Conclusion

The aftermath of the 2000 U.S. election demonstrates how negative assumptions about old people collapse under scrutiny. As it became clear that absolutely nothing was clear about the election results in Florida, blame on old people began. Reporters explained that Palm Beach has a disproportionately large elderly population who must have been confused by the butterfly ballot. For example, a Seattle TV station (K5) focused a human-interest spot on old people to discover whether they would be able discern how to vote for Gore rather than Buchanan. And the elderly became the butt of jokes: A Jay Leno skit depicted an old man with a flowery shirt counting votes very slowly. When Leno talked to him, he got confused and began to count again. As was the case with the (mostly) Canadian ice storm, immediately after the American election, old people’s supposed confusion represented what was in fact a much larger phenomenon. That is, it was not only the elderly who could not manage the ballots. A university professor in South Carolina told me of her own troubles with a punch ballot similar to the much-discussed butterfly design. She punched holes in what she thought was the right way, but then she realized that the punches did not hit the perforated holes. She tried to punch again and just caused more random holes. Her request for a second ballot was grudgingly granted, and she was able to make her vote properly (Westphal, personal interview, November 15, 2000). Her experience is no doubt that of many nonelderly, educated Americans who also found the ballot confusing.

The intense irony of the Palm Beach situation came to light days after the furor hit the media. A reportedly distraught supervisor of elections, Theresa LePore, explained that the apparently confusing design occurred because of attempts to take the needs of the elderly into account: “I was trying to make the print bigger so elderly people in Palm Beach County can read it,” said LePore (<http://www.salon.com/politics/feature/2000/11/07/results/index.html>). LePore and presumably
many others who tested the ballot to ensure its effectiveness chose to focus on one aspect of aging in lieu of another. That is, assumptions about physical infirmity took the place of understanding the experience of these individuals. Undoubtedly the elderly electors have experienced a number of ballots (at least fourteen federal elections have occurred in their lifetime) that consistently and by law ask voters to make an “x” to the right of the name of the candidate they choose. Presenting them with such a ballot yet again would doubtless have been less confusing than the misguided yet presumably well-intentioned attempt to take possible new needs into account.

The automatic blame placing and negative thinking that accompanies media coverage of events such as the ice storm and the American election come directly from negative connotations of the adjective old. I seek to alter the interpretive meaning of that adjective in connection with people. Constructive literary and filmic depictions of the elderly offer counterconnotations of old. My involvement with fiction and film, centered on late life, challenges how those stages of life resound culturally. I hope that this study continues and encourages many such reinterpretations so that old does not have to denote solely incapacity, frailty, decline, death, or dependence.

As I mention briefly in chapter 2, the American translation of Simone de Beauvoir’s La vieillesse differs in title from the Canadian/British version, even though the rest of the translation is identical. Where Americans encounter The Coming of Age, Canadians and Britons find Old Age. The euphemistic choice by U.S. distributors fascinates me in its evasion. Implying both a passage into adulthood and a distance, as though people are immune to age until a certain point, The Coming of Age appeals to an audience who can remain in denial. Because of my goal to change the interpretive meaning of typical signs of old age, such as wrinkles, institutional care, and continual retrospective narration, I have tried to avoid euphemism in my study. It is my hope along with Barbara Frey Waxman that people will cease to invest in the binary opposition between youth and old age. The two main descriptive terms I choose are old age and late life. Old age is a blanket term meant to encompass many stages of life. It is discernible only in relation to others, and it is realizable only in a complex engagement with physical and social factors. Late life is meant as a relative term. I recognize that late might imply an impending mortality, but it also accurately captures where people ages seventy and above, the objects of my study, are located in their progress along Waxman’s age continuum. If that implication is problematic, the problem only supports my work as a whole: Progress along an age continuum can be as positive as it is thought to be negative.
I have tried to emphasize, through an interdisciplinary lens, how different modes of talking about age can shift the meaning of old. My analysis of the CBC ice storm coverage exposes how, to date, old age represents cultural vulnerability at times when a scapegoat is needed. In *To Live in the Center of the Moment: Literary Autobiographies of Aging*, Waxman explains, “It is an axiom among literary critics and theorists that a reader’s response to a text reveals as much about that reader—family background, education, values, life experiences, membership in various communities, personal needs, and the times in which she or he is living—as it does about the text” (1997, 4). Likewise, de Beauvoir claims that the way in which a culture treats old people says more about the culture than it does about old age.

Many of the texts I write about are new or concentrate on topics that make critics too uncomfortably self-aware. As a result, much of this narrative fiction has not received serious scholarly attention until now, and what scholarly attention has been directed toward these narratives for the most part fails to satisfy. The diminished attention literary critics pay to age as a category of analysis reveals much about the field. A denial of aging pervades academic disciplines to the extent that even fields that have to work hard to avoid analyzing old age, such as literary studies, manage to evade or denigrate it, as evidenced by the majority of *The Stone Angel* criticism. By analyzing contemporary fiction and film, I hope I have opened up the possibilities inherent within both narrativity and old age. Narrative fiction can encourage a reimagining of social problems, such as ubiquitous negative conceptions of late life. Old age can offer many previously absent boons, such as emotional freedom, intense intergenerational relationships, and the more obvious impressive cumulative knowledge. It is my hope that the adjective *old* can evoke cultural specificity, wonder, awe, excitement, and, most important of all, potential.

I have focused here on social possibilities available to old women at a point when they can no longer manage to live alone. That dilemma forces an evaluation of crucial assumptions about aging, family responsibility, and interpersonal dependence. Where an elderly relative and/or one’s aging self should live is possibly the most pressing and widely relevant North American concern with regard to age. I think it also taps into many people’s worst fears. The idea that a person may become dependent threatens whatever stability and boundaries one has set up in one’s life. The fear that we might be called upon to take in our mother/mother-in-law or place her in an institution pervades our thinking about age. The horror that we might become dependent in other people’s eyes to the extent that we may need to live with our offspring or in an institution causes us to defer old age until it is no longer avoidable. For this reason I chose to work from within three choices at that pivotal moment and to unpack the implications of each.
Other focuses would provide especially rich examinations of literary depictions of old age. A study of aging sexuality could be particularly fruitful. A comparative examination of national literatures of aging would comment potently on the cultural specificity of the construction of age. A study with a focus on masculinity and age in fiction and film would complement the work I contribute to here. Explorations of poetic works about aging could amplify both the means of constructing age and the structures that define genre production. An engagement with personal narratives would offer a deep evocation of what it means to live as an old person.

I unquestionably and unapologetically privilege narrative in this study. However, my work will gain strength only in a dialogue with a series of studies in other disciplines. There has to be more than one way to combat not aging but ageism. Though I have been especially critical of medical assumptions and practices throughout, geriatric medical teams as they are conceived in some North American facilities present a model for the type of academic work I think needs to continue on aging. The University of Western Ontario’s Western Centre for Continuing Studies’ annual conference “Directions in Geriatric Medicine” states that “recognizing the interdisciplinary nature of geriatric care, streams of study are designed for physicians, nurses, therapists, nutritionists, social workers, and discharge planners, as well as people serving in primarily administrative functions” (<http://www.uwo.ca/cstudies/gerimed/>, no longer available). Under the heading “Philosophy,” the University of Sherbrooke Geriatric University Institute (Quebec) explains its commitment to interdisciplinary teams: “Interdisciplinarity is defined by a regrouping of many caregivers, each having a specific training, competence and expertise, who work together with the beneficiary, respecting appropriate values in order to arrive at a comprehensive, common and unified understanding of the situation and to a concerted intervention within a complementary sharing of work” (<http://www.iugs.ca/missionang.htm>). Interdisciplinary teams prevail in Canadian geriatric medical institutes and serve as a model for gerontological study. The disciplines currently working together within hospitals to care for the elderly, though, do not typically, if ever, include humanities approaches. For genuine, far-reaching benefits of multidisciplinary study, a dialogue among a wider range of disciplines, by no means an easy undertaking, must take place.

Conclusion