontological theory and neoliberalism: A qualitative critique.” *The Gerontologist* 55(1): 34–42.
- Shaw, S. M. (2006). Resistance. In C. Rojek, S. M. Shaw & A. J. Veal (Eds.), *A Handbook of Leisure Studies* (pp. 533-545). New York: Palgrave, Macmillan.
- Sparkes, A.C. & Smith, B. (2014) *Qualitative research methods in sport, exercise and health: From process to product*. Routledge, London.
- Spiriduso, W. W., Francis, K. L., & MacRae, P. G. (2005). *Physical dimensions of aging*

- (2nd ed.). Champaign, IL: Human Kinetics.
- Swaminathan, R. & Mulvihill, T.M. (2017). *Critical approaches to questions in qualitative research*. New York: Routledge.
- Tate, R. B., Leedine, L., & Cuddy, T. E. (2003). Definition of successful aging by elderly Canadian males: The Manitoba follow-up study. *The Gerontologist*, 43, 735–744.
- Tesch, R. (1990). *Qualitative Research Analysis Types and Software Tools*. New York: Falmer Press.
- United Nations, Department of Economics and Social Affairs/Population Division (2015). World population prospects: The 2015 revision, volume II: Demographic profiles. Retrieved from: [http://esa.un.org/unpd/wpp/Publications/Files/WPP2015\\_Volume-II-Demographic-Profiles.pdf](http://esa.un.org/unpd/wpp/Publications/Files/WPP2015_Volume-II-Demographic-Profiles.pdf)
- Vertinsky, P. (1995). Stereotypes of aging women and exercise: A historical perspective. *Journal of Aging and Physical Activity*, 3, 223–237.
- Vopat, B. G., Klinge, S. A., McClure, P. K., & Fadale, P. D. (2014). The effects of fitness on the aging process. *Journal of the American Academy of Orthopaedic Surgeons*, 22(9), 576-585.
- Warburton, J., & Peel, N. M. (2008). Volunteering as a productive ageing activity: the association with fall-related hip fracture in later life. *European Journal of Ageing*, 5(2), 129-136.
- Wearing, B. (1995). Leisure and resistance in an ageing society. *Leisure Studies*, 14(4), 263-279.
- Weir, P., Baker, J., & Horton, S. (2010). The emergence of masters sport: Participatory trends and historical developments. In J. Baker, S. Horton, & P. Weir (Eds.), *The Masters athlete: Understanding the role of sport and exercise in optimizing aging* (pp. 7-14). New York, NY: Routledge.
- Williams, J. (2005). *Understanding poststructuralism*. Durham: Acumen Publishing.
- World Health Organization. (2016, May 19). World Life Expectancy at Birth. Retrieved from: [http://gamapserver.who.int/mapLibrary/Files/Maps/Global\\_LifeExpectancy\\_bothsexes\\_2015.png](http://gamapserver.who.int/mapLibrary/Files/Maps/Global_LifeExpectancy_bothsexes_2015.png)
- World Health Organization (2002) Active Aging: A Policy Framework. Geneva, Switzerland.
- Wroblewski, A. P., Amati, F., Smiley, M. A., Goodpaster, B., & Wright, V. (2011). Chronic exercise preserves lean muscle mass in masters athletes. *The Physician and Sportsmedicine*, 39(3), 172-178.

## Tables

Table 1

*Themes, Categories, and Example Quotations*

Theme	Category	Example Quotation (Meaning Unit)
Multi-faceted Benefits	Social	I really enjoy (competing in sports) but also because it has become my social life
	Psychological	You see yourself, not just the mother, the wife, the teacher but an athlete. It adds that extra dimension to your self-concept.
	Physical	The health reasons, my bone density is that of a 50 year old.
Overcoming Barriers	Dealing with disease, pain, and injury	I know I'm going to heal. I've healed every time. Swimming actually makes me feel good. When I had arthritis really bad, the first five minutes of swimming was very painful. After that it felt good, and the pain would go away
	Financial	I know some people that couldn't afford to go and it's a big problem getting all your money together.
	Combatting gender and age 'norms'	I think most adults feel that they are not capable. 'No, I can't do that, I'm 70 years old. I can't take a yoga class, I'm 70 years old.'
Social Roles	Role modelling	I think we can encourage senior men and women to come out and take a risk, take a chance, try it, see if you can do it.
	Evangelical about exercise	We say "rest rust." When you rest, you get rusty. So, don't rest because then you get rusty. In order not to get rusty you have to do sport.